On hearing from Wellington about the Department's proposal for the establishment of the out-patient clinics, the Christchurch Hospital Board wrote expressing its desire to fall in with the suggestion. The following extract from the report of Dr. McKillop (Medical Superintendent of the Christchurch Mental Hospital) speaks for itself: "The provision of an 'out-patient clinic for nervous affections' at the General Hospital has given greatly increased facilities for the early treatment of nervous and mental disorders."

The Hospital Boards in the other leading centres received the proposals favourably, and all the out-patient clinics are doing good work; but these clinics cannot effect satisfactorily what is aimed at until the following further requirements (2, 3, and 4) have been fully established, as they will be for the most part, and ought to be completely, before the new year.

2. *The safeguarding of persons alleged to be of unsound mind from the indignity, distress, and humiliation of being treated as delinquents or criminals,* and lodged in prison pending decision as to their sanity or insanity: further, in case of committal to a mental hospital, the ensuring of proper and humane lodgment, care, and treatment of the patient until taken charge of by the mental hospital authorities.

In order to facilitate the provision and equipment of three or four rooms in each of the four main centres, the Government voted, last year, £500 for each of the General Hospitals concerned; but, unfortunately, no adequate hospital accommodation has yet been made available for use instead of police quarters; and, so long as this utterly wrong last-remaining link of association connecting insanity and criminality remains, all measures making for early recognition and prompt suitable treatment of incipient insanity will fail to win complete public confidence, and will prove more or less ineffective. No effort will be spared to bring about the necessary provisions in this direction without further delay.

3. *The provision of private-entry lodges for preliminary examination, away from the main mental hospitals of all new arrivals,* so as to prevent their coming in sight of the institution or the inmates, unless it has been ascertained by immediate careful medical examination that the patient is at the moment unsuitable for curative treatment at a seaside or other sanatorium, or at some special cottage or small villa on the main estate, specially located and built with a view to privacy.

Four attractive, homelike cottages for this special purpose (one for each of the four main mental hospitals) have been authorized. Three of these are under construction, and all will be completed within the year.

4. *Homelike sanatoria within the estate.* In addition to such residential cottages or small villas as may now exist on the main mental hospital estates, it is intended to erect simple, private, comfortable, homelike, and attractive small residences with full provisions for privacy, and capable of accommodating not more than a dozen patients each. These have been designed on a sanatorium basis, and will be located, wherever possible, at least several miles from the parent institution, so as to avoid any so-called "asylum association," and suggestive rather of a holiday resort, sanatorium, or convalescent home—not only in location, design, and structure, but also in surroundings and accessories, such as walks, plantations, and gardens, and, if bathing and boating be possible, the provision of suitable sheds, &c.

Four such sanatoria (one as an accessory to each main centre) have been authorized, and three are already under construction. All will be completed within the year, at a total cost of about £18,000, apart from furnishing and other equipment.

It need scarcely be pointed out how much each of the provisions described under sections 2, 3, and 4 will conduce, when completed, to the establishment of public confidence, and to increasing use of the "out-patient clinics for nervous affections" held weekly in Auckland, Wellington, Christchurch, and Dunedin. Full provisions in the same direction will be extended to the other mental hospitals as soon as the necessary arrangements can be made.

Summary of Advantages of the Weekly Out-patient Clinic to the Patients and their Friends, and to their Professional Advisers.

It may be pointed out that one of the most important advantages of the clinic to the public is the opportunity afforded of learning authoritatively at first hand—

(*a.*) What kind of quarters and treatment happen to be available at the moment in the mental hospitals:

(*b.*) What the doctors may feel it desirable to communicate in the particular case to the patient, or to relations or friends—*e.g.*, as to diagnosis, prospects of improvement or recovery, and the pros and cons of accommodation and care outside an institution, compared with the quarters and treatment immediately available in one of the mental hospitals, local or elsewhere, public or private:

(*c.*) Frank advice as to the best course to pursue, taking everything into account, and giving precedence to the steps likely to afford the patient the best chance of recovery, rather than subordinating this to mere immediate saving of expense, or the desire of relations to prevent any member of the family becoming an inmate of a mental hospital, even as a voluntary boarder, lest this should be held to reflect on the family stability.

All doctors in attendance at the clinics will undoubtedly appreciate (especially when the whole scheme is in full working-order) the fact of being able to assure incipient or border-line patients with perfect confidence that they need have no anxiety as to the possibility of being confronted with any