

permanently detained. This would be at once a kindness to the poor drunkard, and an ultimate saving to the State.

3. Medical treatment at the inebriate hospital should be followed up by the judicious supervision and help of your agent or of a probate officer. By means of these combined agencies, that is, city hospital special treatment and subsequent supervision, in my judgment, from 25 per cent. to 30 per cent. of the class referred to may be saved from a life of drunkenness, and at comparatively small expense—probably not more than \$15.00 or \$20.00 each.

4. The farm colony, in my opinion, should be a strictly Government institution, while the city inebriate hospital might be under municipal control. Like other hospitals, it would be entitled to receive the usual per capita Government grant. One plan would be for the city to establish an inebriate hospital and receive pay patients from other municipalities. Thus, as an example, at Buffalo, N.Y., there is a workhouse erected by Erie County. In this workhouse prisoners from adjacent counties are sent and paid for by said counties, while at Detroit the city workhouse receives pay patients from the Federal Government, and, if I mistake not, from the State of Michigan also.

5. With regard to affording medical treatment to chronic inebriates at the Central Prison, I would say, firstly, that I am strongly of the opinion that this should be done; and, secondly, that it would be a humane thing to afford treatment at the very outset of their imprisonment. In the majority of cases I have no doubt whatever that the crave for stimulants can be removed, and, if so, it would be humane to remove this crave as soon as possible. The treatment would then become an important factor in the reformation of prisoners both before and after their discharge. It would have a good moral effect upon the men, and they would be more amenable to discipline and to the other reformatory influence of the prison. A prisoner craving for alcoholic stimulants is in a state of nervous irritability, and he is more apt to be "out of sorts" with himself, and out of harmony with his environment, than a prisoner not so afflicted. Will power would be increased by this combined medical and disciplinary treatment, and they would regain the power to resist temptation and to say "No," when necessary. I take it for granted, of course, that a helping hand would be extended by your Association to these men upon their discharge, the same as in other deserving cases, viz., work found, tools or money loaned, etc., etc., and that a judicious supervision would be exercised over them for several months thereafter.

6. The treatment should, of course, be made purely voluntary on the part of the prisoner, *i.e.*, nothing like coercion should be used. I would also suggest that the cost of the treatment be charged against the prisoner as a loan, to be returned as soon as he is able to return it, and that, say, \$10.00 be the amount charged for said treatment. Such arrangement, I am persuaded, would have a salutary effect. "Cheaply got, cheaply prized," is a truism that will hold as good here as in other cases.

You are aware, of course, that persistent efforts have been made during the past year to induce the Ontario Government to sanction the introduction of proprietary remedies into our penal institutions for the medical treatment of inebriate prisoners. In addition to my recent visitation of inebriate institutions, and my interviews with specialists in alcoholic inebriety, I have given the whole question very careful study for several months past, and, as a result of this enquiry, I find that I cannot consistently or conscientiously recommend the Government to accede to this request.

In making my recommendation on this question I find that I cannot do better than favor the introduction in the Central Prison of the treatment