

for, and is needed to bring about the better management of the whole problem of insanity.

#### THE HOSPITALISATION OF THE ASYLUMS.

To physicians and nurses who are brought into close relations with persons suffering from mental disease, it is perfectly plain that for their proper treatment much more is needed than simply provision for humane care. They see the cases in quite a different light than those who think only of the insane as a class, or in terms of the prevailing ignorance. Asylum physicians have, therefore, always striven to emphasise the medical character of the cases, and the need of medical and nursing supervision and care. As a result of their efforts the asylums have gradually developed more and more along hospital lines. In token of the soundness of this tendency, during the past ten or fifteen years, the official name of nearly all the institutions in the country has been changed from asylum to hospital. There has, too, been a change in much more than the name. The suppressive and more neglectful methods of the past are giving way to more rational and active measures of treatment. Classification with a view to specialisation and concentration in the treatment of the different conditions from which the patients suffer is taking the place of more haphazard methods.

For the reception of the new cases, separate buildings are being provided, where liberal arrangements can be made for active medical and nursing procedures for those who need them. For those suffering from acute physical diseases and surgical conditions special hospital provision is made. The buildings or wards used for this purpose are arranged and organised as general hospital wards. A well-equipped surgical operating room and all the appliances and facilities for thorough medical and nursing work are features of this service. Attending oculists and dentists, and a corps of consulting physicians and surgeons assist the resident medical staff in the management of conditions requiring knowledge and skill in the various specialities. For the infirm and feeble in mind and body from chronic disease, infirmaries are provided. Many of these cases are confined to bed, and many others are so enfeebled as to require attention and assistance in every detail of their lives. It is doubtful if in any other kind of public institutions, chronic bed cases receive as good care as they do in the best hospitals for the insane. Tuberculous patients, of whom there is a much larger proportion than in the general population, are segregated and, in many institutions, are cared for in buildings specially designed and equipped for the purpose. Special provision is also made for the

isolation of cases of acute infectious diseases which are not of infrequent occurrence in the institutions. Epileptics, for whom special dietary and precautionary measures are necessary; the restless and excitable who require skillful and tactful management, and the suicidal are other classes for whom special provision is made. The best administrative methods provide also for medical and nursing supervision in the care of all classes of patients in the institutions.

More definite classification has made possible and has necessitated more specialisation, and more efficient organisation to this end. For a number of years progress in hospitalisation of the asylums has been towards bringing to the treatment of the patients the diagnostic and therapeutic resources of modern medicine and surgery. This has done much to improve the physical treatment of the cases and to make available for systematic study and for teaching purposes the valuable resources of the institutions. At present the tendency is to focus attention more particularly on improving the methods of bringing about mental readjustment and restoration to normal activities, which is the special work that the hospitals for the insane may be expected to do better than it can be done elsewhere.

The hospitalisation of the asylums is a gradual process, and may be seen in every stage in the different institutions of the country. The highest development is to be found only in the very best, and in all there is room for improvement. It is hampered by the weight of traditional views and methods, by the lack of harmony between the needs and the provision made, and by the great accumulation of incurables. The purpose in view in bringing it to your attention is principally to give you some insight into the present condition and trend of asylum development as a field for nursing and nurse teaching.

#### THE TRAINING SCHOOLS FOR NURSES.

To the hospitalisation of the asylums nothing has contributed more than the establishment of the training schools for nurses. The two developments have gone hand in hand, the needs of the one being provided for by the other. This has been the case from the time the first attempt was made to establish a school, as may be learned from an extremely interesting article on "Nursing Reform for the Insane," read by Dr. Edward Cowles at the International Medical Congress in 1887. The schools in the institutions for the insane followed in the wake of the world-wide movement for better nursing of the sick, which was started in Eng-

[previous page](#)

[next page](#)