

Builders' Supplies
of all kinds
THE Equity Realty Co.
Phone 1390 107 Wellington St.

44
We sold forty-four cameras last December. We want to sell fifty, and at the present rate per day we will easily.
Useful, sensible and appropriate gifts.
\$2.00 to \$100.00
BEST'S
The Popular Drug Store

A Question of Spex
Do your eyes tire easily?
If so, You need Glasses.
Do your eyes burn?
If so, You need Glasses.
Does the type become blurred in reading?
If so, You need Glasses.
Do you suffer from frontal headaches?
If so, Glasses will Help You.
Do you know if you have perfect eyesight?
If not, we can inform you.
IT WILL COST YOU NOTHING.

KEELEY Jr.,
OPTOMETRIST & OPTICIAN,
5 doors above Opera House

Furniture That Answers the Question Most Acceptably

DESKS, \$4.50, \$6.50, ETC.
BOOK SECTIONS, "GUNN"
LIBRARY TABLES, \$10 and up.
EASY CHAIRS, \$6.50 to \$55.00
ROCKERS, \$1.50 to \$30.00
COUCHES, \$4.50 to \$50.00
TEA TABLES
SMOKERS' SETS, \$2.50 up.
R. J. REID
Leading Undertaker Phone 377

FALL SHOES
Our men's tan storm calf blucher with viscolized sole cannot be beaten at \$6.00.
Other tans and blacks at from \$2.50 to \$8.00.
Custom shoes to order.
Repairing at
SCOTT THE SHOEMAKER
300 PRINCESS ST.
Branch, 206 Barrie street.

TREATMENT OF INSANE IN THE PENITENTIARY

(Continued from Page 1.)
are supervised by the staff on duty in the Insane Ward. There is no provision for the proper classification of the patients, all of whom are gathered together in a large day room, the acute with the chronic, the old and helpless with the impulsive and violent, the lucid with the demented. Even the isolation Prison was preferred by some of the patients to this ward; in fact the conditions are such as to encourage undesirable insane propensities, stimulate mental excitement, and compromise both the physical and psychic health of the inmates.

Mistakes Are Made.
The only skilled observation of the patients in this ward is that of the surgeon, who, except on special occasions, visits the institution but once daily. The inadequacy of such supervision is apparent when it is contrasted with that of the ordinary asylum ward, which, though managed by a specially trained staff, receives from ten to twenty visits from supervising officers during the day. The guards in charge of the ward at the penitentiary get no special training, and cannot, therefore, reasonably be expected to have a proper knowledge of mental nursing. I find that in many cases they mistake symptoms of mental disorder for laziness, surliness or malingering and appear to have been allowed considerable latitude in the matter of treatment. A guard informed me that it was customary to quiet excited patients by placing them in the dungeons. Several patients complained that they had been strapped and tubbed; one stated that he had been tubbed on the day he left the hospital, to which he had been sent three days previous on account of an attack of bronchitis. Such coercive measures have been prohibited in all modern institutions for the insane for many years. Knowing that such dangerous methods are adopted for subduing patients, without medical direction, and without their employment being recorded or reported, and bearing in mind the possibility of even graver abuses, and the frequency with which sudden emergencies arise amongst this class of patients, I am of the opinion that some system of more continuous medical supervision is urgently required.

The proper provision for insane criminals has been widely discussed. Three expedients suggest themselves: (1) Ordinary hospitals for the insane, (2) annexes to prisons, (3) special institutions. Transference of criminal patients to ordinary asylums is now rarely undertaken because their presence lowers the hospital character of the institution, and makes it necessary to inflict restraints on a large number of innocent patients, which are useless and even harmful to them, but are required to prevent escapes, revolts and violence amongst those with criminal tendencies. Many of these patients have committed their crime without appreciating the act, and are, therefore, entirely blameless, nevertheless, on account of the notoriety which they have acquired by reason of their crime, the ordinary insane and their friends feel that a stigma is attached to association with them, and thus look upon a term in hospital as a mark of reproach. This, I admit, is merely prejudice, but a prejudice with which hospitals for the insane have always had to contend, and deserves consideration.

The segregation of insane convicts in special annexes or other buildings, in connection with the prison, has been tested, but in every institution which

Now take notice what Santa Claus is showing for Ladies at Jenkins
Evening Scarfs
Italy's most artistic productions. Suitable for the opera or party wear. \$3.00 to \$8.50.
Heavier weaves in beautiful colors for day use, from \$2 to \$5.
There are no goods coming to our country equal to these Italian makes.
Umbrellas
Taffeta and silk in new handles, trimmed in silver and gold. Initialed free, from \$1.50 to \$8.00.
Gloves
Grey Mocha, silk lined, \$2.00.
Mocha fur lined \$2.25
Angora, silk lined, \$1.50.
Knitted Coats
Jaeger style, \$2.50, \$4.50 and \$6.50.
Greys, blues, browns, greens and white, from \$2.50 to \$6.00.
Men come in and talk over the dearest problem.

E. P. Jenkins Clothing Co.

has come under my notice these departments have deteriorated, just as in the case of the Kingston penitentiary, into the worst part of the prison. However, where small numbers of patients have to be accommodated, annexes to prisons can be justified, and for these the following conditions should be fulfilled: (1) The inmates must be detained in the annex as long as they are dangerous, i.e., if necessary for the whole of their life; (2) the annex must be large enough to permit of classification of patients; (3) there must be provision for occupation; (4) the annex should be located outside the wall of the general prison; (5) the medical superintendent must have had special experience in the treatment of mental disorders, should be in supreme control, and have a suitably trained staff of attendants.

Should Be Restrained.
It is now generally conceded that the ideal treatment of the criminal insane is obtained by their entire removal from prison administration to a special institution, where, grouped in accordance with the peculiarities of their disease, they can be restrained, humanely treated, studied and in some cases utilized. An institution of such a character demands however the administrative, disciplinary and technical conditions of a modern hospital for the insane and not those of a prison. The functions of the former are custodial and curative, while those of the latter are reformatory and punitive, and it is impossible for both institutions to be carried on satisfactorily under one administration. Since the danger to society in these cases arises from the mental diseases, it is obvious that the mental condition of the patient, and not the crime should be the basis of treatment. Some of the convicts at present in the insane ward, whom I consider very dangerous, have been convicted of only a minor offence, such as theft, while other convicts whose mental disease is such that under modern asylum treatment, they would not be regarded as a dangerous type, have been committed on account of homicide or other serious crime. The nature of the offence committed by an insane individual is often the result of a merely accidental circumstance, and is not a criterion by which to judge of his dangerous possibilities.

It follows as a corollary to the above that the duration of the detention should coincide with the duration of the disease. At present a convict cannot be detained at the prison longer than the sentence imposed by the court. If insane at the expiration of his term, he must then be transferred to a provincial hospital for the insane, where his presence is objectionable, or if his insanity is overlooked, he is turned again into the community at large, environmentally worse off than before, and readily drifts into a life of misery to himself and multiform evil to others, or becoming the tool of expert criminals, he finds his way back to the prison for an offence more serious than that for which he was originally committed. I have examined a number of recidivist criminals, and found a large percentage of these insane or very defective. One convict at present in the asylum ward, though only thirty-three years of age, is now serving his seventh term in prison. Such patients should be detained in suitable institutions until the mental disease is either cured or mitigated to such a degree that they are no longer dangerous, the question and time of their discharge being determined by a proper combination of medical and judicial authority. If such a proposal were put into effect much danger and loss consequent upon their detention during their short intermissions of freedom between convictions, would be prevented, as would also the expense entailed by their apprehension, trial and transfer to prison for each new crime committed. Another advantage secured by this indeterminate detention would be that it would prevent their further increase in number, by propagation of their species. The individuals themselves would be better protected and live happier lives.

Insane When Sentenced.
If special provision is to be made for insane criminals, the individuals so provided for must first be identified. From my examination of the insane in this prison, I am fully convinced, from the character and course of the mental disease, and the nature of the crime, that several of those convicts insane when the crime was committed, and therefore were not criminals, properly speaking, and should not have been sent to prison to be punished for acts which were but the symptomatic expression of their disease.

I have in mind convict D. 971. This man's criminal record is as follows:—April 22nd, 1887, at age of 17 years, he was sentenced to 24 years in the penitentiary for larceny; Nov. 13th, 1889, at 19, sentenced to six years for burglary; June 16th, 1897, 26, years of age, seven years for burglary with firearms; while serving this sentence unmistakable symptoms of paranoia were noticed, and at the expiration of his term he was transferred to Rockwood hospital. He escaped from that institution in Aug. 1904, and nothing was heard of him until January, 1905, when he shot a policeman who was attempting to arrest him. I have not a copy of the evidence given at the trial, but I am credibly informed that no defence whatever was entered, and he was sentenced to serve twenty years in Kingston penitentiary for shooting with intent to kill. The patient's mental disease is an incurable one, and accordingly there could be no doubt of the existence of insanity at the time of the crime, and it seems extraordinary that the question was not raised at his trial. Better medical supervision of all arrested persons would help to remedy this state of affairs. Moreover, even in cases where the mental condition of persons accused of crime is questioned, insanity may easily be overlooked since the examinations are usually made in a jail, under circumstances unfavorable to the eliciting of symptoms. More satisfactory results would be obtained if the suspected person were detained in a special institution, under skilled observation, for a period sufficiently

long to enable the medical staff to form a definite conclusion as to his mental condition, and submit a complete report of the case to the court. For this additional purpose the institution, for the segregation of insane criminals, advised above, could be utilized.

In many cases I find that it was only after he had committed a number of offences against prison discipline, that the mental defect was noted by the warden or other officers, and the convict referred to the surgeon for examination. Symptoms of insanity may exist for a long time before they can be detected by a non-professional observer, and during this period the mentally diseased criminal would be erroneously regarded as fully responsible for his acts. Because of the lax system of identification of the insane, many of these unfortunates have been punished to an extent that is almost incredible. For instance there is the case of an imbecile now confined in the asylum ward, who, though only 18 years of age at the time of his sentence, has a record of offences and punishments in the prison as follows:—

The Record Given.
Nov. 12th, 1911—Leaving his place without permission and walking around the shop, insolent to officers.—P.C. forty-eight hours (suspended).
Jan. 24th, 1912—Talking in his cell. P.C. forty-eight hours.
Jan. 1st, 1912—Pounding with cup, shouting at night.—P.C. five days.
Jan. 12th, 1912—Talking idleness.—Deprived of cell light.
Jan. 13th, 1912—Wasting bread.—Half rations two meals.
Jan. 1st, 1913—Talking in cell, rooster in shop. Leaving closet in bad condition.—P.C. further orders.
Feb. 1st, 1913—Being a nuisance and a menace to the gang—sent to isolation prison.
Feb. 22nd—Talking and shouting.—Bread and water six meals.
Feb. 24th—Talking in cell.—Bread and water six meals.
March 15th—Guard reported him for annoying other prisoners, complained that he could not keep discipline unless something was done; stated that the prisoner did not seem to understand what a report or punishment meant.—Bread and water six meals.
March 18th—Guard reported that the patient was not insane he was very foolish and annoying to the other convicts.—P.C. further orders.
March 26th—Foul language, talking, making noises in his cell.—Orders issued that he must be kept where he will not disturb other convicts.
The mental age of this convict is not more than ten years, and it is obviously impossible for him to conform to the rules of the institution. It is regrettable that it should be necessary for this boy to run the gauntlet of such a series of punishments before qualifying for the insane ward.

Then consider the case of convict 9971, to whom I referred previously; he was undoubtedly insane at the time of his admission, yet before being sent to the asylum he was punished seventy-three times, the punishments varying in degree from loss of remission to being shackled to his cell during working hours. In his disorderly mental state he believed he is the victim of persecution by a certain well-known public man. It is unnecessary to ask to what desperate conclusions he is liable to abandon himself when he sees his surmises being realized in such humiliating punishments. Punitive measures in the treatment of the insane long ago were proven to be ineffectual as a deterrent to wrongdoing, and also to act, as a further irritant and aggravate the mental disorder. They are no longer tolerated in modern institutions.

The record of another convict shows forty-four punishments between 1908 and 1913. He had been placed in the dungeon four times. I consider it a very dangerous practice to place insane persons in the punishment cell, on account of the severity of the depression produced. In fact I find that on March 7th, 1911, a convict who had previously made a similar attempt, was placed in the dungeon and there committed suicide. In 1904 a man who had been four times in the insane ward for observation, committed suicide in the dungeon. One year previous another man of whose mental capacity the warden was suspicious, hanged himself in the punishment cell. From the year 1903 to 1912 inclusive, there have been seven cases of suicide in the prison; even if all the convicts were insane this would be considered a large number.

Had No Peace of Mind.
In the case of convict F. 549, who

THE STANDARD BANK OF CANADA
ESTABLISHED 1872
KEEPING a bank account for "household expenses" and paying all bills by cheque has many advantages. It shows the balance on hand, the amount expended, provides receipts for every payment and does not require a large deposit to begin with.
HEAD OFFICE TORONTO
KINGSTON BRANCH,
H. E. Richardson, Manager.

THE ROYAL BANK OF CANADA
INCORPORATED 1869
Capital Authorized \$25,000,000
Capital Paid Up 11,600,000
Reserve Funds 13,000,000
325 Branches Throughout Canada.
Savings Department at all Branches.
LONDON, ENG., OFFICE Bank Bldgs.—Princes St.
KINGSTON BRANCH, E. E. NEWMAN, Manager.
NEW YORK AGENCY Cor. William and Cedar Sts.
E. E. NEWMAN, Manager.

PROBS. Moderate west to south winds, fair and mild to-day and on Sunday

TO-NIGHT
From 7 to 9.45 P. M.



10 doz. Men's ties — a regular 50c. quality — all done up in dainty gift boxes.
To-night 25c
25 doz. imported New York Ties. Sold everywhere at 75c; also in gift boxes.
To-night 50c
6 doz men's fleecy "Jaeger like" scarfs; in all the new shadings; sold at \$2.00, \$2.25 and \$2.50; our price,
To-night \$1.75c
2 doz. ladies real leather (and leather lined) hand bags; well worth \$1.25,
To-night 75c
24 only Ladies' gift umbrellas; in holly boxes. Regular \$2.25 each.
To-night \$1.50
Don't miss seeing our handkerchief and neckwear displays. They're wonderful in assortment and price. See our windows.

STEACY'S
"The Store with the Christmas Spirit."

Wedgewood Dinner Sets
Just opened some very pretty shapes and designs from this noted maker; dainty white and gold and broad blue bands. Something entirely new.
Shapes and style to suit the most fastidious taste.
ROBERTSON'S, LIMITED
RICH CUT GLASS FINE CHINA

Xmas Suggestions
Beautiful Table Lamps
Heating Appliances
Irons — Toasters — Heaters
Toy Motors
Domes for Dining Rooms
H. W. Newman Electric Co.
Phone 441 79 Princess Street

Christmas Suggestion
If you are puzzled to know what to give to some of the men, don't overlook a pair of house slippers. We carry a good line of felt, carpet and leather ones, ranging in price from 65c. to \$2.25.
JOHNSTON THE PRACTICAL SHOE-MAN
70 BROCK ST.