



Province of Ontario

Immigration and Deportation of Defectives
AND
Statistics Relating thereto.

Reprint of Introductory Remarks of S. A. Armstrong, Inspector of Prisons and Public Charities, and Dr. C. K. Clarke, Medical Superintendent of Toronto Hospital for Insane, contained in the Report on Hospitals for Insane for Ontario, for 1907.

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REPORT

Of S. A. Armstrong, Inspector of Prisons and Public Charities of Ontario for the year 1907.

GENERAL OPERATIONS.

On December 31st, 1907, exclusive of insane persons in the Homewood Sanitarium at Guelph, there were in the Hospitals for the Insane and the Hospital for Idiots of Ontario 5,315 insane persons and 775 idiots and feeble-minded, divided as follows:—

Males	2,931
Females	3,159

The net increase for the year was 178.

During the past year a special effort has been made by all the Superintendents to provide accommodation for, and to facilitate the demands of, the constantly increasing number of patients for whom application for admission had been made in the usual way, or who had been certified as insane under magistrates' warrants. The accommodation has been taxed to the utmost to meet the demands, and the increase in the number of patients, as above, is probably indicative of what may be anticipated in the future.

REVENUE.

The revenue collected from paying patients during the year amounted to \$166,419.63, a net increase of \$1,015.55. To this must be added the sum of \$90,038.80, being the amount chargeable against the municipalities, under 6 Edward VII., Chap. 9, towards the maintenance of patients for whom there is paid less than \$1.50 a week, making a total revenue for the year of \$256,458.43.

The number of patients for whom maintenance was contributed during the year was, 1,797, a net increase of 69.

MOVEMENTS OF PATIENTS.

The daily average number of patients in the Provincial Hospitals during the year was 6,053.

The total number of admissions, 1,162, of which number 262 were admitted to Toronto Hospital.

The total number of discharges during the year was 537.

The total number of deaths was 413.

The condition of patients discharged during the year was:—

Discharged, recovered	312
Discharged, improved	177
Discharged, unimproved	48

Total

537

INCREASED ACCOMMODATION.

As a result of the appropriation made by the Legislature at its last session the re-building of one of the buildings in connection with the Penetang Hospital was commenced during the year. It is anticipated that by May 1st of the present year the building will be ready for occupancy. This will give increased accommodation for approximately 120 patients and will somewhat relieve the congestion at present existing in other Provincial Hospitals.

My attention is constantly being called by the Medical Superintendents to the necessity for provision being made by friends or Municipal authorities for the care of the large number of chronic insane who are not fit subjects for a Hospital for the Insane, and who ought to be discharged therefrom and cared for by friends or in County Houses of Refuge. I have made repeated efforts to have a number of these patients taken care of outside so as to permit their discharge, but the indifference, and in some instances opposition, displayed on the part of the friends, have rendered my efforts ineffective. I referred last year to the large number of patients in residence who ought to be removed to Houses of Refuge, but the County authorities do not readily acquiesce in such removal.

PROVISION FOR ACUTE INSANE.

A radical change in the treatment of the acute insane will have been put into effect before the close of the present year. At the London and Hamilton Hospitals for the Insane are buildings which were designed for infirmaries for the treatment of those suffering from physical ills. Changes are now being made by which these buildings will be set apart—not only for the care of those suffering physically, but as wards for the reception of cases of acute insanity. Complete Hydro-therapeutic and Hot Air equipments will be installed in each infirmary. By this means the acute cases will be segregated—many doubtless never seeing the Hospital proper before discharge, and every opportunity for the careful observation and treatment of each case will be afforded.

These changes, when carried fully into effect, will place this Province in the foreground in respect to the treatment of the acute insane. In other Provincial Hospitals wards are set apart for the reception of acute cases, but owing to existing structural conditions and to the overcrowding of the wards, complete isolation of the patient does not obtain as it will at London and Hamilton. It is hoped that in time to come every Hospital will have its own reception building so that a better classification and segregation of the patients will be possible and a more effective treatment of the acute insane secured.

CLINICAL RECORDS AND REGULATIONS.

During the past year in all the Hospitals, with the exception of those at Cobourg, Penetang and Orillia, the new system of recording clinical notes of cases was installed. This system has proved most satisfactory and has produced a degree of uniformity in the clinical records which did not before exist. In compiling the data necessary for completion of the history of a patient, greater attention will be paid to the case by the attending physician than has been possible heretofore and through frequent staff conferences every member of the Medical Staff will become conversant with the patient's history.

New rules and regulations for the guidance of officers and employees have been compiled and distributed throughout all the Hospitals. The original rules and regulations had been compiled many years ago and had outlived their usefulness.

TUBERCULAR PATIENTS.

From a recent census taken by the Department we find that in our Hospitals for the Insane, we have 196 tubercular patients of whom 76 are male and 120 female patients. In many of the Hospitals a special effort is made to segregate this class, but with the large number of other patients waiting

admission, and with every ward taxed to its utmost, complete isolation is rendered difficult. In the Hospital at Hamilton a building is being erected to accommodate only the tubercular patients, and when complete, these patients will not only be isolated from others the year round, but will be afforded better facilities for treatment. The building will accommodate ten male and ten female patients and the necessary staff of nurses. By enlarging this building, sufficient accommodation may be secured to house the tubercular patients at present in the Hospitals west of Toronto, and the construction of a similar building in connection with the Hospital at Kingston would provide accommodation for the patients east of Toronto.

STATISTICS (INSANE).

For convenience in distinguishing persons born outside of Canada from the native born, I have, in the statistics following, used the terms, "foreign born" and "native born."

TABLE A. *Showing the number of insane patients in residence in Hospitals for the Insane in the different Countries, including Ontario, and the decennial increases, excepting where otherwise mentioned:—*

Year.	Country.	Patients.	Increase.
1887.....	Ontario.....	2,915	
1897.....	".....	4,254	45.5%.
1907.....	".....	6,090	43.5%.
1889.....	England and Wales.....	84,340	
1899.....	".....	105,086	24.6%.
1907.....	".....	123,988	18% for eight years.
1887.....	Ireland.....	15,147	
1897.....	".....	19,590	29.3%
1906.....	".....	23,554	20.3% for nine years.
1887.....	Scotland.....	11,672	
1897.....	".....	14,500	24.2%.
1906.....	".....	17,593	21.3 for nine years.
*1880.....	United States.....	91,959	
1890.....	".....	106,485	15.8%.
1894.....	".....	158,040	49.7% for fourteen years.

*In 1880 insane persons outside the Hospitals were included.

The patients admitted during the year 1907 to the Ontario Hospitals for the Insane may be classified as follows:—

Native born	816
Foreign born	346
	1,162

The total number and nationality of patients in residence in the Hospitals for the Insane, and the Hospital for Idiots, on December 31st, 1907, is as follows:—

Canadians		4,573
English	544	
Irish	439	
Scotch	223	
United States	112	
Germany	71	
Russia	13	
All other countries	115	1,517
		6,090

The population of Ontario, compiled from municipal and other statistics, is estimated at 2,356,304.

Native born	1,967,112
Foreign born	389,192
Total	2,356,304

The foreign born, while representing only 16.52 per cent. of the population of Ontario, yet represents about 25 per cent. of the patients in residence in the Hospitals for the Insane.

RATIO OF INSANE FOR ONTARIO AND OTHER COUNTRIES.

The ratio of insane in Ontario to the estimated population is 1 to 443, or 22.57 per 10,000, divided as follows:—

Native born	1 to 508, or 19.68 per 10,000
Foreign born	1 to 270, or 37.37 per 10,000

The following statement shows the ratio of insane in other Countries:—

Year.	
1906 England and Wales	1 to 282, or 35.48 per 10,000
1906 Ireland	1 to 186, or 53.70 "
1906 Scotland	1 to 276, or 36.20 "
1906 United States	1 to 537, or 18.62 "

TABLE B. *Showing the per cent. distribution by country of birth of the foreign born insane and idiots in the Hospitals of Ontario on December 31st, 1907, and in order to facilitate comparison, the percentages that each*

nationality or group of nationalities formed of the total foreign born in Ontario on December 31st, 1906:—

Country of birth.	Per cent. distribution of foreign born to total foreign born patients, Dec. 31st, 1907.		Per cent. distribution of foreign born population, Dec. 31st, 1906.	
All foreign countries	100.0	1,517	100.0	389,192
England.....	35.9	544	43.9	170,884
Ireland.....	28.9	439	18.3	71,245
Scotland.....	14.7	223	15.1	58,610
United States.....	7.4	112	12.7	49,406
Germany.....	4.7	71	4.9	19,149
Russia.....	.8	13	1.0	3,835
Other countries.....	7.6	115	4.1	16,063

The order of foreign nationalities enumerated in Table B with regard to the relative numbers of insane and idiotic they contributed to the Hospital population is about as follows:—

- | | |
|--------------|-------------------|
| 1. Ireland. | 4. Russia. |
| 2. Germany | 5. England. |
| 3. Scotland. | 6. United States. |

Conditions similar to our own in respect to foreign born insane exist in the United States, according to the United States census. Ireland furnished only 15.6 per cent. of all foreign born in the United States in 1900, but 29 per cent. of all foreign born white insane enumerated in Hospitals on December 31st, 1903. In Ontario the figures stand 18.3 per cent. to 28.9 per cent. respectively. Relative to their numbers, the Irish furnish a much larger proportion of foreign insane in Hospitals than any other nationality, and is in keeping with the very high ratio of insanity in Ireland as previously mentioned. More favorable conditions are noticeable among those born in the United States than among the English. Persons born in the United States comprise 12.7 per cent. of all foreign born in Ontario, but contribute only 7.4 of the foreign born insane.

In the United States in 1900 persons of Canadian birth (including Newfoundland) formed 11.4 per cent. of all foreign born, yet contributed only 6.5 per cent. of the foreign born white insane in 1903.

The order of foreign nationalities with regard to the relative numbers of insane they contributed to the Hospital population of the United States in 1903 is about as follows:—

- | | |
|------------------|------------------------------|
| 1. Irish | 6. Hungarians and Bohemians. |
| 2. Scandinavian. | 7. English and Welsh. |
| 3. German. | 8. Italians. |
| 4. French. | 9. Russians and Poles. |
| 5. Scotch. | 10. Canadians. |

STATISTICS (CRIMINAL).

COMMITALS TO GAOLS.

The number of foreign born committed to the Gaols and Central Prison in Ontario during the year 1907 greatly exceeds the number we might expect, keeping in mind the fact that the foreign born represent only about 16.52 per cent. of the entire population.

The number of persons committed to the Gaols for the year 1907, exclusive of District lock-ups, was 11,539, classified as follows:—

Native born	7,216
Foreign born	4,313
Total	11,529

The foreign born representing 38 per cent. of the total number committed.

TABLE C. *Showing the per cent. distribution by birth of the foreign born prisoners in the Gaols of the Province on December 31st, 1907, and in order to facilitate comparison the percentages that each nationality or group of nationalities formed of the total foreign born in Ontario on December 31st, 1906.*

Country of birth.	Per cent. distribution of foreign born to total foreign born prisoners, Dec. 31st, 1907.		Per cent. distribution of foreign born population, Dec. 31st, 1906.	
	Per cent.	Number	Per cent.	Number
All foreign countries.....	100.0	4,313	100.0	389,192
England.....	35.7	1,540	43.9	170,884
Ireland.....	20.8	894	18.3	71,245
Scotland.....	12.9	560	15.1	58,610
United States.....	15.4	665	12.7	49,406
Italy.....	3.5	154	1.4	5,367
Russia.....	1.8	77	1.0	3,835
Norway and Sweden.....	1.8	77	1.0	3,976
Germany.....	1.3	59	4.9	19,149
All other.....	6.8	287	1.7	6,720

The order of foreign nationalities enumerated in Table C with regard to the relative numbers of prisoners they committed to the Gaols is about as follows:—

- | | |
|-----------------------|--------------|
| 1. Italy. | 5. Ireland. |
| 2. Russia. | 6. Scotland. |
| 3. Norway and Sweden. | 7. England. |
| 4. United States. | 8. Germany. |

TABLE D. In this table the distribution made in Table C is grouped by Nationalities for purposes of comparison.

Country of birth.	Per cent. distribution of foreign born (grouped) to total foreign born prisoners Dec. 31st, 1907.		Per cent. distribution of foreign born population Dec. 31st, 1906.	
All foreign countries	100.0	4,313	100.0	389,192
British Isles	69.4	3,002	77.3	300,739
United States	15.4	665	12.7	49,406
All other	15.2	646	10.0	39,047

RATIO OF PRISONERS COMMITTED TO GAOLS.

The ratio of prisoners committed to the Gaols in Ontario to the estimated population is as follows:—

Native born	1 to 273 or 36.6 per 10,000
Foreign born	1 to 90 or 111.1 “

CENTRAL PRISON.

Of the 11,529 prisoners committed to Gaols, 693 were sentenced to the Central Prison, classified as follows:—

Native born	404
Foreign born	289
Total	693

The foreign born representing 41.0 per cent. of the total number committed.

TABLE E. Showing the per cent. distribution by birth of the foreign born prisoners in the Central Prison on December 31st, 1907, and in order to facilitate comparison the percentages that each nationality or group of nationalities formed of the total foreign born in Ontario on December 31st, 1906.

Country of birth.	Per cent. distribution of foreign born to total foreign born prisoners Dec. 31st, 1907.		Per cent. distribution of foreign born population Dec. 31st, 1906.	
All foreign countries	100.0	289	100.0	389,192
England	33.6	97	43.9	170,884
Ireland	9.3	29	18.3	71,245
Scotland	11.5	33	15.1	58,610
United States	23.2	67	12.7	49,406
Italy	6.9	20	1.4	5,367
Norway and Sweden	2.9	6	1.0	3,976
Russia	1.8	5	1.0	3,385
All other	9.5	34	2.7	10,696

The order of foreign nationalities enumerated above with regard to the relative numbers of prisoners received in the Central Prison is about as follows:—

- | | |
|-----------------------|--------------|
| 1. Italy. | 5. England. |
| 2. Norway and Sweden. | 6. Scotland. |
| 3. United States | 7. Ireland. |
| 4. Russia. | |

TABLE F. *In this table the distribution made in Table E is grouped by nationalities for purposes of comparison.*

Country of birth.	Per cent. distribution of foreign born (grouped) to total foreign born prisoners December 31, 1907.		Per cent. distribution of foreign born population December 31, 1906.	
All foreign countries	100.0	289	100.0	389,192
British Isles	54.4	157	77.3	300,739
United States	23.2	67	12.7	49,406
All other	20.3	65	10.0	39,047

RATIO OF PRISONERS SENTENCED TO CENTRAL PRISON.

The ratio of prisoners sentenced to Central Prison in Ontario to the estimated population is as follows:—

Native born	1 to 4,867 or 20.55 per 10,000
Foreign born	1 to 1,347 or 74.25 " "

THE BURDEN OF FOREIGN DEPENDENT AND DELINQUENT.

The actual extent of the burden of foreign dependent and delinquent classes upon the community is most difficult to estimate. In addition to the cost of supporting persons actually resident in Institutions, there is a far larger cost for increased police, law courts and machinery for justice, for private charity, for public education and above all for the effects of physical and moral contagion upon the rest of the population.

The last Canadian census having been taken in 1901, it is difficult to ascertain with accuracy the effect of recent immigration. We have available, however, the annual returns from our Provincial Hospitals and from our Gaols and Prisons from which I have been able to compile tabular statements demonstrating the severity of the burden imposed on Ontario in the maintenance of the foreign born. These tables must impress every reader with the urgent need for further restrictive regulations in respect to immigration.

TABLE G. Showing proportion of admissions of Native and Foreign Born to the Hospitals for Insane for the past five years, and the annual cost of maintenance of the Foreign Born:—

Year.	Native Born	Per cent. admissions.	Foreign Born.	Per cent. of admissions.	Annual cost of maintenance of Foreign Born.
1903.....	709	80%	180	20%	\$24,613 20
1904.....	737	77%	221	23%	31,079 23
1905.....	850	75%	280	25%	37,024 40
1906.....	827	71%	341	29%	48,543 65
1907.....	816	70%	346	30%	51,744 30
					<u>\$193,004 78</u>

The increased cost for maintenance of foreign born in 1907 over 1903 being \$27,131.10.

The table shows that for the last five years there has been a marked decrease in the number of admissions of native born insane and a most marked increase in the number of admissions of foreign born insane.

The average age of the foreign born patients admitted for 1907 is 37, and the expectation of life at that age is 29.64 years. If we take \$150.00 as an average yearly cost, which is exclusive of interest on capital account, depreciation, etc., there is a bill of \$1,505,100, which Ontario must pay in the future for the foreign born admissions of 1907 only. It must be borne in mind that the class of foreign born patients admitted to the Hospitals is different from the native born, and the percentage of recoveries and discharges almost nil, as reference to Dr. Clarke's report in the Appendix submitted herewith will show. The foreign born are of a particularly defective type with, in many instances, a pedigree of insanity as their foundation.

The total cost to Ontario for maintenance of foreign born prisoners in the Gaols amounted to	\$61,339.23
Based on proportion of population the cost should have been	28,115.77
A difference of	\$35,224.46
The total cost of maintaining the foreign born prisoners in the Central Prison amounted to.....	\$25,425.80
Based on proportion of population the cost should have been	10,629.20
A difference of	\$15,796.60

RECAPITULATION OF COST OF MAINTENANCE.

To recapitulate, we find that the cost to Ontario for the maintenance of foreign born in the Gaols and Central Prison and in the Hospitals for the

Insane, etc., exclusive of cost of transportation on removal to prison, law costs, maintenance of buildings, etc., for the year 1907 was as follows:—

1,517 patients in Hospitals for the Insane	\$227,550.00
4,313 prisoners in Gaols	61,339.23
289 prisoners in Central Prison	25,425.80
Total cost	\$314,315.03

If the figures were available as to the cost of maintaining the large number of foreign born who are being cared for in the various Refuges, Charities and Houses of Industry in the Province, it would be found that Ontario is contributing yearly an enormous sum of money for maintenance—an amount disproportionate to the percentage of foreign born residents.

DEPORTATION.

In my report for 1906, I referred to the work of the Department in the deportation of undesirable immigrants, and stated that nineteen persons had that year been deported. During the year 1907 the work has been prosecuted with greater vigor and 87 persons have been deported—representing a saving to the Province in future maintenance of approximately \$350,000. A large number of cases are in course of investigation and at least 25 more undesirables will be removed during the early part of the current year. Unfortunately we have many patients who undoubtedly qualify for deportation, but whose mental condition is such as to preclude any possibility of securing the information necessary to deport them.

From the cases which have come under my observation in the course of deportation proceedings, it is evident that the system of inspection maintained by the Federal Government at the port of landing is totally inadequate to the demands made upon it by the large immigration of the past few years. That Ontario has to suffer because of this inefficient and superficial inspection is evidenced by the statistics given above.

Many cases of foreign born of the most defective type have been permitted to land in Canada, shortly to find their way to our Hospitals for the Insane. These people had either been in Asylums in their native Country previous to sailing, or were members of families in which there were one or more insane.

With the experience of the United States in immigration and the exceptionally complete system of inspection evolved from that experience to work upon; it seems difficult to comprehend why the Federal Government has not endeavored to amend its system. In order to profit by such experience to the fullest extent possible the Dominion Parliament should pass such restrictive regulations and the Government should introduce such a rigid system of inspection as will prevent the landing in this country of the criminal and deficient elements which have to a marked degree made up the recent immigration.

Under existing conditions in Canada in attempting to effect the deportation of undesirables, we are confronted with many difficulties, the chief of which is that of looking up the record of the immigrant.

It is necessary to ascertain the name of the ship in which he sailed and the date of landing, so as to enable the Department of Immigration at Ottawa to locate the ship's manifest. In many cases patients are too insane to give

the required information, or they are unable to speak English and their condition renders it, in many instances, impossible even to ascertain their nationality so as to enable us to secure the services of an interpreter. Prisoners who do not wish to return have but to furnish inaccurate information as to the name of the ship and the date of their arrival in Canada to frustrate the efforts of this Department to effect their deportation. To correct this difficulty it would merely be necessary to install a card catalogue containing the names of all arriving immigrants, date of landing, name of ship on which they came and such other information as is needed for purposes of identification. Until this, or some other system, is introduced by the Immigration Department, just so long will our Hospitals for the Insane continue to maintain insane immigrants, and the prisoners and defectives, upon being given their liberty, continue a menace to society at large.

In addition to a medical certificate, which should be given not only by a physician familiar with the immigrant's previous history, but by the ship's physician, certifying that he is mentally and physically fit, there should be a certificate from the head of the Municipality in which the immigrant was domiciled that such immigrant has not been insane nor an inmate of an asylum or other place of detention, and that neither his father, mother, brothers or sisters have been insane.

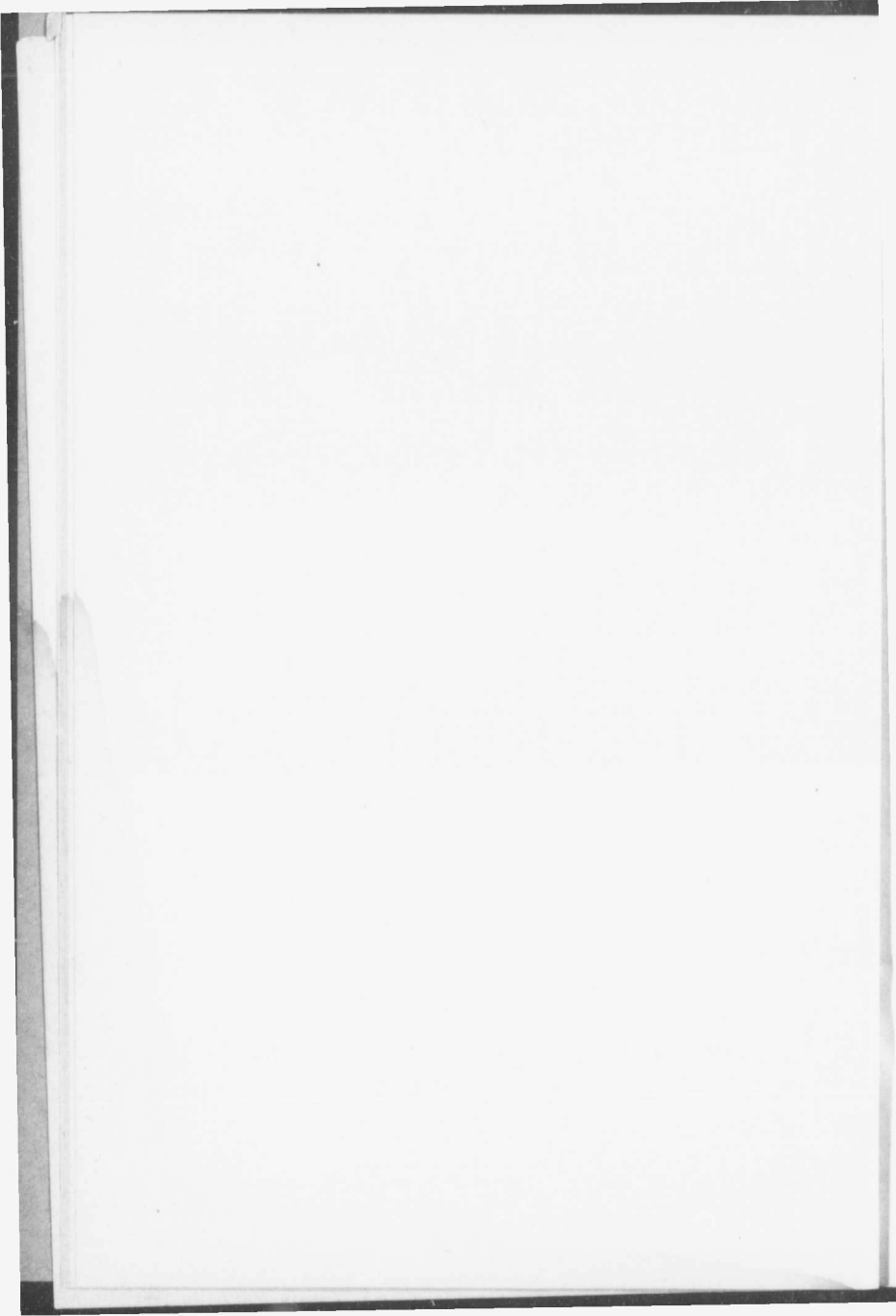
Such a certificate would operate as an admission by the Municipality that the immigrant was properly domiciled therein at the time of his emigration, and should deportation proceedings be necessary the Municipality would not be able to evade the responsibility for his maintenance on his being deported. Legislation should provide that in the event of there being a misrepresentation of facts in such certificates by either the immigrant, the physicians or the head of the Municipality, the immigrant will be subject to deportation within a stated period, say, within five years from the date of his arrival.

Lastly, a more detailed medical examination of the immigrant should be made, either on arrival or when on board the steamer in transit, by men who are skilled in mental diseases. The fact that an examination in greater detail than is at present being made will have a tendency to delay either the Transportation Companies or the immigrant, should not be a sufficient justification for the continuance of a system which, if not amended, can only tend to increase the heavy burdens already imposed on our Provinces for the maintenance of these defectives.

RACIAL EFFECTS OF IMMIGRATION.

Apart from the social and economic effects of immigration on a country, the racial effects are undoubtedly more far-reaching and important than all other. The exodus of the native born residents of this Province to the West and to the United States and the introduction to Ontario of men of different type and race must all have marked influence on our future history. We should eliminate the dependant and delinquent classes by refusing them entrance to the country, and we should admit only those persons who can show that mentally and physically they are fit to become citizens; for on the quality of the immigrants will depend what kind of men shall inherit this Province in the years to come.

S. A. ARMSTRONG,
Inspector.



HOSPITAL FOR INSANE, TORONTO.

ANNUAL REPORT OF THE MEDICAL SUPERINTENDENT FOR THE YEAR ENDING
DECEMBER 31ST, 1907.

To S. A. ARMSTRONG, Esq., and E. R. ROGERS, Esq.,
Inspectors of Hospitals for the Insane, etc., Toronto.

GENTLEMEN,—In accordance with the statutory requirements, I have the honor to submit the sixty-seventh annual report of this hospital for the year ending December 31st, 1907.

The admissions for the year have numbered two hundred and sixty-two. This is a large admission rate, but is easily accounted for when the facts detailed under the heading of "Immigration" are taken into consideration. The remarks made upon this subject in last year's report are amplified and a careful analysis of the present undesirable condition of affairs made.

The discharges were one hundred and sixty-two, that is 62 per cent. based on the admissions.

Many of these are found on the improved list as we are reluctant to call any case recovered if showing any evidence of mental reduction. This does not accord with common practice but is the only honest method of compiling returns.

The deaths were seventy-two, and as usual general paresis was a prominent cause of death. The suicides were regrettable incidents but unavoidable. One occurred through the unwillingness of the friends, who had the patient with them at their own home, to allow him to return to the Hospital in charge of the attendants who were waiting for him.

TRAINING SCHOOL FOR NURSES.

The work of the Training School was carried on successfully, the first class graduating eleven nurses.

DEFECTIVE AND INSANE IMMIGRATION.

For years I have, publicly and privately, spoken of the danger to which Canada was exposing herself in encouraging the immigration of classes which should be avoided, if the quality of our population is to be maintained. We are now face to face with a trouble, the magnitude of which, only those who are conversant with the facts, are able to gauge. Toronto and the County of York supplies the Toronto Hospital with its patients, and it is not difficult to make a fairly correct analysis of the different elements which go to make up our admissions. Let us take the figures regarding admissions for 1907 and we are at once confronted by several unpleasant surprises, to which I shall refer. Two hundred and sixty-two persons were admitted, less than half of these were Canadians, or to speak accurately, these admissions were made up of one hundred and thirty-four foreign born persons and one hundred and twenty-eight Canadians. Of course many of the foreign born had been resident in Canada for some years, but no less than seventy-seven were recent arrivals, who should have been deported if a satisfactory law had been in force. To put it more strongly, the majority of these people should not have been allowed to enter Canada.

Owing to technicalities only thirty-four of this number come within the requirements of the Immigration Act, hence Ontario must assume the cost of maintenance of the forty-three who cannot be returned to their own countries. This means that the Province will have to expend two hundred and twenty-four thousand dollars for the support of forty-three people who have not the slightest claim to our consideration. The basis of this calculation will be given later on. It is all very well to talk about pumping in the population, but surely the streams tapped should not be those reeking with degeneracy, crime and insanity. The population of Toronto and the County of York is just about 400,000 and basing the admission list on this, one person in every fifteen hundred became insane, a proportion altogether too large. Granting though, that this actually occurred what do we find? Seventy-seven of these admissions were recent arrivals, or about one-third; in other words the new comers should number more than one hundred and thirty-two thousand if these persons were of the average mentality. Granting that the population was augmented by five thousand foreigners, a number probably far greater than facts would justify us in accepting, the proportion of insane in these is twenty-six times greater than it should have been.

No matter how you regard it, the picture is one we cannot contemplate with equanimity. Bad as it is in itself we can fairly suppose that the proportion of criminals and defectives is almost as large as the proportion of insane, and when we think what these weaklings are likely to do for the future generations we cannot help but be pessimistic regarding the character of the present influx of foreigners.

It is inevitable that most tides of immigration will carry with them a certain proportion of those who have failed in life, but at the present time there is a strong suspicion that many of those we have received were deliberately sent out from Great Britain, to get rid of them, and an analysis of their characteristics is an interesting study in degeneracy of a type we rarely see in Canada. Sexual perverts of the most revolting kind, insane criminals, the criminal insane, slum degenerates, general paretics, in fact weaklings of all objectionable types are represented. Whole families of degenerates have been found, one such family was returned to England; another should have been similarly treated; a husband and wife (both insane) were deported and so the story goes. To show how the thing works out practically: An imbecile young woman admitted to the hospital was the wife of a confirmed alcoholic—an old man. She left a progeny of six children to be cared for by the community. One may easily guess what the future of these children is likely to be.

One man admitted was insane when he came to Canada several years ago. His insanity was of mild type (*Dementia Praecox*) and he found a woman weak enough to marry him. The children are an interesting study in criminality and, young as they are, have already made their mark in criminal circles.

One sexual pervert hailing from the London Slums we find has induced others of his family to come here. Of these one has already reached us, the others are of weak and unstable type.

Then again if we analyse the mental disease of the recent arrivals we learn just what is to be expected. The seventy-seven included fifty cases of *dementia praecox*, about 65%, and when it is recollected that normally the proportion should have been about fifteen to twenty per cent., we begin to understand the quality of the immigration. There were four sexual perverts and exhibitionists, five men with criminal records, three general paretics, two

paranoiacs, two epileptics, two imbeciles, and nine cases of maniac depressive insanity, the only hopeful class in the group. Many of these people had been in Hospitals for the Insane in other countries, and their insanity was of such character that there was no chance of their succeeding in Ontario. I have before me a list of six cases from this year's admissions, sent to Canada simply with the idea of getting rid of them. With some of these the friends protested bitterly at the deportation of the patient, frankly admitting that they had been sent to Canada to shift the responsibility of their care to other shoulders, one man naively suggesting that if his sister returned he would again have to contribute for her support in the local asylum, and objected to doing so.

Another on the list had been liberated from an English Hospital for the Insane and was sent to Canada by his friends with the idea of getting him away from his mental trouble. He was shortly followed by a young woman who married him. The inevitable occurred, and the unfortunate young man had a recurrence of mental trouble. Fortunately we were able to deport husband and wife.

A third on the list had been in no less than five asylums, but before we could get his case arranged for deportation he escaped from the Hospital. Some months afterwards we learned that he made a determined effort to commit suicide, and although this was not immediately successful he eventually died from the indirect effects of this attempt.

A fourth who was a general paretic, far advanced, was no doubt deliberately shipped to Canada to get rid of him.

A fifth, who was an epileptic and of criminal type, was sent to Canada because of his defects and on account of his being a burden to his relatives. His friends are imbued with imperialistic ideas and cannot see that this part of the British Empire should not assume what might fairly be regarded as the natural burdens of another portion of it.

To show how startling is the preponderance of the foreign born among the insane of the country as represented by the admissions to Toronto Hospital, a very brief study is necessary. It is not a new question and yet one that the persons who thunder for hordes of immigrants to swell our population would do well to regard. Of course I am well aware that "figures unbased on facts are an image for fools to hoard or to circulate," but by a careful study of the unpleasant facts which are available, we learn that the grievance we have to-day is an old story and Toronto Hospital has always suffered. It may be argued that we draw our population from the centres in which the foreign born are in greater proportion than in the rural districts, but such has not always been the case, and what do we find in the days when Toronto Hospital served practically the whole Province. In 1854, of the first 1,000 patients admitted, the nationalities were as follows:

Irish	434
English	180
Scotch	146
Canadians	162
Other Countries	78

I,000

At that date the Canadian population of Ontario was greater than the foreign and yet the proportion of insanity was infinitely smaller.

Between 1859 and 1864—995 patients were admitted:

Irish	353
English	143
Scotch	149
Canadians	266
United States	43
Other Countries	41

The census of 1861 gave the population of the U. Canada as 1,396,091 made up as follows.

Irish	191,231
English	114,290
Scotch	98,792
Canadians	902,879
Other Countries	88,899

1,396,091

Quoting from Dr. Workman's report "The table of nativities of the patients admitted in the last six years shows that the three nationalities: Irish, Scotch, English with an aggregate of 401,313 in the population of the Province, have sent in 645 patients, whilst the Canadian nationality, amounting to 902,879 has sent in only 266, in other words a part of the Provincial population equal to 29 per cent. has contributed to the Hospital population nearly 67 per cent. whilst another part, the native Canadian, equal to nearly 65 per cent. in the Provincial population has contributed only about 27 per cent. to the Hospital population. If the native Canadian population sent in patients in the same proportion as the Irish, English, and Scotch together, they would have to furnish 1,141 instead of 266. But taking into consideration the fact that the population of foreign birth is almost altogether or nearly, of adult age, and that the native Canadian includes those under adult age, the proportion of which is almost 40 per cent. in the whole population, we should find that the fair proportion of Hospital admissions for native Canadians would be 865, whereas they have sent in only 30 per cent. of this number, or in other words the Irish, English, and Scotch nationalities sent in the proportion of ten to three as compared with the native Canadians. The disproportion would be still greater comparing the native Canadians with the Irish. The contributions of the latter from given equal numbers being over four to one."

"It appears manifest, that if we have much, or an undue share of insanity in Western Canada, it can by no means be said it is of home production. In this respect, as in our material products, we have been very large importers, for about two-thirds of our Hospital inmates have been natives of the United Kingdom and less than one-third of Canada and the United States. It certainly then, approximates to swaggering on the part of the natives of the British Islands when they reproach Canadians as a people more prone to insanity than themselves; especially when we find that they contribute only about 29 per cent. of the population."

The disproportion was really greater than Dr. Workman made it because a large number of children must have been included in the numbers of the foreign born, and due allowance should have been made for this. The figures given make it quite apparent that Ontario has always been unduly taxed for the maintenance of imported defectives.

Apparently, as time went on the character of the immigration changed, fewer persons from Ireland and more from other parts of the British Empire.

In 1876 there had been admitted to Toronto Hospital:

Irish	1,833
English	777
Scotch	688
Canadian	1,316
United States	173
Other Countries	150

In 1888

Irish	1,833
English	1,063
Scotch	796
United States	231
Canadians	2,230
Other Countries	212

Nine years later the foreign born still distanced the native Canadians in spite of the disproportion in numbers of population.

In 1897 there had been admitted:

Irish	2,097
English	1,393
Scotch	911
Canadians	3,258
United States	302
Other Countries	284

In 1906 there had been still further change in the proportion and the English immigration was evidently increasing, no less than 53 of the admissions being from England and only 29 from Ireland.

The total admissions then were:

		1907
Irish	2,224	2,246
English	1,671	1,743
Scotch	978	989
Canadian	4,252	4,380
United States	349	357
Other Countries	345	367

In the Year Book for 1907 we find the population of Ontario made up as follows. (This is taken from the last Dominion Census of 1901.)

Canadians	1,858,797
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Foreign.

British	239,873
British Islands	2,530
Germany	18,699
Italians	3,301
Russia	3,337
United States	44,175
Other Countries	7,365

320,080

Thus it is seen that Canadians should supply five-sixths of the Hospital population. In other words, while in the admissions we might have looked for 8,405 Canadians among the 10,087 admissions, only 4,380 were found, while the foreign born furnished 5,707 instead of 1,681. Surely these figures tell their own tale and if the statistics of the present year are any criterion of what is to follow if the influx keeps up, surely something must be done to make the inspection at the ports of departure and entry far more rigorous than that adopted at present.

Some may argue that we magnify the gravity of the situation, but surely those of us who have been scanning family histories for many years are in a position to speak with authority, although we cannot begin to estimate the cost to Canada of the importation of so many defectives, not only now, but in the past. The figures I have already quoted must make plain the suspicion that we have unwittingly taxed ourselves unfairly. Then again when we begin to estimate what undesirable importations of former days have cost us for support in asylums, prisons and reformatories, we may well heed the warning. The quality of some of the classes allowed to settle in Upper Canada is easily obtained by reference to historical records, the results guessed at by a study of asylum and prison records. Some of these are almost as striking as the well known Jukes family history in New York State.

In the United States, where immigration has been encouraged to such an enormous extent of late, their experiences have been such that we cannot disregard them, as our day of reckoning is swiftly approaching if we do not take heed. We must realize that social conditions and conditions of mind are not to be dissociated, and if we must assimilate a large foreign born element it should be of the best possible kind.

Dr. Thos. W. Salmon writing recently on the Relation of Immigration to the Prevalence of Insanity says: "Before 1900, the foreign born insane in the hospitals fairly represented the foreign born population and the Special Report on the Insane and Feeble Minded, recently issued by the Census Bureau provides very valuable material for studying the part played by the "old immigration" in the prevalence of insanity in the U. S., but the "new immigration" has been of such recent origin that it is difficult to estimate the value of data relating to its influence. In many States the effects of the "new immigration" have not been felt at all, but in the State of New York, which receives more than one-third of the yearly quota of the "new immigration" and which has in its institutions more than 28 per cent. of all the foreign born insane of the United States. Some interesting material is available for study: In that State, the ratio of the insane to the population has risen from one in 675 in 1875 to one in 294 in 1905. In 1906, forty-six per cent. of the whole number of patients admitted to New York State Hospital were of foreign birth, while the foreign born population was but twenty-six per cent. of the whole population of the State."

The striking resemblance to the statistics of Toronto Hospital must be observed, although the condition here is even worse than in New York State. Another point must not be overlooked and that is the recent arrivals who become insane, are, as the proportion of cases of Dementia Praecox shows, young, consequently their expectation of life must be great. Putting it at twenty-five which is two years higher than that given by actual observation in New York State, the expectation of life would be thirty-six years—that is—allowing \$145.00 as the annual per capita cost of each patient, he would cause an outlay on the part of the government of \$5,220. If this is an approximation, and I think it a very modest statement, for this year's accumulation, we will expend eventually \$224,460 during the next thirty-

six years, in entertaining these importations. That amount merely covers the actual outlay for maintenance, without computing the cost of buildings and a dozen other things which should fairly come into the calculation.

Now to consider some of the practical aspects of the case:—Here, I think we may profit by the experience in New York State. Our own experiences since the new deportation act came in force are not without value. What is of paramount importance is that the defectives should be weeded out as far as possible at the port of sailing. This would save untold misery, and expense both to the patients, the steamship companies and the country. It is a difficult problem to handle, but it is not going too far to say that a large proportion of the defectives we have received would have been detected at the port of sailing by physicians who had been trained in psychiatric methods.

Dr. Salmon says: "At first thought it would seem a hopeless task to attempt to pick insane and mentally defective immigrants from the unending lines of humanity which file through Ellis Island, but a systematic plan of inspection has been devised which results in the detection of many. Officers of the Public Health and Marine Hospital Service who have had special training in institution for the insane are assigned to this duty and the other Medical Officers unite with them in searching for immigrants who seem a typical or who present signs even remotely suggesting mental disease.

The Immigration Inspectors, who have to question all immigrants as to their destination, education and many other matters, have been provided with memoranda as to peculiarities which might suggest the existence of insanity or mental defect and are requested to return immigrants presenting such abnormalities to the Medical Officers.

Occasionally immigrants who have shown marked evidence of insanity during the voyage are reported by the ship's surgeons but of course, immigrants very obviously insane or defective would be refused passage at the ports of embarkation. Immigrants in whom, for any of these reasons mental disease is suspected are detained, after a preliminary examination, for observation and further examination. Recently, rooms have been set aside for this purpose, and a very noticeable increase in the number of cases detected has occurred. A large separate pavilion in which many more such cases may be detained and observed has been authorized and a psychopathic pavilion in connection with the Immigrant Hospital is being constructed. In the latter pavilion certified cases of insanity will be kept until the return of the ships which has brought them, and acute cases requiring treatment will be cared for until they are in condition to be returned with entire safety."

Those not familiar with the practical side of the subject cannot estimate what it means to protect the coming generations of Canadians from the evil results of the addition of defective and mentally diseased immigrants to our population. Preventive medicine has a duty to perform that cannot be ignored and Federal and Provincial Authorities must unite to fight the threatened evil. Our new law is good as far as it goes, but it does not go far enough, and in many cases we are powerless to act, when our duty seems manifest. It would be so much better too, to intercept the defectives at the port of the departure whenever possible.

During the year a large number of persons have been deported from this Hospital and in many instances the hardship to the unfortunate patient was manifest. Steamship companies almost invariably refused to allow qualified attendants to travel with the patient, and we had no assurance that the unfortunate would receive the treatment so necessary at such a time. How much better had the stress never been incurred.

There is no intention to criticize anyone in these remarks, but the desire to impress on those in authority the vital importance of a subject fraught with such possibilities for evil to Canada. A cursory glance by those familiar with mental disease at the immigrants received at Toronto Hospital during the past two years makes plain the fact that numbers of defectives and diseased persons who should have been easily detected, have slipped through the doors of entry. I do not suppose any system of inspection will succeed in detecting anything like all of the defectives, but no expense should be spared to make the system as thorough as possible, money spent in this way will be well invested.

SCIENTIFIC WORK.

A great deal of attention has been given to the scientific part of the work, and as the equipment of the Hospital is improved even better results are looked for. The enthusiasm shown by all of the assistants has been very gratifying, and the conferences held three times a week, have demonstrated the fact that the emancipation of assistants from all clerical work has had a most stimulating effect. During the summer Dr. M. Cameron, of Toronto University, kindly gave us the benefit of his experience in laboratory work, and with Dr. Fitzgerald began a series of exhaustive investigations into blood conditions in Dementia Praecox. These studies have been full of interest and when correlated with carefully gathered clinical notes will be of great value.

Pathological and bacteriological work is being carried on systematically, and everything possible done to advance our knowledge of psychiatry.

RELIGIOUS SERVICES.

As has been the case in past years the clergy of all denominations have been most active in ministering to the spiritual needs of our patients.

The services have been greatly improved by the orchestral music supplied by some fifteen musicians from the City, who at great personal inconvenience come here every Sunday. We feel under obligation to them.

ENTERTAINMENTS.

The entertainments furnished by City friends have been numerous and often of high class. The patients have looked forward to these and have thoroughly enjoyed them.

STAFF, ETC.

Again I have to thank the whole staff for the hearty efforts made by them to carry on the work of the Hospital in the best manner possible. It was indeed gratifying to come home from an extended trip in Europe, to find that the affairs of the Hospital had been carried on with as much attention to detail as if I had been here.

My thanks are also due to the Inspectors for their prompt and efficient help whenever required.

I have the honor to be,

Your obedient servant,

C. K. CLARKE,
Medical Superintendent.