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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 principal 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 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 shere of charitable aid, but there are numerous minor charities dependent upon private beneficence. In institutions which receive Government aid, management and finance are usually relegated to executive bodies.

The scope which economic and industrial conditions in Australia afford for the exercise of natural ability, and the comparatively wide distribution of wealth throughout the Commonwealth, 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 result 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, Invalid Pensions, and Maternity Allowances 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 these matters will be found in Section xxxiv., Miscellaneous, § 4.

To meet special and 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 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 effective parental control, are committed to "reformatories."

From time to time relief funds have 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. Special funds are also raised for such as are disabled or bereaved through war. Complete statistical information in regard to these forms of charity is not, however, available. It may be mentioned that the daily Press frequently accepts the duty of collectorship in charity appeals. In regard to subscriptions to the various patriotic funds which have been instituted in consequence of the war, the total for Australia, up to 31st December, 1918, has been estimated to exceed £12,000,000 sterling.

2. Charity Reforms.—The evident overlapping of charitable effort has on various occasions led to discussion regarding methods of collection and distribution. The great desideratum in charity organisation is that the available aid should be relegated solely to the relief of distress and suffering. The true interests of the sick poor would thus be conserved, and the real intention of the donors fulfilled. With greater public attention, improved administration has been brought about. Societies to prevent overlapping have been formed, resulting in improved economical collection and distribution of charitable aid, and a better system of using the available accommodation.

Other proposed reforms aim at ascertaining the cause 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, factory legislation, Health Acts, etc., have enacted provisions for safeguarding dangerous machinery, and permitting only competent persons to be employed thereon.

3. Tabulation of Charities Statistics.—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, and are shewn for a period extending over five years. Where the combination has been for dissimilar periods the nearest years have been taken. Satisfactory tabulation for other charities is not yet possible.

§ 2. The Larger Charities of Australia.

1. Hospitals.—All 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. Only general hospitals are tabulated, since the working of "special" institutions is not properly comparable with those which treat every class of case.

HUSELLALS IN THE COMMONWEALTH, 1918 TO 1	HOSPITALS	IN THE	COMMONWEALTH,	1913	TO	1917	1.
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Particulars.		1913.	1914.	1915.	1916.	1917.
Number of institutions		381	389	398	391	399
Number of beds		15,235	15,345	16,374	15,811	16,763
Admissions during year		145,908	155,531	169,892	166,588	164,889
Indoor patients treated		152,077	164,349	179,829	176,279	174,387
Deaths		11,362	11,468	12,809	13,128	11,885
Expenditure	£	1,264,605	1,255,658	1,280,461	1.351.160	1,396,361

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 1917 places the total at about 300,000.

Fuller details of hospital statistics are given for 1917 in the tables below, the States and Northern Territory of the Commonwealth being shewn separately:—

GENERAL HOSPITALS.—NUMBER, STAFFS, AND ACCOMMODATION OF HOSPITALS IN THE COMMONWEALTH, 1917.

Particulars.		N.S.W.	Vic.	Q'land.	S. Aust.	W. Aust.	Tas.	N. Ter.	C'wealth.
Number of Hospitals—Government Other		1 153	51	2 91			2 12	4	44 355
Total		157	51	93	29	51	14	4	399
Medical Staff— Males Females	::	} 752	83	{ 163 { 14			19	. 1	} 1,180
Total		752	83	177	103	45	19	1	1,180
Nursing Staff and Atter	nd-								
Males Females	::	2,064	14 820	273 985	66 498		173	2 4	547 5,054
Total		2,150	834	1,258	564	614	175	6	5,601
Accommodation— Number of dormitor etc. Capacity in cubic feet Number of beds Cubic feet to each be	 	1,030 7,563,135 4 6,425 1,177	438, 1,695,890 3,470 1,353	546 3,916,862 3,434 1,141	211 1,598,499 1,210 1,321	2,330,748 1,627	119 820,069 537 1,527	57,312 60 1,302	2,567 20,982,515 16,763 1,252

In addition to the accommodation provided in the ordinary wards, a considerable amount of accommodation for certain classes of cases is furnished in out-door or verandah sleeping places. Full particulars are not available.

GENERAL HOSPITALS.—PATIENTS TREATED IN HOSPITALS IN THE COMMONWEALTH, 1917.

Particulars. N.S.W. Victoria. Q'land. S. Aust.	7,075 4,768 11,843 525 298 823 6,550 4,470 11,020 3,262 2,661	3,935 3,868 7,803	N. Ter. 252 100 352 17 17 252 100 352	95,598 78,789 174,387 5,857 4,317 10,174 90,190 74,699 164,889
Indoor Relief: Distinct Persons Treated— Males 38,750 15,792 23,250 6,544 5,688 Total 76,660 28,639 36,858 12,232 Inmates at beginning of Year— Males 1,913 934 694 304 694 304 Females 1,913 934 694 304 694 694 304 694 304 694 304 694 304 694 304 694 694 304 694 304 694 304 694 304 694 304 694 304 694 304 694 694 304 694 304 694 694 304 694 694 304 694 694 694 694 694 694 694 694 694 694 694 694 694 694 69	4,788 11,843 525 298 823 6,550 4,470 11,020	3,868 7,803 192 174 366 3,743 3,694 7,437	17 17 252 100	78,789 174,887 5,857 4,317 10,174 90,190 74,699
Males 38,750 15,792 23,250 6,548 Total 76,660 28,639 36,858 12,232 Inmates at beginning of Year—Males 2,157 1,355 1,235 376 Females 1,913 934 694 304 Total 4,070 2,289 1,929 680 Admissions and Re-admissions during Year—Males 36,593 14,437 22,015 6,600 Females 35,997 11,913 12,914 5,611 Total 72,590 26,350 34,929 12,211 Discharges—Recovered: Males 25,758 11,875 20,027 4,314 Males 28,299 10,113 11,889 3,877 Total 54,057 a21,988 a31,916 8,191 Relieved: Males 7,145 1,133 Females 4,898 1,012 Total <t< td=""><td>4,788 11,843 525 298 823 6,550 4,470 11,020</td><td>3,868 7,803 192 174 366 3,743 3,694 7,437</td><td>17 17 252 100</td><td>78,789 174,887 5,857 4,317 10,174 90,190 74,699</td></t<>	4,788 11,843 525 298 823 6,550 4,470 11,020	3,868 7,803 192 174 366 3,743 3,694 7,437	17 17 252 100	78,789 174,887 5,857 4,317 10,174 90,190 74,699
Inmates at beginning of Year— Males	525 298 823 6,550 4,470 11,020	192 174 366 3,743 3,694 7,437	17 17 252 100	5,857 4,317 10,174 90,190 74,699
Year—Males 2,157 1,355 1,235 376 Females 1,913 934 694 304 Total 4,070 2,289 1,929 680 Admissions and Re-admissions during Year—Males 36,593 14,437 22,015 6,600 Males 35,997 11,913 12,914 5,611 Total 72,590 26,350 34,929 12,211 Discharges—Recovered: 25,758 11,875 20,027 4,314 Males 28,299 10,113 11,889 3,877 Total 54,057 a21,988 a31,916 8,191 Relieved: Males 7,145 1,133 Females 4,898 1,012 Total 12,043 b b 2,145 Unrelieved: Males 923 143 390 499 Males 867 121 274 342 Total 1,790 <td< td=""><td>298 823 6,550 4,470 11,020</td><td>3,743 3,694 7,437</td><td>17 252 100</td><td>90,190 74,699</td></td<>	298 823 6,550 4,470 11,020	3,743 3,694 7,437	17 252 100	90,190 74,699
Males 2,167 1,355 1,235 376 Females 1,913 934 694 304 Total 4,070 2,289 1,929 680 Admissions and Re-admissions during Year— 36,593 14,437 22,015 6,600 Females 35,997 11,913 12,914 5,611 Total 72,590 26,350 34,929 12,211 Discharges—Recovered: 25,758 11,875 20,027 4,314 Males 28,299 10,113 11,889 3,877 Total 54,057 a21,988 a31,916 8,191 Relieved: 1,138 Females 4,898 1,138 Females 923 143 390 499 Males 923 143 390 499	298 823 6,550 4,470 11,020	3,743 3,694 7,437	17 252 100	90,190 74,699
Admissions and Re-admissions during Year— Males	6,550 4,470 11,020	3,743 3,694 7,437	252 100	90,190 74,699
sions during Year—Males 36,593 14,437 22,015 6,600 5,611 Total 72,590 26,350 34,929 12,211 Discharges—Recovered: Males 25,758 11,875 20,027 4,314 Females 28,299 10,113 11,889 3,877 Total 54,057 a21,988 a31,916 8,191 Relieved: Males 7,145 1,133 Females 4,898 1,012 Total 12,043 b b 2,145 Unrelieved: Males 923 143 390 499 Females 867 121 274 342 Total 1,790 264 664 841 Not stated: Males 902 153 25 Males 699 55 16	3,262	7,437	100	74,699
Males 35,997 11,913 12,914 5,611 Total 72,590 26,350 34,929 12,211 Discharges—Recovered: 25,758 11,875 20,027 4,314 Males 28,299 10,113 11,889 3,877 Total 54,057 a21,988 a31,916 8,191 Reliceved: 7,145 1,138 Females 4,898 1,012 Total 12,043 b b 2,145 Unrelieved: Males 923 143 390 499 Females 867 121 274 342 Total 1,790 264 664 841 Not stated: Males 902 153 25 Males 699 55 16	3,262	7,437	100	74,699
Discharges—Recovered: 25,758 11,875 20,027 4,314 Females 28,299 10,113 11,889 3,877 Total 54,057 a21,988 a31,916 8,191 Relieved: Males 7,145 1,133 Females 4,898 1,012 Total 12,043 b b 2,145 Unrelieved: Males 923 143 390 499 Females 867 121 274 342 Total 1,790 264 664 841 Not stated: Males 902 153 25 Remales 699 55 16	3,262		352	164,889
Males 25,785 11,875 20,027 4,314 Females 28,299 10,113 11,889 3,877 Total 54,057 a21,988 a31,916 8,191 Relieved: Males 7,145 1,133 Females 4,898 1,012 Total 12,043 b b 2,145 Unrelieved: Males 923 143 390 499 Females 867 121 274 342 Total 1,790 264 664 841 Not stated: 902 153 25 Males 699 55 16		3,403	·	1 .
Total 54,057 a21,988 a31,916 8,191 Relieved:	2,661		210	68,849
Relieved: Males Females Total Unrelieved: Males Females Males Females Males Total Unrelieved: Males Females Males Females Males Females Males Females Males Total Not stated: Males Females Males Females Males Males Females Males Mal	5 000	3,438	82	60,359
Males 7,145 1,133 Females 4,898 1,012 Total 12,043 b b 2,145 Unrelieved: Males 923 143 390 499 Females 867 121 274 342 Total 1,790 264 664 841 Not stated: 902 153 25 Females 699 55 16	5,923	σ6,841 	292	129,208
Unrelieved: Males	*2,395 1,366		21 3	10,694 7,279
Males 923 143 390 499 Females 867 121 274 342 Total 1,790 264 664 841 Not stated: 902 153 25 Females 699 55 16	3,761	b	24	17,973
Males 923 143 390 499 Females 867 121 274 342 Total 1,790 264 664 841 Not stated: 902 153 25 Females 699 55 16]
Not stated : 902 153 25 Males	297 168	89 69	· ::	2,341 1,841
Males 902 153 25 Females 699 55 16	465	158		4,182
Total 1,601 208 41	4	9	::	1,093 775
	5	13	••	1,868
Deaths— Males	627 302	230 153	18 8	7,554 4,331
Total 4,627 2,739 2,217 964	929	383	26	11,885
Inmates at end of Year— Males 2,109 1,117 1,171 405 Females 2,034 930 682 304	490 270	204 204	20	5,516 4,431
Total 4,143 2,047 1,853 709	760	408	27	9,947
Average Daily Number				<u>-</u>
Average Daily Number Resident—	572 332	233 223	18 7	} 11,137
Total 4,655 2,106 2,230 761	JU2	456	25	11,137

a Including relieved.

b Included in recovered.

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

Particulars.	N.S.W.	Victoria.	Q'land.	S. Aust.	W. Aust.	Tasmania.	N. Ter.	C'wealth.
Revenue— Fees of patients,	£	£	£	£	£	£	£	£
etc	91,336	41,056	32,314	16,811	23,547	11,274	491	216,829
grants Other	296,561 202,738	68,617 151,287	153,628 105,096	82,180 15,247	68,870 23,656	31,579 6,873	4,488	705,923 504,897
Total	590,635	260,960	291,038	114,238	116,073	49,726	4,979	1,427,649
Expenditure— Buildings Salaries Maintenance Other	85,997 215,946 } 246,891 } 53,807	22,597 196,072 3,616	30,890 { 100,006 <i>b</i> { 144,148 9,534	15,775 38,007 57,225 2,668	117,647	3,826 17,341 15,809 13,580	463 2,050 2,466	1,396,361
Total	602,641	222,285	284,578	113,675	117,647	50,556	4,979	1,396,361

- a Year ended 30th June, 1917. b Including rents.
- 2. Principal Hospitals in each State.—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). Where the institutions carry on general hospital relief, they are included with those establishments.
- (i) New South Wales. A Government hospital, with a staff of 17 medical officers and accommodation for 591 patients, is established at Little Bay, near Sydney. Altogether, there are four women's hospitals, one for women and children, and three children's hospitals in the metropolis. The Royal Prince Alfred Hospital, with a medical staff of 69, and with 397 beds, is the largest metropolitan endowed institution. Amongst other large metropolitan fiospitals may be mentioned the Sydney Hospital, with a medical staff of 80 and with 334 beds, St. Vincent's with 49 doctors and 190 beds, and Lewisham with 23 medical attendants and 169 beds. In extra-metropolitan areas the Waterfall Hospital for Consumptives, which is a Government institution, provides accommodation for 300 patients. The Newcastle Hospital has 146 beds and a medical staff of 14. At the Carrington Convalescent Home at Camden, 110 patients may be admitted. The hospital in the Broken Hill district can accommodate 142.
- (ii) Victoria. There are several large metropolitan hospitals in Victoria. The largest of these, the Melbourne Hospital, has 325 beds; the Austin Hospital for Incurables has 290, the Alfred Hospital 168, St. Vincent's 138, and the Hom∞opathic 98. Amongst the country institutions, Bendigo has 222 beds, Geelong 205, and Ballarat 150.
- (iii) Queensland. Of the metropolitan hospitals, the largest is the Brisbane General, which can accommodate 316 patients. The Children's Hospital has 217 beds, the Diamantina 162, and the Mater Misericordiæ 112. Ipswich Hospital, with 146 beds, is the largest of the country institutions, followed by Toowoomba with 128, Rockhampton with 110, Townsville with 105, Maryborough 96, Charters Towers 92, Mackay 84, Mt. Morgan 71, and Bundaberg 70.
- (iv) South Australia. Including the Consumptive Home and Infectious Diseases Block, the Adelaide Hospital can accommodate a total of nearly 440 patients. The most important of the country hospitals are Port Augusta, Port Pirie, and Wallaroo, with 65, 56, and 48 beds respectively.
- (v) Western Australia. Information regarding the capacity of the Western Australian hospitals is not available, but some idea of their comparative importance may be gained from the figures relating to cases treated. In the metropolis, 3,583 cases were treated at the Perth Hospital in 1917, and 1,227 at the Perth Children's. Of the country hospitals, Kalgoorlie returned 1,418 cases, Fremantle 750, and Wooroloo 605.

- (vi) Tasmania. There are well-equipped general hospitals in Hobart and Launceston. The former has a medical staff of 2 and can accommodate 185 patients, and the latter has 190 beds and a medical staff of 2. Hospitals for women have been established in both centres, and there is a sanatorium for consumptives at Newtown. Outside the metropolitan area, the Devon Cottage Hospital has a medical staff of 2, and beds for 66 patients; the Lyell District Hospital can accommodate 35 patients, and there are 9 other institutions in important country centres.
- (vii) Northern Territory. In addition to the hospitals at Darwin and Pine Creek, arrangements have been made for the supply of medicines and first aid to outlying stations. Great improvements have recently been made by the Public Health Department in the sanitation of Darwin. Close supervision is also exercised over the sanitary conditions at railway camps.
- 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.

RENEVOLENT	INSTITUTIONS -	-REVENUE AND	EXPENDITURE.	1017

Particulars.		N.S.W.	Vic.	Q'land.	S. Aust.	W. Aust.	Tas.	C'wealth.
Para		£	£	£	£	£	£	£
Revenue— Government aid .		72,235	17,996	32,338	34,079	21,188	7,325	185,161
		0.005	935	1,265	24		• •	935
Public subs., legacies, et Fees		2,895 216	10,357 12,298	'	5,351		2,274	14,541 20,139
Other	: ::	19,450	7,617	2,045	224	::	269	29,605
Total .		94,796	49,203	35,648	39,678	21,188	9,868	250,381
		851	954	1,988	114		249	4,156
Othor	: ::	93,541 668	44,611 2,354	33,202 224	39,397	21,188	7,017 2,602	238,956 5,848
Total .		95,060	47,919	35,414	39,511	21,188	9,868	248,960

⁽i) Government Asylums for the Infirm, New South Wales. There were three asylum hospitals in New South Wales at the end of 1917. Rookwood, the largest of these, had an average number resident of 1,352, Newington had 732, and Liverpool 532. At the

Cottage Homes, situated at two separate localities in Parramatta, the average number resident was about 330. The State Labour Depot and Refuge at Randwick had 193 immates at the end of 1917.

- (ii) Benevolent Asylums, Victoria. Besides the asylums attached to hospitals, there are eight institutions in Victoria. The Melbourne Benevolent Asylum had 670 inmates on 30th June, 1918, the Victorian Home for Aged and Infirm, 380. Of the country benevolent asylums, Ballarat had 185 inmates, Bendigo 150, Castlemaine 124, and Ovens 67.
- (iii) Benevolent Asylums, Queensland. There are four institutions in Queensland, with 851 beds. The most important of these is at Dunwich (Stradbroke Island) with 734 beds, while there are small institutions at Nundah, Rockhampton, and Toowoomba. At the end of 1917 the inmates of the four institutions numbered 1,006.
- (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, and at the Aged Men's Home, Beaumont. The former institution includes lying-in and children's departments. In the asylum the number of inmates at the end of 1917 was 292; in the Beaumont Home it was 71.
- (v) Homes for the Destitute, Western Australia. There are two of these homes in Western Australia supported by public funds. The Old Men's Home at Claremont had 547 inmates at the end of 1917, and the Women's Home, Fremantle, which receives children also, had 70 adult inmates. The children admitted during the year numbered 19.
- (vi) Charitable Establishments, Tasmania. There are two principal Government charitable establishments in Tasmania. The New Town Infirmary and Consumptive Home, which has 220 beds, had 180 inmates at the end of June, 1918, and the Home for Invalids, Launceston, which has 21 beds, had 21 inmates on the same date.
- 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 are 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, 1913 TO 1917.

Particulars.	1913.	1914.	1915.	1916.	1917.
Number of Institutions Admissions Total number of inmates during year Deaths Expenditure (a) £	42	50	50	48	47
	1,514	2,340	2,376	2,118	1,400
	4,720	4,344	4,503	5,061	5,754
	18	46	48	35	20
	72,091	86,390	93,758	79,526	81,141

⁽a) Incomplete. Expenditure is not available for some orphanages.

(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 treatment of them by those to whom they are boarded out. Provision is made for instruction in various trades and callings, and many of the children become useful members of society. The number of children under the Board's supervision in 1917-18 was 12,420. The board's expenditure in that year was £183,356, or £14 15s. per child.

There are also orphanages, farm homes, country homes for children, etc., with upwards of 1,300 children under care.

There are several reformatories and industrial schools maintained by the State. At the Parramatta Industrial School for Girls, to which a Training Home was attached in 1912, there were on 31st December, 1917, 170 inmates. At the Farm Home for boys, Gosford, there were 88 boys at the end of 1917.

(ii) Victoria.—There are ten orphanages in Victoria, with 1,714 beds. The total number under care in 1916-17 was 2,105, of whom 1,648 were inmates on 30th June, 1917. The expenditure in 1916-17 was £25,310.

At the end of 1917 there were three industrial and six reformatory schools in the State. Of these, one in each class is wholly controlled by the Government, being used merely as a receiving and distributing depot. 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, 1917, the wards of the State numbered 11,143—classed mostly as neglected children. There were also 38 children free from legal control, who, being incapacitated, were maintained by the State. The total expenditure for 1917 was £175,754, of which £167,214 was borne by the Government.

(iii) Queensland.—There are eleven orphanages in Queensland. The number under care on 31st December, 1917, was 1,058, and the expenditure for the year £23,768.

There are also seven industrial and reformatory schools, with 109 boys and 66 girls under detention at the end of 1917. The total number of children under State control at the end of 1917 was 6,194. The gross cost was £127,227, of which £119,085 was borne by the Government.

(iv) South Australia.—The State Children's Department exercises a supervision over the probationary and industrial schools and the reformatories. The total number of admissions into these institutions in 1917-18 was 257. The number of inmates on the 30th June, 1918, was 211, in addition to which 1,627 were placed out, or had been adopted or apprenticed. There were two deaths amongst children in industrial schools and reformatories, and of those placed out and in other institutions six died. The number of children under State control on 30th June, 1918, was 1,838. The expenditure for 1917-18 was £39.092.

There are three orphan asylums. The number under care during 1917 was 305, of whom 252 were inmates on 31st December, 1917. There were no deaths during the year, and the expenditure amounted to £6,236.

- (v) Western Australia.—In Western Australia there were, at the end of 1917, four orphanages, three orphanages and industrial schools, and two industrial schools, containing 404 boys and 380 girls. There were also 9 boys and 11 girls at the Government Receiving Depot. The total number of children in charge of the State Children's Department at the end of 1917 was 1,474, and the net cost £22,610.
- (vi) Tasmania.—There are three industrial schools and one orphanage under benevolent institutions in the State. Admissions in 1917-18 numbered 95, and total inmates during the year 248. No deaths occurred. The expenditure was £4,481.

The New Town Training School for boys had 42 inmates at the end of June, 1918.

Under the boarding out system upwards of 400 children are placed out. The total number of children under State control at the end of June, 1918, was 492, the net cost to the State of children's relief being £5,044.

(vii) Neglected Children. The following table summarises the number of neglected children under State Departments. Included in the figures are children boarded out with their own mothers, the numbers being, New South Wales 7,764, Victoria 5,151, Queensland 3,499, South Australia 300, Western Australia 185, Tasmania 6; the total for the Commonwealth being 16,905.

STATE RELIEF OF NEGLECTED CHILDREN.—TRANSACTIONS OF STATE DEPARTMENTS, 1917.

Particulars.	N.S.W.*	Vic.	Q'land.	S. Aust.†	W. Aust.	Tas.	C'wealth.
Number of Children under State control at end of year— Males Females	1	5,805 5,338	3,250 2,944	1,002 836	776 698	275 217	 * *
Total	12,420	11,143	6,194	1,838	1,474	492	33,561
Gross cost to State of children's relief Receipts, from parents' contributions, etc	£ 183,356 6,580	£ 175,754 8,540	£ 127,227 8,142	£ 39,092 4,529	£ 23,938 1,328	£ 5,994 950	£ 555,361 30,069
Net cost	176,776	167,214	119,085	34,563	22,610	5,044	525,292

^{*} For year ended 5th April following. † For the year ended 30th June, 1918.
‡ Details not available.

5. Lepers.—Lazarets for the treatment of lepers have been established in New South Wales (Little Bay); Queensland (Peel Island, near Brisbane, and Dayman Island, Torres Strait); 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 was collected and published by the late Dr. J. Ashburton Thompson, while Chief Government Medical Officer and President of the Board of Health, New South Wales, from whose reports the following table has been compiled, up to and including the year 1915, later figures not being available in similar form:—

CASES OF LEPROSY RECORDED IN THE COMMONWEALTH, 1855 TO 1915.

State.	1855 to 1906.	1907.	1908.	1909.	1910.	1911.	1912.	1913.	1914.	1915.
New South Wales	140	4	2	2	5	3	4	2	· 4	3
Victoria	(a) 27	21	23	8	6		4	12	8	10
South Australia	(b) 186 37	1	23			l'		1.2		10
Western Australia	4		3	4	3	2				5
Tasmania	1									
Northern Territory (c)	• •	•••	•••	••	•••	• • •	• •	1	• • •	••
			-							
Total	(a) (b) 395	26	28	14	14	12	9	15	13	19

⁽a) In addition, some Chinese. (b) In addition, many Kanakas. (c) As from the year 1911.

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 in the total for New South Wales and Victoria, but in the latter State the figures are exclusive of reception houses and observation wards in gaols:—

HOSPITALS FOR INSANE,(a) COMM	IONWEALTH.	1913	TO	1917.
-------------------------------	------------	------	----	-------

						T		1
Particulars.				1913.	1914.	1915.	1916.	1917.
Number of instit	utions			35	35	34	35	34
Number of beds		••		16,115	16,432	16,417	16,673	16,808
Admissions		•••		3,153	3,339	3,118	3,268	3,054
Discharged as rec	overed,	relieved,	etc	1,415	1,574	1,491	1,451	1,456
Deaths				1,292	1,270	1,341	1,459	1,306
Expenditure		••	£	772,984	755,697	815,200	861,258	875,963
				,	I		1	i

⁽a) Exclusive of receiving wards at two general hospitals and including six licensed houses for insane in Victoria.

The proportion of insane, as well as the total number returned as under treatment, has changed very little during recent years. 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 years 1913-1917 was as follows:—

INSANE PERSONS IN THE COMMONWEALTH, 1913 TO 1917.

					. 0	
State.		1913.	1914.	1915.	1916.	1917.
New South Wales	••	6,639	6,906	7,063	7,240	7,340
Victoria		5,631	5,729	5,767	5,793	5,833
Queensland		2,370	2,448	2,441	2,517	2,590
South Australia		1,082	1,080	1,137	1,158	1,176
Western Australia		933	981	1,009	1,045	1,066
Tasmania		526	537	522	545	570
Commonwealth		17,181	17,681	17,939	18,298	18,575

For the period embraced in the tables Victoria shews the highest rate of insanity, roughly 1 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 South Australia a considerably lower insanity rate has prevailed, averaging about 1 in 370, Tasmania following closely with an average of about 1 in 360.

PROPORTION OF INSANE PER 1,000 OF THE POPULATION, 1913 TO 1917.

(COMMONWEALTH.)

State.	1913.	1914.	1915.	1916.	1917.
Victoria	3.62 3.98 3.60 2.46 2.91 2.61	3.71 4.00 3.62 2.42 3.04 2.67	3.78 4.04 3.55 2.58 3.13 2.62	3.92 4.15 3.70 2.67 3.38 2.72	3.88 4.13 3.83 2.70 3.44 2.80
Commonwealth .	. 3.53	3.58	3.62	3.75	3.76

Consequent upon the development of a more rational attitude towards the treatment of mental cases, a greater willingness is being shewn to submit afflicted persons 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 numbers in the first of the immediately preceding tables is probably to be attributed largely, if not solely, to this circumstance.

The leading features in regard to institutions for the care of the insane are given below for 1917:—

HOSPITALS FOR THE INSANE.—NUMBER, STAFFS, ACCOMMODATION, 1917.

(COMMONWEALTH.)

Particul	ars.		N.S.W.	Vic.(a)	Q'land.	S. Aust.	W. Aust.	Tas.	C'wealth
Number of Institut Government Private	tions—		9 3	9 (b) 5	3	1	2	1	25 (b) 9
Total	••		12	14	3	1	3	1	34
Medical Staff— Males Females			20 1	21	6	2	2	2	53 3
Total		••	21	21	7	2	3	. 2	56
Nursing Staff and A Males Females	Attendan 	ts	608 490 	547 517 	225 165 - 390	91 61 152	120 52 172	88 59 147	1,679 1,344 3,023
Accommodation— Number of dorm Capacity in cubi Number of beds Cubic feet to eac	c feet		(c) 353 c3,582,976 (c) 6,298 { (d) 600 { (e) 1,000	1,424 3,760,637 5,138 } 732	572 1,778,319 2,551 697	(f) (f) 1,157 (f)	41 699,664 1,104 634	334 706,704 560 1,262	(f) (f) 16,808 (f)

 ⁽a) Exclusive of Receiving House, Royal Park, and of the Receiving Wards at Bendigo and Geelong Hospitals.
 (b) There are five private licensed houses in Victoria, in which there were 90 cases at end of 1917.
 Other figures for these private asylums are not available.
 (c) Government hospitals only.
 (d) Ordinary dormitory.
 (e) Hospital dormitory.

HOSPITALS FOR THE INSANE.—PATIENTS TREATED, 1917.

	Particula	rs.		N.S.W.	Vic. (a)	Q'land.	S. Aust.	W. Aust.	Tas.	C*wealth
	s and re-adn	nissions o	luring					·		
year— Males Females	- ::	••		819 491	402 360	264 178	176 107	107 61	42 47	1,810 1,244
	Total			1,310	762	442	283	168	89	3,054
Males	Recovere			326	80	128	55 43	24 15	17 9	630
Females		••	••	258	103	82				510
	Total	••	• •	584	183	210	98	39		1,140
Relieved a Males Females	nd unrelieve	ed 		54 35	65 57	15 6	39 17	7 11	5 5	185 131
	Total	••		89	122	21	56	18	10	316
Absconder Males Females	s not retake	n— 		3	8			4		15
	Total	••	• •	3	8			4	•••	15
Deaths— Males Females				363 171	230 179	92 46	73 38	64 22	18 10	840
	Total			534	409	138	111	86	28	1,306
Number of of yea	f patients on	n books	at end	j			!			
Males Females			• • •	4,317 3,023	2,901 2,932	1,645 945	647 529	. 752 314	282 288	10,544 8,031
	Total			7,340	5,833	2,590	1,176	1,066	570	18,575
	aily number	resident								
Males Females		••	••	4,117 2,779	2,606 2,539	1,625 911	642 518	742 307	282 275	10,014 7,329
	Total			6,896	5,145	2,536	1,160	1,049	557	17,348
	patients on per 1,000 o									
Males Females Persons	••	•••		4.65 3.19 3.91	4.34 3.99 4.15	4.76 2.88 3.84	3.23 2.28 2.72	4.74 2.09 3.45	$2.84 \\ 2.89 \\ 2.87$	4.38 3.22 3.79
in hos	umber of par pitals for in: in population	sane per	sident 1,000							
Males Females Persons				4.44 2.93 3.68	3.90 3.45 3.68	4.70 2.77 3.76	3.20 2.24 2.68	4.68 2.05 3.40	$2.84 \\ 2.76 \\ 2.80$	4.16 2.94 3.54

⁽a) 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. The figures for admission, etc., include absconders captured and readmitted. Very few escapees succeed in avoiding capture.

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 88 per cent.

HOSPITALS FOR	THE INSANE	(GOVERNMENT	ONLY),	REVENUE	AND
	EXPE	NDITURE, 1917.			

Particulars.		N.S.W.	Victoria.	Q'land.	S. Aust.	W. Aust.	Tasmania.	C'wealth.	
Revenue (exclus ment Grant Fees of patien Other	s)—	lovern-	48,399 2,567	27,450 5,036	8,135 1,647	12,260 735	4,801 1,401	4,950 1,191	105,995 12,577
Total			50,966	32,486	9,782	12,995	6,202	6,141	118,572
Expenditure— Salaries Maintenance Buildings Other		••	175,546 153,802 16,664	119,512 120,831 11,725 3,303	56,835 56,165 13,167 601	21,054 27,109 2,244	28,470 29,621 679	14,800 11,014 1,759 11,062	416,217 398,542 29,574 31,630
Total			346,012	255,371	126,768	50,407	58,770	38,635	875,963

(i) New South Wales. The latest return available shews that 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 3 months for males and 12 years 11 months for females; that of those discharged, 1 year 3 months for males and 1 year 9 months for females.

There are lunacy wards in two of the general hospitals; also a State receiving house 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 6 years for males and 8 years 6 months for females; and of those who were discharged, 13 months for males and 2 years for females.

There are also three reception houses for insane, which act as depots to which patients are sent with a view to determining whether their mental illness is of a merely temporary character, easily 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 7 years and 2 months for males and 8 years for females; of those discharged, 5 months for males and 2 years and 2 months for females.
- (v) Western Australia. The period of residence of those who died during the year averaged 3 years 8 months for males and 7 years 4 months for females; of those who were discharged, 1 year and 4 months for males and 1 year 7 months for females.
- (vi) Tasmania. The period of residence of those who died was 7 years 4 months for males and 9 years 4 months for females; that of those discharged, 1 year 9 months for males and 1 year 7 months for females.
- (vii) Causes of Insanity. The proportion of causes of insanity to the total of ascertained causes in Australia in the five years 1913-17 shews that hereditary influences have been the chief factor, more than one-fifth of the total ascertained causes

coming under this head. Domestic troubles, adverse circumstances, &c., have also been a fruitful source. Cases due to intemperance in drink range from one in seven to one in ten

PROPORTION OF ASCERTAINED CAUSES, ETC., OF INSANITY, COMMONWEALTH, 1913 TO 1917.

Causes, Previous History, etc.	1913.	1914.	1915.	1916.	1917.
D	Per cent.				
Domestic trouble, adverse circum- stances, mental anxiety		10.1	10.6	9.6	9.7
T	100	12.9	11.6	10.3	10.5
		12.5	11.0	10.3	10.5
Hereditary influence, ascertained congenital defect, ascertained Pregnancy, lactation, parturition	22.6	16.6	22.9 .	22.4	21.8
and puerperal state, utering and ovarian disorders, puberty					
change of life	6.0	4.9	7.1	5.l	6.0
Previous attacks	8.7	10.8	13.0	14.9	14.1
Accident, including sunstroke	2.6	2.2	1.7	1.8	1.9
Old age	10.2	8.4	8.2	10.0	9.8
Other causes ascertained	26.0	34.1	24.9	25.9	26.2
All ascertained causes	100.0	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 875.)
- 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 estimated average annual expenditure on maintenance, &c., for the last five years was-New South Wales, £25,000; Victoria, £4,000; Queensland, £21,000; South Australia, £20,000; Western Australia, £25,000; Northern Territory, £3,000; total for Commonwealth, £98,000. In New South Wales the average number receiving monthly aid in 1917 was 2,142, of whom 920 were adults; in Victoria there were 320 under the care of the Aborigines Protection Board on the 30th June, 1917; in Queensland, at the end of 1917, there were 2,546 aborigines at the mission stations; in South Australia, there were 749 inmates at mission stations, while in Western Australia the aborigines and half-castes in the native institutions numbered 447. At the mission stations in the Northern Territory about 300 were in residence, but casual assistance and medical attendance are given to large numbers of natives every year.
- 9. Royal Life Saving Society.—In each of the State capitals, "centres" of the Royal Life Saving Society have been established. Life preservation is the object of the Society, and its immediate objects are (a) educative and (b) remedial. By stimulating the acquirement of the art of swimming in schools, colleges, clubs, &c., it is desired to bring about a widespread and thorough knowledge of natation and life-saving; while life-belts reels, lines, and other first-aid appliances are provided on ocean beaches and at places where they are likely to be in demand. Certificates of proficiency in various grades are issued after examination. In the year 1917-18 the number of certificates issued in New South Wales was 658; in Victoria 1,039; in Queensland 532; in South Australia 16; in Western Australia 531; in Tasmania 114; making a total for the Commonwealth of 2,890.

- 10. Royal Humane Society.—The Royal Humane Society of Australasia has for its objects (a) to grant awards for skill, promptness, and perseverance in life saving; (b) to provide assistance in cases of danger and apparent death; (c) to restore the apparently drowned: (d) to collect and circulate the latest information regarding approved methods and apparatus for life saving. In 1917, 89 awards of medals and certificates were made, Upwards of 350 lifebuoys have been provided at various places on the coasts, rivers, lakes, and reservoirs in the various States. Swimming is encouraged amongst school children, and awards made for proficiency.
- 11. 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 range from a bed for a night for casual callers in establishments ministering minor charity, to indoor treatment over long periods in 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, creches, 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 and mining accident relief funds, etc.
- 12. State Expenditure on Charities.—The table below gives the amount expended by Government on charities in each of the last five years, the figures for the various States being compiled, as far as possible, on the same basis:—

STATE EXPENDITURE ON CHARITIES, 1913 TO 1917.

State or Territory.		1913.	1914.	1915.	1916.	1917.
New South Wales Victoria Queensland South Australia Western Australia Tasmania Northern Territory		£ 683,102 468,588 261,237 117,204 201,215 62,205 5,602	£ 711,453 485,018 321,597 129,281 222,417 70,387 5,301	£ 779,303 541,668 307,899 167,272 228,064 78,092 4,864	£ 876,767 525,682 324,143 162,849 247,589 79,494 5,649	£ 863,713 543,225 372,342 191,748 178,477 88,445 4,488
Commonwealth	, •	1,799,153	1,945,454	2,107,162	2,222,173	2,242,438

13. 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 £3,750,000 annually.