

The figures of the year under review are similar to those of the year before, and show the extent of the problem awaiting solution. According to Table III, in 1922 we admitted 52 persons aged between seventy and eighty, 21 between eighty and ninety, and 2 between ninety and a hundred. They contributed 9 per cent. of the admissions of known age. I repeat that such admissions largely represent persons who could be provided for in comfort less expensively than in the infirmary divisions of mental hospitals; and should be, if for no other reason than to protect our legitimate sick from the depressing environment of decay. It was necessary to get some approximate data to ascertain the size of any special institution or division of an institution needed to accommodate the senile cases referred to, and the Director-General of Health circularized the Hospital Boards, and kindly supplied me with the figures. Some Boards did not favour the proposal, preferring to look after their own cases, because they could be kept in their Old People's Homes for less than in a mental hospital. That is exactly our contention, and hence our suggestion that if such persons are to be sent to us, as heretofore, by Boards who cannot arrange to have them looked after in their own Old People's Homes, the time seemed ripe for us to consider separate provision for such cases at one or other of the mental hospitals, where they would be provided for simply and comfortably at a figure considerably below our average cost. Many Boards favoured the proposal, with a proviso that they should not be charged the cost of maintenance, and that the whole charge should be borne by the State, whatever Department of State undertook the work. The effect of this would be practically an undertaking by the State to provide all the cost, instead of a part as at present, of maintaining the aged poor. The difference between persons undergoing senile decay, with its accompanying dementia, and the other inmates of an Old People's Home is merely a matter of time, depending on whether the other inmates will live long enough. When mental infirmity goes on *pari passu* with natural physical deterioration, we contend that, with few exceptions, such patients can be managed in a properly equipped Old People's Home, a contention which some of the replies support. When in that Home the State is responsible for a moiety, and not the whole cost of maintenance. If such an inmate were sent from one Old People's Home to another, where similar cases are nursed and attended to properly, the State would continue to pay part cost only, but if the same inmate in the same condition were sent to a mental hospital because too troublesome in the particular Old People's Home, why should the State be expected, as a matter of course, to pay his entire cost?

Last year I quoted Dr. Macgregor writing as far back as 1895:—

“Our peculiar system of local government has the effect of crowding into our asylums . . . an unusually large number of aged people suffering from senile decay—people who elsewhere find refuge in workhouses and other similar institutions. In fact, the proportion depends on the issue in each case of a struggle between the local bodies, who are anxious to relieve the local rates, and the General Government officers, who try to defend the consolidated revenue.”

In Great Britain a proportion only of the cost of the maintenance of the insane is paid by the General Government; the remainder is contributed locally, which accounts for the local administration, similar to our Hospital Boards, representing the ratepayers. Under that system, persons labouring under ordinary physiological decay of old age with dementia were not sent to asylums until the Government raised its proportional contribution for the insane poor, and then it became apparent that numbers were being certified insane and transferred from refuges for the aged poor. The return, above alluded to, from the Boards is to the effect that about 40 male and 25 female senile dementeds were resident in Old People's Homes, a total considerably less than those resident in mental hospitals. Also, that the same figures represented the estimated annual increment, which more or less roughly corresponds with our own annual admission of patients answering the description. I suggested last year that if the Boards cared to make terms with us for the maintenance of such cases, we would be willing to look after them separately from other patients. Under such circumstances, the Boards being responsible for spending the ratepayers' money, would appoint visitors to see that they were getting their money's worth. But, as the general contention seems to be that the consolidated revenue should not provide a part only, but the whole expenditure, I do not feel justified, at this juncture, in asking you, sir, to support a sum being placed on the estimates for the purpose.

Hereunder is a return of the patients in State institutions on the register, as distributed on the 16th June, 1923, and classified under the Act, showing the number on leave and those resident at that date, together with the accommodation available and the number of wards into which it is divided.

Mental Hospital.	Patients on Register on 16th June, 1923, as classified.														Total.	Patients on 16th June, 1923.				Accommodation on 16th June, 1923.			
	Class I, Unsound Mind.		Class II, Mentally Infirm.		Class III, Idiots.		Class IV, Imbeciles.		Class V, Feeble-minded.		Class VI, Epileptics.		Absent on Probation.			Resident in Institution.		Number of Wards.		Bedrooms and Dormitories for			
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.		M.	F.	M.	F.	M.	F.		
Auckland	302	242	158	52	11	6	99	66	7	31	63	38	640	435	11	9	629	426	9	8	629	401	
Christchurch .. .	240	306	36	31	8	6	39	44	21	9	35	45	379	441	10	10	369	431	7	7	385	448	
Dunedin (Seacliff and Waitati)	434	317	47	36	13	5	51	36	40	37	55	44	640	475	10	11	630	464	11	8	537	456	
Hokitika	126	41	33	14	..	2	2	4	2	1	8	3	171	65	1	..	170	65	3	3	156	88	
Nelson and Stoke ..	33	31	79	45	..	1	44	17	5	5	18	8	179	107	1	..	178	107	3	4	198	111	
Porirua	539	387	14	14	3	5	22	32	17	12	54	47	649	497	13	27	636	470	8	7	590	403	
Tokanui	71	49	41	27	27	16	16	1	4	3	159	96	159	93	3	2	172	100	
Totals	1,745	1,373	408	219	35	25	284	215	108	96	237	188	2,817	2,116	46	57	2,771	2,059	44	39	2,667	2,007	