

However, as the public is inclined to be impatient, and to demand instant action on the lines indicated in the report of the Committee on Sexual Offenders, I think it only right to state (as a member of the Committee in question) that we all realized the extreme desirability of competent personal investigation (at Home, abroad, and in America), so as to find out on the spot what had been the history and the actual practical results of laws made and carried into effect (especially in some of the American States) in the case of sexual offenders and degenerates of either sex—from the authorizing of compulsory segregation to sterilization. In the voluminous reports and other documents and books obtained from America by the Committee it was shown that some of the more active and enterprising States which had confidently made drastic laws had been obliged to repeal them for various reasons.

Most of the American authorities appeared to the Committee to have been losing their primary faith of late years in the advisability and practicability of extensively enforcing extreme measures—at least, until more knowledge on the subject was available.

The most authoritative English opinion was found to be generally in the same direction; but in New Zealand, on the other hand, popular opinion has rather inclined to the view that compulsory segregation and sterilization would prove a simple and beneficent panacea, and would practically wipe out in a few generations most forms of degeneracy, insanity, and criminality, the only steps necessary being the passing of a simple Act of Parliament, and the appointment, with full powers, of a special Court, presided over by a competent psychiatrist and a capable Judge!

The English tendency in all such matters has always been extremely cautious and conservative—probably too conservative—but it should be borne in mind that hasty legislation, authorizing compulsory mutilation or deprivation of liberty, without ample safeguards and clear warranty, would inevitably discredit and set back desirable and desired reforms, as has already occurred to some extent elsewhere.

Granted sufficient time for a competent Committee to be appointed to consider with Dr. Gray the local evidence which came before the previous Committee, together with the reports they received from outside; and granted also ample time and opportunity to reconsider the whole situation with Dr. Gray, in the light of his direct personal knowledge of the subject, to which so much has been added during the last year—granted all these advantages, the New Zealand Government would, I am confident, be in a far better position to deal satisfactorily with these profoundly difficult and almost insoluble problems than any other country in the world. This would be the natural result of wisely delaying definite action until fully informed and soundly and authoritatively advised.

I trust that this broad review of matters (with which you, as the Minister of the Department, are for the most part already quite familiar) will suffice to convey to your colleagues and to the whole community a fair idea of how Mental Hospital matters now stand; and also to give them some idea regarding the future prospects of the service—as concern the patients and their friends on the one hand, and the Mental Hospital staffs on the other.

As I shall presently be retiring from the Mental Hospital service of the Dominion, at the end of forty years from the time when I entered on my duties under the Department, I may say that it will be an unqualified satisfaction to myself that I shall hand over to a strong, straight, level-headed, and highly-qualified professional colleague in the prime of life, and one who, in spite of a full understanding of the complex problems and difficulties which lie ahead of him, is not daunted by them. Dr. Gray's four years' initial hospital training and experience at Home, supplemented by sixteen years of active, unremitting, and devoted work in New Zealand—and his recent investigations and experiences in America, at Home, and abroad—make him the ideal man to direct, administer, and control the Mental Hospital service of the Dominion. I trust that it may not be considered out of place for me to suggest, as a parting piece of advice, that, when appointed, Dr. Gray should be given the status and authority implied in the title Director-General—not merely Inspector-General, as heretofore. The extent and responsibility of the complex function of further evolving and completing the organization and successfully co-ordinating the work of a concern with a staff of between 1,150 and 1,200 persons, and about 5,500 patients, living in seven widely-separated main establishments (nine or ten in the near future, to say nothing of separate sub-branches) scattered over the face of a country nearly one thousand miles long, needs for its efficient management, a competent unified scheme of authoritative direction, administration, and control, so as to ensure to the Government that the Mental Hospitals Department of the Dominion shall be run, not only on the best and most humane professional lines, but also that the mere business aspect of a Department which already involves directly and indirectly an annual expenditure equivalent to over half a million sterling (£500,000), to say nothing of estates, buildings, and equipment, having a present value approximating two and a half millions sterling (£2,500,000) shall not be lost sight of.

In this connection I may point to the paramount practical importance of competent properly co-ordinated direction, supervision, and organization of farms and farming operations. Development along these lines should enable each of the institutions to provide full and varied supplies of the best fruit, vegetables, cereals, &c., and thus meet our main special dietetic requirement (referred to in Miss d'Auvergne's report)—namely, to feed mental patients principally on relatively bulky, attractive, and satisfying fresh fruit and vegetables, demanding proper mastication—and thus reduce the proportion of over-stimulating and exciting foodstuffs rich in meat-proteins. Indeed, there is a special reason for lessening the proportion of meat in Mental Hospitals' dietaries, on account of the tendency of a high-protein to incite and inflame sexual manifestations and lessen the power of control in general. This is the fundamental ground for the common practice of giving no meat to epileptics, and either cutting it out, or greatly reducing the meat allowance in the case of all acutely maniacal or specially excitable patients.