Probation.

I note with satisfaction that the Medical Superintendents are making more frequent use of section 80 of the Mental Defectives Act, and that at the end of the year 332 patients were residing outside the institutions in the care of relatives and guardians.

In the case of patients labouring under the more incurable forms of mental disorder, probation is in effect a holiday spent away from the institution during a relatively well period, but when applied to recent and recoverable cases, it is generally used as a precursor to discharge.

The probationary system enables the period of actual residence within the institution to be considerably curtailed, and affords to the medical men and the relatives concerned an opportunity of observing the reaction of the patient to his environment, and of making any adjustments which may be found necessary for the maintenance of his mental health.

In one respect I think that the benefits of probation could be enhanced. When a patient leaves an institution on probation the pension which his wife receives under the Widows' Pension Act, 1911, immediately ceases, and until work has been secured the financial stress and attendant worry is increased at the very time when it should be avoided.

In England there is legislative provision for the granting of a small monetary allowance to patients on probation so as to free them from pecuniary worries during the difficult period of reabsorption into the general community, and our experience in New Zealand points to the desirability in some cases of such aid being made available.

I think that this could be best accomplished by continuing the payment of pension to the wife for, say, one month after the date on which the patient leaves the institution, subject to certification by the medical superintendent as to the desirability of such a course in any particular case.

Accommodation.

In spite of an unexpected decrease in the admission-rate, a high discharge-rate and the granting of probation to an unusually large number of patients, the institutions are still suffering from the serious disadvantages associated with overcrowding.

Since the end of the period covered by this report, however, welcome relief has been afforded to Porirua by the transfer of one hundred female patients to the new villas at Tokanui, and I am glad to record that approval has been given for additional buildings at Kingseat, Waitati, Hokitika, and Christchurch.

As will be seen from the following summary of expenditure, a capital outlay of £152,000 was incurred last year upon buildings and alterations, but it must be remembered that many of our kitchens, laundries, and other administrative units were designed for a much less number than they are now called upon to serve, and a good deal of expenditure has been involved in rendering these departments adequate for present-day needs.

We have still great need for additional accommodation for patients, and I regret that, in spite of the present financial depression, I feel bound to ask for generous provision for this purpose.

Alterations, Improvements, and Additions.

Our capital expenditure for alterations, improvements, and additions during the year amounted to £152,096, and the following summary shows where the money has been expended, as well as new works contemplated and in progress:—

Auckland, including Kingseat (£2,279).

New farm buildings, including piggeries, have been completed at Kingseat, and an addition has been made to the male dining-room to enable a larger number of pioneer patients to take part in the development of the estate. Plans have been approved for two villas to accommodate one hundred male patients, and tenders will be called shortly.

The Medical Superintendent's residence at Auckland is far too large for its present purpose, and it is proposed to convert it into a residential clinic with accommodation for about twenty patients.

Plans have been prepared for a new residence for the Medical Superintendent.

Tokanui (£32,405).

Three new villas to accommodate 150 patients have been completed, and have served to diminish the overcrowding on the female side of Porirua.

A new nurses' home with sixty bedrooms is in course of erection.

Porirua (£9,028).

A good deal of subdivision of large dormitories has been carried out, and the old nurses' quarters in the main building have been converted into small dormitories for female patients.

The present main hall, kitchen, and stores block is quite inadequate for the large number of patients in residence, and plans are in preparation for considerable alterations.

Nelson, with Stoke Farm (£33,250).

Three new villas are nearing completion at Stoke Farm, and a new bakehouse-stores block has been built.