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## SECTION XXIV.

## PUBLIC BENEVOLENCE.

## § 1. Introductory.

1. **General.**—Charity and charitable effort in Australia may be classified under three headings, viz.:—(a) State; (b) public; (c) private. To the first belong all institutions wholly provided for by the State, such as the principal lunatic asylums in the various States, the Government hospitals in Western Australia, and the Government asylums for infirm in New South Wales. The second class comprises public institutions of two kinds, viz.:—(i.) Institutions partially subsidised by the State or State endowed, but receiving also private aid, and (ii.) those wholly dependent upon private aid. To the former division belong such institutions as the Melbourne and other large metropolitan hospitals. In the latter are included institutions established and endowed by individuals for the benefit of the needy generally. All charitable movements of a private or special character are included in the third group.

A more or less accurate statistical account is possible in classes (a) and (b), but in regard to (c) complete tabulation is, for obvious reasons, impossible. Moreover, public response to special appeals, and summary relief in kind, cannot be statistically recorded. Hospitals, orphanages, homes, benevolent asylums, etc., naturally attract the largest share of charitable aid. There are, nevertheless, numerous other and minor charities which mark the course and measure the amount of a considerable volume of private beneficence. In institutions which receive Government aid, management and finance are usually relegated to executive bodies, elected ordinarily on a democratic basis.

The distribution of wealth in the Australian Commonwealth, and the generally favourable conditions, as regards scope for the exercise of natural ability, operate to prevent the development of a permanent pauper class, and at the same time lessen in a dual way the burden of charity. This latter is brought about by the increase, on the one hand, of the number of people whose prosperity enables them to relieve the indigent and unfortunate, and by the reduction, on the other, of the number who need assistance. Enactments of State Legislatures have decreed short hours and a liberal holiday allowance for large numbers of persons engaged in industrial and other pursuits, and, even in occupations not covered by Act of Parliament, the general conditions of employment often provide a considerable amount of leisure. This, coupled with an equable climate, enables the community to spend much of its time in the open air, with resultant advantages to its physique and general health. No poor-rate is levied in Australia, and Government aid without return is required only for the aged and disabled. Moreover, although Old Age Pensions are paid by the Commonwealth, the payments are looked upon rather in the light of a citizen's right than as a charity. Reference to the Old Age Pensions will be found in § 3, Miscellaneous, chap. xxxiv.

To meet temporary conditions, or rather, what ought to be temporary conditions, various relief works have been started from time to time, in which the able-bodied who may be forced to seek official relief are required to make some return for the assistance afforded. In the past, attempts to relieve the unemployed have led to large expenditures, but at the present time the entire scheme of such relief is on an altogether more satisfactory footing.

In each of the States there are Government asylums for the care of the insane, and the condition of these unfortunates has been steadily ameliorated by the general advance in psychiatry.

Young children deprived of parental training and control are cared for and educated in "orphanages" and "industrial schools," and those who have been guilty of some specific offence, or who are beyond adequate parental control, are committed to "reformatories."

In common with other civilised communities, relief funds have from time to time been organised for famine-stricken territories (*e.g.*, China, India, etc.), or for places where plague, flood, fire, or earthquake has shewn the need of urgent relief. Statistical information in regard to this form of charity is not, however, available. It may be mentioned that the daily Press frequently accepts the duties of collectorship in charity appeals.

**2. Charity Reforms.**—The evident overlapping of charitable effort has on various occasions led to discussion regarding methods of collection and distribution of aid, and has, moreover, given rise to a desire for improved administration. In this connection, an important conference of representatives of charitable associations was held in Melbourne in September, 1907, with the object of systematically digesting the experiences of the committees of management of the various hospitals and kindred institutions. These obtain their revenue from State and municipal subsidies, from proceeds of concerts, entertainments, etc., from organised public collection, from private contributions and bequests, and from patients. Some of the institutions also have paid or honorary collectors. As a result of the investigations of this Conference, it was found (*a*) that institutions of a similar character were competing with each other; (*b*) that public aid was not effectively dispensed; (*c*) that public eleemosynary impulse was prejudiced by the circumstance that institutions primarily intended for the poor and needy were being utilised by people who could afford to pay for private relief, particularly in regard to medical or surgical treatment. As an outcome of the Conference, societies to prevent overlapping have been formed, resulting in improved economical collection and distribution of charitable aid.

Other proposed reforms aim at ascertaining the causes of poverty and crime, and finding the necessary palliative. Increased provision of better houses and workrooms and improved sanitation are advocated, together with more stringent legislative measures to enforce cleanliness and healthy modes of life. Further, Factories Legislation, Health Acts, etc., have enacted provisions for safeguarding dangerous machinery, and permitting only competent persons to be employed thereon.

**3. Difficulties of General Tabulation.**—Differences in the organisation of charities prevent uniform tabulation of statistics for all the States, but certain of the larger features of the statistics of benevolence have been combined for the whole Commonwealth. Combinations for the whole of Australia for the five years ended 1910 are given for hospitals, benevolent asylums, orphanages, and hospitals for the insane. Satisfactory tabulation for other charities is not yet possible. Where the combination has been for dissimilar periods the nearest years have been taken.

## § 2. The Larger Charities of Australia.

1. **Hospitals.**—Most of the State capitals have several large and well-equipped hospitals, and there is at least one in every important town. In large centres there are hospitals for consumptives, women, children, infectious diseases, incurables, etc. The number of hospitals in Australia, with the admissions, patients treated, deaths, and expenditure, is shewn in the following table. The "special" hospitals are included in the returns for 1906, but in subsequent years only general hospitals are tabulated, since the working of "special" institutions is not properly comparable with those which treat cases of all kinds. In 1909, the figures for assisted hospitals in Western Australia were included for the first time, not having been available for previous years.

### HOSPITALS IN THE COMMONWEALTH, 1906 to 1910.

Particulars.	1906.	1907.	1908.	1909.	1910.
Number of institutions ...	313	304	312	337	338
Number of beds ...	12,108	11,463	12,057	12,630	13,342
Admissions during year ...	99,308	98,031	107,292	112,102	119,091
Indoor patients treated ...	106,488	104,483	114,668	118,928	126,234
Deaths ...	7,627	8,005	8,560	8,814	8,946
Expenditure ...	£ 612,628	639,002	758,993	805,787	802,212

In addition to those admitted to the institutions there are large numbers of out-patients. The exact number of these cannot be given, but a rough estimate of distinct cases for 1910 places the total at about 280,000.

Fuller details of hospital statistics are given for 1910 in the table below, the States of the Commonwealth being shewn separately:—

### GENERAL HOSPITALS.—NUMBER, STAFFS, AND ACCOMMODATION OF HOSPITALS IN THE COMMONWEALTH, 1910.

Particulars.	N.S.W.	Victoria.	Q'land.	S.A.	W.A.	Tas.	C'wlth.
<b>Number of Hospitals—</b>							
Government ...	3	...	2	8	22	2	37
Other ...	135	48	73	6	28	11	301
<b>Total ...</b>	<b>138</b>	<b>48</b>	<b>75</b>	<b>14</b>	<b>50</b>	<b>13</b>	<b>338</b>
<b>Medical Staff—</b>							
Males ...	693	*	148	78	51	*	970†
Females ...	23	*	9	4	...	*	36†
<b>Total ...</b>	<b>716</b>	<b>*</b>	<b>157</b>	<b>82</b>	<b>51</b>	<b>*</b>	<b>1,006†</b>
<b>Nursing Staff &amp; Attendants—</b>							
Males ...	86	\$24	163	57	61	*	\$391†
Females ...	1,339	\$603	594	218	305	*	\$3,059†
<b>Total ...</b>	<b>1,425</b>	<b>\$1,769</b>	<b>757</b>	<b>275</b>	<b>366</b>	<b>*</b>	<b>\$4,592†</b>
<b>Accommodation—</b>							
Number of dormitories, etc.	874	441	480	104	151	111	2,161
Capacity in cubic feet	6,506,756	4,385,458	2,756,231	1,267,998	1,568,337	699,206	17,183,986
Number of beds ...	4,963	3,249	2,572	864	1,193	501	13,342
Cubic feet to each bed	1,311	1,350	1,072	1,468	2,611	1,396	1,288

\* Information not available. † Exclusive of Victoria and Tasmania. ‡ Exclusive of Tasmania.  
§ Inclusive, in Victoria, of 1142 paid staff: sexes not stated.

**GENERAL HOSPITALS.—PATIENTS TREATED IN HOSPITALS IN THE COMMON-WEALTH, 1910.**

Particulars.	N.S.W.	Vic.	Qld.	S.A.	W.A.	Tas.	C'wlth.
<b>Indoor Relief: Distinct Persons Treated—</b>							
Males ... ..	29,078	15,983	17,077	4,119	5,773	2,826	74,856
Females ... ..	24,469	11,102	7,773	3,109	2,649	2,276	51,378
<b>Total ... ..</b>	<b>53,547</b>	<b>27,085</b>	<b>24,850</b>	<b>7,228</b>	<b>8,422</b>	<b>5,102</b>	<b>126,234</b>
<b>Inmates at beginning of Year—</b>							
Males ... ..	1,583	1,325	963	308	350	173	4,702
Females ... ..	1,203	832	478	206	179	143	3,041
<b>Total ... ..</b>	<b>2,786</b>	<b>2,157</b>	<b>1,441</b>	<b>514</b>	<b>529</b>	<b>316</b>	<b>7,743</b>
<b>Admissions &amp; Re-admissions during Year—</b>							
Males ... ..	27,495	14,658	16,114	4,205	5,423	2,654	70,549
Females ... ..	23,266	10,270	7,295	3,108	2,470	2,133	48,542
<b>Total ... ..</b>	<b>50,761</b>	<b>24,928</b>	<b>23,409</b>	<b>7,313</b>	<b>7,893</b>	<b>4,787</b>	<b>119,091</b>
<b>Discharges—Recovered:</b>							
Males ... ..	19,571	12,434	14,571	2,465	2,837	2,409	54,287
Females ... ..	18,275	9,024	6,649	2,070	1,436	1,902	39,356
<b>Total ... ..</b>	<b>37,846</b>	<b>*21,458</b>	<b>*21,220</b>	<b>4,535</b>	<b>4,273</b>	<b>*4,311</b>	<b>93,643</b>
<b>Relieved:</b>							
Males ... ..	4,920	†	†	1,039	1,750	†	7,709
Females ... ..	3,201	†	†	640	688	†	4,529
<b>Total ... ..</b>	<b>8,121</b>	<b>†</b>	<b>†</b>	<b>1,679</b>	<b>2,438</b>	<b>†</b>	<b>12,238</b>
<b>Unrelieved:</b>							
Males ... ..	761	193	324	257	189	15	1,739
Females ... ..	581	120	163	164	138	35	1,201
<b>Total ... ..</b>	<b>1,342</b>	<b>313</b>	<b>487</b>	<b>421</b>	<b>327</b>	<b>50</b>	<b>2,940</b>
<b>Not stated:</b>							
Males ... ..	...	371	91	9	107	57	635
Females ... ..	...	223	25	4	40	41	333
<b>Total ... ..</b>	<b>...</b>	<b>594</b>	<b>116</b>	<b>13</b>	<b>147</b>	<b>98</b>	<b>968</b>
<b>Deaths—</b>							
Males ... ..	2,077	1,699	1,061	427	508	193	5,965
Females ... ..	1,145	839	442	218	188	149	2,981
<b>Total ... ..</b>	<b>3,222</b>	<b>2,538</b>	<b>1,503</b>	<b>645</b>	<b>696</b>	<b>342</b>	<b>8,946</b>
<b>Inmates at End of Year—</b>							
Males ... ..	1,749	1,286	1,030	316	382	156	4,919
Females ... ..	1,267	896	494	218	150	145	3,170
<b>Total ... ..</b>	<b>3,016</b>	<b>2,182</b>	<b>1,524</b>	<b>534</b>	<b>532</b>	<b>301</b>	<b>8,089</b>
<b>Average Daily Number Resident—</b>							
Males ... ..	1,767	§	§	354	378	162	§
Females ... ..	1,390	§	§	237	180	119	§
<b>Total ... ..</b>	<b>3,157</b>	<b>2,262</b>	<b>1,521</b>	<b>591</b>	<b>558</b>	<b>281</b>	<b>8,370</b>

\* Including relieved.    † Included in recovered.    ‡ Cases relieved are included in those recovered, in Victoria, Queensland, and Tasmania.    § Information not available.

The revenue and expenditure of the institutions were as follows:—

**GENERAL HOSPITALS.—REVENUE AND EXPENDITURE, 1910.**

Particulars.	N.S.W.	Vic.	Q'land.	S. Aust.	W.Aust.*	Tas.	C'wlth.
Revenue—	£	£	£	£	£	£	£
Fees of patients, etc. ...	45,281	17,657	17,102	5,432	13,400	9,516	108,388
Government grants ...	144,166	54,011	69,926	38,094	49,833	17,337	373,367
Other ...	120,665	101,672	62,937	11,318	21,877	2,950	321,419
Total ...	310,112	173,340	149,965	54,844	85,110	29,803	803,174
Expenditure—							
Salaries ...	105,793	136,737	58,761†	18,225	36,982	22,491	802,212
Maintenance ...	166,899	32,756	74,676	28,564	47,059	7,019	
Other, including buildings...	28,427		14,136	23,687			
Total ...	301,119	169,493	147,573	70,476	84,041	29,510	802,212

\* Exclusive of assisted hospitals. † Including rent.

**2. Hospitals for General and Special Cases.**—The tables here given refer to general hospitals. In addition there are hospitals for “specials,” (such as women's, children's, and infectious diseases hospitals), and institutions nearly allied to hospitals (such as consumptive sanatoria). In the first and second numbers of the Commonwealth Year Book, these were tabulated with general hospitals. Where the institutions carry on general hospital relief, they are still included with those establishments.

(i.) *New South Wales.* A feature of late years has been the establishment of hospitals in many country towns of growing importance. In 1898, there were 13 metropolitan and 97 country hospitals; in 1910 these had increased to 20 and 119. A Government hospital is established at Little Bay. There are four women's and one children's hospitals in the metropolis. Other leading institutions are the Thomas Walker Convalescent Hospital, Dental Hospital, Home for Incurables, Hospital for Infants and Asylum for Women and Children, Infants' Home, etc.

(ii.) *Victoria.* Special hospitals, not included in the above tabulation, comprise the Women's Hospital, with infirmary and midwifery departments, the Children's Hospital, the Hospital for Women and Children, two Consumptive Sanatoria (one a Government institution), Inebriates' Institute, Convalescent homes, etc.

(iii.) *Queensland.* There are four lying-in and two children's hospitals in Queensland, and a sanatorium; also two Lock hospitals, established under the provisions of the Contagious Diseases Act of 1868.

(iv.) *South Australia.* In connection with the leading general hospital in the metropolis, there is a consumptive home and infectious diseases block; there are also a children's hospital, two lying-in homes, sanatorium, convalescent home, home for incurables, etc.

(v.) *Western Australia.* The leading general hospitals are Government establishments. There is a lying-in establishment in connection with the metropolitan women's home. There are also homes for the dying and incurable, homes and rests for sailors, strangers, etc.

(vi.) *Tasmania.* Included in the Tasmanian general hospitals are two which pay particular regard to “special cases”; these are the hospital for contagious diseases

(a Government institution) and the convalescent home. Other important institutions of a general nature are the New Town charitable establishment, and the invalid dépôt.

**3. Benevolent and Destitute Asylums.**—A marked increase has taken place in the amount of aid bestowed upon the aged. Two elements, each of them independent of the growth of population, have influenced this increase. One is, that the general age of the community has advanced,—the large flow of immigration of fifty and sixty years ago having been mostly of persons in the prime of life; the other is the increased regard paid in all British communities to the well-being of the helpless. The result in Australia has been that numerous establishments have been founded for the housing and protection of such as are no longer able to care for themselves. The institutions are supported by Government and municipal aid, public subscriptions, charity performances, bequests, etc., and in many cases relatives of indigent and afflicted persons contribute to their maintenance.

The impossibility of an entirely satisfactory statistical tabulation in regard to all forms of charitable aid, is especially marked in the case of benevolent institutions, since the conditions under which they have been established in the different centres in the Commonwealth have caused divergence in their development and in the classes of cases treated by them. For example, in Western Australia the Home for Destitute Women includes a maternity ward, for which the statistics are not separately kept. Since the predominating function of the Institution is aid to the destitute, it has been included among benevolent asylums. In Victoria, nine of the hospitals are also Benevolent asylums, and they are included wholly under the former. In South Australia, the Destitute Asylum includes lying-in and children's departments.

#### BENEVOLENT INSTITUTIONS.—REVENUE AND EXPENDITURE, 1910.

Particulars.	N.S.W.	Victoria.	Q'land.	S.A.	W.A.	Tas.	C'with.
<b>Revenue—</b>	£	£	£	£	£	£	£
Government aid ...	77,746	20,043	31,313	14,562	16,606	250	160,520
Municipal aid ...	...	912	...	...	...	...	912
Public subs., legacies, etc....	3,323	10,266	876	...	...	684	15,149
Fees ...	...	4,025	...	958	134	...	5,117
Other ...	7,075	3,768	394	267	92	...	11,596
<b>Total...</b>	<b>88,144</b>	<b>39,014</b>	<b>32,583</b>	<b>15,787</b>	<b>16,832</b>	<b>934</b>	<b>193,294</b>
<b>Expenditure—</b>							
Buildings ...	4,617	1,006	13	273	...	...	5,900
Maintenance ...	79,776	35,640	32,348	15,514	16,606	559	180,443
Other ...	3,714	216	179	...	...	96	4,205
<b>Total...</b>	<b>88,107</b>	<b>36,862</b>	<b>32,540</b>	<b>15,787</b>	<b>16,606</b>	<b>655</b>	<b>190,557</b>

(i.) *Government Asylums for the Infirm, New South Wales.* There are six of these institutions in New South Wales, with something over 4000 beds, generally nearly all in use. Inmates at the end of 1910 numbered 3325; deaths numbered 673; and the expenditure amounted to £65,221.

(ii.) *Benevolent Asylums, Victoria.* Besides the asylums attached to hospitals, there are eight institutions in Victoria. The daily average number indoors was 2328 for 1909-10, with 1076 distinct cases of outdoor relief. Deaths numbered 438. The total expenditure was £36,862, and receipts £39,014—£20,043 from Government and £18,971 from other sources.

(iii.) *Benevolent Asylums, Queensland.* There are four institutions in Queensland, with 1262 beds. The total number in the asylums during 1910 was 1646, with a daily average of 1082. Deaths numbered 175. Expenditure amounted to £32,606, and receipts to £32,650, of which £31,380 was Government aid.

(iv.) *Destitute Asylum, Adelaide.* Outside of hospitals and lunatic asylums the destitute of South Australia are dealt with and relieved at the Destitute Asylum, Adelaide. The institution includes lying-in and children's departments. In the asylum the average number of inmates in 1909-10 was 350. There were sixty-nine deaths during the year. Expenditure totalled £6566. In addition, £9432 was dispensed through the institution for outdoor relief of the destitute in both metropolitan and rural districts.

(v.) *Homes for the Destitute, Western Australia.* There are four of these homes in Western Australia supported by public funds. Attached to the Perth Women's Home is a lying-in department. Outdoor relief to the poor and aged is given, the amount expended being included in expenditure in the above table. More than fifteen hundred cases were dealt with during 1909. There were ninety-eight deaths.

(vi.) *Charitable Establishments, Tasmania.* There are two principal Government charitable establishments in Tasmania. Beds numbered 315 in 1910. The total number of persons treated was 555, of whom 64 died. The daily average number resident was 235. Total expenditure was £4509, receipts amounting to the same sum, of which £4125 was contributed by the State.

**4. Orphanages, Industrial Schools, etc.**—The organisation of charitable effort varies greatly in regard to orphans and waifs. In many institutions shelter and some form of industrial training is offered to destitute children of all classes, whether orphans or not, while some of those styled orphanages do not confine their relief to orphans strictly so called. The figures in the next table are those for institutions where, it is believed, the principal effort is on behalf of those who are really orphans:—

#### ORPHANAGES IN COMMONWEALTH, 1906 to 1910.

Particulars.	1906.	1907.	1908.	1909.	1910.
Number of institutions ... ..	38	38	38	42	42
Admissions ... ..	1,333	1,465	1,393	1,613	1,626
Total number of inmates during year ...	4,868	5,081	4,078	5,150	5,331
Deaths ... ..	15	17	19	14	22
Expenditure ... ..	£ 61,098	62,439	65,154	61,088	72,882

(i.) *New South Wales.* The care of destitute and neglected children is entrusted to the State Children's Relief Board, whose officers are charged with a strict supervision regarding the welfare of the children and the relation to them by those to whom they are boarded out. Useful trades and profitable occupations are taught, and many of the children become useful members of society. The number of children under the board's supervision in 1910-11 was 4498. The board's expenditure in 1910-11 was £90,352, or £20 17s. per child.

There are also thirteen orphanages, with about 800 persons under care. Deaths are but one or two annually, and the yearly expenditure fluctuates between £7300 and £10,800.

New South Wales had in 1910 three reformatory institutions—the Carpenterian State Reformatory, and the "Sobraon" State Training Ship for boys, the enrolment for 1910 being 56 and 407 respectively; and the Girls' State Industrial School, where for the same year the enrolment was 133.



The training ship attained very satisfactory results. In forty years more than 5000 boys were dealt with, and the records shew that 98 per cent. of these have developed into good citizens. In 1911, the "Sobraon" was purchased by the Commonwealth, to be used in connection with naval training. The boys were placed in the Mittagong Farm Homes and the Brush Farm Reformatory. To the Carpenterian Reformatory are sent boys who have been convicted in the courts, whom it is desired to keep apart from other prisoners, and who are taught useful trades.

(ii.) *Victoria.* There are ten orphanages in Victoria, with 1580 beds. The total number under care in 1910 was over 2000. Average annual admissions are about 500. This average was, however, not reached in 1910. Deaths numbered eight in 1910. The annual expenditure is about £23,000.

At the end of 1910 there were three industrial and eleven reformatory schools in the State. Of these, one industrial and one reformatory school are wholly controlled by the Government, being used merely as receiving and distributing depôts. The children are sent thence to situations, foster homes or other institutions dealing with State wards. The other schools are under private management, receiving an allowance for State wards. Many of the reformatory children are placed with friends or licensed out. On 31st December, 1910, the wards of the State numbered 6860—comprising 6656 neglected and 204 reformatory children. There were also 39 children free from legal control, who, being incapacitated, were maintained by the State. The total expenditure for 1910 was £89,689, of which £86,160 was borne by the Government.

Under Government control, but not administered as charity, are the training ships "John Murray" and "Dart," on which general instruction is imparted and special training given in technical seamanship.

(iii.) *Queensland.* There are seven orphanages in Queensland with over 1000 beds. The number under care is about 1600, deaths averaging six per annum. The expenditure in 1910 was £27,538.

There are also six industrial and reformatory schools. The total number of children under State control at the end of 1910 was 2960. The gross cost was £34,370, of which £31,368 was borne by the Government.

(iv.) *South Australia.* The State Children's Department exercises a supervision over the probationary and industrial schools, the reformatories, and the Methodist Home. The total number of admissions into these institutions in 1909-10 was 212. The number of inmates on the 30th June, 1910, was 198, in addition to which 1281 were placed out, or had been adopted or apprenticed. There were three deaths of children in industrial schools, and seven of those placed out and in other institutions. The number of children under State control on 30th June, 1910, was 1479. The expenditure for 1909-10 was £21,365 in gross, of which the Government aid was £19,414.

(v.) *Western Australia.* In Western Australia there were, in 1909, eight orphanages (including industrial orphanage schools). The admissions during the year were 173, and the number in institutions on 31st December was 681. There was one death during the year. The State expenditure was about £10,000.

In the Government Industrial School there were, at the end of 1909, 24 inmates, 161 having been admitted during the year. Five deaths occurred. At the end of 1910 751 children were under State control. The net cost to the State was £14,194, parents' contributions amounting to £705.

(vi.) *Tasmania.* There were two admissions to the orphanage in 1910 and thirty-six inmates during the year. No deaths occurred. Expenditure amounted to £422.

There are three industrial schools under benevolent institutions in the State. Admissions in 1910-11 numbered twenty-four, and total inmates during the year 116. No deaths occurred. The expenditure was £1997.

Under the boarding-out system an annual average of 140 children are placed out at an annual average expenditure of £1610. The total number of children under State control at the end of 1910 was 301, the gross cost to the State of children's relief being £3454, of which £296 represents parents' contributions.

vii. *Neglected Children.* The following table summarises the number of neglected children under State Departments. In New South Wales a number of children are boarded out with their own mothers. The inclusion of these would make the total number of children in that State 8680.

#### STATE RELIEF OF NEGLECTED CHILDREN.—TRANSACTIONS OF STATE DEPARTMENTS IN THE COMMONWEALTH, 1910.

Particulars.	N.S.W.*	Vict.	Qld.	S.A.†	W.A.	Tas.	Cwth.
Number of Children under State control at end of year—							
Males ... ..	2,551	3,595	1,460	784	418	195	9,003
Females ... ..	1,947	3,265	1,500	695	333	106	7,846
Total ... ..	4,498	6,860	2,960	1,479	751	301	16,849
	£	£	£	£	£	£	£
Gross cost to State of children's relief	94,064	89,689	34,370	21,365	14,899	3,454	257,841
Receipts, from parents' contributions, etc.	3,712	3,529	3,002	1,951	705	296	13,195
Net cost ... ..	90,352	86,160	31,368	19,414	14,194	3,158	244,646

\* For year ended 5th April following. † For year ended 30th June preceding.

5. *Lepers.*—Lazarets for the treatment of lepers have been established in New South Wales (Little Bay); Queensland (Stradbroke Island, near Brisbane, and Dayman Island, Torres Straits); and the Northern Territory (Mud Island). Quarantine and isolation stations have also been used for the segregation of patients. A great deal of information concerning the beginning and progress of leprosy in Australia has been collected and published by Dr. J. Ashburton Thompson, Chief Government Medical Officer and President of the Board of Health, New South Wales, from whose reports the following table has been compiled:—

#### CASES OF LEPROSY RECORDED IN THE COMMONWEALTH, 1855 to 1910.

State.	1855 to 1905.	1906.	1907.	1908.	1909.	1910.	Total.
New South Wales ... ..	133	7	4	2	2	5	153
Victoria ... ..	*27	—	—	—	—	—	*27
Queensland ... ..	†172	14	21	23	8	6	†244
South Australia ... ..	37	—	1	—	—	—	38
Western Australia ... ..	4	—	—	3	4	3	14
Tasmania ... ..	—	1	—	—	—	—	1
Total ... ..	*†373	22	26	28	14	14	*†477

\* In addition, some Chinese.

† In addition, many Kanakas.

6. **Hospitals for the Insane.**—The method of compiling insanity statistics has been fairly uniform throughout the States, but the various methods of observing the early stages of the development of insanity introduce an element of uncertainty which considerably reduces the value of comparison. In the summary given below, licensed houses (except as regards expenditure) are included for New South Wales throughout, and the number in Victoria is included in 1907, 1908, 1909, and 1910, but the figures are exclusive of reception houses and observation wards in gaols:—

#### HOSPITALS FOR INSANE, COMMONWEALTH, 1906 to 1910.

Particulars.	1906.	1907.*	1908.*	1909.*	1910.*
Number of institutions ... ..	27	30†	30†	31†	31†
Number of beds ... ..	13,507	13,238	14,317	14,546	14,978
Admissions ... ..	2,839	2,583	2,638	2,740	2,936
Total number under treatment ...	16,803	17,000	17,373	17,915	18,870
Discharged as recovered, relieved, &c. ...	1,258	1,216	1,159	1,245	1,309
Deaths ... ..	1,003	1,018	1,071	1,046	1,177
Expenditure ... ..	£404,354	500,168	511,468	514,531	561,677

\* Exclusive of receiving wards at two general hospitals, previously included. † Includes five licensed houses for insane in Victoria.

The proportion of insane, as well as the total number returned as under treatment is gradually rising. In the next table the number of insane under official care in Australia is given, and in the table following the proportion of insane to population.

The number of insane persons in institutions in Australia at the end of each of the last five years was as follows:—

#### INSANE PERSONS IN THE COMMONWEALTH, 1906 to 1910.

State.	1906.	1907.	1908.	1909.	1910.
New South Wales ... ..	5,422	5,509	5,673	5,902	6,148
Victoria ... ..	4,876	4,969	5,014	5,097	5,241
Queensland ... ..	2,029	2,069	2,184	2,227	2,260
South Australia ... ..	994	1,019	1,051	1,051	1,055
Western Australia ... ..	546	630	707	782	793
Tasmania ... ..	482	502	507	506	505
Commonwealth ... ..	14,349	14,698	15,136	15,565	16,002

For the period embraced in the tables Victoria shows the highest rate of insanity, roughly one in 250 persons. It is stated that this is chiefly owing to the proportionately greater number of old persons in that State. On the other hand, in Western Australia, where the population is much younger, a considerably lower insanity rate has prevailed, being about one in 500 in 1906, about one in 400 in 1907 and 1908, and about one in 350 in 1909 and 1910.

## PROPORTION OF INSANE, COMMONWEALTH, 1906 to 1910.

State.	1906.	1907.	1908.	1909.	1910.
PER 1000 OF THE POPULATION.					
New South Wales ...	3.56	3.53	3.58	3.66	3.74
Victoria ...	4.00	4.02	4.01	3.99	4.03
Queensland ...	3.76	3.79	3.92	3.85	3.77
South Australia ...	2.68	2.70	2.70	2.65	2.57
Western Australia ...	2.14	2.48	2.72	2.94	2.87
Tasmania ...	2.60	2.65	2.64	2.62	2.61
Commonwealth ...	3.51	3.53	3.58	3.60	3.62

Consequent upon the development of a more rational attitude to the treatment of mental cases, there is growing up a greater willingness to submit necessary cases to treatment at an earlier stage than formerly. Hence an increase in the number of recorded cases does not necessarily imply an actual increase in insanity. It is important to bear this in mind, because the small progressive increase in the preceding table is probably to be attributed largely, if not solely, to this circumstance. The increase in expenditure is another evidence of the greater care bestowed on the insane.

The leading features in regard to institutions for the care of the insane are given below for 1910:—

HOSPITALS FOR THE INSANE.—NUMBER, STAFFS, AND ACCOMMODATION,  
COMMONWEALTH, 1910.

Particulars.	N.S.W.	Vict.*	Qld.	S.A.	W.A.	Tas.	C'wlth.
Number of Institutions—							
Government ...	8	3	3	1	2	1	23
Private ...	2	5†	...	...	1	...	8†
Total ...	10	13	3	1	3	1	31
Medical Staff—							
Males ...	16	20	7	2	3	2	50
Females ...	1	...	...	...	...	2	3
Total ...	17	20	7	2	3	4	53
Nursing Staff & Attendants—							
Males ...	455	434	119	61	73	67	1,209
Females ...	331	424	76	54	32	47	964
Total ...	786	858	195	115	105	114	2,173
Accommodation—							
No. of dormitories ...	†331	1,344	440	†	26	364	†
Capacity in cubic feet ...	†3,413,012	3,454,371	1,263,202	†	512,382	770,407	†
No. of beds ...	5,356	4,855	2,238	1,144	730	655	14,978
Cubic feet to each bed ...	{ †1,000\$	712	565	†	701	1,176	†

\* Exclusive of Receiving House, Royal Park, and of the Receiving Wards at Bendigo and Geelong hospitals. † There are five private licensed houses in Victoria, in which there were 116 cases at end of 1910. Other figures for these private asylums are not available. ‡ Information not available. § Government hospitals only. \$ Ordinary dormitory. \*\* Hospital dormitory.

## HOSPITALS FOR THE INSANE.—PATIENTS TREATED, 1910.

Particulars.	N.S.W.	Vic.*	Q'ld.	S.A.	W.A.	Tas.	C'wlth.
No. of distinct persons treated during year							
Males ... ..	4,456	3,059	1,642	737	715	297	10,906
Females ... ..	3,011	2,870	974	555	274	280	7,964
Total ... ..	7,467	5,929	2,616	1,292	989	577	18,870
Admissions & re-admissions during year—							
Males ... ..	742	422	259	140	138	36	1,737
Females ... ..	479	380	130	101	74	35	1,199
Total ... ..	1,221	802	389	241	212	71	2,936
Discharges—Recovered—							
Males ... ..	256	93	113	...	65	9	536
Females ... ..	212	84	53	1	27	11	388
Total ... ..	468	177	166	1	92	20	924
Relieved and unrelieved—							
Males ... ..	38	48	16	94	8	11	215
Females ... ..	37	60	10	50	5	7	169
Total ... ..	75	108	26	144	13	18	384
Absconders—							
Males ... ..	7	30	...	...	2	3	42
Females ... ..	...	5	...	...	...	...	5
Total ... ..	7	35	...	...	2	3	47
Deaths—							
Males ... ..	275	233	109	51	76	21	765
Females ... ..	150	135	55	41	19	12	412
Total ... ..	425	368	164	92	95	33	1,177
Inmates at end of year—							
Males ... ..	3,676	2,655	1,404	592	567	255	9,149
Females ... ..	2,472	2,586	856	463	226	250	6,853
Total ... ..	6,148	5,241	2,260	1,055	793	505	16,002
Average daily number resident—							
Males ... ..	3,488	2,412	1,400	592	564	255	8,711
Females ... ..	2,263	2,304	854	454	207	246	6,328
Total ... ..	5,751	4,716	2,254	1,046	771	501	15,039

\* Exclusive of inmates of the Receiving House, Royal Park, and of Receiving Wards attached to the hospitals at Bendigo and Geelong, and of five private licensed houses.

In some of the States it is the practice to allow persons well advanced towards recovery to leave the institutions and reside with their relatives or friends, but they are nevertheless under supervision of the asylum authorities and are kept on the books. These patients are not shewn in the above table as inmates. In nearly every case absconders are retaken. They are shewn above as readmitted.

The revenue of Government asylums is small in comparison with their cost, and consists chiefly of patients' fees. The proportion of expenditure borne by the State amounts to about 86 per cent.

### HOSPITALS FOR THE INSANE (GOVERNMENT ONLY), REVENUE AND EXPENDITURE, 1910.

Particulars.	N.S.W.	Victoria.	Q'land.	S. Aust.	W. Aust.	Tas.	C'wealth.
Revenue—	£	£	£	£	£	£	£
Fees of patients ...	31,909	24,206	6,537	5,591	2,850	4,121	75,214
Other ...	1,542	...	1,116	15	340	439	3,452
Total ...	33,451	24,206	7,653	5,606	3,190	4,560	78,666
Expenditure—							
Salaries ...	76,945	86,953	26,324	13,469	14,771	8,764	227,226
Maintenance ...	*120,073	82,221	30,213	17,534	14,150	11,953	276,144
Other ...	+13,858	143,533	...	...	453	463	58,307
Total ...	210,876	212,707	56,537	31,003	29,374	21,180	561,677

\* Lunacy patients only. † Including £2446 expenses of Government hospital at Morisset and £1500 expenses of temporary hospital at Stockton. ‡ Buildings and repairs.

(i.) *New South Wales.* The average length of residence in the hospitals of persons who died was 4 years 8 months for males and 5 years 9 months for females; and that of persons who were discharged was 1 year 2 months for males and 1 year 7 months for females.

There are also two State reception houses, where suspected persons are confined for observation, being subsequently either discharged or transferred to lunatic asylums. In two of the gaols observation wards have been instituted, with similar functions.

(ii.) *Victoria.* The average residence in the hospitals of those who died was 8 years 1 month for males, and 7 years 2 months for females; that of those discharged, 1 year 10 months for males, and 1 year 5 months for females.

There are also lunacy wards in two of the general hospitals. On 24th September, 1907, a State receiving house was opened, where persons are placed for observation, and subsequently discharged or transferred to asylums.

(iii.) *Queensland.* The average residence in the institutions of those who died was 8 years 4 months for males and 7 years 5 months for females; and of those who were discharged, 2 years 11 months for males and 1 year 3 months for females.

There are also three reception houses for insane, which act as depôts to which patients are sent with a view to determining whether their mental illness is of a merely temporary character, readily to be relieved, or is of such a nature as to need further treatment at the State asylums.

(iv.) *South Australia.* The average residence of those who died was 8 years 4 months for males and 5 years 3 months for females; of those discharged, 1 year 1 month for males and females.

(v.) *Western Australia.* The period of residence of those who died during the year averaged 2 years 9 months for males and 3 years 6 months for females; of those who were discharged, 1 year 3 months for males and 8 months for females.

(vi.) *Tasmania.* The period of residence of those who died was 4 years 10 months for males and 11 years 3 months for females; that of those discharged, 2 years 2 months for males and 1 year 3 months for females.

(vii.) *Causes of Insanity.* The proportion of causes of insanity to the total of ascertained causes in Australia in 1907, 1908, 1909, and 1910 shows that hereditary influences have been the chief factor, one-fifth of the total ascertained causes coming under this head. Domestic troubles, adverse circumstances, etc., have also been a fruitful source. About one case in eight was due to intemperance in drink.

**PROPORTION OF ASCERTAINED CAUSES, etc., OF INSANITY, COMMONWEALTH,  
1907-10.**

Causes, Previous History, etc.	1907.	1908.	1909.	1910.
	Per cent.	Per cent.	Per cent.	Per cent.
Domestic trouble, adverse circumstances, mental anxiety ... ..	14.7	14.5	11.5	12.0
Intemperance in drink ... ..	13.7	12.9	10.1	14.4
Hereditary influence, ascertained; congenital defect, ascertained ... ..	20.3	18.8	15.0	16.9
Pregnancy, lactation, parturition and puerperal state, uterine and ovarian disorders, puberty, change of life ... ..	8.2	6.8	6.4	5.4
Previous attacks ... ..	11.0	13.5	12.0	12.2
Accident, including sunstroke ... ..	4.3	4.0	3.0	2.1
Old age ... ..	7.7	8.0	9.7	10.8
Other causes ascertained ... ..	20.1	21.5	32.3	26.2
All ascertained causes ... ..	100.0	100.0	100.0	100.0

**7. Treatment of Inebriates.**—The treatment of inebriates is referred to in the section dealing with Public Justice hereinbefore. (See page 917.)

**8. Protection of Aborigines.**—For the protection of the aboriginal Australian race there are institutions, under the supervision of Aborigines Boards, where the blacks are housed and encouraged to work, the children receiving elementary education. The work is usually carried on at mission stations, but many of the natives are nomadic in habit of life, and receive food and clothing when they call, whilst others but rarely come under the notice of the boards. The native race is extinct in Tasmania. The average annual expenditure on maintenance, etc., for the last five years was—New South Wales, £14,472; Victoria, £4268; Queensland, £10,380; South Australia, £14,884; Western Australia, £18,810; Commonwealth, £62,814.

**9. Other Charitable Institutions.**—Owing to variety of name and function of other charitable institutions it has been found impracticable to give detailed results. The aid given in kind—food, clothing, tools of trade, etc.—is considerable, whilst the shelter and treatment afforded ranges from a bed for a night for casual callers in establishments ministering minor charity, to indoor treatment over long periods for those that exist for the relief of the aged and infirm. The institutions not so particularised include asylums for the deaf, dumb, and blind, maternity institutions and infant homes, homes for the destitute and aged poor, industrial colonies, night shelters, crèches, homes of hope, rescue homes, free kindergarten and ragged schools, auxiliary medical charities, free dispensaries, benevolent societies and nursing systems, ambulance and health societies, boys' brigades, humane and animals' protection societies, prisoners' aid associations, shipwreck relief societies, bush fires, mining accident relief funds, etc.

**10. State Expenditure on Charities.**—The table below gives the amount expended by Government on charities in each of the last four years. In some of the States amounts have been included for minor items, which in other States are charged to other heads:—

## STATE EXPENDITURE ON CHARITIES, 1907-10.

State.	1907.	1908.	1909.	1910.
	£	£	£	£
New South Wales ... ..	440,360	481,887	519,327	528,289
Victoria ... ..	361,498	383,086	378,165	385,467
Queensland ... ..	206,881	216,144	200,141	205,577
South Australia ... ..	113,345	88,752	88,618	87,112
Western Australia ... ..	146,685	175,839	149,892	139,700
Tasmania ... ..	46,100	47,537	36,316	39,558
Commonwealth ... ..	1,314,869	1,393,245	1,372,459	1,385,703

11. **Total Charitable Expenditure.**—The expenditure in the Commonwealth in money on hospitals, charities, and all forms of relief publicly given, comprising the amounts furnished by Government and those raised by public subscription, etc., but excluding old-age pensions, exceeds £2,200,000.