

**NO.75. SEVENTH ANNUAL  
REPORT OF THE STATE CHARITIES  
AID ASSOCIATION TO THE STATE  
COMMISSION IN LUNACY.  
NOVEMBER 1, 1899**

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OF THE

State Charities Aid Association

TO THE

State Commission in Lunacy.

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Seventh Annual Report of the State Charities Aid  
Association.

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## Seventh Annual Report of the State Charities Aid Association to the State Commission in Lunacy.

November 1, 1899.

### *To the State Commission in Lunacy:*

The State Charities Aid Association hereby submits its seventh annual report to the State Commission in Lunacy.

During the fall months of 1899 the Assistant Secretary of the Association visited all the State hospitals, with the exception of the Matteawan State Hospital for Insane Criminals.

The medical superintendents and other officers of the eleven State hospitals visited showed their usual courteous attention to the representative of the Association, and afforded her every opportunity to make a satisfactory inspection. We desire to express our appreciation of this kindness.

The number of insane persons in institutions in the State on October 1, 1899, was 23,023, distributed as follows:

Utica State Hospital .....	1,119
Willard State Hospital .....	2,253
Hudson River State Hospital .....	2,053
Middletown State Hospital .....	1,188
Buffalo State Hospital .....	1,812
Binghamton State Hospital.....	1,342
St. Lawrence State Hospital.....	1,480
Rochester State Hospital.....	554
Long Island State Hospital.....	3,735
Manhattan State Hospital.....	5,525
Gowanda State Hospital .....	313
Matteawan State Hospital.....	719
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Total in State hospitals.....	22,093
Total in private institutions.....	930
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Grand total .....	23,023
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This is an increase during the year ending September 30, 1899, of 637, as compared with an increase of 703 during the preceding year. The increase during the year in the number of patients in State hospitals is 562, as compared with 688 during the previous year.

Before taking up the State hospitals in their order we will make some observations that seem to relate to all.

#### Training Schools for Nurses.

No department of the State hospital service is more important than the nursing service, and we are heartily in favor of those measures which tend to raise the standards of the schools and to attract men and women of a higher grade of character and intelligence to the State hospital service. Uniform examinations and requirements for the pupils of the different schools are advantageous, and introduce a beneficial form of competition between hospitals.

The case of the great hospitals connected with New York city is, however, very different from that of the hospitals in other parts of the State, owing perhaps to the comparatively short time that has elapsed since they were included in the State hospital system, or for economic or other causes not yet fully known. Whatever may be the reason, comparatively few of the attendants of these hospitals at present enter the training schools. For those who do not intend to take the training school course, we would suggest that a more elementary course be devised, which would be of benefit alike to the employees and to the patients in their charge. Such a course would sustain the same relation to the training school that the "Course for Trained Attendants for the Sick" does to the curriculum of general hospital training schools. This would not and should not take the place of the higher education, for we would deprecate any lowering of the standards of the schools. But there is a need to be met to-day, a temporary need we hope, which might be met by a simple course of instruction for many of the attendants of these large State hospitals in and near New York city. We would ask the favorable consideration of this matter by the managers and superintendents of these hospitals.



#### Homes for Nurses.

Much progress has been made in recent years towards providing for nurses and other employees, accommodations apart from the wards for patients. A few State hospitals are already well equipped in this line, a few are practically without any such separate quarters for nurses, while the majority of the hospitals have homes for a part of the nurses and attendants, but leave the greater part still in the wards. Nurses' homes are desirable from every point of view. By providing places for rest and recreation where nurses and attendants can be out of sight and sound of their patients, and so be more completely refreshed than is possible when they are surrounded by reminders of their work, such homes make for the physical and moral health of the employees, and through them for the welfare of the patients under their care. Comfortable accommodations attract to a hospital a superior grade of employees, a condition of things which reacts favorably upon the patients.

We would urge the continuance and the extension of this work of building homes for nurses until every employee in the State hospital service is comfortably provided for.

#### Hospital Industries.

It is gratifying to note the increase in the number and variety of industries at the State hospitals and the gradual approach towards the large measure of self-support which has been regarded as one of the advantageous possibilities of the State hospital system. Another encouraging feature is the increasing interdependence of the different institutions. All efforts towards securing co-operation among the State hospitals and independence of the outside market seem to us commendable. Let each hospital be, so far as is practicable, self-dependent, and what it cannot provide for itself let it get so far as possible from other State hospitals, turning for what cannot advantageously be produced, first to the prisons, and finally to the open market. The pursuit of such a policy diminishes the opportunities for interference from outsiders who desire State hospital patronage, results in financial saving to the State, and benefits the insane

both through the superior quality of the articles supplied and the opportunities for healthful occupation in their production.

#### Outings for Patients.

The monotony of institutional life is not sufficiently appreciated. Medical superintendents have remarked upon the improvement in a patient's condition that often results from a transfer from one hospital to another, or from one building to another in the same institution. This is especially noticeable when patients are transferred to farm colonies of the hospital, where they have the advantage of a free, outdoor life as nearly as practicable like the life of normal country people. Would it not be possible to extend certain of these privileges to a greater number of the insane?

A report of a State hospital in one of the western states describes a plan by which parties of patients are sent to camp out in a small cottage on a piece of land some miles from the central hospital property. Ten patients at a time will take a week's vacation at the cottage, and during the summer months as many as 20 or 25 parties, including from 200 to 250 patients, can be given in this way a beneficial change of scene and life.

Some of the State hospitals in this State have taken steps in this direction. The Binghamton State Hospital, for instance, sends patients for short visits from "the hill," as the main buildings are called, to "the farm," where the colony cottages are situated. Other hospitals would appreciate opportunities for such treatment, but are not equipped for it, though in many cases it would be easy to secure the necessary land and buildings. For instance, the Rochester State Hospital might have its 140 acres of land supplemented by a lot on the shores of Lake Ontario, 12 miles away, where, if a suitable cottage were built, patients could enjoy vacations by turns all the year round. Many patients could be aroused and improved by such outings, and in some cases actual recoveries might result from experiments of this sort.

#### Special Diet.

Special diet seems to consist rather in the addition of certain articles to the regular diet than in different diet throughout. It would seem as if it might be possible, especially at hospitals where there is a separate kitchen for acute patients, to have a diet for such patients adapted particularly to their needs without reference to the regular hospital diet, which might, perhaps, be further simplified, if maintained only for chronic patients.

#### Clothing.

The clothing of the patients seems to be comfortable and fairly tasteful in appearance. We would advocate a more extensive use of night clothing. At most of the hospitals very few of the patients are provided with a change at night, most of them wearing the same underclothing at night which they wear during the day. There is thus no opportunity properly to air the clothing, and the arrangement seems an unhygienic one.

#### Emergency Fund.

The \$50 a month which each hospital is allowed to spend in case of emergency is of little importance. It is difficult to define what constitutes an emergency, and as it is usually possible to telephone or telegraph to Albany for advice on such occasions, the small amount allowed is seldom used. It happens frequently, however, that occasions arise which could hardly be regarded as emergencies when it would be very desirable for the hospitals to be able to spend small amounts of money at their discretion, with the obligation to report upon these expenditures afterwards. The estimate system, notwithstanding its many advantages, frequently ties the hands of the medical superintendents when the interests of the State would best be subserved by leaving them free. An intelligent and conscientious body of public servants such as the medical superintendents of the State hospitals, a body which can hardly be equalled for honesty, efficiency and devotion in any department of the civil service, can certainly be trusted with a few thousand dollars a year to be used at discretion and strictly accounted for. If such a fund were to take the