

R E P O R T

FROM THE

SELECT COMMITTEE

ON

CONTAGIOUS DISEASES ACT (1866);

TOGETHER WITH THE

PROCEEDINGS OF THE COMMITTEE,

MINUTES OF EVIDENCE,

AND APPENDIX.

*Ordered, by The House of Commons, to be Printed,
8 July 1869.*

Thursday, 13th May 1869.

Ordered, THAT a Select Committee be appointed to inquire into the working of the Contagious Diseases Act, 1866, and to consider whether, and how far, and under what conditions, it may be expedient to extend its operation.

Friday, 8th June 1869.

Ordered, THAT the Select Committee on the Contagious Diseases Act, 1866, do consist of Twenty-one Members.

Committee nominated of—

Mr. Childers.	Lord Eustace Cecil.
Sir John Pakington.	Lord Charles Bruce.
Captain Vivian.	Sir James Elphinstone.
Marquis of Hamilton.	Mr. Murphy.
Mr. Donald Dalrymple (Bath).	Mr. Tipping.
Mr. Percy Wyndham.	Dr. Brewer.
Mr. Kinnaid.	Mr. Mills.
Mr. Collins.	Captain Grosvenor.
Sir John Simeon.	Sir John Trelawny.
Mr. James Lowther (York).	Mr. Mitford.
Mr. Rathbone.	

Ordered, THAT the Committee have power to send for Persons, Papers, and Records.

Ordered, THAT Five be the Quorum of the Committee.

Thursday, 8th July 1869.

Ordered, THAT the Committee have power to Report their Observations, together with the Minutes of Evidence taken before them, to The House.

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R E P O R T.

THE SELECT COMMITTEE appointed to inquire into the working of THE CONTAGIOUS DISEASES ACT 1866, and to consider whether, and how far and under what conditions, it may be expedient to extend its operation;—HAVE considered the matters to them referred, and have agreed to the following REPORT:

THE question of whether it would or would not be advisable to extend the operation of The Contagious Diseases Act (1866) to the whole population, is one which involves considerations of such magnitude, both social and economic, and would necessitate an inquiry so lengthened and so elaborate, that your Committee have thought they should best perform their duty by not entering on so large a field at so late a period of the present Session.

They understand that, in moving for the Committee, Her Majesty's Government were not prepared, and had no intention, to enter into the consideration of this question in the present year.

Your Committee have therefore confined their investigation, for the present—

- 1st. To the operation of the Act in those districts to which it has been already applied.
- 2nd. To the alterations which may be necessary to secure more satisfactory results.
- 3rd. To its further extension for military and naval purposes to districts not now included within its Schedules.

I.—THE OPERATION OF THE ACT.

Although the Act has only been in operation two years and a-half, and at some stations only seven months, strong testimony is borne to the benefits, both in a moral and sanitary point of view, which have already resulted from it.

Prostitution appears to have diminished, its worst features to have been softened, and its physical evils abated.

II.—DEFECTS IN THE ACT.

1. In certain military districts the limit of five miles, imposed by the present law, appears to be insufficient. Testimony is borne to the fact that women reside just outside this limit to escape the operation of the Act, and strong representations have been made by some of the witnesses as to the necessity of extension. Your Committee are of opinion that the limit may with safety and advantage be extended, in military districts where it is found necessary to do so, to a distance of not more than fifteen miles, which is the limit of the powers of the Metropolitan police in other respects.

2. The 17th section provides for the voluntary submission by women to medical examination, but does not give sufficient power to secure their continued obedience to the requirements contemplated by the 19th section. To remedy this, your Committee recommend that the notices of visiting surgeons shall have

the effect of a warrant, which shall be an authority to the police to apprehend a woman refusing to appear on the day appointed.

Power should also be given to the visiting surgeon to order the detention of women who are not in a condition to be examined when they present themselves, but with regard to whom there is suspicion that they are diseased.

3. The evidence seems to point to the necessity for extending the limitation of detention, under Section 24, from six to nine months.

4. It has been shown that the certificates given under the Act on discharge from hospital are sometimes improperly used, and often change hands.

Your Committee therefore recommend that the certificate on discharge shall in future remain in the hands of the inspector of police.

5. An important modification of the Act is suggested by what appears in evidence, viz., that in the first four months of this year, out of 700 women of ill fame in Devonport, 41 were undoubtedly restored to a virtuous life by the direct and indirect influence of the Act, and 29 more left the district.

It appears that many of these women would object to apply to a justice in open court for a discharge from attendance, but would feel no such objection to be discharged by the medical officer under whose care they had been. Your Committee therefore propose to modify Clause 33, by omitting the last half after the words "certified hospital," in order to insert a provision that a woman applying for relief from detention and examination might make application on that behalf to the visiting surgeon, who, on ascertaining, through the inspector of police, that she had abandoned a life of prostitution, might, if he saw good reason, order her release from further attendance; such order to be equivalent to one issued by a justice. Notice of such release should be sent to the justices under whose order or notice she was examined.

6. Three cases presenting some difficulty have arisen during this inquiry :

The first is the case of pregnant women diseased. While no distinction is made by the Act between these and other women who present themselves for examination, it appears that it is the general practice, from presumed want of hospital accommodation, to refuse them treatment, and to discharge them at once, whatever their condition may be. Your Committee are of opinion that this distinction should not be made, and that if such women are likely to be brought to bed during their necessary detention, arrangements should be made for their confinement in the hospital.

The second case is that of children who, at the instigation or connivance of their parents, have become prostitutes, and are diseased. Your Committee recommend that legislative provision should be made for sending such children to an industrial school, or some other suitable institution, at the charge in part or wholly of their parents.

The third case to be considered is, as to what extent, and under what restrictions soldiers, should be periodically examined, as it is not to be doubted that undetected disease does exist and is propagated.

Whilst it would be unadvisable to subject non-commissioned officers and married men of good character to such examination, it appears not unreasonable that, for the general good of the service, other soldiers should be periodically examined; and your Committee have reason to suppose that such a system, properly conducted, would not prejudice the Service.

The expense entailed on the country by extensive disease among the troops, the injury inflicted morally and physically upon the men, seem to point to the urgent necessity which exists for adopting every possible means to arrest the spread of this contagion, no less than its duration. Your Committee have not taken professional evidence as to the practicability of extending such a system of periodical examination to the Navy, but they recommend that it should be considered by the Admiralty.

Your Committee have received evidence as to the prevalence of disease at Aldershot, spread not only by the common prostitutes who resort to the camp, but by women brought to it from considerable distances by tramps, who live on the earnings of these women. It is possible that this evil exists at other camps. It would be, in the opinion of your Committee, desirable to meet this by special penal legislation.

III.—ADDITIONAL PLACES.

Your Committee recommend that in addition to the power of extending the operation of the Act at Military Stations to a distance of fifteen miles instead of five miles, the following Places should be added to those now scheduled in the Acts.

Names of Places.	Limits of Places.	Names of Places.	Limits of Places.
Gravesend	The Limits of the Parishes of— Gravesend. Milton. Northfleet. Denton. Chalk.	Canterbury	The Limits of the following Parishes or Ecclesiastical Districts, namely— St. Andrew. All Saints. St. Alphage. St. Mary Bradin. St. Mary Bredman. St. George-the-Martyr. St. Mary Magdalen. St. Margaret. St. Mildred. St. Mary Northgate. St. Paul. St. Peter. The Archbishop's Palace. St. Dunstan. Christ Church. St. Gregory. Staplegate. Westgate Within. Westgate Without. St. Augustine. Old Castle.
Maidstone	The Limits of the Parishes of— Maidstone. Barming. East Farleigh. Loose. Boighton-mon-Chelsea. Allington, and the Hamlet of Tovil.	Colchester	St. Andrew's, Greenstead. Lexten.
Winchester	The Limits of the Parliamentary Borough of Winchester.	Devonport	Ivy Bridge. Plympton. Dartmouth.
Dover	The Limits of the Parishes of— Buckland. Charlton. Hougham. St. Mary's. St. James's. Eastcliff (extra-parochial). Guston.	Portsmouth	Southampton.
Walmer and Deal	The Limits of the Parishes of— Walmer. Deal. Sholden. Monyeham. Ringwold. Ripple.	Woolwich	St. Paul. St. Nicholas. St. Alphage. Greenwich. Hamlet of Hatcham.
		Windsor.	Datchet. Slough.

Your Committee would remark, in conclusion, that whilst, for the reasons stated at the commencement of their Report, they have confined their investigations to the object of securing greater efficiency in the treatment of these diseases at Military and Naval stations, they recommend that further inquiry, by a Committee appointed early in the next Session, should be instituted with the view of ascertaining whether it would be practicable to extend to the civil population the benefits of an Act which has already done so much to diminish prostitution, decrease disease, and reclaim the abandoned.

Your Committee have examined Mr. Simon, the medical officer of the Privy Council, as to the nature of the evidence which should be prepared before this question is referred to a Parliamentary Committee, and they recommend that his suggestions on this head should be adopted by Her Majesty's Government.

PROCEEDINGS OF THE COMMITTEE.

Friday, 18th June 1869.

MEMBERS PRESENT :

Dr. Brewer.	Mr. Murphy.
Lord Charles Bruce.	Sir John Pakington.
Lord Eustace Cecil.	Mr. Tipping.
Mr. Childers.	Sir John Trelawny.
Mr. Donald Dalrymple (Bath).	Captain Vivian.
Mr. Kinnaird.	Mr. Percy Wyndham.
Mr. Mills.	Marquis of Hamilton.
Mr. Mitford.	Sir James Elphinstone.

Mr. Childers was called to the Chair.

[Adjourned to Monday next, at Twelve o'clock.

Monday, 21st June 1869.

MEMBERS PRESENT :

Mr. CHILDERS in the Chair.

Lord C. Bruce.	Sir John Simeon.
Mr. Dalrymple (Bath).	Mr. Tipping.
Sir James Elphinstone.	Sir John Trelawny.
Marquis of Hamilton.	Captain Vivian.
Mr. Kinnaird.	Lord Eustace Cecil.
Mr. Mitford.	Dr. Brewer.
Sir John Pakington.	Captain Grosvenor.
Mr. Rathbone.	Mr. Murphy.

The Committee deliberated.

Captain *Vivian* was called to the Chair.

[Adjourned to Thursday next, at Twelve o'clock.

Thursday, 24th June 1869.

MEMBERS PRESENT :

Captain VIVIAN in the Chair.

Lord C. Bruce.	Mr. Murphy.
Sir John Simeon.	Mr. Dalrymple (Bath).
Marquis of Hamilton.	Mr. Childers.
Mr. Mitford.	Sir James Elphinstone.
Dr. Brewer.	Mr. Percy Wyndham.
Sir John Pakington.	Mr. Kinnaird.
Mr. Tipping.	Mr. Collins.

Dr. *W. H. Stoggett*, R.N., Dr. *Edward K. Parsons*, Dr. *Edward Swale*, and Dr. *Leonard*, were severally examined.

[Adjourned to Monday next, at Twelve o'clock.

Monday, 28th June 1869.

MEMBERS PRESENT:

Captain VIVIAN in the Chair.

Lord C. Bruce.	Lord Eustace Cecil.
Mr. Mills.	Mr. Dalrymple (Bath).
Mr. Mitford.	Mr. Lowther (York).
Mr. Murphy.	Dr. Brewer.
Mr. Kinnaird.	Mr. Collins.
Sir John Pakington.	

Dr. John Coleman Barr, Mr. Aylmer Greene, Mr. Edward Waylen, M. R. C. S., and Mr. William Govett Romaine, C. B., were severally examined.

[Adjourned to Thursday next, at Twelve o'clock.

Thursday, 1st July 1869.

MEMBERS PRESENT:

Captain VIVIAN in the Chair.

Sir John Trelawny.	Marquis of Hamilton.
Mr. Mills.	Mr. Lowther (York).
Mr. Mitford.	Sir John Pakington.
Sir James Elphinstone.	Mr. Kinnaird.
Dr. Brewer.	Lord C. Bruce.
Mr. Tipping.	Captain Grosvenor.
Mr. Dalrymple (Bath).	Mr. Collins.
Sir John Simeon.	

Mr. John Smith, Dr. J. Graham Balfour, and Dr. John Simon, were severally examined.
The Committee deliberated.

Motion made, and Question proposed, "That a Report, presented by Dr. Simon, be added to the Appendix."—Question put.—The Committee deliberated.

⁵ Ayes, 5.	Nocs, 7.
Dr. Brewer.	Lord Charles Bruce.
Mr. Collins.	Mr. Dalrymple (Bath).
Mr. Kinnaird.	Captain Grosvenor.
Sir John Pakington.	Marquis of Hamilton.
Sir John Trelawny.	Mr. Mills.
	Mr. Mitford.
	Mr. Tipping.

[Adjourned to Monday next, at One o'clock.

Monday, 5th July 1869.

MEMBERS PRESENT:

Captain VIVIAN in the Chair.

Sir John Simeon.	Sir John Pakington.
Sir John Trelawny.	Mr. Lowther (York).
Marquis of Hamilton.	Mr. Tipping.
Lord Charles Bruce.	Mr. Dalrymple (Bath).
Mr. Mills.	Mr. Rathbone.
Mr. Mitford.	Captain Grosvenor.
Sir J. Elphinstone.	Lord Eustace Cecil.
Dr. Brewer.	Mr. Kinnaird.

The Committee deliberated.

Surgeon Major J. Wyatt and Mr. Francis Mayall Mallalieu, were severally examined.

[Adjourned to Thursday next, at One o'clock.

Thursday, 8th July 1869.

MEMBERS PRESENT:

Captain VIVIAN in the Chair.

Sir J. Trelawny.
Marquis of Hamilton.
Lord Charles Bruce.
Mr. Mitford.
Mr. Percy Wyndham.
Sir James Elphinstone.
Dr. Brewer.
Mr. Tipping.

Mr. Dalrymple (Bath).
Mr. Rathbone.
Sir John Pakington.
Mr. Childers.
Mr. Kinnaird.
Sir John Simeon.
Lord Eustace Cecil.

Dr. *Simon*, recalled and examined.

DRAFT REPORT proposed by the Chairman, read the first time, as follows:—

1. "The question of whether it would or would not be advisable to extend the operation of the Contagious Diseases Act, 1866, to the whole civil population, is one which involves considerations of such magnitude, both social and economic, and would necessitate an inquiry so lengthened and so elaborate, that your Committee have thought they should best perform their duty by not entering on so large a field at so late a period of the present Session.
2. "They understand that, in moving for the Committee, Her Majesty's Government were not prepared, and had no intention, to enter into the consideration of this question in the present year.
3. "Your Committee have therefore confined their investigation, for the present—
 - "1st. To the operation of the Act in those districts to which it has been already applied.
 - "2nd. To the alterations which may be necessary to secure more satisfactory results.
 - "3rd. To its further extension for military and naval purposes to districts not now included within its Schedules.

"I.—THE OPERATION OF THE ACT.

4. "Although the Act has only been in operation two years and a-half, and at some stations only seven months, strong testimony is borne to the benefits, both in a moral and sanitary point of view, which have already resulted from it.
5. "Prostitution appears to have diminished, its worst features to have been softened, and its physical evils abated.

"DEFECTS IN THE ACT.

6. "1. In certain military districts the limit of five miles, imposed by the present law, appears to be insufficient to include all the area within which the mischief is fomented. Testimony is borne to the fact that women reside just outside this limit to escape the operation of the Act, and strong representations have been made by some of the witnesses to obtain an extension. Your Committee are of opinion that the limit may with safety and advantage be extended, in such military districts where it is found necessary to do so, to a distance of not more than 15 miles.
7. "2. The 17th section provides for the voluntary submission by women to medical examination, but does not give sufficient power to secure their continued obedience to the requirements contemplated by the 19th section. To remedy this, your Committee recommend that the notices of visiting surgeons shall have the power of a warrant, which shall be an authority to the police to apprehend a woman refusing to appear on the day appointed.
8. "Power should also be given to the visiting surgeon to order the detention of women, who, from natural causes, are not in a condition to be examined when they present themselves; but with regard to whom there is strong suspicion that they are diseased.

9. "The

9. "The evidence seems to point to the necessity for extending the limitation of detention, under section 24, from six to nine months.

10. "It has been shown that the certificates given under the Act on discharge from hospital are sometimes improperly used, and often change hands.

11. "Your Committee recommend that the certificate on discharge shall in future remain in the hands of the inspector of police.

12. "An important modification of the Act was suggested by the evidence, that in the first four months of this year, out of 700 women of ill fame, 41 were undoubtedly restored to a virtuous life by the direct and indirect influence of the Act, and 29 more left the district (Devonport).

13. "It appears that many of these women would object to apply to a justice in open court for a discharge from attendance, but would feel no such objection to the medical officer under whose care they had been.

14. "Your Committee therefore propose to modify clause 33, by omitting the last half, after the words 'certified hospital,' in order to insert a provision that a woman applying for relief from detention and examination, might make application on that behalf to the visiting surgeon, who, on ascertaining, through the inspector of police, that she had abandoned a life of prostitution, might, if he saw good reason, order her release from further attendance; notice of such release to be sent to the justices under whose order or notice she was examined.

15. "Four complicated cases were referred to, which appear to your Committee to require additional clauses.

16. "The case of pregnant women diseased: while no distinction is made by the Act between these and other women who present themselves for examination, it appears that it is the invariable practice, from want of hospital accommodation, to refuse them any treatment, and to discharge them at once, whatever their condition may be. Unless some means are adopted for dealing with such cases, your Committee are convinced that two evils must continue, viz., the spread of contagion, and the production of offspring more or less afflicted, and who consequently become dependent on the contributions of others.

17. "The second case is that of children who, at the instigation or connivance of their parents, are convicted of prostitution. Your Committee recommend that such children, under 15 years of age, shall not be sent to their parents after cure, but to an industrial school, and the parents, if able, shall be compelled to contribute to their support, their ability to do so being decided by the magistrate or the guardians of the poor.

18. "The third case to be considered is, as to what extent, and under what restrictions, soldiers should be periodically examined, as it is not to be doubted that undetected disease does exist and is propagated.

19. "Whilst it would be manifestly inadvisable to subject non-commissioned officers and married men of good character to such examination, it appears not unreasonable that men who have been under treatment, or who are known or reported to be of loose habits, should, for a specified period, be liable to such examination; and your Committee cannot suppose that such a system would prejudice the service.

20. "The expense to the country of extensive disease among the troops, the injury inflicted morally and physically upon the men, seem to point to the urgent necessity which exists for adopting every possible means to arrest the spread of this contagion, no less than its duration.

21. "A difficulty to the effective operation of the Act at the Camp at Aldershot appears to arise from the want of any power to deal with 'tramps' who frequent the camp and immediate neighbourhood, accompanied by women on whose prostitution they subsist.

22. "It would appear necessary to give the police power to arrest such 'tramps,' who, on conviction, before a magistrate, of dealing in prostitution, should be fined or imprisoned.

23. "Such is the nature of the Amendments which, in the opinion of your Committee, are required in the existing Act.

"Additional towns and villages to be included in the Act.

24. "Your Committee recommend that the following places should be added to Schedules now in the Acts:

"CONTAGIOUS DISEASES ACT (1866).

"Proposed EXTENSION of the above ACT to the following Places.

Names of Places.	Limits of Places.	Names of Places.	Limits of Places.
Gravesend -	The Limits of the Parishes of— Gravesend. Milton. Northfleet. Denton. Chalk.	Canterbury -	The Limits of the following Parishes or Ecclesiastical Districts, namely— St. Andrew. All Saints. St. Alphage. St. Mary Bradin. St. Mary Bredman. St. George-the-Martyr. St. Mary Magdalen. St. Margaret. St. Mildred. St. Mary Northgate. St. Paul. St. Peter. The Archbishop's Palace. St. Dunstan. Christ Church. St. Gregory. Staplegate. Westgate Within. Westgate Without. St. Augustine. Old Castle.
Maidstone -	The Limits of the Parishes of— Maidstone. Barming. East Farleigh. Loose. Boughton-mon-Chelsea. Allington, and the Hamlet of Tovil.	Colchester -	St. Andrew's Greenstead. Lexten.
Winchester -	The Limits of the Parliamentary Borough of Winchester.	Devonport -	Ivy Bridge. Plympton.
Dover -	The Limits of the Parishes of— Buckland. Charlton. Hougham. St. Mary's. St. James's. Eastcliff (extra-parochial). Guston.	Portsmouth -	Southampton.
Walmer and Deal	The Limits of the Parishes of— Walmer. Deal. Sholden. Monyeham. Ringwold. Ripple.	Woolwich -	St. Paul. St. Nicholas. St. Alphage. Greenwich. Hamlet of Hatcham.
		Windsor -	Datchet. Slough.

25. "Your Committee would remark, in conclusion, that whilst, for the reasons stated at the commencement of their Report, they have confined their investigations to securing greater efficiency in the treatment of these diseases at military and naval stations, they are strongly impressed with the conviction that further inquiries should be instituted with the view of ascertaining the practicability of extending the benefits of an Act which has already done so much to diminish prostitution, decrease disease, and reclaim the abandoned, to the civil population."

Question, "That the Draft Report proposed by the Chairman be now read a second time, paragraph by paragraph,"—put, and *agreed to*.

Several paragraphs *agreed to*, with amendments.

Paragraph 16.—Amendment proposed, to leave out from the words, "whatever the condition may be," to the end of the paragraph, in order to add the words, "your Committee are of opinion that this distinction should not be made, and that if such women are likely to be brought to bed during their necessary detention, arrangements should be made for their confinement in the hospital"—(Mr. Childers)—instead thereof.—Question, "That the words proposed to be left out stand part of the paragraph,"—put, and *negatived*.—Words added.

Paragraph, as amended, *agreed to*.

Paragraph 17.

Paragraph 17.—Amendment proposed, to leave out from the word “that,” to the end of the paragraph, in order to add the words, “Legislative provision should be made for sending such children to an industrial school, or some other suitable institution, at the charge, in part or wholly, of their parents—(Mr. Childers)—instead thereof.—Question, “That the words proposed to be left out stand part of the paragraph,”—put, and *negatived*.—Words added.

Paragraph, as amended, *agreed to*.

Paragraph 18, *agreed to*.

Paragraph 19.—Amendment proposed, in line 3, to leave out from the word “unreasonable,” to the end of the paragraph, in order to add the words, “that for the general good of the service, other soldiers should be periodically examined, and your Committee have reason to suppose that such a system, properly conducted, would not prejudice the service”—(Mr. Childers)—instead thereof.—Question, “That the words proposed to be left out stand part of the paragraph,”—put, and *negatived*.—Words added.

Paragraph, as amended, *agreed to*.

Paragraph 20.—Amendment proposed, at the end of the paragraph, to add the words, “your Committee have not taken professional evidence as to the practicability of extending such a system of periodical examination to the Navy, but they recommend that it should be considered by the Admiralty”—(Mr. Childers).—Question, “That those words be there added,”—put, and *agreed to*.

Paragraph, as amended, *agreed to*.

Paragraphs 21, 22, and 23, *disagreed to*.

Amendment proposed, after paragraph 23, to add the following paragraph “your Committee have received evidence as to the prevalence of disease at Aldershot, spread not only by the common prostitutes who resort to the camp, but by women brought to it from considerable distances by tramps who live on the earnings of these women. It is probable that this evil exists in other camps. It would be, in the opinion of your Committee, desirable to meet this by special penal legislation”—(Mr. Childers).—Question, “That the proposed paragraph be there added,”—put, and *agreed to*.

Paragraph 24.—Amendment proposed, to leave out from the word “that,” to the end of the paragraph, in order to add the words, “in addition to the power of extending the operation of the Act at military stations to a distance of 15 instead of five miles, the following places should be added to those now scheduled”—(Mr. Childers)—instead thereof.—Question, “That the words proposed to be left out stand part of the paragraph,”—put, and *negatived*.—Words added.

Paragraph, as amended, *agreed to*.

Amendment proposed, in the Schedule, to insert the word “Chichester”—(Sir James Elphinstone).—Question put, “That the word ‘Chichester’ be there inserted,”—The Committee divided:

Ayes, 6.	Noes, 8.
Dr. Brewer.	Lord C. Bruce.
Mr. Dalrymple (Bath).	Lord Eustace Cecil.
Sir James Elphinstone.	Mr. Childers.
Mr. Mitford.	Marquis of Hamilton.
Sir John Simeon.	Mr. Kinnaid.
Mr. Percy Wyndham.	Sir J. Pakington.
	Mr. Tipping.
	Sir John Trelawny.

Amendment proposed, to insert the word “Dartmouth”—(Sir J. Elphinstone).—Question, “That the word ‘Dartmouth’ be there inserted,”—put, and *agreed to*.

Schedule, as amended, *agreed to*.

Paragraph 25, amended.—Another amendment proposed, at the end of the paragraph, to add the words “they have examined Mr. Simon, the medical officer of the Privy Council, as to the nature of the evidence which should be prepared before the question is referred to a Parliamentary Committee, and your Committee recommend that his suggestions on this head should be adopted by Her Majesty’s Government”—(The Chairman).—Question, “That those words be there added,”—put, and *agreed to*.

Paragraph, as amended, *agreed to*.

Question, “That this Report, as amended, be the Report of the Committee to the House,”—put, and *agreed to*.

Ordered, To Report, together with the Minutes of Evidence and Appendix.

EXPENSES OF WITNESSES.

Name of Witness.	Profession or Condition.	From whence Summoned.	Number of Days Absent from Home, under Orders of Committee.	Expenses of Journey to London and back.	Allowance during Absence from Home.	TOTAL Expenses allowed to Witness.
				<i>£. s. d.</i>	<i>£. s. d.</i>	<i>£. s. d.</i>
Dr. Edward Swale. - -	Visiting Surgeon -	Sheerness - -	1	- 17 6	1 1 -	1 18 6
Dr. W. H. Sloggett, R.N. -	Staff Surgeon -	Devonport - -	7	3 18 8	7 7 -	11 5 8
Dr. Parsons - - -	Visiting Surgeon -	Portsmouth - -	1	1 6 -	1 1 -	2 7 -
Dr. J. C. Barr - - -	Physician - -	Aldershot - -	1	1 5 -	1 1 -	2 6 -
Dr. Edward Waylen - -	Surgeon - -	Colchester - -	1	1 4 6	1 1 -	2 5 6
Mr. John Smith - - -	Inspector Metropolitan Police.	Aldershot - -	1	- 12 2	- - -	- 12 2
TOTAL - - - £.						20 14 10

MINUTES OF EVIDENCE.

 MINUTES OF EVIDENCE.

Thursday, 24th June 1869.

MEMBERS PRESENT:

Dr. Brewer.
 Lord Charles Bruce.
 Mr. Childers.
 Mr. Collins.
 Mr. Donald Dalrymple.
 Sir James Elphinstone.
 Marquess of Hamilton.
 Mr. Kinnaird.

Mr. Mitford.
 Mr. Murphy.
 Sir John Pakington.
 Sir John Simeon.
 Mr. Tipping.
 Captain Vivian.
 Mr. Percy Wyndham.

CAPTAIN THE HON. J. C. W. VIVIAN, IN THE CHAIR.

Mr. WILLIAM HENRY SLOGGETT, M.R.C.S., called in; and Examined.

1. *Chairman.*] YOU are Visiting Surgeon of the Devonport Lock Hospital, are you not?—Yes.

2. And in that capacity you have great opportunities of watching the working of the Act for the Prevention of Contagious Diseases of 1866, I presume?—

3. First, I propose to examine you with regard to the Act itself; do you think that the Act as it is now framed has all the advantages and benefits which you expected to derive from it?—As much advantage as I could have expected from the Act in its present form.

4. Are there any amendments which you would propose?—Yes; I think that there are many amendments which are absolutely necessary for the successful working of the Act.

5. Will you tell the Committee what those amendments are?—Under Section 17, in the present Act, the woman voluntarily subjecting herself to a periodical examination by a submission in writing should be subject to the penal clause, No. 28, similarly as if ordered to appear by warrant of justices.

6. Do you consider that a woman once giving herself up for examination, even though she gives herself up voluntarily, should still be subject to the penal clause?—She should still be subject to the penal clause; and my reasons are these: A woman now, if she appears voluntarily, and being examined by the visiting surgeon, is found free from disease, may perhaps go away again and not re-appear; supposing that I, as visiting surgeon, examine her to-day, and find her healthy, not in a state requiring hospital treat-

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ment, she is not necessarily obliged to appear again, that is if she chooses to stay away; that is to say, if she chooses to stay away, the police have no power of compelling her attendance.

7. *Dr. Brewer.*] Do you find that to be common?—That is common.

8. *Chairman.*] You propose that a woman who once voluntarily gives herself up, although you give her a clean bill of health on that occasion, should thenceforth be obliged to submit to periodical examination?—For a certain time, or for so long as she continues in a career of prostitution.

9. Have you no fear that that would have the effect of driving people away?—No; on the contrary, I find in practice that the police have to say to those people afterwards, "Now, if you continue as prostitutes, you will be obliged to appear by a warrant of the justices," and then they do so; but I think it is better that the notice once given should have some legal power, than that the people subject to it should have the power of tearing it up and throwing it into the policemen's faces.

10. And are you not afraid of a woman saying, "I must not go into the hospital, because, if I do, I shall be a marked prostitute for life, although I think I am unwell"?—There is no fear of that; because all those women are known to the police as public prostitutes, and they can at any moment be brought before the magistrates, and be obliged to appear by a magistrate's order, and they are aware of that. I wish to do this to avoid the necessity of having too many appeals to the magistrates for magistrates' orders. Every magis-

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trate's order involves a certain amount of publicity, which I think should be avoided, and it involves a certain cost of fees to the magistrates' clerk. All this would be avoided, supposing the voluntary submissions in writing were made to have the force of an order or warrant.

11. Dr. Brewer.] With regard to Section No. 17, to which this applies, do you understand, by Section 17, that a woman cannot remove herself from the observation of the medical superintendent till she is cured?—Every woman found diseased is at once sent into the hospital.

12. But can she, under Section 17, remove from hospital before she is cured?—No.

13. Then, after she is cured, and goes on with her prostitution, does that reproduce the disease, in your observation, without other contamination?—It is very difficult to prove that.

14. Is that the object of your wishing to extend the action of the 28th clause to the 17th?—No; the object of it is to induce the women to apply more regularly for examination.

15. Have you reason to believe that upon a woman continuing her prostitution without catching fresh disease, the disease reappears?—I think it possible that certain forms of disease may reappear.

16. Without fresh contamination?—Without fresh contamination certain forms of disease may reappear.

17. Would that disease reproduce itself in any fresh subject?—Certainly, that is my view.

18. And is that part of the reason why you thus wish to extend it?—No; my reasons for wishing it are, to avoid the frequent application to the magistrates, and to induce the women to submit themselves regularly to examination; in fact, to avoid as much police interference with them as possible.

19. Mr. Murphy.] Is it your opinion that the effect of the 17th section is, that although a woman subjects herself by submission in writing to a periodical examination, and although the 17th section says that it shall have the effect of allowing her to be examined, yet nevertheless she cannot be re-examined without an order from the magistrate?—No, the effect of the 17th section is this; women have the power to sign a submission in writing, by which they are examined by the visiting surgeon; but inasmuch as this order in the 17th section has no force in law, the woman on the following day may say, "I signed it yesterday, but I will evade it to-day."

20. But you assume that it has no force in law; has that been tested?—I have had counsel's opinion that it is so.

21. The 17th section is this: "Any woman in any place to which this Act applies may voluntarily, by a submission in writing, signed by her in the presence of, and attested by, the superintendent of police, subject herself to a periodical medical examination, under this Act, for any period not exceeding one year." she signs that submission in writing; has it ever been decided by an appeal before a court, that she is not liable to be examined periodically during the year?—The Admiralty counsel gave his opinion that such is the case, that she is not subject to the penalties of the penal clause.

22. The 17th section of the Act specifically says that she may subject herself for a period of a year to periodical examination, and if after that she does not subject herself, why cannot she be compelled, under that section, to do so?—The

police declare that they have no authority to apprehend her upon it.

23. Would you propose to alter it, by adding the words, "that such submission in writing shall have the same effect as if a magistrate's order should have been got"?—Yes.

24. Dr. Brewer.] You perceive that, in the clause to which you refer, there is more accomplished than you want; the woman, by Section 17, has submitted herself to proper medical superintendence; she goes out; she does not return to you, from carelessness or for other reasons; you do not want, do you, that she should be put to hard labour, but rather that she should be kept in confinement?—Neither the one nor the other.

25. Is not that the operation of the 28th section?—I simply wish that the force of the 17th section should be the same as that section by which a woman is empowered to be visited by a surgeon under a magistrate's warrant. The 28th section is a penal clause.

26. Then would you wish to have the penal clause applied?—No; I wish to have her put under the same penalties as she would be under the magistrate's orders.

27. All you want is to get hold of her, and subject her to the action of the medical officer?—Yes; I want the police to have the power to apprehend her, supposing she does not appear at a certain time, and say, "You are plying as a prostitute; you are not appearing for examination before the visiting surgeon; we have power to compel your attendance."

28. But is not more done by the 28th section than raising terror against this neglect; do you want it all?—I merely want the woman to know that she is obliged to submit herself; I fear that without that terror the women would not come.

29. If you have power to confine her, is it all you want?—I do not wish power to confine her, I only wish that the woman should be capable of being apprehended by the police, supposing she does not appear.

30. Sir John Simeon.] You wish, in fact, do you not, that her voluntary submission to examination on one occasion should subject her to exactly the same consequences, in every respect, as if the first examination had been made in consequence of a magistrate's order?—Yes; that is all I want.

31. Sir John Pakington.] Have you found practically that in cases of women voluntarily submitting to examination under the 17th section, there has been a want of power and hold upon them to compel them to come for examination again?—Yes, that is my reason for wishing that to be altered.

32. Do you mean that they nominally submit themselves to examination for a year, but that you find practically that they do not go on with it for the year?—That is it.

33. Are you not afraid that if the 17th section is rendered more stringent than it is, it may have a deterrent effect, and prevent women from voluntarily giving themselves up for examination?—No, I think not; because all common prostitutes now so far know the law as to be aware that if they do not voluntarily submit, they can be obliged to submit by the magistrate's order. They would rather avoid the appearance before the magistrate, if they can do so; and I find constantly in practice, that women of that kind who have voluntarily appeared before me under the 17th section, instead of reappearing at their time,

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perhaps will evade it for a few months. The police then will tell them, "If you do not appear on such a day, I must apply for a magistrate's order;" and, in nine cases out of ten, the mere threat of a magistrate's warrant will induce them to reappear.

34. But I understand from you that they are held to be liable to a magistrate's warrant for a year; and they are liable to be arrested if they do not come periodically during the year?—Not if they appear under the 17th section.

35. Do you mean that there is no compulsion upon them?—No compulsion whatever.

36. Dr. Brewer.] They are supposed, under the 17th section, to be cured before they go, are they not?—No; perhaps I may make it more plain to the Committee if I tell them the practice; the women come before me, and perhaps out of 50 or 60 women, 30 or 40 may be found to be healthy women; each woman, if healthy, has a notice given her to re-appear in 14 days; if that woman has appeared by order of a magistrate, in case of her not appearing on the 14th day, the police have power to apprehend her, and say, "You must come."

37. Chairman.] Do you give to every woman, whether appearing voluntarily, or appearing under the order of a magistrate, an equal order to appear in 14 days?—Every woman.

38. Sir John Pakington.] Whether she be ill or well?—If she is ill I send her at once to the hospital; and if she is well I tell her to come in 14 days, for she may contract fresh disease the same night, and disseminate a great amount of disease. Supposing that this woman do not reappear at the end of 14 days, the police have no power now (that is over those women who have applied under the voluntary submission) of compelling her to attend at all, and a great number of those women in this way have evaded the police for three months or more.

39. Sir John Simeon.] Are you aware of the system in Paris under which a woman who has once put herself in the power of the law by an act of voluntary submission, and registering herself as a prostitute, has very great difficulty in subsequently emancipating herself from the consequences?—I am.

40. Are you aware that that has been found to act very harshly and unfavourably upon the subsequent reformation and future of those women in certain cases?—I know that it has been stated so; but I am not certain of it, and I have no evidence to prove it: but that is a subject upon which I have dwelt in reference to the 33rd section.

41. Do you feel, in the interests of this unfortunate class of women who are the subject of this inquiry, any fear of consequences similar to those which we are informed result in Paris from the alteration which you now propose?—Not at all; I fully believe that the measures which I suggest are most desirable for the reclamation of the women, and for improving their social and moral character. I believe it too from the actual data which I have been able to obtain. During my 2½ years experience, the amount of actual good which has been done is more than I ever anticipated could have been done.

42. Dr. Brewer.] Would it be sufficient if Section 28 gave you the power to arrest them for the purpose of the requisite investigation, without the general penal clauses?—I would not suggest that the visiting surgeon in any case should have a power

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of inflicting punishment. I could only suggest that the order of the visiting surgeon should warrant the police to apprehend a woman repeatedly evading examination, and to bring her for examination. At present a woman will constantly tell the police in the streets, when they look after her, "I will not go, and you cannot take me;" and many of those women shift their lodgings from night to night, and from day to day, although the police may see dozens of them in the streets, they cannot find them from day to day, and cannot apprehend them, and a great amount of disease is disseminated in that way.

43. Mr. Milford.] Are you aware of there being any or many convictions under the last portion of the 28th section?—Very few; I think there was only one conviction in my remembrance. The mere fact of the order being there has in itself a strong deterrent effect. That is why I believe that the penal clause has done great good in that respect; it prevents women incurring the penalty of it.

44. Sir John Simeon.] Has the practice of voluntary submission to examination on the part of the women occurred in very numerous cases?—They nearly all come voluntarily; I suppose that out of 700 women, there would be 690 voluntary submissions at least.

45. Mr. Murphy.] I want clearly to understand what is the object of the addition to the 17th section which you proposed to make; by the 15th section, information upon oath is required to be laid before a justice that the woman is a common prostitute; and thereupon the magistrate issues a warrant or an order that she should come up; what you want is this: that the mere fact of a voluntary submission under the 17th section should have the same effect as if an information on oath had been laid previously before a magistrate, stating that the woman was a common prostitute?—Exactly.

46. And the fact of her voluntary submission should dispense with the previous information on oath which in other cases a policeman is obliged to bring before the Bench?—Yes.

47. Chairman.] I wish to draw your attention to the 24th Clause of this Act, which is entitled a Clause for the Limitation of Detention. Do you think that the clause requires amendment?—I do. I think that the period of confinement might be advantageously extended for three months; that is to say, it should be extended from six months to nine months.

48. Have you had many authenticated instances of women who have been discharged compulsorily without being perfectly cured?—Numerous instances. Women know that at the expiration of six months they can be discharged; and the surgeons of the hospital, in fact, have no power of detaining them. In practice, I have tried to carry out a plan which has acted in one or two instances, but which has failed in many others: that is, I have seen a woman, and have said to her, "Now the law gives you the power to leave the hospital to-day, and you can go to your friends: but whenever you are found following your career as a prostitute, being uncured, you are liable to three months' imprisonment. Are you willing to be re-admitted this same day into the hospital?" And many of them at once expressed their willingness. Some few of them have been admitted on the same day: but the majority of them will say, "Well, sir, I will not go to-day but I will go to-morrow." When they go to their

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their friends, the police may lose them for a fortnight, or three weeks, or more, and in the meantime they are disseminating disease.

49. Dr. Brewer.] But that depends, does it not, entirely upon the apparent requirement of prostitution, and upon the contingency of there being any particular provocative for prostitution?—So many of these poor creatures have no other means of livelihood than prostitution, that I believe that they really require no provocative. Many of them, I believe, are prostitutes from sheer starvation.

50. If a fresh regiment came into the town might not that be an inducement?—That might be an inducement.

51. That is the inducement, is it not?—I believe the fact of the free and careless life they have led is of itself a great inducement.

52. Chairman.] Do you think that extending the powers of the Act, so as to retain them for nine months, would be sufficient?—I think it would not.

53. I suppose you would propose that such an alteration should be accompanied by the necessity for a fresh certificate at the end of three months?—Certainly; I think that it would not be wise to do away with that.

54. Do you know of any case in which syphilis has been so virulent, that you have not been able to cure it in nine months?—I would not say that; but such cases are rare; and cases of that kind would be less likely to be infecting. Cases would be very rare in which a woman would not be rendered non-infecting in nine months.

55. Has the operation of this Act been to make the disease less virulent than it was?—Very materially.

56. Dr. Brewer.] It has modified the type of disease, has it not?—Syphilitic disease is being to a great extent cleared out; and if we could only prevent the importation of fresh cases of syphilis, I believe we should clear it out entirely. In that respect the actual amount of good done is really greater than will be shown by statistical returns. Only the week before last I went into the Naval Hospital, and examined the patients; and I found that out of five cases of Marines who had been admitted that week for syphilis, four were not infected with true syphilis, but merely with common venereal ulcers which would not affect the constitution.

57. Sir James Elphinstone.] Is that importation due at all to merchant seamen?—Very largely to merchant seamen; and the trawlers and the ships coming from New York especially. The homeward-bound ships, and a large number of coasting vessels, are very much infected with syphilis; and the police now find that an easterly wind in the Channel which will throw a large number of ships into Plymouth is immediately followed by a fresh outbreak of syphilis.

58. Dr. Brewer.] Have you seen any true syphilis lately?—Yes; but very few cases.

59. To what do you attribute the introduction of the true syphilis?—We are stamping it out, but I attribute it to importation.

60. Sir James Elphinstone.] Could you suggest any mode of dealing with the coasting and merchant seamen, who are continually diffusing fresh disease?—Yes, and I think a very ready one, and one very easy of application: if there was a clause introduced into the Merchant Shipping Act, by which every seaman, before signing his shipping articles, should be examined by a medical officer,

I believe that not only would a great amount of syphilis be checked and prevented from dissemination, but that a great amount of general disease which now exists among merchant seamen, of whom I have seen large numbers, would also be prevented. When I was attached as Surgeon to the Naval Reserve I saw large numbers of men enter a ship's crew, of whom, if they had been going on board men-of-war, I would have rejected three-fourths; they were physically unfit to do work aloft; and what is the result? The ship goes to sea deeply laden, with a new crew weakened by many being unfit for duty from syphilis and other diseases, and is not in a fit state to encounter a gale of wind in the Channel. I believe there would be no difficulty in applying that remedy; the men must sign their shipping articles by which the men have the protection of law. Causing them to be examined before signing those articles would, to a certain extent, put them under the penalty of the law; if men were found diseased, I would have them sent to hospitals, and no man should be admitted on board ship without such certificates.

61. Then, in point of fact, you would make use of the powers of this Act with regard to males, in the same way as it is used with regard to females?—Only so far as it is applicable to men in the merchant service.

62. Mr. Tipping.] Would not many seamen look upon that as a great indignity?—Not at all; the best merchant seamen in the service are the men in the Naval Reserve. Every man who enters the Naval Reserve is examined; and I have examined many hundreds of them, and they never made the slightest objection to it.

63. Mr. Percy Wyndham.] Could you extend that to foreign ships?—That is a question which involves international law; I would prefer only speaking of a subject upon which I can speak from my own experience.

64. Mr. Mitford.] Is your answer to the question put by the honourable Member for Portsmouth, with reference to the towns in which the Act operates now, or to the country generally?—I think it might be applied to merchant seamen throughout the whole country.

65. Then before you could extend it you would require hospitals in all the towns, would you not?—In nearly all the large commercial ports there are hospitals already; and there is no doubt that sufficient hospital accommodation could be found in them. In Liverpool, in Glasgow, and in a great many of those towns, there are the civil hospitals which might receive a subsidy, and be paid at a certain rate in some way or other, which of course the Legislature would be able to decide about, where I could find room. Then the present union infirmaries also might be more largely rendered useful. In ports where there are naval hospitals, with a large number of unoccupied beds, I think that a certain portion of the naval hospitals might be applied to that purpose.

66. Sir John Pakington.] At present the Act applies to soldiers and sailors of the Royal Navy, but not to the mercantile marine, does it?—No.

67. Supposing that such a power were given as you have now suggested, would it not have the effect of protecting the owners and captains of merchant ships from bad seamen?—Very materially.

68. I presume that now those diseased men are hired and engaged by the captains of those vessels

vessels without any knowledge of their condition?—They know nothing whatever about them.

69. On the other hand, if their condition was ascertained by examination, of course no prudent captain would engage any such men?—No.

70. And consequently a great check would be placed upon the dissemination of disease by such men, would it not?—Yes, I believe that it would be quite as much to the interest of the owners as to the interest of the men.

71. Sir John Simeon.] Then you would require compulsory power to send those men to the hospitals if they were found diseased, would you not?—The power itself would be compulsory; because if a man does not choose to go to the hospital he cannot sign his articles and he cannot ship.

72. Sir James Elphinstone.] Would you not consider it advisable, in the event of finding merchant seamen in that state, that they should be dealt with exactly in the same way as women are under this Bill, viz., that they should be committed to hospital until they are cured?—If it were possible to get such power from the Legislature, I think it would be very advisable.

73. Dr. Brewer.] If you extend the term by three months, would it not be requisite for you to have the power of extending it by three months *ad infinitum*?—I think not; I think that if that power were given it might perhaps rather frighten the women too much; I should not like the idea that those poor creatures should think that we had the power of imprisoning them for years.

74. Do you think that the disease is not communicated after nine months' treatment?—I cannot say that; but it is rarely communicated.

75. Sir James Elphinstone.] You stated that a great deal of disease came in ships from New York, and that an easterly wind produces an outbreak of disease from an accumulation of winter-bound ships at Plymouth; in order to deal with that, would you recommend that the seamen should be examined on the arrival of ships in port?—No; I do not think it could be carried out. I think that if you attempted to enforce that, it would be evaded very largely, as many people would land under the type of passengers, and it would create such difficulties with the law, that I would only suggest it before merchant seamen sign their shipping articles, and at their discharge. The practice at the shipping office is to pay the men at their discharge. Before they get their pay, at their final discharge, I would have them examined, and not let them receive their pay until they are well.

76. Mr. Percy Wyndham.] Is it your opinion that there would not be any great difficulty in providing hospitals?—I think not, but of course I have no evidence to prove it.

77. Is there not rather a feeling of disinclination, on the part of the managers of those hospitals, to open wards for persons suffering under these diseases?—Not if they are paid for them. Of course it would be unfair to put it upon the parish.

78. With regard to those merchant seamen, would there be any benefit in applying the examination to a few of the large seaport towns first, or are you speaking now of extending it to every seaport town in the kingdom?—In every one of the seaport towns to which the Act is extended there is, necessarily, very much syphilis being cured. I think that the application of it in this

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way, before the men sign their shipping articles, could be carried out with great facility.

79. (Chairman.) Are there any other alterations which you would suggest in the Act?—Yes; as regards Section 32, the order for periodical examination should not cease to operate upon the discharge of a woman from hospital. It should, in all cases, be available for one year, unless good cause be shown that the woman has given up prostitution.

80. Mr. Tipping.] Have many common prostitutes, within your knowledge, given up prostitution?—A very large number.

81. Sir John Pakington.] Do you trace that fact to the operation of this Act?—Most fully, and the proofs of it are coming before me almost daily. In the first four months of the present year 70 women have been removed from the police register, and have given up prostitution.

82. How do you ascertain that they have given up prostitution?—The police are in the habit of seeing those women constantly, and if they no longer see them in their accustomed haunts, but leading a virtuous life, no longer straying about and soliciting men in the streets, or engaged in prostitution, there is strong *prima facie* evidence that the woman's declaration is a true one; and the same holds good if they marry.

83. Dr. Brewer.] There are many who marry, are there not?—In the first four months of 1869, 18 were married, 29 left the district, and 23, though unmarried, had given up prostitution.

84. Chairman.] Out of how many?—Out of 700 women.

85. Dr. Brewer.] Have you reason to believe that those 29 were reformed?—I cannot tell; but that those 23, though unmarried, have given up prostitution we have direct proofs, for the police have their names, and they know the manner in which those poor creatures are now getting their livelihood.

86. Sir John Pakington.] Are you now speaking of the same 70 women to whom you referred just now?—Yes; this is a subdivision of the same 70.

87. Therefore you have ascertained that they are giving up prostitution, and you do not, in saying that, trust to their mere absence from their usual haunts?—No; the police have traced them, and found it out.

88. Is there no reason to apprehend that a portion, at least, of those women may have gone elsewhere to pursue the same trade?—Those 23 unmarried women are still living in the neighbourhood of Plymouth, and have given up prostitution.

89. Dr. Brewer.] Do you think that it would be sufficient to say that the order shall continue if there be just cause to believe that prostitution is being continued?—That might do.

90. That is a less objectionable form, and is equally effectual; instead of saying, unless cause can be shown that she has given up prostitution, would it not be equally valid to say, unless there be proof or cause to believe that prostitution is continued?—Yes, I think that would give the police more power. My object in putting it was to enable a woman to abandon her mode of life.

91. If you have the affirmative, it will be better for all parties: if proof be given that she is continuing her prostitute life, then the order may continue for the whole year, because for her to show that she is not a prostitute would be an extremely difficult proposition; but the affirmative

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tive would be an easy one, would it not?—Yes, I think it would render it easier.

92. Mr. *Percy Wyndham*.] Is there a reformatory or refuge in Devonport?—There are two or three.

93. Are you at all acquainted with the internal working of those institutions?—The success is not very great, as statistics would show.

94. Is there not good reason to believe that, indirectly, this Act has been the means of reclaiming more women from prostitution than institutions avowedly formed for that purpose?—Most assuredly; and the reasons for it are exceedingly clear. Those women when they come into the hospitals are there in the quiet of their beds: perhaps they are ill; they are certainly a great deal more susceptible to the influence of the chaplain, or of the matron, or of any visitor who may give them a kindly word. Many of those poor creatures, I believe, have never previously had a kind word spoken to them in their lives. When first they are brought before the visiting surgeon, the distress, and utter destitution, and misery of many of them is more than anyone can conceive, and the amount of good being done already to those poor creatures by this Act is very great. More than one instance has struck me very painfully. Two sisters, respectable, modest-looking girls, came up from a town in Cornwall by railway train to visit their sister in the Plymouth, previously to emigrating to Australia. They were seduced, according to their own story; whether they had been previously seduced or not, I do not know; but, at any rate, they met two men in the train who took them to a house in Plymouth, and gave both those poor creatures disease, and they were ashamed to go to their homes. The police found them on the streets, and requested them to appear for examination; and they were both diseased. They appeared under an assumed name, and had been in the hospital for 10 days when a very respectable, modest-looking woman came to the visiting surgeon's room in great distress, asking me if I had heard of her two sisters, giving them their proper names. Of course I had not heard of them; but when she described them, and said where they came from, I immediately recollected the two cases; for, I make it a point in any of these cases to inquire into their history a little, and I send a private note to the chaplain, so that he may inquire more closely into their previous history, and see if he can induce reformation. Those two poor creatures remained in the hospital for a fortnight, and as soon as they were cured they went out as emigrants to Australia, and gave up their life of prostitution entirely. Had they not come into the Lock Hospital, most assuredly in three months they would have become so thoroughly abandoned to a life of prostitution, that they could never have been reclaimed.

95. *Chairman*.] Do you think that this Act is popular among the class of unfortunate creatures?—I think it is. They all express their great willingness and delight to go into hospital; but I must not conceal the fact that there is some unpopularity in it, and that is from this cause: that these women will not go into hospital unless their physical sufferings are such that they are no longer able to ply their trade as prostitutes. In that way women will knowingly and intentionally have intercourse with men knowing themselves to be diseased. I can give you one case in point: A few months ago one poor creature was brought

before me, having recently arrived in Plymouth from Kingsbridge. She was very young, was evidently in great distress, and under great physical suffering. On examination I found that she was suffering from extensive venereal disease and a very severe form of gonorrhœa. She acknowledged to me that although she had left Kingsbridge 23 days before, for the purpose of coming down to Plymouth for the purpose of being admitted into the Lock Hospital, she had yet evaded the police for 23 days, during which time she had indulged in indiscriminate prostitution; and I do not hesitate to assert that every man with whom that woman had intercourse must necessarily have been infected.

96. *Dr. Brewer*.] Have you found them at all deteriorated from mixing in the hospital with each other?—I think that there should be some means of separating or classifying them in their wards, by which some of the younger women might be separated from the more hardened prostitutes.

97. *Sir John Pakington*.] You have mentioned the case of 70 women who were removed from the register in the first four months of the present year; have you had similar experience in former years?—Yes.

98. To what extent?—Since October 1866, when this Act first came into operation, I have made nearly 9,000 examinations in 1,775 individual women, that is the same women being examined over and over again: there now remain in this district only 770. Of the remaining number, which will be in round numbers 1,000, upwards of 300 (but I will say 300) have certainly abandoned prostitution; and I wish to be understood, too, that this number of 300 who have abandoned prostitution, going over a period of two years and a half, necessarily will not include those who have abandoned prostitution for a few months, and who have then returned. Those women for two years and a half have left the streets, and are now no longer on the streets.

99. *Chairman*.] Are they gaining honest livelihoods?—They are gaining honest livelihoods. In addition to that, 250 are married and leading, in the belief of the police virtuous lives. That will make 550 who have really given up prostitution.

100. *Sir John Pakington*.] The professed object of this Act is to deal with physical disease; in what manner do you suppose that the Act has conduced to the saving from prostitution of this large number of women?—I think that a great number of those women get ashamed of their constantly being known as prostitutes: I think, too, that the quiet and comfort of the Albert Hospital, which they do not experience at home, the regular diet, and the absence from their constant scenes of dissipation, induce among them a love for, or a strong wish to return to, a more quiet life. I feel convinced that a great number of those women never would have been reclaimed if they had not gone into hospital.

101. *Chairman*.] They are visited by clergymen, I suppose, in the hospital?—The chaplain and the matron, and the different members of the hospital committee, visit them; and the persons interested in those efforts try to induce them in every possible way to abandon this mode of life.

102. *Sir John Pakington*.] So that, in your opinion, this Act indirectly produces a most important moral effect?—A most important moral effect.

103. Mr.

103. Mr. *Percy Wyndham*.] Do you not also attribute the beneficial result to the fact, that you also confer upon them a material benefit which they can at once understand and profit by; whereas if they were approached on the moral and religious ground first, they might take fright?—I have no doubt that all those causes co-operate together to produce this result. The change in their general appearance is most striking. They are far more cleanly in their habits. They used to appear constantly in the most filthy state, but we soon find out that after those women have been once sent into hospital, where they have acquired habits of cleanliness, they do not abandon those habits when they leave the hospital. As a proof of that, itch, which used to be exceedingly common in all seaport towns, in Portsmouth and Plymouth is becoming to a great extent diminished in both services.

104. Sir *John Pakington*.] Has the retirement from this habit of life of those 500 women practically diminished the number of prostitutes in Devonport, or have their places been filled up by other young women being drawn into prostitution?—In 1864 there were 2,000 known public prostitutes in Devonport and Plymouth; there are now 770. Those numbers which I give are not vague.

105. Mr. *Mitford*.] Do you attribute that to the increased morality of the people of Devonport, or to the prostitutes doing more business in their way?—Of course those women must be doing more business. I have no doubt that there is greater intercourse, and I think that that may be seen in the appearance of the women, because they are better dressed than they used to be; evidently showing that the amount of gain which they receive from their infamous trade is larger.

106. Mr. *Percy Wyndham*.] But you wish it to be understood that the money is expended among fewer women, and not that the amount of vice in the town has increased?—No; the money has been expended among fewer women. There is a standing garrison of soldiers, seamen, and marines, altogether from 10,000 to 12,000. The numbers have been the same, and they have been pretty much indulging in the same way as for the last 20 years.

107. Have you any reason to believe that the amount of vice in the town has increased?—On the contrary, I believe the amount of vice to be very materially diminished, and I have strong proofs of that, for the clandestine prostitution is certainly very materially diminished.

108. Dr. *Brewer*.] Under the operation of the Act, is there great facility afforded for parents detecting their children who are leading prostitute lives?—I fear there are too many cases of prostitution in which the parents themselves connive at their children's prostitution. I should mention here a case of a mother and daughter being both in the hospital at one time laid up with venereal disease; and the police informed me that the mother of this child, who was only 14, had been in the habit of sending for the child (the mother was keeping a brothel), supposing she was required for purposes of prostitution. It is cases of that kind in which I think the Legislature should endeavour to prevent such poor little creatures being sent back to their parents. I would send children of that age, not to their parents, who were keeping brothels, but, to some industrial school or reformatory, so as to

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give them some means of regaining what they have lost.

109. Marquis of *Hamilton*.] I do not think that you have stated how many have left Plymouth who are unaccounted for?—Four hundred and fifty.

110. Have you any idea where they have gone to?—The police believe that at least 60 per cent. of the remainder have given up prostitution; but I need not state that of course those statistics are not to be received entirely as facts. The police have no proofs; of the previous numbers I have proofs.

111. Do you imagine that many of them go far away, or that they go simply without the confines of the borough, and there ply their trade?—No doubt a certain number of them have removed to the towns in the vicinity of Plymouth, and some of those women may there continue their avocation as prostitutes; but they are not included in those numbers.

112. Mr. *Percy Wyndham*.] Is it not the fact, that a very large number of women who have at one time of their lives followed prostitution, subsequently marry?—A large number. Of those 1775, 250 have married.

113. Mr. *Tipping*.] Are the majority of the prostitutes in Devonport living in brothels collectively, or isolated?—Since the operation of this Act, a great many of the upper class of prostitutes have removed into private lodgings, and in that way they will sometimes evade the efforts of the police to detect them for two or three months; that is to say, they will call themselves kept mistresses. They are not really so, but they call themselves so. They take longings in a quiet and respectable street, and their neighbours for some time are not aware of their character, until the police find them out.

114. Dr. *Brewer*.] Do those women propagate disease?—Unless they are examined, they are certain to propagate disease.

115. Lord *Charles Bruce*.] In the Appendix to the Report from the Select Committee of the House of Lords on this Act, there is a return from the Metropolitan Police as regards the Devonport district, and it is there stated that, since the commencement of the operation of the Act, 681 is the sum total of cases brought under the provisions of the Act; is that correct?—Since that I have examined 1,775 women. I do not know anything about that return. This return of 1,775 I vouch for, because I take the name of every woman who appears before me, in a register.

116. Mr. *Percy Wyndham*.] Do you know, of your own knowledge, whether it is not the case that attempts to reform those women by approaching them with direct moral and religious advice, while they are pursuing their avocation, are generally unsuccessful?—It is almost always inoperative.

117. I suppose it has been attempted at Devonport, by clergymen and others?—Very constantly. There are two or three refuges, and the clergymen, I believe, have exerted themselves as far as possible to reform them; but while those people are leading a life in the streets, under the influence of incessant drink and dissipation, they are not amenable to the influence of clergymen, or of any other persons who approach them in the hope of reforming them.

118. Sir *John Simeon*.] The diminution of the number of prostitutes, of course, increases the

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frequentation with men of individual women; does it not?—I think it must do so.

119. Would not a largely-increased frequentation of men have a tendency to produce disease?—It would not produce syphilis; and even supposing it does produce disease, the advantages of the Act are that every woman being seen once a fortnight, the disease can never attain a head. I think that it is absolutely necessary that every woman should be visited at least once a fortnight.

120. *Chairman.*] Do you think it important that the power of Clause 31 should be extended to inspecting a woman, whether she goes from the hospital well or ill, for a period of 12 months?—Yes.

121. *Sir John Pakington.*] In fact, you would do away with the qualification at the end of the clause?—Yes.

122. *Mr. Tipping.*] Do you find, practically, that an examination once a fortnight is sufficient?—I think that if we were to make it more frequent than that, the women would rebel.

123. *Dr. Brewer.*] Have you ever, to your knowledge, inflicted any serious injury upon any woman who has been examined, and who has not been a prostitute?—Most certainly not.

124. Have you ever had such a case?—Yes, once, and only once, and I did not examine her. It was a most horrible case: a poor child was brought from the country to be examined, at the request of her own stepfather, who accused her of prostitution, and who brought her to the police. The poor child herself came willingly to the hospital; when the case was explained to me, I at once refused to examine her, but she herself begged me to examine her; she said, "I ask you to do it as a favour, to clear my character, because I am not a prostitute." I did examine her at her own request; she was not only not a prostitute, but she was a virgin.

125. Did your examination inflict any injury upon her?—No; I did not examine her as I should examine a prostitute.

126. It was not a case for a speculum?—No.

127. *Mr. Dalrymple.*] You are aware that the French and Belgian examinations are twice a week; do you think that once in 14 days is sufficient?—I think they never examine women twice a week; at least, when I was in Paris they did not do so. I cannot speak as to Belgium; but I feel assured that in England you could not well carry it out more frequently than it is now carried out.

128. *Dr. Brewer.*] In the use of the speculum is disease communicated?—Most assuredly not; I think that such a thing would be impossible. A professional man who would do so would be utterly unfit for his profession.

129. It is not a fact?—It is not.

130. *Mr. Percy Wyndham.*] With regard to the case of this girl who was brought to you, that was, you say, the only case of the kind?—The only case.

131. Do you think that, as a rule, medical men would be able to find out by examination that there had been, either from maliciousness or carelessness, some error committed in bringing the woman?—The police themselves never bring a woman unless they have clear evidence. They never give notice to a woman unless they have such evidence of her prostitution that they are able to substantiate it before a magistrate. This was a case brought, not by the police, but by the

girl's own stepfather, who reported her to the police as being a prostitute, and she herself voluntarily applied for examination for the purpose of clearing her character.

132. *Chairman.*] Are there any other alterations in the Act which you propose?—I think that Section 33 might be amended, so as to give greater encouragement to women desirous of abandoning their present mode of life.

133. How would you propose to alter that section?—The present section, I think, involves too much publicity; I think that the power might be given to the police and to the visiting surgeon conjointly; that is to say, that the police should first find out that it is true; they should then make a report of the matter to the visiting surgeon; he should act upon that report; and if he finds, on inquiry, that there is good cause to believe that the woman has abandoned prostitution, he should then have power to release her from examination. But I think also that, to prevent the possibility of any collusion in any way, it would be desirable that a notice of such a case should in all instances be sent to the magistrates without the necessity of the woman's re-appearing, but that the magistrates themselves should be informed of it in the cases of women who have appeared under a warrant.

134. *Sir John Pakington.*] If I understand you rightly, you would transfer to the police the power which the Act gives to the magistrate?—No; supposing that I, as the visiting surgeon, and the police, may not believe the woman's evidence, or may not believe the report of the police, I would then give her the power of applying to the magistrates for release from examination.

135. But still, I understand that, with your concurrence, the police should have the power, subject to appeal to the magistrates?—Only on appeal to the visiting surgeon.

136. *Dr. Brewer.*] The police are to operate as they do now; but the first referee is the surgeon, and the ultimate referee the magistrate?—The first referee is the surgeon, and the ultimate referee is the magistrate.

137. And in every case the magistrate must have notice of the surgeon's action?—In every case.

138. *Sir John Pakington.*] Would not the difference be, that the reference to the magistrate would not be compulsory in all cases?—It would not be compulsory.

139. *Chairman.*] That is for the purpose of giving greater facilities to those women to abandon their life of prostitution, is it not?—Yes. Not long since, a woman herself applying to be released, said to me, "Sir, well, I had rather come and see you than go before the magistrates." They wish to avoid publicity.

140. *Sir James Elphinstone.*] That objection applies also, I suppose, to the 33rd and 44th Clauses?—Yes; I think those clauses will require corresponding modifications.

141. The 36th Clause is this: "If any person, being the owner or occupier of any house, room, or place, within the limits of any place to which this Act applies, or being a manager or assistant in the management thereof, having reasonable cause to believe any woman to be a common prostitute, and to be affected with a contagious disease, induces or suffers her to resort to or be in that house, room, or place, for the purpose of prostitution, he shall be guilty of an offence against

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against this Act, and on summary conviction thereof before two justices shall be liable to a penalty not exceeding 20 *l.*, or, at the discretion of the justices, to be imprisoned for any term not exceeding six months, with or without hard labour: do you not think that, nine times out of ten, those people are perfectly aware of the state in which the women who resort to their premises are?—Yes.

142. Does it consist, with your knowledge, that such an alteration as this would be beneficial, viz., that the person keeping such a house, with such knowledge, should be liable to deprivation of his license, and to a penalty of 20 *l.*, at the discretion of the justices?—No doubt it would operate beneficially.

143. Dr. Brewer.] Have you any experience of the fact that in dancing rooms, and places of that sort, those diseases are communicated; and if so, would deprivation of licence be of advantage to prevent prostitution?—I do not believe disease is communicated in dancing rooms. The dancing rooms are merely places of resort; and then, of course, people who meet there go to other places.

144. Sir James Elphinstone.] But are you aware that many people who have a license do harbour prostitutes as a matter of course?—Certainly.

145. And the state of those prostitutes is patent to the persons who keep those houses, is it not?—Yes.

146. And those women are kept for the purpose of inducing soldiers and sailors to resort to those houses, are they not?—Yes.

147. Does it not accord with common sense, that the women must know generally the state of each other, and that disease cannot exist amongst those people in such a house as that, without its being known to one another?—About three weeks ago a brothel-keeper was fined 5 *l.* for harbouring a prostitute, knowing her to be diseased.

148. Mr. Percy Wyndham.] It is met by the Act, is it not?—Yes.

149. Chairman.] Are there any other clauses in the Act which you think require amendment?—No.

150. What fresh clauses would you propose?—A woman appearing drunk at the time of examination, or being guilty of obscene, abusive, or violent language in the waiting or examination rooms, should be taken charge of by the police and detained for examination until the following day, when, if she persists in her conduct or refuses to be examined, she should be taken before a magistrate for punishment.

151. Have you had many cases of women presenting themselves drunk?—A very large number; but I have never met with a case of personal incivility.

152. Have not the police power now of detaining her for being drunk and disorderly?—No; the metropolitan police manage it, and they must take her to the borough police. If those women thought that, by appearing drunk, they would evade examination, many of them would come drunk for the purpose of doing so.

153. Has not the metropolitan police officer now the power of taking up the woman for being drunk and disorderly?—No; he can take her to the borough police, and hand her over to the borough police; but if she is taken to the borough police, she must be brought before the magistrate, and her case adjudicated in open court; and it

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seems to me advisable that publicity should as far as possible be avoided.

154. Sir John Pakington.] What would you propose should be the future power of the police in such cases?—That they themselves should have the power of detaining her until she was sober, or fit to be examined.

155. Would you propose that they should have any power of punishment?—No power of punishment.

156. Chairman.] What period of incarceration would you recommend?—Twenty-four hours would be plenty, I should think.

157. Sir John Pakington.] Where would they detain her?—That could easily be provided for by building a detention room in the vicinity of the examination rooms.

158. Chairman.] What other new clause would you propose?—I think that a new clause should be introduced defining more exactly the term "common prostitute."

159. What clause is there in this Bill which defines the term "common prostitute"?—There is no such clause.

160. How would you propose to define a common prostitute?—I would first define them as Women who habitually gain their livelihoods, partly or wholly, by the proceeds of prostitution."

161. Sir John Pakington.] Is there in the law of England no definition of a prostitute?—I think not.

162. Dr. Brewer.] Does not the Act of George the Second, prosecuting brothel-houses, apply?—Yes; but those are brothels.

163. Sir John Pakington.] Do you suggest that definition with a view to making prostitution hereafter a criminal offence?—No; but to prevent any possible excess of powers on the part of the police.

164. So that they should not meddle with any woman who did not come within the definition?—Yes.

165. Mr. Murphy.] I suppose that has reference to the 15th Section: "Where an information on oath before a justice by a superintendent of police charging to the effect that the informant has good reason to believe that a woman therein named is a common prostitute;" and you want to define, in some way, what ought to be his ground of belief?—Yes; women habitually associating with common prostitutes, being seen in familiar intercourse with them in beerhouses and brothels, or indulging in undue familiarities with men in those different places, might be liable to inspection as common prostitutes. At present the police meet with this difficulty—women come before them and deny that they are prostitutes, and the police say, "How can I say she is a prostitute unless I actually see her in a bedroom for the purposes of prostitution."

166. Sir John Simeon.] Are you satisfied with the way in which the police have executed the duties entrusted to them in Devonport and Plymouth?—Most thoroughly; I think that the men are very earnest in their duties, and do them most carefully and conscientiously.

167. Mr. Mitford.] Clause 20 refers to the giving of a certificate by the visiting surgeon: "If, on any such examination, the woman examined is found to be affected with a contagious disease, she shall thereupon be liable to be detained in a certified hospital, subject and according to the provisions of this Act; and the visiting

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surgeon shall sign a certificate to the effect that she is affected with a contagious disease, naming the certified hospital in which she is to be placed; and he shall sign that certificate in triplicate, and shall cause one of the originals to be delivered to the woman, and the others to the superintendent of police:—have you any reason to believe that that plan is objectionable?—Not at all.

168. You have no reason to believe that the woman sometimes makes use of that as a clean bill of health when she gets out?—That is only a certificate for sending her into a hospital; they get no certificate of health.

169. Are you aware that the practice at the Lock Hospital in London is to give the certificate to the women themselves when they leave the hospital cured?—They are obliged to do it by law; but I would do away with that altogether.

170. Have you reason to think that that system is objectionable?—I think that the fact of a woman being discharged from a hospital is in itself a proof that she is no longer infected with disease.

171. And you would not wish to give her a certificate, lest she should make a bad use of it?—Most certainly.

172. Mr. Kinnaird.] Have you heard of any cases of bad use being made of the certificate?—I have not; but still I see the possibility of a woman giving the certificate to another woman, who would assume the name.

173. Chairman.] With regard to the question of enlarging the area of the town of Plymouth, do you put in a Return of the working of the Contagious Diseases Act at this port, dated “Royal Adelaide, in Hamoaze, 1869”?—Yes.—(The same was delivered in. Vide Appendix.)

174. Will you be good enough to read the result of that Return?—The total will show, that in 100,000 men there would be, on an average, only from 50 to 80 infected weekly with primary venereal sores.

175. Sir John Pakington.] Is that in those three towns, or in the whole kingdom?—In those three towns. Of those primary venereal sores, two-thirds at least, under the present system, are not constitutional sores; that is to say, not true venereal sores.

176. Do you mean by constitutional sores, sores affecting the constitution afterwards?—They are not true syphilis; you may understand that there may be a sore which is not true syphilis, and which is not followed by those effects upon the constitution which will affect the man himself, or his future family, or his future wife.

177. Mr. Dalrymple.] Venereal, but not syphilitic?—Venereal, but not syphilitic.

178. Chairman.] Which would not produce secondary symptoms?—Exactly.

179. You have stated that the result of this Act has been highly satisfactory in the town of Plymouth; do you find any difficulty in stamping out the disease from the fact of the area being circumscribed?—Very great difficulties.

180. You are now limited to a circumference of five miles, are you not?—Under the present Act, we are limited to five miles, or rather, it is more than that; women living within five miles, and coming into Plymouth within 14 days for the purposes of prostitution, are liable to police inspection and surveillance; but supposing they live within the five miles radius, but beyond the parish

of Plymouth, and do not come into Plymouth for the purposes of prostitution, they are to all intents and purposes beyond the power of the police. The result of this is, that a large number of women have left Plymouth, and taken up their residence (I speak more especially of the better class of women) in some of the small towns in the neighbourhood of Plymouth, where they can ply their prostitution without the possibility of being interfered with by the police.

181. Dr. Brewer.] If you increase that area, do you diminish the possibility of infection?—I think so.

182. Sir John Pakington.] Do you mean that the men from Plymouth go out to them?—All those places are places of usual holiday resort for seamen and marines, and they go in and out there constantly. I can give you no better proof than that, on Good Friday last, the Inspector of the Metropolitan Police went to Plympton for the very purpose of seeing if there were many there. He found there on that day 20 women whom, to use his own words, he had “wanted for some time,” and of those, six were of the better class of women, and 14 were common prostitutes; they had evaded examination for two or three months.

183. How far is Plympton from Plymouth?—Only five miles; but they had not been seen to come into Plymouth for purposes of prostitution.

184. Chairman.] The Act at present has been worked entirely by the metropolitan police, has it not?—Yes.

185. Neither the borough police nor the rural police have anything at all to do with it?—Nothing at all.

186. Do you apprehend that any difficulty would arise supposing that the Act was so extended as to bring it under the borough or rural police?—I do. I think the Act will always work better if it is left in the hands of the metropolitan police.

187. To what extent in distance does the power of the metropolitan police go round Plymouth under the Contagious Diseases Act?—Five miles.

188. But under another Act they have power for a radius of 15 miles, have they not?—They have power under the Metropolitan Police Act for a radius of 15 miles round any garrison, arsenal, battery, or Government establishment.

189. Then how would you propose that the area of this Act should be extended?—I would make the area of the Contagious Diseases Act coterminous with the area of the Metropolitan Police Act.

190. Sir John Pakington.] As I understand your explanation, does not that power of 15 miles apply to Plymouth as being one of the arsenals?—Not for the purposes of the Contagious Diseases Act.

191. Chairman.] Will you illustrate the effect of that proposal in the west country generally?—By means of this proposal almost the whole of Cornwall could be brought within the provisions of the Act. A radius of 15 miles from Devonport will take in Foy and East Loo; 15 miles from Falmouth will extend across the country; and I think there are some other batteries, somewhere near Foy, which would take in almost the whole of Cornwall.

192. Under the Metropolitan Police Act, the metropolitan police have power to apprehend deserters, and to enter houses suspected of harbouring stolen Government stores, for a radius of 15 miles

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15 miles round any barrack, fort, or naval arsenal have they not?—Yes.

193. Dr. Brewer.] There is a battery at St. Ives, is there not?—Yes; and there is a battery at Penzance. There, you see, you get in the whole of Cornwall. Then, in Devonshire, there are barracks at Exeter; and you take in Tiverton and Honiton, which are both manufacturing towns, and in which I know that there is a great amount of disease, for many women have come from Tiverton. Dartmouth being a naval station, it would take in Kingsbridge. In Kingsbridge nearly all the women are diseased; and I say that with some proof, because every woman who is brought in by the police coming from Kingsbridge is found to be diseased, almost without exception.

194. Chairman.] In those small towns, are there many prostitutes living entirely by prostitution?—I think that in those little towns there would be not above 10 or 15; probably, in Dartmouth and Kingsbridge together, there would not be above 30.

195. Do you find that you have many women coming from Cornwall and from Exeter?—A good many come from Exeter, and a good many from St. Austle, and a good many from Par, and those small seaport towns; more on the south coast than on the north coast.

196. Dr. Brewer.] Do the women from within 15 miles of where you are now labouring carry disease further into the interior of the country?—I have no means of proof of that, but they must do so among the farm labourers and the agricultural population.

197. Chairman.] If your plan were adopted, would it not require a very large increase to the metropolitan police?—I think not. I think that one man would be sufficient for the purposes of Kingsbridge and Dartmouth. I think that one or, perhaps, two men would be sufficient for the whole 15 miles round Exeter, including Exeter itself, and for this reason: in all those inland towns the number of prostitutes is comparatively few, and they are nearly all known. In places like Plymouth and Devonport, where they are more numerous, and where they move about between Plymouth, and Devonport and Portsmouth, they have greater facilities for escaping the police than in the inland towns and villages; and certainly in a very small seaport or fishing village, every woman being a prostitute, would be known to the whole of the inhabitants.

198. What would be the effect in those towns, with regard to the police of the towns, and borough magistrates, of having two strange metropolitan policemen put upon them?—I do not think that for a moment they would have the slightest objection; on the contrary, I think they themselves would be pleased at the fact of affording another means for keeping the disorderly persons in order.

199. Sir John Pakington.] What are your reasons for distrusting the borough and rural police for such duties?—I fear that local influences might be too often brought to bear upon them, that is to say, a borough policeman, born and brought up in the place, might perhaps be aware of prostitution existing among people whom he would dislike, perhaps from a very natural feeling, to bring under his own notice. I think also that the metropolitan police are so much in the habit of obeying precisely the orders of their superiors, that they are more likely to carry out any instructions given to them, without reference

to their own particular ideas, or their own particular opinions.

200. You apprehend the effect of local influences, rather than the want of confidence?—I should be sorry to suggest want of confidence. I would not do that, but policemen are human.

201. Mr. Kinnaird.] Do the metropolitan police select men peculiarly adapted for the purpose?—Yes.

202. Therefore you have a good selection out of a large body for a special purpose, have you not?—Yes, they select out of their number those men whom they think best fitted for the purpose. They are all married men, and they are all men especially well known for long previous good character, and for previous fitness for such an appointment, and they are all middle aged men.

203. Chairman.] I suppose you attribute the effective working of the Act in some measure to the judicious working of the metropolitan police?—In a great measure.

204. Dr. Brewer.] Have you ever detected any violent misapplication of their powers?—Not at all; they have been accused of it repeatedly. They are accused daily of exceeding their powers, and then they are accused of dereliction of duty. I believe, myself, that the men do their duties most honestly, and most conscientiously.

205. Have you ever seen an outrageous case?—I have never seen any case to warrant even a shadow of complaint.

206. Sir James Elphinstone.] Has any woman ever complained to you of her treatment?—Never, on being inquired into. Those women would complain at once if they were listened to, but they never do.

207. Chairman.] Should you be justified in going so far as to say that it would be hopeless to attempt to stamp out this disease, unless the area of the town was largely extended?—That is my opinion.

208. Mr. Percy Wyndham.] If you are to go so far as a large town like Exeter, does it not follow that to make that of any use, you should extend it also to some other town beyond, from which Exeter is fed?—I am only suggesting in my answers such measures as are practicable. I am not stating that it would be undesirable to extend it throughout the kingdom; I am only pointing out what I consider to be the most effective means of extending the Act, without creating too great hostility.

209. Supposing that the Committee should consider that the difficulty of extending the Act to such a very large area as you propose, would be too great, do you think that advantage would be derived from including those small villages outside Plymouth and Devonport which you just now mentioned?—Clearly; every additional place brought under the provisions of the Act, is so much amount of disease taken away from the population; in fact, to make it clearer, every additional woman brought under examination, is one possible centre of disease removed from the power of contaminating or infecting others.

210. Mr. Mitford.] It was stated by Mr. Mallalieu, before the Committee of the House of Lords last year, that it has not been thought desirable to deal with prostitutes who were pregnant, although diseased; have you any suggestion to offer with regard to that?—I would suggest that pregnant women, being prostitutes, should be sent to the union workhouse. The authorities

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of the Albert Hospital refuse to admit diseased women, being pregnant, and they have good reasons for it. They ground their reasons on the fact, that women being pregnant are far more difficult to cure until after their pregnancy; and that it would be undesirable, and almost impossible, without considerably enlarging the hospital, and having extra nurses and a proper staff for attending on those people, to treat women there who might come there for the purpose of being confined; because if pregnant women who were prostitutes, knew that they could go to a lock hospital and be treated, I fear that a very large number would declare themselves to be prostitutes, and would go there, for the purpose of getting a very comfortable confinement; whereas they might be sent to the workhouses, and there they might be detained until they were cured.

211. Sir John Simeon.] Have the metropolitan police who have been employed at Devonport, in carrying out the provisions of this Act, been sent down for the purpose?—They are special constables sent down for the purpose.

212. Then the Committee are not to understand, that there is necessarily in all the places in which the metropolitan police have a right, so to speak, there is always a metropolitan force ready to be applied to this purpose?—No, they would have to be created, and it would be at the pleasure of the Committee. Supposing that they thought fit to adopt this suggestion of the 15 mile radius, they might apply it only to such places as they thought fit. It does not follow, because you have the power, that you should apply it, except to such places as you think fit.

213. And the power given by the Metropolitan Police Act to the metropolitan police, merely refers to their being sent down *pro hac vice*, for any particular purpose?—For the apprehension of deserters.

214. Mr. Percy Wyndham.] But I understand you, that in recommending this large extension of authority round Devonport, including Exeter, you are contemplating the employment of the metropolitan police?—Yes.

215. And you would not be prepared to recommend that the attempt should be made, to carry out the Contagious Diseases Act, through the agency of the borough police?—On the contrary, I should strongly counsel that it should not be done.

216. Dr. Brewer.] Do you do nothing with pregnant women, in the event of their having primary disease?—I send them to the workhouse; but they are not compelled to go, and there is the evil.

217. Mr. Kinnaird.] Are the workhouse authorities compelled to take them, if you send them?—No, but they are always willing to do so. A woman, being diseased, and applying for admission to the workhouse, will not be refused admission, but she can leave again.

218. Uncured?—Uncured, unless detained by the surgeon.

219. Sir John Pakington.] I think your views have been rather misunderstood by an Honourable Member. I did not understand you to propose that the Plymouth district should be extended to Exeter, but that Exeter should be made the centre of another district?—Certainly.

220. Mr. Kinnaird.] During your experience in the hospital, have you found many cases of disturbance or violence in the wards?—Not very

many; not nearly so many as might have been anticipated.

221. How have you dealt with those cases, when they have occurred?—When the women have been very violent, they have been brought before the magistrates, and have been sentenced, perhaps to one or two months' imprisonment, according to the nature of the offence.

222. The magistrates complain that they cannot, in such cases, give sufficiently severe sentences; would you recommend any increase of time after repeated offences?—That is a subject to which I have not given so much attention as that my opinion upon it would be of so much value as a magistrate's.

223. Dr. Brewer.] Do you do nothing with pregnant women, who are primarily diseased?—The police give them notice if they are diseased, and say to them, "Now, we can get you admission into the workhouse." The woman has the power of refusing to go, and many of them do refuse to go; but if she continues, after this notice, to ply her vocation as a prostitute, she is liable to be apprehended by the police, brought before the magistrates, and sentenced to three months' imprisonment.

224. What do you do with them?—There is the difficulty. I fear that too many of those cases give disease, and it would be no hardship on the workhouses; for the reduction of the disease in Plymouth and Devonport has been something enormous. Whereas three or four years ago, there would have been 170 women treated in a year, perhaps, in Plymouth workhouse, for venereal disease, the number now will not be above 30 or 40.

225. Do you recommend that the operation of this Act should be extended to pregnant women?—Most certainly.

226. Sir John Pakington.] The cases of pregnant prostitutes are not common, are they?—They are very frequent; there are now nearly 40 diseased women pregnant in Plymouth alone.

227. You have a number of pregnant women who have children born, and born diseased?—Certainly.

228. Mr. Mitford.] Are you aware of an Act which was brought in by the Poor Law Board in 1867, to detain persons who were diseased?—There is that power, but unfortunately it is not acted upon; if the guardians would act upon it, it would meet the difficulty at once.

229. But it is the interest of the guardians not to act upon it, for pecuniary reasons, is it not?—Yes.

230. Dr. Brewer.] Do not the children of women suffering from venereal disease, during birth, in passing, occasionally contract ophthalmic disease?—Yes; very frequently.

231. Is nothing done to prevent children being so born with ophthalmic disease?—The law gives no power at present.

232. Chairman.] To sum up your evidence, it is to this effect, is it not, that there are certain alterations which you would propose in the Act; that you think it absolutely necessary to extend the area of the towns, in order to make the Act effective; that you would not extend to the borough and rural police, any of the powers of the metropolitan police; and that in order that they may have the power which you consider to be requisite, you would extend their powers under this Act, to the powers which they have under the Metropolitan Police Act?—Yes.

Mr. EDWARD KENT PARSONS, M.R.C.S., L.S.A., called in; and Examined.

233. *Chairman.*] You are the Visiting Surgeon of the Portsmouth Lock Hospital, are you not?—I am.

234. In that capacity you have, I presume, had ample means of judging of the working of the present Contagious Diseases Act?—Yes.

235. Have you heard the evidence of Mr. Sloggett, and the alterations which he has suggested in the Act itself?—Yes.

236. Do you agree with him in his views with regard to those alterations generally?—Generally, but not altogether.

237. In what respect do you differ from him?—First of all, with regard to the clause which decides the limit of six months to the retention of those women in hospital for treatment.

238. His first suggestion was with regard to clause 17; he proposed that all women who voluntarily subjected themselves to examination, should be put under the penalties of clause 26; and that they should be subject to periodical examinations, exactly as if they had been examined by order of a magistrate; do you see any objection to that?—I see no objection to that, because it appears that the great object is to prevent the frequent applications to magistrates, which are so unpalatable to those people; and if it can be done by the insertion of a clause of that sort, so as to prevent those constant applications, it would be very desirable.

239. With regard to the alteration in clause 24, what is your opinion?—I think it very desirable that the period of six months should be extended to nine months; but that power should be given to some one, probably to the visiting surgeon, to allow a woman to leave the hospital prior to the expiration of that time, inasmuch as it has frequently occurred, that mothers have come from a distance, and begged to take their children home, promising most faithfully that they should abandon their dissolute life; and to keep them in hospital for nine months is, in such cases, opposed to the wishes of the parents to take them home; under the present Act, there is no power to release them until six months have expired.

240. Would you propose that, notwithstanding that a woman was still diseased, the visiting surgeon, on the application of the mother, should have the power to send her away?—I would, if she did not live in the place, if she went to a distance, and there was ample proof given that the parents were to take care of her.

241. *Dr. Brewer.*] Have you observed that parents are very much involved in the contamination or prostitution of their daughters?—I am afraid it is so, to a great extent.

242. Then would you trust a daughter to a parent under those circumstances?—Not to those parents who lived in the towns; but I would if they came from a long distance, as they frequently have done, begging to be allowed to take their children home, and promising reformation.

243. *Chairman.*] A surgeon now has not that power under this Act, has he?—No one has the power, except at the expiration of the six months, when it is compulsory.

244. You propose that the power of retention should be extended to nine months, but that the visiting surgeon should have the power of sending the woman away even in six months, if he

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chooses?—Not of sending her away; but there are some few instances in which it strikes me, that a woman might be allowed to go. There have been painful applications from girls who are evidently desirous to reform, in consequence of the deaths of parents, and similar occurrences; and if they are prevented from going, I think it makes them more reckless.

245. Could it not be done on application to a magistrate?—No, because they are in the hospital; they are still diseased, and the magistrate has not the power to discharge them.

246. *Mr. Tipping.*] Would you not greatly lessen the prospects of cure by allowing the parents to take them home previous to the completion of the treatment?—Yes; but my recommendation was rather with a view to reformation than to cure; I think that where parents come from a distance, and want to take their children away, and where the children are willing to go, and promise reformation, if you forbid it until the nine months have expired, you lose, in some instances, the chances of reformation.

247. *Chairman.*] But surely for the child's own good, it would be better, would it not, to keep her there, where she is under the actual supervision of an intelligent officer, than to take her to a poor home, where she would not be so well cared for?—One would think so; but we practically find that it is not so.

248. *Mr. Percy Wyndham.*] Would not the prospect of the girl's cure be a very doubtful one if she was sent away in that manner?—It is open to that objection.

249. Is not that, in your mind, a very considerable objection?—I throw it out rather as a matter for consideration, whether there should not be left a door open, under certain conditions, for women leaving the hospital under nine months; the cases would be very few.

250. *Dr. Brewer.*] Would not that really produce this effect: that any parent might take a girl out under any pretence whatever, merely saying that she was going to take her away, and that the operation of the Act would so be rendered altogether nugatory?—I think one would require, in such cases, some evidence or guarantee of good faith.

251. *Mr. Tipping.*] You merely wish it to be optional?—Entirely.

252. *Sir John Pakington.*] To give a discretion?—Just so.

253. *Chairman.*] With reference to Clause 32, Mr. Sloggett has suggested that the order for examination should be available for a year, and should not cease on the woman's being released from the hospital, unless she gave up prostitution; do you agree to that?—I am afraid that that has not been carried out at the station at which I am acting. The police consider the written signature of the woman consenting to periodical examination to hold good for 12 months, whether she has been an inmate of the hospital or not. It must be known that periodical examination has not existed so long at the station at which I am acting as it has at other stations.

254. *Marquis of Hamilton.*] For what length of time has it existed?—About five months. I think it commenced in January.

255. *Chairman.*] With regard to Clause 33, the modifications of that clause, which Dr. Sloggett

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gett suggests for the purpose of giving greater facilities to a woman to give up her life of prostitution, are, that she should, by a policeman, be exempted from those exceptions; do you approve that suggestion?—I think it very desirable indeed that the visiting surgeon should have the power of relieving the woman from periodical examination, for this reason: as the Committee are aware, the women have the power of appeal to a magistrate, but of that they will not avail themselves, because they are obliged to go into open court, and it at once intimates to their own friends that they have been guilty of some indiscretion; consequently they far prefer to come to me for a periodical examination, rather than to go before a bench of magistrates, although either alternative is a very painful one.

256. Have you had many instances of women presenting themselves for examination in a state of intoxication?—No, I have only had three, I think.

257. Would you agree with Mr. Sloggett in his suggestion that there should be a new clause giving power to the police to detain in custody drunken women for 24 hours?—I would. The Lords of the Admiralty suggested a course of that kind, and sent down directions that some such course should be adopted; but upon further consultation, I believe, with their legal officer, it was determined that this Act did not give them such power; and, moreover, the metropolitan police stated that they had no places wherein to keep those women, and therefore it fell to the ground; and the Lords of the Admiralty eventually wrote another letter to direct that the matter should go on as it had done.

258. But do you think it very desirable that that power should exist?—Very desirable. It is not a very frequent occurrence, but still it does occur, and it is very desirable to prevent it, if possible.

259. You have been at Portsmouth, have you not, ever since this Act came into operation in 1866?—Yes.

260. What is your opinion of the effect of the working of the Act in Portsmouth itself?—There cannot be the slightest doubt in the world that it has produced an enormous amount of good, both in the diminution of disease, and unquestionably in the amendment of its character and violence; and I hold that it has done great good in the reduction of prostitution.

261. Sir John Pakington.] Is the number of prostitutes very much reduced?—I think so.

262. Chairman.] Has the moral effect been good in reclaiming prostitutes?—Decidedly so. I think that the prostitutes of a large town have never been fairly brought under the advice of clergymen, because they have not the opportunity of considering it quietly; but now, during a residence in the hospital, they are well cared for, and comfortable, and amused, as they are at Plymouth, they are more amenable to such advice.

263. Dr. Brewer.] Are they tolerably amenable to discipline?—Yes, as a rule. There have been some few violent creatures who are sadly noisy.

264. Chairman.] Was there much resistance to the Act when it first came into operation at Portsmouth?—Yes, at first.

265. Was it very unpopular?—I would not say that it was very unpopular; but it was much more so than it is in its present state. I think it

is now becoming popular. I have heard no objection at all expressed among the women for some months.

266. Sir John Pakington.] Do you mean that it is becoming popular with the women themselves, or with the general public?—With the women themselves. I think that, with the general public, the Act has always been very popular.

267. Sir James Elphinstone.] The women were in a very bad state when the Act first came into operation, were they not?—Fearful. Not only the diminution of the disease, but the alteration in its character, is something very marked, and the improvement in the women themselves is very marked.

268. Mr. Percy Wyndham.] Has it had a humanizing effect upon them?—Certainly.

269. Sir James Elphinstone.] Are they beginning to adopt habits of cleanliness?—In a very marked degree.

270. Chairman.] Can you furnish the Committee with any returns of any women who are leading a life of prostitution at Portsmouth?—I could do so, but unfortunately I only yesterday received notice to attend, and I have not those statistics with me.

271. Could you send to the Committee a list of the number of women living in prostitution at the time that this Act came into operation, and the present number, and of the number of cases in the first year and the number at the present time?—Yes, I will do so.

272. Dr. Brewer.] Have you much new importation of disease in Portsmouth?—We have.

273. From what sources is that disease derived?—Chiefly from surrounding towns.

274. Mr. Mitford.] The essence of the Act is the periodical examination, is it not?—Quite so.

275. Chairman.] How is it that the Act has only come into operation within the last five months?—By the orders of Government.

276. Mr. Mitford.] You have not had accommodation?—That is the cause.

277. Sir James Elphinstone.] What is the limit of age of the women?—From 12 years to any age. My memory tells me that 12 years is the youngest that I have ever known, and I should think the ages go nearly up to 70.

278. Are those little girls, when cured, discharged on the streets again?—Yes, unless they are willing to go into a reformatory.

279. Do you agree with Mr. Sloggett in his proposal that we should insert a clause in this Bill, making it compulsory that those children should not be returned to their old course of life or to their parents?—I should offer the greatest facilities in the world for getting them into reformatories; but I should scarcely like to go so far as to enforce their being sent into a reformatory where they would be detained by law. I understood the Honourable Member to ask me whether I thought that these girls of 11, and 12, and 13 years of age, instead of being discharged when cured, should be obliged by law to go to a reformatory for a specified time.

Mr. Sloggett.] I alluded only to those children whose parents were encouraging them, and keeping them in habits of prostitution.

280-81. Mr. Kinnaird.] Would you not be glad to see such children kept in a reformatory for a short time?—It might happen that their parents might be willing to take them home, and to keep them

them off the streets; and I would not suggest that the law should interfere between the parents and the children, if the parents would do their best to reclaim them.

282. *Sir James Elphinstone.*] Do you concur in what Mr. Sloggett has said?—I cannot say that I do. I think that it would be objectionable to punish a child for that which is perhaps brought about by the father himself. There are many mothers and fathers (and fathers particularly) who, one is ashamed to say, live on the prostitution of their children. I know an instance where a man has three children, of the ages of 11, 12, and 15, and he lives entirely upon the prostitution of those three girls. He has literally enforced it upon them; and you would scarcely impose a penalty, or imprisonment tantamount to it, upon those girls.

283. *Dr. Brewer.*] Would you then send the cured child back to her father?—She would go out upon the same condition as she would if she were a few years older, and upon her own basis.

284. She goes back to her father's house, does she not?—No; not in all cases. In this case two of the girls resisted. I know the children, and I spoke to them of the enormity of the crime. One is now gone to a reformatory, and one is still with her father. The other has never been with her father, and she is still a prostitute upon the town, but away from her father's roof.

285. *Mr. Kinnaird.*] Will you add to the return, which you are to furnish, the exact number of prostitutes who have annually gone to a reformatory since the commencement of the operation of this Act?—I will.

286. *Sir John Pakington.*] Did you hear the evidence of Mr. Sloggett, with reference to the diminished number of prostitutes, and the number of women who have abandoned prostitution since the Act came into operation at Devonport?—I did.

287. Is it your opinion that the good effects of the Act at Portsmouth have been at all equal in extent?—Yes, they have been very marked in some degrees; there is no doubt that a number of women have left the streets and have reformed. It is a very well known fact that a large number of them marry, and many become reformed characters, and hence I thought of suggesting that some power should be given to the visiting surgeon, when he becomes acquainted with the facts, as he does through the evidence of the police, to relieve a person of that sort, and not that she should be compelled to go to the magistrates in order to obtain her release; because, if she does so, she at once tells the man whom she has married that she has been a prostitute.

288. Do you attribute those good effects which you have described to the operation of the Act?—I do.

289. *Mr. Percy Wyndham.*] Could you give us any figures to show us the numbers?—I could do so; that is, evidence which reaches one through the police.

290. *Chairman.*] Do you find great difficulty staring you in the face, from the fact of the area being so confined?—Yes, undeniably; I need only instance what occurred yesterday. Two women voluntarily came to me, one from Southampton and one from Chichester, both fearfully diseased; the class of disease being such as we have not witnessed for many months past in the town. They came into the town on the preceding day; one was led to ask a little about it.

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The one from Southampton walked the whole distance on the prior day, and they slept in the town on the Tuesday night, and were obliged to avail themselves of an act of prostitution in order to pay for their lodging. So that there are cases in point, in which at least two men were probably diseased. I have not yet heard who they were, but I have directed the police to inquire, and probably it will soon be ascertained.

291. *Sir John Pakington.*] Do you know who the men were?—One of them was a sailor, belonging to one of the ships, and the other was a civilian. I am afraid I could not find out the ship, because there are several ships lying there, and the woman was a stranger, and she merely knew him as a sailor; but the police are endeavouring to find them out.

292. *Chairman.*] Have you found much disease to be brought in by the ships?—It is the opinion of the police, and it is certainly my own opinion, because, prior to the coming of the Channel squadron to Spithead, within the last few weeks, the average of our beds filled had been reduced to 114, which was the number of the women in the hospital under treatment; and in the two weeks following that, the average was raised to the full strength of beds, which is 120, thereby showing that there was an increase, and my impression was that it arose from the coming of the squadron.

293. *Dr. Brewer.*] How many days did you allow for the incubation of the disease?—Two weeks.

294. *Chairman.*] And two weeks after the arrival of the reserve squadron, you found this increase?—Yes.

295. *Mr. Tipping.*] Was there any pressure on the hospital for more who could not come in, behind the 120?—Yes, we had three or four standing waiting for admission.

296. *Chairman.*] Were those people who were waiting for admission under treatment?—I have subjected them to a certain amount of treatment, but it was very incomplete, of course. I have given them remedies which they have taken away with them.

297. Do you find that many women go out of Portsmouth for the purpose of escaping from this Act, and locate themselves in some neighbourhood just outside the area?—Yes, some few have done so. They go as far as Havant, which is a town eight miles beyond the five mile area, and I know that the women come into the town by day, and make appointments, and probably carry on prostitution, and then they go away by night, and they are without the compass of the metropolitan police.

298. Has a metropolitan policeman the power of taking up one of these women, if he finds her plying her trade in the daytime?—No woman has ever been taken up by a metropolitan policeman simply on account of that. The only course open to him is to go before a magistrate and lay an information that he has reason to believe that she is a prostitute; but out of many thousands that I have examined, I do not think there have been above three or four orders from a magistrate.

299. But supposing that one of those policemen knew that one of those women from Havant was in the habit of coming into the town of Portsmouth during the day, and plying her trade, and he suspected her of being diseased, he would have to go before a magistrate, and lay a declaration to that effect

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effect, and then he could lay in wait for her, and take her up, could he not?—I suppose he could. I think the metropolitan police believe their powers to be limited by this Act. I do not think they have any knowledge that they have powers under the Metropolitan Police Act, but it is not within my knowledge that they ever exercise those powers in any way.

300. Therefore, directly a woman goes outside the five miles area, she is really lost to the police is she not?—Yes.

301. Dr. Brewer.] To what sources do you look for the keeping up of venereal disease in Portsmouth?—To the proximity of large towns, and to the migratory character of those people who travel about much more than the public generally think.

302. In your opinion, what would utterly prevent the extension, or even the existence of disease in Portsmouth?—I believe two things are necessary: one is the extension of the area, taking in the large towns around, and another would be some more stringent laws relative to soldiers and sailors, in the way of medical examination.

303. Do soldiers bring disease as well as sailors?—Much more. The proportion of indulgences, I should think, is the ratio of four or five to one. There are more soldiers under treatment in the garrison hospital than sailors.

304. Is the disease as violent among sailors?—I think not.

305. Do sailors bring true syphilis?—True syphilis is becoming very rare.

306. And every case you have is an imported case, is it not?—Yes, generally.

307. From what place?—I could scarcely tell. There is a great deal brought from abroad still.

308. Is it brought from America principally?—There is a great deal brought from America, I believe still.

309. Mr. Tipping.] Were the two bad cases of which you spoke, one of which was from Southampton, cases of true syphilis?—The Southampton case was a case of true syphilis, and, as far as I can trace, that came from the West Indies. The other said that she had had the primary disease for, I think, three months, for two months of which time she had carried on active prostitution, and the last month she was physically incapable from pain.

310. Chairman.] You have heard Mr. Sloggett's suggestion with regard to extending the area, and making it conterminous with the area of the Metropolitan Police Act, that is to say, that a metropolitan policeman should have a power for a radius of 15 miles, of which he was the centre; do you approve of that suggestion?—Yes, upon the principle that it would take in of course Winchester and Chichester, which are large towns. Winchester, I believe, would take in Southampton, it is important that this town should be included. We are more than 15 miles from Southampton.

311. Sir John Pakington.] You are more than 15 miles from Winchester, are you not?—Yes, but Winchester would be a centre, and that would take in Southampton, I think, although I am not aware as to the distance.

312. Mr. Mitford.] In the same way, Chichester would be a centre, would it not?—It would. Both Chichester and Winchester would be centres, and that would include all the towns

which one requires, except the Isle of Wight, and that would be another centre.

313. Supposing that it were extended to Winchester, Southampton, and Chichester, can you provide for the disease that would come from those places as well as for your own?—I think, we could, but it would require a little extension, I do not think 120 beds would be sufficient for such an extension.

314. Have you any idea what number would be sufficient?—I think 40 or 50 more beds would suffice for all those places.

315. Dr. Brewer.] And you hope to be able to stamp it out by this means?—I should scarcely say that we should be able to stamp it out.

316. What extra means do you hope to provide yourself with to prevent the importation of syphilis from sailors and soldiers?—I would have some system of examination carried out in the navy. I would not allow a sailor to come on shore on leave in a town like ours, without previously undergoing a medical examination. If he comes on shore for two or three nights, and has disease, he does as much harm as will counteract all the good that may be done otherwise.

317. Do the sailors and soldiers object to examination?—Of that I have no personal knowledge.

318. Mr. Percy Wyndham.] You were speaking about the Channel Fleet; formerly sailors were examined, were they not, in the same way that soldiers were until within the last five years?—I believe so.

319. Would it not be a very good plan that that practice should be again adopted?—I think so, and that until some step of that sort is taken, you will never stamp it out.

320. You stated that the amount of disease was much greater among the soldiers than the sailors; do you not attribute that to the fact that the one has much more frequent opportunities of connection than the other?—Simply to that. A soldier is always present, and is out every day, whereas sailors are only out occasionally.

321. Mr. Mitford.] You heard what Mr. Sloggett said about pregnant women; do you adopt the same practice?—No; we act differently; we take them in.

322. Dr. Brewer.] Are women confined in your hospital?—Occasionally we admit them. When I had the honour of mentioning this very circumstance to the right honourable baronet, the Member for Droitwich, when he was at the Admiralty, he directed that a couple of beds should be set aside for pregnant women, in case we could not get rid of them before the time at which their confinements took place. Practically, some three or four women have been confined within the hospital, but just prior to the completion of their time, negotiations take place with the guardians, and they are taken to the union; but they do not go back on to the town. They remain at the union for a month, during which time the probability is that they are cured.

323. Have you been able to preserve from disease children who are born while the mothers are in that state?—Those children who have been born while in hospital have not been subject to any disease.

324. Have you had any cases of acute ophthalmia?—No.

325. Mr. Percy Wyndham.] Why was the practice of examining sailors given up?—I do not know at all.

326. Lord Charles Bruce.] In the Schedule to the

the Act there is a form of notice to a woman leaving the hospital uncured, which applies to section 34 of the Act; have you had any such cases?—That certificate it is necessary to give, I think, because it would have a desirable effect, and she dare not show it.

327. *Dr. Brewer.*] But, with regard to the certificate of health, does she not show that?—She does show the certificate of health; it is, practically, the French system; it is a certificate of health, and it has no advantages that I can see.

328. Except that she plies her trade with it more satisfactorily?—Yes; I have known cases in which the certificate has been shown.

329. Would you advise that that should be done away with entirely?—Yes.

330. *Mr. Mitford.*] Would you think that the certificate should be given to the police, instead of to the woman herself?—That might be done; my objection is entirely to giving it to the woman herself, inasmuch as she uses it for the very purposes for which the French do.

331. If it were given to a superintendent of police, that would meet the requirements of the present Act, and it would do what you think would be desirable?—Yes; I see no objection at all to that; I only object to the woman having it herself, and making use of it.

332. *Dr. Brewer.*] You keep a copy of every cure, do you not?—Yes, the proof can easily be ascertained, because a woman can prove that she has been in the hospital, and she can prove, by means of the medical staff of that hospital, that she has been discharged as cured.

333. *Mr. Murphy.*] An entry to that effect might be made in the books of the hospital, might it not?—Yes. It is so done at the present time.

334. *Chairman.*] Are you of opinion that it would not be advisable to extend the Act beyond the area over which the metropolitan police have power?—I should hold the opinion, that to every part of the United Kingdom to which it could be extended, it would be an advantage as far as the success of the Act goes.

335. Do you think, from your experience of municipal bodies, and of watch committees, and of the local police generally, that they would be likely to administer this Act, which requires some delicacy in handling, as well as the metropolitan police?—I should say that you should merely extend it to a certain area, because to a great extent it is still an experiment; take every means to make that experiment a fair test, but do not go beyond the proposed limit; because I am certain, from my knowledge of the town in which I live, that the public are not prepared for a greater extension; it would be unpalatable to the majority of local authorities.

336. *Dr. Brewer.*] Has any woman been brought to you not diseased?—Yes.

337. Has she been brought to you by false accusations?—Yes.

338. Has any injury to person or to feeling been done to that individual to your knowledge?—No injury to person, but a considerable injury to feeling.

339. *Mr. Percy Wyndham.*] How far does the district round Portsmouth extend?—Five miles, under the present Act.

340. But that does not include Havant, does it?—No.

341. Do you think that much advantage would accrue from extending the district, so as to include Havant and those small villages which may

be called the outskirts of Portsmouth, unless a further extension was made so as to include large towns like Chichester, to which you have alluded?—I think it necessary to go as far as Chichester on the one hand, and Southampton on the other; I think, that unless you include those towns and the Isle of Wight, any extension would be useless.

342. Do you not think that carries the whole question of extension to the whole kingdom; because if you go as far as the farthest town which you have mentioned, there must be another town, north, south, east, or west, of that, to and from which women are passing?—Yes; but we find that sailors, or soldiers, who are the chief parties to be benefited by this Act, go probably within a radius of eight or nine miles round, but they do not go further.

343. But are not fresh regiments coming in from other parts of the country?—Yes; but an extension of this kind would take in all the military stations; it would take in Chichester and Winchester.

344. *Sir John Simon.*] Chichester would be a centre of itself, would it not?—Chichester would be a centre of itself. Aldershot is strongly under the Act now; London is not under it at present.

345. *Dr. Brewer.*] How do you obtain the information of a woman not being guilty of prostitution being brought before you as a public prostitute?—I knew one instance of my own knowledge, by my happening to know the woman as a respectable married woman. She had been guilty of a little indiscretion; she had, I believe, even accosted one of the police officers themselves, not for the purpose of prostitution, as he admitted, but she was, to use his own term, "Larking about the streets," and he concluded that she was a prostitute.

346. What injury occurred in consequence of that case being brought up to you?—No injury, except to her feelings at having been brought there.

347. Was there any malice on the part of the officer?—Not at all.

348. Have you ever had a case of malice?—Never.

349. Upon the whole, do you find any fault with the police?—Not at all; I think that whatever fault would be committed, would be a want of judgment, and not an intentional fault; and I think that power given to the visiting surgeon to relieve from examination would cancel the injury which arises.

350. Was this woman examined?—No; this woman was not examined, because I knew her to be a respectable woman, and I declined to examine her, and the police noted that, and nothing further has been heard of it.

351. Could any modified examination be suggested in those doubtful cases, or where a woman protests her own virtue?—No modification of the examination could take place; but I think power might be given very fairly to the visiting surgeon, if he is satisfied in his own mind, by the manner of the woman's giving her evidence, and conduct of the woman generally, that she is an innocent person; because I need scarcely say that there is a wondrous difference in the manner and deportment of the two classes. He should have the power of saying to the police, "I believe this woman to be a modest woman, and that you

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have made some little mistake;" and she might be relieved from coming again.

352. Have you no such power under this Act?—No; having been brought up by the police, the women must then apply to the magistrates for relief. I do not see how there could be any modification of the absolute medical examination. You must medically examine her, or else you must decline to do so upon your own responsibility. You frame your opinion from the manner of the woman. One or two women have willingly offered to take their oaths that they were modest women, and nobody has power to relieve them but the magistrate, to whom they are unwilling to go.

353. *Chairman.*] Were they brought up by the police?—They were. The only alternative they have is to go before the magistrates, and the magistrates have relieved them. I have pointed that out to one or two, and they say, "Oh dear no! I would rather not do that for any consideration. I would far rather come for periodical examination for 20 years. I do not mind coming before you, sir;" because the examinations are very private; whereas, if they go to the magistrate's court, it is known all over the town, and the husbands and friends become acquainted with it.

354. Do you suggest that the visiting surgeon might protect a woman from examination altogether, if he was sufficiently convinced from moral reasons that she was not diseased?—Yes. If he has it satisfactorily proved to his mind that the woman is a modest woman, and that she is never again seen in places where prostitutes assemble, and if there is no fresh repetition of ground of suspicion, I should say that the visiting surgeon should have the power of relieving her.

355. And he has not that power under this Act, has he?—No.

356. *Mr. Kinnaird.*] He would give her a certificate, and then she need not appear before the magistrates?—He, the visiting surgeon, should have the power without the necessity of the woman going to a magistrate as at present.

357. *Chairman.*] Have you had many cases of virtuous women so brought up?—No, not many.

358. Have you had half-a-dozen such cases during the whole operation of the Act?—I should think less than that; but I should observe that the cases of women who have been so brought up have occurred recently, and since the periodical examination was enforced; prior to last January, none of those cases occurred. The imperfections of the Act never became apparent until after January, because a sufficient number of diseased persons was so easily found to fill the beds, that there was no difficulty about it. Even those who came voluntarily and asked for admission were sufficient to fill the beds, and now the police are obliged to go in a much wider circuit round the town, into the suburbs, and so on, to find disease.

359. *Sir John Pakington.*] Do you require more beds?—No; although there are nearly double the number of women brought under the operation of the Act that there were originally.

360. *Chairman.*] You mean that the visiting surgeon should have the power of giving a woman what may be called a certificate?—I would rather say that he should not give a certificate, but that he should have the power to relieve her from coming again, and give notice to that effect to the police.

361. *Mr. Kinnaird.*] In the instance which you have mentioned, what would have happened if you, feeling it just and right so to do, had quietly let the woman go without examining her?—I did it in that case on my own responsibility, for the simple reason that I happened to know the woman, and I knew that she was not on the town from personal knowledge of her for many years; I knew her husband.

362. If you were only carrying out the spirit of the Act by so doing, what could have been done to you for it?—I believe I am bound to examine every woman, whether presenting herself under a magistrate's order or voluntary submission. If unjustly examined, I apprehend the woman would have her remedy at law.

363. *Mr. Percy Wyndham.*] But, practically, there is very little fear of cases of that kind occurring, is there?—Very little.

364. Supposing that one of those policemen were to bring to you a modest woman; would she have any difficulty in bringing before you such evidence as would enable you to discharge her?—That is just the point; unfortunately, I am not the person to decide upon that evidence. They have to go to the magistrate to produce that evidence; which going before the magistrates is especially unpalatable to them, because it makes it more public, and that they wish to avoid.

365. *Sir John Simeon.*] You, in fact, in this case, undertook a responsibility which you would be glad to be free from in any future similar occurrence?—Just so; but I think that the power should appertain to some one (and perhaps there is no one better than the visiting surgeon) of saying to the police, "In my opinion, you have committed an error. This woman, I have reason to believe from her statements, is not what is understood by a common prostitute. I shall, on this occasion, let her go; and let it be a distinct understanding that, if she is again found in any places giving rise to suspicion, she will again come here, and then she must be subjected to periodical examination."

366. *Chairman.*] That is a power with which you would invest the visiting surgeon?—Yes, I would.

367. *Sir John Pakington.*] I understand that, you wish to increase the power of the visiting surgeon in two directions; that is to say, you wish to enable the visiting surgeon to exempt a woman from examination if he sees good reason; and you would also invest the visiting surgeon with a power to relieve women from liability to examination?—Exactly.

368. Do you find, from any experience which you have had, that the powers of the metropolitan police at Portsmouth have not always been judiciously exercised?—Not at all. I base my opinion upon my own observation. In the first place, I believe that the alteration which I suggest will render the Act more popular; and that it will make those people subject themselves to its provisions with far greater willingness. They think, and very naturally, that when a woman has left the traffic of prostitution, and is married, as a great number are, that it is hard that they are still subjected to being brought before the visiting surgeon; all I can say to them is, that they must apply to a magistrate. Then they say, "We cannot do that."

369. When you speak of so many women hav-

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ing married, have you found that for the most part they marry respectably?—Many do; it is my own statistics that tell me the fact. I could not have believed it myself; but many of them marry exceedingly well.

370. On the whole, is it your opinion that the powers of the metropolitan police on this subject have been carefully and well exercised?—I think so; but it must be borne in mind, that the practical execution of the Act is confided to a class of men who probably are not the best versed in using judgment as to their selection; they see a woman out late of an evening, and they are very liable to jump at the conclusion that she is a prostitute.

371. *Chairman.*] What is the number of the metropolitan police force in Portsmouth?—There are a large number at the dockyard; there are four men employed for the purposes of this Act; an inspector and three constables.

372. *Sir John Pakington.*] Are they distinct from the dockyard police?—They are part of the dockyard police; I believe they have some other duties, but that is their chief duty.

373. *Sir John Simeon.*] In the case of a woman marrying respectably, she would emancipate herself from those recurrent examinations, would she not; and unless she was found under circumstances of suspicion, the law compelling her to subject herself to subsequent examination, would not be put in force against her?—I do not know that the Act contains any clause which would free her from that, otherwise than by application to the magistrates, and that they abhor; they say that it is a public notice that they are, or have been, prostitutes, which they would gladly avoid. Then, again, there can be no reasonable doubt that many of those girls become engaged to be married, to sailors especially; and I have every reason to believe, that for some little time prior to their marriage, they are living modest lives. If that class of women could be relieved, it would be a great point, because many sailors will not marry those women while they are coming to the visiting surgeon. They say, "No, you are a public prostitute; I will have nothing to do with you," and therefore it rather stands in the way of moral reformation.

374. *Dr. Brewer.*] What is your definition of a prostitute?—Any woman whom there is fair and reasonable ground to believe is, first of all, going to places which are the resorts of prostitutes alone and at times when immoral persons only are usually out. It is more a question as to mannerism than anything else.

375. Must she be making her livelihood by it?—Yes, she ought to be; but, if you confine yourself to that definition, all I can tell you is, that your Act will never succeed. The amount of clandestine prostitution is very large. I think the definition here, of "common prostitute," is very objectionable, inasmuch as I have heard it stated, by those who wish to object to the Act, that you have no right to bring under the provisions of the Act what may be called the better class of prostitutes, who, they say, are not common prostitutes.

376. *Sir John Pakington.*] Is there much disease among those women to whom you refer as clandestine prostitutes?—Yes; quite enough to neutralise any good effect from the Act. Unless your Act encompasses, or includes, every class of that sort, you cannot possibly hope to extirpate disease.

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377. *Mr. Tipping.*] What is the proportion between the numbers of clandestine or partial prostitutes, and the numbers of those who practise what may be called impartial prostitution, which would include the *inscrites* (as the French would call it), or registered prostitutes?—I should think, at a rough guess, half. I believe that, before the Act came into operation, the Government applied to the metropolitan police to supply them with some statistics as to the number of women. They went through all those large towns, Portsmouth, Plymouth, Devonport, and so on, and they endeavoured to find out from the brothel-keepers, and publicans, and others, the number of women gaining their livelihood by prostitution. I know very well that now that number is doubled; and I believe that the increase has arisen from the discovery of persons who are attempting clandestine prostitution, because the openly avowed common prostitute is as well known as anyone else.

378. *Mr. Percy Wyndham.*] What course have the police of Portsmouth taken with regard to that class of girls who perhaps are employed all day in milliners' shops, but who supplement their earnings by nightly prostitution?—The plan I believe adopted is this; that those four men whom I have mentioned are about the town, in those thoroughfares, and those parts of the town where those people generally congregate; and they become acquainted with their faces, and they see them associating with common prostitutes, and so give them notice to attend voluntarily for examination or otherwise, they, the police, will lay an information before the magistrate upon that suspicion.

379. In point of fact, they have classed them as prostitutes for the purposes of this Act?—Yes.

380. *Dr. Brewer.*] Would the words "plying for hire" be a satisfactory definition of prostitution?—I am afraid that that would not include all that I should like to see included; you want something including more than that.

381. *Lord Charles Bruce.*] What other definition could you give?—I think the Act says, "some fair and reasonable ground for believing."

382. It says here, "from information on oath, laid before a justice by a superintendent of police"; does the information always come from the police?—Always.

383. Do they get information from the women themselves?—Yes; the police get a great deal of information from the women. It is a very common thing for a woman to say, "well, I have no objection to come; I like coming up here. I am very willing to avail myself of the Act; but why does not so-and-so" (naming a person who is carrying on clandestine prostitution) "do so?"

384. *Marquis of Hamilton.*] Are the constables in plain clothes or in uniform?—In plain clothes.

385. *Mr. Percy Wyndham.*] Did I understand you to say that you would wish to see this Act extended to all places where soldiers and sailors are quartered?—Yes.

386. And failing that, you would like to see the areas round the stations, which are at present under the Act extended as much as possible?—Yes.

387. *Dr. Brewer.*] Would you wish the area to be as large as the metropolitan area, which is 15 miles?—Yes.

388. *Sir James Elphinstone.*] And that each station

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station for troops or barracks should be a centre?—Just so.

389. Sir John Pakington.] How far is Chichester from Portsmouth?—Between 17 and 18 miles; but that would include Emsworth.

390. But a radius of 15 miles from Portsmouth would not include Chichester, would it?—No; but Chichester would be a centre of itself. There are troops at Chichester and at Winchester. Southampton would come within the Winchester range, I believe, although I am not certain of the exact distance, and that is really the most important town of all. There is a fearful amount of disease there.

391. Mr. Kinnaird.] You say that you have 120 beds; how are they provided?—Under the present Act, as I think the right honourable Baronet, the Member for Droitwich is aware, the War Department pay for certain stations, and the Admiralty for the others. The Admiralty pay for Devonport and Plymouth, and I think for Chatham and Sheerness.

392. Have they hospitals of their own? No; there is an arrangement with the civil hospitals.

393. What do the Government pay per bed?—The Government pay 35 l.

394. Dr. Brewer.] What is the average duration of time of the curative process in each case?—The whole of that information can be procured from the Admiralty, or I can send it up to the Committee myself, but I am not able to answer the questions now.

395. How many cases have you had admitted into your hospital?—I should think 1,700.

396. Are you generally full?—Yes. The average was going down, as I mentioned just now, prior to the arrival of the fleet; and therefore I say that as the average increased, it was not a very unfair conclusion that the increase was caused by the arrival of the fleet. I do not say that it was so, but I only mention the fact.

397. How many new admissions are there into this hospital every year?—I should think that in the whole year we admit about between 500 and 600, but I will furnish the Committee with the exact figures.

398. Chairman.] With regard to the modification of the Act which you propose as to the examination of women who are really modest women, and who have been brought up under some error by the police, does a woman sign a paper before you examine her?—Yes; they all sign a voluntary submission, unless sent by order of a magistrate. I could not examine, neither have I ever examined, any woman without a voluntary submission, except those who were sent by order of the magistrates.

399. Supposing that a woman is brought up by the police who is a modest woman, surely she would decline to sign that paper, would she not?—No; for this reason; the police, believing the correctness of their own impression, say, "Very well, if you do not sign that, you go to the Bench;" and then the woman says, in order to avoid that, "I do not mind going into a private room and speaking to Mr. Parsons," and she will sign the voluntary submission.

400. Therefore they sign a voluntary submission under the fear of being taken before the magistrate?—Unquestionably.

401. Sir James Elphinstone.] What proportion of those women cannot sign their own names?—A great number of them cannot.

402. Dr. Brewer.] Are there many married

women who are common prostitutes?—Yes; there have been many who have been married, and separated; and some of them have been married five or six times.

403. Sir John Pakington.] Do you consider that much disease is brought into Portsmouth by merchant ships?—I think not. The amount of merchant shipping at Portsmouth is not very large. I have had reason to believe that at Emsworth, which is the resort of a number of small trading vessels and colliers, and ships of that sort, there is a great deal of disease. That is a small town between Portsmouth and Chichester, on the coast. We have had very many women, inmates of the hospital, who have come from Emsworth diseased.

404. Is Emsworth within the Act at present?—No; but it would be under such a suggestion as has been made.

405. Chairman.] When you quoted the increase of the disease on the arrival of the Reserve Squadron the other day, you were aware, I suppose, that it was an exceptionally manned fleet?—I do not pretend to offer any explanation; I thought it would be desirable for the information of the Committee to tell them that such had been the fact; I should be sorry to charge anyone; but I simply tell you the facts as they occurred; I would not wish anyone to understand positively that that was the cause.

406. But when a ship of war arrives from a foreign station, it is like a regiment arriving in a town; do you find that there is a traceable increase of disease immediately consequent upon that?—No; one ship would scarcely supply it, I think.

407. Does a regiment do it?—Yes; a regiment does it, undeniably.

408. Dr. Brewer.] I suppose the fact of the case is, that during the voyage the men are cured, and therefore do not give the same amount of disease?—Exactly; in the same way that it is held that a woman, after she has been in the hospital for some time, although her malady is not entirely cured, is not so contagious as she was before; I would suggest that if some steps could be taken to prevent men either in the army or in the navy from distributing the disease in the way that they do, you would attain a greater amount of success. That is the chief loop-hole by which the evil takes place.

409. Mr. Percy Wyndham.] Do you find as a matter of fact, that when a fresh regiment comes in to one of the stations to which the Act would apply, the ratio of disease immediately goes up?—It is a fact.

410. Dr. Brewer.] Do you know whether disease has been extensively communicated by women who have been restored to health coming out of the hospital, and associating with men immediately afterwards, the women giving the disease to the men?—I do not see how such a thing could be possible. The only way of accounting for it would be the conclusion that the woman was not cured.

411. But, practically, do women who are allowed to go out of hospital as cured, and who have connection with men that night, or subsequently, produce disease in those men?—I do not believe that they do, because I am quite satisfied that every possible means is taken to prevent every woman from leaving before she is cured. It is quite possible that a woman discharged as cured might have a relapse of the disease

disease in a week's, or a fortnight's, or a month's time, but that she never leaves the hospital until she is apparently cured, I am perfectly satisfied.

412. Is Gonorrhœa produced?—Possibly.

413. Sir John Simeon.] You have suggested that it would be advisable to give to the medical officer more power and greater responsibility as to releasing a woman whom he believed not to be a prostitute from examination; do you think that there would be any practical objection to giving a medical officer the same power of relieving from future examination a woman whom he believed to be reformed, and to be likely not to return to a life of prostitution?—No; those are the two points which I would suggest as being very desirable, in order to make the Act more popular with those people, and as doing away with the source of injured feelings.

414. You would see no harm in entrusting to the medical officer the power which is at present solely vested in the magistrate?—I cannot possibly see any harm, because the object of the medical officer would be to exercise the power as little as possible. The larger the number of persons under the Act, the greater the chance of success, and I cannot see that he could possibly do any harm.

415. Sir John Simeon (to Mr. Sloggett).] You heard the question which I just put to Mr. Parsons; he suggested that it would be advisable to give power to the medical officer not to subject to examination a woman whom he had reason to believe was unjustly brought before him as a

prostitute; do you hold the same opinion?—I think that a notice should also be sent to the magistrate at the same time, to avoid the possibility of its being said that the visiting surgeon had been actuated by an improper motive; those accusations may be made at any time, and I would do away with anything which would give rise to the possibility of such accusations being made; and if the visiting surgeon's recommendations are also sent to the magistrates, it throws the responsibility over a larger number of people, and on that account I would like notice to be given to the magistrates.

416. Then you would admit, would you not, that cases of hardship might arise, as in the instance of a woman who was going to be married, or who was desirous of emancipating herself from her past career, and who at the same time was under the law to the extent of being subject to periodical examination?—That hardship would be done away with at once. If a woman brings witnesses that she is going to be married, or that she is married, the visiting officer should have a discretionary power to order the police not to cause her to re-appear; but he should at the same time send a notice to the magistrates that he has done so.

417. At the same time, that would prevent any injurious consequences arising to the woman from any publicity attending the application, would it not?—Entirely; while the magistrates would be aware that women who had formerly been prostitutes were being re-claimed.

Mr. EDWARD SWALES, M. R. C. S., L. S. A., was called in; and Examined.

418. You are Visiting Surgeon at the Lock Hospital at Sheerness, are you not?—I am.

419. Have you been so ever since the Act of 1866 has been in operation?—I became so very soon afterwards.

420. Sheerness is somewhat exceptionally situated, I believe, inasmuch as I think you have no hospital accommodation?—We have no hospital at Sheerness; we send the patients to the Lock Hospital at Chatham.

421. Does Chatham also come within this Act?—It does.

422. Do you find that this Act has been very beneficial at Sheerness, both as regards the number of cases, and as regards the character of the disease itself?—It has been exceedingly beneficial in both respects. There is no doubt that we could have entirely got rid of the disease if we had not had it imported at times.

423. When you speak of the disease being imported, do you mean that it has been imported by ships coming to Sheerness, or by people coming from outside the area of five miles?—I mean principally from soldiers coming from unprotected districts; from Warley, for instance.

424. Mr. Kinmaid.] Is Warley a large dépôt of soldiers?—Yes, I think it is; it is an Artillery dépôt.

425. Chairman.] And from sailors also?—And from sailors also.

426. When the Act first came into operation, it was not very popular, was it?—It was not. I think the prostitutes seemed to look upon it more as a punishment at first than anything else.

427. Was there great difficulty in getting them voluntarily to confess their illness?—There was.

428. Since then, have you found that it has

been more successful?—Very much more successful. They believe now that it is for their good, and they come up quite willingly, of their own accord, and are examined.

429. You have heard Mr. Sloggett's suggestions with regard to alterations and modifications in the Act, have you not?—I have.

430. Do you agree with him in all his views?—I do.

431. With regard to extending the area of the Act, do you find considerable difficulty meeting you from the fact that your power is limited by the limitation of five miles?—No, we do not, from the peculiar position of Sheerness, being an island in itself. We have no place in close proximity from which disease would be likely to be imported, except Sittingbourne and Milton, where there are no troops or sailors, so that it is of less importance to us than to other places. There is one place, the Isle of Grain, where a new fort has been built, just across the Medway, which should be included. There are always a number of soldiers there, and there is a small village springing up there, about a mile from the fort. A good many prostitutes go there.

432. Do you find that prostitution itself has been decreased by the operation of this Act?—Yes, I think it has had a very good moral effect, inasmuch as it has allowed them time for reflection.

433. Could you give the Committee any statistics of the number of prostitutes in Sheerness before the operation of this Act, and the number there at present?—At the commencement we had about 65, and there are about 10 less at the present time.

434. Were there only 65 prostitutes in all Sheerness?

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Sheerness?—Only 65 under the surveillance of the police.

435. Mr. *Kinnaird*.] Is there a good deal of semi-prostitution in Sheerness?—Yes.

436. Dr. *Brewer*.] What would stamp out the disease in Sheerness?—Entire isolation, and not having it imported.

437. Mr. *Percy Wyndham*.] Is it not the fact that the Act has been more successful at Sheerness than at any other station?—It is.

438. To what do you attribute that?—Entirely to our peculiar geographical position.

439. *Chairman*.] What are the number of cases that you have now?—I think at present we have six or seven in the hospital altogether.

440. Can you give the Committee a return of the number of cases you have had this year, and last year, and the preceding year?—I could send up to the Committee a return showing the relative number.

441. Mr. *Percy Wyndham*.] You have sometimes had not a single diseased woman in the place, have you not?—Yes.

442. I see that Mr. Mallalieu gave evidence that there was one month in which you had not a single diseased woman in the place?—Yes.

443. *Chairman*.] What is the accommodation in the Lock Hospital at Chatham?—Thirty beds, I think.

444. This Act is entirely under the metropolitan police, is it not?—It is.

445. Do you agree with the Witnesses who preceded you, who objected to its being put under the borough or rural police?—I think the metropolitan police have managed it admirably with us. There has been one detective at Sheerness all the time, who is a most effective man, and he has carried it out thoroughly well.

446. Do you find that the metropolitan police have brought up by mistake many women who, in fact, have not been prostitutes, but who have been modest women?—No; I have not had one such case.

447. Dr. *Brewer*.] What do you do with married women who are prostitutes?—We take them in all the same; pregnant women we send to the workhouse.

448. Are they attended to at the workhouse?—Yes.

449. Have you known any cases which have not been attended to at the workhouse?—I have not.

450. Marquis of *Hamilton*.] Are they bound to take them in at the workhouse?—They would be bound to take them in, because they would become paupers.

451. *Chairman*.] Do many women object to going there if they are sent there?—No; we have only had four or five such cases altogether, I suppose, from the commencement of the operation of the Act.

452. Mr. *Kinnaird*.] Where is the workhouse situated?—About two miles from Sheerness.

453. Sir *John Pakington*.] I understood you to say that from the peculiar locality of Sheerness, the extension of the powers of the police to a radius of 15 miles would be no great advantage to you?—It would not.

454. Dr. *Brewer*.] Have you much itch amongst this class of women?—Not very much; not so much as one would expect.

455. *Chairman*.] Is it prevalent among the soldiers at Sheerness?—It is not.

456. Mr. *Percy Wyndham*.] Supposing that the areas of other stations were extended sufficiently, so as to bring about the isolation which you have at Sheerness, from your geographical position, do you see any reason why there should not be a still greater diminution in the amount of disease?—The fact is, Sheerness only proves how much the Act of Parliament would do if properly carried out.

457. Mr. *Mitford*.] I see, in the evidence of Mr. Romaine last year, that the Lock Hospital attached to your place was at Rochester, and not at Chatham?—It is not at Chatham, but it is called the Chatham Hospital.

458. Do you find any disadvantage in giving the certificate of cure to the women themselves, as you have to do under the provisions of the Act?—I have often thought that they might use it as a clean bill of health.

459. Do you think it desirable that it should be given to the superintendent of police instead?—Yes, I should think it desirable.

460. Mr. *Percy Wyndham*.] Have you any reason to believe that the number of loose women in Sheerness who have married, or who have taken to leading moral lives, has increased since the operation of the Act, as compared with the time previous?—I have no means of judging of that fact.

Mr. PETER LEONARD, M.D., called in; and Examined.

Mr.
P. Leonard,
M.D.
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461. You are Inspector of Certificated Hospitals, are you not?—I am.

462. And in that capacity you have had experience of the working of this Act over all the towns in which it is in operation, have you not?—I have been doing the duty ever since the first Act was put in operation.

463. With regard to the general success of the Act, what is your opinion?—I think that the Act, so far as its limited powers have allowed, has been most successful.

464. At the present moment it is limited to 12 stations, is it not?—It is.

465. Will you enumerate those stations?—Devonport, Portsmouth, Sheerness, Chatham, Aldershot, Woolwich, Windsor, Colchester, Shorncliffe, Cork, The Curragh, and Queens-town.

466. With the exception of the three places in

Ireland, the Act has been entirely confined within the area of the metropolitan police, has it not?—Quite so, and they have worked it very well.

467. You have heard the evidence which has been given by Mr. Sloggett and others, with regard to modifications and alterations in the Act; do you concur in those alterations?—I concur very generally in the suggestions made by Mr. Sloggett.

468. Do you think that this Act, as far as its present extent goes, requires those alterations, and that with those alterations it would work better than it does now?—Much better. If the area was extended, the Act would work much better.

469. But with regard to the Act itself, do you think that if those alterations were made, it would work better?—I think it requires some alterations

alterations very materially. The assimilation of the 17th Section to the 28th is, I think, very much wanted.

470. That was also proposed with regard to the 32nd Section; what would be your view as to that?—I should think it is very necessary to amend that also.

471. So as that unless a woman proves that she has given up habitual prostitution, she should be still subject to periodical examination?—Yes.

472. With regard to the 24th Section, as to increasing the duration from six to nine months, what is your opinion?—I think it is very desirable to extend that. It is more especially wanted now, because we have discovered that there are a number of incurable cases, and it is very desirable to give time to ascertain whether cases are incurable or not. (*Vide Table in Appendix.*)

473. Sir John Pakington.] Do I understand you to say that there is any considerable proportion of prostitutes who become so diseased as to be incurable?—A considerable number become so diseased as to be incurable.

474. Dr. Brewer.] Do you not think that that arises rather from imported disease, true syphilis, than from any extension of the modified disease common to England?—I am speaking of cases which have been many years upon the town (as it is called), and who have become so thoroughly impregnated with the syphilitic poison that it is almost impossible to cure them of it, and who are also diseased in other respects. Such cases as those, I conceive, should not be kept in the Lock Hospital, but should be sent either to a general hospital or to the union.

475. Sir John Pakington.] Can you at all state what proportion of prostitutes you think are in this state of incurable disease?—I can give the Committee the results of the last quarter's return, both at Portsmouth and Plymouth, as to that fact, if they will allow me to do so. During the quarter ending the 31st March last, there were two cases sent from the Devonport Hospital discharged incurable. (*Vide Table in Appendix.*)

476. Dr. Brewer.] What was the nature of their disease?—That I cannot state, without looking at the register; there was syphilis.

477. Was it true syphilis?—True syphilis.

478. Imported syphilis?—Yes.

479. Not modified by transmission?—I cannot answer that question satisfactorily.

480. Sir John Pakington.] You were proceeding to give us the proportion of prostitutes who are incurable; will you continue your statement?—From the Portsmouth Hospital there were two incurable cases discharged during the last quarter. One was sent to her friends, and the other to a reformatory.

481. Can you carry that far back, since the commencement of the operation of the Act?—I can give it for some time past; but those returns have only been sent in within the last 12 months. (*Vide Table in Appendix.*)

482. I presume that those women who are affected by long standing complaint to such an extent that you cannot cure them, must always be in a condition to communicate disease to men?—I should be afraid that that would be so, and they ought to be taken care of; that is to say, simply, that they ought to be segregated from the public, so that they may not spread disease. There is always the liability, if a woman has

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secondary or tertiary syphilis, that she may spread disease.

483. I presume, from the answers which you have given, showing that there have been four incurable cases in those two hospitals in the last quarter, that there must have been a considerable number since the Act came into operation?—A very considerable number. During the quarter ending 30th September 1868, five incurable cases were discharged from Devonport Lock Hospital, and three from that at Portsmouth. (*Vide Table in Appendix.*)

484. In what manner have those cases been treated?—In some of the stations the woman has been received at the union, and then she has been kept and treated there; in other cases women have been merely discharged from the hospital, and allowed to go at large. But it appears to me that something should be done to keep those women apart until they are thoroughly well, if they are ever to get well.

485. But you cannot keep an incurable woman apart until she is thoroughly well?—No, but while there is any risk of spreading the disease, she should be segregated in some way.

486. Have you any suggestion to offer as to the best course to be pursued in such cases?—I should say the best course would be to keep an incurable patient in the workhouse of the neighbourhood.

487. Dr. Brewer.] With regard to disease, the word of course means two things: a woman may be diseased with relation to herself, and diseased with regard to her relationships outside. In these cases have you any women diseased in relation to other people, or do you use the word simply in relation to the woman herself?—Simply in relation to herself. It is quite possible that the disease may be communicable, though it cannot be ascertained with certainty.

488. Sir John Pakington.] But is it your opinion that an incurable case of syphilis is communicable, or not?—That is very questionable. It is a matter of medical opinion altogether.

489. Mr. Percy Wyndham.] Is it not the fact, with regard to these incurable or obstinate cases, whatever kind of syphilis it may be, that they are the result of neglect, and that they could have been cured if they had been treated at an early stage?—There is no question about that.

490. Therefore, supposing that this Act can be more rigidly enforced, those cases might from time to time disappear, might they not?—Certainly.

491. Do you consider that the effect of this Act, during the two years that it has been in operation, has been not only to reduce the number of syphilitic cases generally, but also to reduce and modify the character of those cases?—There can be no question that that has been the effect to a very large extent. At all the stations in the first schedule in the Act, the number of common women examined during the third quarter of 1868 was 5,073; and there were found diseased amongst them 1,220. The number of common women examined in the March quarter of 1869, that is last quarter, was 6,974; and of those were found diseased 1,254; only 34 more than on the previous occasion; that is to say, out of nearly 7,000 women examined, there were only 34 more found diseased than there were out of 5,073 in the previous quarter.

492. Chairman.] But how is it that there were so many more examined?—The periodical examinations had been commenced and continued

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regularly. Every woman has latterly been brought forward for examination once a fortnight.

493. It does not mean that prostitution has been on the increase, does it?—No; many of those women have been examined, over and over again.

494. Is it your opinion that the operation of the Act has reduced the number of prostitutes?—It is my opinion that it has reduced the number of prostitutes immensely.

495. And that it has had a good moral effect as well?—Certainly with the young a deterrent effect.

496. Dr. Brewer.] How many women have been brought up to be examined who have not been diseased?—Some of the weekly returns will show that at once; I have the weekly returns for the whole of May, at Devonport; the number of women brought forward for examination, on the 1st of May, was 178, and the number found diseased out of the 178, was 29. (*Vide* Table in Appendix).

497. Were they all prostitutes that were brought before the visiting surgeon?—They were all prostitutes; on the last day of May 211 were brought forward, and only 12 were found diseased, so that on repeated examinations the number brought forward exhibits a smaller amount of diseased.

498. Marquis of Hamilton.] Then there were a number in hospital at the same time, were there not?—The number in hospital on the 1st of May was 123, and 111 on the last.

499. Chairman.] Is it possible to strike anything like an average of the time it takes to cure an ordinary case of syphilis?—The average is stated in most of these returns. The average time required for cure at Portsmouth, during the quarter ending the 31st March last, was 40½ days, or in round numbers, 40 days. At Devonport the average time was about 31 days.

500. Would any return show how often the same woman has come into the hospital?—I think I can answer that question as to two places during that period; at Plymouth, out of 403 patients admitted during the quarter, there were 71 for the first time in hospital, 86 for the second time, 85 for the third time, 68 for the fourth time, 43 for the fifth time, 27 for the sixth time, 14 for the seventh time, 6 for the eighth time, one for the ninth time, and two for the tenth time.

501. Were those women who had been in hospital so often, subject to the fortnightly examinations?—Latterly.

502. And they became diseased between the time of their first and second examination?—The periodical examinations only commenced at a recent period, and these women had been in hospital very often long before that; I am not able to state how often they have been in since the periodical examinations commenced; I think it would be only ascertained by referring to the register.

503. Sir John Pakington.] But the periodical examination has lasted much longer at Plymouth than at Portsmouth, has it not?—No; just about the same time, I think, five months or so.

504. Chairman.] I suppose you attach the greatest possible value to the periodical examination?—It is of the utmost importance.

505. It is, in fact, the whole key to the Act, is it not?—It is the whole key to the Act, and it is of the utmost importance that these examinations should be carefully carried out.

506. Mr. Percy Wyndham.] Why was not that adopted before?—Because there was not accommodation; I must say that the Act has not had very fair play in that respect, the accommodation is barely sufficient now in most places; at Plymouth, I believe, there is now a difficulty in filling the beds, but for the last fortnight or three weeks the Portsmouth Hospital, with 120 beds, has been kept constantly full, and some patients could not be accommodated. There have been three or four, I notice, for whom there was not room; therefore I infer that there is not sufficient accommodation at Portsmouth.

507. Chairman.] With regard to Aldershot, how do you find that the Act works there?—It seems to answer remarkably well; they have not had sufficient accommodation until recently, but a new wing has been built there for 40 or 50 more beds, and it is to be hoped that now we shall have a better result than formerly.

508. In the neighbourhood of Aldershot there are villages full of prostitutes just outside the five-mile limit, are there not?—Yes; and they lie about the hedges and ditches.

509. And they are in the habit of crossing the border during the day time and going out at night?—Yes; and of course that vitiates the Act altogether.

510. So that really the prostitution in Aldershot has not been very much decreased by this Act?—Very little.

511. Mr. Percy Wyndham.] They come to Aldershot from all parts, do they not?—From all parts, and they congregate there.

512. When you are aware that a woman is diseased, and you have no room in the hospital, has she to await until there is a bed vacant?—There is a record kept of the names of women in a diseased state, and when vacancies take place, the police bring them in.

513. Sometimes the delays have been, I suppose, considerable?—Sometimes the delays have been very considerable.

514. Would not great mischief arise in consequence of those delays?—Yes.

515. Chairman.] Are there at Aldershot many women who voluntarily submit themselves to periodical examination, who live within the limits of the metropolitan police area for the purpose of pursuing their prostitution, and who become, so to say, certified prostitutes?—Yes; I think I can give you the number during the whole of May at Aldershot and at Shorncliffe. There were 104 brought forward at Aldershot by the police for examination on the 1st of May; nine of these were found to be diseased, and admitted to hospital, and 35 remained under treatment. The number rejected as not diseased was 65.

516. What became of the balance?—During the catamenial period the women cannot be examined, and that makes the difference. There were 30 women on that single occasion who could not be examined from that cause; and what I want, if it could possibly be done, is to get them detained until they are in a fit state to be examined, but it is a difficult thing to do, and I do not see my way to that.

517. Sir John Pakington.] Those women are brought up by the police, and they might be brought up again a few days afterwards, might they not?—That is the only thing we can do with them at present; but it is a great pity that those women cannot be detained, because very possibly one-half of them may be diseased.

518. Chairman.

518. *Chairman.*] Would you propose that any woman who submits herself to examination, under those circumstances, should be kept in durance until she can be examined?—Yes; but there is a difficulty in getting space for those purposes.

519. How many of those 104 women who came up for that examination were habitual prostitutes?—All of them. On the 29th day of May, 96 prostitutes were brought forward at Aldershot for examination, and 13 were admitted to hospital, 22 were excused from the same cause as before, and 61 were rejected as not being diseased; 52 remained in the hospital.

520. *Dr. Brewer.*] Is there any connection between the proportions of 96 and 104, and 9 and 13; is it that the 96 had plied their trade more in consequence of the diminution of the number of prostitutes?—It is impossible to tell how it was. The police brought forward 104 on one day, and 96 on the other. I suppose that that was all they could get. I merely give the facts as they appear on the lists sent to me.

521. *Mr. Mitford.*] From what return do you quote those figures?—It is the weekly return sent by the visiting surgeon at Aldershot to the War Office, and it is submitted to me afterwards, and I make those quotations from it.

522. *Chairman.*] Would it not be quite impossible to keep down prostitution in a central place like Aldershot, unless you had a very large area around it which is kept clear?—Quite impossible; you cannot do it without the areas being extended.

523. Do you mean to such a size that the soldiers cannot get out of it?—Exactly; and it is a very difficult thing to do that.

524. *Dr. Brewer.*] Have you any notion where those women come from?—I could give you the birthplaces of a great many of them. For instance, I have heard the examination to-day, and I think it very desirable to have the limits of the Plymouth and Portsmouth stations extended. I can give you the places where the women come from there, which I think is very interesting. The residence and birthplace of 127 out of 403 prostitutes, who were admitted to Plymouth Hospital during the past quarter, that is, the quarter ending the 31st of March, were born in either Plymouth or Devonport, and with few exceptions, the rest were born in the neighbouring villages, towns, and counties; but the necessity of extending the Act is shown in this, that Exeter contributed 16, and every place between Exeter and Plymouth on the railway line, sent a few, and the same on the Cornwall line; Truro sent 14, Penzance and Falmouth 12 between them, and Jersey supplied eight. I think that shows the necessity very strongly.

525. *Mr. Mitford.*] How do you get at the information?—From the "Medical Register," and from the people themselves.

526. *Dr. Brewer.*] Do they tell the truth?—You must take it for what it is worth; you have no other means of getting at the truth.

527. *Sir John Pakington.*] To what extent would you increase the area round Aldershot?—I would increase it to the extent of the metropolitan police boundary, 15 miles; and include any large town a short distance beyond that.

528. But do you think that a smaller radius of 15 miles would not answer the purpose?—I do not think it would.

529. *Chairman.*] Do many women go from

London to Aldershot for a day, and go back at night?—I do not think many do that.

530. Most of the lower class of women who receive the soldiers are located in the villages about, are they not?—They are located in the villages about; and not in the villages only, but in the hedges and ditches.

531. *Lord Charles Bruce.*] Have the police now any power to remove those women within the military circle of the camp, which is a mile round the camp?—Yes.

532. *Dr. Brewer.*] Have you taken the place of residence of the 104 women at Aldershot?—I have not, but I dare say the visiting surgeon could give the Committee all the particulars about it. He could give you, at all events, the places of residence generally. They resort to dancing rooms and public-houses in the neighbourhood. There are a great number of such places just without the boundary of the camp all round. There are many more prostitutes at Aldershot than 104; those were only the number examined on the 1st of May. On the 15th of May there were 131 examined. With regard to the extension of the area, the number of those who were admitted to the hospital at Portsmouth during the last quarter amounted to 203; of those 74 were born in or near Portsmouth, and 45 in a circle including the Isle of Wight, Southampton, Salisbury, and Winchester, showing the necessity of the extension of the Act in that direction. When I visited the Portsmouth Hospital only a few days ago, I found that the worst cases of disease in the hospital came from Southampton, beyond the limits of the station.

533. *Chairman.*] With regard to Aldershot, is it your opinion that it is impossible to do much good under this Act, unless you extend the area?—I am quite of that opinion.

534. *Mr. Mitford.*] Could you tell the Committee if there is any system of inspection of men in the Navy on board ship?—I understand that there is an order given by the Admiralty, that the men shall be inspected before they land, on a ship arriving.

535. *Mr. Percy Wyndham.*] Are they inspected two or three days after they have gone to sea?—I should fancy that that must be done also.

536. *Chairman.*] Could you give the Committee any information with regard to Colchester?—I can give you similar information to that which I have given with regard to the other towns.

537. You know that it is said by some that the Act has not been so successful at Colchester; is that so?—It has scarcely had time to have any effect yet.

538. It has been in operation there as long as it has been in operation at Plymouth and Portsmouth, has it not?—The hospital was only opened a few months ago; it was certified in the "Gazette" on the 22nd January.

539. *Mr. Percy Wyndham.*] There was a difficulty in getting hospital accommodation there, was there not?—There was an excellent civil hospital there; and I asked the managers to admit those patients to it, and Government would pay for them, but they objected. The hospital was about two-thirds empty, and it was expected that the managing committee would agree to admitting those patients, but they would not hear of it on any account. The governors objected to it in the strongest terms, and I was obliged to give it up.

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540. Dr. Brewer.] Was it upon economical grounds that they objected?—No; they objected to have any contagious disease in the hospital; in fact, there was a clause in the regulations of the hospital that no contagious disease should be admitted.

541. Does Colchester exhibit a greater number of diseased women at this present period than at any previous period?—I believe there is a very small number brought forward there. The number brought forward on the 22nd of May was only 15, and the largest number has been 21.

542. Chairman.] Is the Act popular in Colchester?—So I believe. No difficulty has arisen yet in getting women to come forward voluntarily.

543. I see that in one of the answers which you gave in your examination before the Committee of the House of Lords; you say that it is not popular in some places, and that at Colchester it is not popular?—That is alluding to the introduction of the Act at Colchester; and I gave as evidence that the governors of the Civil Hospital objected to admitting the cases at all.

544. And they declined to give a ward for that purpose, did they not?—They declined to give a ward for the purpose; they declined to give any aid at all in the matter.

545. Dr. Brewer.] Is the surgeon at Colchester Dr. Nunn?—It is Dr. Waylen.

546. Chairman.] But now you do not think that the Act is unpopular, either with the authorities or with the women?—Not at all. The authorities never interfere in any manner, because we have now a hospital of our own, erected by the War Department, a visiting surgeon and metropolitan police, to carry out the Act without reference to the authorities.

547. Dr. Brewer.] Is there a great increase of disease in Colchester since the operation of this Act?—No. We have only 25 beds, and therefore we cannot have many patients brought forward; the beds have been always kept pretty full. We have 628 beds altogether under the Act in all the 12 stations.

548. Can it be ascertained how many patients have been treated?—Yes. (*Vide* Table in Appendix.) In addition, there is a hospital in course of erection at Chatham for 58 beds, and at the Curragh for 41.

549. Chairman.] Do you know what accommodation there is at Maidstone?—There is no accommodation whatever at Maidstone. We are in hopes that the hospital now erecting at Chatham will accommodate the patients, supposing that Maidstone, and Gravesend, and Woolwich are included.

550. What hospital accommodation is there at Winchester?—None at all.

551. Sir John Pakington.] Nor at Southampton?—No. The hope is, that if the Act is extended, as it is proposed, there will be sufficient accommodation at Aldershot for the Winchester cases.

552. That is a long way, is it not?—No, it is not very far. The Southampton patients must be accommodated at Portsmouth, and there is room to extend the hospital at Portsmouth, though their beds are quite full at present.

553. Chairman.] Is there any hospital accommodation whatever at Dover?—There is no accommodation whatever.

554. What is proposed to be done if the Act is applied to Dover?—There is a small hospital at Shorncliffe, and it is to be hoped that a new hospital will be built to be used for the whole

district, Dover, Shorncliffe, Deal, Walmer, Canterbury, and all places near.

555. Mr. Mitford.] Is the Shorncliffe hospital large enough for the wants of Shorncliffe?—It is large enough for the mere camp, but it is not at all adequate to the district. There are only 25 beds. A number of patients from Windsor, Woolwich, Chatham, and Aldershot, are sent to London, because there is not sufficient accommodation at the particular stations.

556. Chairman.] What is the average cost of each bed?—It varies very much indeed. In London it is very moderate; the cost being 25 *l.*, that is the cheapest of the whole; I do not know how they can manage to do it, but they do it. At Chatham it is about 40 *l.* At our own military lock hospitals it is 38 *l.*

557. Mr. Kinnaird.] Are they equally well treated at the London Lock Hospital, and have they every comfort?—Yes; some very able men attend on the patients there.

558. Chairman.] What is the reason of that difference in the price?—I cannot understand how it is at all.

559. Have you any general suggestions to make to the Committee with regard to the working of this Act, either in those towns in which it is now applied, or in any other town to which it is proposed to apply it, or with regard to the construction of the Act itself?—I approve very much of all that Mr. Sloggett has said regarding the improvement of the Act; I should be very glad indeed to see some measures taken to keep pregnant women in a place by themselves, either in the hospital or in the union; I do not think it is a proper thing that a woman in that state should be kept in the Lock Hospital, but I think that she certainly should be placed in the union until her child is born. (*Vide* Table in Appendix.)

560. Dr. Brewer.] Compulsorily?—I think so; I am supposing that she is diseased. Then women with nursing children, I think, should be put in the union in the same way if they are diseased, so that they may be kept apart from the others. At Portsmouth, when I visited it a few days ago, I found actually five women there with young children at the breast, all illegitimate.

561. Mr. Kinnaird.] In what respect is that objectionable?—I think it is objectionable to have children in the same ward with diseased women. The children might possibly get the disease themselves, and it is as well to avoid all chance of that.

562. You would have them removed to the union?—Yes. There might be some understanding with the Government with regard to the payment. I think, regarding the catamenial cases, that it would be well if we could possibly manage to keep them until they are fit to be examined.

563. Chairman.] Are you averse to extending the area of this Act beyond the powers of the metropolitan police, and putting it under the borough or rural police?—I think that the metropolitan police have managed the matter hitherto well. They are well organised, disciplined, and kept in hand well, and they do the duty, I think, better than the rural and borough constables would do it. The country police do not understand those things well; and in some places there is a good deal of local prejudice, whereas the metropolitan police are men selected for the purpose, and well-ordered men, and we can put more confidence in them in consequence. The number of women not examined during the quarter ending

ending March 1869, owing to catamenia, was 503. I think that is a very serious matter. Those women are brought forward by the police for examination, and they are not examined in consequence of that natural cause; and they go out and continue their vicious course of life. There were examined and found diseased, 1,254 women during the quarter; the number discharged pregnant was 7; incurable, 28; received at "homes," 51; and by friends, 48; showing that there has been some good done already in respect of their reformation.

564. *Dr. Brewer.*] Have you any statistics as to the number of children who, within 14 days of their birth, are found to be infected with some syphilitic taint, such as acute inflammation of the eyes, or ophthalmia?—I have not; but I have here some statistics as to civil hospitals. At Birmingham 48 in, and 436 out-patients, at the general

hospital last year, were suffering from venereal disease, and many more were known; 242 suffered from venereal disease at the Queen's Hospital, among 622 patents, or 38 per cent. At the children's hospital, from one-fifteenth, to one-tenth of all cases treated were examples of hereditary syphilis.

565. *Sir John Pakington.*] What per-centage would that be?—I do not know the per-centage, not knowing the number of cases treated.

566. *Sir John Simeon.*] Do you know anything about the sanitary condition of the agricultural population in the neighbourhood of Aldershot?—No; I have no means of knowing that. I think that it is very possible that if the Committee were to procure the attendance of the visiting surgeon, Dr. Barr, he might be able to give them some information about it.

Mr.
P. Leonard,
M.D.
24 June
1869.

Monday, 28th June 1869.

MEMBERS PRESENT :

Dr. Brewer.	Mr. James Lowther.
Lord Charles Bruce.	Mr. Mills.
Lord Eustace Cecil.	Mr. Mitford.
Mr. Collins.	Mr. Murphy.
Mr. Donald Dalrymple.	Sir John Pakington.
Mr. Kinnaird.	Captain Vivian.

CAPTAIN THE HON. J. C. W. VIVIAN, IN THE CHAIR.

Mr. JOHN COLEMAN BARR, M.D., called in; and Examined.

Mr.
J. C. Barr,
M.D.
28 June
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567. *Chairman.*] CAN you furnish to the Committee a return of the women detained in hospital at Aldershot, under "The Contagious Diseases Act, 1866," with the nature of their disorders specified according to the classification issued from the War Office, since the commencement of the application of the Act?—Since April 1867, the total number of women who have been detained for treatment, has been, in the Aldershot Hospital, 1,274. From the same station there have been sent to the Lock Hospital in London, 285. The total number separated has been 1,559, that is to say, detained for treatment. The nature of their disorder has been gonorrhœa and syphilis, and their complications.

568. When did the Act first come into operation in your district?—It first came into operation in my district in April 1867. The women at that time found diseased, to the number of 20, were sent to the Lock Hospital in London.

569. What hospital accommodation have you at Aldershot?—There was no hospital opened until the 28th June following that; then we had 30 beds; now we have the number increased to 90.

570. What happened to the women before?—Those who were found diseased were sent to the London Lock Hospital up to a certain number. Some of course, for whom there was not accommodation, were compelled to be allowed to go at liberty again.

571. Latterly there has been fresh accommodation made at Aldershot, has there not?—Yes, we have now 90 beds, and the beds at the London Lock Hospital are relinquished in consequence.

572. When was that new hospital completed?—It has been completed about five or six weeks.

573. How many beds do you say there were before?—Before that there were, from 28th June, 1867, 30 beds, until the 20th of August of the same year. The number was then increased to 50 beds, and we have had 50 beds from that time, until about five weeks since, with 20 beds at the London Lock Hospital.

574. When this Act first came into operation, did you find that the women voluntarily submitted themselves to examination?—I could scarcely say that any of them voluntarily submitted. When I say that, I mean that there

was some difficulty at first, but afterwards when they were made to understand it, they voluntarily submitted.

575. Does that return which you have just given of the number, include the number confined in hospital in London as well as at Aldershot, or only at Aldershot?—Only at Aldershot.

576. What is the total number of women who have been confined at Aldershot, and in London in the Lock Hospital, since April 1867?—One thousand five hundred and fifty-nine.

577. Can you inform the Committee how many of those women who have come under your notice have abandoned their life of prostitution?—I must answer that question in this way; the number of women who have been assisted by Government grants to return to their homes or to enter into asylums, has been 38, but the number of women who have been known to return to their friends, or to enter homes without the aid of the Government, is 60, and others undoubtedly, as we have good reason to believe, though we are not in every instance sure, have abandoned that life.

578. Have any of them married?—The number of women who have this year come under the working of the police is 450; of that number 48 are known to be married, and 16 are known to be widows.

579. But how many women have married, and by marriage have abandoned prostitute life?—I am not able to answer that question, because there are some, of course, who marry, and who do not abandon that life; and some marry, and go immediately from the district, so that I am not able to make an accurate statement.

580. Can you describe to the Committee the general condition of those women at the commencement of the operation of the Act?—With the permission of the Committee, I will refer, in giving my answer, to a report which I made at Christmas to the Secretary of State for War. "Of the condition of the women reported upon in the early application of the Act, it is most painful to attempt a description. Being at that time resident medical officer at the London Female Lock Hospital, it was my lot to receive the first companies of women consigned to that institution for treatment. Although instances of the most appalling disease and distress were never absent

absent from certain wards, one could not avoid a gaze of astonishment at the unhappy creatures now presented to us. Not only were some of them so grievously diseased as to be highly dangerous to those who had dealings with them in the exercise of their vice, but their general condition was miserable in the extreme; dirty, clad in unwomanly rags, some appearing half-starved, covered with vermin, causing those near to them to shun them with aversion; careless in matters of common decency, their conversation having mingled with it such words as made one shudder to listen to; wofully ignorant, they appeared, in their utter filth and depravity, lost to all the better qualities of human beings. It was not difficult to see that many of them for some time had not existed beneath a roof; in fact, so bad a condition were they in, the wonder was how they existed at all. One of the first cases entered in the Case Book, by Mr. Perry, who of course met with many instances such as I describe, was, 'A. H., æt. 16. This young girl had only been seduced about three weeks, and was found living in a drain under the turnpike road, where she had been for a fortnight, the vermin were in myriads about her, nevertheless a soldier was found in the drain with her. Her period of treatment was very prolonged, as she became exceedingly anemic.' This is no isolated illustration, it was of frequent occurrence, and the morbid consequences upon young females exposed to such a mode of existence, were not long in showing themselves. One striking and prevailing effect among a number at that time, was an aspect of premature old age, so that young women of 24 or 26, had all the appearance of wrinkled old women. And in truth I have learned that many of this class had, after leading this sorrowful life for a few years, found their vigour fail them, and seeking shelter in work-houses, or low lodging-houses, had then, like old women, yielded to incurable infirmities, and without a friend to help them, died worn out. Thus, less than two years ago in a terribly morbid condition, with the habits of beasts, and the appearance of beggars, the majority of these outcasts of society, were alike endless sources of sickness among the troops, and disgust among the respectable inhabitants of the neighbourhood."

581. Such being the character and condition of those women before the commencement of the operation of the Act, will you state to the Committee, whether any improvement has taken place since it has been in operation?—A very notable improvement. In favourable contrast in very many respects to the previous unpleasing description, are those women coming within the meaning of the Act, who live within the district at the present date. A uniform management of them, with consistent tact and judgment, during their hospital confinement firm but kind discipline, careful instruction in ordinary work, and a determined enforcement of cleanliness of person; with the regular occurrence of periodical examinations separating those requiring it in an early stage of their disorder, without question have produced very advantageous results; taking into consideration the natural bent in women of this age and class to resist all compulsory interference, with the differences in temper and disposition, and the inevitable monotony of the wards, so dissimilar to the unrestrained scenes of excitement met with nightly in the places they frequent when at

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liberty; I cannot but report their altered conduct in hospital, and in their attendances on the appointed days for inspection, as a success achieved of considerable value in the further consideration of the Contagious Diseases Act; the use of profane language in the wards now occurs very seldom; formerly almost every sentence spoken had mingled in it, in the most open manner, most obscene and offensive expressions derived from and used in everyday conversation with the soldiers and others they associate with. The chaplain has, on several occasions, mentioned to me, the pleasure with which he has noticed their uniformly decent behaviour, as well as their quiet attention to his ministerial addresses during the religious services held by him.

582. How long has the system of periodical examination been in force at Aldershot?—The periodical examination of the prostitutes living within the district was established in April 1868, more than a year ago.

583. Did you find it successful at first?—At first we met only with very partial success; to secure the attendance on appointed days, of the whole number of women known to come within the meaning of the Act, was a matter of great labour and difficulty to those engaged in carrying it out.

584. How many registered prostitutes are there in Aldershot within the last three months?—The average number of prostitutes now at Aldershot is about 300 or 320.

585. How many of those 320 present themselves for examination?—I should say that there are not more than five or six who do not present themselves for examination.

586. I suppose that you attach very great importance to this examination?—Very great importance, indeed; in fact, if they did not attend regularly, and we could not take them in the early stage of their disorder, it would be impossible that we could look for any success; we have had great success lately in that particular department; for the first four months, after the opening of the hospital, there were only 250 attendances. From the 1st October to the 31st December 1867 there were 467 attendances. The number gradually increased, and from 1st January to 31st March inclusive of the present year, there have been 1,131 attendances. From 1st April to last Saturday, the 26th instant, the attendances were 1,408; so that this year the attendances have been 2,539.

587. Dr. Brewer.] How many women are there who have been examined, because those 1,408 I presume, are the same people over and over again?—They are the same people over and over again; that would comprehend 450 in all.

588. Then have you a larger number of prostitutes at this time than you had before, because you had 320, all known to the police, and now you have 450 prostitutes?—Four hundred and fifty is the number of women in my private roll of prostitutes for the first half of the present year; of course those 450 are not at present in the camp; there is a constant movement among them; some go away and others replace them; but 450 women have attended 2,539 times, during the period named.

589. Chairman.] A large portion of those women presented themselves voluntarily for examination; but some of them, I apprehend, are brought up by the police?—Some of them are brought up by the police.

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590. Have there been any instances of women being brought up by the police, and compelled by the police to attend an examination, without any sufficient reason?—Not a single instance to my recollection; in fact, there has been no such instance during my being in charge there.

591. Do you find that many women present themselves for examination in a state of intoxication?—At present that is very rarely the case; a year since even, and before that, it was very often the case; but I do not think that I have had an instance of drunkenness for the last three or four months, and even then, it has not been, so to speak, a thorough state of drunkenness; there has been no incivility or bad language used.

592. Can you tell the Committee where the majority of those unfortunate women, who are on your roll as prostitutes, reside?—With the permission of the Committee I will give them a short account of a visit which I paid to a place which the prostitutes frequent. For some time it had been my intention to select a suitable occasion for becoming personally acquainted with the evening resorts of those women; I gladly therefore took advantage of a visit from Mr. Acton, a well-known author, who came to Aldershot for the express purpose of gathering information for a forthcoming edition of his popular work on prostitution. In his company, and under the guidance of Inspector Smith of the Metropolitan Police, I was enabled on the evening of November 7th last, to examine and watch the proceedings of many of the places where the soldiers congregate, and where, of course, the women are mainly to be found. The residences and places frequented by the prostitutes I then ascertained to be, first, certain public-houses, with small cottages or rooms attached, which, owned or rented by the landlords, are by them let to those frail tenants, stipulating that they frequent the taprooms, &c., every night and drink with the soldiers until half-past nine (half-past nine being gun-fire), and pay the rent agreed upon every morning. Secondly, other public-houses having music halls of decent size, where also the women present are in the same manner obliged to attend. Thirdly, private houses, the apartments of which are let conditionally that the tenants pass the greater part of every evening at some one of the above inns, according to an arrangement existing between the directors of each place. Fourthly, houses, the residents of which frequent the best music halls and lurk about officers' quarters. Fifthly, a few dwellings, where the rent being guaranteed, the inmates are not bound to any particular house. Some of these lodgings being of a decent description, are occupied by a somewhat superior class of females, but of the commoner variety the rooms are disposed of in the following way: (1.) For "short periods" the charge being 2*d.* for each occasion, paid by the soldier to the landlord. (2.) During the night these women sleep three in each bed, for which accommodation everyone pays 6*d.* the morning following. (3.) A soldier, or civilian, calling in the daytime to see any occupant, pays the said landlord a toll of 3*d.* upon every jug of beer consumed; and on Sundays, should a soldier wish to spend the afternoon with a favourite girl, he pays 6*d.* for such privilege. We first visited a very notorious house, situated at the head of a short and dirty passage, at the further end of High-street. The place was so thronged with soldiers passing in and out

of the doors, that we found some difficulty in effecting an entrance, and it required some little determination on our part before we could establish ourselves within the building. However we at length reached a long room, furnished with chairs, forms, and narrow tables, and where, among some 200 soldiers, there were probably about 35 or 40 women. At our end a fiddler was playing on his instrument a lively tune, to which a few couples were dancing a merry accompaniment. Three or four persons, acting as waiters, were briskly engaged in seeking and attending to orders, bringing in beer, &c., which was shared by the soldiers with their female companions, who either sat by their sides, or, as was more frequently the case, on their knees. But, amidst all the loud talking, drinking, and singing, I heard no quarrelsome language used—at any rate during our stay in the house—everyone appeared in good humour, and we escaped unmolested. I readily enough recognised, among the prostitutes present, those who had been in the Lock Hospital, as well as others, regular attendants at periodical examinations. This house is a favourite resort of the military, and here also new comers to the camp are oftenest to be found. I saw two young girls among those present, who had not long been discharged from the Lock Wards, having been brought by the police soon after their arrival at this station, found diseased and detained; while in hospital, a woman who was attached to this house, was overheard by the nurse advising these young unfortunates to frequent the place spoken of, as they would be sure to do well there; most of the prostitutes compelled to confine their attention to this inn, reside in three cottages adjoining it. On leaving, the inspector, at my request, asked one of the girls near, a strong robust young woman, to allow us to see the room she occupied; to this she consented, and having procured a light, we climbed a dark narrow staircase, and entered a small dormitory scantily furnished, having on one side a bed with a dirty coverlet, and two or three chairs; on the walls, were a few coloured prints, designed to represent certain amorous scenes; a fire burned in the grate, and the room was filled with smoke, which the occupant declared was too often the case, sometimes almost suffocating her. She also informed us that she paid 3*s.* 6*d.* a week for its use, and was so many hours in the inn, to drink with the soldiers. And here I will remark of these women, that lately, notwithstanding that at least two-thirds habituate themselves to the free consumption of beer and spirits, yet with many of them, this unrestrained love for drink has yielded to a determined avoidance of excess; so that when pressed to take a glass with some entertainer, in obedience to the rules of the house, they comply, but contrive to get rid of the liquor by some artifice instead of imbibing it; they are consequently better clad, and not so often diseased, and curiously enough, some of them, who a few months since were among the most careless, have, under this new tendency, although prostitutes of some duration, become so frugal as to be named "old maids." We next visited, one after the other, seven public-houses, having large well-lighted music and dancing-halls, each room possessing at one end a stage; it appeared the custom for some one present, male or female, on being called upon, to ascend the stage and afford a vocal accompaniment to the musical performances of a piano

piano and violin; in most of these buildings a young man is employed as master of the ceremonies, for which he receives a salary of 25 s. per week for his services; in none of these rooms was any disturbance; but under the combined influence of music, dancing, &c., a universal enjoyment was manifested; the large majority of those present were soldiers, indeed, very few civilians were seen in any of these places; on the same evening we called at several houses of less pretension and accommodation, the rooms being smaller but all well filled; in one upstairs apartment, we heard a private of the 20th regiment sing a sentimental ballad in a very creditable manner, an effective chorus being executed with great power by the stentorian voices of 30 or 40 soldiers, aided by the shrill performances of the females in company; having thus witnessed the means adopted by the innkeepers for the enticement and diversion of their customers, we now turned our steps into some short, narrow streets, in which the principal brothels are to be found; these are rows of small four-roomed houses, each row having its yard with well and latrine; the buildings, most unhealthily situated, look miserably dark and dirty; the persons who let apartments in this locality for the purposes of prostitution, are middle-aged married people, having families; some of the children assisting their parents in the general management. We first entered the place occupied by the proprietors of one row of cottages, named Lower-buildings. The miserable couple in whose presence we now found ourselves, struck us as being in a state indicating the necessity for preparation for another world, rather than their fitness for the pernicious work they were engaged in. The husband, a thin pallid man, much wasted by a lengthened illness, sat crooning over a small fire. On the opposite side, resting on a low bedstead, was his wife, a pitiable object, suffering from chronic disease. She is since dead. Between them, and within easy reach of both, was placed a small table, on which were arranged sundry bottles, having candles within their necks, and nearer the woman was a small heap of copper money, the reasons for which we were soon made aware of. The wife, in the course of conversation, alluded to her disease, which she had long suffered from, to the various hospitals visited, and means tried for relief; expressing herself as quite aware of her precarious state, and that her life must soon terminate, as she felt herself "consuming" daily. She also said that business, just now, was not brisk with them, the number of girls availing themselves of their rooms having, for a time, decreased. It was most lamentable to find a person in her shattered state of health interesting herself in her ruinous calling. And, to add to these shocking circumstances, her only daughter, a woman of 23, rents a room from her parents, paying every morning for its use, as the other prostitutes do for similar purposes, and is now, for the third time, a patient in this hospital. We were passed, on leaving the door, by a soldier and a young girl; the latter I remembered having discharged a few days previously. The man went in, added twopence to the little heap of money, and, taking one of the rude candlesticks referred to, lighted the small candle, and accompanied by his female companion, speedily disappeared within the nearest house. A few steps further, and we entered a kitchen, where a hardy-looking woman of 45 was

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busily engaged in her duties at the wash tub, the room being so filled with steam as to render it for some time difficult to discern its contents. Two boys, respectively aged 12 and 14, crouched on the floor close to the fire-place, while in a bed in one corner, several younger children lay sleeping; near the boys, and under their especial charge, was a table with the same disposition of bottles, candles, and copper change, as noticed in the house we had so recently visited; I am told the husband is a lazy, dissipated man, who entirely trusts to the amount gained by letting his rooms, for the maintenance of himself and family; in the event of a falling off in the number of his temporary tenants, the children are driven into the camp to beg food for themselves. The woman appeared industrious enough; she worked energetically in her present employment, but had also an eye to business, as evidenced by her interrupting herself in the reply she was making to a question addressed to her. When suddenly looking into the yard, she exclaimed, "Run, Bill! there's 'Scotty'" (a prostitute), "a sneaking upstairs with a soger." The boy appeared used to these attempts to defraud the establishment, for he made after the delinquents with great speed, and a spirited altercation, resolute on the part of the boy, and alternately coaxing and threatening on that of the soldier and his mate, proved merely an ordinary instance of very frequent occurrence." Later on, I may say that I visited many other places within the district, and heard a great deal about those who practised clandestine prostitution. But I should also have stated to the Committee with regard to the present effect upon the prostitutes, that a residence in the hospital, in some cases, has an extraordinary effect. There was one house into which I went with the inspector of police lately. I heard a woman reading with a loud voice, when we got in the passage, I stopped to listen, and I found, to my astonishment, that she was reading from "Bunyan's Pilgrim's Progress." I went into the room and found no less than seven women sitting round a good looking female of 25 who was reading from the "Pilgrim's Progress," all paying the greatest attention.

593. Was the woman reading it in a spirit which showed that she was feeling what she was reading?—Most decidedly; I never saw clergyman or audience in a church look more serious than the reader or the listeners.

594. Dr. Brewer.] Were those prostitutes?—They were.

595. Were they engaged in the prosecution of their trade?—Most decidedly; I have, I am sorry to say, two or three of them in the hospital now.

596. Chairman.] With regard to the general effect of this Act, do you think that it has had the effect of restraining diseased women from pursuing their avocation?—It has, in some instances, most decidedly had that effect; but in this report I give the total number as 100, up to Christmas, whom we have every reason to believe have been restrained from further prostitution.

597. Has it, in addition to that, modified the character of the disease?—Of that there is very strong evidence; the severity of the disease is most decidedly lessened, and it is also lessened in extent.

598. You have stated that the habits of the prostitutes, and their general demeanour, has been decidedly improved; do you think, that in

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addition to that moral effect, it has reduced the amount of other crime, such as stealing, and offences against the law generally?—That is very markedly reduced; it is the wonder indeed of the inhabitants of the whole district. The police courts there seldom see a prostitute now for anything. In fact, I do not believe that there are more than two or three cases on the average in a month, and those very simple cases. Formerly there were almost daily cases brought before the magistrates. Now in fact, the several orders, if you may term them so of prostitutes, I should say, are by no means the worst conducted of the public.

599. Do you know whether, in the neighbourhood of Aldershot, it has reduced the charges upon the workhouses?—Of that there is not the slightest doubt. I am told there are not nearly so many inmates of the union house, and there are not anything like the number who are receiving out-door relief. Of this I have been very credibly informed.

600. With regard to the obstacles which present themselves to the complete success of the Act, is it not a fact, that within the lines of the camp at Aldershot, there are a certain number of unfortunate women who may be called non-professional prostitutes?—Most decidedly.

601. Those women do not come, and cannot be brought, under the direct operation of the Act in its present state, can they?—In its present state they can only with great difficulty be brought under it; in fact they are persuaded and brought by the tact of the police. If a woman is informed upon, the whole neighbourhood having already seen the good of the working of the Act, one will inform upon the other, so to speak. A policeman who gets information makes himself sure that he has good foundation for what he does, reads the Act to the woman, makes her acquainted with it, and advises her to come up for examination, at once, or on a stated occasion.

602. Then there are a great many of those unfortunate women who present themselves for inspection at a time when they are not fit to be inspected from catamenia, are there not?—Yes, a large number; I may probably give this week's return as an average; last week 114 women came up for examination, out of those 15 were not examined, who were suffering from the menstrual discharge.

603. Have you any power under the present Act of detaining those women until they are fit for examination?—No power at all.

604. The consequence is, that in many instances they go about notwithstanding their condition, if they are diseased, and spread the disease?—They do; if the Committee will allow me I will read a short paragraph, in which I alluded to that as one of the hindrances at the time I wrote this report. "There are other obstacles to the intentions of the Act in the women who regularly attend periodical examinations. Thus at those particular times when a woman should retire from all sexual communication, in consequence of her natural monthly disturbance, it is well known that except in rare instances they do not so withdraw, on the contrary they afford intercourse to soldiers as usual, and the menstrual discharge in this class of women being exceedingly irritating, the production of urethritis, orchitis, &c., is frequently the consequence."

605. Then another obstacle to the success of the Act, is the fact that you have no power to

treat pregnant women, is not that so?—That is another hindrance to which I have also referred. It frequently occurs that women in an advanced state of pregnancy found engaged in prostitution, are among those attending for examination, very often these persons are diseased; their pregnant condition preventing their restriction to Lock Hospital, the course adopted is to furnish them with a certificate under section 31 (it is of very little service, because you cannot enforce it, they not having been in hospital, but it is given them as a caution), to fully explain and dwell upon its meaning, and strongly to advise instant retirement to the workhouse. The police also inform the relieving officer of the woman's state, and the necessity for her removal from the streets. Now, although I have always learned that no objection has been raised by the parochial authorities to the reception of these women, they require a personal application, without which no female will be admitted to their charge. It is known that, in spite of their condition, these women, morbidly attached to their life, practice prostitution as long as they are able, only retiring to the workhouse lying-in room, or elsewhere, when absolutely obliged to do so by nature.

606. Mr. *Miford*.] Why do you say that the certificate is not effective, because, by clause 31, if a woman practices her vocation after she has received that certificate, she is liable to imprisonment with hard labour?—It only applies to those who have been in the hospital. This woman had not been in the hospital; if I had discharged her in consequence of her pregnancy, then it would have applied to her.

607. Then, in fact, you are doing what there is no requirement for your doing under the Act, are you not?—The Act does not apply to a woman out of doors in her pregnant state. If I discharge her in consequence of her pregnancy, and then she practices prostitution, this clause in the Act applies to her.

608. *Chairman*.] The Act is incomplete also with regard to women and young children, is it not?—It is. I have a case in point now, I think. Women having young children are similarly treated as to the certificate. With those, it is often some time before they are induced to enter the union, and sometimes they cannot be induced to do so at all. Of course, it can hardly be expected that the union authorities will take that interest in treating gonorrhoeal and syphilitic attacks which I myself do. It has occasionally happened that a woman has gone in, and she has come out uncured, and I have been compelled with great difficulty, owing to necessary arrangements with regard to the child, during the mother's separation, to detain her in hospital. If I may make a suggestion with regard to that, I should decidedly say that it would be better to have a ward attached to the Lock Hospital for casual cases such as that, and also for pregnant women. When a woman is brought up to me, if she is pregnant, and if she has a contagious or infecting sore, &c., knowing the danger attending it, it is my habit to take her into the hospital and keep her until the worst symptoms at least are removed, and then to send her out with a certificate to say that she is not cured, or something of that kind, with the certificate of clause 31; but I think that the best plan would be to have a proper ward in which a woman may be confined, and in such a case that the parish authorities

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rities should pay for it, because she is simply confined in my ward instead of the union ward.

609. I wish now to ask you a question, which is rather a delicate question, with regard to the obstacles to the complete success of this Act. Do you believe that in the camp at Aldershot there are many diseased soldiers at large?—From the reports of the police and others, and from the reports of the prostitutes under my charge, I think that there can be very little doubt indeed that there are a good many. The inspector of police considers that there are more diseased soldiers loose than are absolutely in the hospital. Of course, one really has proofs of it. About three weeks since, and similar instances are common enough, I discharged two young women, strangers to the place, after some three weeks' detention for mild gonorrhoeal affection. In 10 days, when they came for examination, I was forced to detain them both again with recent contagious sores. If I send women out of my hospital perfectly cured and free from disease, and they come back again to me diseased, they must have received contamination from some parties, and soldiers are nearly the only persons with whom they have connection; if a diseased man is in hospital of course he cannot infect women.

610. I gather from that answer that you do not think that this Act can be completely successful if the examinations are confined entirely to females?—I certainly should strongly advise such an inspection of men; no doubt that is absolutely required, at any rate for a considerable time.

611. When a new regiment comes into camp the men are examined, are they not?—They are, and the result is very speedily seen; out of one regiment, which, I think, came up from Devonport (but I am not sure) two or three months ago, on examination they were forced to detain about 40 men the first week in hospital, and in the course of the first month after their being there there was a large number. To show the really good effect of the Act at Aldershot, the number is reduced now to about nine in the whole of that particular regiment.

611.^a Sir John Pakington.] How long have they been there?—About three months; they came into camp 25th March last.

612. Chairman.] Soldiers returning also from furlough are subject to examination, are they not?—They are subject to examination also. I do not think the examination is repeated; but upon that point I cannot speak positively.

613. Are you aware that formerly the custom of examining soldiers periodically prevailed?—I have been informed so.

614. And that it was abandoned because it was supposed by the medical officers of the army to be of no worth?—Yes.

615. Lord Charles Bruce.] Is that system carried out in the camp?—I do not think that it is carried out by any regiment regularly; but at certain times, that is to say, on the arrival of a regiment, or of those who have been on furlough, or on a report being current, as is sometimes the case, that a large number in a regiment are ill, the surgeons will examine them.

616. If a battalion of Guards arrived in camp would that be applicable to them?—They would be examined by their medical officers just the same as any other regiment, I believe; I have always understood that every regiment is examined upon its arrival in camp.

617. Chairman.] Would you therefore suggest

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that the system of examining soldiers periodically in the army should be resumed?—If I may be allowed, I will read a short paragraph upon that subject from the same report. "The first and most obvious measure to be adopted is the practical application of periodical examination to the whole body of troops resident in this district and at other stations. This should be conducted strictly and carefully, without exception, and be of sufficiently frequent occurrence. I am of opinion that every soldier should for some time to come be examined once a week, in order to discover whether he be diseased or no, and those men known to habitually frequent brothels should be inspected even oftener than this. That newly-arrived regiments, soldiers returning from furlough, &c., be examined as soon as possible after arriving in the camp, and the examination in this case be repeated three times a fortnight during the first month of their residence in the district."

618. Are you able to tell the Committee, from your own knowledge and from your means of communicating with soldiers, what their feeling on this point may be; do you think that they would object to examination?—I do not think that I am thoroughly acquainted with their opinion as to that; I have been in communication with several officers who are not medical officers, and who have spoken to some of the men on the subject, and they say that they do not think that it would be objected to. They also say that the older soldiers could easily be made to persuade the younger ones of the good of it, and more particularly as the whole body of soldiers have generally expressed their approval of the working of the Act as it is carried out at present. They say that it has done a great deal of good, and they can see it daily; they also speak of it as a very good measure and a very necessary one.

619. Is it popular among the soldiers themselves?—It is popular among the soldiers themselves. I am enabled to say so on undoubted evidence.

620. Lord Eustace Cecil.] Do you think that the objection arises at all from the medical officers finding it a disagreeable duty?—Of course medical officers consider very naturally their own feelings on the one hand, and the inclinations of troops on the other; they say that the troops would consider it a degradation to be examined, and, under those circumstances, they themselves would consider it degrading to be compelled to examine them.

621. Do you think that many of them have strong objections to it?—It has been printed so lately; I have certainly been very courteously treated by the military medical officers at Aldershot, who have in every way they could afforded me information, but on this particular point I have heard little. I do not think that they are very decided about it. I think they could certainly be persuaded that it would be a great benefit to inspect the men, and once so persuaded their aid would be invaluable.

622. Mr. Kinnaird.] You mentioned having seen it in print somewhere, where did you see it?—I saw it in some of our medical journals, where the medical officers, of course, state their opinions.

623. Chairman.] Do you think that it would be a good thing to establish night lavatories in the barracks?—I do; I would recommend that night lavatories be erected in every barrack, and

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all soldiers absent during the evening should, on their return, be caused to freely cleanse themselves, in the presence of some one appointed to overlook and direct the proper performance of the duty. I feel assured, from the remarks made to me by the many officers with whom I have conversed on the subject, that the soldiers would soon quietly submit to the examinations.

624. Do you think that the Act sufficiently controls two classes within the camp at Aldershot; namely, the keepers of those public-houses to which you have referred, and the tramps who infest the camp?—Those are, too, very great difficulties and hindrances; I have made a remark here with regard to those tramps as an essential hindrance. Almost constantly numerous loose characters, who are tramps, attracted by so large a body of soldiers, are discovered hanging about the camp; these, a lot of lazy scoundrels, not being disposed to work, send the females who accompany them into the vicinity of the huts, &c. for lewd purposes, themselves reaping the benefit of such sums as may be gained thereby. The women are generally diseased, and in a most offensively dirty condition; but there is great difficulty in dealing with those parties, there being no police station.

625. Is there no police station?—There is no police station for the use of the metropolitan police; it is very much required, and it would go very far to end that evil.

626. Sir John Pakington.] How many of the metropolitan police are there at Aldershot?—There are six, and an inspector; but there are two others allowed for the summer months, when there is more work. They attend to the discipline of the camp also.

627. Lord Charles Bruce.] Have the military police no power with regard to those tramps?—The military police have no power; the metropolitan police have really too much to do.

628. Chairman.] Has any representation been made with regard to the metropolitan police station at Aldershot?—Yes, I believe it is ordered to be built; and the plans are, I am informed, being made out now.

629. With regard to the extension of the Act, would you propose that the area of the Act should be enlarged from five miles?—Yes, I think so.

630. To what extent?—The area of the Act at Aldershot at present includes 23 parishes, and I have been to all those places; the farthest places, of which there are three, are 11 miles from the Lock Hospital; there are three places which are eight miles from it, three places which are nine miles from it, and three places which are seven miles from it.

631. Are they included in the schedule of the Act?—They are included in the schedule of the Act.

632. There is a special schedule for Aldershot, is there not?—Yes.

633. To what extent do you propose that the Act should be enlarged, as regards Aldershot?—The other places beyond that I do not know at all; I am not aware of them, but I get a number of patients, and some of the very worst cases from Winchester and Reading, and I think that the Act should be extended to those places.

634. Can you give the Committee a return of the places from whence those women come, as to whether they are from a rural population or from an urban population?—I find, upon calcu-

lating it, that four-fifths of them come from towns, and one-fifth from rural populations.

635. Mr. Kinnaird.] What is the distance from Reading to the camp?—I think it is about 20 miles.

636. And Winchester is farther, is it not?—It is; Winchester is about 29 miles from Aldershot.

637. Chairman.] Suggestions have been made as to alterations in the Act itself; it is proposed that there should be an alteration in clause 17 of the Act; do you think any alteration of that clause would be desirable?—I have not heard of a proposed alteration in clause 17. We find that that clause answers the purpose very well in Aldershot, but it is in consequence of the great industry and tact of the police. Since the hospital has been opened, there have been only three or four cases requiring to be taken before the magistrates in order to enforce obedience.

638. Mr. Kinnaird.] The police to which you allude are the metropolitan police, are they not?—They are metropolitan police.

639. Chairman.] It is proposed to bring all the women who voluntarily submit themselves to examination, under clause 28; do you think that that would be desirable?—I quite agree with that; I think it should be so.

640. Then it is also proposed by some of the witnesses that the limitation for detention in clause 24 should be extended from six months to nine months; do you agree in that?—I think that would be wise; I have had to discharge a woman only once since I have been at Aldershot after six months' residence, who certainly was not cured. Of course if the Act is extended we shall naturally get very bad cases, which may require longer than six months' detention.

641. Would you recommend also that there should be a new clause introduced with regard to pregnant women?—Yes; with regard to that I recommended that, in the event of pregnant women, or those having young children being found diseased, a clause should be inserted in the Act, empowering the medical officers of lock hospitals to order, by certificate, their immediate admission into a workhouse, there to be detained until free from a contagious disease; that I suggested at Christmas. At present, as I said before, I should very much prefer having a ward attached to the Lock Hospital for casual cases.

642. Have the police power now to visit the lodging-houses of those prostitutes, and give them the required notice?—Yes; I may say that the large number, in fact, nearly all the publicans and lodging-house keepers, assist the police to a great extent in their work. They are told what the consequences will be if they harbour prostitutes who are diseased, and they very often give the information themselves.

643. Are there many prostitutes about Aldershot of 15 years of age, or under?—Not many; I calculated that there had been about 15 during the last six months who were about 15 years of age, or under, but not more than that.

644. Are there many parents who encourage their children in prostitution?—I have had lately a mother and daughter both patients in the hospital at once, the mother being 38 and the daughter a child of 15.

645. Would you suggest any power to be taken under this Act to send such a class of prostitutes, whose parents encourage them in prostitution, to a reformatory?

a reformatory?—Yes; with the permission of the Committee, I will refer to the recommendation which I made. It is a matter for regret that of the number of females quoted as having been under the influence of the Contagious Diseases Act since its commencement, so comparatively few have shown any trustworthy disposition to abandon their unfortunate course of life. It is true that some have been restored to their friends, others placed in suitable asylums; and perhaps half of these give good hope of being permanently reformed. But the many difficulties met with in reclaiming these poor women, in spite of the endeavours of various charitable societies, have rendered the attempt in the majority of instances fruitless. I feel convinced that compulsory consignment to suitable reformatories is the only method which promises success in the reclamation of fully one-half of the class as met with at this station. I may say that at the Aldershot station they are generally the worst class of prostitutes who come there at first; worse, I think, than at other places, though they afterwards greatly improve. Of those who enter voluntarily, asylums, it is sadly notorious that not a few merely remain a short time, impatient of restraint, and leave to relapse into their former errors; while of those who return to their friends, a want of care in their daily treatment, a chance allusion to their former unfortunate deeds, effectually dissolves the newly-formed resolution, and they are again found on the streets. I would have this compulsory course applied—(1.) To that class of young girls who, not being restrained at home, have, while mere juveniles, commenced this life of degradation, whose relatives refuse to be responsible for their future conduct, and who themselves show no disposition to reform. (2.) To those mere children who are initiated into the vice by their own parents, and who, as may be conjectured, are wofully ignorant, have not the remotest idea of female modesty, and whose tuition in a proper institution would, indeed, be a work of mercy, if of unknown difficulty. (3.) To those who, older in years and sin than the majority, when at large actually make a food of beer and spirits, are slovenly in their persons and frequently diseased. Yet these women, while under hospital treatment, are well-conducted, industrious, and bitterly repent the mode of life which has been perpetuated by their love for drink. It would be a charity, as well as a wise precaution, to hide them from the gratification of their sin for a year or two. These, by having tasks of work in the making of clothes, laundry and other duties, would soon pay for their board, lodging, and incidental expenses.

646. Sir *John Lubington*.] You mentioned, did you not, that at Aldershot 100 women had given up their trade altogether?—I did.

647. But from the answers which you have lately given, I am afraid that you are not very sanguine of the reformatory effects at Aldershot of this Act. Has this Act had at Aldershot, as it is said to have had elsewhere, a very great moral effect as well as a sanitary effect?—As I said just now, a large proportion of the class of prostitutes at Aldershot are really among the very lowest; and there is another thing with regard to them, which possibly the Committee may think rather a strange remark to make. There is a very great paucity of prostitutes in regard to the number of men; there is a camp of 13,000 men, and lately there have been nearly 6,000 militia. For the supply

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of all those men there are only about 320 women, of these an average of 55 in hospital. They are constantly with soldiers, and the soldiers are constantly seeking after them; and really I was going to say, that they have not companions to persuade them, or time to repent. There is another great difficulty with them when they are in hospital; if they could be taken quite away from there to some situation, or somewhere where people would look after them, I believe it might prove beneficial; but when they are discharged, there are soldiers always lurking about; they take those girls into public-houses, and thus the good which has been so lately done to them, is all but lost entirely.

648. Am I right in my recollection of your former evidence, that out of this comparatively small number of women, there have, from the effects of this Act, been a hundred women who have been reclaimed and restored to a virtuous life?—Decidedly so.

649. And you attribute that effect to the operation of this Act?—Entirely.

650. What has been the effect upon the number of prostitutes at Aldershot since the Act commenced?—It has not reduced the number. There are always fresh ones coming in. Out of those who are reformed and who really are the best, are those who have been the longest in the place.

651. Have you reason to believe that those 100 women really are reformed, and have taken to other habits of life?—I have every reason to believe it. There are some of those who have returned to and who live within the district now with their friends, or who have gone into service, and I have occasionally asked those who have employed them in service as to their present behaviour, and they have given me every reason to suppose that there cannot be better conducted people than they are.

652. Are any considerable proportion of those 100 women married since they gave up prostitution?—Some have married, but that is another thing upon which I must speak. The greater number of them have married soldiers, and undoubtedly the greater number of them have married without permission. We all know the miserable effect which that has upon those women. The soldiers cannot support their wives if they take them away; and the poor women really are, as one told me the other day, forced to be prostitutes, or accept the alternative, starve.

653. I understand you that altogether, judging from your experience, the effects of this Act have been, first of all, that a considerable proportion of the women there have been reclaimed, and that the character of the disease has been very much modified; but that the actual number of women there has not been reduced, because as some women are reclaimed, others come in from the outside?—Precisely.

654. To whom was that report, from which you have been reading, addressed?—To the Secretary of State for War. My quotations are from some notes of it which I retain.

655. Was it called for from the War Office?—It was called for from the War Office, and I furnished it soon after last Christmas.

656. You alluded in one of your answers to the Chairman, to the certificates which you sometimes give to a woman on leaving the hospital without being cured; do you suppose that those certificates are kept by them, or that they produce any good effect?—I do not believe that

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that they produce any good effect, since persons who have them have been known to conduct themselves as prostitutes afterwards. In one instance, some short time ago, the police proceeded against a woman who had a syphilitic disease, but who had also some occurrence preventing her admission to hospital.

657. Is it not a fact that women having such a certificate would either conceal it or destroy it?—I believe so.

658. Is it not therefore very difficult, in cases where a woman with such a certificate returns to prostitution, to bring her under the 31st section, so as to punish her?—Exactly; it is very rarely done; but, about two months since, we did proceed in such a case. With regard to pregnant women, there are six prostitutes in that state at Aldershot to my knowledge at present loose upon society. I cannot admit any of them, and there is no provision made for them. They will stop out of the union house, or wherever they go to be confined, until the very last moment. In fact, as far as any place other than the union, they cannot do otherwise, for they have no money.

659. I believe that it is a fact that the medical officers of the army are disposed to object to the examination of soldiers, is it not?—I hear so, I regret to say.

660. Do you, from your experience, know any good reason why they should so object?—I believe that their reason is, that they suppose that it would not be a popular movement with the soldiers. They think that the soldiers would not like it. There are sundry objections which have been raised to other things which I have proposed. For instance, with regard to those night lavatories, it is said that, if a person were supervising those lavatories at night, and a man came in a little the worse for liquor, there would be a case for a report. The faults which are overlooked now, of course would be found out then, and that some discontent would be thereby caused.

661. But, from your experience, do you see any sufficient reason against either the use of the lavatory or the inspection?—None at all. I think that they are highly necessary.

662. What is the proportion of women at Aldershot who have voluntarily surrendered themselves for examination?—Almost all. I may say all. The police are very successful in that respect. When a woman is brought to the hospital, or when she is seen, the inspector of police explains the matter to her, reads the Act to her, and persuades her to submit. It is very rarely indeed that they do not.

663. Under the Act, or in any other way, are there no restrictions at present as to their surrendering themselves for examination which you would think it desirable to remove?—I think not.

664. Mr. *Donald Dalrymple*.] Have you had any cases of insuperable syphilis in women coming under your notice?—Cases of the *sequela* of syphilis; bad tertiary cases.

665. I mean cases capable of propagating the disease?—Certainly.

666. Have you, in your report or in any other way, considered how to deal with those cases of insuperable syphilis which even the extension of nine months' treatment would be insufficient to cope with?—Those are cases that are very rare in Aldershot at present, but in such cases as that

they will be probably the women to whom I referred last, who are great drinkers, and so on; and relapses are frequent. I should put such women in a reformatory, and make them do some tasks of work that should pay for their board and treatment. It is probable, again, that in such a case as that, if the danger were told to the woman, she might be ready to go into another hospital. But still there is no hospital except a Lock Hospital where women would be detained so long as that.

667. Mr. *James Lowther*.] What would you propose to do in cases of that kind; insuperable cases?—As I have just said, I should think that women of that kind require to be sent to an institution purposely formed for that purpose, such as a reformatory, having hospital advantages, where women could be kept for so many years, or until cured of the disease.

668. Mr. *Donald Dalrymple*.] You would try and shut her up somehow?—I would try and shut her up as long as she remained in a diseased state.

669. Lord *Charles Bruce*.] Have you had many cases of women being discharged at the end of their six months uncured?—I have not lately, in consequence, as I said before, of the disease having become so much modified in severity that those who have been discharged uncured have been old cases; the worst cases that I get of course, or that any station gets, are the new ones that come in from a place where the Act is not in force; those cases are really very dangerous, and it takes more than six months to cure them, but I have only had one such case during the last 12 months.

670. Mr. *Mills*.] Would you recommend that those old cases should be sent to a reformatory?—I should recommend that they should be sent to such an institution as that, where a woman could be kept as long as it was necessary.

671. Lord *Charles Bruce*.] It might happen that a woman at the end of six months, being uncured, might ask to be kept on at the hospital, might it not?—I do not know that it has been directly asked; the woman of whom I spoke as having been discharged in that way, said she was very sorry to go, and thanked me very much for the kindness she had received and so on; she had been discharged from another hospital at the end of the six months; that would come under one of the classes upon which an honourable Member has just questioned me; but I have no doubt that if that six months had been extended to nine months in this case, she had gone on so well (in fact, she was apparently free from disease), that treatment during the extra three months might have really cured her.

672. How soon could she come back again into hospital?—She could come back again in a week for that matter, and if she were brought up and found diseased, she could be retained again; but of course, during that week, she or another person might have done a great deal of mischief among the soldiers.

673. Mr. *Mitford*.] Can you make any suggestion as to what should be done with permanently diseased women, supposing that after six, or nine, or twelve months you cannot cure them?—Those cases of which I have just spoken are women who have taken no care whatever of themselves, who have been long diseased, and with whom there has, perhaps, been no means used to cure. They have been very poor, badly clad, unclean, and badly fed. They should be put into

into some institution for the purpose, which should have the double character of a reformatory and a hospital, so that they could do some kind of work for their maintenance while they were there, and should not be let out again.

674. Is the disease from which incurable women suffer of the same contagious character as the other disease which is curable?—The tertiary disease, of which, as I understand, the honourable Member speaks, is not a contagious disorder, that is, it does not communicate syphilis.

675. Then it is not for the purpose of preventing their spreading infection that you would send them away?—It would not give syphilis, it is supposed; but all these women have nasty discharges and other symptoms about them that a soldier might become diseased by. Besides, there are often active syphilitic symptoms also present, as well as the tertiary consequences.

676. *Chairman.*] You give a certificate of cure, under the 28th section, to those women whom you have discharged from the hospital cured, do you not?—Yes.

677. Is it a good plan, do you think, to give a certificate to the women themselves?—I think it is a very bad plan. I think the proper plan would be, that the police should have a book, and those persons who are discharged should have their names written in the book by the medical inspector of the station; and the police, who know every woman, would also know who was discharged, and the length of time they had been out of hospital.

678. But you would in no case give it to the woman herself?—In certain cases I would, if the woman wanted to leave the district, or was sent out of the district. Of course a certain proof would be required, and if she applied for it she should have such a certificate; but in the case of those who are simply detained for a time, and then discharged, I do not think it right. When they leave the Lock Hospital, they may make use of those papers and exhibit them. The other day a woman of about 47 had thoroughly deceived me. I thought that it was the result of her husband's being diseased, from what she said to me, and she regretted the sad consequences of it. When she went out of the hospital she held out this certificate, called to a lot of men working near, and said, "Here, who'll have a maidenhead six weeks old?" She had been six weeks in hospital.

679. Why do you say that in the case of a woman wishing to leave the district, such a certificate should be given to her?—If she can give a proper reason for it, such as going before a bench of magistrates, or anything of that kind, for a proof that she was in the hospital for a certain time, I think it might be given.

680. Would you not by doing that shield this woman, and enable her to make use of it as a clean bill of health?—Supposing, for instance, the woman is charged with having committed a crime on the 9th of July, and supposing she is in hospital on the 9th of July, she has only this certificate to prove that she was so; let her apply to the police, and give a good reason for having this certificate, and then let her have it.

681. The police could give the same evidence as the certificate, could they not?—They could, undoubtedly; I certainly think it is not wise to give the women certificates every time they are discharged.

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682. You stated that a large number of militia had been stationed at Aldershot; is there much disease, so far as you know, amongst them?—I have a return here of the number of cases; the strength was 5,830; the number in hospital for primary syphilis was 16, and constitutional syphilis, one; the number of cases of gonorrhœa was 64.

683. Was that when they came in?—That is the whole number during their residence in the camp; that is so low, that I cannot help thinking that some of those who were diseased did not go into the hospital; of course their training is a short one, and unless a militiaman is really bad they would not wish him to go into the hospital. That is my impression from remarks made to me. If it is not so, certainly it only shows what a limited amount of disease they suffered from during their training in Aldershot.

684. *Mr. Murphy.*] You stated, did you not, in the early part of your examination, that there were 38 women who had been reclaimed, and who had been assisted by Government to go into asylums?—Decidedly.

685. In what manner was that assistance given?—I think it was in the autumn of 1867 that Mr. Perry, my predecessor, recommended that a certain amount should be given in hand for the purpose of encouraging girls to go home, or paying their expenses to their friends.

686. You stated that there were 50 who were assisted, I believe, to go home, and 38 assisted by the Government to go into asylums and to their friends?—Yes; the Secretary of State for War allowed 50*l.* as an imprest for that purpose; for instance, if one girl comes from Berkshire, her friends are willing to take her home, they send a letter, but they are too poor to pay her expenses, a policeman goes with her and leaves her with her friend; and that is paid out of that grant.

687. I understand that those are merely travelling expenses, and not capitation money given for the support in asylums and reformatories?—No; the asylum that we send them to is, of course, a very excellent one, the London Lock Hospital; and the amount paid for expenses has been simply the policeman going with them, and their own costs for travelling.

688. You also stated that you recommended three classes of cases for compulsory confinement in reformatories; did you mean to convey that if those parties were confined in those reformatories, the Government should make a capitation grant, such as is given to the ordinary reformatories where juvenile criminals are confined?—I did.

689. And that if voluntary associations existed for those purposes, supported from voluntary funds, a grant-in-aid should be given for each person sent to those institutions?—I did.

690. Do you think that that would be a very effective means of taking advantage of any disposition on behalf of rich people to afford their assistance to such institutions?—That would be the only chance, in my opinion, in regard to those three classes. Of course that applies fully to one-half of the prostitutes.

691. No matter what their ages might be?—I include young girls, and old women, too, or at least those who have been a long time on the streets, and who are old offenders, and drunkards, and so on; but for the more sensible class, such an asylum as belongs to the London Lock Hospital

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Hospital is more suitable, and a number of those who go there stay there. Some of those coming out of course belong to the class that I spoke of who should be consigned to the reformatories.

692. But would they be under treatment at the London Lock Auxiliary Asylum?—Certainly; I was myself medical officer to that asylum when I was at the London Lock Hospital, and I can speak of it as an institution which is deserving of every support. The girls generally were contented there, every kindness was shown them, and a very appreciable number of them have been saved; it is understood that those girls should be cured before they are sent into the asylum. That place is supported by voluntary contributions.

693. Mr. *Kinnaird*.] What do you suppose to have been contemplated by the Act, in enforcing and giving those certificates?—I can only look at it in two lights, either as a deterrent through fear, or as an encouragement; the girls would be told this: "Unless you have this certificate, you will be amenable to be brought before the magistrates and liable to be punished; and, on the other hand, you will have this certificate, and you are quite free for some time as long as you have it." I cannot give any other reason, further than the long distances between one place and another. In this way, a girl might remove from one place to another, and might not be known; the police in one district might not know the girls in another district.

694. Would you be inclined to recommend a modification of that portion of the Act with regard to certificates?—I should.

695. You gave some interesting evidence about the horrible state of lodging-houses in the town of Aldershot, and you stated that there were some music-halls and places of amusement; they must earn a good deal of money at such places, must they not?—A great deal, I am told.

696. Then could they not, out of those earnings, keep those lodging-houses in a very much improved condition?—The public-houses to which those music-halls are attached are kept in tolerably good order; it is the low lodging-houses near them which are in bad order. I should suggest, with regard to those public-houses, that as the landlords derive so much benefit, and get so much money from those poor girls, every one of them should be made to erect a night lavatory, and that the girls should persuade the soldiers to use them; because using the lavatory immediately after the intercourse, is much more likely to be effective than using it an hour or two afterwards at the barracks, though I, as I before stated, highly recommend the latter.

697. You are aware that in London there is a Lodging-house Act which make it imperative upon anybody keeping a public lodging-house to have, and which makes them liable to punishment if they do not have, air, light, and washing apparatus; would you not recommend the extension of such a Lodging-house Act to Aldershot and the neighbourhood, if it could be done?—Most decidedly, I think it very desirable.

698. Do you not think that that would do very much to lessen the chances of disease, in enabling the poor women to have lavatories?—Decidedly it would. In the description of my visit to the various public-houses and other resorts of the prostitutes, it will be seen that the landlords of those places, in no small degree, reap the benefit of the prostitution they encourage. As before

explained, every woman who hires lodgings in or near the house, is compelled to use every exertion to entice the military to spend their money in drink until the hour that they return to their respective barracks. After that time the women are at liberty, for the simple reason that the said landlord cannot prevent it, for as might be expected, when the military are no longer to be seen, some of the women devote themselves to civilians, who take them to their own resorts. A woman not paying her rent when due is ejected, and those who spend the money received from soldiers with their "fancy men," are somewhat dependent upon stray civilians to make good the amount. But their chief use to the landlord being to draw money into his till, by their influence over the soldiers who visit his house, I am of opinion that the masters of all these establishments should be made amenable to such regulations as may be judged fit to be enforced, in order to lessen the chances of disease. Thus, in addition to the stringent application of section 36 of the Act, if necessitated, they should be compelled to, as I have just remarked, provide a proper lavatory for the use of all soldiers who visit the rooms occupied by prostitutes, who are in any way bound to the house; and the women referred to should be ordered to encourage the men to properly cleanse themselves before leaving the establishment. I believe this procedure would open a great chance of escape to the military after their intercourse with these women.

699. Then you think that there would be a very great advantage in putting those houses under inspection?—I do.

700. On the arrival of a fresh regiment in the camp, does it not often follow that some (and sometimes many) women follow the troops to the camp?—They almost always bring a lot of women with them.

701. Is there no preliminary examination of those women until they have carried the disease further?—No.

702. They lodge without the precincts of the camp, do they not?—Occasionally we are fortunate enough to take one directly. A short time since the 35th Regiment came in, and several women came with certain companies of them. The police were informed that those women were prostitutes, and the consequence was that five of them were at once brought into the hospital. Three of them were found to be diseased, and were detained before they had done any mischief. They were proved to be old prostitutes.

703. Could you suggest any regulation which might put these women who arrive more immediately under the operation of the Act?—I should suggest that when a regiment is going to leave a station, if it is going to a station where the Act is in force, the police should write to the inspector of the place at which the regiment is about to arrive, giving some notice, and some little history of the women who are known to have followed the soldiers. That would give us information, so that we could speedily get them under treatment.

704. Are you aware that before any hospitals were built the Lock Hospital in London was the one which first enabled the authorities to carry out the provisions of the Act?—I am.

705. I suppose that the experience which you gained there you found very valuable at Aldershot?—Very valuable indeed.

706. Are you aware that the Committee, from which emanated the Act which is in force, recommended

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commended in its provisions, and I think you were going to read something from the Act to show that it contemplated, if possible, not only a physical but a moral cure?—Certainly.

707. Do you not find that an asylum so immediately connected as is the London Lock Asylum with the Lock Hospital (the only one, I believe, in the kingdom which is under the same roof with the hospital), an immense help?—Most decidedly; because, as I have explained, the difficulty lies in where the woman first goes when she leaves the hospital. I believe that fully one-half of the prostitutes under my care, under the influence of the chaplain and the matron, and my own persuasions, are as fully determined just before they go that they will give up their unfortunate trade and go to their friends and work hard, as anybody can be. They go out and see a red coat, they go with him to a public-house and have drink, and away go all their good resolutions. But, on the other hand, I know that a great number go from the hospital into the asylum that the honourable Member speaks of, and while there no chance of their being tempted away from their good resolutions arises.

708. Do you, from your experience, think that you may attribute the great success of that asylum to the fact, that the poor children are taken at once from the temptation of returning to their evil habits?—Most decidedly, and it is of very great benefit indeed.

709. If there were an asylum in connection with the military hospitals, do you not think it would be of immense benefit?—I think it would; I should be very glad to have an asylum in connection with the Lock Hospital at Aldershot; but these poor girls are led away by music, and red coats, and excitement; if they live in ever so strict an asylum, and ever so much care is taken of them, if they heard a band of music, or saw a red coat, I fear it would be too strong a temptation for them.

710. I do not mean an asylum on the spot, but in connection with those military hospitals; at some retired spot?—It would be a very great advantage I have no doubt.

711. *Dr. Brewer.*] Could you say shortly, upon what measures you would depend to stamp out the venereal disease from Aldershot altogether?—The extension of the Act, most decidedly, to commence with.

712. To what area?—If it were not extended to the general population, I may say, in fact, very generally extended, I do not think that you could stamp it out; if Aldershot were an isolated place, and the soldiers were inspected, I have no doubt that in a very short time you could give a clean bill of health, because, before the arrival of new regiments and strangers, there is a very low amount of sickness; in fact, for some time, I had no case of any severity at all in the hospital.

713. May we infer, then, that you would depend upon two things for the entire stamping out of the disease at Aldershot; the extension of the area, and the examination of the soldier?—Those two things, I believe, would go far to bring about that result.

714. Do the prostitutes move themselves beyond the area of your jurisdiction in order to avoid inspection?—Occasionally they do so, but not nearly as much now as formerly.

715. In the proposition of extending sect. 17 into sect. 28, there are certain penal provisions 0.87.

made; do you require any of those penal provisions in order to carry out the objects of the Act?—I am very happy to say that I have only met with one instance since I have had charge of the Aldershot district requiring imprisonment, and that was a girl not in the hospital, but who, finding herself detained as she was entering the hospital, broke some panes of glass; otherwise I have not had any reason to complain of them in any way. Before that some 18 had been consigned to prison. I believe that with some tact, care, and kindness, as well as firmness, it can be prevented entirely.

716. *Mr. Kinnaird.*] I think that during the whole time you had charge of the Lock Hospital not a single case ever went to the police?—Not a single case.

717. *Dr. Brewer.*] Four-fifths of your prostitutes come from towns; do a number come from London?—A number come from London.

718. What proportion?—I should say that one-fifth are from London, and nearly one-fifth come from Ireland.

719. As regards the tramps, who send their women into the camp, have you anything to recommend as to police provisions to prevent that?—The inspector of police of the district will be here very shortly to give evidence, and I think he can answer that question better than I can. If I may be allowed, I will state what I strongly recommended to the Secretary of State for War. I think that the medical inspectors and officers in charge of Lock Hospitals, especially in such a district as Aldershot, ought to be magistrates. I do not mean that they should act as magistrates in ordinary matters on the bench at all times, but in cases connected with the working of the Act. I think their knowledge of the Act would be of very great assistance to other magistrates, and they would know whether the sentence should be a mild one, or a stronger punishment required.

720. Without your being able to correct the importation of women by tramps, you could not hope to stamp out the disease, I presume?—I certainly could not.

721. Then that would be an addition to your other recommendations; extension of the area, examination of soldiers, and extrusion of tramps?—Certainly, but we cannot do that at present, for want of a proper police station.

722. You say that 40 soldiers were diseased out of a regiment; of how many did that regiment consist?—I cannot state the precise number. It was the 12th Regiment.

723. You say that there are certain pregnant women who are diseased, and with whom you cannot deal; if those pregnant women have children born, to how many of those children would you say that the disease was either communicated during the passage of the child into the world or previously?—I can scarcely tell you that; but I think that I may go pretty safely upon this: I think that two-thirds of those children, at least, are still-born or die directly after birth; I refer to children thus born in Aldershot districts.

724. But do you find those children after a few days suffering from acute ophthalmia?—The greater number of them are still-born, and a few of them live for a few days. They are born in workhouses or get under the parish doctor's care; but I should say that the greater number of them who survive any length of time would have the symptoms of inherited syphilis.

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725. But some have been confined under your own eye, have they not?—Occasionally such an accident has occurred; but not viable children; that is all premature births. I refer to miscarriages taking place in the hospital. In general practice I have seen many such cases as you allude to.

726. Can you prevent those children from being diseased if you have a pregnant woman under your care immediately previous to parturition?—There is no doubt that a woman can be relieved of her disease to a very great extent, and the child also, by proper treatment during pregnancy.

727. With regard to clandestine prostitution in Aldershot, does that communicate disease to any class in the army?—Yes, to the common soldiers.

728. And to officers?—Yes.

729. Have you any reason to believe that by this clandestine prostitution not simply the officers, but the common soldiers are diseased?—Yes; I have three such women under my care now, and I have information of three other women practising clandestine prostitution, whom the police have been searching for, as having been detected with soldiers.

730. *Chairman.*] What class of life were they?—Dressmakers, married women, the wives of labourers and small tradesmen, and servants, of course.

731. *Dr. Brewer.*] You say that you have had 1,559 women under treatment; of those, you say, some are afflicted of gonorrhœa and some with syphilis; I presume that you mean that they are, generally speaking, afflicted with what we understand by syphilis, but not by true syphilis?—That includes sores and actual syphilis, under the War Office classification.

732. Have you any true syphilis?—Yes; I have in the hospital now two well marked cases of primary syphilis, and several constitutional. There are four others which are simply local contagious ulcers; but in some course of their action they may become indurated; that is to say, that syphilis may follow those sores, which were apparently not infecting sores.

733. Where do you get those cases of true syphilis from?—They are from strangers, principally.

734. Do you know anything at all about the history of those cases?—I record all obtainable history in my case book; I have 12 cases of syphilis, sores, and other complications; out of those, six are new women. There were three admitted last week; two of those are strangers who have come in.

735. You have no true syphilis generated in the camp at Aldershot, have you?—There is always syphilis in the camp; I have always some cases of true constitutional syphilis and true primary syphilis.

736. With regard to one question about which I am very anxious; do some of those prostitutes marry?—They do.

737. Have you found any case of a prostitute marrying, and afterwards continuing her life of prostitution?—Certainly. Another, and in my opinion an important hindrance, exists in the wives of soldiers who marry without permission. It is a notorious fact, that many of the most confirmed prostitutes who have been repeatedly in this and other hospitals, are married thus; generally at the Wesleyan Church, Aldershot,

and, as may readily be supposed, deriving very little assistance from their husbands; and their previous bad character being known, little honest employment is open to them, and they are often compelled, in a manner, to prostitute themselves for necessary food and shelter. Some of these women have apparently escaped by adopting the only chance, namely, leaving the district to join their own, or husbands' relatives, or seeking subsistence in some place where their former errors are unknown.

738. Were they prostitutes before marrying?—They were prostitutes before marrying.

739. And they subsequently continued it?—They subsequently continued it.

740. With regard to bad expressions, coarse language, and violent conduct, have you had a decrease of violence in action and in language?—A very great decrease. It is a very great rarity now to meet with it.

741. Does that decrease of violence continue after they leave you?—It has very much decreased. I have inquired of many respectable inhabitants of Aldershot, who knew the place before the Act was applied, and in the early application of it, and they say that it was really impossible for decent people to walk in the streets there. The language was filthy, and the appearance of the prostitutes was fearful; and now there really cannot be a more comparatively orderly class of people than those very girls, that is to say, those who have come under the operation of the Act.

742. *Mr. Mitford.*] I see that Sandhurst is included in the schedule of your district; is there much prostitution in the neighbourhood of Sandhurst?—We may call that almost clandestine prostitution. There are certain girls there who work during the day, and who, in the evening, go where the young men are. There are one or two also who regularly attend for examination, who come from other places near there, such as Frimley, Farnborough, and Cove. I was shown a woman there by an old gentleman the other day, when I was inspecting those places (I go about occasionally making inquiries), and he said that this woman had been seen with I do not know how many young men the night before. The police got information of it; she appeared to be a stranger, and she was brought up to me for examination, she was suffering from gonorrhœa and was detained.

743. Is Frimley near Sandhurst?—Frimley is about three miles from Sandhurst.

744. Is there a good deal of clandestine prostitution, but not much open prostitution?—That is so. Occasionally I get a labourer's wife, or some one who first denies that she has prostituted herself, and then admits it, when she finds she is discovered.

745. *Mr. Murphy.*] You said that about one-fifth of the women at Aldershot came from Ireland; how is that ascertained?—The birth-place of a woman and her late residence are taken down on her admission.

746. So that it would be easy to ascertain by referring to the books what part of Ireland they came from, would it not?—Yes; they come with Irish regiments, Dragoons and others.

747. *Sir John Pakington.*] Do you consider gonorrhœa and syphilis to be two distinct complaints?—Most decidedly.

748. You do not think that aggravated or repeated

repeated gonorrhœa would degenerate into a syphilitic sore?—I do not at all.

749. *Dr. Brewer.*] Do you not think that a woman never gives gonorrhœa to one man and syphilis to another?—Most decidedly. I understood the Right Honourable Baronet to ask me whether they were the same diseases. I mean that they are distinct diseases.

750. *Mr. Kinnaird.*] Do you believe that at the same time, and on the same day, a woman would give both diseases?—Certainly.

751. *Sir John Pakington.*] Then, although you consider them to be two distinct diseases, do I understand you to believe that a woman suffering from gonorrhœa might communicate to a man either disease or both diseases?—No, I do not mean to say that, but they co-exist. I very often have under my care a woman who has gonorrhœa, a primary syphilitic sore, and constitutional syphilis at the same time. But with

regard to those prostitutes, a woman may have no disease herself, and yet through her several men may get disease. I said just now that there is a paucity of prostitutes at Aldershot. Some of those women will have intercourse with 20 or 22 or 23 men in one night. I always tell those women when they leave the hospital to use lotions and injections, and to do what they can to keep themselves clean. A great number of them, before and after they have intercourse with soldiers, use their injections, so they may escape, while a number of those soldiers, some being diseased, closely following each other, having connection with them, by mediate contagion different affections are dispersed among them.

752. *Sir John Pakington.*] But do you hold syphilis and gonorrhœa to be quite distinct complaints?—Decidedly distinct.

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Mr. AYLMER GREENE, called in; and Examined.

753. *Chairman.*] You hold a position in the War Department, do you not?—I do.

754. Will you state to the Committee the amount of money which has been taken in this year's Estimates for the purpose of extending the operation of the Contagious Diseases Act?—£. 3,260 was taken for police, 18,500*l.* for buildings, 18,700*l.* for home stations for general expenses; and 3,000*l.* for the Colonies.

755. Will you be good enough to tell the Committee to what stations it is proposed, both at home and abroad, to extend the operation of the Act?—The Act has already been applied to all the stations in the schedule, with the exception of the Curragh; there the hospital is not yet finished, but it will be completed in the course of two or three months, and then it will be included. But there are certain other places which, in order to make the measure efficient at those stations to which the Act now applies, it is evidently necessary should be included, and provision was therefore made for Winchester, Maidstone, Dover, Canterbury, Walmer, Deal, Greenwich, and Deptford.

756. Has there been sufficient money voted to extend the Act to the places which you have named?—Yes.

757. With regard to hospital accommodation, how do you propose to deal with the places you have named?—Perhaps I should state what Lock Hospital accommodation we have already. We have, or shall have very shortly, at the London Lock Hospital 152 beds, for which we pay; we have 90 beds at Aldershot; at Chatham we shall, at the end of this year, have 88 beds; the hospital is not yet opened, and we are committed for another year to 40 beds at St. Bartholomew's Hospital at Rochester, which we hire. At Colchester, we have 25 beds; at Shorncliffe, we have 25 beds; at Cork, we have 46 beds, and at the Curragh (to be completed shortly), we shall have 41 beds. That makes 420 beds in England, and 87 in Ireland, the total being 507 beds.

758. *Mr. Murphy.*] Have you any beds at Queenstown?—Queenstown is provided for at Cork.

759. *Chairman.*] Can you inform the Committee how many of those beds are occupied at the present moment, at the different stations?—At the London Lock Hospital, they vary from 0.87,

week to week, from 90 to 108 or 110, but we are paying for 120. The other 32 beds will be available for us at any time, but we shall not pay for them until we use them.

760. *Mr. Kinnaird.*] But sometimes they are quite full, are they not?—They have not been full now for three or four months; Aldershot has not supplied them with any patients lately.

761. *Chairman.*] How many are there in Aldershot?—There were 50 beds at Aldershot a month ago, and now the number has been raised to 90; 58 is about the number at present occupied.

762. What is the number at Chatham?—The hospital there is not yet opened, but the 40 beds at Rochester are nearly always full.

763. Are they over-full?—The 40 beds are full at Rochester, and we have always 60 or 70 in the London Lock Hospital from Chatham besides.

764. How many are there at Colchester?—At Colchester and Shorncliffe they are always very nearly full. Occasionally they have been unable to admit diseased women.

765. How many are there at Cork?—The hospital at Cork has only been opened about a fortnight, and I think there are only about 17 in.

766. The Curragh hospital, you say, is not opened yet?—The Curragh hospital is not opened yet.

767. How do you propose to provide for those persons in the places which are to be added?—There are troops at Winchester, and a good many of the prostitutes come from there to Aldershot. The 90 beds at Aldershot would, no doubt, provide for the wants of Winchester and Windsor.

768. *Sir John Pakington.*] Would that be sufficient?—I think so.

769. *Chairman.*] There are about 32 beds now empty at Aldershot, are there not?—There are.

770. *Lord Charles Bruce.*] When the beds at Aldershot are full, are the patients sent to the Lock?—They are; Aldershot has hitherto sent patients up, but they have only one there now.

771. *Chairman.*] Then, where do those patients now in the Lock Hospital come from?—They come from Woolwich, Windsor, and from Chatham.

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772. Dr. Brewer.] Where do you provide for Woolwich now?—At the London Lock Hospital.

773. Chairman.] And Chatham?—From Chatham we send all that cannot be provided for in St. Bartholomew's at Rochester, to the London Lock.

774. Then, the 110 in the London Lock Hospital now, with the exception of one, all come from Windsor, Woolwich, and Chatham?—Yes; what we propose is that the patients from Winchester, Woolwich, and Windsor will go to Aldershot. Those from Sheerness, Gravesend, and Maidstone will go to Chatham, where we shall have 88 beds by the end of this year, any excess being sent to St. Bartholomew's Hospital, where we hire 40 beds. Colchester is already provided for with 25 beds. Dover, Shorncliffe, Canterbury, Walmer, and Deal would fill the Shorncliffe beds, and the excess would come to London, unless it was found necessary to build a hospital at Dover. Money has been taken in the Estimates for the purpose; but we must use what beds we have at the London Lock Hospital, and therefore I do not think it will be necessary to build any hospital there at present. Woolwich, Greenwich, and Deptford will come to London also.

775. Mr. Mills.] Is there no provision at all at Woolwich?—None. It has been proposed to extend the operation of the Act to Southampton, but the Southampton women should certainly be included with Portsmouth, which is an Admiralty station.

776. Chairman.] If the Act were extended to Southampton, would you have hospital accommodation for the present?—You would have to bring the patients to the London Lock, for the Aldershot beds would be filled from Windsor and Winchester.

777. Can you inform the Committee what has been the cost of the working of this Act?—Perhaps it is best told in the way of how much it costs per bed at the different stations. It varies, of course, according to the size of the hospital. At the London Lock Hospital we pay 20 l. a bed, with some additional charges, which bring it up to about 24 l.

778. Mr. Kinnaird.] That is the washing and the extras?—Yes; at Aldershot, I think it is now about 34 l.

779. That does not include the outlay for building at all, does it?—No; at the smaller stations, such as Colchester and Shorncliffe, the cost is larger, coming up to about 40 l. and 41 l. per bed.

780. What is included in the expense?—Everything except building.

781. Medical arrangements, physic, and so on?—Yes, everything.

782. Dr. Brewer.] What is the average number of days during which a patient is detained in hospital at Colchester?—They are now generally detained there about 35 days on an average, but we have found that there has been a considerable reduction of late. I think, at Colchester, it was as much as 50 days when the hospital was first established.

783. Mr. Donald Dalrymple.] Have you averaged the whole?—I have not.

784. Chairman.] Does that estimate include the cost of the police and everything connected with the working of the Act?—It does not in-

clude the cost of the police, but the police would raise it by a very small amount.

785. What is the cost of the police?—£3,260 altogether.

786. But what have you taken for them in this year's Estimate?—£3,260 for the whole of the stations.

787. Does the amount of money which you have taken in this year's Estimate contemplate the enlarging of the areas?—Yes; money is specially taken for Windsor, Gravesend, and Maidstone; and there is a sum of 4,894 l. for works for "other stations," which was intended to be spent at Dover, but that probably will not now be required.

788. But you have not taken any money for an increase to the Metropolitan Police Force which might be necessary, have you?—We have provided for it at Maidstone, at Gravesend, and at Winchester; but we have not at Dover and Canterbury, but we have ample money.

789. Mr. Mitford.] Will the 3,260 l. cover it all?—Yes, I think so, for it must be remembered that at Gravesend, Maidstone, and Winchester, although the year is well advanced, we have not spent a sixpence yet in police, although funds have been voted.

790. Chairman.] Supposing, for example, that the Act was to have effect within a circumference of 15 miles round Portsmouth, instead of five miles, it might necessitate an increase of one or two of the Metropolitan Police Force, and that might be the case in the other 12 towns where the Act is in operation, should you have money enough this year, supposing that the Committee were to advise the enlargement of the area in the towns where the Act is now in operation, independently of the addition of the towns which you have named?—I do not think that the increase would be considerable; no doubt at Woolwich, where Deptford and Greenwich will be included, we shall require an increase, but I think there would be money enough. It must be borne in mind that nearly 5,000 l. has been taken for buildings, which will no doubt be available to meet any excess under other heads of expenditure in working the Contagious Diseases Act. I am satisfied that there are ample funds to allow of the extension of the Act as proposed.

791. Mr. Murphy.] Does that Estimate include any expense in Ireland?—Yes; it includes the stations of Cork and the Curragh.

792. For the police?—Yes.

793. You are aware, of course, that the police or the constabulary in Ireland, are not at all the same kind of force as the Metropolitan Police here?—I am.

794. In the Estimates have you provided for an additional sum to be paid to the constabulary employed in this particular service, in addition to their regular pay?—No; but we have agreed to give, I think, 10 s. a week to the chief constable, and 7 s. 6 d. a week to the others.

795. Is that in addition to their ordinary pay?—Yes.

796. Mr. Mitford.] Of course you are speaking simply with regard to the estimates under your department?—Quite so; we have nothing to do with the business under the Admiralty.

797. Lord Charles Bruce.] Is any provision made as regards Dublin?—No; because the population is so large, as compared with the number of troops.

798. Chairman.] There was a suggestion made the

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the other day that the visiting surgeon should be obliged to sign every certificate of discharge; do you see any practical objection to such an amendment of the Act?—I am, of course, aware of what has given rise to that suggestion, and no doubt it is very necessary at certain stations, but at the military stations I do not think it would work, because, supposing that the Winchester and Windsor patients are brought to Aldershot, and we employ a local man as visiting surgeon, which it may very likely be convenient for us to do, we should require him to go to Aldershot to override our own surgeon there, who is certainly quite as capable of deciding whether a woman ought or ought not to be discharged. Then, again, to the London Lock Hospital we should send up all the Dover patients. Are we to send the visiting surgeon from Dover every time a woman is to be let out of the London Lock Hospital?

799. Mr. *Kinnaird*.] I think it is clear from your Return that the hospital that is least costly to the State in carrying out the Act is the London Lock Hospital?—No doubt the amount per bed is the smallest.

800. And yet the work is done equally well, is it not?—Yes, as far as I know; then there are the expenses of sending up the women.

801. *Chairman*.] Is there any other point to which you think it necessary to call the attention of the Committee?—Clause 28. Clause 28 runs thus: "If any woman subjected by order of a justice under this Act to periodical medical examination." I think it would be well to add, "Or who has voluntarily undertaken to submit herself to examination."

802. It is, in fact, bringing clause 17 under clause 28, is it not?—Yes.

803. Mr. *James Lowther*.] Would not the second section of clause 28 apply; would not a woman who voluntarily underwent an examination come under that?—Possibly; but I think it would be just as well to do away with all doubt on the subject.

804. Dr. *Brewer*.] But you do not want her to be put to hard labour, do you?—If she misconducts herself, I think she ought to be put in precisely the same position as if she had been brought under the Act by a warrant of justice.

805. I thought you wanted to bring her under treatment?—If she agrees to submit to examination she should be compelled to comply with the ordinary regulations.

806. Then she would be punished as any other person for a breach of police, the regulations, would she not?—Yes.

807. Mr. *James Lowther*.] I presume that all your recommendations as to grouping hospital districts are liable to modification, if any extension of the areas is decided upon?—I think that if the limits referred to in clause 15 of the Act were extended from five to 15 miles, which I understand to be the proposal, we could still provide for them in the way suggested.

808. Dr. *Brewer*.] Have you heard the suggestion of setting aside a ward for pregnant women?—Yes; I think we could not do that; it would be too expensive.

809. And yet pregnant women propagate disease, do they not?—Yes; but why should not the guardians be compelled to receive them into the workhouses?

810. Do you think it necessary to classify the diseased cases?—I am hardly in a position to give an opinion upon that point.

Mr. EDWARD WAYLEN, M.R.C.S., called in; and Examined.

811. *Chairman*.] You are Visiting Surgeon at Colchester under the Contagious Diseases Act, are you not?—I am.

812. How long has that Act been in operation in Colchester?—About five months; since the 27th of January 1869.

813. Have you any Lock Hospital accommodation at Colchester?—I have accommodation for 25 patients.

814. Is that always amply full?—It has been nearly full; I have averaged about 23 patients.

815. Do you find that the Act, so far as it has gone (although of course your experience must be limited, it having been so short a time in operation), has been effective in Colchester?—I think quite so.

816. I see in a Return which I have before me, that cases of venereal disease and gonorrhœa are very largely on the increase in Colchester; is that the fact?—I am not aware of that fact; my impression is quite the contrary. The Return which is sent me by the principal medical officer of the camp every week shows that last week there were 25 men under treatment in the camp out of a total number of 1,655.

817. Can you give the Committee the detailed report for your hospital for the month of January, and the number of cases per month?—I will do so.

818. Are the venereal disease and gonorrhœa (which is a form of venereal disease) on the in-

crease or on the decrease at Colchester at this moment?—On the decrease, I should think.

819. Has it been on the decrease since the Act came into operation?—I think so.

820. Do you attribute the decrease to the effect of the Act?—Yes.

821. Is it on the decrease not only as regards the number of cases, but as regards the character of the disease?—Yes; the cases are very much milder than they were even five months ago.

822. Do you think the Act either is popular, or is becoming popular, in Colchester among the persons to whom it applies?—I think it is becoming more popular; at first there was a considerable objection to examination among the women, but that objection is vanishing.

823. You have a system of periodical examination, I presume?—Yes.

824. Do you find that the women voluntarily submit to that?—They all sign a voluntary declaration; I do not think there has been one exception.

825. Are there many women brought by order of a magistrate?—There has never been one; they all submit voluntarily.

826. Have you heard the evidence which has been given by Dr. Barr with regard to the improvement in the character and condition of the women; and do you confirm that with regard to Colchester?—Quite so; I have myself remarked that

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that the women are cleaner; and they are more chaste in their language.

827. Therefore, so far as your limited experience goes, you think that it is wrong to say that the Act has been unsuccessful at Colchester?—Quite so.

828. Have you heard that remark made?—I have.

829. And you distinctly deny it?—I deny it.

830. With regard to the necessity of an enlargement of the area of the town, do you think that it would be advisable to enlarge the area at Colchester?—Colchester has a large area already. I think that if the area is enlarged we should have enlarged hospital accommodation; our present hospital accommodation is sufficient for the present area, but it would not be for a larger.

831. Do you find that many women come in from a distance to Colchester now, and bring the disease?—Only, I think, when fresh troops arrive; they follow troops, and come in with the troops.

832. Then, you think the fresh disease brought into the town, is brought in by women attached to fresh regiments?—Yes, I think so.

833. Are there any towns and villages in the neighbourhood of Colchester, outside the area of five miles which harbour prostitutes?—At Ipswich there are a great number.

834. How far is Ipswich from Colchester?—Twenty-two miles, I think.

835. Do many women come into Colchester from Ipswich?—I think they do; I think they come in for a night or two, and then go back.

836. But are there any villages round about, outside the circle, which harbour prostitutes?—No very large villages.

837. With regard to the condition in which the women present themselves for examination, do you have many cases of women coming for examination in a state of drunkenness?—Not many; I have had one or two, but not more than that, I think.

838. Do many women present themselves who are not fit to be examined from natural causes?—I generally get about 20 to 25 women in each week, and perhaps four or five of that number cannot be seen.

839. By the Act, have you any power of detaining them until they are fit to be examined?—No.

840. Do you think it would be advisable to extend the power of the Act in that respect?—I think it would; I think they may produce disease during the interval.

841. How do you now deal with pregnant women who come to you in a diseased state?—I have no power to admit them, and I do not admit them; one patient I had in hospital was declared to be pregnant after she had been there a month; she was discharged, and she is still diseased.

842. Is she still pursuing her avocation?—I think not; the inspector of police tells me that she is not; she is living with her mother; if she prostitutes herself, she does it clandestinely.

843. Is she under no treatment whatever?—I am not aware; I am not treating her, but I do not know whether she is getting treatment from any other person.

844. Did you advise her to go to the workhouse?—She went home to her mother; I advised her to go home, and she is now living with her mother.

845. Dr. Brewer.] Is she married?—She is not married.

846. Sir John Pakington.] Was she badly diseased?—She was very badly diseased.

847. Chairman.] Do you believe that there are many soldiers in Colchester, who go about now in a diseased state?—I think not; I think they are sent to the hospital very quickly after they become diseased.

848. It is impossible to discover that they are diseased, except they voluntarily declare it, is it not?—That is so; I believe there is no periodical inspection.

849. Do you concur in the recommendation that there should be a periodical inspection?—Quite so.

850. Do you think that so long as inspection is confined to women, it will be impossible to make the Act entirely effective?—Quite so; I am surgeon of a militia regiment, and during the time we were embodied, nearly three years, I made a point of having a periodical inspection of my men, and that had a most admirable effect; I had very little disease.

851. Sir John Pakington.] How often did you inspect them?—Every week.

852. Chairman.] Did the men themselves object to that?—Not in the slightest degree.

853. They might have objected; you could not have compelled them to submit themselves for inspection, could you?—I could not have compelled them to submit themselves for inspection, though, of course, the colonel might have given an order.

854. You are aware, I suppose, that periodical examinations once prevailed in the army, and were abandoned, because it was supposed by the medical officers that they were of no good?—Yes.

855. Does your experience confirm that belief, or otherwise?—I think the examinations are very valuable.

856. You yourself have found them to be very effective in three years' experience in an embodied regiment of militia?—Quite so; that was during the Crimean war when the system of examination was, I believe, generally acted upon.

857. Sir John Pakington.] For how long a period did you carry on that weekly examination of the men in the militia regiment?—During the whole time of embodiment; over two years.

858. It was during the war, and not in the mere annual training?—It was during the permanent embodiment.

859. Chairman.] Do you think that this Act itself is popular among the soldiers?—I do not think it is.

860. What objection do they raise to it?—They rather object to give information to the inspector of police as to women from whom they have contracted disease. There is great difficulty in getting information from them.

861. Dr. Brewer.] Have any women been brought before you who ought not to have been so brought, either by mistake or from false accusations?—I have never had such a case.

862. You say that there is generally an improved condition in the women under treatment, and that, at any rate, they are cleaner?—Yes.

863. Do you think that they learn that cleanliness in your hospitals?—I think they do.

864. You have an unlimited supply of water, have you not?—Yes, plenty.

865. But

865. But they have not an unlimited supply of water in the town, have they?—The water in the town is very deficient, as far as I can judge.

866. The neighbourhoods from which those cases mostly come is very ill supplied with water, is it not?—I think most of them come from low beer-houses in the neighbourhood of the camp.

867. All Magdalene-street is wretchedly supplied with water, is it not?—Very badly.

868. Is there any supply at all?—There is scarcely any.

869. Mr. James Louther.] Provided that additional hospital accommodation, and adequate supervision, and so on, are given, would you see any advantage in extending the area beyond five miles round Colchester; are there no villages where prostitutes reside?—There are no villages of any size; if you extend it you must extend it to Ipswich or Harwich, which are at distances of 22 and 18 miles.

870. Mr. Donald Dalrymple.] But Ipswich is a garrison town itself, is it not?—I think there are no troops there now.

871. Lord Charles Bruce.] At first the Act was not at all popular at Colchester, was it?—At first it was not.

872. To what do you attribute that?—I think it was from fear; the women did not quite know to what treatment they would be subjected, and they do not like confinement.

873. I did not refer to the women, but to the inhabitants of the town; was the Act unpopular with them?—I am not aware that it was unpopular with the inhabitants; my impression is rather that it was a popular measure from the beginning, and I never heard the contrary.

874. Mr. Mitford.] Clause 24 has reference to the limitation of detention of women, the period limited being six months; do you think it would be desirable to extend that period to nine months?—I think we might get cases which would require a longer period than six months to cure, and it would be desirable to have that power.

875. Dr. Brewer.] The worst quarters where all the sailors congregated, are all within five miles of Colchester, are they not?—They are.

876. Mr. Murphy.] How long has this Act been in operation?—Since the 27th of January of this year.

877. Have you had any examples of women about to be discharged, and being cured, having expressed any desire to give up their mode of life, if they had an opportunity of doing so?—I know two cases of women who expressed that wish, and their wishes have been carried out.

878. In what manner?—One is gone to some institution in town, and she is doing very well; and the other went to a local reformatory, and she is doing very well; others have expressed a wish to go to homes, but before the time came for their discharge they have altered their minds, and refused to go.

879. Dr. Brewer.] How many prostitutes have you in Colchester?—There are now on the register 98; at the beginning of the year when the hospital was opened, there were 124.

880. Are they all under inspection?—They are all under inspection once during the month.

881. How many of the 98 are diseased?—Since the hospital has been opened I have found 77 diseased out of 425.

882. How often does the same case come to you diseased?—I have never had them a third
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or fourth time; I have had only about four patients a second time out of 77.

883. What proportion out of the 98 women have had disease to your knowledge since the commencement of the operation of the Act?—I have treated 77 women since the hospital has been opened; but some of those have been a second time.

884. Dr. Brewer.] How many soldiers have you at Colchester?—They vary from 1,500 to 2,000; there are about 1,655 men now, I think, and 98 women.

885. Chairman.] Are you speaking now of registered prostitutes who are obliged to submit themselves to periodical examination?—Yes.

886. Dr. Brewer.] Have you much prostitution of a concealed character in Colchester?—I think we have; I think there are a great number of young women who work at the factories and machine works, at whom the police have no means of getting.

887. Do they propagate the disease?—We have no means of knowing, because they are not women that the police can bring for inspection.

888. And you have no information about them?—I have no information about them.

889. Chairman.] Could you give the Committee a return of the number of men in hospital with disease?—I have a return here which was supplied to me by the principal medical officer of the camp; at the present time, there are 25 men in the hospital with venereal disease.

890. Sir John Pakington.] That is the same number as the number of women, is it not?—There are 24 women in hospital at present.

891. Have you reason to believe that, besides the 98 registered prostitutes in Colchester, there is a considerable amount of clandestine prostitution?—I think so; and the reason I have for thinking so is simply that the girls are getting very low wages, and they spend a great deal of money on dress, and so on.

892. And, whether or not that clandestine prostitution is productive of disease, you have no means of judging?—I have no means of knowing.

893. Have you any alterations to submit for an improvement in the Act itself, independently of the enlargement of the area?—I do not think of anything at present.

894. Dr. Brewer.] Have you power enough to bring all the women under discipline?—I think so; we find no difficulty about it.

895. Chairman.] Do you agree in the recommendation that there should be a clause added to the Act empowering you to deal with pregnant women?—Yes, that would be a great assistance, undoubtedly. It would alter the arrangements of the hospital very much if that were the case.

896. Mr. Mitford.] The Act empowers you to deal with pregnant women if you think fit; but it is a question of practice, and you do not think fit to carry it out, is not that so?—There is not hospital accommodation for them. We should require extra nurses and separate wards.

897. You do not think it desirable, for those reasons, to do it?—No.

898. Mr. Kinnaird.] A pregnant woman being in her third month might remain on, and might, in that case, occupy a bed, might she not?—She might remain for a short period; but
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it would not be prudent or advisable to keep her there up to the time of her confinement. We have no convenience for keeping pregnant women.

999. Mr. James Lowther.] You stated, did you not, that the unpopularity of the Act among the soldiers arose from their being obliged to report cases?—I merely gave that as a reason why I considered that it was unpopular. I thought that, had the measure been a popular one, they would have given their information more willingly than they do now.

900. Is it by a regimental order that they are

obliged to give the information?—They are not obliged to give information. The inspector of police is allowed by the military medical officers to go into the wards and elicit what information he can. It is quite voluntary, and they are always slow to give that information. My impression is, that if the Act was a popular one they would give it more readily.

901. Dr. Brewer.] Will you let the Committee know how many of those 98 women positively have had disease during the last five months?—I will ascertain it, and inform the Committee.

Mr. WILLIAM GOVETT ROMAINE, C. B., called in; and Examined.

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902. Chairman.] You are permanent Secretary to the Admiralty, I believe?—Yes.

903. I think that you have proposed some alteration in "The Contagious Diseases Act, 1866," for the purpose of improving the working of the Act?—It was found in the working of the Act of 1866, that there were two or three points upon which it was proposed, whenever a new Bill was brought in, that the Committee should be asked to amend it; and I had prepared, after the Report of the Committee of the House of Lords, of last year, a sketch rather than a draft of a Bill, with enlarged powers altogether; but I think it has been determined by the Government and the Legislature, not to extend the provisions of the Act of 1866 to towns other than those connected with the army and navy.

904. To leave out, for the present, at all events, all questions relating to the civil population?—In drawing out this sketch, I have suggested certain clauses to remedy those apparent blots in the working of the Act of 1866; and these, if the Committee thought proper, I could mention quite distinctly from the other subject. I should think that most likely Dr. Sloggett, who has been examined here, will have mentioned some of the same points, because I have from time to time heard from him, and whenever any difficulty has arisen, I have generally made a note of it with a view to its remedy and correction, whenever an opportunity arose. The first point was, as to the power which would be given to the visiting surgeon, to examine patients in hospital. Ample power should be given to him to go into the hospital and examine patients. At present he has no power at all in the hospital, except such as may be given to him by the authorities of the civil hospital. The Admiralty have had patients in the wards of civil hospitals, and therefore they have been to a certain extent controlled in their action by the civil authorities of those hospitals, and they have always worked very amicably with them; but still some difficulty has been experienced.

905. Do you apprehend that there would be anything like a jealousy on the part of the medical officers connected with those hospitals, at being supervised, so to speak, by an employé?—Yes; I think you would have to ask them to retire, in effect. I think that a local civil practitioner cannot well be allowed to remain in authority over lock wards; when we first began, it was really necessary to have wards in the civil hospitals, but I do not think it is so now; and I think it has been found in working, that the medical officers under the Act had not sufficient

power; the Government, who pays, has not sufficient power within the walls of the hospital; the custom at present is, that each of the local medical practitioners takes one ward, or one will perhaps take a portion of a ward or a certain number of patients, and visit them once a week; now that is not enough; of course they are not responsible; they say, "as to this patient, you had better adopt such and such treatment, and I will see her this day week; then the house-surgeon is responsible to them for obedience to their orders.

906. Sir John Pakington.] Your advice then is, that the military or naval surgeon appointed for those cases should have exclusive jurisdiction in the lock wards?—He need not be a military or naval surgeon, but he should have exclusive jurisdiction, under the visiting surgeon.

907. Chairman.] And in short, that we should establish in those lock wards medical officers of your own?—Yes; they need not be military or naval men, but they ought to be appointed and removed by the Government who pays.

908. Would not that increase the cost of the working of the Act?—The Admiralty pay the house-surgeon; and for the same money you will get a man entirely under your own control; at Devonport, for instance, I think we pay 150*l.* a year, besides so much a bed.

909. Mr. Mitford.] Is anything paid besides the 24*l.* a bed of which we have heard, to the Lock Hospital, for the doctor who attends the Government patients, as you say is the case at Devonport?—Yes; besides so much a bed, you pay so much for a surgeon, and you give something for the chaplain as well.

910. These expenses are not included in the 24*l.*?—No; that is beyond the 24*l.*

911. Chairman.] It has been suggested that there should be an addition to those powers, and that they should be obliged to sign a certificate of discharge for every woman; and with regard to the military stations, an objection has been raised, which appears to have some weight, to the effect that you could not practically carry it out; for example, our patients from Aldershot come up to the London Lock Hospital, and are, as a matter of fact, under surgeons of very great experience and eminence; and if they are not to be empowered to discharge every woman, but if we are obliged to send up daily our visiting surgeon from Aldershot, for the purpose of signing a certificate of discharge, it would be practically impossible, would it not?—You are empowered by the Act to make a deputy visiting surgeon in addition to the visiting surgeon, and if one of the house-surgeons at that hospital was made a deputy,

deputy, with that power, you could get over the difficulty in that way, if that was thought to be a good way, and I think that would be the easiest way of getting over the difficulty. There would be no pay necessarily attached to the appointment; you would have only to put it into the "Gazette."

912. Mr. *Kinnaird*.] In the London Lock Hospital you do not pay anything to the surgeon, do you?—No.

913. *Chairman*.] What other suggestions have you to make?—The next suggestion is, that there should be no admission or discharge, without the authority of the visiting surgeon, so as to make him of superior authority over the house-surgeon.

914. Mr. *Kinnaird*.] I think I understood you to say that the patients were only visited once a week; are you aware that at the London Lock Hospital there is paid by the hospital a regular house-surgeon, who is a competent man, and who is always on the spot, and visits the patients from hour to hour when they require it, and that there is a senior surgeon of the hospital, who deposes the duty to the house-surgeon, but that the house-surgeon is precisely the successor to Dr. Barr, who has been examined here, and who has been found to be competent; and do you consider that the thing would work well, or that you could get the thing carried out if you put the civil authorities of the hospital under the visiting surgeon appointed under the Act?—At Devonport, there were a certain number of physicians practising in the town, who voluntarily and gratuitously gave their services; they come once a week, and they give their orders to the house-surgeon, and without their authority no one is discharged; and very often a patient is kept longer in the hospital than is necessary.

915. That is simply for the purpose of giving a certificate, is it not?—The house-surgeon, of course, is bound to attend once a day, and oftener, if required.

916. He is resident on the spot; but the superior surgeon comes and confirms the treatment once or twice, or three times a week, if necessary; do you think that it would be desirable to authorise a military or a naval doctor to interfere?—He would not be necessarily a military or naval doctor; at Portsmouth, for instance, the house-surgeon, and the visiting surgeon, are both civilians.

917. *Chairman*.] I wish to ask you incidentally, with regard to certificates, whether you can inform the Committee why it was that such a point was made of every woman upon her discharge being furnished with a certificate?—She is only furnished with a certificate on being discharged after imprisonment, I think.

918. Practically it is the fact that they get a certificate, and it has been shown to the Committee in evidence, that those women use those certificates for very improper purposes; have you any suggestion to offer which would avoid that?—I have drawn the 28th clause thus: "No woman authorised by this Act to be detained in a certified hospital, shall quit the hospital without having previously had read to her a notice from the chief medical officer and the visiting surgeon, in the presence of the superintendent of police, to the effect that she is free from a contagious disease; such notice, and the fact of its having been read to her, shall be certified by the signature of the above-named officers, and copies of 0.87.

the said certificate and notice shall be kept, one by the visiting surgeon and one by the superintendent of police, and its production so signed, shall be sufficient evidence of the facts for all purposes."

919. Mr. *Mitford*.] Then your proposal is not to give the certificate to the woman herself?—Quite so.

920. That is your proposal for altering the present Act?—Yes.

921. *Chairman*.] Do you suggest any alteration in clause 17?—Yes. "Any woman, in any place to which this Act applies, may voluntarily, by a submission in writing signed by her, in the presence of, and attested by, the superintendent of police, subject herself to a periodical medical examination under this Act, for any period not exceeding one year"; and these words were proposed to be added: "and the visiting surgeon may thereupon and during such period give or cause to be given, notice in writing to attend for medical examination." The reason why those words were added to this clause, was in consequence of a doubt raised whether the words of the 19th and 28th clauses, related to women who had voluntarily submitted, but had afterwards refused or neglected to attend.

922. In short you would suggest that the 17th clause should in some way be brought under the operation of the penal clause?—Yes; the case arose before the magistrates at Portsmouth or Plymouth, and that point was raised on the woman's behalf, and she was released. It was thought very doubtful whether she came under that clause.

923. In section 24, it has been suggested that the power of detention should be extended from six to nine months, do you concur in that?—It is rather a medical question than anything else. There are a certain number of cases every quarter, where sometimes the women, after they have been detained six months, insist upon going to their friends, and sometimes they are willing to come back again to the hospital. But I remember that the former Committee thought that six months was as long as any woman ought to be deprived of her liberty at any one time.

924. Then there is an alteration which has been proposed to the Committee, in the 18th section?—The Admiralty have power to make regulation respecting the arrangements for the conduct of the examinations. It has been found that occasionally women come purposely drunk, in order not to be examined, and I propose this, "In case of any woman who shall come, or be brought to the place of examination, and shall be found not sober enough, in the opinion of the visiting surgeon, to be examined, and if found diseased, not sober enough to be sent to the hospital, the police shall have power to detain her until the time for the next examination, so that the whole time of detention does not exceed 36 hours;" and the same power to detain women taken up too late for examination on the same day. They keep themselves in hiding sometimes until it is quite late, and then the police are unable to take hold of them. It is very inconvenient to send them into hospital at late hours, as it disturbs all the patients.

925. Is not this the place where the alteration with regard to women who present themselves for examination in an unfit state, from natural causes, should come in?—I should think it would.

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926. The visiting surgeon has now no power of detaining them, has he?—No.

927. It has been shown to us in evidence that women in that state are in the habit of going away, being diseased, and spreading the disease; do you not think it very advisable that some alteration of the clause should be made so as to give power to the visiting surgeon to detain those women until they are fit to be examined; and would such an object be attained by the clause being thus worded, "intoxication or other causes"?—The police have reported that women very often are not in the state which is supposed, but really paint themselves, and make themselves in a horrible state, in order purposely not to be examined, not being in that state; and that if they could detain them for a few hours they would be found not to be in that state.

928. Might not such an amendment as this be made, "Women presenting themselves in a state of intoxication, or in a state which makes them, in the opinion of the visiting surgeon, unfit for examination"?—Yes.

929. Mr. *Murphy*.] Would you propose to put that at the end of clause 18?—Yes. The 20th clause of the Act has been read as enacting that if a woman was examined and found in that state it was absolutely necessary, without any discretion at all, to send her to hospital; although in examining 20 or 30 women afterwards, he found many worse cases; and it is proposed to give him a discretion to send the worse cases.

930. *Chairman*.] That is to say, if there was limited hospital accommodation?—Yes, that occasionally happens. "The visiting surgeon, nevertheless, to be allowed to exercise his discretion in sending to occupy such beds as may be vacant in the hospital, those which he may consider the most urgent cases, if at any times there should not be immediate room for all the women found diseased"; and then with regard to pregnant women, "And if, on examination, a woman shall be found diseased and pregnant she may, if the visiting surgeon shall consider that she cannot conveniently be received in a certified hospital, be sent to the workhouse for cure and detention."

931. Would not such an alteration as that require some further legislation than an amendment of this Act?—She is found diseased as well as pregnant.

932. Mr. *Kinnaird*.] Would the workhouse authorities have power to keep her under the Act?—It would be for cure and detention; I think you keep paupers in a workhouse now; they do not allow them to go out when they like.

933. *Chairman*.] But supposing that a better class of prostitute, rather better off, presented herself for examination in a state of disease and pregnant, and she declined to go to the workhouse, would you take the power then to compel her to go to the workhouse; and having compelled her to go to the workhouse, would you take power to compel the workhouse authorities to admit her, which you do not now?—The better class of women are hardly those who come under the operation of this Act; the Act deals with common prostitutes; they are a class which in towns like these is perfectly well known. The persons that you are mentioning would hardly come under the operation of this Act.

934. But there have been a great many persons who have presented themselves for examination, at Aldershot particularly, who are not

common prostitutes, such as servant girls, and so on; how would you propose to deal with such cases?—I do not know that I have met with any cases of that kind.

935. At all events, there are, so to speak, non-professionals who present themselves, are there not?—Then they do not come under this Act.

936. They voluntarily submit themselves, do they not?—Throughout the whole of this Act the term is, "a common prostitute."

937. Then would you suggest that all pregnant women, being common prostitutes, who present themselves in a pregnant state should be compulsorily placed in the workhouse?—I could not think of any other way of dealing with that class of women. There is no asylum, or any place of that kind to which you could send them.

938. Sir *John Pakington*.] Are you aware that the system which you recommend, of compulsorily remitting a diseased pregnant woman to the workhouse, is not consistent with the existing law?—I do not know that it is contravened anywhere.

939. In the first place, do you know that no one is a fit inmate for the workhouse who is not destitute; and, in the next place, that no person can be detained in a workhouse against his or her will, if he or she is willing to go out without receiving parochial relief?—It was a choice of difficulties; I took it that "destitute" would meet most of the cases.

940. I apprehend that the points now suggested to you would offer considerable impediments to looking at the workhouses as the resource in those pregnant cases; would you see any objection to retaining pregnant women in the Lock Hospitals, so as to avoid their being kept there up to the time of their confinement, if they were not cured before?—It was rather from a report which I received from Devonport of the difficulty of retaining pregnant women in the hospital. They thought it was a very inconvenient course to have pregnant women confined and delivered within the hospital.

941. Is it within your recollection that I myself, when at Portsmouth, directed two beds to be set apart for pregnant women?—Yes.

942. Is it not far better that a pregnant woman should be retained in the hospital until she is cured, rather than that the woman should be sent forth to propagate disease, and to prolong her own disease up to the time of her confinement?—Very much better; the difficulty was the want of hospital accommodation.

943. Provided the confinement of the woman in the Lock Hospital is avoided, I presume you would be of opinion that it would be as desirable to keep pregnant women there as any others?—Quite so; but I understand from the doctors that in cases of that kind, where women are diseased in that way, you could never be certain when they would be confined.

944. Dr. *Brewer*.] In the case of premature births, the children would be born dead, would they not?—I suppose that would depend upon the length of time that it was premature. There is one other matter which would come in the same category, and that is the case of a woman who, after having been treated for a long time in hospital, is pronounced by the doctors to be incurable; and those cases are not very uncommon.

945. *Chairman*.] With regard to incurable cases

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cases, what would you suggest?—The incurable cases must be dealt with in the same way, by sending them to the workhouse, unless there was an asylum. If you sent them to an incurable asylum, you would require a power of detention; but those are cases which clearly ought not to be allowed to go about the world, and yet your power of detaining them in hospital ceases after a time. The medical men say that many of those women go out with the power of conveying disease, who are yet incurable by medical science.

946. Could you furnish us with any returns of the incurable cases which have come under the view of the medical officers?—I think so; I do not have them abstracted, but I have no doubt that in almost every quarter there would be found to be one or two cases of incurables. I see on 2nd January 1869, "Devonport, secondary syphilis, 2; pregnant, 2; one incurable, not admitted." It would not be a large list, but still those cases are constantly recurring, and I will furnish such a list to the Committee.

947. Sir John Pakington.] The case of incurables is at present unprovided for, is it not?—It is entirely unprovided for. I suppose that if the Government paid, there are asylums which would receive them, but there is no place at present where you could send them. There are asylums for incurables, with other diseases, and if the Government continued to carry on this system they might very easily have a small ward attached at a hospital of that kind where they might receive incurable patients.

948. Mr. Collins.] Would you treat them like lunatics, and deprive them of liberty altogether?—Yes, until they were cured; you might give a *locus penitentia* if people would come forward and give guarantees for their good behaviour.

949. Chairman.] Are there any other alterations which you would suggest?—In the 29th clause, after the words "after, and notwithstanding her imprisonment," I would omit the remainder of the clause, and I would substitute the following words: "If she shall be found resident within the limits of any place to which the Act applies, for the purpose of prostitution." I would leave out these words, "unless the surgeon, or other medical officer of the prison, or a visiting surgeon appointed under this Act, at the time of her discharge from imprisonment, certifies in writing to the effect that she is then free from a contagious disease (the proof of which certificate shall lie on her), and in that case the order subjecting her to a periodical medical examination shall, on her discharge from imprisonment, cease to operate." At the end of the 32nd clause, I would add the words, "unless she be found resident within the limits of any place to which this Act applies, or within five miles of those limits for the purpose of prostitution."

950. It has been suggested to leave out all the words, after the words "one year," in the 32nd clause; that would answer the purpose, would it not?—I think that would answer the purpose, so that the clause should end with the words "one year."

951. Are there any other alterations which you would propose?—There is an additional power required to deal with unruly women in the hospital. The better opinion seemed to be that there ought to be some power of separating them from the others, and detaining them separately. At pre-
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sent there is no doubt that you might do it, that is to say, by putting a woman into a room by herself, or with only one other; but if it was by law it would remove all difficulty.

952. Dr. Brewer.] How could that be done?—Merely by having one or two small rooms, with only two beds in them in the hospital.

953. Chairman.] Are there any other alterations?—That is all.

954. Lord Eastace Cecil.] Have you at all considered the expediency of having soldiers and sailors under examination, as well as women?—Yes, certain regulations have been made by the Admiralty with regard to sailors. In every port where the Act is in force and a ship comes in, the senior officer is bound to have the men examined before they land, but not indiscriminately. There are certain regulations drawn up, by which only men under a certain age, and unmarried, are examined.

955. Are you prepared to draw up any general clauses which would apply to both services?—There would be no difficulty in doing it; the Admiralty have done it by their regulations, which have been out for two years, I think; it was found that whenever a ship arrived, in three or four days there was a difference, and the same with a regiment.

956. Dr. Brewer.] It is, indeed, the source of the breaking out of new disease, is it not?—It is quite so; it was found, even in the South Seas, that one of our vessels would go to an island in the Pacific, where disease had been utterly unknown, and you immediately had an outbreak of disease; so that the visit of a man-of-war in one of those islands was a curse.

957. Chairman.] Have you taken any money in your estimates this year for the purpose of enlarging this Act?—Not for the purpose of enlarging it.

958. Have you taken any money at all?—No; I think that there is no excess on last year's estimates, or a very small one, because our building had very nearly come to end; we had been enlarging hospitals, and I think the expense was nearly at an end.

959. What hospital accommodation have you at Portsmouth?—One hundred and twenty beds.

960. Are they generally full?—Always, I think, at Portsmouth.

961. At Devonport, what hospital accommodation have you?—At Devonport, lately, some of them have been empty. There are 160 beds there. They report the reason to be, in a great measure, that the women, to avoid being examined, many of them live outside the five-mile limit, and the consequence is that the police, although very active and well-manned, have not been able to bring in enough to keep the beds full.

962. It has been suggested by your visiting surgeon, Dr. Parsons, of Portsmouth, that he can do very little with the Act, unless Southampton and Chichester be included in it; supposing that Southampton and Chichester were included in it, would you see any difficulty in providing hospital accommodation for the persons who would come from those two towns?—At present the beds at Portsmouth are always full; you could find accommodation, but you would have to spend more money; I never received a report from the police on the subject; but they could tell you best how many beds would be required for each of those places.

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963. Supposing

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963. Supposing that such a recommendation were made by the Committee, would you have money enough in your Estimates to carry it out this year?—No; we should have to ask the Treasury for money. With a recommendation from the Committee, the Treasury would make no difficulty in giving the additional sum.

964. Dr. Brewer.] Do you agree as to the great importance of extending the existing area to 15 miles?—Where you are going to take so large a power as to have an area of 15 miles, I think all the places should be specified in the Schedule to the Act.

965. Mr. Mitford.] Instead of giving a general power as regards the district?—Yes; the 15-mile limit, for instance, unless it was specified and very carefully drawn, would take in all London.

966. Chairman.] But you might specially exempt such places, might you not?—Yes, you would have to do so. The clause would be drawn with an instruction.

967. Mr. Mitford.] Might there not be a limitation, as with regard to Woolwich, in the Act of 1866?—Yes.

968. Dr. Brewer.] You admit that the hospital at Devonport is not full, not because disease is not rife there, but because the women go to live beyond the five-mile area to which the Act extends; how then do you propose, unless you extend the area, to mitigate the disease?—I propose to extend it; merely specifying in the Schedule the places to which it extends.

Thursday, 1st July 1869.

MEMBERS PRESENT:

Dr. Brewer.
Lord Charles Bruce.
Mr. Donald Dalrymple.
Sir James Elphinstone.
Captain Grosvenor.
Marquis of Hamilton.
Mr. Kinnaird.
Mr. James Lowther.

Mr. Mills.
Mr. Mitford.
Sir John Pakington.
Sir John Simeon.
Mr. Tipping.
Sir John Trelawny.
Captain Vivian.

CAPTAIN THE HON. J. C. W. VIVIAN, IN THE CHAIR.

Inspector JOHN SMITH, called in; and Examined.

969. *Chairman.*] YOU are Inspector of the Metropolitan Police at Aldershot for the purposes of the Contagious Diseases Act, 1866, are you not?—I am.

970. Have you been at Aldershot in that capacity ever since the Act was first in operation?—I have.

971. How many policemen have you under you?—I have one inspector, one serjeant, and six constables, but they are not all employed under the Contagious Diseases Act. We have the general duties of the camp to perform as well.

972. Is there a police barrack there?—There is not.

973. Is there no police accommodation whatever?—None whatever.

974. Do you find great inconvenience from that?—Very great inconvenience.

975. Have you no place for confining anybody whom it is necessary to take up?—None whatever.

976. Will you tell the Committee what your duties are with regard to the Contagious Diseases Act?—I will. The duties consist in watching for women who are supposed to be prostitutes, women who are not residing in brothels, and women who are practising clandestine prostitution; and warning them to attend for medical examination, and conveying them to and from the hospital, or to their homes; in fact, every duty connected with the carrying out of the Act.

977. You have spoken of clandestine prostitution, and do you believe that there is much clandestine prostitution within the camp at Aldershot?—I do.

978. Have you any power over clandestine prostitutes?—We have no power; but I satisfy myself always either by myself or from some good information that I obtain, and I always make it a point to see those people. I see them and tell them what I have seen or heard, and in most cases they do not deny it, and I warn them to attend for medical examination. That is my practice.

979. In what class of life are those clandestine prostitutes?—Various classes. As a rule, they are of the lower order; I could not say that any per-

son who is practising as a clandestine prostitute is moving in what I might call a respectable sphere of life. They are as a rule labourers' daughters, and people of that class.

980. Shop girls?—I think not.

981. Servants?—Servants occasionally.

982. Under the present Act, what power would you have over a servant who you had reason to believe was practising clandestine prostitution?—First of all, I should warn her to attend for examination under the 17th section of the Act. If she did not attend for examination, and I had good reason to suppose that she was diseased, and was conducting herself as a common prostitute, I should then lay information before a magistrate in the usual way, and get her summoned before him; and if she did not appear by herself, or by some person on her part, then I should ask the magistrate to be good enough to make an order for her examination, which of course would depend upon the magistrate. If the evidence was sufficient to justify him in making the order, he would do so; and if he did, I should then serve a copy on her; and in the event of her not attending, I should then apply to a magistrate for a warrant to apprehend her; she would then be apprehended and brought before the magistrates in the usual way, and charged with the offence.

983. What nature of evidence could you offer with regard to a woman in service in a house?—For instance, if I went to the military hospital and a man was in his bed and he told me that So-and-so had given him the disease, I should then make some inquiries; I should very likely ask the hospital serjeant or some person about, if the man's statement was to be relied upon, and if he was likely to tell me the truth or not; I should be very cautious not to interfere in any way with any person in service or living in any respectable place, or anything of that sort, without good foundation. If I found that the man's statement was to be relied upon, I should keep observation upon this party for some time, and if I found out that the woman went out to public-houses, and was seen in company with various men, and that kind of thing, then I should take upon myself to

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warn her; but if I saw nothing of the kind whatever beyond the man's mere assertion that such was the case, I should not take any notice of it.

984. But on the whole, do you believe that clandestine prostitution is carried on to a great extent in the camp at Aldershot?—I do.

985. And do you think that that is one of the difficulties which present themselves to the complete fulfilment of the objects of this Act?—I think it is one difficulty, but I should not like to say that it is the greatest difficulty.

986. With regard to the class of women who live by this prostitution, where do they principally reside?—If the Committee will allow me to produce a return, showing the residencies of the prostitutes in the district. In private rooms there are 38; in brothels, 120; in public-houses, 1; in beer-houses, 72; with parents, 5; making a total of 243. (*The same was delivered in, vide Appendix.*)

987. The number which Dr. Barr gave was considerably larger than that; how do you account for the difference?—It is very likely that Dr. Barr and I may both be right. It is possible that Dr. Barr has included those who have attended for examination recently; if so, I have no doubt that it went up to that number, because we have had a good many women come in lately, but they come in and go out again. Dr. Barr would not be in a position to know now what has become of those women so well as I should. If a woman leaves the neighbourhood I should very likely know the same day where she was gone to.

988. Dr. Barr spoke to us about some of those unfortunate women who live neither in rooms nor brothels, nor public-houses, but absolutely in drains; do you believe that there are any such now in Aldershot?—I do not think that they exactly reside in drains or places of that sort; but there are a few who are very dirty women, who go to public-houses at night, and the dirtier they are, the more likely they are to be about the roads when the soldiers are going to the camp during the night time. They intercept them there, and they go with the soldiers. They are very dirty, filthy women, and it is very likely that the soldiers would not go with them in the daylight if they were to see them; they occasionally sleep under a hedge, or anywhere where they can get shelter. It has been the case that as many as 10 or 12 women have been found sleeping in a large drain, but I do not think they do it as a rule; in fact, I am sure that they do not.

989. Do you remark any difference in the character and condition of those women since the operation of the Act?—I do; a very marked difference. They are much better clothed, and much better behaved now than formerly.

990. Have you found any difference with regard to their willingness to submit themselves to periodical examinations?—Yes; they are much more submissive now; they begin to see that it is for their good. They say that it is for their own benefit, and they come up very regularly. If there were 60 women warned for examination (as there will be to-morrow), very likely about 57 or 58 will attend, and that, I think, is very good, considering that some of those women have to wash their clothing, and all that kind of thing, before they can come up. They like to come up as clean as they possibly can, and a few of them may be disappointed in that; but those kind of women are almost sure to present themselves the next morning.

991. Therefore you are justified in saying that this Act is popular with regard to those persons to whom it is meant to apply?—I am.

992. And that it has been of great benefit already within your limits at Aldershot?—It has been of very great benefit.

993. Do you find that many of those women try to evade the operation of the Act by going beyond your present limits of five miles?—No.

994. Do you think that the limit of five miles is sufficient?—It extends beyond five miles at Aldershot; that is, if I understand the question rightly. I do not think it would be necessary to extend it beyond five miles from the Aldershot district.

995. Under the Metropolitan Police Act the metropolitan police have power within an area of 15 miles, have they not?—That applies to any military or naval stations, such as Aldershot, for instance.

996. And you yourself do not see, so far as Aldershot is concerned, any necessity for extending your powers to the same powers which you have under the Metropolitan Police Act?—I do not see the necessity of it in the Aldershot district.

997. We have had it in evidence that some of those women are in the habit of going beyond the limit during the day, coming into the camp at night, and so evading those examinations; is that the case?—The only time that I know of when they would go away would be in this way. It happens sometimes that the flying columns go out for a day or two, but it is very rare; and then very likely they would follow them when they went out for a day or two, but they would come back again, and very likely get into the lodgings which they had left. I do not know of any case where they have left for the purpose of evading the Act.

998. Do you find that the publicans whose houses those women of necessity frequent, throw any obstacles in the way of your performing your duty under the Act?—No, I have never found any difficulty with publicans, though I have found a little difficulty with private individuals who keep those people.

999. You have a large number of casual visitors of a very low order at Aldershot, have you not, such as tramps?—We have.

1000. Have you any power to deal with them under this Act?—None whatever under this Act.

1001. Do you find great difficulty then resulting from tramps of both sexes?—Yes; I find that those male tramps are generally accompanied by one or two women, or as many as they can get to go with them. I have known some men to have five or six women, and they hang about the roads, and they make those women conduct themselves as prostitutes with soldiers during the night time, and then the men are in the habit of receiving the money and spending it as they think proper. I always find that those women when they are admitted to the hospital remain there for two or three weeks, or until they are cured, and then they go out again, and perhaps 24 hours after they have been out they are with those same tramps again, and with the soldiers, so that almost immediately after the women are discharged from hospital they are diseased again, and are still communicating the disease to the troops. I think that, to a very considerable extent, both soldiers and women are in the hospital in consequence of this. I should think myself from 40 to 45 men

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men and women are daily in hospital from that cause.

1002. Sir James Elphinstone.] Are the men diseased with whom those women live?—Yes; that is what I mean. The tramps are diseased, and the women who frequent them are also diseased.

1003. Chairman.] Was there not a very notorious scoundrel of the name of "Ginger," who used to frequent the camp for some time, and who lived by getting hold of girls and prostituting them with soldiers?—Yes; I laid information about him before the magistrates, and got a warrant for him, but it was some time after he had left, and he has not been there since. There were six women who had been with this man, who were each of them in the hospital for very considerable periods. This man used to have those women, and two or three other men and boys, and as many as he could get, and send the boys to the camp to get bread, and sometimes he would send them begging, and he had all sorts of means for obtaining money and food.

1004. Dr. Brewer.] Did he bring young girls into the camp?—One was a very young girl; the one for whom I got the warrant.

1005. Chairman.] In pursuing your duty, do you ever have occasion to talk with soldiers about this Act?—I visit the military hospitals, and there I have an opportunity of talking with the soldiers about it.

1006. With regard to the soldiers themselves, do you think that the Act is popular with them?—I think so with the majority of them, although there are many men who keep back from giving the information; but I believe that with the majority of them it is very popular.

1007. Can you tell the Committee whether you have any grounds for believing that there are many diseased soldiers going about who have not given themselves up, and who are not under treatment in hospital for diseases of this class?—Yes; I have for a very considerable time been impressed with the belief that many men are at large who are diseased, and who ought to be in hospital, from seeing them so frequently in the chemists' shops at Aldershot. I have taken some trouble to see what they were doing and bringing out; and I thought I could see by what they were taking out what they were having; so I asked one of the chemists if he would be kind enough to take the numbers of the men whom he served with this particular medicine during one week; and he did so, and he very kindly gave it to me.

1008. Have you that with you?—I have.

1009. Will you read it if you please?—On Monday, 14 June 1869, there were 16; on Tuesday, 15 June, there were 13; on Wednesday, 16 June, there were 17; on Thursday, 17 June, there were 18; on Friday, 18 June, there were 11; on Saturday, 19 June, there were 23; the total being 98 in one week.

1010. Did the chemist who supplied you with those numbers tell you that he knew that all those persons were under treatment for one of the two diseases?—He did.

1011. He knew that as a fact?—Yes.

1012. Is this one chemist?—This is one chemist.

1013. How many chemists are there at Aldershot?—There are four in the neighbourhood of Aldershot; this shop perhaps does the most trade in this line. There is another one perhaps

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equal to this; the other two I do not think do quite as much.

1014. But do you think that there are certainly quite as many men supplied with this medicine by the other three chemists together, through the week, as are contained in that return?—There would be more with the three.

1015. That would make an average of 200 men a week?—About that; but it is possible that some of those men may have called twice; I am not in a position to say that it was 98 different men, but 98 different applications were made.

1016. Do you often have information from women as to men being out of hospital and diseased?—I do; when women have been discharged but a very short time, and they are certified to be diseased again, I always make it a practice to ask them with whom they have been to give them the disease again so quickly; and some of them tell me, and others do not; but I very often get information in that way.

1017. I gather from what you have told the Committee that you think that though the Act is not entirely inoperative, at all events it will not have all the beneficial results which are desired, unless there are some means of periodically examining men as well as women?—That is my opinion; I believe that it can never have that good effect which it is intended to have without that.

1018. You have stated, have you not, that you have had frequent occasions to report men as going about evading treatment, who are diseased?—I do not exactly report them, but whenever I get information of any person being diseased in that way, my object is to get all the information from the soldier which I possibly can. Consequently I endeavour to keep on as good terms as I can with them, and whenever I get any information in that way, I always give my report to the Inspector General of Hospitals, and then he sends it out to the medical officer of the regiment, with instructions what to do; so that whatever I have to do with it is through the Inspector General of Hospitals. I do not go to the regiment, and report it direct to the commanding officer; that is understood between the Adjutant General and the Inspector General and myself.

1019. With regard to pregnant women, how do you deal with them when you have found out that they are diseased, and when, on account of their pregnancy, they cannot be taken into the Lock Hospital?—I have been appointed assistant relieving officer for the Farnham Union, and for the parishes included in that union, and I should give them an order to go to the Farnham Workhouse.

1020. Do you believe that the cost of those unions in the neighbourhood of Aldershot has been reduced, on account of the operation of this Act?—I think very considerably; for when I first went there, I made inquiries as to that, and I was then informed that 30 was the average number under treatment in the Farnham Union from the neighbourhood of Aldershot for the venereal disease alone. Now they do not have any such cases in their workhouse, unless it may be a few pregnant women.

1021. So far as your experience goes, do you believe that there would be any objection on the part of the workhouses to take in those women, supposing that they themselves were willing to go there?—I do not know of any objection on their part.

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1022. You

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1022. You have no power to compel a pregnant woman, though you know her to be diseased, to go to the workhouse, have you?—None at all. If a woman is destitute, and wishes to go, she goes; but if she does not choose to go to the workhouse, I could not compel her to do so.

1023. But, by the present law, you cannot send any but a destitute woman to a workhouse, can you?—No.

1024. Therefore, by the law, if a pregnant woman comes up for examination, and she is not destitute, you cannot send her to the workhouse?—No; I have no power whatever then.

1025. And therefore she goes at large and spreads the disease as she chooses?—Yes; she could do as she chooses then.

1026. Dr. Brewer.] Have you reason to believe that in those cases of clandestine prostitution both men and officers are diseased by those women?—I have no doubt that in many instances where men refuse to give me any information, which they very probably could do, they have contracted the disease from some clandestine cause.

1027. Do the same women give the disease to both officers and men?—I think so.

1028. With regard to servants in respectable places, have you observed that many of them are supposed to be indulging in clandestine prostitution?—I do not think that there are many; it much depends upon the class of people where they are living, and with whom they are living, and what temptations there are in their way. For instance, servants living in public-houses, and with some tradesmen who are not very particular in their housekeeping, and all that kind of thing, misconduct themselves when opportunity offers.

1029. Have you ever been able to get any of them to go for examination in hospital?—Yes, I had one woman in particular who lived with an officer in the camp, and the officer found it out, and he came to me about it. He was living in the neighbourhood of the hospital, and I did not know, neither did he know with how many men she had had connection, but it was reported to him by another servant, a male servant. This servant, who was occupying the kitchen, heard a noise in the next compartment during several nights. He did not know what it was, and he told his master that he believed there was something going on that ought not to be; and his master told the master of the person who was sleeping in this room, and he kept a watch there to see what was going on. It seems that the men were actually coming out of the venereal wards and going with this very servant, and she was in a very bad state of disease in consequence.

1030. And that woman you were enabled to get to be inspected at the hospital?—The officer came down to me, and I went up to his quarters where she was, and he told me the whole of the circumstances in her presence. I said "Very well, if such is the case the best thing you can do is to attend at the Lock Hospital for medical examination;" she denied that such was the case, and I left the house and she left the house; and I think two or three hours afterwards, or something like that, she came to the hospital, the medical officer examined her, and she was certified to be diseased.

1031. Was this rather an exceptional case?—It is an exceptional case.

1032. Were those men discharged from the

venereal wards?—No, they were patients from venereal wards.

1033. How did they get out from the venereal wards, then?—There is no boundary in the camp, and men could come out of one ward and go into another, or from the ward into the officers' kitchens.

1034. Then is there no restraint whatever?—None whatever.

1035. Is it your observation that soldiers under treatment get out and communicate with women of the town?—No, not of the town; I was asked about servants conducting themselves in this way, and mentioned this circumstance as one of a person living in service prostituting herself, and becoming diseased.

1036. You have stated, have you not, that you are of opinion that there is a great deal of clandestine prostitution?—Yes.

1037. And among the prostitutes you mentioned servants as well as labourers' daughters as constituting that number?—Yes.

1038. Do you find generally a great difficulty in getting those servants to be examined by the hospital surgeons?—I find difficulty in this way: I do not like to class them as prostitutes unless I have some proof. I know from the fact of seeing them at different places during the night, and in company with different men; that is when they are perhaps in their masters' houses, and so on, in the evening; that makes the difficulty.

1039. Does that spread the disease, to your knowledge?—It does.

1040. If a servant should be sent to be examined in this way, would it be known to the master and to the mistress?—I should not think of warning the person unless I said something to the master or mistress about it, because I should not warn the person without I was fully satisfied, and the same would apply to girls living at home with their friends; I should not think of warning them unless I mentioned to their parents, or very likely I should caution the parents, and so on, beforehand.

1041. Does the fear of their losing their situations prevent their going to be examined?—Girls in the habit of living in a place very long do not conduct themselves, I think, as prostitutes; it is only just a few who are in a situation for a few weeks and out again. I have known girls who have been prostitutes and have been admitted to hospital, and who, when they have been out a week or two, have obtained places, and they have remained in the places for a few weeks, and I believe (though I have no proof to that effect) that they are conducting themselves, as opportunity offers, as prostitutes. I do not mean to infer that respectable servants, living in gentlemen's houses would be looked upon as prostitutes. Non-commissioned officers, who have families, sometimes have young girls to mind their children, or to assist their wives, or anything of that sort, if the wives are ill. They are engaged for a few weeks only, and they often misconduct themselves; those are the kind of servants I mean.

1042. You say there are five prostitutes with their parents at the present time; are those prostitutes known to their parents to be prostitutes?—Yes.

1043. And are they, with the consent of their parents, prostitutes?—I do not think they are exactly with their consent, although it is with their knowledge.

1044. Chairman.]

1044. *Chairman.*] Are there not, within the district at Aldershot, parents who lend their children for the purposes of prostitution?—There have been two or three, but there are none, at the present time. There were a few, but they have left the neighbourhood.

1045. *Dr. Brewer.*] What is the extent of the operation of your duties in this respect from the centre of the camp?—It includes 22 parishes.

1046. How many square miles does it include?—I should think it includes about 250 square miles.

1047. Have you any means whatever of warning male and female tramps off within this radius of five miles?—The female tramps I warn to attend the Lock Hospital the very first time that I see them. I make inquiries about them, and they generally satisfy me that they are prostitutes, and then I warn them at the hospital at once, before they have an opportunity of doing harm.

1048. *Sir James Elphinstone.*] I suppose all the tramps are prostitutes?—I do not know that all of them are, but a good many of them are.

1049. *Dr. Brewer.*] Can you warn off the men?—If I find them on the Crown land I can warn them off, but not otherwise.

1050. Though you know that they are with women for the sake of prostitution, you cannot do anything with them?—I cannot.

1051. *Sir James Elphinstone.*] With regard to those men getting out of the venereal ward; are not soldiers confined to the hospital when they are diseased?—They are certainly confined to this extent: that they are detailed to a certain ward, and they remain in this ward; but they have to go out of the ward for all necessary purposes, and things of that sort. There are no conveniences whatever in the ward, so that it is not an unusual thing to see men out of the wards during the day or night. There is only a roadway of perhaps 30 or 35 feet across, and they have to cross the roadway to get over; so that there is nothing whatever to prevent them.

1052. *Mr. Mitford.*] You stated that the women were now generally much better clothed, better fed, and much better to do, apparently; how do you account for that?—I account for it in this way: they are brought out the days of examining, and I and others go round to the places where they reside, and they are in the habit of seeing strangers coming into their haunts; and some of those women who have any cleanliness or pride belonging to them, clean the place, or tidy the place up, and they do not lie about the public-houses and get drunk so much, because they have to go up for examination. As a rule, I must say, that now they come up very sober and well behaved. It is a very rare thing to see a woman present herself in a drunken state. I think that that is the cause why they keep themselves clean and tidier than they would otherwise.

1053. Is the number of prostitutes larger or smaller than it was two years ago?—In April 1867 (which was the month when the Act was put into operation) there were 266 prostitutes in Aldershot; then in June 1868, there were 248, and in June 1869, 243.

1054. *Chairman.*] The number of troops, I think, has been about the same?—The average for the year was 12,090, from the 1st June 1868 to the 31st May 1869. I have not a return of the number of troops for the previous year.

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The number of days lost to the service was 54,222 for the year ending the 31st of May 1869. That would be equal to 148,553 men's service; I have made a calculation of their costing, perhaps, 100 *l.* a year, taking in the expense of medical officers, and hospital sergeants and orderlies, and medicines, and all that kind of thing, and I find that it would be about 14,855 *l.* 6 *s.* 10 *d.*

1055. *Mr. Mitford.*] That would be saved if we could contrive to stamp out the disease, would it not?—If it could be stamped out, the whole of that would be saved.

1056. You stated, did you not, in answer to a question which an honourable Member asked you, that when pregnant women were not taken into the Lock Hospital, you gave them an order to the union workhouse?—Yes; provided that they were destitute, and chose to go.

1057. But supposing they are not destitute, what happens?—Then I have no control whatever over them.

1058. Supposing they are destitute, do they generally make use of this order, or do they decline?—They make use of it as a rule. Of course, if they decline, I have no power whatever.

1059. *Mr. Mills.*] And the workhouse authorities have no power, have they?—No.

1060. *Mr. Mitford.*] With reference to clause 36, which is the clause with regard to harbouring prostitutes, do you think that could be improved in any way?—Yes; I think it could be very materially improved.

1061. Will you state in what way you think it might be improved?—I have never taken action under this section, and, therefore, I do not know exactly what effect it would have, but I presume that there would be very great difficulty in proving before a bench of magistrates that the keeper of the house knew those people were suffering from contagious disease. I cannot see how that could be well proved.

1062. Do you mean that owing to those words, "having reasonable cause to believe," a difficulty would be created?—Yes; because the party would be sure to deny that he had cause to believe, and I think there would be a very great difficulty in proving it.

1063. What would be your suggestion by way of improving it?—My suggestion would be that they should prove to the contrary, that they were not diseased, that they should submit themselves in the usual way, and that the keeper of the house should be liable, whether the women were diseased or not, for harbouring them, knowing them to be prostitutes.

1064. When you look at how that would work, does not a woman, a stranger to the brothel-keeper, often come to the house with a man?—Yes.

1065. How would the owner of the house be able to know or to find out that she was diseased?—I do not think that he would have any knowledge of that; but I think that if he lodged parties in his house, and kept them there, and encouraged them to remain there without complying with the Act, that should stand instead of this.

1066. Only in cases where they are lodging, and not where the women may casually come in?—No, I do not think so.

1067. *Chairman.*] That would only affect one case at Aldershot, because, according to your

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Return, there is only one woman lodging at a public-house?—No, but many of those women evade that. I do not mean to say that they do not frequent public-houses; they are there for the purpose of prostitution very often.

1068. Sir James Elphinstone.] Then are there rooms or tenements about those public-houses to which they go?—Those publicans who encourage them to come in generally hire a few cottages convenient to the house; and although it is not actually lodging in the house, still it is under the control of the landlord of the house.

1069. Mr. Mitford.] Have there been any convictions under that section?—No, I have never had occasion to put it in force. I have believed in my own mind, and known, that such has been the case, but I have never been able to prove it, and I have been always impressed with the idea that if you cannot prove a thing it is better not to meddle with it, because then you will not show your weakness.

1070. Sir James Elphinstone.] Would the deprivation of license in the case of beershops and public-houses tend to keep those people in order?—It is very likely the magistrates would not grant the license, but it is not within my province to do that.

1071. But would not the penal consequences of losing a license operate with those beershop and public-house keepers in making them give you assistance in carrying out the law?—I think it would; but perhaps they would take it more in this way; that I was trying to usurp authority over them, which I am always very careful for them not to think I am doing in an undue manner.

1072. But the deprivation of license is not one of the penal consequences of this Act, and I wish to know your opinion whether it would not be a beneficial thing to insert it in a new Act?—I think so.

1073. Mr. Tipping.] It is mainly beerhouse keepers, and not public-house keepers, who manage this trade?—The women frequent both classes of houses. I think that most of the women are fond of a drop of gin, or something in that way, and they cannot get it at the beer-houses.

1074. But are the persons who have those cottages of which you speak publicans or licensed victuallers?—They are both alike, I think.

1075. Sir John Simeon.] In the number you gave just now there was only one residing in a public-house, but there were a good many residing in beer-houses, were there not?—Yes.

1076. Were they actually resident in the houses?—Yes.

1077. Were they generally servants?—Not always servants, but they sometimes tell the local police that they are servants, and they try to make them believe it; when they make inquiries and tell them that they ought not to do so, they say "Well, I have so many servants," or something in that way; I do not know whether they convince them that such is the case, but sometimes they say that they are servants.

1078. Are they lodgers in the house?—The numbers that I have given lodge in the house.

1079. Do you suppose that they actually pay for their lodgings, or that they are kept as an attraction for the men?—In some places they are kept as an attraction, and at one time (I do not know of any case now) I knew a landlord who paid the lodgings of two or three girls at some

distance from his house at a private place, and those girls had to frequent his house during a certain time, say from four or five o'clock in the afternoon, till gun fire at night. There are many such places now, but the girls pay rent for the rooms—from 3 s. 6 d. to 5 s. or 6 s. a week; and there are perhaps 20 or 30 such women who have to frequent this particular house at night. They are not allowed to go out of the house without leave until gun fire, and then they can go where they like.

1080. Does the lesser number who reside in public-houses in this way, as compared with the greater number who reside in beershops, imply any greater amount of morality on the part of the publicans than on the part of the beerhouse keepers?—I think not.

1081. How do you account for the discrepancy?—He may not have the accommodation, or he may have a family, and he does not like them to be about with his family, or there may be various reasons.

1082. Is it that the public-house is supposed to maintain a superior degree of respectability to the beershop, and that the publican would therefore not be so ready to allow these women to be perpetually on the premises?—That is one reason. I believe their consciences are very much alike; but I believe the reason why they do not lodge them in public-houses is, that they are afraid of the license. The beershop keeper does not stand in the same fear as the licensed victualler does.

1083. Mr. Tipping.] In the one case, the license is granted by the Excise, and in the other by the magistrate?—Yes.

1084. Marquis of Hamilton.] Have you any idea of the number of diseased pregnant women that came under your notice last year?—I could not give it correctly now, but I should think it might be 12, or from that to 15, very likely.

1085. How many of those were destitute, or were any destitute?—I should think seven or eight of them availed themselves of going to the workhouse.

1086. And over the others you have no control?—None whatever.

1087. Sir John Simeon.] With regard to the power under the existing law of dealing criminally with men who live by the prostitution of women, is there any such power?—There is no such power whatever, under this Act, and I do not know of any law except the common law of the country, which could deal with them in any way.

1088. Do you think that it would have a good effect with regard to the particular objects which we have under our consideration, if power were given to deal summarily with men, who, for instance, take gangs of women about with them for the purpose of prostitution, and live upon their wages?—I am positive that it would tend very materially to the benefit of the working of the Act.

1089. Have you been in a position to know anything with regard to the state of the health of the agricultural population in the neighbourhood of Aldershot?—Yes, I have made inquiries into that.

1090. Have you reason to believe, that it has been in a very considerable degree injured by the prostitution in the camp?—Not exactly in the camp; but in the neighbourhood of Aldershot, there are large hop-gardens, and things of that

that sort, and when the time of the year comes, the tramps and all classes of people always come round that neighbourhood for the purpose of hop-picking, and then the men who are living in farm-service, and labourers, and people of that class, are, of course, employed with them; and during that season, I have been told that very many of them have been diseased in consequence of these women coming from different parts of the country.

1091. Do you believe that the married women of the labouring class in the neighbourhood of Aldershot resort to the camp for the purpose of prostitution?—Of course a few of them do so, no doubt; but, as a general rule, I do not think that many of them do so.

1092. With regard to the examination of soldiers, I used to be under the impression that there was a regular inspection of soldiers for these special disorders; but that is not the case, is it?—It is not; in some regiments I believe it is very different to what it is in others. I have the local police charge of the Windsor district, as well as of the Aldershot district; and among the Foot Guards, and the Guards stationed there, the medical officers have been very careful in examining the men (of the Foot Guards, on the 3rd September 1868, one battalion of 691 men, there were 45 of them in hospital suffering from venereal disease; and on 21st January 1869, the same battalion, of 639 men, there were only 7 men in hospital suffering from the same diseases), and the result is that there are very few men in hospital, and very few women. I think at the present time there are about four men in the two regiments of Guards at Windsor in hospital, and there are only five women.

1093. Do you not think that with a view to lessening the prevalence of contagious disease in the army, it would be highly expedient that there should be a universal rule as to the periodical examination of the men?—I do; but I do not think it would be of much avail without some person in authority in the regiment being made responsible that it should be done.

1094. With regard to clandestine prostitution, should you think it your duty if you saw a girl running into danger, before you believed that she was actually in a condition to be examined compulsorily, to give her a warning that if she went on in that sort of way she would bring herself under the operation of the Act?—Even before I saw that the woman had been in bad company (in a place like Aldershot I should know a stranger directly she came into the town), if I saw her about the streets or places, or thought she had no home, or that she was looking for lodgings, or if she entered a public-house, or anything of that sort, I should make it my business to speak to her, and to ask her who and what she was, and where she came from, and what her business was, and all that kind of thing. Of course, if she felt disposed to tell me, well and good; if not, I should let her go about her business. If she did tell me, I should tell her where to go, and what to do, and warn her not to act as a prostitute. But there is no means of sending those people away; I found four the other day, and through my interest with some ladies (Mrs. Daniels, of the Soldiers' Mission Hall), I got them sent away to homes, and their parents were very thankful for them to be taken such care of. These ladies advanced me the money, and I got them lodgings for the night.

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When the soldiers march through a place, young girls of 15 and 16 have great notions of following them, and when troops march in, I generally make it a practice to be there, or to have some constable there to see who comes in with them, and I always instruct them if they find any women of that class, to advise them what to do and how to proceed.

1095. Do you think that there is any difficulty, under the present Act, in women releasing themselves from the periodical examinations in the event of their wishing to reform or change their life, or to get married?—There is no difficulty, but it would be a tedious proceeding under the present Act, supposing that the thing was persisted in. If I know a woman to have been a prostitute, and to have been admitted to the hospital, and discharged from the hospital, if she conducts herself in a proper manner, or gets married, I never trouble myself about the woman any more; I always allow her to go and do the best she can. If she gets into service, or gets married, or conducts herself properly, I never trouble any more about her. I always keep an eye on the woman, to see how she was going on, but I never communicate with her employers, or anything of that sort.

1096. But you are rather assuming a responsibility, are you not, in not insisting upon the examination being continued?—I am, but I have never received any positive instructions about this. I am speaking now entirely upon my own responsibility. If a woman is discharged from the hospital, and her mother or some person takes her home, and that woman goes home and conducts herself properly, I never go to warn that woman to come for examination again, unless she again conducts herself as a prostitute. In the same way, when a woman gets married, perhaps to a soldier, and she goes into camp (I must say that they are not allowed to go into camp unless they are married with permission), they get lodgings; so long as the woman conducts herself properly I never run after her and bring her up for examination to expose her.

1097. Under the Act she can only be relieved from examination by the order of a magistrate, can she?—Supposing that an order was made by a magistrate, that would be so; but if the woman submitted under section 17, then of course after she had received the certificate of the visiting surgeon she would be relieved. The same thing would apply to an order given by a magistrate, supposing that the woman was admitted to the hospital. If the woman had not been admitted to the hospital, the periodical examination would remain in full force for the 12 months, if it was by a magistrate's order, but even in that instance, if a magistrate made an order and the woman in the meantime got married, or ceased prostitution, I should not warn her to come up, and I have not done so.

1098. *Chairman.*] Do you find that those women make an improper use of their certificates?—I believe in many instances that has been done; I believe that women have lent their certificates one to another after having been discharged from the hospital.

1099. *Sir John Pakington.*] As an inducement to men?—Yes.

1100. *Sir John Simeon.*] You do not think, then, that there is any necessity for improvement in the Act, in the shape of giving to the visiting surgeon the power of releasing the women from

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further inspection?—No, I do not think that there is any clause required; I do not think that it would be any person's wish to force that kind of women up and to make them prostitutes as it were, if they were not so. My object has always been to get as few as I possibly could.

1101. But do you think that, practically speaking, the Act of Parliament requires no alteration in the interest of women who desire to be reformed, and to leave a life of prostitution?—I think not; there is one thing, of course, which should be altered, though it is not interfering with my duty in any way, but still I see the necessity of it. Of the women who are admitted to the hospital, some are old prostitutes, and some are very young, and I think that it would be a great improvement if something could be done to prevent those who are hardened in sin from associating with the others, and to classify them in some way. I do not exactly know how, but I think that it would be a great benefit to the women themselves to class the inexperienced girls by themselves.

1102. *Chairman.*] Would you recommend Guildford being included in the Aldershot district?—It would be a great relief, there is no doubt, to Aldershot, for Guildford being so near there are many men who get passes to go to Guildford.

1103. What is the distance from Aldershot to Guildford?—I think it is about 9½ or 10 miles. Guildford is out of the military bounds, as it is termed, and if a man wishes to go to Guildford he has to apply for a pass to go there.

1104. And they do practically go there very frequently, do they not?—Yes, it depends upon a man's character, and so on. If he is deserving of a pass, I believe there is no restriction whatever on his going there.

1105. *Mr. Mitford.*] Do the same remarks apply to Godalming?—It is about the same distance; but I do not think that there is that attraction for men to go to Godalming which there is to go to Guildford.

1106. *Captain Grosvenor.*] Did I rightly understand you to say, of your own knowledge, that the two regiments of Guards stationed at Windsor are examined with a view to discover whether or not they are suffering from venereal disease?—Yes, the Foot Guards.

1107. Can you tell me how long that examination has been carried on?—I cannot say how long; but it has been ever since I have been going to and from there; that is 13 months. They are regularly examined.

1108. *Mr. James Lowther.*] With regard to the chemists; do those chemists prescribe for patients as well as make up drugs?—In some instances they do.

1109. They act as quacks, or doctors in a quack form?—Yes.

1110. Are there any advertising medical practitioners or quack doctors in the neighbourhood of Aldershot?—None.

1111. Previously to the passing of the Act, I suppose that the chemists must have done a considerable business in the way of medical advice?—Yes, they have told me that they have done a very considerable business.

1112. And the Act, I suppose, has diminished their profits?—It has had that effect.

1113. With regard to the transferring of certificates, I think that you said that the women every now and then handed their certificates to other women, and that they were used by other persons than those for whom they were written?—Yes.

1114. Is there any penalty attaching to the transferring of a certificate or using a false one?—I do not know of any; there is no provision in the Act for it.

1115. Would you recommend that some proviso should be introduced into the Act with regard to one woman making use of the certificate written for another?—I would not recommend that exactly. I presume, according to the Act, that the certificate is given to the woman for her protection, to prevent her being apprehended by the police, so as to show that the woman has been lately discharged from the hospital. What I would recommend is, that instead of the women being allowed to detain their discharge papers, they should be delivered to the police, and if a woman was about to leave the neighbourhood or the district, she could then apply to the police authorities, and get a discharge to take with her wherever she was going.

1116. You stated that you had no power to take any steps in regard to a pregnant woman; why is that?—You will find that the Act makes provision for the Inspector of Certified Hospitals to make regulations with the Secretary of State for War and the Lords Commissioners of the Admiralty for the proper conducting of lock hospitals, and so on; and one thing I believe laid down is, that pregnant women, or women infected with any other disease, are not to be detained in the hospital.

1117. It is under an order of the War Office and not under the Acts?—Yes; this regulation, made by the Inspector of Certified Hospitals, and by the War Office, or by the Admiralty, would be law according to this Act.

1118. Do you consider that order a mischievous one?—No, I think it is a very good one, because, although something might be done with those pregnant women, it would not do to have pregnant women and children in the wards with all the noisy women who would be there. If a place was set apart for them it would be a different thing.

1119. Then would you recommend that a distinct place should be set apart, and that arrangements should be made for the separate treatment of those cases of pregnant women?—I cannot say that I would exactly; it would be a very great expense for the hospital to keep them. For instance, women from different parts of the country might come there purposely to be confined. It would not be restricted exactly to the district, because this Act says "any person."

1120. Then what remedy would you suggest; because I think that you admitted that it was a great evil?—So it is; but I think that if they were controlled, if they could be taken to a workhouse, or taken somewhere (I cannot tell exactly where), it would be, as it were, depriving them of their liberty, even to take them there.

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Mr. T. GRAHAM BALFOUR, M.D., F.R.S., called in; and Examined.

1121. *Chairman.*] You are Deputy Inspector of Military Hospitals, are you not?—Yes.

1122. In that capacity, have you had great opportunities of judging of the working of the Contagious Diseases Act of 1866?—Yes; particularly as head of the statistical branch of the Medical Board, I have had opportunities of seeing the returns made from different stations, and I have been called upon at different periods to prepare statements, showing what the operation of the Act has been.

1123. Can you give the Committee a return which will show the effect of the Act with regard to those diseases, in reducing or increasing them?—I have two returns here, which I prepared for the Secretary of State for War, which, with the permission of the Committee, I will put in, and I will read a few observations which I founded upon them, as to what the operation of the Act has been. “In endeavouring to form from the numerical returns a correct estimate of the influence of the Contagious Diseases Act, there are several points which require to be carefully examined, to prevent erroneous conclusions being drawn from the mere numbers. 1. There may have been a general reduction in the amount of these diseases throughout the country, or affecting at least a number of stations. 2. There may have been a steady reduction going on at a station to which the Act has been applied, previously to its coming into operation, and the continued progress of that reduction may have been due to causes pre-existent to the Act. 3. There may have been a general increase in the prevalence of these diseases, when the beneficial influence of the Act might be confined to their non-extension, instead of being shown in their decrease. With a view to obtain information on these points, Table I.—(the same was delivered in, vide Appendix)—has been prepared, showing the admissions into hospital for venereal diseases of all kinds, per 1,000 of mean strength, at each of the principal stations occupied by troops in the United Kingdom during the nine years 1860-68. In the tables, the stations to which the Contagious Diseases Act has been applied are placed first; and those years are underlined in which the Act was in operation. 1. An examination of Table I. shows a lower proportion of admissions into hospital for venereal diseases in 1868 than in 1860, at all the stations except the Isle of Wight, Colchester, Canterbury, London, Manchester, and Preston. At the last four of these, the proportion of cases in 1860 was below the average, and the amount in 1868 was not materially in excess, and at some of them was less than in 1861-62-63. The Isle of Wight and Colchester, however, show a marked increase.”

1124. *Mr. Lowther.*] Were they under the Act in 1868?—Colchester was not under the Act in 1868. “II. (a). At the stations to which the Act has been applied there was a progressive reduction in the amount of admissions from 1860 till 1863 at Shorncliffe, till 1864 at Devonport, till 1865 at Portsmouth and (with the exception of a slight increase in 1863) at Chatham, till 1866 (except in 1864) at Aldershot, and till 1866 at Woolwich. At Devonport an increase took place in 1865, followed by a progressive decrease; at Portsmouth the increase extended over 1866 and 1867; at Chatham the increase was confined to 0.87.

1866; at Shorncliffe there was a slight excess in 1863 and 1864, followed by a decrease in the three following years; at Woolwich there was an increase in 1866 and 1867; and at Aldershot in 1867. It may be stated generally, that prior to the introduction of the Act there had been at all these stations a progressive decrease in the amount of this class of diseases. (b.) At the stations to which the Act has not been applied, with two or three exceptions, a similar progressive reduction has been going on, but with less regularity, a result perhaps of the smaller numbers under observation giving rise to greater fluctuations. The marked exceptions were Canterbury and Colchester, at which a great increase took place in 1866, 1867, and 1868, and the Isle of Wight and Dover in 1867 and 1868. The troops in London and Windsor and at Warley have not varied greatly if 1860 be omitted. A few of the stations show a marked increase or reduction for one year, returning in the next to nearly the previous amount; thus Warley in 1863, and Manchester in 1867, show a great increase, and Dover in 1865, and Pembroke Dock, Preston, and Limerick in 1866 a great decrease. III. On examining the results for 1867 and 1868, during which the Act was in operation at four of the stations for the whole period, and at two others for a portion of it, it appears that there was a progressive decrease in the admissions at Devonport and Chatham, an increase in 1867, with a decrease in 1868 at Portsmouth, Woolwich, and Aldershot, and a slight decrease in 1867, with a considerable increase in 1868 at Shorncliffe. At the other stations there was a decrease only in the Household Cavalry, and an increase in 1867, followed by a decrease in 1868 at Edinburgh and Manchester; there was scarcely any change at Warley and Dublin; there was no appreciable change in 1867, with an increase in 1868, at Winchester and Canterbury. There was an increase in 1867 followed by a decrease in 1868, but the ratio still remaining higher than in 1866 at Fermoy and the Curragh; and there was an increase in both years at the other nine stations included in the return. It would thus appear that there has been a marked comparative advantage enjoyed in 1867 and 1868 by the stations at which the Act was in force, except Shorncliffe.

“The preceding remarks apply only to venereal diseases generally, as shown in Table I. But, under the general term of venereal diseases, are included forms of disease which may have been contracted at various periods anterior to their coming under medical treatment, and the frequency of which is not likely to be directly influenced by the operation of the Act, such as secondary syphilis, many cases of bubo, &c. To get rid of this source of error, Table II.—(the same was delivered in, vide Appendix)—has been prepared, showing the ratio of admissions per 1,000 of mean strength from primary venereal sores and gonorrhœa, the two diseases most likely to be affected by the operation of the Act; they have been stated separately, as it is of great importance to ascertain whether any reduction effected in their prevalence extends alike to both, one of them being a disease liable to be followed by serious constitutional effects, while the other is usually only a matter of temporary inefficiency and inconvenience.

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"An examination of Table II., chiefly with reference to the last two years, the period during which the Act has been in operation, gives the following results:—1. As regards venereal sores:—At the stations to which the Act has been applied, there has been a decrease in the amount at all, except Shorncliffe, which shows an increase. At Portsmouth there was an increase in 1867, but followed by a decrease in 1868; and the ratio in the latter year was lower than in any of the four preceding years. At Shorncliffe the Act was in operation during half of the last year only, but the ratio of admissions was higher than in any of the three years immediately preceding. At the 18 stations included in the table to which the Act has not been applied, there was an increase in the last two years at the Isle of Wight, Winchester, Preston, and Dublin; and the ratio in 1868 was higher than in any of the preceding years, except 1864 at Winchester and Preston; and 1864 and 1865 at Dublin. There was an increase in 1867, followed by a decrease in 1868 at nine of these stations; but the decrease brought the ratio lower than in 1866, at only three of them, Canterbury, Edinburgh, and Belfast. There was a decrease in 1867, followed by an increase in 1868, at five stations; but at two of these the ratio in 1868 remained lower than in 1866.

"As regards gonorrhœa, at the stations at which the Act was in operation, there was an increase at three, Portsmouth, Shorncliffe, and Aldershot; an increase in 1867, with a decrease in 1868, at Devonport and Woolwich; and a decrease in 1867, with an increase in 1868, at Chatham. Comparing 1868 with 1866, there was an increase of gonorrhœa at four, and a decrease at two stations. At the stations at which the Act was not in operation, there was an increase in 1868, compared with 1866, at 13, a decrease at three; and at two the ratio was the same in both years. It appears, therefore, that there has been an increase at two-thirds of the stations in the first group, and at rather more than two-thirds in the second. But an examination of the table shows that the actual amount of increase has been much less at the first than at the second group of stations. In cases of gonorrhœa, therefore, the operation of the Act would seem to have been in counteracting an increase rather than in effecting a decrease of the disease."

1125. *Chairman.*] Can you account in any way for the increase of gonorrhœa?—I am quite unable to account for the increase of it.

1126. Your memorandum winds up by saying that the effect of the Act has been to increase gonorrhœa, does it not?—The effect of the Act has been to prevent an increase at the stations where it was in operation rather than to effect a decrease.

1127. Then, on the whole, do you think that marked advantage has been derived at the stations where the Act has been in operation?—I think that there has been a marked advantage, but I do not think that it has been so great as was anticipated.

1128. Do you think that it has not been so great, because the Act, for certain reasons, has not been so effective as it might have been?—No, I am unable to assign any reason for it; I think, perhaps, that the Act has not been sufficiently long in operation to be worked very effectively; and that a longer time would produce more marked

benefit, from the Act being better known, and being better worked.

1129. Do you not think that if there was some alteration made whereby both sexes came under the control of the Act, and if there were examinations of males as well as of females, that would have the effect of stamping out the disease in those districts?—If you could extend it to the whole population, undoubtedly it might have that effect.

1130. But putting aside the civil population, and confining ourselves entirely to the military element, you have heard the last witness, Inspector Smith, say that he has reason to believe that there are a large number of diseased men at large in the camp at Aldershot; do you believe that to be the case?—I am disposed very strongly to doubt the statement, and the grounds upon which I doubt the statement are these: In a report which Dr. Barr made to the Secretary of State for War, that statement was put prominently forward; that report was sent to the Director General of the Army Medical Department, for his opinion upon it, and he sent instructions to Mr. Lawson, the Inspector General of Hospitals at Aldershot, to make particular inquiry upon that point; I have before me the reply which Mr. Lawson made to the Director General, and if the Committee will allow me, I will read it. "I have to acknowledge your letter of 26th ultimo, enclosing an extract from the report of Mr. Barr, medical officer in charge of the Lock Hospital here, with a request I would carefully investigate the circumstances therein set forth. These seem to arrange themselves under the following heads, viz.: 1. That the police believe there are a number of diseased soldiers belonging to several regiments, always loose, through whom a continual supply of the disease is kept up. 2. That several women have been so frequently detained in hospital as to excite inquiry, when it appeared they had a fancy man in the person of one of the men alluded to, who is constantly diseased; some of these men are so well marked that it is alleged no prostitute will associate with them.

"In reply to your inquiries, I have to report that, toward the end of December last, having, in conversation with Mr. Barr, learned that the police were under the impression that many soldiers affected with venereal were active in propagating that disease, I urged him to get the inspector to communicate the names and regiments to me or the medical officers in charge of the corps, with the object of having them examined and properly dealt with. This request I subsequently made to the inspector of police himself. Up to the present, the inspector of police has reported to me or the medical officers of the different corps in camp the following only: 10th Hussars; four reported 8th and 9th January; three on examination found free from disease; one had three small superficial sores, Dr. Fraser says, evidently of recent origin, and according to the man's statement, of four days' standing only. Royal Horse Artillery; one man, named Manning, reported 7th January; no such person in corps, but another named Mangan presented himself about same date with a wart on genitals which could not communicate venereal. Royal Artillery; one man reported himself to the medical officer, and said he had discovered the disease four or five days previously. The inspector of police mentioned his case to me after his admission to hospital in connexion with the

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the source from which he derived the disease, the wife of a sergeant of another corps, who on examination was found affected. 2nd Battalion, 2d Regiment; one man reported 23rd January, examined, and found free from disease. 1st Battalion, 20th Regiment; one man reported 23rd January, found labouring under primary sores, which the man stated he had had for two days previously, and Surgeon Arden was under the impression they were quite recent. 1st Battalion, 25th Regiment; one reported 23rd January, found free from venereal, but labouring under itch. 34th Regiment: one reported 8th January, found free from disease. 98th Regiment; one reported, 11th January, found free from disease. There were then 10 cases in all reported by the police since the commencement of January to the 2nd of March, of which two only were affected with venereal sores capable of being communicated, and that only for a few days; and one (supposing Mangar, Royal Horse Artillery, and Manning the same man) with a wart, which is incapable of propagating the disease. There is no ground for supposing that the man of the Royal Horse Artillery was diseased for a longer period than he mentioned, or that he was not infected by the person he indicated. It thus appears that the impression of the police as to the frequency of soldiers labouring under primary syphilitic affections being at large, and their being the active means of disseminating that disease, must have been derived from very erroneous information. With a view, however, to maintain as efficient a check on the probability of such an occurrence, medical officers have been instructed to keep a close watch on the subject, and to have the regulations of the service with regard to it carried out strictly."

1131. But even by Dr. Lawson's report, it seems that two out of the ten who were reported by the police were found to have disease which they could communicate; and that is 20 per cent., is it not?—In the first place, the police only mentioned 10 names in two months out of about 9,000 men; and in the next place the two cases which were detected were so recent that the men could scarcely have reported themselves sooner to come into hospital.

1132. Have you heard Inspector Smith's evidence, that in one of the four chemists' shops in Aldershot there were 98 cases in one week treated for venereal disease by the chemist?—I can hardly admit that there were 98 cases. There were 98 prescriptions made up; but knowing what I do of the amount of money at soldiers' disposal, I do not believe that any one of the men could have got medicine for more than one day on each occasion, and I should be disposed to divide the 98 by the number of days over which the observation extended. I think that it is a matter for regret that the police did not report that circumstance to the authorities at Aldershot to have the matter investigated, because so often when you come to inquire into any case of that kind, you find over statements that I should like to have it authenticated before I attach much importance to it.

1133. There would be some difficulty in pressing this case further, because it is perfectly clear that the chemists would take alarm, and they would find that you are going to stop a very large practice; and therefore, although Inspector Smith has ingeniously managed to get this evidence from this chemist, he himself rather doubts his being able to prosecute it much further. But this is a

return which we can scarcely doubt. It is a chemist who, I suppose, bears a respectable character, and who gives absolute details that he made up 98 prescriptions during one week for soldiers suffering from venereal disease; do you not think that that is a very remarkable circumstance?—I should very much like to have had the statement inquired into, however.

1134. Mr. Barr stated in his evidence, that it is the practice to examine a regiment when it comes into camp; is that so?—That is so; that regulation was made at the particular request of the police.

1135. He also stated, that on the occasion of a regiment lately coming into camp, there were in consequence of this examination, 60 men sent into hospital; are you aware that that was the fact?—I must confess myself very much surprised at the statement, because I do not think that 60 cases from one regiment could have been admitted into hospital in one week in Aldershot without my knowing it, as the returns for all the regiments pass through my hands every week, and I have no recollection of anything like that number ever coming into hospital in any one week from any one regiment.

1136. At Question 611 of Mr. Barr's evidence, this question was put: "When a new regiment comes into camp the men are examined, are they not?—They are, and the result is very speedily seen; out of one regiment which, I think, came up from Devonport (but I am not sure) two or three months ago, on examination they were forced to detain about 60 men directly in hospital; and in the course of the first month after their being there, there was a large number. To show the really good effect of the Act at Aldershot, the number is reduced now to about nine in the whole of that particular regiment;" what remark do you make upon that statement?—I should like to know the number of the regiment in question, because I should like to examine the returns. I have a strong impression upon my mind that there must be some error; I think it hardly possible that such a thing could have occurred without attracting my notice, and I have no recollection whatever of anything like that number being furnished by any regiment in the service.

1137. It is now the practice to examine a regiment on its coming into camp; and it is also the practice to examine soldiers when they return from furlough, is it not?—Yes.

1138. But the old practice which used to prevail of periodical examinations among the men is given up, is it not?—Yes.

1139. Why was that given up?—It was given up on the recommendation of the Committee appointed to inquire into the Sanitary Condition of the Army, presided over by the late Lord Herbert, because it was, I may say, the general opinion of the medical officers of the army, that it was extremely inefficient in reducing the amount of venereal disease; it was unpopular with the men; and it was very much objected to by the medical officers. Upon those grounds, the Committee recommended that it should be discontinued, and it has been discontinued now for 10 years.

1140. Did not the Committee recommend the discontinuance of the examination, rather more on the ground that there was a strong opinion at the time that it was a sort of indecent proceeding, and that it was, as you say, unpopular with the men and the doctors, than because of its being useless?—I think that the opinion which was

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given to them of its inutility had strong weight with them.

1141. Do you coincide with the opinion as to its inutility?—Decidedly.

1142. If that is so, why do you examine a regiment now when it comes into the camp?—Simply because we were particularly requested by the police to do so, and we yielded the point at their request.

1143. Why do you examine men on their coming home from furlough?—Because when men go on furlough, we know they are in the first place open to great temptations, and we think it well to protect the garrison to which they belong from the introduction of venereal disease by them coming back from leave, where they have been without any hospital, and where they have most likely been “on the loose.”

1144. Therefore, so far as the examination itself is concerned, there is no doubt, is there, that it very much facilitated the detection of disease amongst the soldiers?—So far as the examination of an individual, under those circumstances, is concerned, I admit it; but I do not think that the way in which it could be carried out in a regiment, would greatly facilitate its detection among a large number of men. It is a very different thing carefully to examine one or two men who come in from furlough, and to examine 800 men.

1145. But unless Mr. Barr's statement is positively contradicted, here is the fact, that 60 diseased men in one regiment are found out by one examination; can you contradict that statement?—I have not the means at present of contradicting the statement, but I may perhaps be allowed to doubt its accuracy without at all imputing to Mr. Barr the statement of anything wilfully incorrect. But I think there must be some error about it, and I should like to inquire into the case before I gave my opinion upon it.

1146. Could you take steps to inquire into those two statements which have now been made to the Committee, one to the effect that a whole regiment, on being examined, had at once to send 60 men into hospital, and the other to the effect that one out of four chemists at Aldershot, in one week in last June, treated 98 cases of venereal disease?—I could very easily inquire into the circumstances of the first case, particularly if Dr. Barr would oblige me with the number of the regiment, and I could have an inquiry made through the Inspector General at Aldershot as to the other; but with what prospect of success I am scarcely prepared to say. The question of the number of cases prescribed for by the chemists is rather new to me, and I think it is one very well deserving of inquiry. I shall bring the matter under the notice of the Director General, and I have no doubt that instructions will be given to Mr. Lawson to make what inquiries he can into the subject.

1147. Do you think that periodical examinations would be very unpopular among the men?—I think that they would be very unpopular; and I should myself be very sorry to see them again introduced, because I think that they would tend to destroy the men's self-respect. The object of all our recent legislation for the army has been to raise the *morale* of the soldier. We have been endeavouring to “level up” (to use a current phrase), and I think that the reintroduction of those inspections would have the effect of destroying his self-respect, and in that way would be very injurious and directly antagonistic

to the legislation which you have been carrying out of late years. There is, moreover, this objection to it, that the inspection would not apply merely to the loose characters of a regiment, but that it would apply to the well-behaved men as well as to the ill-behaved men, and, I think, that in that respect it would be very injurious.

1148. There might be a great amount of discretion used, which would of course depend upon the medical officer of the regiment; for example, he would not perhaps examine a soldier who was notoriously a married man and of very decent and respectable conduct, but if there was a soldier who was supposed to be rather wild and loose in his habits, might he not then order him to be examined?—It would be extremely difficult to draw a distinction of the kind; I think that a very much better course is to throw upon the soldier the responsibility of reporting himself the moment he becomes diseased, and punishing him for disobedience of orders if he neglects to do so; I think that instead of punishing the whole regiment, the well-conducted as well as the ill-conducted, for the fault of two or three men, it would be very much better to punish those men when they commit an offence.

1149. Would that be the means which you suggest for checking the concealment?—Yes.

1150. But, so far as you are able to form an opinion, you do not believe that this concealment is carried to the extent that is supposed?—I do not think it is carried to any great extent.

1151. It has been suggested by Mr. Barr that it would be a very good thing to adopt a system of night lavatories, do you concur in that opinion?—I think that they would be very useful if you could get the men to use them, but there would be great difficulty in doing it. I should be disposed to go considerably further than Mr. Barr in that direction; I should recommend the introduction of some clause into the Act by which all brothels, beershops, or public-houses, where the women congregate for the purpose of prostitution, should be compelled to have a lavatory, so that the men might use it at the time; and I believe that the practical effect of ablutio would be very much greater if performed immediately after the act, than if it were performed some hours afterwards; and I think it probable that the men would be more disposed to use it at the moment than they would on coming into barracks two or three hours afterwards, when they had perhaps taken more beer than they could well carry; and their great anxiety in that case is to pass the serjeant of the guard without being detected as being in liquor.

1152. With regard to the extension of the Act, can you suggest to the Committee to what extent you would recommend, for the purposes of military protection, that this Act should now be enlarged, both as regards the area and as regards the towns to which it is applied?—The question of area, I think, is a question which might be entirely settled by the police, who have had the carrying out of the Act at the different stations at which it has been in force; but with regard to the towns to which it might with advantage be applied, I think that looking to their relative position with regard to those where the Act is now well in operation, you might, with great advantage, extend it to Newport, in the Isle of Wight, and to Winchester, in consequence of their connection with Portsmouth; to Dover and Canterbury, in consequence

consequence of their connection with Shorncliffe; to Gravesend, as being merely a detachment from Chatham; and I think you might also extend it to Warley, as there is a large number of men there, and there is a great amount of communication between Warley and Woolwich.

1153. It has been suggested that Southampton also should be added for the purposes of Portsmouth. What is your opinion as to that?—I do not think there is any great amount of communication between Southampton and Portsmouth.

1154. It is more from a naval point of view, is it not?—I am scarcely able to speak with regard to the navy, but so far as the army is concerned, I do not think that there is any occasion to extend the Act to Southampton.

1155. With regard to Lock Hospital accommodation for women in those places which you recommend to be brought under the Act, can you give the Committee any information?—No; but I think that at Winchester, for instance, it would be an easy way of extending it to put up hut hospitals. There would be great difficulties, I have no doubt, at Winchester, in getting a suitable house to convert into a Lock Hospital; because the population of Winchester has been increasing, and there has been a great deal of building going on of late years; but if a site of ground could be obtained easily in the neighbourhood, I think that huts, similar to those at Aldershot and other camps, would be the least expensive mode of carrying out the Act, instead of going to great expense in putting up a brick and mortar building.

1156. There has been recently fresh accommodation built at Aldershot, has there not?—I do not know what recent additions have been made; I think they have converted an existing building into an hospital, and, probably, they have made some addition to it.

1157. Do you know whether there would be sufficient accommodation at Aldershot for the Winchester cases?—I could not say whether there would or not.

1158. Lord Charles Bruce.] Have you any reason for thinking that the soldiers, at the commencement of the disease, are disinclined to report themselves at the hospital?—No; I have no reason to think so, speaking from my experience as a regimental officer in the Guards. I was assistant surgeon in the Guards for eight years, and I very rarely had occasion to report the men for concealing their disease.

1159. Do you not think that the fact of their being put under stoppages to the amount of 10*d.* a day whilst they are in hospital, would make them rather disinclined to go into hospital?—I think that would be quite counterbalanced by the certainty of a severe punishment if they were reported concealing the disease. As the regulations at present stand, a soldier reported by the medical officer of the regiment for concealing disease is confined to barracks for a month, and loses his next furlough, and I think that is a punishment which would deter them from concealing it.

1160. Is not a system of periodical examination of the men still continued in one of the battalions of the Guards?—It is continued in one regiment of the Guards.

1161. Which regiment?—The Coldstreams.

1162. Chairman.] Is it unpopular in that regiment?—I cannot speak from personal knowledge; but I am quite prepared to say that it is 0.87.

not successful in reducing the amount of secondary disease, which is the great thing that we have to endeavour to reduce. Taking the three years, 1865, 1866, and 1867, the proportion of admissions into hospital in the Grenadier Guards for venereal disease generally was 322 per 1,000; in the Coldstreams it was 312 per 1,000, and in the Scots Fusilier Guards it was 176 per 1,000; and the Scots Fusilier Guards have no inspection.

1163. In what quarters were they?—It extends over three years, so that they must have gone nearly the round of the quarters. The round of the quarters takes three and a-half years. But, testing the amount of success by the amount of secondary disease, I find that the amount of secondary disease in the Grenadier Guards was 19½ per 1,000; in the Coldstream Guards it was 33½ per 1,000; and in the Scots Fusilier Guards it was nearly 20½ per 1,000. Therefore, in the Coldstream Guards, in which the inspection has been carried on when it was given up in the other regiments of the Guards, they have had considerably more secondary disease than the other regiments.

1164. But might not that arise from the fact that a great many of those men in the other regiments being treated privately, and therefore that no knowledge had come to you of their being diseased?—But that would not affect the amount of secondary disease in the regiment.

1165. But you need not detect the secondary disease, need you?—I think you must.

1166. I will not venture to dispute that point with you. But of course every single case of the disease, where the examinations are periodical, comes under the eye of the medical officer, does it not?—Yes.

1167. But in the other regiments, where there is no periodical examination, is it not possible that a great many men may have been diseased, and may have recovered, without its ever having come to your knowledge?—They might have had primary disease; but I do not think it possible that they could have had secondary disease, because secondary disease shows itself in such forms as would be detected at the weekly ordinary health inspection.

1168. What is the weekly ordinary health inspection?—The men are inspected for such diseases as may be detected by a general inspection of them. They turn their shirt sleeves up, and their trowsers up to the knee, and they are inspected, and if they have any secondary eruption out upon them it would at once be detected.

1169. Does secondary eruption always show itself either upon the arms or legs?—Frequently; but it would be as likely to be detected at the health inspection of the regiments which have not venereal inspections, as it would be at the inspection of the Coldstream Guards which have; therefore I think that it is a fair test of what has been the amount of primary disease likely to produce secondary disease. I think that the amount of secondary disease which we find in each of those regiments may be taken as a fair test of what has been the amount of primary disease likely to be followed by constitutional symptoms. That is the only reason why I mention the amount of the secondary disease in each of those regiments.

1170. But does it follow that because a man has primary disease he should, as a matter of course, have secondary disease?—No, it does not necessarily

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necessarily follow; I believe that there are two distinct forms of sore: one which is almost invariably followed by secondary disease, and one which is very rarely followed by secondary disease.

1171. Therefore, whereas in the Coldstream Guards, where the periodical examinations go on, even those cases which would not necessarily result in secondary disease would be detected; in the other regiments only those cases would be detected which were so grave as to produce, as a matter of course, secondary disease; is not that so?—Yes, that is true to a certain extent; but under the existing regulations of punishing the men for concealment, I believe that you get the primary disease as completely under treatment in the regiments which do not inspect as in the regiment which does.

1172. But have you any reason to apprehend that the inspection is unpopular in the Coldstream Guards?—I have no evidence on the subject either on one side or the other.

1173. Who is the Surgeon Major of the Coldstreams?—Mr Wyatt.

1174. Mr. Tipping.] Have you found the frequent recurrence of venereal disease confined to a small minority in a regiment, or is it tolerably known, even as regards the majority?—There are a number of men who come perhaps twice or thrice a year into hospital, which would reduce the actual number of the men labouring under disease to a smaller number than is represented by the number of admissions into hospital. The number of admissions into hospital represent every case, but they do not represent the number of men who have been treated.

1175. Captain Grosvenor.] The last witness stated that the two regiments at Windsor are periodically examined; is that so, as far as you are aware?—I think that the last witness must have been misinformed, unless it were the Coldstream Guards; because I can speak most positively as to what was the case within a month, that neither the Grenadier Guards nor the Scots Fusilier Guards were inspected.

1176. The two regiments at Windsor, I think, are the Blues, and one battalion of Grenadier Guards?—I am very certain that the Household Cavalry are not inspected. They did not even inspect at the period when we inspected generally in the Foot Guards and in the Line.

1177. Commanding officers have no power to inspect, have they?—They do it upon their own responsibility.

1178. Sir John Trelawny.] Have you any experience with regard to the army in India?—I have not; I never served in India.

1179. Do you know anything of the regulations or provisions there with reference to the health of regiments in stations?—I think the regulations are the same as in this country with regard to inspection.

1180. You know of no such thing as arrangements on the part of commanding officers where regiments come into quarters in lieu of other regiments, by which arrangements there are particular persons who are responsible for the health of certain batches of women?—Yes; that is the case in India. There are certain women in the regimental bazaars at some stations, but I believe that is an arrangement which is carried out by regiments, and is a sort of authorised arrangement.

1181. Still it is the fact, is it not, that certificates are actually given to persons who have been in the habit of supplying clean women for the benefit of regiments?—I do not know that that is the exact form in which it is arranged. I think that the regiment pays a woman to look after the bazaar women, and to find out who are diseased, and to put them into a Lock Hospital; but I cannot speak from personal knowledge upon the subject.

1182. Marquis of Hamilton.] I think you stated that you were of opinion that huts would be sufficient hospital accommodation for the soldiers?—I think so.

1183. At Aldershot is there hut accommodation?—There was the greatest difficulty in getting a hut for the Lock Hospital there, but I do not know any reason why, if more accommodation were required, the present accommodation could not be extended, and an additional hut built; there may possibly be reasons, but I am not aware of any.

1184. The last witness stated that from the want of sufficient accommodation at Aldershot, patients have to go across a path or road for certain necessary duties of life; and that patients actually in hospital owing to this have given disease to the women living in the camp; are you aware that that is the case?—I heard that statement with very great surprise, because, as far as I know the regulations of regimental hospitals, patients cannot get outside at night as they seem to have done in this case; I think it is a case that ought to be inquired into; I could not have believed the possibility of its being so done if I had not heard it so stated.

1185. That was the evidence given by Inspector Smith, and the account given by the woman who was a servant in an officer's hut as to her having become diseased?—I cannot understand how it can have been done. There must have been great neglect in some quarter before such a thing could have happened.

1186. Sir John Trelawny.] I think you said that you were averse to general inspection?—I am.

1187. Do you not imagine that a number of men do not report themselves and remain in ineffective service during their condition of partial illness through not reporting themselves?—I think, that if the regulations are properly carried out with reference to the punishment of men who conceal this disease, the punishment is sufficient to induce them to report themselves the moment they detect the disease.

1188. But is not the disease so insidious that many men might easily say that they were not aware that they were so affected?—I should not take that as an excuse if I found it a primary sore in such a state that I should conceive it to have existed for upwards of three days, because I should think that it was the man's business to know it, and should report him and have him punished accordingly.

1189. You have probably heard the conjectures with regard to the state of persons who are under treatment; but those conjectures do not apply, do they, to the numbers of cases where persons continue doing their duty, but perform it inefficiently?—I can hardly admit that they perform it inefficiently, because, if so, they would be sent to hospital, or invalided from the service. A man must either be effective or non-effective. If he is unable to perform his duty, he is sent to hospital in order that the medical officer may ascertain

ascertain why he is inefficient, and if the cause of inefficiency appears to be a permanent cause, he is then brought forward, and discharged as an invalid.

1190. How many years do you consider it takes to make a good soldier?—I think you can make a good soldier in a year.

1191. Is it not of great importance that he should continue in the army for a considerable number of years in an effective condition?—That is a point which is very much debated at the present moment, whether or not it is an advantage to keep your men a great number of years, but I think it is a point of great importance to have them always efficient.

1192. Would not their reporting themselves early very much conduce to the length of time that they would be efficient in the service?—Very much so. If they neglected to report themselves until constitutional symptoms were fully developed, they would be necessarily much more likely to become non-effective. There is no doubt that the early treatment of the disease is a matter of great importance, and it is a matter which in regiments we have always endeavoured to impress upon the men, and I think with some success.

1193. Do you approve of the present limit with regard to the number of miles from the centre?—That is a question on which, I think, I am hardly competent to give an opinion. It is a question which must really be decided by an examination of the men who have the carrying out of the Act upon the spot. It depends upon many circumstances, of which we can hardly be aware, such as the existence of some villages in the immediate neighbourhood, for instance, and the facility of communication; and I would rather not give an opinion upon that point.

1194. Mr. *Mills*.] I suppose it is not very probable that the same man would go and have two prescriptions made up in the same day?—Not in the same day.

1195. Therefore, when we find that 23 men went on one day, we cannot take an average of 98, divided by 6 or about 16, can we?—I admit that I was to that extent wrong upon that point. I spoke in general terms; I merely wished to guard you against believing the possibility of there being 98 cases.

1196. Mr. *Mitford*.] You were a member of the committee, commonly called the Medical Committee, appointed in 1864 to inquire into the Pathology and Treatment of Venereal Diseases, were you not?—I was.

1197. And you differed from your colleagues on that committee, I think, and issued a special report, dissentient from theirs, did you not?—I dissented on one part of the report, and I assigned my reasons for protesting against it.

1198. Do you adhere to those opinions in the main, or have you seen reason to alter any of them?—I have seen no reason to alter my opinions in the main, but I have altered my opinion in this respect: in the first place, I protested against the principle for which they contended; that principle, however, is now made law, and now that it is law it is our business to carry it out as efficiently as possible, and it having become law, I no longer object to it, but I do object to the part that has not become law.

1199. You say in your protest this: "I cannot concur in the recommendation to introduce a system of weekly examination of all known pros-

titutes"; is it with reference to that that you have seen reason to change your opinion?—That has now become law, and therefore I feel that I have no longer any right to object to it.

1200. But do you still adhere to the opinion that you then expressed with regard to the examination of soldiers?—Yes.

1201. The other members of the committee, I believe, were unanimous with regard to the inspection of soldiers and sailors?—Yes, but there was this important difference between the other members of the committee and myself, that I had eight years' practical experience of the working of it, and not one of them had had the experience of a single day.

1202. When Lord Herbert's Committee reported, I think in 1859, their opinion as regarded the inutility of the examination of soldiers by way of restraining the disease, the Contagious Diseases Act was not in operation, was it?—It was not.

1203. Their views might possibly have been different if that had been the case, might they not?—They might have been different, but I do not see any reason why they should have been different.

1204. It would have been comparatively useless to examine the men without examining the women, and in that way they might possibly have thought that the examination of the men alone was attended with no good results, might they not?—I do not think that was the exact point that they took up; I think that they were of opinion that the examination of the men was inefficient as carried out in the army, and that by proper means you could get the men to report themselves even better than you could detect them.

1205. How do you account for the reduction of the disease which you mentioned in the beginning of your evidence in certain places before the Act had been passed?—I am quite unable to account for it; but I felt it my duty, in inquiring for the information of the Secretary of State into the operation of the Act, to see whether such a thing did not exist. I was under the impression that it did, from the results which I obtained in my annual reports. I worked it out, and I had the tables before me before I wrote a single word of the observations.

1206. Again, you probably would not be able to account for the increase of the disease in certain places which you mentioned, such as Canterbury, Colchester, and the Isle of Wight?—No, I cannot account for it; there was an increase in 1867, which I think could be accounted for. I was called upon to make up some returns in the latter part of the year 1867 on the subject, and as the year was not completed I had to make them up from quarterly returns, and I found the striking fact that in a very large number of stations there was an important increase of venereal in the third quarter of the year, and on examination I think I traced it to the right cause; it was the operation of the Act to increase the pay of the soldier. If you remember, it was passed, I think, in June, but it was to date from the 1st of April; and on the 1st of July every soldier in the United Kingdom was entitled to a sum of 15 s. paid down, and there was an immediate increase of venereal disease.

1207. It had not been paid up when it first became due, but an accumulation of the money due to them was paid on a certain day which filled their pockets with money, was that so?—Yes, the Act received the Royal assent somewhere

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towards the end of June, and the increase was to date from the 1st of April; therefore, there was a quarter's arrears of 2 d. a-day, or 15 s. to each soldier.

1208. Thereupon the disease was found to increase, I believe, universally, was it not?—It was. It showed that the men did not make a very good use of the additional pay.

1209. You stated your opinion with regard to whether persons under the operation of the Act have derived advantage or otherwise, and you stated that there had been an important advantage gained with regard to syphilis; should you have any reason to think that the advantage would have been still more manifest, supposing that the area round those places mentioned in the schedule of the Act had been larger?—I have no information from which I could form an opinion.

1210. Would you not think that where women might come in from beyond five miles it was very likely to increase the tendency to disease?—Of course, there is a possibility of that happening; but I think we have no evidence upon which to found a decided opinion as to how far it has operated.

1211. It has been stated in evidence that Portsmouth has derived a good deal of disease from Winchester, on account of Winchester not being under the operation of the Act, and again from Chichester; is that so?—Yes; and that is one of the reasons why I mentioned Winchester as being a place to which, from its proximity to Portsmouth, and its facility of communication with Portsmouth, it would be advantageous to extend the Act; but that is scarcely extending the area of the Act as regards Portsmouth; that is rather including a town which, from its facility of communication with Portsmouth, may affect Portsmouth.

1212. Have you any reason to believe that Chichester is a great feeder of Portsmouth, as has been stated to us?—I have no information on the subject; we have had no troops lately at Chichester.

1213. Or Southampton?—I do not think Southampton is likely to be so.

1214. You propose in your report, that clause 18, in the Act of 1864 (which is equivalent to section 36 in the Act of 1866, if I make it out correctly), the clause with regard to harbouring should be amended, so as to make it an offence on the part of brothel-keepers, to harbour a diseased prostitute, without making it imperative to prove that they have done so knowingly; what was the ground of that proposal?—I understood that it would be almost impossible to get a conviction against any brothel-keeper if it were necessary to prove that they did it knowingly, because you cannot prove that a man knew a thing, unless you have evidence to show that he was told.

1215. You heard, I believe, what the last witness said upon the same point?—Yes.

1216. And so far you would agree with him, would you not?—Quite; I think that if you could find any means of coming down on brothel-keepers for harbouring diseased prostitutes, it would be a very great advantage.

1217. Sir James Elphinstone.] Mr. Barr was asked at Question 722: "You say that 60 soldiers were diseased out of a regiment; of how many did that regiment consist?—I cannot state the precise number; it was the 12th Regiment."

With that information, can you ascertain what was the number of men sent into hospital at the time to which Mr. Barr referred?—I will ascertain exactly how many were admitted from that regiment on their arrival at Aldershot, and I will communicate it to the chairman.

1218. Dr. Brewer.] Was the Act introduced into the Isle of Wight in 1866?—No; it has not yet been introduced there. The Isle of Wight is not included in the Act.

1219. Nor Shorncliffe?—Yes; Shorncliffe is.

1220. Was it introduced in the Act of 1866?—It is in the Act of 1866.

1221. Shorncliffe has been under the operation of the Act for the last year or two, has it not?—For the last two years, I think; I think it came under the operation of the Act about November 1866.

1222. I find that in the year 1867, the amount of venereal sore was 42; but in 1868, it was 79; and in 1867, the amount of gonorrhoea was 125; and in 1868 it was somewhat less, 123; it follows, does it not, that the operation of the Act in Shorncliffe has in nowise been beneficial, so far as we can ascertain by figures?—It certainly has not.

1223. This being so, upon what measures would you rely to arrest the progress of the disease?—That is a very difficult question to answer.

1224. It is the crucial question of the whole, is it not?—Yes; but here you have a station under the Act, where the disease has gone on increasing instead of diminishing; and I am unable to explain why. If I could explain why, I think I could find a remedy; but I am quite unable to say why the result has been different at Shorncliffe from what it has been at Aldershot and the other stations to which the Act has been applied.

1225. It appeared by the evidence of certain witnesses who have come before this Committee, that clandestine prostitution, diseased pregnant women, tramps in the neighbourhood, the irregular examination of soldiers, and the laxity of rules with regard to those soldiers, are the unchecked sources of the disease; what do you say as to those points?—I think that those causes are, so far as I know, in equal operation in other stations to which the Act has been applied, as at Shorncliffe; and I am still unable to account for the increase at Shorncliffe, as compared with the other stations.

1226. But will you admit that those are really the sources of disease; and do you think that those are the great preventives of any practical medical improvement?—I am not prepared to admit one of the reasons which you state; and that is the non-inspection of soldiers; but the other causes which you have assigned, I think, may operate as very strong agencies to prevent the suppression of the disease.

1227. They are antagonistic to the successful operation of the Act, are they not?—Yes; I think so.

1228. With regard to secondary disease, can you give me any kind of average, as to the number of cases you suppose that secondary disease presents itself?—I could not do so without a careful examination of documents.

1229. Do you think that one in 10 would be the proportion?—That may be so, and probably it is so; but I would state it with great reservation.

1230. Then as primary diseases, taking them
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as ragged loose sores, as well as true venereal disease, indifferently communicate disease to others, how can you rely upon the secondary symptoms or secondary disease being sufficient to detect that amount of disease which would tend to check the propagation of it?—Because I think that we are entitled to infer that the proportion of infecting sores and non-infecting sores, is likely to be the same among troops stationed in the same quarters.

1231. Supposing that you have of true venereal disease one case in 10, which is a very large average, and only true venereal disease can be expected to give the secondary disease, and yet that the regular sore will produce disease in others, would you check the disease, generally speaking, by simply being guided by secondary exhibition?—I do not think that checking the disease which does not produce constitutional symptoms is a point of very great importance. If it were merely a question of gonorrhœa, I would recommend you at once to take no steps by legislation for its suppression.

1232. But gonorrhœa produces stricture and diseases of the bladder, does it not?—Very seldom. It would not be worth your while considering the question as regards gonorrhœa from its effects in producing stricture. It would not, as a mere financial question, be worth while adopting the Act to suppress gonorrhœa. I think that the great point (and it is a point that ought to be borne in mind) is the importance of getting rid of that form of disease which produces constitutional symptoms.

1233. Fresh arrivals of troops in any particular locality have been followed in every case, so far as we can find out, by an increase of disease; does that accord with your experience?—I never knew a movement of troops take place without an increase of admissions into hospital from venereal.

1234. But if we have no inspection whatever of the soldiers, how on earth can this Act operate in mitigating disease?—I do not quite appreciate the question.

1235. Is it not the case that, wherever troops are moved, disease is propagated?—Yes; but have you ever considered the question why it is so? Because I should like to explain my idea upon that point. I have stated that I have never yet known a movement of troops to take place without an increase of patients in the hospital following it; but I believe the reason is this: supposing that a battalion of Guards goes from London to Windsor, and that the men get among a set of women that they know nothing whatever about, and among those are a certain number of what we used to designate “fire-ships,” the men, before they know what women are diseased, manage to contract disease, and come into hospital.

1236. But they communicate disease to the women, do they not?—That is a mere hypothesis. I believe that the admissions into hospital upon a movement of troops arise from exactly the opposite of that, and that the women communicate the disease to the men. The men come to a place where they do not know anything about the women; they form an unfortunate connection, and a lot of them become diseased, and come into hospital. The moment that it is found out, they spread among their comrades the report that such and such a woman is diseased, and the men, unless when they are so far gone in liquor as not to be able to know what they are about, avoid that woman.

C.87.

1237. But inasmuch as you have stated that when men have the means there is a direct increase in venereal disease, the mere possession of the means is sufficient; do you not think it would be better that men should plead reasons for not being examined than that the whole of the troops should be left unexamined under those circumstances?—I think that a general examination of the men would have a strong tendency to destroy self-respect. I feel that very strongly, and therefore I think it would be quite antagonistic to everything that you have been doing in military legislation of late years.

1238. But you have proved that when the soldiers had an increase of pay, there was a great increase of disease; does that self-respect of which you speak exist, except as regards having the means of indulgence?—I stated the increase of pay as one of the circumstances by which we could account for an increase under special circumstances.

1239. That being so, that militates, does it not, against your idea that the self-respect of the men would be injured by the examination?—No, because I think there are always a certain number of men in a regiment who have no self-respect.

1240. Then can you not have a pleading of reasons for not being examined?—What reasons would satisfy you?

1241. Might not marriage be pleaded in bar of the examination?—In the Guards that was always carried out; we never examined married men, but that is a very small proportion.

1242. Then might there not be character, which would be lost if a man were found diseased?—If that were carried out, the only rule that you could make would be that every man who was diseased should be subject to inspection for a given time afterwards.

1243. And might not men who pleaded exemption when they were known to be diseased continue to be examined and always be examined?—Then the honourable Member's view would be, I presume, to add on to the punishment of a man found concealing disease that he should be subjected to inspection for a certain time. That would to some extent obviate the objection, but there is another question, which, if you will permit me, I should like to ask. You have the Act in operation at Portsmouth, and you have it in operation at Woolwich. At those stations you have a large number of civilians, mechanics, artisans, and labourers employed under Government. Are you prepared to extend the inspection to the civilians? Because, if you apply the rule of inspection to the soldier, and do not apply it to the civilians at the same station, and under very different circumstances (and I think that many of the civilians of whom I speak are also quite as subject to the venereal disease as the soldier), you make an extremely invidious distinction; you stamp the soldier as a man of inferior caste. If you could extend it to the whole civil population, or even to all the civil employés under the Government, then you would get rid of one of my objections.

1244. With regard to lavatories in beer-shops and brothels, how could you insist upon their being provided?—You could only insist upon its being done by putting a clause in your Act of Parliament.

1245. Are you aware that it has been proved in evidence, that it is not in the beer-shops and musical

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musical brothels that this kind of prostitution goes on, but in certain rooms and chambers somewhere contiguous, or in a convenient place?—I understood from Mr. Barr's Report, which I read, that those chambers were attached to beer-shops and brothels, and under that idea I suggested it; but I will only go so far in my suggestion as to say, that wherever there are rooms for the purposes of prostitution, you should insist upon having lavatories for the men.

1246. In some cases those are very poor houses, and one instance was given where the man and woman who kept the place were sick, and were of a very low rank and position in life, and where they kept a kind of bedroom for such purposes as that; how could you get lavatories attached to such houses?—The only thing you could do in a case of that kind, would be to put it in the power of the police to suppress such a house.

1247. With regard to putting lavatories in those places, would not that be legalising, or be supposed to be legalising, prostitution?—I am afraid that you have legalised it under the present Act.

1248. Mr. Kinnaird.] When, in answer to a question, you stated that, unless you extended the Act to the workmen in the civil employ of the Government, it could not be effective, I presume that you meant that to show the difficulty of the matter, and that you do not think that it is possible or feasible to extend the Act to every man, whether a mechanic, or otherwise?—I do not think that it would be possible.

1249. An honourable Member asked you as to your Report, and you stated that, with one exception, two years' experience has not tended very much to change the views which you then held, and that the result has not then been in those two years equal to what was anticipated by the framers of the Act; is that a correct representation of your opinion?—I think that the results have been favourable, but not by any means to the extent which was anticipated.

1250. Do you still in the main, adhere to the opinions which you then entertained?—I still adhere to the opinions which I then entertained, except as regards the legalising; because as Parliament has legalised, I can no longer offer any objection to it. I would carry out the Act to the very fullest extent, and give every facility which could be given to the provisions being carried out.

1251. Is it very certain that under this Act the disease would ever be stamped out?—I do not believe it is possible to stamp it out, though I believe it may be considerably reduced in amount.

1252. Sir James Elphinstone.] It may be mitigated in form, may it not?—I think it may be reduced in amount; and I think that anything which you do to reduce the amount would have a tendency also to bring the cases earlier under treatment, and would thereby mitigate the intensity of the disease.

1253. Sir John Pakington.] I think you have stated to the Committee that you are aware that the soldiers of the Coldstream Guards are still subject to periodical examination?—So I understand.

1254. Have you any reason to believe that the soldiers in the Coldstream Guards felt less self-respect than the soldiers in other regiments of that brigade?—I have been so little brought in contact of late years with the soldiers that I can-

not give an opinion upon the subject; but I think it stands to reason that a general inspection of that kind once a week must have a tendency to destroy a man's self-respect. It implies two things; it implies first that you believe him to have been leading a loose and irregular life; and it implies secondly that you believe that he would wilfully disobey orders, and not report himself if he got diseased.

1255. That is a matter of theory and opinion; but the examination periodically of the Coldstream Guards is a matter of fact, is it not?—Yes.

1256. And I understand you to say that you have no reason to suppose that the soldiers of that regiment feel less self-respect than the soldiers of other regiments?—I have no information at all upon the subject.

1257. Do you not think that the fact of a soldier's being obliged to abstain from duty because he is suffering under syphilis or gonorrhoea has a tendency to diminish his self-respect?—Most decidedly, I think it has.

1258. Is not that rather an argument in favour of taking a course which might exempt him from suffering from those causes?—I am not prepared to admit the inspection would exempt him from so suffering. I believe, from the experience which I myself have had of it, and from the testimony of almost every medical officer with whom I have spoken on the subject, that those inspections were really extremely inefficient, and that they did not produce anything like the results which would justify their re-introduction.

1259. Of what inspections are you speaking?—The inspections for venereal disease.

1260. Are you speaking of inspections as they are now conducted, or of inspections as they were conducted previous to the recommendations of the Committee on the Sanitary Condition of the Army?—They have been discontinued altogether now; they were not abolished until 1859.

1261. But is your answer founded upon the inefficiency which was found to exist at that period, or upon the inefficiency which is discovered in the cases of examination at the present time?—Of course it is founded upon the examinations of the previous period, for that is the only point upon which I have any practical evidence whatever.

1262. Have you any reason to believe that the examinations of soldiers which now take place under certain circumstances (as you well know) are inefficient?—I have no evidence upon the subject; but I think that there is a very great difference between your getting a thing efficiently done, if you do it as an exceptional thing, and at rare intervals, and your introducing a thing of that kind, and expecting it to be done once a week.

1263. Then you have no reason to suppose that examinations as now conducted are inefficient?—I have no reason to suppose so.

1264. And you have no reason to suppose that the examination as now conducted in the Coldstream Guards is inefficient?—I have no evidence whatever about the examinations in the Coldstream Guards, beyond the fact of there being examinations.

1265. Are you aware of any reason why the examinations of soldiers properly conducted by duly qualified men should not be quite efficient?—There is one very great objection; to do the thing

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thing efficiently would involve a very great amount of time, and I think that if you call upon medical officers to devote, say, two days a week (because I do not think to do it thoroughly and efficiently, they could do it much under that) to that inspection, you are making a very great demand upon them for a result which you really could obtain, I believe equally well, by other measures.

1266. What other measure would you suggest as an efficient and complete substitute for examination?—I would punish a man for disobedience of orders in concealing disease, and throw upon the soldier the responsibility of reporting himself when he becomes diseased.

1267. So long as he does not report himself you would not have the means of curing that man would you?—But I believe that the result of it would be, that he would avoid the punishment by reporting himself. I can speak myself, most positively, as to the result of former examinations, conducted as we conducted them, and I have no hesitation in saying, that men often escaped detection if they were determined to conceal the disease.

1268. I think you stated just now, in answer to a question from another honourable Member, that you would approve of making the personal examination a portion of the punishment for being diseased; did I rightly understand you?—I said I think that would be the result of the course which the honourable Member suggested, but I did not express any opinion as to whether it would be judicious to have it or not.

1269. Would you approve of making an examination of this kind, for protective purposes, a portion of the punishment?—I think that it is a matter requiring consideration.

1270. Do you not think that any such system must have a very dangerous and prejudicial effect, and tend rather to extend than to repress this frightful disease?—That is a point which I have never had brought before me until this moment, and I am scarcely prepared to give an opinion upon it. I think that the plan which I have suggested, of punishing the men for concealment, would be quite sufficient without adding that to the punishment.

1271. But I think that you stated to the Committee that there was an examination of soldiers when they returned from furlough?—Yes.

1272. And that you approve of the examination of a regiment when it is first brought into new quarters?—I do not think I said that I approved of it; I said that it had been done at the particular request of the police, but I did not give any opinion upon it.

1273. Do you disapprove of the examination of a regiment when it comes into new quarters?—I think while you have the Act under trial as it is at present, you are bound to take every possible precaution to have it fairly worked; and as the police have stated that the disease is propagated in that manner, I think you are bound to take that precaution in the sense of giving fair play to the Act.

1274. Is not the examination of soldiers one possible precaution?—Of course it is; but I think that you may gain the same advantage by other means, and that you may prevent disease by means that are very much less objectionable than a weekly inspection.

1275. The objection to which you referred in one of your recent answers with regard to draw-

ing an invidious distinction between civilians and soldiers, unless civilians were also examined, would apply to certain arsenals; but would it apply to all the stations of Her Majesty's troops?—No, it would merely apply to all stations where you have civil employes of the Government, either mechanics, artisans, or labourers; but you could scarcely introduce a measure of inspection at one set of military stations, and exempt the men from it at another.

1276. Do you adhere to the opinion which you have expressed of objecting to the examination of soldiers on the ground of the inutility of that examination?—I do very much.

1277. Do you admit the utility of examining men after furlough, and examining men on coming into barracks, but do you deny the utility of examining individual soldiers?—Pardon me; I did not admit the necessity when they come from one station to another. Men coming from furlough are under peculiar circumstances. They have been, for a certain time, removed from all military restraint, and have been among their friends, and very probably enjoying themselves, and we know pretty well what enjoyment means with them; and I think that in that case, as a measure of precaution, we are quite entitled to examine every man when he comes back, to see that he has not disease.

1278. I am afraid that I must repeat the question. The word you used was, "utility," and not "necessity," and, as I understand, you admit the utility of examining soldiers returning from furlough, but you deny the utility of examining them at other times?—I admit the utility of examining a soldier coming from furlough, because he has been for some time previous under what I may call peculiar circumstances, and I would examine here, with a view to protect the regiment when he comes back, in case of his having contracted disease while away from it; but I think that is a very different thing from the examination of a whole regiment weekly, and subjecting every man to a weekly inspection, which, except under very special circumstances, must be an inefficient one.

1279. Am I to understand from your answer that you think a man is in danger of contracting disease when he is on furlough, but that he is not in danger of contracting disease while he is in quarters?—I think while he is in quarters he is in such a position that he would at once report himself.

1280. Mr. *Mitford*.] You do not like the periodical examination because it would lessen the self-respect of the soldier, but would not the examination on returning from furlough have that effect?—I do not think it would to such an extent; I have stated in the proceedings of the Committee which has been referred to, that I think that an exceptional examination under special circumstances would by no means have the same tendency to diminish the self-respect of the men which an habitual weekly inspection of the men would have, but of course it is entirely a matter of opinion.

1281. Lord *Charles Bruce*.] Do you not think that it very often happens that a young soldier, on finding himself for the first time infected with the disease, from a feeling of shame, sooner than report himself to the hospital, would go and get treated by some quack?—I think that there is a very great feeling in a regiment of the older soldiers keeping the young ones right, in that respect.

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1282. But when any young soldier for the first time in his life finds himself infected does not that feeling operate?—He generally tells one of his comrades, and he advises him to go to the hospital at once; I think that there is a great feeling of that kind in a good regiment.

1283. Are you speaking from experience of your own regiment?—Yes.

1284. Captain Grosvenor.] Is it your opinion that periodical and promiscuous examinations would be fatal to the object of inducing a better class of men to enter into the ranks?—I think that it would act most injuriously upon the recruiting of the army. When we are endeavouring to get a better class of men to enlist, I think we ought not to insist upon such a thing as a general examination of that kind. I have very little doubt that it would act injuriously in that respect.

1285. Mr. Mitford.] When the practice was left off, owing to the report of Lord Herbert's committee, do you know if there was any greater facility in recruiting than there was previously?—I do not know that there was any; I do not think that it would have had much effect at that time; I think that the introduction of such a thing into the army would tend to interfere with recruiting.

1286. Chairman.] Do you mean to say that you think that it would prevent the more respecta-

ble class from entering the army?—I think that it would prevent the more respectable class from entering the army.

1287. Mr. Mitford.] But still you have no reason to suppose that they came in at the time that the practice was discontinued?—But I think that since that time you have offered further inducement to a more respectable class to come in. The tendency of legislation has been to raise the status of the soldier, and I think that it would be a great pity to introduce a measure which would have an opposite tendency.

1288. Chairman.] Putting aside the question whether this measure would have that effect or not, is it not undoubtedly the fact that there is a better class of men going into the army?—I am not prepared to say that it is, because I have no evidence on the subject, but I think that what Parliament has been by its legislation endeavouring to do is to induce a better class to come in.

1289. Dr. Brewer.] Are recruits admitted without examination?—When a recruit is enlisted he is stripped and examined from head to foot; that is done perhaps twice in a man's career, when he enlists and when he re-engages.

1290. Does the knowledge that a man will be examined prevent men from enlisting?—I have no positive knowledge upon the subject, but I have been told that it did.

JOHN SIMON, Esq., F.R.S., called in; and Examined.

J. Simon, Esq., F.R.S.

1291. Chairman.] ARE you Medical Officer of Health to the Privy Council?—I am Medical Officer to the Privy Council.

1292. And in that capacity you have turned your attention to the working of the Contagious Diseases Act of 1866, have you not?—I have to some extent turned my attention to it; but looking upon the Act as specially concerning two departments other than my own, I cannot profess to be critically informed of its working. I have had to consider the question of the preventability of venereal diseases in its relations to the civil population, and in that aspect I have written of the question in my annual report for this year. That report will be very shortly distributed to Parliament, and is now in process of printing. I have in my hand a proof of the section to which I refer, subject of course to verbal corrections, but otherwise complete, and that section, if the Committee will permit me, I will put in, as representing my views of the subject in relation to the civil population.

1293. In this report do you refer at all to the operation of the Act with regard to the military population?—Only incidentally.

1294. Then this report only contains your views with reference to what should or should not be done with regard to the civil population?—That is so.

1295. It does not at all affect the question of whether the Act should be further extended in a military point of view?—It does not. I may observe that the first sentences of it point out what is special in the military and naval cases, but simply to clear my ground for the discussion of the civil question. Otherwise I believe that there is no single sentence in it which refers to the military and naval experience.

1296. Do you wish or do you feel yourself in a position to express generally your views as to

the result of this Act in regard to its military operation?—I have already expressed hesitation in speaking at all upon the military and naval question; but so far as I have an opinion, it is that the time is not come for judgment as to the amount of good which can be done by the Contagious Diseases Act in relation to the Army and Navy.

1297. Do you think that the Act has not been sufficiently long in operation to enable any one to form an opinion whether it has been a good or a bad Act?—I think not fully. Particular military and naval officers can no doubt speak with some positiveness as to the effects which they have observed in particular stations; but taking the mass of observation, I have the impression that the time is not come for speaking positively upon the subject.

1298. With those views, then, would your recommendation rather tend to there being a further trial of the Act upon its present basis before even there should be an extension of the Act?—No; I will hardly say that, because those who are working the Act allege that they are very much hampered by the smallness of their areas, and I am not at all prepared to say that I think it should not be extended in its present kind of operation; on the contrary, I think that a fair case seems to be shown for extending the operation of the Act in its present sphere.

1299. There is one point upon which I should like to obtain an opinion from you, and that is with regard to the means of bringing under the operation of any Act clandestine prostitution; can you suggest in any way any manner of getting at that large class of clandestine prostitution which prevails even in our military areas?—I should conceive it to be quite impossible; in the first place, think of the immense range of cases, where no one can draw the line, between

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mere sexual looseness and so-called "clandestine prostitution." The latter, from the nature of the case, I think, must elude anything like definite regulations.

1300. *Dr. Brewer.*] We mean in relation to disease?—But a woman may get disease the first time she indulges; there would be, I think, no possibility of dealing with clandestine prostitution. I believe, so far as I can judge from the Paris information on this subject, that what they call clandestine prostitution breaks down their system. They catch a number of specially flagrant unregistered prostitutes and bring them before the police, but the quantity which evades is enough to defeat them.

1301. Therefore you think that to attempt to put an end to clandestine prostitution by legislation is simply impossible?—I suppose so; I look at it in this point of view; how are you to prove clandestine prostitution? would those who propose such things take a woman on the mere ground of her having had sexual relations with more than one man, and put two and two together, and produce their evidence in a police court? It seems to me to be a thing which could not be done; the only kind of prostitution which can be dealt with, I suppose, is prostitution carried on by women who make it their calling, and live in gangs in brothels, or who publicly solicit men. I do not see any practical definition of prostitution which could include women wishing to practise clandestinely.

1302. If clandestine cases are known or reputed or reported to produce disease, can you do nothing?—It is very unlikely, I suppose, that a woman will be in relations of that sort spreading disease and yet be in any reasonable sense of the word a clandestine prostitute; I suppose that such a woman would be a fairly overt professional.

1303. Are you aware that labourers' daughters and servants are reported to us as being in that condition?—The police would of course know a great deal more of those matters than I do; but very strong stories are told about servant girls, as regards the proportion of them who spend their spare time in this line of industry.

1304. *Chairman.*] To sum up so far as our investigations at the present moment are concerned, you would not be prepared to give any more definite opinion than this, that you do not think that the Act has been sufficiently long in operation to enable you to form any but a very general opinion about whether it will be eventually a beneficial measure or the reverse, and secondly, that you see no reason why the area in those towns where it is now in operation should not be extended; but beyond that you do not speak?—I see no reason why it should not be ex-

tended; as regards its operation, I think it highly probable that its results are good, but in speaking of the goodness of its results, I think that a very important distinction is to be drawn. It has done good, probably, in relation to the army and navy, which would not deserve to be considered in the same degree a good if it were gained for the civil population. As regards the army and navy, any prevention of venereal disease must be regarded as important, independently of very great distinctions in degrees of importance; but for the civil population this would certainly not be so much the case. The prevention of gonorrhœa and the prevention of many other venereal affections may be of great importance in the army and navy, because those affections interfere so much with the efficiency of the men at the moment, although generally of no permanent consequence. If I wanted to judge what would be the value to the community of extending to the general population such legislation as that of the Contagious Diseases Act, I should fix my attention on how far the Act had prevented true syphilis, the syphilis which produces secondary symptoms; and we certainly are not in a position at present to answer that question; I vainly have looked for evidence upon the subject.

1305. *Mr. Donald Dalrymple.*] Do you think that because you cannot easily reach clandestine prostitution, and the higher class of prostitutes, you are not to deal with the lower grades?—Certainly not; as I said, clandestine prostitutes may be of all grades. There is an immense range, and when you get towards the limit of avowed public prostitution, no doubt there are plenty of cases which an active police could get hold of, without making great blunders.

1306. *Sir John Trevelyan.*] Is it your opinion that the restrictions upon marriage, in the case of soldiers, have any tendency to create a class such as those who practise clandestine prostitution?—Undoubtedly.

1307. Then the State is responsible in some degree for that condition of things; would it not therefore follow that it is peculiarly the duty of the State to protect the population from that disastrous state of things?—The sense in which I understand the Contagious Diseases Act is, that the State acknowledges that obligation; that is my interpretation of the Act.

1308. Should you not consider that an answer to the remark, that we are as much bound to examine civilians as soldiers, supposing that we are entitled to examine soldiers?—I should think that that is quite an answer. The case of civilians is quite different, the State having a responsibility for the one and not for the other.

Monday, 5th July 1869.

MEMBERS PRESENT:

Dr. Brewer.
Lord Charles Bruce.
Lord Eustace Cecil.
Mr. Donald Dalrymple.
Sir James Elphinstone.
Captain Grosvenor.
Marquis of Hamilton.
Mr. Kinnaird.
Mr. James Lowther.

Mr. Mills.
Mr. Mitford.
Sir John Pakington.
Mr. Rathbone.
Sir John Simeon.
Mr. Tipping.
Sir John Trelawny.
Captain Vivian.

CAPTAIN THE HON. J. C. W. VIVIAN, IN THE CHAIR.

Surgeon Major JOHN WYATT, F.R.C.S., called in; and Examined.

Surgeon
Major
J. Wyatt,
F.R.C.S.
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1309. *Chairman.*] You are Surgeon Major of the Coldstream Guards, I believe?—Yes.

1310. Is it the practice in the Coldstream Guards to make periodical examination of the soldiers for the purpose of discovering contagious disease?—Invariably.

1311. Do you examine all the soldiers in the regiment, or only certain men?—All except the serjeants and the married men.

1312. You examine all the other men, whether old soldiers or not?—Yes, I have always made a great point of recommending that to successive commanding officers, and they have always adopted it.

1313. Do you make any exception with regard to men who have good-conduct stripes, or men of notoriously good and quiet habits?—No exception has been made. I have seen sometimes reason to doubt the advisability of that plan. We inspect all the men in the ranks, except the non-commissioned officers and those who are married. The married men appear just to show themselves only, and that we may see there is no appearance of ordinary ill-health.

1314. How is this examination conducted?—The battalions are paraded in a large room of the barracks; a screen is put at one end of the room for the sake of decency, behind which one of the assistant-surgeons seats himself. The serjeant of each company stands upon a stool behind the screen and takes the name of any man whom the assistant-surgeon desires should be sent to hospital, either for further inspection, if he has any doubt about the necessity of his going to hospital, or for treatment if he sees that it is necessary that he should come for that purpose at once. The non-commissioned officer puts down his name in a book, and that afternoon (the inspection generally takes place before dinner) the man is admitted into hospital, or the following morning if the object is merely to see him a second time.

1315. Then each man is examined separately?—Certainly.

1316. And by himself?—And by himself, certainly.

1317. In short, the examination is conducted with every regard to decency?—Certainly, perfectly.

1318. Do you attach great importance to this examination?—I think it is of the utmost importance. I have always considered it to be so.

1319. We had evidence the other day from Dr. Balfour, that the amount of disease in the Coldstream Guards was greater than in the other regiments, the Fusiliers and the Grenadiers; how can you account for that?—I cannot account for it. I only know that on one occasion in one battalion, after an inspection had not taken place for some time, for some reason best known to the medical officer, an inspection was ordered, and either 25 or 30 men, I think, were found to be diseased. That appears to me to be a good proof of the necessity for these weekly inspections, at which we generally find three or four cases. For instance, as one of my battalions is going to Aldershot to-morrow, I considered it advisable that an examination should take place before they went, in order that the men might arrive in camp in a healthy state; and one accordingly took place this morning, at which three or four men (I think four) were found to be slightly diseased.

1320. *Sir John Pakington.*] In the whole battalion?—In the whole battalion.

1321. *Chairman.*] This examination facilitates your discovery of disease in its infancy?—Yes, it facilitates the discovery of the primary disease, thus preventing the more serious consequences of secondary complication.

1322. The evidence we had from Dr. Balfour was, that the number of cases of secondary disease in the Coldstream Guards is greater than either in the Fusiliers or the Grenadiers; is that a fair way of testing the amount of disease in a regiment?—No, I should conceive not; I should think it would be fairer to eliminate from the mass of people who have disease, those who have the primary form of the disease, because secondary diseases display themselves in a great variety of ways. I have known people suffering from what is called rheumatic pains, which was nothing more than syphilitic disease; perhaps I may be allowed to observe, that I understand by secondary disease, that form of the disease which has become part and parcel of the constitution of the individual, or one of the remote consequences of the poison.

1323. This

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1323. This question was asked of Dr. Balfour, "Is not a system of periodical examination of the men still continued in one of the battalions of the Guards?" his answer was, "It is continued in one regiment of the Guards. Which regiment? The Coldstreams. *Chairman.* Is it unpopular in that regiment?—I could not speak from personal knowledge, but I am quite prepared to say, that it is not successful in reducing the amount of secondary disease, which is the great thing that we have to endeavour to reduce. Taking the three years 1865, 1866, and 1867, the proportion of admissions into hospital in the Grenadier Guards for venereal disease generally, was 322 per thousand; in the Coldstreams it was 312 per 1,000, and in the Scots Fusilier Guards it was 176 per 1,000; and the Scots Fusilier Guards have no inspection;"—what I wanted to ask you was this, Does not this periodical examination facilitate your detecting disease which would not necessarily come to secondary disease at all?—Certainly; Dr. Balfour is quite in error too in saying that my regiment is the only one which is inspected; the Grenadier Guards have an inspection also as well as the Coldstream Guards.

1324. Do you find it unpopular with the men?—I have never had the slightest complaint.

1325. Do you find, in any way, that it tends to diminish their self-respect?—No; I have seen no reason, nor have I heard any remark, inducing me to come to that conclusion at all.

1326. You recruit, I think, in the battalions of the Guards, for yourselves?—Yes.

1327. Have you ever heard any remark that men come less to the Coldstream Guards, or to the Grenadier Guards, because of these inspections, than they do to the Scots Fusiliers?—No, by no means.

1328. And you think that, in general with the public, those regiments are as popular as the Scots Fusiliers?—I think so; I have heard no reason to make me think the contrary.

1329. Would your experience justify your saying that, to return to the system which prevailed of old in the army, would not be generally unpopular among the men?—Certainly it would not be unpopular, as far as my experience in the Coldstream Guards is concerned.

1330. Have you watched the operation of the Contagious Diseases Act?—Yes; I have been associated with it myself. I am one of the Vice-Presidents of the Association.

1331. Do you believe that the evidence we have had before us, to the effect that a large number of soldiers escape the hospital, and go about in a diseased condition, is true; that is to say, they do not give themselves up, and are either privately treated, or go about concealing their disease?—I should think it quite possible, if there were no inspections, because it is a common thing for men to try to conceal their disease. I find that the men report themselves only on the morning of the inspection, and they do so then because if detected with disease at the inspection they are punished; but they think if they report themselves on the morning of the inspection they would escape punishment. The man has evaded reporting himself to the last possible moment, although he may have had the disease from the last inspection.

1332. I think you say these examinations are conducted once a week?—About once in 10 days, or a fortnight now. They used to take place once a week; but, in consequence of the disease

having so much diminished in intensity, I recommended that the examination should be twice a month on trial, unless there were special circumstances, such as the occasion of a battalion going to a camp, and their being at Aldershot, where they would be necessarily inspected, owing to the application of the Act to Aldershot.

1333. How long ago was that alteration in the time made?—About two years ago, I think it was, since the application of the Act to Windsor, where we have occasionally had a battalion.

1334. Therefore you attribute it entirely to the benefits derived from the Act that you were able to make the examinations less frequent?—I saw that the cases treated at Windsor, and which came to London, were much milder in character and much fewer in number than formerly, and, moreover, in London generally, throughout the civil hospitals, it is commonly recognised that the disease is less intense; one does not now see the severe forms of destructive disease as formerly; and, moreover, the numbers admitted into hospital became much fewer. Taking these circumstances into consideration, I thought myself justified in recommending it, partly because I had heard it stated in evidence, that the examination was a disagreeable thing to the feelings of the men; and I thought, if such a feeling did exist, it was better not to do anything to offend it needlessly, though I certainly never saw or heard anything of it myself.

1335. Do you believe that it would be disagreeable to the military medical profession to conduct these examinations?—I look upon it as a most important duty of a medical officer. I do not recognise the idea of the thing being disagreeable as an objection. I think if a medical man comes into the army, and it is necessary for the well-being of the soldier that these examinations should take place, like many other things, for instance, like attending the corporal punishment of soldiers when it existed, it would form a necessary part of his duty. I have never recognised any feeling of that kind.

1336. It has been suggested to us by Dr. Balfour, that it would be extremely unpopular?—Throughout my regiment I never heard any officer express dissent or dislike to it.

1337. Lord *Eustace Cecil.*] I understand the number of cases received into hospital to be greater in the Grenadiers and the Coldstream Guards than in the Fusiliers; would you not say that that was owing to a stricter examination in the Grenadiers and the Coldstreams than in the Fusiliers?—I was not aware, until a short time ago, that the numbers were greater; but I cannot conceive it possible that it can be otherwise than as you put it. It must be so, if one regiment has no inspection at all.

1338. There is a difference of something like 136 and 146 per thousand between the Fusiliers and the Coldstreams and Grenadiers respectively?—That is in what are called secondary diseases. I think we ought to understand each other as regards terms. One would like to know what the nature of the secondary disease was, because I perfectly join issue with these statistics, unless that is stated. I know, from experience, that very many cases which are called chronic rheumatism, when treated as secondary syphilis, get well, and the same is the case with affections of the eyes; therefore it is quite possible that

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they may be eliminated from secondary diseases altogether, and put under another category.

1339. There appears to have been an enormous preponderance of secondary disease in the Grenadiers as compared with the Coldstreams; it was 90½ per 1,000 in the Grenadiers; 33½ per 1,000 in the Coldstreams, and only 20½ per 1,000 in the Fusiliers; I suppose you cannot throw any light upon that difference in the numbers?—It would be quite impossible to do so unless one knew the precise character of this disease which is called secondary; I rather object to the term.

1340. Mr. *Lowther*.] Have you any idea whether the medical officers in the different regiments of Guards place a different construction upon the term "secondary disease;" do you suppose, for instance, that in the statistics of the Grenadier Guards the words "secondary disease" are used as applying to different classes of cases from those which are included in the statistics of the other regiments under that name, and, if so, would account for the discrepancy?—It might; I think if the whole class of secondary diseases were bracketed together and then eliminated as to the different symptoms they display, one would be better able to form a judgment upon it. I was not aware until last Saturday that there was this great difference between the regiments.

1341. Then, in fact, you consider these statistics to be hardly reliable?—I should not like to go so far as that; I should like to inform myself more accurately in detail upon that subject.

1342. If any class of men was exempted from examination, such as those who have good conduct stripes, or unmarried men of acknowledged good character, do you think that it would have a tendency to make the examination of the rest invidious, and therefore to promote its unpopularity from the fact that being examined would be considered to imply a taint of suspicion of immoral conduct; would it rather tend to make the examination unpopular?—I hear nothing of the unpopularity of the examination so far as I am individually concerned; that is to say, I do not hear of it officially; I hear it talked of occasionally out of doors, but I think there may be other explanations of that.

1343. You find that the men all cheerfully submit to it?—Yes; they dislike reporting themselves sick of this disease, because, of course, they pay their 10*d.* a day while they are in hospital.

1344. What are the penalties attaching to its being discovered?—The penalty formerly was that a man was obliged to pay up his duty; that is to say, if he had been five or six months in the hospital, although he would not pay up for the whole of that time, by the indulgence of the commanding officer he would pay up only two or three months of it; yet that came very hardly upon a man who had constitutional syphilis, which I consider a better term to use than secondary disease. Now, a man who does not report himself sick, but conceals his disease, is confined for 28 days in the barracks, and forfeits his furlough for that year.

1345. Is that the case when the examination is not compulsory, or does it apply only to the Coldstream Guards?—That is an order that applies to the whole army, I believe. If a man is found to conceal his disease, and is admitted into hospital with disease which has been on him for a considerable time, he is reported for that on

being dismissed, and is confined to barracks for a month, or rather 28 days.

1346. Supposing a man reports himself duly when he comes out of the hospital, does he have to make up his duty?—No, that is done away with entirely.

1347. He merely loses pay?—He merely pays the ordinary hospital stoppage of 10*d.* a day.

1348. Is his pay stopped if he is confined in the hospital for any other complaint?—It is stopped just the same.

1349. There is no distinction in that respect?—No, there is one uniform stoppage.

1350. Mr. *Tipping*.] Taking a term of 12 months, what per-centage of the men under your care would have the disease in that time?—I have prepared a Return to hand in upon that subject (*producing a Paper*).

1351. I want to know what per-centage of the men under your escape the disease altogether in the 12 months?—We have now in one battalion from Chelsea 24 men with venereal disease of various kinds; in another there is only 14; but of course the number fluctuates continually. At Windsor, where the men occasionally go, the proportion is very much smaller.

1352. What I want to arrive at is, what number of men do not have the disease at all in the regiment during a period of 12 months; can you tell me what per-centage, more or less, pass through the hospital in the 12 months?—I can tell you precisely what during the last five years has been the number of admissions for venereal disease.

1353. But the same men may have been admitted over and over again, of course?—Certainly. For primary disease the average seems to have been about 150 in one battalion, and 140 in the other.

1354. Marquis of *Hamilton*.] How long has this inspection existed in your regiment?—For a great many years.

1355. Dr. *Balfour* seems to think that the weekly ordinary health inspections would be sufficient to detect secondary symptoms; are you of that opinion?—I think the carrying out of periodical weekly health inspections would prevent the possibility of secondary symptoms being displayed on those occasions.

1356. Are they carried out equally in all regiments, or are they sometimes rather liable to be slurred over?—I cannot say. I can only speak of the way they are carried out in my regiment. In many regiments of the line, I believe they are not carried out at all now.

1357. Sir *John Simon*.] Am I wrong in believing that periodical examinations were formerly universal in the army?—They were.

1358. Can you tell me why they were discontinued in so many regiments?—I believe it was upon the recommendation of Lord Herber's Committee. Some evidence was given which induced the Director General to advise the Commander in Chief, that it was desirable to test the plan of discontinuing them.

1359. But that was only intended to be a temporary discontinuance, was it not?—No, it was intended that an examination should take place when the responsible medical officer considered it necessary.

1360. Then you believe that that discontinuance was only intended to be temporary and experimental?—That was my notion. We did not

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not follow that plan. It was merely a discretionary power given to the commanding officer.

1361. Do you think the effect of that discontinuance has been decidedly prejudicial to the health of the troops?—I cannot conceive that it can possibly have been otherwise; because we know by experience, that the ravages of syphilis are not so much effected by the primary disease, which is much diminished in its intensity, as by those remote forms of constitutional disease which sap the vitality of children even when it is only transmitted.

1362. Captain *Grosvenor*.] Can you say from your own knowledge whether the examination is carried out in any other regiment besides the Coldstream and Grenadier Guards?—I believe it is carried out in all regiments occasionally when, in consequence of any evidence that comes to his knowledge, the surgeon advises the commanding officer to adopt it.

1363. I mean periodically?—I have no means of knowing; being always quartered in London; I am not so much in contact with the line regiments as I should otherwise be.

1364. Do you not think that one reason why the examination is not unpopular in the Coldstream Guards is that it is not a matter of public notoriety; do you not believe that if it was a matter of public notoriety it would be disliked?—No: the majority of the recruits, and those whom I always endeavour to procure, being agricultural lads, coming from the country, I do not think they have very much feeling about the matter; they know they are liable to be kept in hospital a shorter time in consequence of being examined from time to time; and I always try to inculcate upon them that by being examined they escape being in hospital so long.

1365. You do not limit your ambition to the agricultural population, do you?—No; but I think the agricultural recruits are a better class of men, and less prone to consumption than any other class we have.

1366. Sir *John Simeon*.] Do you not believe that a great deal of the consumption which has been said to have been prevalent in the Guards, is the result of venereal disease?—I think it is the result of a combination of causes; among others, probably the confinement in the hospital for severe disease acting upon a constitution previously debilitated, and the necessary treatment when mercury is given.

1367. With regard to the exemption from examination on account of good conduct stripes and good character, do you think that the good character of a soldier, and the fact of his possessing good conduct stripes, at all proves that he is more chaste than other men?—I do not think it does; I think not, certainly; he would be as liable at times to contract disease as other people are.

1368. It could not be considered that his good conduct stripe showed that he had been chaste, or that he had not previously contracted disease?—I am afraid he would not be likely to obtain a good conduct stripe from the fact of not having contracted disease.

1369. Therefore, the possession of a good character, or a good conduct stripe, does not at all prove that a man is less likely to be affected with disease than his fellow soldier?—No; one frequently finds men with that disease who have one or two good conduct stripes.

1370. I think you said that you believed that

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the effect of the Act, when in operation, upon the prostitutes had been very satisfactory?—I think so, certainly, judging from Windsor and Aldershot, where we occasionally send a battalion, Windsor particularly.

1371. You find greater cleanliness?—Yes, we find greater cleanliness; they seem to be aware of the fact that ablution enables them to ply their calling for a longer period without being diseased.

1372. Mr. *Mills*.] What was the strength of the battalion you examined this morning?—I did not examine it.

1373. What is the total strength of a battalion generally in your regiment?—It varies; occasionally it is a little over 800 men; it depends upon circumstances. In the one which has gone away this morning there may not have been so many; it is generally about 800 strong.

1374. How much time is spent in the examination?—It depends very much upon the nature of the light, whether it is a bright day or a dark day, and also upon the nature of the disease and the way the men behave. Sometimes they attempt to elude the examination by concealment at the time. It is impossible to say how long an examination would last altogether. Sometimes it would take three-quarters of an hour or half-an-hour; it depends upon circumstances.

1375. Therefore it would not be sufficiently long to interfere with the regimental duty?—Not at all.

1376. You stated that there was no difficulty as regards recruiting and getting men; do you think you get men of an inferior class in consequence of this examination?—Certainly not.

1377. Sir *James Elphinstone*.] How long have you been in the service?—Eighteen years.

1378. Therefore you found the system of examination in existence in the service when you joined it?—Yes.

1379. And from that time to this you have never heard any complaints about it?—No, except what I have read occasionally.

1380. You have never heard any complaints from the men?—Never.

1381. You have no reason to believe that there is any complaint or dissatisfaction amongst them?—I never heard the slightest complaint in my life.

1381*. Mr. *Mitford*.] What arrangements are there in your regiment with respect to ablution for men coming in at night?—It varies in the different barracks; the new barracks at Chelsea have great facilities, there being an ablution place near the men's rooms, but in some of the older barracks the ablution place is in the ordinary washhouse, where the men go as often as they please. At Chelsea they have a better system of ablution.

1382. Do you attach great importance to that?—I attach immense importance to the chances the men might have of performing ablution on coming in at night.

1382*. *Chairman*.] Have you night lavatories in the barracks at Chelsea?—Yes, there is a place with a pipe and a cock of water, where men can always have water at night.

1383. Do you hear that the men use it frequently?—I think they are all beginning to understand the necessity of it.

1384. Mr. *Mitford*.] With reference to the manner in which the examination is conducted, you said that the serjeant was behind the screen

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behind which the men were examined in company with the medical officer?—No, he stands on a form behind the screen, and the medical officer sits in front of the screen.

1385. He does not see over?—No; he is there for the purpose of hearing the orders of the medical officer; he does not look at the men during the examination, or take part in the inspection in any way.

1386. Marquis of *Hamilton*.] None of the other men hear the order; the man's name is not perfectly known?—No, as the man passes by, the medical officer tells the serjeant above, "This man is to come to hospital," and the serjeant sees who it is. It is necessary for the serjeant to see the man, because his name would not be known to the medical officer.

1387. But what the surgeon said to one man would not be known to the other men?—If that man went to hospital the other men would draw an inference from it.

1388. But no name is mentioned at the time of the examination?—No; the medical officer would not know his name, so the serjeant takes it down.

1389. Dr. *Brewer*.] Would you accept the following little propositions with regard to the disease: shall we state primary syphilis to be syphilis affecting the parts directly inoculated with the virus?—Yes.

1390. In that we will include the hard chancre, the soft chancre, and the phagedænic sore?—That would not be an immediate effect.

1391. We will include them, however?—Yes, they may be included as instances of primary syphilis.

1392. I will take the secondary syphilis to be syphilis affecting parts not directly inoculated?—Certainly.

1393. Then I will take the tertiary syphilis, in the new form of it, to be symptoms arising after a lapse of time, when apparent health has been restored and continued, but subsequently the disease works out in various parts of the body, such as the skin?—I think that that is the true scientific description of the disease.

1394. If we take that, we shall understand each other?—Certainly.

1395. Do you believe that, by the course you are adopting, of examining your men, you have less secondary syphilis than those who do not examine the men for primary sores?—I have personally made no comparison; but I should think it must necessarily be so. I have not had an opportunity of comparing the results of the two systems.

1396. You certainly think you have less tertiary disease?—I never see that.

1397. Then, instead of being guided entirely by the amount of disease you found upon the skin, such as the arm, and face, and so on, you would think that that would be no guide whatever to the amount of disease?—No, certainly not. I think the tertiary form is the true criterion of the remote effects of the disease. I think that is a very material point, because I think the public, and even medical men, talk of disease by the same terms without meaning the same symptoms.

1398. If I understand you right, it appears that, in consequence of its changing quarters, you found at one time 25 or 30 men to be diseased in the regiment, when it had not been

examined for some time?—No, I did not say that. I said that I knew of a battalion of the Guards in which, for some reason or other, an inspection was ordered to be made; and upon that particular occasion either 25 or 30 men were found to be diseased.

1399. But, in the case of your regiment, or the battalions under your care, there is no chance of such a thing occurring?—No, it is impossible.

1400. Now, with regard to efficiency, if regiments be not examined, will there be a greater number of inefficient soldiers in those regiments which are not examined than in regiments which are examined?—I should think the men in regiments which are not examined must be liable to many of those diseases which we now know to be the results of the imbibition of syphilis poison.

1401. Will the length of the disease be increased by non-examination?—The length of cure.

1402. The length of the disease is increased by allowing them to remain unexamined, is it not?—Certainly.

1403. And will not the increased length of the disease increase the period of inefficiency of the soldier?—Certainly.

1404. And the amount of inefficiency?—Yes, I think their vital powers are diminished; it must be so.

1405. Will the loss of time be increased?—Yes.

1406. Will that throw a greater amount of labour upon the other soldiers in the regiment?—Certainly; and it was with that view that the order was previously issued, that all men under treatment for venereal disease should pay back their duty, in order to pay to others what they had been doing for them during the time of their treatment.

1407. Do more men become so much diseased in general health as to be no longer fit for the service, by the neglect to examine for primary disease?—I think, to answer that question satisfactorily, it would be necessary to know in how many cases of invaliding or death the cause of that invaliding or death might be attributed to syphilitic disease.

1408. Now, with regard to tertiary disease, do you believe that by early detecting and early treating primary disease you prevent tertiary disease?—I am sure of it.

1409. Do you think that tertiary disease frequently rises to such a height as to invalidate the powers of a soldier, and prevent his continuing to a soldier any longer?—I think it is those forms of disease which are called tertiary which do interfere with his physical power.

1410. Have you seen any bad tertiary disease in the army?—I have not for several years.

1411. Have you seen gonorrhœal rheumatism?—Yes.

1412. Have you seen syphilis lodging or depositing in the muscles or other structures?—Yes.

1413. Have you ever seen a case of ataxia?—Yes.

1414. Of syphilitic ataxia?—Yes.

1415. Upon the whole, then, you think that the examination of the soldier is an essential part of the preservation of a regiment in health?—Certainly for the preservation of the efficiency of the soldier and his vitality.

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1416. On every point—for the health of the soldier, for the efficiency of the soldier, for the saving of his pay, and for the saving of subsequent constitutional diseases—the examination of the soldier is an essential element?—Yes, and for the health of his children.

1417. Have you ever seen any hereditary syphilis?—Yes, a great deal.

1418. Amongst the children of soldiers?—No, not amongst the children of soldiers.

1419. But you have seen it professionally?—Yes, a great deal.

1420. What was the nature of that hereditary disease generally?—I have very often seen it affecting the eyes and skin.

1421. And the brain?—Yes.

1422. And the spinal cord?—Yes, producing a sort of malnutrition and atrophy.

1423. And the skin?—Yes.

1424. And the mesenteric glands?—Yes.

1425. The kidney, the bladder, the breast, and so on?—Yes.

1426. In fact, chronic disease is generated by neglected syphilis?—No doubt that is the tendency of present scientific deductions.

1427. Sir John Pakington.] I think you have stated, in answer to a former question, that you had observed that your regiment had suffered much less from venereal disease when stationed at Windsor than when stationed at London?—Yes.

1428. Do you attribute that difference to the fact that the Contagious Diseases Act is in operation at Windsor and not in London?—Yes, I do, to a certain extent; but Windsor, I think, is hardly a fair station by which to judge of the efficient operation of the Act, inasmuch as many men come from Windsor to London on short leave, and many women go from London to Windsor to see their friends, who are soldiers

there; but at Windsor, no doubt, during the time we have had battalions quartered there lately, there has been a less amount of disease, and what there has been has been of much less intensity.

1429. Did you observe the same comparative freedom from venereal disease at Windsor before the Contagious Diseases Act had passed?—Windsor was about one of the worst stations that the brigade of Guards went to; for many years we used to get a worse class of disease there than anywhere.

1430. Previous to the passing of the Contagious Diseases Act?—Yes, a few years ago; it was notorious.

1431. I understand you that that state of things is reversed now?—Yes, it is quite reversed; but I can hardly attribute it to the operation of the Act altogether.

1432. At all events, the improvement at Windsor is a fact simultaneous with the operation of the Act?—Yes.

1433. Lord Eustace Cecil.] Following the question which the Right Honourable Member for Droitwich has just put, do you think that less disease is contracted at Aldershot than in London?—I think so; it is a long time since we had a battalion stationed there, except for a month, and therefore one has had very little opportunity of considering that question; I ought to add, except for rifle practice, when we have had very few cases of disease.

1434. You have had no means of judging of the effect of the Contagious Diseases Act at Aldershot?—No, not satisfactorily.

1435. Mr. Mitford.] Is Dublin a place where there is much disease?—Yes, it is a very bad form indeed.

1436. The Act does not extend to Dublin, does it?—No.

Mr. FRANCIS MAYALL MALLALIEU, called in; and Examined.

1437. Chairman.] You are the Inspecting Officer of the Metropolitan Police Force, I think, appointed to inspect the naval and military stations under the Contagious Diseases Act?—I am.

1438. The Act at present is in operation at 12 stations, is it not, of which nine are in England?—At nine in England; we have no information about the Irish districts.

1439. I wish to examine you particularly with regard to the question of the extension of the area to which the Act applies; I will take each place separately; do you see any necessity for sanitary purposes to extend the area at Devonport?—Not so much there as elsewhere.

1440. There are two towns in the neighbourhood of Devonport, named Ivybridge and Plympton?—I know them both.

1441. It has been stated to us in evidence by Dr. Sloggett, that those two small towns harbour a large number of prostitutes; do you think it would be advisable to include them within the Act?—I think it would be advisable. I think that although there may not be any very large number of prostitutes there, those places are so intimately connected with our operations at Plymouth, that it would be desirable to include them if you alter the area at all.

1442. It has been suggested by some of the

witnesses, that the power of the metropolitan police under this Act should be made conterminous with their power under the Metropolis Police Act, namely, that the area should be extended from five miles to 15 miles; do you think that such a recommendation as that would be advisable, or do you think it would be better, instead of making a hard and fast line, to suggest certain extensions in certain districts?—I am under the impression that it would be better to make the district conterminous with that of the Police Act.

1443. Would not that in certain places create difficulties; for example, if you were to extend it at Woolwich, it would take in part of London, would it not?—I proposed to include the Deptford parishes.

1444. I am speaking generally now; I will come to the particular case of Woolwich presently?—I think the character of the population is so exactly similar in the Deptford parishes, that they ought to be included.

1445. Again, at Winchester, I think that if the area was extended to 15 miles, on the principle of making it conterminous with that of the Metropolis Police Act, it would take in a portion of Southampton?—I think that is desirable; Portsmouth being already a district, it is very desirable that Southampton should be made one.

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1446. On the whole, you would recommend that the Act should be extended in that way to 15 miles?—I think so.

1447. Now going back to take these places in detail; with regard to Devonport, you would suggest that Ivybridge and Plympton should be included in the Schedules?—I think there is no objection to it; I think it would be an improvement upon the existing area.

1448. Sir James Elphinstone.] How about Kingsbridge and Dartmouth?—Kingsbridge might be included probably, but it would hardly be necessary to extend it to Dartmoor.

1449. I did not say Dartmoor, but Dartmouth; we have evidence that Dartmouth is very bad?—I understood you to say Dartmoor; but Dartmouth I think it would be desirable to include, if you altered the district at all.

1450. As well as Kingsbridge?—Yes.

1451. Chairman.] Supposing Dartmouth and Kingsbridge were included, could you say whether there would be sufficient Lock hospital accommodation at Plymouth for the whole district, or not?—If you made the district conterminous with our metropolitan police district, with the increase we have had at Plymouth, I think we should have enough.

1452. If you made it conterminous with the area under the Metropolis Police Act, would you include Dartmouth; Dartmouth is more than 15 miles from Plymouth, is it not?—Yes.

1453. Looking at it from a military point of view, first of all; do you think that it would be absolutely necessary to include Dartmouth within the Act?—No, I do not think it would from a military point of view.

1454. Would it from a naval point of view?—From a naval point of view it would be easier to have the Act worked if it were included.

1455. I suppose you speak of including Ivybridge and Plympton also from a naval point of view?—Yes.

1456. Are there any other places near Devonport which you would include in the Devonport area?—No, I think not.

1457. Sir John Trelawny.] Would you include Saltash?—No, I think not; it is unimportant.

1458. It is approachable by steam in a few minutes, is it not?—Yes; but there is not much prostitution at Saltash, I believe; I never heard of much; it is a very small place.

1459. Is it within the 15 miles' radius?—Yes.

1460. Chairman.] At all events, you would recommend that any large and populous place, such as Saltash, if included in the Act, should be named in the Schedule, would you not?—Yes, most certainly.

1461. Therefore you would propose that Ivybridge, Plympton, Kingsbridge, and Dartmouth should be included in the Devonport area?—I think it would be desirable.

1462. Then, with regard to Portsmouth, are there any alterations desirable at Portsmouth; are there any fresh towns which you would suggest should be included within the Act?—Yes, Southampton; I think Southampton is one of our weakest points by far.

1463. In making these recommendations, are you acquainted with the hospital accommodation of these towns?—No, I cannot say that I am perfectly.

1464. Then you are recommending without reference to whether there is or is not accommo-

dation for them in the hospitals?—Yes; I could not undertake to say that the district was sufficiently provided with hospital accommodation.

1465. Mr. Mitford.] A witness told us that Chichester was a place that it was very desirable to include in the limits; is that your opinion?—I think when you are extending the area you should include Chichester, but I do not think it of the utmost importance.

1466. Chairman.] There are no troops at Chichester, are there?—No.

1467. Sir John Trelawny.] Would you recommend Gravesend to be included?—Yes, as a new place.

1468. Sir John Simeon.] Do you think Parkhurst ought to be included?—Yes, I think it ought.

1469. Chairman.] Then with regard to Sheerness, have you any recommendations to make?—No, I do not remember anything; I think nothing could be improved very much at Sheerness. Sittingbourne is a growing place.

1470. At Chatham?—We have spoken of including Maidstone, from time to time.

1471. Maidstone is one of the new places; I am talking of places where the Act is in operation?—I do not remember anything more to be included at Chatham.

1472. At Aldershot are there any towns or villages which ought to be included in the Schedules?—No; I think not.

1473. Sir James Elphinstone.] There is Guildford?—Probably Guildford ought to be included.

1474. Chairman.] At Woolwich?—At Woolwich I should propose to include the Deptford parishes.

1475. What are the Deptford parishes?—St. Paul and St. Nicholas, Deptford, and St. Alpage at Greenwich; I think if you included the hamlet of Hatcham it would be better.

1476. In Woolwich?—It is in the Parliamentary Borough of Greenwich, and has a population of a very similar kind.

1477. Mr. Mills.] Where is Hatcham?—It adjoins St. Paul, Deptford.

1478. Sir James Elphinstone.] It is in the fields, is it?—Yes; it has grown into a large town within the last few years.

1479. Mr. Mills.] Towards New Cross?—Yes, it would be the extent of the district in the direction of London.

1480. Chairman.] At Windsor are there any alterations to be made?—The parishes proposed to be added are Datchet and Slough, both in Bucks. There are two parishes which I should propose to include at Windsor; I have a memorandum, which I will furnish, of their names; I do not remember, at this moment, the names of those parishes.

1481. I think at Colchester there have been two parishes omitted by accident, Saint Andrews, Greenstead, and Lexton?—Yes, those should be included.

1482. At Shorncliffe what is there?—Dover; nothing else.

1483. That we will come to; we go now to the few places: it is proposed to extend the Act to the town of Gravesend?—Yes.

1484. And to extend it to the limits of the parishes of Gravesend, Milton, Northfleet, Denton, and Chalk?—Yes.

1485. Do you suggest any other parish?—
No,

No, that district will be large enough; it will include all I desire.

1486. Sir *James Elphinstone*.] Would Dartford come into it?—No; it is nearer Woolwich.

1487. *Chairman*.] It is proposed to include Maidstone with the limits of the parishes of Maidstone, Barming, East Farleigh, Loose, Boighton, Monchelsea, Allington, and the hamlet of Tovil?—That is the district I propose.

1488. At Winchester, the limits of the Parliamentary borough of Winchester?—Yes.

1489. At Dover, the limits of the parishes of Buckland, Charlton, Hougham, St. Mary's, St. James', Eastcliffe (extra-parochial), and Guston?—Yes.

1490. At Walmer and Deal, the limits of the parishes of Walmer, Deal, Sholden, Monyeham, Ringwood, and Ripple?—Yes.

1491. At Canterbury, the limits of the following parishes or ecclesiastical districts, namely, Saint Andrew, All Saints, Saint Alphage, Saint Mary Bradin, Saint Mary Bredman, Saint George-the-Martyr, Saint Mary Magdalen, Saint Margaret, Saint Mildred, Saint Paul, Saint Peter-the-Archbishop's Palace, Saint Dunstan, Christ Church, Saint Gregory, Staplegate, Westgate Within, Westgate Without, Saint Augustine, and Old Castle?—That is the list.

1492. You will be kind enough to furnish the Committee with the names of the places you wish to include in the borough of Windsor?—Yes.

1493. I understand that, in all these recommendations, you still adhere to the first recommendation, that the power should be extended so as to make it continuous with the power under the Metropolitan Police Act, namely to 15 miles?—Yes, I think so.

1494. Mr. *Mitford*.] Do you think it would be desirable, instead of mentioning, as you have been doing, special places to be inserted in a Schedule, to give power to Her Majesty in Council to apply the Act to all naval and military stations as it might seem desirable?—I think, perhaps, the way you put it would be the best.

1495. Why?—It would save a considerable amount of detail, at all events.

1496. It might save applying to Parliament constantly for additions to these places, might it not?—Just so. It would be quite in the spirit of the recommendation I ventured to give to Lord Lifford's Committee, that all naval and military places should be included.

1497. It was one of the recommendations of Lord Lifford's Committee?—I took the liberty

of suggesting it when I appeared before that Committee.

1498. In working the Act, might you not find that certain places were not now included in the Schedule, to which you might advantageously extend the operation of the Act without increasing the police force?—Yes; I have considered the question with reference to economy of police, and consider your suggestion of much importance.

1499. Sir *John Simeon*.] Do you see, practically, any good reason why any one place, being a military or naval station, should be under the operation of the Act, while another military or naval station should be exempted?—I think the way the Honourable Member who last questioned me put it is best, that you should be able to include, without applying to Parliament, certain places which have naval or military forces in them.

1500. Captain *Grosvenor*.] You think, in fact, that, as regards this Act, every naval or military station should be a centre of its operation?—I quite think so.

1501. Sir *John Trelawny*.] Have you any experience with regard to the militia?—No, I have not.

1502. Mr. *Mitford*.] Supposing those places that you have mentioned were attached to the places now under the Act, would the force of police you have in those places suffice to work it?—No.

1503. Lord *Charles Bruce*.] Have you made any estimate of the force you would require?—No, I have not; I did not know to what extent the Committee would go into that.

1504. *Chairman*.] Have you prepared any Tables which you can lay before the Committee?—Yes, I have prepared certain Tables to show the operation of the Act in the year 1868; that is, for the last 12 months.

1505. Will you hand them in?—Yes.—(*The same were handed in, vide Appendix.*)

1506. Mr. *Dabrymple*.] Do you believe it to be possible to carry out the police supervision excepting through the metropolitan force; do you think it would be well to trust it in the district to the local force?—I do not think it would be desirable to do so, because there are conflicting jurisdictions. Take Davenport, for example; you would have three or four jurisdictions start up the moment you proposed it; you would have the borough of Plymouth, the borough of Davenport, and the county jurisdictions, conflicting.

Thursday, 8th July 1869.

MEMBERS PRESENT:

Dr. Brewer.
Lord Charles Bruce.
Lord Eustace Cecil.
Mr. Childers.
Mr. Donald Dalrymple.
Sir James Elphinstone.
Marquess of Hamilton.
Mr. Kinnaird.

Mr. Mitford.
Sir John Pakington.
Mr. Rathbone.
Mr. Tipping.
Sir John Trelawny.
Captain Vivian.
Mr. Percy Wyndham.

CAPTAIN THE HON. J. C. W. VIVIAN, IN THE CHAIR.

Mr. JOHN SIMON, F.R.S., re-called; and further Examined.

Mr.
J. Simon,
F.R.S.
8 July 1869.

1507. *Chairman.*] In addition to the evidence which you were kind enough to give to the Committee on a previous occasion, I wish to ask you one question: you will be pleased to understand that we do not wish that you should give, directly or indirectly, any expression of opinion as to whether it would be advisable or not advisable, or possible or not possible, to extend the operation of this Act to the civil population; but I wish to ask you simply, in the event of its being thought desirable to extend this investigation further in that direction in the ensuing Parliament, the nature of the evidence which you think it would be desirable to collect between now and then in order to facilitate such investigation?—I have already had occasion to consider that question, looking upon it as within the ordinary limits of our departmental inquiries in the Council Office; but whether the essential evidence can be got in the interval between the present time and the next sitting of Parliament is, I think, doubtful. However, the kind of evidence is this: one wants to compare countries where prostitutes are under systematic sanitary regulation with countries where the commerce is not regulated; to compare the quantities of venereal diseases in the two classes of countries; and, in my opinion, very particularly to compare the quantities of true syphilis in the two classes of countries; and then, secondly, one wants to compare the now regulated countries in their present state with the same countries in their previous state of non-regulation; so as to see, for instance, what France has gained, what Prussia has gained, what Austria has gained, and so forth, first, against venereal diseases generally, and, secondly, against true syphilis. I fear that when one endeavours to get answers to questions of this kind, it will be found that records are imperfect, and that no sufficient means exist for fully answering the questions; but those are the questions to be asked. Failing a satisfactory answer to those questions (and, indeed, whether those questions are answered or not, for, even if they are answered, still we should be glad to have auxiliary evidence), we should want to make critical inquiry as to what good has been got in the most satisfactory military experience or naval experience of this country; and there, again, I fear that the evidence as

yet obtainable will be insufficient, and that some time must be let elapse before satisfactory answers can be given. The army statistics which I have looked at do not distinguish true venereal disease. Everyone knows how good the system of army statistics is: there is not, I suppose, a better statistician in the country than Dr. Balfour; and his system of statistics is admirable; but until attention is drawn particularly to such questions as are now under discussion, the importance of discriminating cases of true syphilis from other venereal diseases would hardly suggest itself to statisticians, and would be lumped together as venereal diseases. Recently a discrimination has been made between sores and discharges; but that is not sufficient for the purpose; we should want to know, in regard to superintended populations, such as the army and navy, what difference there is between years before and years after the adoption of the Act as regards the number of first attacks of secondary syphilis. I believe that would be the simplest way of getting what we want to get; not to inquire about sores, because the sores which give secondary syphilis are probably often overlooked; but to fix our attention on the first outbreak of secondary syphilis, and to ascertain how many first outbreaks there were of secondary syphilis in given years before the adoption of the system, and how many in given years after it.

1508. Therefore you suggest that in this interval all the statistics which we can get, with regard to those points to which you have referred, should be collected from those countries in which a law similar to this is in operation?—Yes.

1509. And that we should in our own country collect still more definite statistics with regard to the operation of the Act in military districts in this country?—Yes.

1510. Mr. *Percy Wyndham.*] I suppose that you would attach great importance to finding out the comparative amount of disease in countries where the repressive measures have been carried out, as compared with those countries in which they have not been carried out?—I attach importance to that as one element of comparison.

1511. Supposing that evidence were to go to show that in one country in which repressive measures had been carried out there was more disease

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disease than in another country where those measures had not been carried out, would it be altogether a safe conclusion to arrive at, that repressory measures were therefore futile?—Certainly not, without considering all circumstances of the compared cases.

1512. *Dr. Brewer.*] Would you object to tell me what definition you attach to the words “secondary syphilis”?—I use the words in the ordinary medical sense.

1513. Do you include in it what is commonly called, or has been lately called, tertiary syphilis?—For the present purpose, I do; the list of first attacks of secondary syphilis would of course exclude all cases of tertiary syphilis.

1514. The reason why I ask you that question is, because I think that we have not been quite satisfied with regard to the use of the words secondary syphilis; “secondary syphilis”; secondary syphilis has been sometimes supposed to be merely that which affects parts not directly inoculated, and which is confined to that?—Yes.

1515. Then it does not include the symptoms arising after a lapse of time, when apparent health has been procured?—Yes, quite in my opinion; I use “secondary” in the sense of ulterior.

1516. Including both?—Including both.

1517. *Mr. Mitford.*] Do you think that it would be desirable, in making these inquiries in foreign countries, to divide them into two parts as regards prostitution; one touching the overt prostitutes, and the other touching what are commonly called clandestine prostitutes?—I think the inquiry to be made in foreign countries ought of course to be as complete as possible.

1518. We have had evidence that the great difficulty in foreign countries is with regard to clandestine prostitution; ought we not to inquire whether any means have been discovered of arresting the disease among clandestine prostitutes?—Yes.

1519. *Mr. Percy Wyndham.*] Could you inform the Committee whether you think the most satisfactory way of gathering this evidence would be by having over one or more witnesses from other countries, or whether it would not be more satisfactory, and more likely that we should get a more detailed and general account, if the Government were by letter to apply to foreign Governments to furnish us with information under various detailed heads?—I suppose that the easiest way of proceeding would be in the first instance by letter. If my department had to undertake this part of the business, no doubt we should communicate with the Foreign Office upon the subject. Particular questions would of course require a good deal of planning. I think it very possible that afterwards some one might have to go on the Continent to get more precise information upon particular points. Then it might turn out that there were reasons to believe that if this Committee sat again next year, admirable information could be brought over by this or that person coming here from a particular place, but to say beforehand that such information could be got, is more than I can say. My answer is intended to apply particularly to statistics, and the question I understood only to refer to statistical evidence.

1520. *Dr. Brewer.*] Do you think that any statistics upon which reliance could be placed,

exist in those countries which have been under regulations of the number and character of the cases of the disease existing there previous to those regulations?—I am in great doubt whether there is. That is one of the difficulties which I foresee in getting quite conclusive evidence. I think it quite possible that you will have to wait for the riper experience of our own army and navy.

1521. In France, I suppose, you would trust to the hospitals; there was no collected evidence existing in France, was there, previously?—I should think not; but, as regards the drawing of any very exact conclusions, we are in this very serious embarrassment in the matter: that true syphilis has been a defined disease only within the last few years: indeed I can hardly say that the definition of it is yet complete. Our knowledge of the internal diseases produced by syphilis is almost entirely a growth of the last few years, and is even yet far from finished.

1522. *Mr. Childers.*] Would it not be practicable to obtain in France facts to compare with the facts given in M. Parent Duchâtelet's book many years ago?—Yes, I should think it would be quite possible.

1523. *Mr. Tipping.*] Have not the French had statistics since 1791 upon this subject?—They have had law applying to the subject from a still longer time, I think.

1524. But from that date has not a more general system been established?—I have not the dates in my memory.

1525. Do you think that we could get sufficient statistics or sufficient information as regards the state of things at home, where free trade exists, so as to compare it with the state of things in France, where we know surveillance exists, so as to afford a basis of comparison between this country and a country where we know the system exists and has long existed?—The sort of evidence which we have of the quantity of venereal disease in England is such as I have given in my annual report of this year, and that was the result of special inquiry; that is to say, an inspector from our office attended at a considerable number of dispensaries and hospitals, jotting down for himself the cases as they entered. He watched all the practice of a large hospital for a week, and then of another large hospital, and got the proportion of venereal diseases, and of each kind of venereal disease, in their practice. That kind of information cannot be got from many places on the Continent. It is, I think, only quite recently that any information of that kind could be got from France.

1526. But if we could compare, say, Liverpool to Marseilles, it would be very valuable, would it not, because they are two corresponding places in the two countries?—That would be a very valuable comparison.

1527. *Mr. Childers.*] Do you know whether there is any good evidence about the working of the system in Belgium?—As regards Brussels I believe there is.

1528. You are aware that people have said that the system is most perfect in Belgium, and if it is so, it would be well, would it not, to get the most conclusive evidence as to Belgium which could be obtained?—Yes.

Mr.
J. Simon,
F.R.S.
8 July 1866.

Appendix, No. 1

PAPER handed in by Mr. Sloggett, 24 June 1869.

"ROYAL ADELAIDE," in HAMOAZE, 1869.

RETURN of the Working of the CONTAGIOUS DISEASES ACT at this Port.

1869. WEEK ENDED	Number of Women admitted into Hospital during the Week.	Number of Cases Admitted on the Sick List.																			Average Number of Men Daily under Treatment.			Number of Men in Port and Garrison.				Per-centage of Men who have contracted Venereal Disease in this Port.	
		Primary Sores.						Gonorrhœa.						Other Venereal Diseases.			Total Number of Cases of Disease.												
		Contracted in Port.			Contracted elsewhere.			Contracted in Port.			Contracted elsewhere.			Soldiers. Seamen. Marines.			Soldiers. Seamen. Marines. GRAND TOTAL.				Soldiers. Seamen. Marines. GRAND TOTAL.			Soldiers. Seamen. Marines. GRAND TOTAL.				Primary Sores.	Gonorrhœa.
		Soldiers.	Seamen.	Marines.	Soldiers.	Seamen.	Marines.	Soldiers.	Seamen.	Marines.	Soldiers.	Seamen.	Marines.																
January 2	39	4	1	-	1	-	7	3	-	-	-	1	-	2	13	4	2	19	34	55	26	2,561	5,072	1,466	9,099	054	109		
" 9	26	2	7	1	1	1	10	2	1	1	1	1	-	1	12	11	3	26	41	54	26	2,564	5,562	1,466	9,592	104	135		
" 16	26	5	1	1	2	1	11	-	2	-	2	-	2	20	5	4	29	49	53	28	2,562	6,258	1,466	10,286	068	126			
" 23	31	4	1	3	1	1	6	3	2	-	3	-	1	1	12	9	5	26	58	54	27	2,572	5,960	1,466	9,998	080	110		
" 30	36	5	-	1	-	-	3	-	3	-	3	-	2	8	5	4	17	59	60	29	2,567	6,028	1,428	10,023	059	059			
February 6	35	2	4	4	1	1	5	3	1	-	3	1	-	8	11	6	25	48	51	33	2,566	6,549	1,433	10,550	091	085			
" 13	39	8	3	3	-	2	7	3	1	-	1	-	-	16	8	6	30	47	52	32	2,567	6,445	1,423	10,435	134	105			
" 20	37	4	5	3	-	-	5	5	1	-	4	-	-	10	14	4	28	46	69	28	2,574	6,814	1,420	10,808	111	101			
" 27	31	5	4	1	-	4	3	-	1	1	-	-	1	10	9	2	21	46	56	28	2,577	6,857	1,404	10,838	092	036			
March 6	42	3	4	2	-	-	4	4	-	-	1	-	2	7	10	4	21	46	58	33	2,562	6,548	1,385	10,495	085	076			
" 13	29	4	1	1	-	-	4	1	1	-	-	-	2	10	4	4	18	42	53	33	2,511	5,534	1,292	9,337	064	061			
" 20	27	4	3	3	-	-	6	2	2	-	-	-	3	13	5	11	29	39	50	35	2,495	5,372	1,502	9,369	106	106			
" 27	12	2	3	-	-	-	2	1	1	1	4	3	-	6	5	6	17	27	48	40	2,477	5,251	1,750	9,478	052	031			
April 3	36	3	2	4	-	-	2	2	5	-	-	-	3	8	8	9	25	25	48	38	2,455	5,280	1,840	9,575	093	093			
" 10	36	3	2	-	-	-	2	4	4	-	-	-	1	6	8	4	18	24	51	44	2,208	5,762	1,840	9,810	050	100			
" 17	28	1	1	2	-	-	3	2	2	-	-	-	1	5	6	7	18	22	49	48	2,179	5,783	1,763	9,725	041	071			
" 24	31	1	1	1	-	-	5	1	-	-	-	-	1	6	3	2	11	21	44	48	2,539	5,780	1,702	9,881	030	060			
May 1	29	3	7	-	1	-	4	1	2	4	-	-	1	13	9	3	25	23	39	48	2,261	5,931	1,755	9,950	100	070			
" 8	35	4	2	1	-	1	6	1	1	-	-	-	-	10	5	3	18	24	37	47	2,250	6,761	1,704	10,775	065	073			
" 15	28	3	1	3	1	1	3	5	4	2	1	1	4	13	9	9	31	32	42	49	2,294	7,996	1,710	12,000	058	100			
" 22	34	1	2	1	1	-	2	5	5	2	1	-	-	6	9	6	21	32	38	57	2,274	6,895	1,689	10,858	036	110			
" 29	23	-	1	2	2	3	9	3	1	6	2	1	-	17	10	4	31	32	65	55	1,955	7,290	1,602	10,937	027	118			
June 5	20	1	2	2	-	-	3	1	4	4	-	1	2	5	8	6	19	31	52	51	1,972	7,176	1,661	10,809	046	074			
" 12	-	2	1	7	-	4	7	7	4	4	3	3	-	14	17	12	43	20	58	50	1,931	8,772	1,632	12,335	081	145			

App. No. 2.

Appendix, No. 2.

PAPER handed in by Mr. *W. G. Romaine*, C.B., 28 June 1869.

RETURN of the Number of WOMEN discharged from LOCK HOSPITAL as INCURABLE or as PREGNANT, during the Five Months ending 31st May 1869.

Hospital.	Pregnant.	Incurable.
Portsmouth, Portsea, and Gosport Hospital - - - -	1	-
Royal Albert Hospital, Devonport - - - - -	6	8
TOTAL - - -	7	8

Admiralty, 28 June 1869.

W. G. Romaine,
Secretary of Admiralty.

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App. No. 3.

Appendix, No. 3.

PAPERS handed in by Inspector *John Smith*, 1 July 1869.

CONTAGIOUS DISEASES ACT, 1866.

ALDERSHOT DISTRICT.

RETURN showing the RESIDENCES of the PROSTITUTES in the above-mentioned District on 30 June 1869.

In Private Rooms.	In Brothels.	In Public Houses.	In Beer Houses.	With Parents.	TOTAL.	Remarks.
38	120	1	72	5	243	Seven are now in the Lock Hospital, who have not resided within the district.

John Smith, Inspector.

RETURN showing the BIRTHPLACES of the PROSTITUTES in the above-mentioned District on 30 June 1869.

Berkshire.	Buckinghamshire.	Corwall.	Devonshire.	Dorsetshire.	Essex.	Hampshire.	Kent.	Lancashire.	Lincolnshire.	Middlesex.	Northamptonshire.	Northumberland.	Oxfordshire.	Somersetshire.	Surrey.	Sussex.	Suffolk.	Staffordshire.	Warwickshire.	Wiltshire.	Yorkshire.	At Sea.	Scotland.	Ireland.	Wales.	Channel Islands.	New Zealand.	France.	Prussia.	TOTAL.
13	1	4	17	2	4	46	14	13	2	11	2	1	3	15	30	6	6	3	8	3	11	1	7	13	2	2	1	1	1	243

John Smith, Inspector.

Appendix, No. 4.

PAPERS handed in by Mr. *T. G. Balfour*, M.D., F.R.S., 1 July 1869.

TABLE showing the ADMISSIONS into HOSPITAL per 1,000 of Mean Strength for VENEREAL DISEASES at the following Stations for the Nine Years, 1860-68.

STATIONS.	1860.	1861.	1862.	1863.	1864.	1865.	1866.	1867.	1868.	REMARKS.
Devonport and Plymouth	440	470	367	351	269	360	317	312	280	10 Oct. 1866
Portsmouth - - -	503	485	407	349	337	329	359	378	348	8 Oct. 1866
Chatham and Sheerness -	351	328	313	322	313	292	326	277	275	6 Nov. 1866
Shorncliffe - - -	327	325	233	248	240	233	219	215	297	24 July 1865
Woolwich - - -	473	399	371	292	220	204	219	255	191	6 Nov. 1865
Aldershot - - -	339	361	349	303	321	302	233	261	237	12 April 1867
Isle of Wight - - -	304	295	306	246	288	259	254	327	346	
Winchester - - -	408	350	410	301	363	354	287	288	349	
Canterbury - - -	290	397	441	435	310	239	379	375	407	
Dover - - - -	383	401	337	313	247	183	248	354	376	
London and } Household } } Cavalry }	97	135	127	143	159	147	143	129	133	
Windsor - } Foot Guards }	255	328	348	348	314	316	211	326	343	
Warley - - - -	-	335	290	412	294	313	328	323	330	
Colchester - - -	430	415	464	396	371	355	451	500	537	
Pembroke Dock - -	228	261	217	187	224	184	100	153	159	
Manchester - - -	280	487	455	330	314	382	312	501	312	
Preston - - - -	-	209	358	345	406	370	272	361	379	
Edinburgh - - - -	300	260	278	305	200	286	171	244	157	
Cork - - - - -	346	354	288	294	253	249	160	196	200	
Fermoy - - - - -	208	195	159	213	146	124	140	202	186	
Limerick - - - -	401	360	384	328	308	335	150	272	291	
Curragh - - - -	373	364	306	308	303	258	217	280	243	
Dublin - - - - -	409	363	372	399	368	384	323	333	333	
Belfast - - - - -	-	469	342	300	283	288	215	230	329	

TABLE showing the Ratio of ADMISSIONS into HOSPITAL, for PRIMARY VENEREAL SORES and GONORRHOEA, per 1,000 of Mean Strength at each of the following Stations during the Five Years, 1864-68.

STATIONS.	DISEASES.	1864.	1865.	1866.	1867.	1868.	REMARKS.
Devonport and Plymouth -	Venercal sore - -	110	133	82	76	66	10 Oct. 1866
	Gonorrhœa - -	116	147	169	178	148	
Portsmouth - - -	Venercal sore - -	121	113	100	116	86	8 Oct. 1866
	Gonorrhœa - -	130	137	166	180	188	
Chatham and Sheerness -	Venercal sore - -	88	86	83	71	63	6 Nov. 1866
	Gonorrhœa - -	146	139	161	131	156	
Shorncliffe - - -	Venercal sore - -	82	68	57	42	77	24 July 1868
	Gonorrhœa - -	91	96	111	125	123	
Woolwich - - -	Venercal sore - -	80	76	80	88	46	6 Nov. 1866
	Gonorrhœa - -	86	82	84	115	95	
Aldershot - - -	Venercal sore - -	105	100	81	81	77	12 April 1867
	Gonorrhœa - -	121	112	88	99	100	
Isle of Wight - - -	Venercal sore - -	74	32	11	59	103	
	Gonorrhœa - -	145	164	198	105	148	
Winchester - - -	Venercal sore - -	111	72	46	62	104	
	Gonorrhœa - -	181	206	147	129	172	
Canterbury - - -	Venercal sore - -	68	77	117	119	114	
	Gonorrhœa - -	173	100	131	176	210	
Dover - - -	Venercal sore - -	90	67	90	132	111	
	Gonorrhœa - -	93	73	104	136	181	
London and } Household Cavalry - }	Venercal sore - -	48	50	58	45	50	
	Gonorrhœa - -	46	42	42	47	42	
Windsor - } Foot Guards	Venercal sore - -	192	162	178	171	173	
	Gonorrhœa - -	85	80	67	78	81	
Warley - - -	Venercal sore - -	52	97	79	74	92	
	Gonorrhœa - -	167	192	207	218	181	
Colchester - - -	Venercal sore - -	118	107	173	145	182	
	Gonorrhœa - -	177	168	188	226	214	
Pembroke Dock - - -	Venercal sore - -	65	83	31	28	35	
	Gonorrhœa - -	104	57	52	96	81	
Manchester - - -	Venercal sore - -	104	127	92	177	115	
	Gonorrhœa - -	94	151	148	239	113	
Preston - - -	Venercal sore - -	90	85	75	87	87	
	Gonorrhœa - -	229	207	129	180	192	
Edinburgh - - -	Venercal sore - -	66	112	58	63	46	
	Gonorrhœa - -	97	132	81	129	81	
Cork - - -	Venercal sore - -	76	86	49	72	61	
	Gonorrhœa - -	104	88	63	76	81	
Fermoy - - -	Venercal sore - -	34	44	36	70	47	
	Gonorrhœa - -	71	45	63	94	100	
Limerick - - -	Venercal sore - -	129	71	48	117	114	
	Gonorrhœa - -	91	176	55	106	114	
Curragh - - -	Venercal sore - -	129	97	77	104	85	
	Gonorrhœa - -	93	86	77	104	96	
Dublin - - -	Venercal sore - -	179	150	126	129	139	
	Gonorrhœa - -	107	142	114	122	118	
Belfast - - -	Venercal sore - -	109	46	74	89	56	
	Gonorrhœa - -	96	174	86	70	237	

App. No. 5.

Appendix, No. 5.

PAPER handed in by Mr. *P. Leonard*, M.D., R.N., and referred to in his Evidence,
24 June 1869.

TABLE showing OPERATIONS under the CONTAGIOUS DISEASES ACT during the
Year ending 31 March last (1869).

Number of Examinations of Common Prostitutes at all the Stations under the Act.		Number found Diseased and admitted to Hospital.	Number found Free from Disease.	Number not Examined from Natural Causes (Menstrual Period).	Number Discharged Incurable.
During the Quarter ending 30th June 1868 - -	2,542	1,094	1,118	302	9
During the Quarter ending 30th September - -	3,532	1,293	2,011	225	22
During the Quarter ending 31st December - -	5,073	1,220	3,448	304	14
During the Quarter ending 31st March 1869 - -	6,974	1,254	5,720	503	28
TOTAL - - -	18,121	4,864*	12,297	1,424	73

* 28 being pregnant were not admitted.

N.B.—Many of the same women have been several times examined and in hospital before.

P. Leonard, M.D., R.N.,
Inspector of Certified Hospitals.

Appendix, No. 6.

PAPERS handed in by Mr. Sloggett.

ROYAL ALBERT HOSPITAL, DEVONPORT.

ABSTRACT of LOCK CASES passed through the Hospital between the 3rd December 1863 and the 31st March 1869, giving the respective Per-Centages of Syphilitic and Gonorrhœa Cases, and showing the striking Reduction in the former.

Total Cases of each Class.	Syphilis.			Gonorrhœa.			
	No. of Cases.	Average Days of Treatment.	Per-Centage of Cases.	Number of Cases.	Average Days of Treatment.	Per-Centage of Cases.	
<i>Voluntary System.*</i>							
484 days, 3rd Dec. 1863 to 31st March 1865 (35 beds.)	282	162	38.78	57.45	120	31.32	42.55
<i>Under the Act of 1864.</i>							
548 days, 1st April 1865 to 30th Sept. 1866 (Average 58½ beds.)	422	196	64.51	46.45	226	50.5	53.55
<i>Under the Act of 1866.</i>							
182 days, 1st Oct. 1866 to 31st March 1867 (62 beds.)	155	54	92.11	34.84	101	61.5	65.16
183 days, 1st April 1867 to 30th Sept. 1867 (62 beds.)	168	60	79.21	35.72	108	48.	64.28
182 days, 1st Oct. 1867 to 31st March 1868 (91 beds.)	238	86	74.87	36.13	152	35.84	63.87
183 days, 1st April 1868 to 30th Sept. 1868 (Average 136½ beds.)	754	193	58.36	25.60	561	22.86	74.40
182 days, 1st Oct. 1868 to 31st March 1869 (162 beds.)	835	148	50.84	17.72	687	26.36	82.28
	2,854	800			1,035		

* Under the "Voluntary System" 48 Syphilitic Patients and 20 cases of Gonorrhœa were discharged uncured, at their own request.

RETURN showing the Total Number of LOCK CASES passed through the ROYAL ALBERT HOSPITAL, DEVONPORT, between the 3rd December 1863 and the 31st March 1869, giving the respective Per-Centages of Syphilitic and Gonorrhœa Cases, and showing the Reduction in the first-mentioned Cases.

Total Cases of each Class.	Syphilis.			Gonorrhœa.			DETAIL OF SYPHILITIC CASES.																		
	Number of Cases.	Average Days of Treatment.	Per-Centage of Cases.	Number of Cases.	Average Days of Treatment.	Per-Centage of Cases.	Primary.			Secondary.			Primary and Secondary.			Primary and Gonorrhœa.			Secondary and Gonorrhœa.			Primary, Secondary, and Gonorrhœa.			
							Number of Cases.	Average Days of Treatment.	Per-Centage of Cases.	Number of Cases.	Average Days of Treatment.	Per-Centage of Cases.	Number of Cases.	Average Days of Treatment.	Per-Centage of Cases.	Number of Cases.	Average Days of Treatment.	Per-Centage of Cases.	Number of Cases.	Average Days of Treatment.	Per-Centage of Cases.	Number of Cases.	Average Days of Treatment.	Per-Centage of Cases.	Number of Cases.
<i>Voluntary System.*</i>																									
484 days, 3rd Dec. 1863 to 31st March 1865 (35 beds.)	282	102	38.78	57.45	120	31.32	42.55	55	33.20	19.50	45	39.42	15.06	3	64.00	1.00	17	38.41	6.03	41	40.60	14.54	1	170.	.36
<i>Under the Act of 1864.</i>																									
548 days, 1st April 1865 to 30th Sept. 1866 (Average 58½ beds.)	422	196	64.51	46.45	226	50.5	53.55	32	78.5	7.58	1	30.	.24	11	58.00	2.01	60	59.	14.22	84	50.00	10.90	8	121.	1.90
<i>Under the Act of 1866.</i>																									
182 days, 1st Oct. 1866 to 31st March 1867 (62 beds.)	155	54	92.11	34.84	101	61.5	65.16	2	85.5	1.29	-	-	-	2	136.5	1.29	19	67.50	12.20	26	98.5	16.77	5	137.5	3.23
183 days, 1st April 1867 to 30th Sept. 1867 (62 beds.)	168	60	79.21	35.72	108	48.	64.28	1	125.	.59	-	-	-	1	96.00	.59	28	78.	16.67	25	77.	14.80	5	84.5	2.08
182 days, 1st Oct. 1867, to 31st March 1868 (91 beds.)	238	86	74.87	36.13	152	95.84	63.87	1	125.	.42	-	-	-	-	-	-	34	75.27	14.28	42	72.30	17.65	0	79.83	3.78
183 days, 1st April 1868 to 30th Sept. 1868 (Average 136½ beds.)	754	193	58.90	25.60	561	22.86	74.40	13	29.04	1.73	5	84.41	.67	1	129.00	.13	81	61.02	10.74	77	40.06	10.21	10	100.87	2.12
182 days, 1st Oct. 1868 to 31st March 1869 (102 beds.)	835	148	56.84	17.72	687	26.36	82.28	21	64.35	2.51	8	43.25	.96	3	61.00	.36	47	56.66	5.63	61	56.66	7.30	8	56.14	.96
	2,854	809			1,055			125			50			21			280			356			52		

* Under the " Voluntary System " 48 Syphilitic Patients and 20 cases of Gonorrhœa were discharged uncured, at their own request.

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Appendix, No. 7.

PAPERS handed in by Mr. Mallalieu.

CONTAGIOUS DISEASES ACT, 1866.

App. No. 7.

RETURN showing the DATES upon which the CONTAGIOUS DISEASES ACT was put in Operation:

DISTRICT.	Date on which Act Commenced.
WOOLWICH - - - - -	14th November 1866.
ALDERSHOT - - - - -	12th April 1867.
WINDSOR - - - - -	1st April 1868.
SHORNCLIFFE - - - - -	27th August 1869.
COLCHESTER - - - - -	1st February 1869.
CHATHAM - - - - -	10th November 1866.
SHEERNESS - - - - -	26th October 1866.
PORTSMOUTH - - - - -	10th October 1866.
DEVONPORT - - - - -	8th October 1866.

RETURN showing the Number of POLICE employed in carrying out the Provisions of the CONTAGIOUS DISEASES ACT.

DISTRICT.	Inspectors.	Sergeants.	Constables.	TOTAL.
WOOLWICH - - - - -	1	-	-	1
ALDERSHOT - - - - -	1	1	5	7
WINDSOR - - - - -	-	-	1	1
SHORNCLIFFE - - - - -	1	-	2	3
COLCHESTER - - - - -	1	-	2	3
CHATHAM - - - - -	1	-	-	1
SHEERNESS - - - - -	1	-	-	1
PORTSMOUTH - - - - -	1	1	3	5
DEVONPORT - - - - -	1	1	3	5
TOTAL - - - - -	8	3	16	27

RETURN showing the Number of PERSONS who have been brought before MAGISTRATES for OFFENCES against Act, for Year ended May 1869.

DISTRICT.	Refusing to attend for Examination.	Offences against Hospital Regulations.	Harbouring Diseased Women.	Other Offences against the Act.
WOOLWICH - - - - -	-	22	-	-
ALDERSHOT - - - - -	-	6	-	1
WINDSOR - - - - -	-	3	-	-
SHORNCLIFFE - - - - -	1	1	-	-
COLCHESTER - - - - -	3	2	-	-
CHATHAM - - - - -	-	5	-	3
SHEERNESS - - - - -	-	-	-	-
PORTSMOUTH - - - - -	1	17	-	20
DEVONPORT - - - - -	3	10	2	-
TOTAL - - - - -	8	75	2	24

0.87.

N 3

RETURN showing the Number of PROSTITUTES who have entered HOMES, or Returned to their FRIENDS, for the Year ended March 1869.

DISTRICT.	Entered Homes, &c.	Returned to Friends.
WOOLWICH - - - - -	19	36
ALDERSHOT - - - - -	18	20
WINDSOR - - - - -	3	12
SHORNCLIFFE - - - - -	9	5
COLCHESTER - - - - -	2	5
CHATHAM - - - - -	24	45
SHEERNESS - - - - -	-	6
PORTSMOUTH - - - - -	43	60
DEVONPORT - - - - -	50	25
TOTAL - - - - -	177	214

RETURN showing the Number of PROSTITUTES brought under the Provisions of the Contagious Diseases Act, for the Four Quarters under mentioned.

DISTRICT.	QUARTER ENDED	Number of Beds in Lock-wards of Hospitals.	Number Admitted to Hospital, Certificates of Visiting Surgeon.	Number Examined and found free from Disease.	Number who submitted Voluntarily under Section 17.	Number against whom it was necessary to proceed by Informations before Magistrates.	Total Number brought under Provisions of the Act.	Number Discharged from Hospitals.					Total Number Discharged.
								Number Discharged free from Disease, who still follow their former Pursuits.	Number who have entered Homes, &c.	Number who have Returned to their Friends.	Number Discharged as incurable.		
ABSTRACT	30 June 1868 - - -	484	1,094	1,118	2,204	8	2,212	925	28	40	9	1,002	
	30 November 1868 - - -	517	1,296	2,011	3,306	1	3,307	1,110	48	29	22	1,259	
	31 December 1868 - - -	517	1,220	3,448	4,661	7	4,668	1,125	50	47	14	1,236	
	13 Weeks ended 1 April (1869) - - - - -	542	1,254	5,720	6,957	17	6,974	1,124	51	48	28	1,251	
		542	4,864	12,297	17,128	33	17,161	4,284	177	214	73	4,748	
WOOLWICH	30 June 1868 - - -	40	145	141	284	2	286	111	2	1	2	116	
	30 November 1868 - - -	40	131	169	300	-	300	100	6	18	2	126	
	31 December 1868 - - -	40	140	376	516	-	516	124	6	8	2	140	
	13 Weeks ended 1 April (1869) - - - - -	40	125	429	554	-	554	116	5	9	3	153	
		40	541	1,115	1,654	2	1,656	451	19	36	9	515	
ALDERSHOT	30 June 1868 - - -	70	175	298	467	6	473	140	5	5	1	151	
	10 September 1868 - - -	70	228	502	730	-	730	211	6	8	3	228	
	31 December 1868 - - -	70	208	761	960	-	960	201	4	3	-	208	
	13 Weeks ended 1 April (1869) - - - - -	70	185	943	1,128	-	1,128	185	3	4	4	196	
		70	796	2,504	3,294	6	3,300	757	18	20	8	783	
WINDSOR	30 June 1868 - - -	20	26	69	95	-	95	19	-	3	-	22	
	30 September 1868 - - -	20	32	34	66	-	66	20	-	2	-	22	
	31 December 1868 - - -	20	33	71	104	-	104	32	-	2	-	34	
	13 Weeks ended 1 April (1869) - - - - -	20	26	128	154	-	154	21	3	-	1	25	
		20	117	302	419	-	419	92	3	7	1	103	

SELECT COMMITTEE ON CONTAGIOUS DISEASES ACT (1866).

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RETURN showing the Number of Prostitutes brought under the Provisions of the Contagious Diseases Act, &c.—continued.

DISTRICT.	QUARTER ENDED	Number of Beds in Lock-wards of Hospitals.	Number admitted to Hospital on Certificates of Visiting Surgeon.	Number Examined and found free from Disease.	Number who submitted Voluntarily under Section 17.	Number against whom it was necessary to proceed by Informations before Magistrates.	Total Number brought under Provisions of the Act.	Number Discharged from Hospital.				Total Number Discharged.
								Number Discharged free from Disease, who still follow their former Pursuits.	Number who have entered Homes, &c.	Number who have Returned to their Friends.	Number charged as incurable.	
SHORNCLIFFE	30 June 1868	-	-	-	-	-	-	-	-	-	-	-
	30 September 1868	25	70	159	228	1	229	38	3	3	-	44
	31 December 1868	25	94	239	270	-	270	31	3	2	1	37
	13 weeks ended 1 April (1869)	25	56	215	271	-	271	44	3	-	1	48
		25	160	610	769	1	770	113	9	5	2	129
COLCHESTER	30 June 1868	-	-	-	-	-	-	-	-	-	-	-
	30 September 1868	-	-	-	-	-	-	-	-	-	-	-
	31 December 1868	-	-	-	-	-	-	-	-	-	-	-
	13 weeks ended 1 April (1869)	25	43	156	197	2	199	14	2	5	-	21
		25	43	156	197	2	199	14	2	5	-	21
CHATHAM	30 June 1868	75	160	129	289	-	289	166	2	1	-	169
	30 September 1868	75	172	263	435	-	435	144	6	23	1	174
	31 December 1868	75	151	465	616	-	616	139	10	14	1	164
	13 weeks ended 1 April (1869)	75	172	515	687	-	687	147	6	7	3	163
		75	655	1,372	2,027	-	2,027	596	24	45	5	670
SHEFFNESS	30 June 1868	5	16	65	81	-	81	11	-	1	-	12
	30 September 1868	5	15	73	88	-	88	15	-	2	-	17
	31 December 1868	5	13	80	93	-	93	13	-	1	-	14
	13 weeks ended 1 April (1869)	5	27	83	110	-	110	23	-	2	-	25
		5	71	301	372	-	372	62	-	6	-	68
PORTSMOUTH	30 June 1868	120	200	246	446	-	446	175	6	16	3	200
	30 September 1868	120	226	480	706	-	706	191	11	19	5	226
	31 December 1868	120	220	532	752	-	752	136	12	14	8	220
	13 weeks ended 1 April (1869)	120	213	1,712	1,915	10	1,925	184	14	11	5	214
		120	859	2,970	3,819	10	3,829	736	43	60	21	860
DEVONPORT	30 June 1868	154	372	170	542	-	542	303	13	13	3	332
	30 September 1868	162	422	331	753	-	753	391	16	4	11	422
	31 December 1868	162	421	927	1,341	7	1,348	399	15	3	2	419
	13 weeks ended 1 April (1869)	162	407	1,539	1,941	5	1,946	390	15	5	12	422
		162	1,622	2,967	4,577	12	4,589	1,483	59	25	28	1,595

RETURN showing the Number of SEAMEN, SOLDIERS, and MARINES, admitted to their respective Hospital to the Service; also, the Number of Men in Garrison and Port, with the

DISTRICT.	QUARTER ENDED	Number of Patients Admitted into												Number of Patients Treated on Board Ships in Port.				Total Number of Patients Admitted to Hospital.
		Naval Hospital.				Military Hospital.				Marine Infirmary.								
		Primary Sores and Gonorrhoea.		Other Venereal Diseases.	TOTAL.	Primary Sores and Gonorrhoea.		Other Venereal Diseases.	TOTAL.	Primary Sores and Gonorrhoea.		Other Venereal Diseases.	TOTAL.	Primary Sores and Gonorrhoea.		Other Venereal Diseases.	TOTAL.	
		Contracted in District.	Contracted Elsewhere.			Contracted in District.	Contracted Elsewhere.			Contracted in District.	Contracted Elsewhere.			Contracted in District.	Contracted Elsewhere.			
ABSTRACT	30 June 1868	222	45	36	303	812	423	352	1,587	240	60	51	351	71	57	14	142	2,333
	30 September 1868	130	79	95	304	1,260	369	413	2,042	287	103	101	491	196	126	62	384	3,221
	31 December 1868	144	36	82	262	1,022	278	322	1,622	149	59	85	293	113	66	49	228	2,405
	13 Weeks ended 2 April (1869)	68	51	68	187	924	315	308	1,547	150	53	63	266	124	74	28	226	2,936
		564	211	281	1,056	4,018	1,385	1,395	6,798	826	275	300	1,401	504	323	153	980	10,235
WOOLWICH	30 June 1868	-	-	-	-	96	95	69	260	38	41	16	95	-	-	-	-	333
	30 September 1868	-	-	-	-	83	78	38	199	25	53	21	99	3	8	-	11	309
	31 December 1868	-	-	-	-	83	65	39	187	13	34	6	53	2	2	-	4	241
	13 Weeks ended 2 April (1869)	-	-	-	-	81	47	52	180	16	22	10	48	-	-	-	-	238
		-	-	-	-	343	285	198	826	92	150	53	295	5	10	-	15	1,136
ALDENBIOT	30 June 1868	-	-	-	-	198	231	177	606	-	-	-	-	-	-	-	-	696
	30 September 1868	-	-	-	-	431	120	191	742	-	-	-	-	-	-	-	-	742
	31 December 1868	-	-	-	-	371	75	123	569	-	-	-	-	-	-	-	-	569
	13 Weeks ended 2 April (1869)	-	-	-	-	309	86	133	528	-	-	-	-	-	-	-	-	623
		-	-	-	-	1,309	512	624	2,445	-	-	-	-	-	-	-	-	-
WINDSOR	30 June 1868	-	-	-	-	46	4	7	57	-	-	-	-	-	-	-	-	57
	30 September 1868	-	-	-	-	29	44	22	95	-	-	-	-	-	-	-	-	95
	31 December 1868	-	-	-	-	38	10	16	64	-	-	-	-	-	-	-	-	64
	13 Weeks ended 2 April (1869)	-	-	-	-	22	24	4	50	-	-	-	-	-	-	-	-	51
		-	-	-	-	135	82	49	266	-	-	-	-	-	-	-	-	-
SHORNCLIFFE	30 June 1868	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
	30 September 1868	-	-	-	-	50	23	23	96	-	-	-	-	-	-	-	-	96
	31 December 1868	-	-	-	-	37	28	21	86	-	-	-	-	-	-	-	-	86
	13 Weeks ended 2 April (1869)	-	-	-	-	39	63	17	119	-	-	-	-	-	-	-	-	119
		-	-	-	-	126	114	61	301	-	-	-	-	-	-	-	-	-

suffering from CONTAGIOUS DISEASES, the Number of Men constantly under Treatment, and Number of Days Lost Per-centage of Men Diseased for the Four Quarters under-mentioned.

Total Number Admitted also Contracted the Disease within the District.	Average Number constantly under Treatment.					Number of Days Lost to the Service.				Average Number of Men in Garrison and Port.				Annual Ratio of Admissions per Cent. of Strength.	Annual Ratio of Men Admitted suffering from Primary Diseases who Contracted the same within the District.	Annual Ratio of Men constantly under Treatment in Hospital.
	Naval Hospital.	Military Hospital.	Marine Infirmary.	Ships in Port.	TOTAL.	Seamen.	Soldiers.	Marines.	TOTAL.	Seamen.	Soldiers.	Marines.	TOTAL.			
1,345	156	326	80	15	587	15,051	29,666	8,190	52,871	14,711	29,623	6,968	51,302	18.68	10.48	1.14
1,573	153	517	106	53	829	13,673	45,832	15,226	74,731	17,625	31,314	6,595	55,534	23.20	13.49	1.49
1,428	143	425	77	39	689	11,641	39,566	11,929	63,136	15,040	29,006	6,253	50,299	19.12	11.35	1.36
1,266	157	435	66	27	685	12,290	38,615	10,479	61,384	13,893	31,800	6,325	52,018	17.11	9.73	1.31
3,912	153	426	85	33	697	52,619	153,679	45,824	252,122	15,317	30,435	6,535	52,288	19.59	11.30	1.33
134	-	69	44	-	113	-	6,279	4,004	10,283	688	4,895	1,430	7,013	20.25	7.64	1.61
111	-	60	39	1	100	1,036	5,549	2,747	9,332	772	4,017	984	5,773	21.41	7.69	1.70
93	-	51	30	1	82	549	4,674	2,194	7,417	614	4,276	1,010	5,900	16.54	6.64	1.33
97	-	56	21	-	77	365	5,176	1,539	7,080	672	4,250	1,013	5,935	15.37	6.54	1.29
440	-	59	34	-	93	1,950	21,678	10,484	34,112	687	4,359	1,109	6,155	18.45	7.14	1.51
193	-	61	-	-	61	-	5,551	-	5,551	-	12,776	-	12,776	18.97	6.19	0.47
431	-	179	-	-	179	-	16,310	-	16,310	-	13,822	-	13,822	21.47	12.47	1.29
371	-	136	-	-	136	-	13,356	-	13,356	-	10,455	-	10,455	21.77	14.19	1.30
309	-	137	-	-	137	-	12,467	-	12,467	-	11,004	-	11,004	19.19	11.23	1.24
1,309	-	123	-	-	123	-	47,684	-	47,684	-	12,014	-	12,014	20.35	10.89	1.06
46	-	11	-	-	11	-	1,001	-	1,001	-	931	-	931	23.26	13.77	1.12
29	-	21	-	-	21	-	1,942	-	1,942	-	882	-	882	43.13	13.18	2.38
38	-	24	-	-	34	-	2,274	-	2,274	-	1,090	-	1,090	23.52	13.97	2.20
22	-	13	-	-	13	-	1,209	-	1,209	-	1,043	-	1,043	19.23	8.46	1.24
135	-	17	-	-	17	-	6,426	-	6,426	-	999	-	999	26.62	13.51	1.70
-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
50	-	44	-	-	44	-	2,792	-	2,792	-	2,115	-	2,115	27.27	14.20	2.03
37	-	22	-	-	22	-	2,083	-	2,083	-	2,008	-	2,008	17.13	7.37	1.09
39	-	30	-	-	30	-	2,730	-	2,730	-	2,336	-	2,336	20.37	6.67	1.23
126	-	32	-	-	32	-	7,650	-	7,605	-	2,153	-	2,153	20.97	8.73	1.43

RETURNS showing the Number of Seamen, Soldiers and Marines Admitted to their respective Hospitals,

DISTRICT.	QUARTER ENDED	Number of Patients Admitted into												Number of Patients Treated on Board Ships in Port.				Total Number of Patients Admitted to Hospital.	
		Naval Hospital.				Military Hospital.				Marine Infirmary.				Number of Patients Treated on Board Ships in Port.					
		Primary Sores and Gonorrhoea.		Other Venereal Diseases.	TOTAL.	Primary Sores and Gonorrhoea.		Other Venereal Diseases.	TOTAL.	Primary Sores and Gonorrhoea.		Other Venereal Diseases.	TOTAL.	Primary Sores and Gonorrhoea.		Other Venereal Diseases.	TOTAL.		
		Contracted in District.	Contracted Elsewhere.			Contracted in District.	Contracted Elsewhere.			Contracted in District.	Contracted Elsewhere.			Contracted in District.	Contracted Elsewhere.				
COLCHESTER	30 June 1868	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
	30 September 1868	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
	31 December 1868	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
	13 Weeks ended 2 April (1869)	-	-	-	-	42	24	14	80	-	-	-	-	-	-	-	-	-	60
		-	-	-	-	42	24	14	80	-	-	-	-	-	-	-	-	-	80
CHATHAM	30 June 1868	-	-	-	-	164	32	44	240	48	8	2	58	-	-	-	-	-	295
	30 September 1868	-	-	-	-	172	44	52	268	55	5	3	63	-	-	-	-	-	331
	31 December 1868	-	-	-	-	106	50	54	210	24	9	1	34	-	-	-	-	-	244
	13 Weeks ended 2 April (1869)	-	-	-	-	94	30	19	143	26	9	-	35	-	-	-	-	-	173
		-	-	-	-	536	156	169	861	153	31	6	190	-	-	-	-	-	1,001
SHEERNESS	30 June 1868	-	-	-	-	5	9	5	29	-	-	-	-	10	29	1	40	69	
	30 September 1868	-	-	-	-	21	5	5	31	-	-	-	-	13	25	6	44	75	
	31 December 1868	-	-	-	-	9	17	3	29	-	-	-	-	13	30	2	45	71	
	13 Weeks ended 2 April (1869)	-	-	-	-	20	14	9	43	-	-	-	-	18	29	2	49	92	
		-	-	-	-	65	45	22	132	-	-	-	-	54	113	11	178	310	
PORTSMOUTH	30 June 1868	109	24	22	155	269	43	26	330	107	5	27	139	45	21	7	73	706	
	30 September 1868	96	31	48	175	327	48	46	421	125	19	74	218	86	31	34	161	963	
	31 December 1868	84	11	40	135	202	25	50	367	61	10	75	146	46	14	27	87	733	
	13 Weeks ended 2 April (1869)	68	21	31	120	200	21	43	264	62	6	49	117	41	19	17	77	512	
		357	87	141	585	1,088	137	165	1,390	355	40	225	620	218	85	85	388	2,933	
DEVONPORT	30 June 1868	113	21	14	148	24	9	24	57	47	6	6	59	16	7	6	29	293	
	30 September 1868	34	48	47	129	147	7	36	190	82	26	3	111	94	62	22	178	668	
	31 December 1868	60	25	42	127	86	8	16	110	51	6	3	60	52	20	20	92	359	
	13 Weeks ended 2 April (1869)	-	30	37	67	117	6	17	140	46	16	4	66	65	26	9	100	313	
		207	124	140	471	374	30	93	497	226	54	16	296	227	115	37	399	1,653	

suffering from Contagious Diseases, the Number of Men constantly under Treatment, &c.—*continued.*

Total Number Admitted who Contracted the Disease within the District.	Average Number constantly under Treatment.					Number of Days Lost to the Service.				Average Number of Men in Garrison and Port.				Annual Ratio of Admissions per Cent. of Strength.	Annual Ratio of Men Admitted suffering from Primary Diseases who Contracted the same within the District.	Annual Ratio of Men constantly under Treatment in Hospital.
	Naval Hospital.	Military Hospital.	Marine Infirmary.	Ships in Port.	TOTAL.	Seamen.	Soldiers.	Marines.	TOTAL.	Seamen.	Soldiers.	Marines.	TOTAL.			
42	-	33	-	-	33	-	1,831	-	1,831	-	1,876	-	1,876	25.64	13.46	1.75
42	-	33	-	-	33	-	1,831	-	1,831	-	1,876	-	1,876	25.64	13.46	1.75
212	-	55	18	-	73	-	5,005	1,638	6,643	-	2,911	1,397	4,308	27.68	19.66	1.64
227	-	66	18	-	84	-	5,783	1,786	7,569	-	3,085	1,264	4,349	30.45	20.88	1.93
130	-	51	15	-	66	-	4,650	1,324	5,974	-	3,082	1,159	4,241	23.01	12.26	1.55
120	-	43	17	-	60	-	3,585	1,587	5,172	-	3,334	1,283	4,617	15.39	10.38	1.29
659	-	53	17	-	70	-	19,323	6,335	25,658	-	3,103	1,275	4,378	24.00	15.73	1.59
25	-	6	-	4	10	364	546	-	910	1,635	593	289	2,517	10.96	3.97	0.39
34	-	7	-	7	14	597	686	109	1,392	1,692	476	313	2,481	12.09	5.48	0.56
22	-	8	-	7	15	561	716	123	1,400	1,221	573	265	2,059	14.39	4.28	0.72
33	-	11	-	7	18	548	1,068	80	1,696	1,228	665	183	2,076	17.72	7.02	0.86
119	-	8	-	6	14	2,070	3,016	312	5,398	1,444	576	263	2,283	13.57	5.21	0.61
530	119	81	12	5	217	11,284	7,371	1,092	19,747	6,286	4,835	2,725	13,846	20.36	15.31	1.56
634	108	91	29	23	251	5,943	8,211	8,764	22,918	7,342	4,425	2,628	14,395	26.82	17.62	1.74
483	97	96	18	13	224	4,183	8,409	7,000	19,592	6,290	4,996	2,385	13,671	21.51	14.13	1.63
371	93	67	14	14	188	5,007	6,154	5,999	17,160	6,045	4,740	2,364	13,149	17.58	11.28	1.42
2,018	104	84	18	14	220	26,417	30,145	22,855	79,417	6,491	4,749	2,525	13,765	21.67	14.66	1.59
200	37	43	16	6	102	3,367	3,913	1,456	8,736	6,102	2,632	1,127	9,861	11.88	8.11	1.03
337	45	49	20	22	136	6,097	4,459	1,820	12,376	7,819	2,492	1,406	11,717	20.75	12.18	1.16
249	51	37	14	18	120	6,348	3,404	1,288	11,040	6,915	2,526	1,434	10,875	14.31	9.16	1.10
223	64	45	14	6	129	6,370	4,095	1,274	11,739	5,948	2,542	1,482	9,972	14.06	9.14	1.29
1,034	49	43	16	13	121	22,182	15,871	5,838	43,891	6,696	2,548	1,362	10,606	15.67	9.74	1.14

(signed) J. M. Mallatieu.

WOOLWICH DISTRICT.

RETURN showing the Number of SOLDIERS, SEAMEN, and MARINES, Admitted to their respective Number of Days Lost to the Service, with the Number of Men in Garrison

WEEK ENDED.	Number of Patients Admitted into												Number of Patients treated on Board Ships in Port.				TOTAL Number of Patients Admitted to Hospital.
	Naval Hospital.				Military Hospital.				Marine Infirmary.								
	Primary Sores and Gonorrhoea.		Other Venereal Diseases.	TOTAL.	Primary Sores and Gonorrhoea.		Other Venereal Diseases.	TOTAL.	Primary Sores and Gonorrhoea.		Other Venereal Diseases.	TOTAL.	Primary Sores and Gonorrhoea.		Other Venereal Diseases.	TOTAL.	
	Contracted in District.	Contracted Elsewhere.			Contracted in District.	Contracted Elsewhere.			Contracted in District.	Contracted Elsewhere.			Contracted in District.	Contracted Elsewhere.			
1868:																	
6 June -	-	-	-	5	14	17	36	3	5	1	9	-	-	-	-	45	
13 "	-	-	-	12	10	10	32	4	3	1	8	-	-	-	-	40	
20 "	-	-	-	10	6	4	20	5	3	3	13	-	-	-	-	33	
27 "	-	-	-	9	9	3	21	1	2	3	6	-	-	-	-	27	
4 July -																	
4 July -	-	-	-	4	3	4	11	1	8	2	11	-	-	-	-	22	
11 "	-	-	-	12	7	1	20	1	3	1	5	-	-	-	-	25	
18 "	-	-	-	9	7	5	21	2	4	4	8	-	-	-	-	29	
25 "	-	-	-	3	7	4	14	1	3	1	5	-	-	-	-	19	
1 August -																	
1 August -	-	-	-	4	5	1	10	2	1	4	7	-	-	-	-	17	
8 "	-	-	-	3	3	1	7	2	9	1	12	-	-	-	-	19	
15 "	-	-	-	8	8	3	19	3	7	1	11	-	-	-	-	30	
22 "	-	-	-	8	2	5	15	2	5	1	8	-	-	-	-	23	
29 "	-	-	-	4	8	2	14	2	2	-	4	-	-	-	-	18	
5 September -																	
5 September -	-	-	-	9	6	3	18	3	4	-	7	-	-	-	-	25	
12 "	-	-	-	4	5	3	12	3	2	2	7	-	-	-	-	19	
19 "	-	-	-	4	7	1	12	2	4	1	7	-	-	-	-	19	
26 "	-	-	-	9	7	3	19	2	3	2	7	-	-	-	-	26	
3 October -																	
3 October -	-	-	-	4	5	4	13	1	4	-	5	-	-	-	-	18	
10 "	-	-	-	8	5	4	17	1	3	-	4	-	-	-	-	21	
17 "	-	-	-	6	5	7	18	2	5	-	7	-	-	-	-	25	
24 "	-	-	-	6	6	4	16	3	3	1	4	-	-	-	-	20	
31 "	-	-	-	3	6	-	9	-	2	-	2	-	-	-	-	11	
7 November -																	
7 November -	-	-	-	8	7	4	19	1	3	1	5	-	-	-	-	24	
14 "	-	-	-	5	4	1	10	-	2	3	5	-	-	-	-	15	
21 "	-	-	-	10	7	4	21	3	-	1	4	-	-	-	-	25	
28 "	-	-	-	7	5	2	12	1	2	-	3	-	-	-	-	15	
5 December -																	
5 December -	-	-	-	4	3	4	11	1	1	-	2	-	-	-	-	13	
12 "	-	-	-	7	5	-	12	1	3	-	4	-	-	-	-	16	
19 "	-	-	-	7	6	4	17	1	3	-	4	-	-	-	-	21	
26 "	-	-	-	2	1	2	5	-	1	-	1	-	-	-	-	6	
1869:																	
2 January -																	
2 January -	-	-	-	16	6	5	27	4	3	-	7	-	-	-	-	34	
9 "	-	-	-	8	2	5	15	1	1	2	4	-	-	-	-	19	
16 "	-	-	-	7	4	8	19	4	4	2	10	-	-	-	-	29	
23 "	-	-	-	6	5	4	15	3	4	-	7	-	-	-	-	22	
30 "	-	-	-	1	2	2	5	2	2	1	5	-	-	-	-	10	
6 February -																	
6 February -	-	-	-	10	2	1	13	3	2	2	7	-	-	-	-	20	
13 "	-	-	-	4	7	6	17	1	2	2	5	-	-	-	-	22	
20 "	-	-	-	4	6	6	16	1	4	-	5	-	-	-	-	21	
27 "	-	-	-	6	3	6	15	-	-	1	1	-	-	-	-	16	
6 March -																	
6 March -	-	-	-	8	4	-	12	-	3	-	3	-	-	-	-	15	
13 "	-	-	-	6	4	7	17	-	-	-	-	-	-	-	-	17	
20 "	-	-	-	11	2	3	16	-	-	-	-	-	-	-	-	16	
27 "	-	-	-	5	1	2	8	-	-	-	-	-	-	-	-	8	
3 April -																	
3 April -	-	-	-	5	4	1	10	-	-	-	-	-	-	-	-	10	
10 "	-	-	-	5	7	2	14	-	-	-	-	1	5	-	6	20	
17 "	-	-	-	7	15	4	26	-	-	-	-	1	-	-	1	27	
24 "	-	-	-	9	5	2	16	-	-	-	-	-	-	-	-	16	
1 May -																	
1 May -	-	-	-	6	11	5	22	-	-	-	-	-	-	-	-	23	
8 "	-	-	-	11	11	2	24	-	-	-	-	-	-	-	-	24	
15 "	-	-	-	5	2	1	8	-	-	-	-	1	2	-	3	11	
22 "	-	-	-	5	12	8	25	-	-	-	-	-	2	-	2	27	
29 "	-	-	-	8	10	1	19	-	-	-	-	-	3	-	3	22	

WOOLWICH DISTRICT.

HOSPITALS Suffering from CONTAGIOUS DISEASES, the Number of Men constantly under Treatment, and and Port for each Week during the Year, June 1868 to May 1869, inclusive.

TOTAL Number Admitted who Contracted the Disease within the District.	Average Number constantly under Treatment.					Number of Days lost to the Service.				Number of Men in Garrison and Port.			
	Naval Hospital.	Military Hospital.	Marine Infirmary.	Ships in Port.	TOTAL.	Seamen.	Soldiers.	Marines.	TOTAL.	Seamen.	Soldiers.	Marines.	TOTAL.
8		62	39		101		434	273	707	656	4,876	1,363	6,895
16		80	40		120		559	280	839	656	4,876	1,363	6,895
15		83	43		126		580	301	881	656	4,876	1,363	6,895
10		79	40		119		555	280	835	656	4,876	1,363	6,895
5		74	41		115		516	287	803	656	4,876	1,363	6,895
13		75	34		109		529	238	767	905	4,421	1,276	6,602
11		73	26		99		510	182	692	905	4,438	1,237	6,580
4		65	37		102		456	259	715	905	4,199	1,247	6,351
6		60	42		102		419	294	713	794	4,293	1,145	6,232
5		46	43		89		324	301	625	794	3,867	1,130	5,791
11		44	41		85		306	287	593	794	3,877	1,109	5,780
10		55	42		97		386	294	680	794	4,052	917	5,763
6		57	38		95		309	269	668	794	3,827	813	5,434
12		62	37		99		431	262	693	619	3,887	815	5,321
7		62	42		104		435	295	730	619	3,973	792	5,384
6		56	43		99		395	297	692	619	3,922	799	5,340
11		58	40		98		407	277	684	619	3,780	769	5,168
5		64	34		98		450	238	688	537	3,789	748	5,074
9		60	34		94		417	241	658	537	3,950	755	5,242
8		49	37		86		347	258	605	537	4,144	1,053	5,734
6		52	32		84		362	225	587	537	4,318	1,053	5,908
3		48	28		76		337	197	534	537	4,154	1,082	5,773
9		49	28		77		340	196	536	548	4,264	1,083	5,895
5		48	26		74		334	183	517	548	4,211	1,071	5,839
13		54	25		79		381	174	555	548	4,142	1,066	5,756
8		57	26		83		398	186	584	548	4,242	1,060	5,850
5		51	27		78		359	190	549	755	4,199	1,059	6,013
8		48	30		78		338	206	544	755	4,275	1,046	6,076
8		49	28		77		346	196	542	755	4,235	1,026	6,016
2		43	26		69		300	182	482	755	4,233	909	5,897
20		46	29		75		322	204	526	981	4,234	988	6,203
9		60	36		90		421	212	633	981	4,782	1,009	6,772
11		65	32		97		457	224	681	981	4,259	1,033	6,273
9		70	31		101		489	215	704	981	4,234	1,066	6,281
3		62	34		96		438	236	673	981	4,229	1,067	6,267
13		52	30		82		366	211	577	536	4,211	1,085	5,832
5		49	26		75		341	186	527	536	4,242	1,064	5,842
5		50	25		75		353	172	525	400	4,238	1,083	5,721
6		51	20		71		356	143	499	636	4,259	743	5,638
8		40	17		66		343	121	464	534	4,260	-	5,337
6		56	13		69		394	90	484	568	4,057	-	4,794
11		61	5		66		428	36	464	516	4,095	-	4,611
5		54	-		54		381	-	381	515	4,128	-	4,643
5		49	-		49		342	-	342	551	4,468	-	5,019
6		51	-	3	54	21	359	-	380	476	4,449	-	4,925
8		59	-	3	62	21	412	-	433	392	4,461	-	4,853
9		63	-	1	64	7	438	-	445	423	4,496	-	4,919
6		64	-	1	65	7	450	-	457	599	4,730	-	5,329
11		75	-	1	76	7	525	-	532	485	4,535	-	5,020
6		75	-	4	79	28	622	-	650	331	4,440	-	4,771
5		68	-	2	70	14	475	-	489	246	4,930	-	5,176
8		79	-	3	82	21	554	-	575	320	4,912	-	5,232

0.87.

ALDERSHOT DISTRICT.

RETURN showing the Number of SOLDIERS, SEAMEN, and MARINES, Admitted to their respective Number of Days Lost to the Service, with the Number of Men in Garrison

WEEK ENDED.	Number of Patients Admitted into												TOTAL Number of Patients Admitted to Hospital.				
	Naval Hospital.				Military Hospital.				Marine Infirmary.					Number of Patients treated on Board Ships in Port.			
	Primary Sores and Gonorrhoea.		Other Venereal Diseases.	TOTAL.	Primary Sores and Gonorrhoea.		Other Venereal Diseases.	TOTAL.	Primary Sores and Gonorrhoea.		Other Venereal Diseases.	TOTAL.		Primary Sores and Gonorrhoea.		Other Venereal Diseases.	TOTAL.
	Contracted in District.	Contracted Elsewhere.			Contracted in District.	Contracted Elsewhere.			Contracted in District.	Contracted Elsewhere.				Contracted in District.	Contracted Elsewhere.		
1868:																	
5 June	-	-	-	-	7	36	15	58	-	-	-	-	-	-	-	-	58
12 "	-	-	-	-	24	24	18	66	-	-	-	-	-	-	-	-	66
19 "	-	-	-	-	16	14	21	51	-	-	-	-	-	-	-	-	51
26 "	-	-	-	-	17	43	32	92	-	-	-	-	-	-	-	-	92
3 July																	
3 July	-	-	-	-	25	13	25	63	-	-	-	-	-	-	-	-	63
10 "	-	-	-	-	24	17	21	62	-	-	-	-	-	-	-	-	62
17 "	-	-	-	-	43	26	14	83	-	-	-	-	-	-	-	-	83
24 "	-	-	-	-	33	16	11	60	-	-	-	-	-	-	-	-	60
31 "	-	-	-	-	33	6	11	50	-	-	-	-	-	-	-	-	50
7 August																	
7 August	-	-	-	-	38	4	13	55	-	-	-	-	-	-	-	-	55
14 "	-	-	-	-	32	5	13	50	-	-	-	-	-	-	-	-	50
21 "	-	-	-	-	39	7	13	59	-	-	-	-	-	-	-	-	59
28 "	-	-	-	-	33	3	21	57	-	-	-	-	-	-	-	-	57
4 September																	
4 September	-	-	-	-	28	6	14	48	-	-	-	-	-	-	-	-	48
11 "	-	-	-	-	41	5	9	55	-	-	-	-	-	-	-	-	55
18 "	-	-	-	-	31	1	13	45	-	-	-	-	-	-	-	-	45
25 "	-	-	-	-	31	11	13	55	-	-	-	-	-	-	-	-	55
2 October																	
2 October	-	-	-	-	23	3	7	33	-	-	-	-	-	-	-	-	33
9 "	-	-	-	-	29	3	13	45	-	-	-	-	-	-	-	-	45
16 "	-	-	-	-	25	3	9	37	-	-	-	-	-	-	-	-	37
23 "	-	-	-	-	25	1	13	39	-	-	-	-	-	-	-	-	39
30 "	-	-	-	-	19	2	9	30	-	-	-	-	-	-	-	-	30
6 November																	
6 November	-	-	-	-	36	1	8	45	-	-	-	-	-	-	-	-	45
13 "	-	-	-	-	22	1	8	31	-	-	-	-	-	-	-	-	31
20 "	-	-	-	-	28	25	14	67	-	-	-	-	-	-	-	-	67
27 "	-	-	-	-	24	3	11	38	-	-	-	-	-	-	-	-	38
4 December																	
4 December	-	-	-	-	20	10	8	38	-	-	-	-	-	-	-	-	38
11 "	-	-	-	-	25	4	4	33	-	-	-	-	-	-	-	-	33
18 "	-	-	-	-	31	7	6	44	-	-	-	-	-	-	-	-	44
25 "	-	-	-	-	19	2	6	27	-	-	-	-	-	-	-	-	27
1869:																	
1 January																	
1 January	-	-	-	-	45	10	7	62	-	-	-	-	-	-	-	-	62
8 "	-	-	-	-	38	4	12	54	-	-	-	-	-	-	-	-	54
15 "	-	-	-	-	31	7	16	54	-	-	-	-	-	-	-	-	54
22 "	-	-	-	-	26	5	14	45	-	-	-	-	-	-	-	-	45
29 "	-	-	-	-	23	7	4	34	-	-	-	-	-	-	-	-	34
5 February																	
5 February	-	-	-	-	22	8	7	37	-	-	-	-	-	-	-	-	37
12 "	-	-	-	-	30	6	6	42	-	-	-	-	-	-	-	-	42
19 "	-	-	-	-	24	6	12	42	-	-	-	-	-	-	-	-	42
26 "	-	-	-	-	19	1	17	37	-	-	-	-	-	-	-	-	37
5 March																	
5 March	-	-	-	-	15	6	10	31	-	-	-	-	-	-	-	-	31
12 "	-	-	-	-	14	2	7	23	-	-	-	-	-	-	-	-	23
19 "	-	-	-	-	31	7	12	50	-	-	-	-	-	-	-	-	50
26 "	-	-	-	-	15	4	7	26	-	-	-	-	-	-	-	-	26
2 April																	
2 April	-	-	-	-	21	23	9	53	-	-	-	-	-	-	-	-	53
9 "	-	-	-	-	22	9	10	41	-	-	-	-	-	-	-	-	41
16 "	-	-	-	-	14	22	18	54	-	-	-	-	-	-	-	-	54
23 "	-	-	-	-	17	11	8	36	-	-	-	-	-	-	-	-	36
30 "	-	-	-	-	22	10	6	38	-	-	-	-	-	-	-	-	38
7 May																	
7 May	-	-	-	-	29	7	17	53	-	-	-	-	-	-	-	-	53
14 "	-	-	-	-	28	6	8	42	-	-	-	-	-	-	-	-	42
21 "	-	-	-	-	16	6	10	32	-	-	-	-	-	-	-	-	32
28 "	-	-	-	-	20	37	7	64	-	-	-	-	-	-	-	-	64

ALDERSHOT DISTRICT.

HOSPITALS Suffering from CONTAGIOUS DISEASES, the Number of Men constantly under Treatment, and and Port for each Week during the Year, June 1868 to May 1869, inclusive.

TOTAL Number Admitted who Contracted the Disease within the District.	Average Number constantly under Treatment.					Number of Days lost to the Service.				Number of Men in Garrison and Port.			
	Marine Infirmary.	Naval Hospital.	Military Hospital.	Ships in Port.	TOTAL.	Seamen.	Soldiers.	Marines.	TOTAL.	Seamen.	Soldiers.	Marines.	TOTAL.
7		155			155		1,085		1,085		13,138		13,188
24		171			171		1,197		1,197		13,141		13,141
16		160			160		1,120		1,120		13,213		13,213
17		178			178		1,246		1,246		14,606		14,606
25		190			190		1,330		1,330		15,912		15,912
24		173			173		1,211		1,211		15,694		15,694
43		188			188		1,316		1,316		16,136		16,136
32		210			210		1,470		1,470		15,769		15,769
33		198			198		1,386		1,386		15,746		15,746
38		188			188		1,316		1,316		15,331		15,331
32		178			178		1,246		1,246		12,970		12,970
39		171			171		1,197		1,197		12,966		12,966
33		175			175		1,225		1,225		12,981		12,981
28		174			174		1,218		1,218		12,316		12,316
41		167			167		1,169		1,169		12,228		12,228
31		165			165		1,155		1,155		10,817		10,817
31		153			153		1,071		1,071		10,825		10,825
23		151			151		1,057		1,057		10,111		10,111
29		142			142		994		994		10,094		10,094
25		139			139		973		973		10,106		10,106
25		132			132		924		924		10,118		10,118
19		127			127		889		889		10,116		10,116
36		128			128		896		896		10,112		10,112
22		136			136		952		952		10,101		10,101
28		153			153		1,071		1,071		10,784		10,784
24		142			142		994		994		10,781		10,781
20		143			143		1,001		1,001		10,790		10,790
25		128			128		896		896		10,788		10,788
31		124			124		868		868		10,817		10,817
19		129			129		903		903		10,827		10,827
45		134			134		938		938		10,825		10,825
38		165			165		1,155		1,155		10,805		10,805
31		157			157		1,099		1,099		10,802		10,802
26		166			166		1,162		1,162		10,809		10,809
23		154			154		1,078		1,078		10,816		10,816
22		136			136		952		952		10,765		10,765
30		134			134		938		938		10,703		10,703
24		154			154		938		938		10,705		10,705
19		136			136		952		952		10,708		10,708
15		124			124		868		868		11,465		11,465
14		118			118		826		826		11,434		11,434
31		114			114		798		798		11,217		11,217
15		113			113		791		791		11,469		11,469
21		130			130		910		910		11,359		11,359
22		122			122		854		854		11,387		11,387
14		112			112		784		784		12,303		12,303
17		127			127		889		889		13,078		13,078
22		130			130		910		910		13,301		13,301
29		135			135		945		945		13,704		13,704
28		149			149		1,043		1,043		12,240		12,240
16		145			145		1,015		1,015		12,229		12,229
20		143			143		1,001		1,001		16,229		16,229

WINDSOR DISTRICT.

RETURN showing the Number of SOLDIERS, SEAMEN, and MARINES, Admitted to their respective Number of Days Lost to the Service, with the Number of Men in Garrison

WEEK ENDED	Number of Patients Admitted into												Number of Patients Treated on Board Ships in Port.				TOTAL Number of Patients Admitted to Hospital
	Naval Hospital.				Military Hospital.				Marine Infirmary.								
	Primary Sores and Gonorrhœa.		Other Venereal Diseases.	TOTAL.	Primary Sores and Gonorrhœa.		Other Venereal Diseases.	TOTAL.	Primary Sores and Gonorrhœa.		Other Venereal Diseases.	TOTAL.	Primary Sores and Gonorrhœa.		Other Venereal Diseases.	TOTAL.	
	Contracted in District.	Contracted Elsewhere.			Contracted in District.	Contracted Elsewhere.			Contracted in District.	Contracted Elsewhere.			Contracted in District.	Contracted Elsewhere.			
1868 :																	
5 June	-	-	-	-	3	-	-	3	-	-	-	-	-	-	-	3	
12 "	-	-	-	-	8	1	-	9	-	-	-	-	-	-	-	9	
19 "	-	-	-	-	3	-	1	4	-	-	-	-	-	-	-	4	
26 "	-	-	-	-	5	-	-	5	-	-	-	-	-	-	-	5	
3 July																	
3 July	-	-	-	-	1	1	-	2	-	-	-	-	-	-	-	2	
10 "	-	-	-	-	3	4	2	9	-	-	-	-	-	-	-	9	
17 "	-	-	-	-	2	-	-	2	-	-	-	-	-	-	-	2	
24 "	-	-	-	-	1	2	-	3	-	-	-	-	-	-	-	3	
31 "	-	-	-	-	6	-	-	6	-	-	-	-	-	-	-	6	
7 August																	
7 August	-	-	-	-	2	4	1	7	-	-	-	-	-	-	-	7	
14 "	-	-	-	-	5	4	-	9	-	-	-	-	-	-	-	9	
21 "	-	-	-	-	1	1	-	2	-	-	-	-	-	-	-	2	
28 "	-	-	-	-	3	-	1	4	-	-	-	-	-	-	-	4	
4 September																	
4 September	-	-	-	-	-	20	7	27	-	-	-	-	-	-	-	27	
11 "	-	-	-	-	-	2	4	6	-	-	-	-	-	-	-	6	
18 "	-	-	-	-	3	5	5	13	-	-	-	-	-	-	-	13	
25 "	-	-	-	-	2	1	2	5	-	-	-	-	-	-	-	5	
2 October																	
2 October	-	-	-	-	2	2	3	7	-	-	-	-	-	-	-	7	
9 "	-	-	-	-	1	2	1	4	-	-	-	-	-	-	-	4	
16 "	-	-	-	-	5	1	2	8	-	-	-	-	-	-	-	8	
23 "	-	-	-	-	1	-	1	2	-	-	-	-	-	-	-	2	
30 "	-	-	-	-	1	-	2	3	-	-	-	-	-	-	-	3	
6 November																	
6 November	-	-	-	-	2	1	1	4	-	-	-	-	-	-	-	4	
13 "	-	-	-	-	4	-	1	5	-	-	-	-	-	-	-	5	
20 "	-	-	-	-	2	-	1	3	-	-	-	-	-	-	-	3	
27 "	-	-	-	-	2	-	2	4	-	-	-	-	-	-	-	4	
4 December																	
4 December	-	-	-	-	3	1	-	4	-	-	-	-	-	-	-	4	
11 "	-	-	-	-	10	1	1	12	-	-	-	-	-	-	-	12	
18 "	-	-	-	-	4	-	-	4	-	-	-	-	-	-	-	4	
25 "	-	-	-	-	-	-	1	1	-	-	-	-	-	-	-	1	
1869 :																	
1 January																	
1 January	-	-	-	-	1	2	-	3	-	-	-	-	-	-	-	3	
8 "	-	-	-	-	5	2	1	8	-	-	-	-	-	-	-	8	
15 "	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
22 "	-	-	-	-	1	1	-	2	-	-	-	-	-	-	-	2	
29 "	-	-	-	-	3	3	-	6	-	-	-	-	-	-	-	6	
5 February																	
5 February	-	-	-	-	-	1	1	2	-	-	-	-	-	-	-	2	
12 "	-	-	-	-	2	3	1	6	-	-	-	-	-	-	-	6	
19 "	-	-	-	-	3	1	-	4	-	-	-	-	-	-	-	4	
26 "	-	-	-	-	4	-	1	5	-	-	-	-	-	-	-	5	
5 March																	
5 March	-	-	-	-	-	2	-	2	-	-	-	-	-	-	-	2	
12 "	-	-	-	-	1	4	-	5	-	-	-	-	-	-	-	5	
19 "	-	-	-	-	1	4	-	5	-	-	-	-	-	-	-	5	
26 "	-	-	-	-	2	1	-	3	-	-	-	-	-	-	-	3	
2 April																	
2 April	-	-	-	-	-	2	-	2	-	-	-	-	-	-	-	2	
9 "	-	-	-	-	-	2	-	2	-	-	-	-	-	-	-	2	
16 "	-	-	-	-	1	1	-	2	-	-	-	-	-	-	-	2	
23 "	-	-	-	-	1	-	-	1	-	-	-	-	-	-	-	1	
30 "	-	-	-	-	1	-	-	1	-	-	-	-	-	-	-	1	
7 May																	
7 May	-	-	-	-	1	-	-	1	-	-	-	-	-	-	-	1	
14 "	-	-	-	-	-	-	-	1	-	-	-	-	-	-	-	1	
21 "	-	-	-	-	1	1	-	1	-	-	-	-	-	-	-	1	
28 "	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	

WINDSOR DISTRICT.

HOSPITALS Suffering from CONTAGIOUS DISEASES, the Number of Men constantly under Treatment, and and Port for each Week during the Year, June 1868 to May 1869, inclusive.

Total Number Admitted who Contracted the Disease within the District.	Average Number constantly under Treatment.					Number of Days lost to the Service.				Number of Men in Garrison and Port.			
	Naval Hospital.	Military Hospital.	Marine Infirmary.	Ships in Port.	TOTAL.	Seamen.	Soldiers.	Marines.	TOTAL.	Seamen.	Soldiers.	Marines.	TOTAL.
3		11			11		77		77				
8		15			15		105		105		980		980
3		15			15		105		105		989		989
5		16			16		112		112		959		959
											956		956
1		13			13		91		91		556		556
3		18			18		126		126		556		556
2		14			14		98		98		501		501
1		14			14		98		98		647		647
6		15			15		105		105		671		671
2		17			17		119		119		1,066		1,066
5		19			19		133		133		1,066		1,066
1		17			17		119		119		1,002		1,002
3		13			13		91		91		1,045		1,045
		38			38		266		266		1,086		1,086
		36			36		252		252		1,087		1,087
3		34			34		238		238		1,089		1,089
2		35			35		245		245		1,095		1,095
2		34			34		238		238		1,102		1,102
1		31			31		217		217		1,122		1,122
5		27			27		189		189		1,116		1,116
1		26			26		182		182		1,121		1,121
1		20			20		140		140		1,132		1,132
2		19			19		133		133		1,100		1,100
4		17			17		119		119		1,087		1,087
2		17			17		119		119		1,103		1,103
2		16			16		112		112		1,077		1,077
3		16			16		112		112		1,074		1,074
10		21			21		147		147		1,069		1,069
4		27			27		189		189		1,068		1,068
		24			24		168		168		1,054		1,054
1		25			25		175		175		1,033		1,033
5		24			24		168		168		1,035		1,035
		18			18		126		126		1,041		1,041
1		11			11		77		77		1,043		1,043
3		12			12		84		84		1,046		1,046
		19			19		133		133		1,076		1,076
2		12			12		84		84		1,084		1,084
3		14			14		98		98		1,102		1,102
4		16			16		112		112		1,107		1,107
		8			8		56		56		1,035		1,035
1		9			9		63		63		1,076		1,076
1		14			14		98		98		1,038		1,038
2		13			13		91		91		891		891
		10			10		70		70		987		987
		12			12		84		84		985		985
1		11			11		77		77		970		970
1		10			10		70		70		978		978
1		9			9		63		63		981		981
1		9			9		63		63		996		996
1		8			8		56		56		978		978
		6			6		42		42		973		973
		5			5		35		35		975		975

0.87.

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SHORNCLIFFE DISTRICT. - - - - -

RETURN showing the Number of SOLDIERS, SEAMEN, and MARINES Admitted, to their respective Number of Days Lost to the Service, with the Number of Men in Garrison.

WEEK ENDED	Number of Patients Admitted into												Number of Patients Treated on Board Ships in Port.				TOTAL Number of Patients Admitted to Hospital.
	Naval Hospital.				Military Hospital.				Marine Infirmary.								
	Primary Sores and Gonorrhœa.		Other Venereal Diseases.	TOTAL.	Primary Sores and Gonorrhœa.		Other Venereal Diseases.	TOTAL.	Primary Sores and Gonorrhœa.		Other Venereal Diseases.	TOTAL.	Primary Sores and Gonorrhœa.		Other Venereal Diseases.	TOTAL.	
	Contracted in District.	Contracted elsewhere.			Contracted in District.	Contracted elsewhere.			Contracted in District.	Contracted elsewhere.			Contracted in District.	Contracted elsewhere.			
1868:																	
6 June -	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
13 "	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
20 "	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
27 "	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
4 July -																	
11 "	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
18 "	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
25 "	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
1 August -																	
8 "	-	-	-	-	7	4	4	15	-	-	-	-	-	-	-	15	
15 "	-	-	-	-	9	4	4	13	-	-	-	-	-	-	-	13	
22 "	-	-	-	-	7	3	5	15	-	-	-	-	-	-	-	15	
29 "	-	-	-	-	5	4	3	12	-	-	-	-	-	-	-	12	
5 September -																	
12 "	-	-	-	-	5	4	1	10	-	-	-	-	-	-	-	10	
19 "	-	-	-	-	6	3	3	9	-	-	-	-	-	-	-	9	
26 "	-	-	-	-	3	2	2	7	-	-	-	-	-	-	-	7	
3 October -																	
10 "	-	-	-	-	3	1	-	4	-	-	-	-	-	-	-	4	
17 "	-	-	-	-	3	4	2	9	-	-	-	-	-	-	-	9	
24 "	-	-	-	-	1	2	1	3	-	-	-	-	-	-	-	3	
31 "	-	-	-	-	6	6	3	15	-	-	-	-	-	-	-	15	
7 November -																	
14 "	-	-	-	-	1	2	3	6	-	-	-	-	-	-	-	6	
21 "	-	-	-	-	3	5	2	10	-	-	-	-	-	-	-	10	
28 "	-	-	-	-	6	2	1	9	-	-	-	-	-	-	-	9	
5 December -																	
12 "	-	-	-	-	5	1	4	10	-	-	-	-	-	-	-	10	
19 "	-	-	-	-	3	2	2	7	-	-	-	-	-	-	-	7	
26 "	-	-	-	-	3	-	2	5	-	-	-	-	-	-	-	5	
1869:																	
2 January -																	
9 "	-	-	-	-	6	-	2	8	-	-	-	-	-	-	-	8	
16 "	-	-	-	-	2	1	1	4	-	-	-	-	-	-	-	4	
23 "	-	-	-	-	4	1	2	7	-	-	-	-	-	-	-	7	
30 "	-	-	-	-	4	1	3	8	-	-	-	-	-	-	-	8	
6 February -																	
13 "	-	-	-	-	3	1	-	4	-	-	-	-	-	-	-	4	
20 "	-	-	-	-	2	7	2	11	-	-	-	-	-	-	-	11	
27 "	-	-	-	-	3	5	3	11	-	-	-	-	-	-	-	11	
6 March -																	
13 "	-	-	-	-	5	8	1	14	-	-	-	-	-	-	-	14	
20 "	-	-	-	-	3	6	-	9	-	-	-	-	-	-	-	9	
27 "	-	-	-	-	1	6	1	8	-	-	-	-	-	-	-	8	
3 April -																	
10 "	-	-	-	-	2	10	-	12	-	-	-	-	-	-	-	12	
17 "	-	-	-	-	1	7	1	9	-	-	-	-	-	-	-	9	
24 "	-	-	-	-	3	9	-	12	-	-	-	-	-	-	-	12	
1 May -																	
8 "	-	-	-	-	5	6	1	12	-	-	-	-	-	-	-	12	
15 "	-	-	-	-	5	5	-	5	-	-	-	-	-	-	-	5	
22 "	-	-	-	-	6	2	-	8	-	-	-	-	-	-	-	8	
29 "	-	-	-	-	5	2	-	7	-	-	-	-	-	-	-	7	
	-	-	-	-	2	3	-	5	-	-	-	-	-	-	-	5	
	-	-	-	-	3	6	-	9	-	-	-	-	-	-	-	9	
	-	-	-	-	6	2	-	9	-	-	-	-	-	-	-	9	
	-	-	-	-	4	5	-	9	-	-	-	-	-	-	-	9	

- - - - - SHORNCLIFFE DISTRICT.

HOSPITALS suffering from CONTAGIOUS DISEASES, the Number of Men constantly under Treatment, and and Port, for each Week during the Year, June 1868 to May 1869, inclusive.

Total Number of Patients Admitted who Contracted the Disease within the District.	Average Number constantly under Treatment.					Number of Days Lost to the Service.				Number of Men in Garrison and Port.			
	Naval Hospitals.	Military Hospital.	Marine Infirmary.	Ships in Port.	TOTAL.	Seamen.	Soldiers.	Marines.	TOTAL.	Seamen.	Soldiers.	Marines.	TOTAL.
-	-	-	-	-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-	-	-	-	-
7	-	52	-	-	52	-	367	-	367	-	2,200	-	2,200
9	-	50	-	-	50	-	347	-	347	-	1,892	-	1,892
7	-	52	-	-	52	-	361	-	361	-	1,911	-	1,911
6	-	47	-	-	47	-	330	-	330	-	2,020	-	2,020
5	-	46	-	-	46	-	325	-	325	-	2,199	-	2,199
5	-	40	-	-	40	-	278	-	278	-	2,188	-	2,188
6	-	39	-	-	39	-	275	-	275	-	2,271	-	2,271
3	-	37	-	-	37	-	257	-	257	-	2,090	-	2,090
3	-	36	-	-	36	-	252	-	252	-	2,088	-	2,088
3	-	30	-	-	30	-	212	-	212	-	2,010	-	2,010
3	-	32	-	-	32	-	222	-	222	-	2,056	-	2,056
1	-	17	-	-	17	-	118	-	118	-	1,812	-	1,812
6	-	20	-	-	20	-	139	-	139	-	1,840	-	1,840
1	-	25	-	-	25	-	172	-	172	-	1,840	-	1,840
-	-	21	-	-	21	-	149	-	149	-	1,821	-	1,821
3	-	22	-	-	22	-	151	-	151	-	2,175	-	2,175
6	-	25	-	-	25	-	176	-	176	-	2,167	-	2,167
5	-	21	-	-	21	-	150	-	150	-	2,114	-	2,114
3	-	23	-	-	23	-	158	-	158	-	2,095	-	2,095
3	-	22	-	-	22	-	157	-	157	-	2,074	-	2,074
-	-	20	-	-	20	-	141	-	141	-	2,082	-	2,082
2	-	20	-	-	20	-	138	-	138	-	2,026	-	2,026
6	-	23	-	-	23	-	163	-	163	-	2,122	-	2,122
2	-	23	-	-	23	-	159	-	159	-	2,142	-	2,142
4	-	23	-	-	23	-	160	-	160	-	2,138	-	2,138
4	-	25	-	-	25	-	177	-	177	-	2,125	-	2,125
4	-	23	-	-	23	-	164	-	164	-	2,121	-	2,121
3	-	24	-	-	24	-	165	-	165	-	2,096	-	2,096
2	-	26	-	-	26	-	183	-	183	-	2,104	-	2,104
3	-	27	-	-	27	-	188	-	188	-	2,131	-	2,131
5	-	34	-	-	34	-	238	-	238	-	2,292	-	2,292
3	-	33	-	-	33	-	232	-	232	-	2,230	-	2,230
1	-	31	-	-	31	-	220	-	220	-	2,600	-	2,600
2	-	40	-	-	40	-	277	-	277	-	2,775	-	2,775
1	-	38	-	-	38	-	255	-	255	-	2,863	-	2,863
3	-	42	-	-	42	-	295	-	295	-	2,758	-	2,758
5	-	42	-	-	42	-	292	-	292	-	2,778	-	2,778
-	-	40	-	-	40	-	281	-	281	-	2,493	-	2,493
0	-	37	-	-	37	-	260	-	260	-	2,459	-	2,459
5	-	32	-	-	32	-	223	-	223	-	2,458	-	2,458
2	-	31	-	-	31	-	216	-	216	-	2,476	-	2,476
3	-	27	-	-	27	-	188	-	188	-	2,449	-	2,449
6	-	26	-	-	26	-	181	-	181	-	2,370	-	2,370
4	-	30	-	-	30	-	209	-	209	-	2,406	-	2,406

COLCHESTER DISTRICT.

RETURN showing the Number of SOLDIERS, SEAMEN, and MARINES, Admitted to their respective Number of Days Lost to the Service, with the Number of Men in Garrison

WEEK ENDED	Number of Patients Admitted into												Number of Patients Treated on Board Ships in Port.				TOTAL Number of Patients Admitted to Hospital.
	Naval Hospital.				Military Hospital.				Marine Infirmary.								
	Primary Sores and Gonorrhoea.		Other Venereal Diseases.		Primary Sores and Gonorrhoea.		Other Venereal Diseases.		Primary Sores and Gonorrhoea.		Other Venereal Diseases.		Primary Sores and Gonorrhoea.		Other Venereal Diseases.		
	Contracted in District.	Contracted elsewhere.	TOTAL.		Contracted in District.	Contracted elsewhere.	TOTAL.		Contracted in District.	Contracted elsewhere.	TOTAL.		Contracted in District.	Contracted elsewhere.	TOTAL.		
1866 :																	
6 June -																	
13 " -																	
20 " -																	
27 " -																	
4 July -																	
11 " -																	
18 " -																	
25 " -																	
1 August -																	
8 " -																	
15 " -																	
22 " -																	
29 " -																	
6 September -																	
12 " -																	
19 " -																	
26 " -																	
8 October -																	
10 " -																	
17 " -																	
24 " -																	
31 " -																	
7 November -																	
14 " -																	
21 " -																	
28 " -																	
5 December -																	
12 " -																	
19 " -																	
26 " -																	
1869 :																	
2 January -																	
9 " -																	
16 " -																	
23 " -																	
30 " -					3			3									3
6 February -																	
13 " -					7		1	8									8
20 " -					8	1	4	13									13
27 " -					4	2	2	8									8
					1	2	1	4									4
6 March -																	
13 " -					5	1	1	7									7
20 " -					3	3	4	10									10
27 " -					3	4	-	7									7
					5	4	1	10									10
3 April -																	
10 " -					3	7	-	10									10
17 " -					2	3	2	7									7
24 " -					6	4	3	13									13
					6	4	6	16									16
1 May -																	
8 " -					5	1	4	10									10
15 " -					4	1	-	5									5
22 " -					5	1	2	8									8
29 " -					5	1	1	7									7
					9	3	2	14									14

COLCHESTER DISTRICT.

HOSPITALS Suffering from CONTAGIOUS DISEASES, the Number of Men constantly under Treatment, and at Port for each Week during the Year June 1868 to May 1869 inclusive.

TOTAL Number Admitted who Contracted the Disease within the District.	Average Number constantly under Treatment					Number of Days Lost to the Service.				Number of Men in Garrison and Port.			
	Naval Hospital.	Military Hospital.	Marine Infirmary.	Ships in Port.	TOTAL.	Seamen.	Soldiers.	Marines.	TOTAL.	Seamen.	Soldiers.	Marines.	TOTAL.
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.
3	.	42	.	.	42	.	167	.	167	.	1,931	.	1,931
7	.	29	.	.	29	.	203	.	203	.	1,963	.	1,963
6	.	30	.	.	30	.	210	.	210	.	1,929	.	1,929
4	.	31	.	.	31	.	217	.	217	.	1,820	.	1,820
1	.	29	.	.	29	.	202	.	202	.	1,813	.	1,813
.
5	.	25	.	.	25	.	176	.	176	.	1,842	.	1,842
3	.	26	.	.	26	.	155	.	155	.	1,914	.	1,914
3	.	25	.	.	25	.	174	.	174	.	1,903	.	1,903
6	.	24	.	.	24	.	167	.	167	.	1,922	.	1,922
.
3	.	23	.	.	23	.	160	.	160	.	1,729	.	1,729
2	.	25	.	.	25	.	173	.	173	.	1,917	.	1,917
6	.	28	.	.	28	.	198	.	198	.	1,915	.	1,915
6	.	30	.	.	30	.	211	.	211	.	1,944	.	1,944
.
5	.	31	.	.	31	.	214	.	214	.	2,019	.	2,019
4	.	23	.	.	23	.	158	.	158	.	1,690	.	1,690
5	.	21	.	.	21	.	150	.	150	.	1,731	.	1,731
5	.	25	.	.	25	.	175	.	175	.	1,693	.	1,693
9	.	26	.	.	26	.	107	.	107	.	1,739	.	1,739

0.87.

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CHATHAM DISTRICT.

RETURN showing the Number of SOLDIERS, SEAMEN, and MARINES, Admitted to their respective and Number of Days Lost to the Service, with the Number of Men in Garrison

WEEK ENDED	Number of Patients Admitted into												Number of Patients Treated on Board Ships in Port.				TOTAL Number of Patients Admitted to Hospital
	Naval Hospital.				Military Hospital.				Marine Infirmary.				Primary Sores and Gonorrhoea.				
	Primary Sores and Gonorrhoea.		Other Venereal Diseases.		Primary Sores and Gonorrhoea.		Other Venereal Diseases.		Primary Sores and Gonorrhoea.		Other Venereal Diseases.		Primary Sores and Gonorrhoea.		Other Venereal Diseases.		
	Contracted in District.	Contracted elsewhere.	Other Venereal Diseases.	TOTAL.	Contracted in District.	Contracted elsewhere.	Other Venereal Diseases.	TOTAL.	Contracted in District.	Contracted elsewhere.	Other Venereal Diseases.	TOTAL.	Contracted in District.	Contracted elsewhere.	Other Venereal Diseases.	TOTAL.	
1868:																	
6 June	-	-	-	-	11	3	1	15	4	2	1	7	-	-	-	-	22
13 "	-	-	-	-	14	8	5	27	3	1	-	4	-	-	-	-	31
20 "	-	-	-	-	9	-	2	11	4	-	-	4	-	-	-	-	15
27 "	-	-	-	-	8	3	5	17	4	2	-	6	-	-	-	-	23
4 July																	
11 "	-	-	-	-	13	2	4	19	6	1	-	7	-	-	-	-	26
18 "	-	-	-	-	11	5	3	19	8	-	-	8	-	-	-	-	27
25 "	-	-	-	-	15	3	6	24	2	-	-	2	-	-	-	-	26
1 August	-	-	-	-	14	3	5	22	3	-	-	3	-	-	-	-	25
8 "	-	-	-	-	15	1	5	21	8	-	-	8	-	-	-	-	29
15 "	-	-	-	-	8	8	3	19	2	-	-	2	-	-	-	-	21
22 "	-	-	-	-	11	1	2	14	8	1	1	10	-	-	-	-	24
29 "	-	-	-	-	12	5	7	24	3	-	-	3	-	-	-	-	27
5 September																	
12 "	-	-	-	-	20	1	3	24	2	-	-	2	-	-	-	-	26
19 "	-	-	-	-	17	6	6	29	1	1	-	1	-	-	-	-	30
26 "	-	-	-	-	11	1	1	13	5	1	-	6	-	-	-	-	19
3 October	-	-	-	-	19	7	6	32	3	1	-	4	-	-	-	-	36
10 "	-	-	-	-	12	2	8	22	2	1	-	3	-	-	-	-	25
17 "	-	-	-	-	9	3	-	12	1	-	1	2	-	-	-	-	14
24 "	-	-	-	-	12	3	10	25	1	2	-	3	-	-	-	-	28
31 "	-	-	-	-	7	5	3	15	4	-	-	4	-	-	-	-	19
7 November																	
14 "	-	-	-	-	8	-	-	8	3	-	-	3	-	-	-	-	11
21 "	-	-	-	-	13	7	6	26	-	1	-	1	-	-	-	-	27
28 "	-	-	-	-	4	6	6	16	-	2	-	2	-	-	-	-	15
5 December	-	-	-	-	4	3	8	15	2	1	-	3	-	-	-	-	18
12 "	-	-	-	-	6	2	1	9	2	-	-	2	-	-	-	-	11
19 "	-	-	-	-	4	3	1	8	2	-	-	2	-	-	-	-	10
26 "	-	-	-	-	4	5	5	14	3	1	-	4	-	-	-	-	18
1869:	-	-	-	-	4	4	-	8	1	-	-	1	-	-	-	-	9
2 January																	
9 "	-	-	-	-	16	2	5	23	2	1	-	3	-	-	-	-	26
16 "	-	-	-	-	8	4	1	13	1	1	-	2	-	-	-	-	15
23 "	-	-	-	-	11	2	1	14	1	-	-	1	-	-	-	-	15
30 "	-	-	-	-	7	1	2	10	2	-	-	2	-	-	-	-	12
6 February	-	-	-	-	6	2	3	10	1	1	-	2	-	-	-	-	12
13 "	-	-	-	-	7	2	-	9	-	3	-	3	-	-	-	-	12
20 "	-	-	-	-	5	2	1	8	4	-	-	4	-	-	-	-	12
27 "	-	-	-	-	9	5	1	15	5	-	-	5	-	-	-	-	20
6 March	-	-	-	-	7	1	2	10	3	2	-	5	-	-	-	-	13
13 "	-	-	-	-	6	3	1	10	1	1	-	2	-	-	-	-	12
20 "	-	-	-	-	9	2	2	13	3	-	-	3	-	-	-	-	16
27 "	-	-	-	-	8	2	4	14	2	1	-	3	-	-	-	-	17
3 April	-	-	-	-	5	1	-	6	-	-	-	-	-	-	-	-	6
10 "	-	-	-	-	7	3	1	11	3	-	-	3	-	-	-	-	14
17 "	-	-	-	-	4	3	1	8	3	3	1	7	-	-	-	-	15
24 "	-	-	-	-	10	2	1	13	2	3	-	5	-	-	-	-	18
1 May	-	-	-	-	7	3	2	12	5	1	-	6	-	-	-	-	18
8 "	-	-	-	-	12	2	3	17	2	4	2	8	-	-	-	-	25
15 "	-	-	-	-	3	3	-	6	3	3	1	7	-	-	-	-	13
22 "	-	-	-	-	7	4	9	20	3	2	2	7	-	-	-	-	27
29 "	-	-	-	-	4	1	2	7	2	1	-	3	-	-	-	-	10
	-	-	-	-	8	1	2	11	6	5	1	12	-	-	-	-	23

CHATHAM DISTRICT.

HOSPITALS Suffering from CONTAGIOUS DISEASES, the Number of Men constantly under Treatment, and Port, for each Week during the Year, June 1868 to May 1869, inclusive.

TOTAL Number Admitted who contracted the Disease within the District.	Average Number constantly under Treatment.					Number of Days Lost to the Service.				Number of Men in Garrison and Port.			
	Naval Hospital.	Military Hospital.	Marine Infirmary.	Ships in Port.	TOTAL.	Seamen.	Soldiers.	Marines.	TOTAL.	Seamen.	Soldiers.	Marines.	TOTAL.
15	-	51	10	-	67	-	350	110	466	-	3,023	1,399	4,422
17	-	62	17	-	79	-	436	120	556	-	2,914	1,358	4,302
13	-	64	18	-	82	-	445	123	568	-	3,077	1,366	4,443
12	-	61	18	-	79	-	427	128	555	-	2,971	1,365	4,336
19	-	61	18	-	82	-	450	125	575	-	3,125	1,361	4,486
19	-	75	20	-	95	-	522	142	664	-	3,009	1,363	4,372
17	-	76	19	-	95	-	530	133	663	-	3,067	1,346	4,413
19	-	74	20	-	94	-	518	137	655	-	3,104	1,361	4,465
17	-	70	20	-	90	-	488	138	626	-	3,151	1,258	4,409
23	-	70	20	-	90	-	488	138	626	-	3,152	1,221	4,373
10	-	67	19	-	86	-	471	135	606	-	3,158	1,230	4,388
19	-	67	17	-	84	-	467	120	587	-	3,140	1,216	4,356
15	-	62	19	-	81	-	435	130	565	-	3,060	1,165	4,225
22	-	66	21	-	87	-	460	149	609	-	3,008	1,212	4,250
18	-	62	19	-	81	-	435	131	566	-	3,003	1,246	4,249
16	-	61	15	-	79	-	449	106	555	-	3,045	1,216	4,261
13	-	62	14	-	76	-	434	101	535	-	3,088	1,207	4,295
22	-	58	15	-	73	-	410	102	512	-	2,998	1,212	4,210
14	-	61	17	-	78	-	427	121	548	-	3,153	1,216	4,369
10	-	72	21	-	93	-	507	146	653	-	3,145	1,208	4,353
13	-	67	20	-	87	-	467	137	604	-	3,101	1,188	4,289
11	-	64	17	-	81	-	450	122	572	-	3,112	1,200	4,312
11	-	56	15	-	71	-	393	104	497	-	3,456	1,140	4,596
13	-	48	15	-	63	-	337	104	441	-	3,280	1,144	4,424
4	-	48	15	-	63	-	339	103	442	-	3,082	1,133	4,215
6	-	50	13	-	63	-	351	90	441	-	2,913	1,141	4,054
8	-	51	12	-	63	-	358	83	441	-	3,035	1,141	4,176
6	-	47	13	-	60	-	332	94	426	-	2,908	1,141	4,049
7	-	36	12	-	48	-	250	81	331	-	3,035	1,099	4,154
5	-	32	15	-	47	-	227	106	333	-	2,826	1,162	3,928
18	-	30	14	-	44	-	208	97	305	-	3,169	1,166	4,335
9	-	36	12	-	48	-	255	85	340	-	2,991	1,168	4,162
12	-	43	12	-	55	-	300	83	383	-	3,186	1,169	4,355
9	-	48	13	-	61	-	333	92	425	-	3,208	1,161	4,369
6	-	47	13	-	60	-	323	88	416	-	3,261	1,162	4,423
7	-	45	13	-	58	-	316	91	407	-	3,505	1,163	4,668
9	-	47	14	-	61	-	330	96	426	-	3,541	1,161	4,702
14	-	44	17	-	61	-	309	118	427	-	3,619	1,153	4,772
10	-	42	19	-	61	-	296	130	426	-	3,280	1,151	4,431
7	-	43	22	-	65	-	304	154	458	-	3,117	1,485	4,602
12	-	40	24	-	64	-	282	165	447	-	3,444	1,469	4,913
10	-	35	21	-	56	-	248	153	401	-	3,115	1,468	4,873
5	-	45	21	-	66	-	315	146	461	-	3,211	1,487	4,728
10	-	39	18	-	57	-	272	128	400	-	3,667	1,498	5,165
7	-	37	20	-	57	-	256	143	399	-	3,217	1,616	4,863
12	-	34	24	-	58	-	236	165	401	-	3,173	1,630	4,803
12	-	35	24	-	59	-	248	167	415	-	3,147	1,515	4,662
14	-	41	24	-	65	-	288	168	456	-	3,226	1,575	4,801
6	-	41	25	-	66	-	286	177	463	-	3,190	1,555	4,745
10	-	37	35	-	72	-	262	217	509	-	3,234	1,571	4,805
6	-	39	36	-	75	-	274	253	527	-	3,248	1,571	4,819
14	-	37	36	-	73	-	257	250	507	-	3,142	1,585	4,727

SHEERNESS DISTRICT

RETURN showing the Number of SOLDIERS, SEAMEN, and MARINES, Admitted to their respective Number of Days Lost to the Service, with the Number of Men in Garrison

WEEK ENDED.	Number of Patients Admitted into												Number of Patients Treated on Board Ships in Port.				TOTAL Number of Patients Admitted to Hospital.
	Naval Hospital.				Military Hospital.				Marine Infirmary.								
	Primary Sores and Gonorrhœa.		Other Venereal Diseases.	TOTAL.	Primary Sores and Gonorrhœa.		Other Venereal Diseases.	TOTAL.	Primary Sores and Gonorrhœa.		Other Venereal Diseases.	TOTAL.	Primary Sores and Gonorrhœa.		Other Venereal Diseases.	TOTAL.	
	Contracted in District.	Contracted elsewhere.			Contracted in District.	Contracted elsewhere.			Contracted in District.	Contracted elsewhere.			Contracted in District.	Contracted elsewhere.			
1868:																	
6 June -	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-		
13 " -	-	-	-	1	-	-	1	-	-	-	-	1	1	-	2		
20 " -	-	-	-	1	-	-	2	-	-	-	-	1	1	-	2		
27 " -	-	-	-	1	-	-	1	-	-	-	-	1	1	-	2		
4 July -																	
11 " -	-	-	-	3	-	-	3	-	-	-	-	1	2	1	4		
18 " -	-	-	-	3	-	-	4	-	-	-	-	2	2	-	4		
25 " -	-	-	-	3	-	-	4	-	-	-	-	2	2	1	5		
1 August -																	
8 " -	-	-	-	2	-	-	2	-	-	-	-	1	1	-	2		
15 " -	-	-	-	1	-	-	1	-	-	-	-	1	1	2	4		
22 " -	-	-	-	-	1	-	1	-	-	-	-	1	3	-	4		
29 " -	-	-	-	2	1	-	3	-	-	-	-	4	-	-	7		
5 September -																	
12 " -	-	-	-	1	2	-	3	-	-	-	-	2	5	-	7		
19 " -	-	-	-	1	1	-	2	-	-	-	-	1	3	-	4		
26 " -	-	-	-	2	-	-	2	-	-	-	-	1	4	2	7		
3 October -																	
10 " -	-	-	-	1	-	-	1	-	-	-	-	1	5	2	8		
17 " -	-	-	-	-	1	-	1	-	-	-	-	1	2	-	3		
24 " -	-	-	-	1	1	-	2	-	-	-	-	3	2	-	5		
31 " -	-	-	-	1	2	1	4	-	-	-	-	-	-	-	4		
7 November -																	
14 " -	-	-	-	1	2	1	4	-	-	-	-	2	5	-	7		
21 " -	-	-	-	1	4	1	6	-	-	-	-	1	1	-	2		
28 " -	-	-	-	1	1	-	1	-	-	-	-	2	2	-	4		
5 December -	-	-	-	1	1	-	1	-	-	-	-	1	3	-	4		
12 " -	-	-	-	2	1	-	3	-	-	-	-	2	2	-	4		
19 " -	-	-	-	2	2	-	4	-	-	-	-	2	2	-	4		
26 " -	-	-	-	2	1	-	3	-	-	-	-	1	2	-	3		
1869:																	
2 January -																	
9 " -	-	-	-	1	1	-	2	-	-	-	-	2	2	-	4		
16 " -	-	-	-	2	1	-	3	-	-	-	-	3	2	-	5		
23 " -	-	-	-	1	1	-	2	-	-	-	-	3	2	-	5		
30 " -	-	-	-	2	4	-	6	-	-	-	-	2	1	-	3		
6 February -																	
13 " -	-	-	-	1	1	1	3	-	-	-	-	1	1	-	2		
20 " -	-	-	-	2	1	1	4	-	-	-	-	1	1	1	3		
27 " -	-	-	-	4	1	2	7	-	-	-	-	2	5	-	7		
6 March -																	
13 " -	-	-	-	1	1	-	2	-	-	-	-	1	1	-	2		
20 " -	-	-	-	2	2	-	4	-	-	-	-	1	4	1	6		
27 " -	-	-	-	2	1	1	4	-	-	-	-	1	3	-	4		
3 April -																	
10 " -	-	-	-	-	-	-	-	-	-	-	-	4	3	-	7		
17 " -	-	-	-	-	2	1	3	-	-	-	-	2	7	-	9		
24 " -	-	-	-	-	-	-	-	-	-	-	-	1	1	-	2		
1 May -																	
8 " -	-	-	-	-	1	-	1	-	-	-	-	-	1	1	2		
15 " -	-	-	-	2	1	-	3	-	-	-	-	1	1	-	2		
22 " -	-	-	-	2	1	-	3	-	-	-	-	1	1	-	2		
29 " -	-	-	-	-	-	-	-	-	-	-	-	1	1	-	2		

SHEERNESS DISTRICT.

HOSPITALS suffering from CONTAGIOUS DISEASES, the Number constantly under Treatment, and and Port, for each Week during the Year, June 1868 to May 1869, inclusive.

Total Number Admitted who Contracted the Disease within the District.	Average Number constantly under Treatment.				Number of Days Lost to the Service.				Number of Men in Garrison and Port.				
	Naval Hospitals.	Military Hospital.	Marine Infirmary.	Ships in Port.	TOTAL.	Seamen.	Soldiers.	Marines.	TOTAL.	Seamen.	Soldiers.	Marines.	TOTAL.
1	-	8	-	4	12	27	53	-	80	1,484	534	265	2,283
2	-	7	-	7	14	47	48	-	95	1,569	619	287	2,466
2	-	7	-	7	14	50	52	-	102	1,450	633	276	2,359
1	-	8	-	5	13	34	53	-	87	1,448	619	279	2,346
4	-	8	-	3	11	21	53	-	74	1,638	565	351	2,554
2	-	8	-	5	13	38	59	-	97	1,910	567	254	2,831
5	-	10	-	9	19	63	72	-	135	1,286	511	271	2,068
2	-	8	-	9	17	61	54	-	115	1,164	426	262	1,852
3	-	8	-	5	13	37	53	-	90	1,175	449	256	1,880
1	-	8	-	3	11	21	58	-	79	1,757	517	265	2,539
-	-	7	-	4	11	26	50	-	76	2,083	450	294	2,827
1	-	7	-	7	14	49	49	-	98	1,997	420	350	2,767
6	-	7	-	9	16	60	48	3	111	1,960	437	374	2,771
3	-	7	-	11	18	67	49	12	128	2,006	424	379	2,809
1	-	6	-	9	15	53	42	10	105	1,727	414	321	2,462
3	-	6	-	7	13	39	41	7	87	1,401	424	250	2,075
3	-	8	-	10	18	71	54	-	125	1,891	587	352	2,830
1	-	5	-	11	16	73	38	4	115	1,414	421	256	2,091
1	-	5	-	9	14	63	34	-	97	1,230	474	262	1,966
-	-	3	-	7	10	45	24	1	70	1,221	455	262	1,938
4	-	4	-	8	12	49	28	10	87	1,289	499	270	2,058
1	-	5	-	8	13	46	37	8	91	1,207	695	267	2,169
3	-	8	-	7	15	35	58	16	109	1,429	699	250	2,378
2	-	11	-	5	16	27	80	8	115	1,076	694	241	2,011
2	-	11	-	5	16	26	80	11	117	1,276	636	312	2,224
1	-	10	-	9	19	49	68	16	133	1,017	514	241	1,772
2	-	7	-	8	15	51	51	5	107	1,017	631	241	1,889
2	-	9	-	5	14	29	66	10	104	1,057	563	236	1,856
3	-	11	-	9	20	36	74	26	136	1,158	533	278	1,974
-	-	11	-	6	17	33	78	8	119	1,485	625	334	2,444
-	-	10	-	3	13	18	70	-	88	1,500	632	291	2,423
3	-	8	-	6	14	45	57	-	102	1,407	537	262	2,206
2	-	11	-	5	16	32	77	-	109	1,204	716	183	2,103
3	-	11	-	6	17	37	78	7	122	1,196	695	186	2,077
4	-	13	-	4	17	15	90	10	115	1,212	688	186	2,086
2	-	18	-	5	23	22	123	14	159	1,254	687	183	2,124
3	-	16	-	6	22	26	111	13	150	1,192	689	180	2,061
6	-	12	-	10	22	57	86	11	154	1,188	686	180	2,054
1	-	11	-	9	20	59	78	7	144	1,269	672	180	2,121
2	-	9	-	9	18	57	66	8	137	1,287	673	180	2,140
3	-	11	-	7	18	45	75	2	122	1,320	672	180	2,172
3	-	13	-	9	22	58	92	-	150	1,284	665	186	2,135
2	-	10	-	5	15	33	73	-	106	1,187	665	165	2,017
4	-	9	-	10	19	62	62	8	132	963	609	130	1,702
2	-	6	-	15	21	84	45	18	147	1,318	192	310	1,820
1	-	3	-	12	15	71	24	14	109	1,372	197	197	1,766
2	-	2	-	14	16	92	17	7	116	1,467	214	209	1,890
-	-	1	-	12	13	79	8	6	93	1,627	247	318	2,192
-	-	3	-	7	10	49	27	-	76	1,529	280	276	2,085
3	-	5	-	5	10	31	36	7	74	1,032	261	136	1,429
2	-	7	-	5	12	25	48	7	80	859	266	114	1,239
1	-	7	-	5	12	26	50	7	83	1,032	273	148	1,453

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PORTSMOUTH DISTRICT.

RETURN showing the Number of SOLDIERS, SEAMEN, and MARINES Admitted to their respective Number of Days Lost to the Service, with the Number of Men in Garrison

WEEK ENDED	Number of Patients Admitted into												Number of Patients Treated on Board Ships in Port.				TOTAL Number of Patients Admitted to Hospital
	Naval Hospitals.				Military Hospital.				Marine Infirmary.								
	Primary Sores and Gonorrhœa.		Other Venereal Diseases.	TOTAL.	Primary Sores and Gonorrhœa.		Other Venereal Diseases.	TOTAL.	Primary Sores and Gonorrhœa.		Other Venereal Diseases.	TOTAL.	Primary Sores and Gonorrhœa.		Other Venereal Diseases.	TOTAL.	
	Contracted in District.	Contracted Elsewhere.			Contracted in District.	Contracted Elsewhere.			Contracted in District.	Contracted Elsewhere.			Contracted in District.	Contracted Elsewhere.			
1868:																	
6 June -	12	3	-	15	23	7	1	31	4	-	2	6	8	5	1	14	63
13 " -	10	2	1	13	21	5	-	26	3	-	3	6	7	4	2	13	58
20 " -	13	2	2	17	19	6	1	26	5	1	1	6	6	2	1	9	58
27 " -	12	2	1	15	22	5	3	30	-	1	3	4	6	2	1	9	58
4 July -																	
11 " -	7	1	2	10	23	4	2	29	11	-	5	16	8	3	2	13	68
18 " -	5	3	1	9	24	6	1	31	10	-	6	16	9	5	3	17	73
25 " -	6	2	3	11	22	2	4	28	12	1	4	17	7	4	2	13	69
1 August -	7	3	1	11	23	1	3	27	11	-	5	16	7	2	4	13	64
8 " -	7	3	1	11	24	3	2	29	11	1	5	17	9	3	3	15	72
15 " -	12	4	7	23	17	2	2	21	8	1	4	13	3	3	1	7	64
22 " -	3	2	1	6	30	1	1	32	9	2	9	20	4	5	2	11	69
29 " -	12	-	4	16	26	6	4	36	14	2	11	27	6	-	3	9	88
5 September -	6	4	7	17	27	4	1	32	5	4	4	13	5	1	4	10	72
12 " -	7	1	5	13	24	1	9	34	12	2	5	19	3	1	2	6	72
19 " -	4	3	3	10	28	3	6	36	5	2	7	14	9	-	2	11	71
26 " -	9	2	7	18	26	5	6	37	12	3	7	22	7	2	2	11	88
3 October -	13	5	6	23	33	10	6	49	5	1	2	8	9	2	4	15	95
10 " -	9	1	7	17	30	4	3	37	8	1	5	10	3	-	3	6	69
17 " -	7	1	7	15	36	2	8	46	7	2	11	20	4	-	2	6	80
24 " -	10	-	6	16	34	6	5	45	1	1	-	2	3	1	2	6	69
31 " -	7	2	1	10	27	2	4	33	5	-	12	17	1	-	4	5	65
7 November -	5	-	3	8	14	2	4	20	4	1	5	10	4	1	7	12	50
14 " -	3	1	5	9	25	2	2	29	5	-	5	10	2	3	-	5	53
21 " -	4	1	2	7	24	1	2	27	8	-	5	13	8	1	1	9	56
28 " -	6	-	5	11	18	1	2	21	9	1	6	16	4	2	4	10	58
5 December -	8	-	3	11	21	3	6	30	1	1	4	6	8	3	2	13	60
12 " -	13	3	2	18	18	-	4	22	4	3	7	14	2	2	1	5	59
19 " -	6	1	2	9	20	-	6	26	7	-	7	14	3	-	-	3	52
26 " -	2	1	1	4	17	2	1	20	2	-	10	12	-	-	-	-	36
1869:																	
2 January -	4	-	3	7	8	-	3	11	2	-	3	5	5	1	2	8	31
9 " -	7	-	6	13	17	3	3	23	5	1	5	11	1	1	1	3	50
16 " -	15	1	4	20	25	1	2	28	5	-	-	7	9	1	1	11	66
23 " -	7	1	-	8	15	-	5	20	4	-	-	4	2	1	3	6	38
30 " -	2	1	1	4	17	2	1	20	4	1	1	5	2	1	1	3	32
6 February -	5	2	3	10	11	-	3	14	1	1	-	2	2	2	1	5	31
13 " -	7	1	2	10	23	-	3	26	3	1	1	5	5	5	1	11	52
20 " -	6	-	3	9	12	3	3	19	3	-	4	7	5	2	2	9	34
27 " -	3	2	6	11	17	1	2	20	4	-	11	17	8	1	4	13	61
6 March -	6	-	1	7	18	3	2	23	6	-	6	10	4	-	-	4	44
13 " -	8	-	2	10	12	3	5	20	7	-	3	10	1	-	1	2	42
20 " -	6	3	2	11	14	2	2	18	5	-	10	15	4	1	-	5	40
27 " -	5	3	1	9	14	4	6	24	5	-	3	8	6	1	2	9	50
3 April -	1	4	3	8	18	-	4	24	2	-	4	7	-	2	1	3	40
10 " -	5	4	1	10	13	-	5	18	15	2	3	20	4	3	1	8	56
17 " -	7	4	2	13	20	-	2	28	14	4	4	22	5	3	1	9	72
24 " -	6	5	2	13	12	2	4	18	8	1	2	11	11	1	2	14	56
1 May -	4	2	3	9	16	-	6	22	6	2	2	10	6	-	3	9	50
8 " -	7	1	1	9	9	3	2	14	7	-	7	14	5	2	1	8	45
15 " -	2	3	1	11	17	2	7	26	5	-	-	5	-	5	4	9	51
22 " -	4	3	4	11	15	1	4	20	5	1	8	14	6	2	3	11	50
29 " -	4	5	2	7	17	-	6	23	11	2	5	18	9	0	3	18	60
	7	3	5	15	20	-	2	22	8	-	4	12	2	4	2	8	57

PORTSMOUTH DISTRICT.

HOSPITALS suffering from CONTAGIOUS DISEASES, the Number of Men constantly under Treatment, and and Port, for each Week during the Year, June 1868 to May 1869, inclusive.

Total Number Admitted who Contracted the Disease within the District.	Average Number Constantly under Treatment.					Number of Days Lost to the Service.				Number of Men in Garrison and Port.			
	Naval Hospital.	Military Hospital.	Marine Infirmary.	Ships in Port.	TOTAL.	Seamen.	Soldiers.	Marines.	TOTAL.	Seamen.	Soldiers.	Marines.	TOTAL.
47	125	69	14	16	224	585	483	500	1,568	5,046	4,174	2,086	12,506
41	125	67	13	15	220	580	409	491	1,540	5,366	4,312	2,702	12,380
43	124	67	15	17	223	593	460	490	1,601	5,366	3,696	2,680	11,742
40	122	73	14	16	225	566	511	498	1,575	5,366	6,289	2,655	14,310
49	117	81	33	31	262	667	567	600	1,834	6,027	4,155	2,618	12,800
48	116	79	31	29	248	680	553	502	1,735	6,332	4,317	2,631	15,280
47	118	83	35	33	269	700	581	602	1,883	7,003	4,217	2,628	13,848
40	119	80	34	32	265	694	560	601	1,885	8,378	4,227	2,678	15,283
51	115	82	32	30	259	640	574	590	1,813	8,484	4,317	2,711	15,512
40	99	82	27	20	228	524	574	498	1,596	6,850	4,137	2,673	13,660
46	113	80	20	24	237	599	560	500	1,659	6,777	4,219	2,631	13,627
58	113	88	28	25	254	600	616	502	1,778	8,159	4,374	2,589	15,122
43	126	94	27	20	267	612	658	599	1,869	7,879	4,398	2,614	14,891
46	96	97	31	18	242	516	679	499	1,694	7,420	4,068	2,614	14,102
46	94	96	28	20	238	501	672	493	1,666	6,674	4,375	2,629	13,678
54	90	99	31	13	233	502	693	436	1,631	7,498	5,274	2,600	15,372
60	97	131	25	14	267	506	917	446	1,869	6,275	5,275	2,587	14,137
50	97	129	22	12	260	510	908	407	1,820	5,492	5,357	2,477	13,326
54	97	125	10	11	252	488	875	401	1,764	5,600	5,386	2,530	13,516
48	90	125	16	13	230	409	875	333	1,609	6,032	5,419	2,413	13,864
40	92	108	22	12	234	480	756	402	1,638	6,293	5,057	2,378	13,733
27	93	92	20	11	219	487	644	402	1,533	7,218	4,932	2,429	14,620
35	90	92	16	12	219	480	644	400	1,533	6,923	5,012	2,400	14,935
44	92	100	22	9	223	463	700	399	1,561	6,912	4,078	2,431	14,321
37	93	91	26	12	221	499	637	411	1,547	6,493	4,912	2,401	13,811
38	96	90	22	19	228	501	630	468	1,599	5,824	4,884	2,463	13,171
37	103	94	19	19	235	507	658	480	1,645	5,959	4,754	2,400	13,113
36	105	81	18	21	225	516	567	492	1,575	6,061	4,819	2,380	13,260
21	104	74	15	14	207	501	518	430	1,449	6,526	4,878	2,326	13,730
19	101	72	12	14	190	488	504	401	1,393	6,563	4,759	2,046	13,370
30	110	63	11	19	203	570	441	410	1,421	6,141	4,450	2,273	12,873
54	105	66	12	16	199	501	462	430	1,393	5,786	4,890	2,118	12,803
28	111	61	17	14	203	564	427	430	1,421	6,286	4,728	2,196	13,210
25	104	62	13	11	190	495	434	401	1,330	6,105	4,632	2,288	13,025
10	96	55	11	11	173	428	385	398	1,211	6,003	4,510	2,307	12,829
38	97	57	11	17	182	473	399	402	1,274	6,234	4,840	2,324	13,407
26	98	65	15	20	198	509	455	431	1,386	6,377	4,746	2,335	13,458
34	90	76	15	20	201	416	532	399	1,407	5,725	4,729	2,343	12,797
32	81	78	17	18	194	440	546	372	1,358	5,393	4,936	2,297	12,541
28	87	74	14	7	182	406	518	350	1,274	6,362	4,987	2,331	13,680
29	86	70	16	5	177	409	490	340	1,230	5,545	4,841	2,560	12,946
30	85	73	21	9	188	430	511	375	1,316	5,826	4,779	2,548	13,153
22	83	78	13	15	189	407	546	370	1,323	6,092	4,751	2,528	13,371
37	74	72	17	11	174	398	504	316	1,218	6,642	4,727	2,542	13,911
52	70	75	19	10	174	398	525	295	1,218	6,116	4,610	2,641	13,376
37	76	71	20	14	181	430	407	340	1,267	6,136	4,688	2,627	13,451
32	78	66	17	20	181	490	462	315	1,367	5,870	4,448	2,510	12,828
28	75	47	15	18	155	401	329	355	1,085	6,392	4,478	2,408	13,368
24	77	57	15	31	180	462	399	399	1,260	6,970	4,306	2,401	13,746
30	80	58	22	20	186	496	400	400	1,392	8,677	4,363	2,492	15,532
37	73	60	21	23	177	450	420	369	1,230	8,829	4,399	2,517	15,685
37	73	62	23	28	186	470	434	398	1,302	8,362	4,234	2,353	14,949

0.87.

DEVONPORT DISTRICT.

RETURN showing the Number of SOLDIERS, SEAMEN, and MARINES, Admitted to their respective Number of Days Lost to the Service, with the Number of Men in Garrison

WEEK ENDED	Number of Patients Admitted into												Number of Patients Treated on Board Ships in Port.				TOTAL Number of Patients Admitted to Hospital.
	Naval Hospital.				Military Hospital.				Marine Infirmary.								
	Primary Sores and Gonorrhœa.		Other Venereal Diseases.	TOTAL.	Primary Sores and Gonorrhœa.		Other Venereal Diseases.	TOTAL.	Primary Sores and Gonorrhœa.		Other Venereal Diseases.	TOTAL.	Primary Sores and Gonorrhœa.		Other Venereal Diseases.	TOTAL.	
	Contracted in District.	Contracted Elsewhere.			Contracted in District.	Contracted Elsewhere.			Contracted in District.	Contracted Elsewhere.			Contracted in District.	Contracted Elsewhere.			
1868 :																	
6 June - - -	1	-	1	2	10	3	3	16	2	-	1	3	2	-	1	3	24
13 " - - -	2	1	2	5	8	2	1	11	3	-	1	4	3	-	1	4	24
20 " - - -	1	2	3	6	14	3	2	19	6	1	2	9	6	4	2	12	46
27 " - - -	2	-	2	4	10	4	1	15	1	5	2	8	1	2	2	5	32
4 July - - -																	
4 July - - -	2	-	1	3	11	-	2	13	1	-	-	1	1	1	-	2	19
11 " - - -	2	3	9	14	9	-	-	9	9	1	1	11	7	6	1	14	48
18 " - - -	2	2	5	10	11	1	1	13	6	-	-	6	6	9	3	18	47
25 " - - -	1	5	4	10	17	-	1	18	6	-	1	7	11	1	5	17	42
1 August - - -																	
1 August - - -	1	2	2	5	10	-	2	12	6	4	-	10	10	4	2	16	43
8 " - - -	3	4	2	9	19	-	2	21	7	3	1	11	10	4	2	16	57
15 " - - -	2	7	4	13	17	-	3	20	7	4	-	11	6	3	1	10	54
22 " - - -	1	4	2	7	8	1	3	12	4	-	-	4	7	4	1	12	35
29 " - - -	6	4	2	12	6	1	6	13	9	-	-	9	12	6	2	20	54
5 September - - -																	
5 September - - -	1	6	2	9	14	-	1	15	9	-	1	10	13	15	2	30	64
12 " - - -	6	3	5	14	10	4	4	18	7	2	1	10	11	2	1	40	56
19 " - - -	1	3	2	6	7	-	6	13	2	6	-	8	15	3	1	19	46
26 " - - -	5	4	5	14	9	-	3	12	6	3	-	9	13	5	2	20	55
3 October - - -																	
3 October - - -	2	-	2	4	6	-	4	10	10	1	-	11	11	4	-	15	40
10 " - - -	9	-	4	13	7	-	-	7	8	-	-	8	9	3	2	14	42
17 " - - -	5	1	-	6	7	-	2	9	3	1	-	4	8	-	1	9	28
24 " - - -	2	2	-	4	5	4	2	11	1	-	1	2	9	-	1	10	27
31 " - - -	7	3	5	15	6	-	1	7	2	-	1	3	7	4	5	16	41
7 November - - -																	
7 November - - -	5	1	3	9	12	-	4	16	7	1	-	8	15	7	1	23	56
14 " - - -	5	1	3	9	9	2	1	12	2	-	-	2	14	3	1	18	41
21 " - - -	5	1	3	9	2	-	-	2	3	-	-	3	10	2	-	12	26
28 " - - -	4	3	4	11	6	-	-	6	4	1	-	5	14	2	-	16	38
5 December - - -																	
5 December - - -	2	2	3	7	4	-	1	5	4	-	-	4	10	-	-	10	26
12 " - - -	2	6	8	16	8	1	-	9	3	-	-	3	7	-	4	11	39
19 " - - -	4	3	3	10	4	-	2	6	3	-	-	3	2	-	2	2	21
26 " - - -	6	1	3	10	3	-	-	3	5	1	-	6	2	-	4	6	25
1869 :																	
2 January - - -																	
2 January - - -	5	1	3	9	11	1	1	13	-	-	2	2	6	-	1	7	31
9 " - - -	4	3	5	12	12	-	-	12	2	1	-	3	6	2	-	8	35
16 " - - -	2	1	2	5	16	2	2	20	3	1	-	4	2	3	1	6	35
23 " - - -	3	7	3	13	10	1	1	12	5	-	-	5	4	4	1	9	39
30 " - - -	-	1	2	3	8	-	-	8	4	-	-	4	4	3	2	5	20
6 February - - -																	
6 February - - -	2	1	3	6	7	1	-	8	-	-	1	6	7	4	-	11	31
13 " - - -	3	3	2	8	15	-	1	16	5	2	-	6	6	2	-	8	38
20 " - - -	6	-	1	7	9	-	1	10	4	-	-	4	10	4	1	14	35
27 " - - -	7	4	2	13	8	1	1	10	2	-	-	2	4	4	1	9	34
6 March - - -																	
6 March - - -	4	-	5	9	7	-	-	7	2	2	-	4	8	-	2	10	30
13 " - - -	5	-	2	7	8	-	2	10	2	-	2	4	2	-	2	4	25
20 " - - -	3	2	6	11	10	-	3	13	5	4	-	11	5	-	5	40	
27 " - - -	2	-	-	2	2	1	3	6	1	5	-	6	5	-	5	19	
3 April - - -																	
3 April - - -	13	2	4	25	5	-	3	8	7	-	-	7	3	-	-	3	43
10 " - - -	7	5	4	16	5	-	1	6	4	1	-	5	6	-	2	8	35
17 " - - -	7	3	7	17	4	-	1	5	4	-	-	4	3	-	3	6	32
24 " - - -	3	1	2	6	6	-	-	6	1	1	-	2	2	-	1	3	17
1 May - - -																	
1 May - - -	10	1	3	14	7	4	1	12	2	1	-	3	8	-	1	9	38
8 " - - -	11	6	4	21	10	-	1	11	2	1	-	3	4	2	1	7	42
15 " - - -	11	7	7	18	6	3	4	13	7	1	-	9	4	2	1	7	47
22 " - - -	9	2	-	11	3	3	-	6	6	-	-	6	6	1	1	8	31
29 " - - -	7	2	-	9	9	8	-	17	3	1	-	4	4	5	1	10	40

DEVONPORT DISTRICT.

HOSPITALS suffering from CONTAGIOUS DISEASES, the Number of Men constantly under Treatment, and and Port, for each Week during the Year, June 1868 to May 1869, inclusive.

Total Number Admitted who Contracted the Disease within the District.	Average Number Constantly under Treatment.					Number of Days Lost to the Service.				Number of Men in Garrison and Port.			
	Naval Hospital.	Military Hospital.	Marine Infirmary.	Ships in Port.	TOTAL.	Seamen.	Soldiers.	Marines.	TOTAL.	Seamen.	Soldiers.	Marines.	TOTAL.
15	27	39	14	5	85	224	273	98	595	5,584	2,491	1,119	9,194
16	26	47	15	4	92	210	329	105	644	5,581	2,477	1,113	9,171
27	27	48	12	5	91	217	336	84	637	5,769	1,523	1,076	8,368
14	27	56	11	6	100	231	392	77	700	5,584	1,619	1,079	8,282
15	28	62	12	5	107	231	434	84	749	6,118	2,465	1,070	9,653
27	36	52	16	8	112	308	364	112	784	7,362	2,463	1,076	10,901
25	38	44	19	8	109	322	308	123	763	8,118	2,472	1,085	11,675
35	42	48	20	21	131	431	336	140	907	9,318	2,492	1,600	13,410
27	48	48	24	13	133	427	336	168	931	7,520	2,489	1,556	11,565
39	54	53	26	19	152	511	371	182	1,064	6,948	2,479	1,553	10,980
32	54	52	20	20	146	518	371	140	1,029	7,410	2,488	1,540	11,436
20	50	50	18	32	150	575	350	126	1,051	7,388	2,479	1,527	11,394
33	51	48	23	39	164	651	336	161	1,148	7,649	2,501	1,502	11,652
37	55	50	25	37	173	644	392	175	1,211	8,280	2,509	1,490	12,269
34	54	53	25	38	170	644	371	175	1,190	7,718	2,521	1,474	11,713
25	53	50	23	29	155	574	350	161	1,085	7,919	2,524	1,479	11,922
33	54	50	20	34	158	616	350	140	1,106	8,143	2,520	1,463	12,126
29	28	28	22	24	102	364	196	196	756	9,081	2,521	1,466	13,068
33	50	44	28	30	152	560	308	196	1,064	8,362	2,537	1,441	12,360
23	53	43	22	16	134	483	301	154	938	7,917	2,548	1,431	11,896
17	50	47	18	18	133	476	329	126	931	7,796	2,558	1,395	11,749
22	50	47	14	20	131	490	329	98	917	8,085	2,551	1,398	12,034
39	52	46	16	22	136	518	322	112	952	7,242	2,563	1,450	11,255
30	49	48	12	29	138	546	336	84	966	6,642	2,445	1,438	10,525
20	50	42	17	26	135	532	294	119	945	7,459	2,442	1,434	11,335
28	52	38	12	22	124	518	266	84	868	6,700	2,538	1,430	10,668
20	48	36	13	22	119	490	252	91	833	5,944	2,510	1,433	9,887
20	53	37	9	14	113	469	259	63	791	6,474	2,524	1,427	10,425
13	61	35	9	17	122	546	245	63	854	6,077	2,596	1,433	10,036
16	63	32	8	4	107	469	224	56	749	5,942	2,563	1,447	9,952
22	66	34	12	3	115	483	288	84	855	5,072	2,561	1,466	9,099
24	66	41	11	3	121	483	287	77	847	5,564	2,564	1,466	9,594
23	66	49	12	4	131	490	343	84	917	6,256	2,562	1,466	10,284
22	65	58	12	3	138	476	406	84	966	5,960	2,572	1,466	9,998
12	62	58	13	4	137	462	406	91	959	6,028	2,567	1,428	10,023
21	57	57	19	8	141	455	399	133	987	6,549	2,568	1,433	10,530
28	60	47	17	7	131	469	329	119	919	6,445	2,567	1,423	10,435
29	61	46	14	11	132	504	322	98	924	6,814	2,574	1,420	10,808
21	62	46	12	10	130	504	222	84	910	6,857	2,577	1,404	10,838
21	66	46	14	10	136	532	322	98	952	6,548	2,602	1,385	10,495
17	67	42	13	6	128	511	294	91	896	5,535	2,511	1,292	9,338
23	67	39	16	3	124	490	273	105	868	5,372	2,495	1,502	9,369
10	68	27	18	2	115	490	189	126	805	5,251	2,477	1,750	9,478
28	76	25	6	3	110	553	175	42	770	5,280	2,455	1,840	9,575
22	88	24	-	7	119	665	169	-	833	5,762	2,268	1,840	9,810
18	92	22	-	5	119	679	154	-	833	5,783	2,179	1,763	9,725
12	85	21	-	6	112	637	147	-	784	5,780	2,339	1,762	9,881
27	80	23	-	5	108	595	161	-	756	5,931	2,264	1,755	9,950
27	83	24	-	25	132	756	168	-	924	7,996	2,250	1,764	12,010
28	90	32	-	9	131	693	224	-	917	7,996	2,294	1,710	12,000
24	94	32	-	16	142	770	224	-	994	6,895	2,274	1,689	10,858
23	90	32	-	19	141	763	224	-	987	7,299	1,955	1,692	10,937

CONTAGIOUS DISEASES ACT, 1866.

WOOLWICH DISTRICT.

RETURN of the Number of PROSTITUTES brought under the Provisions of the CONTAGIOUS DISEASES ACT, 1866, for each Week during the Year (June 1868 to May 1869 inclusive).

WEEK ENDED	Number of Beds in Lock-Wards of Hospital.	Number Admitted to Hospital on Certificates of Visiting Surgeon.	Number Examined and found Free from Disease.	Total Number brought under the Provisions of the Act.	Number Discharged from Hospital.				TOTAL Number Discharged.
					Number Discharged Free from Disease, who still follow their former Pursuits.	Number who have Entered Homes, &c.	Number who have Returned to their Friends.	Number Discharged as Incurable.	
4 June 1868	-	5	17	22	11	-	-	-	11
11 " "	-	12	22	34	13	-	1	-	14
18 " "	-	16	15	31	13	-	-	-	13
25 " "	-	12	9	21	7	1	-	-	8
2 July "	-	8	14	22	5	1	2	1	9
9 " "	-	11	8	19	13	-	2	-	15
16 " "	-	16	14	30	6	-	-	-	6
23 " "	-	8	10	18	0	-	-	-	0
30 " "	-	1	6	7	10	-	2	-	12
6 August "	-	7	10	17	6	1	2	1	10
13 " "	-	12	11	23	6	1	1	-	8
20 " "	-	12	25	37	4	1	-	-	5
27 " "	-	7	6	13	15	-	1	1	17
3 Sept. "	-	17	12	29	7	1	4	-	12
10 " "	-	9	14	23	4	-	1	-	5
17 " "	-	19	21	40	5	-	-	-	5
24 " "	-	10	17	27	7	2	2	-	11
1 October "	-	4	23	27	11	1	3	-	15
8 " "	-	19	34	53	4	1	1	1	7
15 " "	-	6	15	21	9	2	1	-	12
22 " "	-	1	6	7	8	-	1	-	9
29 " "	-	21	56	77	15	1	1	-	17
5 Nov. "	-	8	31	39	9	-	1	-	10
12 " "	-	4	21	25	9	-	-	-	9
19 " "	-	14	18	32	15	-	1	-	16
26 " "	-	13	40	53	6	-	-	-	6
3 Dec. "	40	12	33	45	13	-	-	-	13
10 " "	-	10	30	40	7	-	-	1	8
17 " "	-	4	17	21	9	-	-	-	9
24 " "	-	10	22	32	9	-	-	-	9
31 " "	-	14	39	53	8	2	-	-	10
7 Jan. 1869	-	16	28	44	11	-	-	-	11
14 " "	-	8	38	46	5	1	-	1	7
21 " "	-	9	27	36	9	-	-	-	9
28 " "	-	11	41	52	11	-	2	-	13
4 Feb. "	-	8	24	32	9	1	-	-	10
11 " "	-	12	40	52	8	-	2	2	12
18 " "	-	5	44	49	10	-	1	-	11
25 " "	-	14	23	37	17	1	3	-	21
4 March "	-	9	24	33	7	-	-	-	7
11 " "	-	9	32	41	9	-	-	-	9
18 " "	-	7	48	55	8	2	-	1	11
25 " "	-	5	33	38	5	-	-	-	5
1 April "	-	11	24	35	7	-	1	3	11
8 " "	-	12	35	47	6	-	-	1	7
15 " "	-	10	47	57	6	-	2	-	8
22 " "	-	13	39	52	13	-	3	-	16
29 " "	-	14	14	28	9	1	1	-	11
6 May "	-	9	44	53	4	-	1	1	6
13 " "	-	11	38	49	9	1	6	-	16
20 " "	-	17	62	79	8	1	2	-	11
27 " "	-	12	62	74	9	-	-	-	9

Metropolitan Police Office, }
12 July 1869.

F. M. Mallatier.
E. Y. W. Henderson,
The Commissioner of Police of the Metropolis.

ALDERSHOT DISTRICT.

RETURN of the Number of PROSTITUTES brought under the Provisions of the CONTAGIOUS DISEASES ACT, 1866, for each Week during the Year (June 1868 to May 1869 inclusive).

WEEK ENDED	Number of Beds in Lock-Wards of Hospital.	Number Admitted to Hospital on Certificates of Visiting Surgeon.	Number Examined and found Free from Disease.	Total Number brought under the Provision of the Act.	Number Discharged from Hospital.				TOTAL Number Discharged.
					Number Discharged Free from Disease, who still follow their former Pursuits.	Number who have Entered Homes, &c.	Number who have Returned to their Friends.	Number Discharged as Incurable.	
4 June - 1868	-	18	31	49	16	-	-	-	16
11 " "	-	12	36	48	14	-	-	-	14
18 " "	-	10	41	51	33	-	-	-	23
25 " "	-	10	38	48	14	-	1	-	15
2 July "	-	19	37	56	8	-	1	-	9
9 " "	-	18	43	61	17	2	1	-	20
16 " "	-	22	48	70	9	1	-	-	10
23 " "	-	24	53	77	16	-	-	2	18
30 " "	-	24	45	69	17	-	-	1	18
6 August "	-	15	24	39	19	-	-	-	19
13 " "	-	15	49	64	15	-	-	-	15
20 " "	-	16	30	46	18	1	2	-	21
27 " "	-	18	59	77	18	-	-	-	18
3 Sept. "	-	10	42	52	17	-	-	-	17
10 " "	-	17	55	72	18	3	-	-	21
17 " "	-	14	47	61	13	-	-	-	13
24 " "	-	22	68	90	17	-	-	-	17
1 October "	-	12	77	89	14	-	-	-	14
8 " "	-	16	54	70	18	-	-	-	18
15 " "	-	17	75	92	15	-	-	-	15
22 " "	-	14	63	77	16	2	-	-	18
29 " "	-	24	72	96	15	-	-	-	15
5 Nov. "	-	21	71	92	13	1	1	-	15
12 " "	-	14	67	81	15	-	1	-	16
19 " "	70	16	90	106	19	-	-	-	19
26 " "	-	10	72	82	17	-	-	-	17
3 Dec. "	-	16	65	81	16	-	-	-	16
10 " "	-	16	78	94	18	-	-	-	18
17 " "	-	10	84	94	12	-	-	-	12
24 " "	-	24	71	95	18	-	1	-	19
31 " "	-	10	75	85	5	-	-	-	5
7 Jan. 1869	-	20	60	80	20	-	-	-	20
14 " "	-	15	72	87	16	-	-	-	16
21 " "	-	8	64	72	15	-	-	-	15
28 " "	-	18	77	95	13	-	-	-	13
4 Feb. "	-	12	63	75	17	-	-	-	17
11 " "	-	15	72	87	10	-	-	-	10
18 " "	-	16	69	85	17	-	-	-	17
25 " "	-	14	77	91	16	-	-	-	16
4 March "	-	13	78	91	12	-	-	-	12
11 " "	-	11	71	82	14	-	-	-	14
18 " "	-	19	80	99	18	-	-	-	18
25 " "	-	11	82	93	9	1	-	1	11
1 April "	-	13	82	95	14	-	-	-	14
8 " "	-	14	72	86	14	-	-	1	15
15 " "	-	11	76	87	12	-	-	-	12
22 " "	-	12	89	101	20	1	-	-	21
29 " "	-	9	92	101	14	-	-	-	14
6 May "	-	11	107	118	15	-	-	-	15
13 " "	-	24	130	154	13	-	-	-	13
20 " "	110	16	86	102	15	-	-	-	15
27 " "	-	17	101	118	11	-	-	-	11

Metropolitan Police Office,
12 July 1869.

F. M. Mallatieu.
E. Y. W. Henderson,
The Commissioner of Police of the Metropolis.

WINDSOR DISTRICT.

RETURN of the Number of PROSTITUTES brought under the Provisions of the CONTAGIOUS DISEASES Act, 1866, for each Week during the Year (June 1868 to May 1869 inclusive).

WEEK ENDED	Number of Beds in Lock-Wards of Hospital.	Number Admitted to Hospital on Certificates of Visiting Surgeon.	Number Examined and found Free from Disease.	Total Number brought under the Provisions of the Act.	Number Discharged from Hospital.				TOTAL Number Discharged.
					Number Discharged Free from Disease, who still follow their former Pursuits.	Number who have Entered Homes, &c.	Number who have Returned to their Friends.	Number Discharged as Incurable.	
4 June 1868	-	-	-	-	1	-	-	-	1
11 "	-	3	8	11	2	-	1	-	3
18 "	-	-	-	-	3	-	1	-	4
25 "	-	1	-	1	3	-	-	-	3
2 July	-	1	8	9	2	-	-	-	2
9 "	-	3	1	4	-	-	-	-	-
16 "	-	1	6	7	1	-	1	-	2
23 "	-	4	7	11	2	-	-	-	2
30 "	-	2	-	2	2	-	-	-	2
6 August	-	-	-	-	1	-	-	-	1
13 "	-	-	-	-	2	-	-	-	2
20 "	-	6	3	9	1	-	-	-	1
27 "	-	2	7	9	1	-	-	-	1
3 Sept.	-	5	4	9	3	-	-	-	3
10 "	-	4	6	10	-	-	1	-	1
17 "	-	1	1	2	2	-	-	-	2
24 "	-	1	-	1	3	-	-	-	3
1 October	-	2	6	8	2	-	-	-	2
8 "	-	2	-	2	2	-	-	-	2
15 "	-	3	7	10	1	-	-	-	1
22 "	-	-	-	-	2	-	-	-	2
29 "	-	3	16	19	-	-	1	-	1
5 Nov.	-	-	-	-	4	-	-	-	4
12 "	-	4	6	10	-	-	-	-	-
19 "	-	1	-	1	1	-	-	-	1
26 "	-	8	9	17	2	-	-	-	2
3 Dec.	20	2	3	5	6	-	-	-	6
10 "	-	2	5	7	1	-	-	-	1
17 "	-	4	5	9	2	-	-	-	2
24 "	-	1	10	11	2	-	1	-	3
31 "	-	3	8	11	4	-	-	-	4
7 Jan. 1869	-	1	14	15	2	-	2	-	4
14 "	-	-	3	3	1	1	-	-	2
21 "	-	1	10	11	3	-	-	-	3
28 "	-	6	14	20	1	-	-	-	1
4 Feb.	-	2	7	9	6	-	-	-	6
11 "	-	1	13	14	1	-	-	-	1
18 "	-	5	15	20	2	-	-	-	2
25 "	-	2	10	12	3	-	-	-	3
4 March	-	1	12	13	2	-	-	-	2
11 "	-	4	4	8	-	-	-	-	-
18 "	-	3	7	10	1	-	-	-	1
25 "	-	1	10	11	2	-	-	-	2
1 April	-	-	8	8	2	-	-	-	2
8 "	-	1	6	10	3	-	-	-	3
15 "	-	1	8	9	2	-	-	-	2
22 "	-	1	5	6	4	-	-	-	4
29 "	-	4	12	16	1	-	-	-	1
6 May	-	1	7	8	1	-	-	-	1
13 "	-	2	8	10	2	-	-	-	2
20 "	-	-	6	6	2	-	-	-	2
27 "	-	-	10	10	-	-	-	-	-

Metropolitan Police Office,
12 July 1869.

F. M. Mallieau.
E. Y. W. Henderson,
The Commissioner of Police of the Metropolis.

SHORNCLIFFE DISTRICT.

RETURN of the Number of PROSTITUTES brought under the Provisions of the CONTAGIOUS DISEASES ACT, 1866, for each Week during the Year (June 1868 to May 1869 inclusive).

WEEK ENDED	Number of Beds in Lock-Wards of Hospital.	Number Admitted to Hospital on Certificate of Visiting Surgeon.	Number Examined and found Free from Disease.	Total Number brought under the Provisions of the Act.	Number Discharged from Hospital.				TOTAL Number Discharged.
					Number Discharged Free from Disease, who still follow their former Pursuits.	Number who have Entered Homes, &c.	Number who have Returned to their Friends.	Number Discharged as Incurable.	
5 June 1868	—	—	—	—	—	—	—	—	—
12 " "	—	—	—	—	—	—	—	—	—
19 " "	—	—	—	—	—	—	—	—	—
26 " "	—	—	—	—	—	—	—	—	—
3 July "	—	—	—	—	—	—	—	—	—
10 " "	—	—	—	—	—	—	—	—	—
17 " "	—	—	—	—	—	—	—	—	—
24 " "	—	—	—	—	—	—	—	—	—
31 " "	—	24	18	42	—	—	—	—	—
8 August "	—	7	12	19	6	—	—	—	6
15 " "	—	11	7	18	10	—	—	—	10
22 " "	—	3	7	10	4	1	—	—	6
29 " "	—	2	14	16	3	—	—	—	3
5 Sept. "	—	1	15	16	5	—	—	—	5
12 " "	—	4	21	25	1	1	—	—	2
19 " "	—	6	21	27	4	1	—	—	5
26 " "	—	4	22	26	2	—	1	—	3
3 October "	—	3	16	19	3	—	1	—	4
10 " "	—	2	27	29	8	—	—	—	8
17 " "	—	1	20	21	—	—	—	—	—
24 " "	—	2	18	20	3	1	1	—	5
31 " "	—	2	22	24	4	—	—	—	4
7 Nov. "	—	6	21	27	5	—	—	—	5
14 " "	—	5	17	22	1	—	—	—	1
21 " "	—	1	22	23	1	1	—	—	2
28 " "	—	4	26	30	—	1	—	—	1
5 Dec. "	—	2	17	19	7	—	—	—	7
12 " "	—	2	16	18	2	—	1	—	3
19 " "	—	2	16	18	—	—	1	—	1
26 " "	—	1	23	24	6	—	—	—	6
2 Jan. 1869	25	3	20	23	2	—	—	—	2
9 " "	—	1	15	16	3	—	—	—	3
16 " "	—	3	19	22	1	—	—	—	1
23 " "	—	7	22	29	1	—	—	—	1
30 " "	—	7	12	19	1	1	—	1	3
6 February "	—	3	15	18	5	—	—	—	5
13 " "	—	5	11	16	2	—	—	—	2
20 " "	—	2	17	19	5	—	—	—	5
27 " "	—	4	15	19	3	1	—	—	4
6 March "	—	6	14	20	4	—	—	—	4
13 " "	—	2	19	21	4	1	—	—	5
20 " "	—	7	20	27	3	—	1	—	4
27 " "	—	5	21	26	5	—	—	1	6
2 April "	—	2	18	20	4	—	—	—	4
9 " "	—	4	24	28	4	—	—	—	4
16 " "	—	1	20	21	7	—	—	—	7
23 " "	—	4	14	18	—	1	—	—	1
30 " "	—	7	22	29	—	1	—	—	1
7 May "	—	5	16	21	1	—	—	—	2
14 " "	—	4	11	15	2	—	—	—	2
21 " "	—	6	11	16	7	1	—	—	8
28 " "	—	4	16	20	6	—	—	—	6

F. M. Mallan.

Metropolitan Police Office, }
12 July 1869.

E. Y. W. Henderson,
The Commissioner of Police of the Metropolis.

COLCHESTER DISTRICT.

RETURN of the Number of PROSTITUTES brought under the Provisions of the CONTAGIOUS DISEASES Act, 1866, for each Week during the Year (June 1868 to May 1869 inclusive).

WEEK ENDED	Number of Beds in Lock-Wards of Hospital.	Number Admitted to Hospital on Certificate of Visiting Surgeon.	Number Examined and found Free from Disease.	Total Number brought under the Provisions of the Act.	Number Discharged from Hospital.				Total Number Discharged.
					Number Discharged Free from Disease, who still follow their former Pursuits.	Number who have Entered Homes, &c.	Number who have Returned to their Friends.	Number Discharged as Incurable.	
8 June 1868	—	—	—	—	—	—	—	—	—
15 " "	—	—	—	—	—	—	—	—	—
22 " "	—	—	—	—	—	—	—	—	—
29 " "	—	—	—	—	—	—	—	—	—
6 July "	—	—	—	—	—	—	—	—	—
13 " "	—	—	—	—	—	—	—	—	—
20 " "	—	—	—	—	—	—	—	—	—
27 " "	—	—	—	—	—	—	—	—	—
3 August "	—	—	—	—	—	—	—	—	—
10 " "	—	—	—	—	—	—	—	—	—
17 " "	—	—	—	—	—	—	—	—	—
24 " "	—	—	—	—	—	—	—	—	—
31 " "	—	—	—	—	—	—	—	—	—
7 Sept. "	—	—	—	—	—	—	—	—	—
14 " "	—	—	—	—	—	—	—	—	—
21 " "	—	—	—	—	—	—	—	—	—
28 " "	—	—	—	—	—	—	—	—	—
5 Oct. "	—	—	—	—	—	—	—	—	—
12 " "	—	—	—	—	—	—	—	—	—
19 " "	—	—	—	—	—	—	—	—	—
26 " "	—	—	—	—	—	—	—	—	—
2 Nov. "	—	—	—	—	—	—	—	—	—
9 " "	—	—	—	—	—	—	—	—	—
16 " "	—	—	—	—	—	—	—	—	—
23 " "	—	—	—	—	—	—	—	—	—
30 " "	—	—	—	—	—	—	—	—	—
7 Dec. "	—	—	—	—	—	—	—	—	—
14 " "	—	—	—	—	—	—	—	—	—
21 " "	—	—	—	—	—	—	—	—	—
28 " "	—	—	—	—	—	—	—	—	—
4 Jan. 1869	—	—	—	—	—	—	—	—	—
11 " "	—	—	—	—	—	—	—	—	—
18 " "	—	—	—	—	—	—	—	—	—
25 " "	—	7	15	22	—	—	—	—	—
1 Feb. "	—	8	17	25	—	—	—	—	—
8 " "	—	4	14	18	2	—	1	—	3
15 " "	—	4	17	21	2	—	—	—	2
22 " "	—	6	14	20	—	—	—	—	—
1 March "	—	3	11	14	1	—	1	—	2
8 " "	—	2	24	26	3	—	1	—	4
15 " "	—	2	20	22	2	1	1	—	4
22 " "	—	2	17	19	5	1	—	—	6
29 " "	25	5	7	12	1	—	—	—	1
5 April "	—	2	18	20	1	—	—	—	1
12 " "	—	3	20	23	1	—	—	—	2
19 " "	—	5	13	18	—	—	1	—	1
26 " "	—	1	15	16	3	—	—	—	3
3 May "	—	2	17	19	1	—	—	—	1
10 " "	—	7	14	21	2	—	2	—	5
17 " "	—	1	14	15	—	—	1	—	1
24 " "	—	3	15	18	2	—	1	—	3
31 " "	—	2	18	20	1	1	3	—	6

Metropolitan Police Office, }
12 July 1869.

F. M. Mallalieu.
E. Y. W. Henderson,
The Commissioner of Police of the Metropolis.

CHATHAM DISTRICT.

RETURN of the Number of PROSTITUTES brought under the Provisions of the CONTAGIOUS DISEASES ACT, 1866, for each Week during the Year (June 1868 to May 1869 inclusive).

WEEK ENDED	Number of Beds in Lock-Wards of Hospital.	Number Admitted to Hospital on Certificate of Visiting Surgeon.	Number Examined and found Free from Disease.	Total Number brought under the Provisions of the Act.	Number Discharged from Hospital.				TOTAL Number Discharged.
					Number Discharged Free from Disease, who still follow their former Pursuits.	Number who have Entered Homes, &c.	Number who have Returned to their Friends.	Number Discharged as Incurable.	
6 June 1868	-	8	5	13	18	1	1	-	20
13 " "	-	12	15	27					
20 " "	-	10	15	25					
27 " "	-	17	13	30					
4 July "	-	9	9	18	144	6	23	-	173
11 " "	-	14	14	28					
18 " "	-	11	10	21					
25 " "	-	13	11	24					
1 August "	-	12	12	24	138	10	14	1	163
8 " "	-	14	15	29					
15 " "	-	21	18	39					
22 " "	-	10	12	22					
29 " "	-	9	10	28	147	8	7	3	163
5 Sept. "	-	12	29	41					
12 " "	-	20	26	46					
19 " "	-	11	30	41					
26 " "	-	14	31	45	100	-	-	-	109
3 October "	-	9	38	47					
10 " "	-	14	36	50					
17 " "	-	7	38	45					
24 " "	-	10	34	44	75	-	-	-	-
31 " "	-	9	43	52					
7 Nov. "	-	19	32	51					
14 " "	-	11	35	46					
21 " "	-	14	33	47	147	8	7	3	163
28 " "	75	10	40	50					
5 Dec. "	-	20	34	54					
12 " "	-	8	42	50					
19 " "	-	13	35	48	147	8	7	3	163
26 " "	-	5	22	27					
2 Jan. 1869	-	11	45	56					
9 " "	-	18	51	69					
16 " "	-	8	34	42	147	8	7	3	163
23 " "	-	18	34	52					
30 " "	-	11	47	58					
6 Feb. "	-	11	43	54					
13 " "	-	14	31	45	147	8	7	3	163
20 " "	-	11	41	52					
27 " "	-	12	46	58					
6 March "	-	19	43	62					
13 " "	-	12	35	47	147	8	7	3	163
20 " "	-	17	45	62					
27 " "	-	10	41	51					
3 April "	-	18	41	59					
10 " "	-	10	36	46	100	-	-	-	109
17 " "	-	19	53	72					
24 " "	-	18	49	67					
1 May "	-	14	23	37					
8 " "	-	13	44	57	100	-	-	-	109
15 " "	-	14	51	65					
22 " "	-	17	41	58					
29 " "	-	22	63	85					

Metropolitan Police Office,
12 July 1869.

E. Y. W. Henderson,
The Commissioner of Police of the Metropolis.

F. M. Mallatieu.

SHEERNESS DISTRICT.

RETURN of the Number of PROSTITUTES brought under the Provisions of the CONTAGIOUS DISEASES Act, 1866, for each Week during the Year (June 1868 to May 1869 inclusive).

WEEK ENDED	Number of Beds in Lock-Wards of Hospital.	Number Admitted to Hospital on Certificates of Visiting Surgeon.	Number Examined and found Free from Disease.	Total Number brought under the Provisions of Act.	Number Discharged from Hospital.				TOTAL Number Discharged	
					Number Discharged Free from Disease, who still follow their former Pursuits.	Number who have Entered Homes, &c.	Number who have Returned to their Friends.	Number Discharged as Incurable.		
6 June 1868	-	7	14	21						
13 "	-	4	18	22	4	-	-	1	-	5
20 "	-	-	8	8						
27 "	-	1	2	3						
4 July "	-	1	1	2	15	-	-	2	-	17
11 "	-	-	2	2						
18 "	-	-	-	-						
25 "	-	2	3	5						
1 August "	-	2	2	4						
8 "	-	-	3	3	13	-	-	1	-	14
15 "	-	1	1	2						
22 "	-	-	4	4						
29 "	-	2	1	3						
5 Sept. "	-	3	22	25						
12 "	-	2	24	26	23	-	-	2	-	25
19 "	-	2	5	7						
26 "	-	-	5	5						
3 October "	-	-	1	1						
10 "	-	-	2	2						
17 "	-	-	3	3	11	-	-	-	-	11
24 "	-	3	2	5						
31 "	-	-	4	4						
7 Nov. "	-	-	4	4						
14 "	-	1	3	4						
21 "	-	-	2	2	23	-	-	2	-	25
28 "	5	-	2	2						
5 Dec. "	-	2	22	24						
12 "	-	2	28	30						
19 "	-	3	0	12						
26 "	-	1	-	1	11	-	-	-	-	11
2 Jan. 1869	-	-	-	-						
9 "	-	4	1	5						
16 "	-	2	2	4						
23 "	-	3	1	4						
30 "	-	1	3	4	11	-	-	-	-	11
6 Feb. "	-	4	-	4						
13 "	-	1	2	3						
20 "	-	2	5	7						
27 "	-	1	2	3						
6 March "	-	1	31	32	11	-	-	-	-	11
13 "	-	2	26	28						
20 "	-	3	8	11						
27 "	-	1	2	3						
3 April "	-	1	-	1						
10 "	-	3	-	3	11	-	-	-	-	11
17 "	-	-	1	1						
24 "	-	1	2	3						
1 May "	-	1	1	2						
8 "	-	-	2	2						
15 "	-	-	4	4	11	-	-	-	-	11
22 "	-	2	1	3						
29 "	-	1	3	4						

Metropolitan Police Office, }
12 July 1869.

F. M. Mallieu.
E. Y. W. Henderson,
The Commissioner of Police of the Metropolis.

PORTSMOUTH DISTRICT.

RETURN showing the Number of PROSTITUTES brought under the Provisions of the CONTAGIOUS DISEASES ACT, 1866, for each Week during the Year (June 1868 to May 1869 inclusive).

WEEK ENDED	Number of Beds in Lock Wards of Hospital.	Number Admitted to Hospital on Certificates of Visiting Surgeon.	Number Examined and found free from Disease.	Total Number brought under the Provisions of the Act.	Number Discharged from Hospital.				TOTAL Number Discharged.
					Number Discharged free from Disease, who still follow their former Pursuits.	Number who have Entered Homes, &c.	Number who have Returned to their Friends.	Number Discharged as Incurable.	
7 June - 1868	-	35	48	83	9	1	-	-	10
14 " "	-	32	56	88	2	-	1	-	3
21 " "	-	19	28	47	15	-	-	1	16
28 " "	-	20	50	70	8	2	1	-	11
5 July	-	26	85	111	8	-	-	-	8
12 " "	-	8	12	20	14	1	2	1	18
19 " "	-	17	22	39	19	2	1	1	23
26 " "	-	14	20	34	22	1	2	-	25
2 August	-	17	70	87	15	1	-	-	16
9 " "	-	20	59	88	20	3	3	-	26
16 " "	-	11	12	23	16	-	1	-	17
23 " "	-	12	27	39	25	1	2	-	28
30 " "	-	35	144	179	18	-	1	-	19
6 Sept.	-	21	21	42	21	-	2	-	23
13 " "	-	9	3	12	7	1	3	-	11
20 " "	-	8	4	12	9	-	1	-	10
27 " "	-	16	23	39	15	1	1	2	19
4 October	-	16	5	21	18	1	-	-	19
11 " "	-	22	42	64	17	-	1	-	18
18 " "	-	21	14	35	19	2	-	2	23
25 " "	-	10	6	16	11	-	2	-	13
1 Nov.	-	15	19	34	16	1	-	1	18
8 " "	-	17	40	57	13	-	1	-	14
15 " "	-	14	33	47	20	2	2	1	25
22 " "	-	18	41	59	14	1	-	-	15
29 " "	-	20	55	75	15	-	1	-	16
6 Dec.	120	10	26	36	16	1	1	1	19
13 " "	-	21	52	73	15	2	1	2	20
20 " "	-	14	81	95	18	-	2	-	20
27 " "	-	16	70	95	14	3	-	-	17
3 Jan. - 1869	-	22	53	75	17	-	1	1	19
10 " "	-	17	84	101	18	2	-	1	21
17 " "	-	21	137	158	8	1	1	-	10
24 " "	-	12	57	69	21	-	-	-	21
31 " "	-	18	133	151	17	2	1	1	21
7 Feb.	-	9	141	150	16	1	1	1	19
14 " "	-	15	112	127	12	1	-	-	13
21 " "	-	16	160	176	14	1	1	1	17
28 " "	-	18	160	178	20	-	-	-	20
7 March	-	20	132	152	18	2	2	1	23
14 " "	-	18	127	145	9	-	1	-	10
21 " "	-	13	183	196	17	2	1	1	21
28 " "	-	12	125	137	15	2	2	-	19
4 April	-	13	137	155	8	-	1	-	9
11 " "	-	16	179	195	14	1	2	1	18
18 " "	-	21	149	170	20	1	1	-	22
25 " "	-	18	133	151	15	1	2	-	18
2 May	-	13	166	179	15	1	1	-	17
9 " "	-	18	141	159	15	-	2	-	17
16 " "	-	15	176	191	11	2	1	1	15
23 " "	-	17	158	175	16	-	2	-	18
30 " "	-	14	216	230	12	1	1	-	14

Metropolitan Police Office,
12 July 1869.

F. M. Mallan.
E. Y. W. Henderson,
The Commissioner of Police of the Metropolis.

DEVONPORT DISTRICT.

RETURN of the Number of PROSTITUTES brought under the Provisions of the CONTAGIOUS DISEASES ACT, 1866, for each Week during the Year (June 1868 to May 1869 inclusive).

WEEK ENDED	Number of Beds in Lock-Wards of Hospital.	Number Admitted to Hospital on Certificates of Visiting Surgeon.	Number Examined and found free from Disease.	Total Number brought under the Provisions of the Act.	Number Discharged from Hospital.				TOTAL Number Discharged.
					Number Discharged free from Disease, who still follow their former Pursuits.	Number who have Entered Homes, &c.	Number who have Returned to their Friends.	Number Discharged as Incurable.	
6 June 1868	-	20	9	29	21	-	2	-	23
13 "	-	35	24	59	20	2	-	-	28
20 "	154	24	10	34	20	-	2	-	22
27 "	-	27	5	32	20	1	-	-	21
4 July	-	35	5	40	20	-	-	3	23
11 "	-	14	11	25	17	-	1	-	18
18 "	-	29	5	34	27	1	-	1	29
25 "	-	33	9	42	31	2	-	-	33
1 August	-	31	22	53	30	1	-	-	31
8 "	-	36	11	47	25	1	-	2	28
15 "	-	19	9	28	29	-	1	1	31
22 "	-	35	29	64	39	2	2	-	43
29 "	-	54	15	69	29	1	-	4	34
5 Sept.	-	40	19	59	45	1	-	-	40
12 "	-	33	38	71	34	1	-	-	35
19 "	-	35	58	93	31	4	-	-	35
26 "	-	30	63	93	39	2	-	-	41
3 October	-	30	66	96	35	-	-	-	35
10 "	-	18	54	72	32	-	1	-	33
17 "	-	26	61	87	21	1	-	-	22
24 "	-	23	63	86	23	3	-	-	26
31 "	-	35	73	108	22	5	-	-	27
7 Nov.	-	44	74	118	30	2	-	-	32
14 "	-	33	84	117	35	1	-	-	36
21 "	-	55	55	110	33	1	1	1	36
28 "	-	37	73	110	28	-	-	-	28
5 Dec.	-	18	87	105	32	-	-	-	32
12 "	-	42	91	133	37	1	-	-	38
19 "	162	33	86	119	28	1	-	-	29
26 "	-	21	32	53	28	-	1	1	30
2 Jan. 1869	-	42	106	148	34	-	-	-	34
9 "	-	26	90	116	21	-	-	1	22
16 "	-	27	75	102	22	3	-	-	25
23 "	-	32	130	162	36	-	-	1	37
30 "	-	38	115	153	32	-	2	2	36
6 Feb.	-	35	118	153	33	1	2	1	37
13 "	-	39	121	160	35	1	-	1	37
20 "	-	39	117	156	33	1	-	-	34
27 "	-	31	113	144	38	2	1	-	41
6 March	-	44	124	168	28	-	-	3	31
13 "	-	29	145	174	29	1	-	2	32
20 "	-	27	124	151	24	4	-	-	28
27 "	-	12	74	86	20	1	-	1	21
3 April	-	37	147	184	31	1	-	-	32
10 "	-	36	102	138	33	-	-	2	35
17 "	-	28	120	148	34	-	1	-	35
24 "	-	31	104	135	30	1	-	-	31
1 May	-	29	100	129	27	1	1	1	30
8 "	-	35	85	120	33	1	-	1	35
15 "	-	28	95	123	32	-	-	-	32
22 "	-	35	132	167	26	-	-	1	27
29 "	-	24	110	134	38	1	-	1	40

Metropolitan Police Office,
12 July 1869.

F. M. Mallieu,
E. Y. W. Henderson,
The Commissioner of Police of the Metropolis.

R E P O R T
FROM THE
SELECT COMMITTEE
ON
CONTAGIOUS DISEASES ACT (1866);
TOGETHER WITH THE
PROCEEDINGS OF THE COMMITTEE,
MINUTES OF EVIDENCE,
AND APPENDIX.

*Ordered, by The House of Commons, to be Printed,
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ON

CONTAGIOUS DISEASES ACT (1866).

*Ordered, by The House of Commons, to be Printed,
8 July 1869.*

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I N D E X.

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Return showing the number of prostitutes brought under the provision of the Act for each of the four quarters ended 1st April 1869, *App.* 95—Similar return for each week during the year ended May 1869, *ib.* 122.

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Coldstream Guards. Grounds of the conclusion that the system of periodical examination in the Coldstream Guards is not successful in reducing the amount of secondary disease, *Balfour* 1160-1171.

Invariable practice in the Coldstream Guards of periodically examining the men, except the non-commissioned officers and those who are married, *Wyatt* 1310-1313—Mode in which the examination is conducted, every regard being had to decency, *ib.* 1314-1318, 1384-1388—Instances of the value of the examinations in the detection of primary disease, *ib.* 1319-1321, 1323, 1331, 1361, 1398.

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Colonies. Estimate in the present year of 3,000 l. for the purposes of the Act in the colonies, as regards the Army, *Greene* 754.

Common Prostitutes. Grounds for suggesting that a new clause be added to the Act, defining the term "common prostitute," *Sloggett* 158-165—Suggested enlargement of the present definition, *Parsons* 374-383.—See also *Clandestine Prostitution*.

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Crimes and Offences. Very few crimes or offences now committed by the prostitutes at Aldershot, *Barr* 598.

Return showing the number of persons who have been brought before magistrates for offences against the Act, for the year ended May 1869, *App.* 93.

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Detention of Women. Advantage if the period of detention were extended from six to nine months, the necessity of a fresh certificate at the end of three months being still retained, *Sloggett* 48-54. 73. 74—Approval of the extension of the period of detention from six to nine months save that in exceptional cases girls might be allowed to leave at an earlier period with a view to reformation, when their parents come from a distance for them, *Parsons* 237. 239-252—Approval of an extension of the period of detention from six to nine months, *Leonard* 472; *Barr* 640; *Waylen* 874.

Conclusion of the Committee favourable to extending the limitation of detention, under section 24, from six to nine months, *Rep.* iv.

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DEVONPORT:

Great good already done by the Act in the reclamation of prostitutes at Devonport; particulars hereon, *Sloggett* 41. 80-88. 94-112. 115—Much less violence of syphilis at Devonport since the Act has been in operation; the disease is, in fact, being stamped out, *ib.* 55-59—Increase of intercourse and of earnings since the women have been so much reduced in number, *ib.* 105, 106. 118, 119—Steps taken by many of the women to evade the police by removing into private lodgings, *ib.* 113, 114—Single instance of a girl having been improperly subjected to witness's examination *ib.* 123-126.

Reference to a certain return (*App.* 85), as showing the limited amount of disease in the soldiers at Plymouth and Devonport, and also the non-virulent character of the disease during the present year, *Sloggett* 173-178—Very great difficulty experienced through the area being circumscribed to five miles; suggested extension to fifteen miles, *ib.* 179-196. 207-209.

Since October 1866 witness has made nearly 9,000 examinations, in the case of 1,775 individuals, *Sloggett* 98. 115—In 1864 there were 2,000 known prostitutes in Devonport and Plymouth; there are now only 770, *ib.* 98. 104—Calculation that since October 1866, 550 women have given up prostitution, *ib.* 98, 99. 109-112—Excellent moral effect produced by the quiet and comfort of the Albert Hospital, and by the kindly treatment of the inmates, *ib.* 94. 100-103.

Importance of extending the limits of the Plymouth Station, *Leonard* 524—There are 160 beds, some of which are empty owing to the area being limited to five miles, *Romaine* 961—Approval of an extension of the area at Devonport, so as to include Ivybridge and Plympton; Kingsbridge and Dartmouth might also be included, *Mallalieu* 1439-1441. 1447-1461.

Number of women discharged from the Royal Albert Hospital as pregnant or as incurable, during the five months ending 31st May 1869, *App.* 86.

Return, and abstract thereof, of lock cases passed through the hospital between the 3rd December 1863 and the 31st March 1869, giving the respective per-centages of syphilitic and gonorrhœa cases, and showing the striking reduction in the former, *App.* 91, 92.

Return showing the number of prostitutes brought under the provisions of the Act for each of four quarters ended 1st April 1869, *App.* 95—Similar return for each week during the year ended May 1869, *ib.* 126.

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Discharged Women. Belief that little if any disease is propagated by the women when discharged as cured, *Parsons* 410-412.

Discipline. Sufficiency of the powers of the Act as to discipline, *Waylen* 894.

Disease. See *Aldershot.* *Colchester.* *Coldstream Guards.* *Devonport.* *Efficiency of the Army.* *Gonorrhœa.* *Hospitals.* *Incurable Cases.* *Number of Prostitutes.* *Operation of the Act.* *Portsmouth.* *Secondary Disease.* *Shorncliffe.* *Syphilis.* *Veneral Disease.*

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Drunk and Disorderly Women. Suggestion that a new clause be added to the Act, providing that the police shall detain women who on presenting themselves for examination are drunk or disorderly, *Sloggett* 150-157—Approval of power in the police to detain in custody for twenty-four hours any drunken women presenting themselves for examination, *Parsons* 256-258—Rare instances of disorderly women in witness's experience of the examination system, *Barr* 715, 716—Recommendation for detaining women who present themselves for examination in a drunken state, or too late in the day, *Romaine* 924.

Dublin. Very bad form of disease in Dublin, the Act not being in operation there, *Wyatt* 1435, 1436.

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Efficiency of the Army. Importance of the men being always in an efficient state whilst in the service; advantage on this score of their reporting themselves at an early stage of disease, *Balfour* 1186-1192.

Conclusion as to the beneficial effect upon the health and efficiency of the army by an examination of soldiers and an early detection of primary syphilis, as a means of preventing secondary syphilis and tertiary syphilis, *Wyatt* 1395-1416.

Emsworth. Statement showing the expediency of Emsworth being embraced in the operation of the Act at Portsmouth, *Parsons* 403, 404.

EXAMINATION OF PROSTITUTES :

Suggestion that a woman voluntarily submitting herself for examination should be equally subject to the penal clause as though ordered to appear by warrant of the justices; grounds for this recommendation, *Sloggett* 5-46; *Parsons* 238—Conclusion that there need be no fear of deterring women from voluntarily subjecting themselves to examination by making the 17th section of the Act compulsory, as proposed by witness, *Sloggett* 9, 10, 33—Great majority of the women who voluntarily submit to examination at Devonport, *ib.* 44.

Recommendation that the order for periodical examination shall continue in force for one year after the discharge from hospital if there be good cause for believing that prostitution is being continued, *Sloggett* 79, 89-91, 120, 121—Circumstance of its having been the practice at Portsmouth that the written signature of a woman consenting to periodical examination holds good for twelve months, whether she has been an inmate of the hospital or not, *Parsons* 253—Expediency of women continuing subject to periodical examination, unless they can prove they have given up habitual prostitution, *Leonard* 470, 471.

Voluntary submission of the Aldershot women to examination, after the difficulty at first had been got over, *Barr* 574, 583-585, 662, 663—Concurrence in the proposal for bringing under clause twenty-eight all women who voluntarily submit themselves to examination, *ib.* 637-639—Opinion that women voluntarily submitting themselves to examination should be compelled to comply with the ordinary regulations, *Greene* 801-806—Advantage of removing the doubt now existing upon the question whether women, voluntarily submitting themselves to examination, can be required subsequently to attend, *Romaine* 921, 922.

Number of examinations of common prostitutes at all the stations under the Act, during each quarter of the year ended 31st March 1869; total of 18,121 examinations during the year, *App.* 90.

Insufficient power under the Act as regards the continued obedience of women who have submitted to medical examination, *Rep.* iii—Recommendation that the notices of visiting surgeons shall have the effect of a warrant, which shall be an authority to the police to apprehend a woman refusing to appear on the day appointed, *ib.* iii, iv.

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Want of some more stringent law for the examination of soldiers, *Parsons* 302, 408—Evidence in support of the conclusion that there should be a periodical examination of all soldiers, *Barr* 609-622—Belief that there are many diseased men not in hospital; proof of this at Aldershot, *ib.* 609-611*—Statement as to forty men having been

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been found diseased in the 12th Regiment when it recently came into camp at Aldershot, *Barr* 610, 611.* 722—Doubt as to the men objecting to examination, *ib.* 618, 623.

Value attached to a periodical examination of soldiers, *Waylen* 847-855—Excellent result of a periodical examination by witness of a militia regiment for nearly three years, *ib.* 850-853, 856-858.

Grounds for the conclusion that at Aldershot there are many diseased soldiers who do not report themselves, a periodical examination of the men generally being very desirable, *Smith* 1007-1018, 1092, 1093—Statement as to one chemist at Aldershot, out of four, having in one week supplied medicines ninety-eight times to diseased soldiers, *ib.* 1007-1015.

Grounds for dissenting from the conclusion that a systematic examination of soldiers would show that there are a considerable number of diseased men at large who communicated disease, *Balfour* 1130-1136—Exception taken to a statement that in one chemist's shop at Aldershot there were ninety-eight cases in one week treated for venereal disease, *ib.* 1132, 1133, 1146, 1194, 1195—Doubt as to the accuracy of Mr. Barr's statement that on the occasion of a new regiment coming to Aldershot it was found necessary to detain about sixty men in hospital, *ib.* 1134-1136, 1145, 1146, 1217.

Explanation of the grounds for the abandonment ten years ago of the periodical examinations of the men; decided approval of such abandonment, *Balfour* 1137-1141, 1144—Request of the police which has led to the examination on coming into camp; non-objection to this precaution, *ib.* 1142, 1272, 1273—Tendency of periodical examinations to destroy the men's self-respect, *ib.* 1147, 1237-1239, 1243—Difficulty in drawing the line as to the exemption of men believed to be well-behaved, *ib.* 1147, 1148, 1240-1243.

Explanation that witness no longer objects to the system of examination of women, it having become the law, but he still adheres to his former objections in 1864 to an examination of soldiers, *Balfour* 1195-1201, 1250-1252—Opinion that the objections by Lord Herbert's Committee in 1859 to an examination of the men would equally have obtained if the Act of 1866 had been in force, *ib.* 1202-1204—Further conclusion that a general examination of the men would not only destroy their self-respect, but would be inefficient, *ib.* 1253-1265, 1276-1280—Limited evil from young soldiers feeling ashamed to report themselves, *ib.* 1281-1283.

Obligation upon the State to take steps for the prevention of disease among soldiers, there not being the same obligation as regards civilians, *Simon* 1306-1308.

Details in explanation and approval of the system of examination in the Coldstream Guards, *Wyatt* 1310 *et seq.*—Inexpediency of any exemption of men with good-conduct stripes, *ib.* 1313, 1367-1369—Belief that Lord Herbert's Committee recommended the discontinuance of the periodical examinations merely as experimental, a discretion moreover having been left to the commanding officer of each regiment, *ib.* 1357-1363—Prejudicial effect of the discontinuance of the inspections, *ib.* 1361—Very short time occupied in the fortnightly examinations in the Coldstream Guards, *ib.* 1372-1375.

Conclusion of the Committee as to the expediency, under certain limitations, of a system of periodical examination of soldiers in order to meet the evil arising from the propagation of undetected disease, *Rep.* iv.

See also *Coldstream Guards. Efficiency of the Army. Exemption from Examination. Furlough. Lawson, Mr. Medical Officers (Army). Punishment of Soldiers. Recruiting.*

Exemption from Examination. Grounds for the recommendation that the visiting surgeon should have power to exempt from examination any woman whom he had reason to believe was not a common prostitute nor diseased, *Parsons* 336-338, 345-368, 413, 414—Approval of power in the visiting surgeon to exempt from examination women whom he believes to be innocent, provided notice of such exemption be given to the magistrate, *Sloggett* 415-417.

Expenditure. Statement of the amount of money taken in the Army Estimates of the present year for the purposes of the Act of 1866, under different heads, *Greene* 753, 754—Expected readiness of the Treasury to sanction additional expenditure by the Admiralty for extending the Act at Portsmouth, &c., if so recommended by the Committee, *Romaine* 957-963.

Extension of Act. Advantage of an application of the Act to all places where soldiers or sailors are stationed, and of an extension of the area from five to fifteen miles, *Parsons* 310-312, 334, 335, 339-344, 385-390—Several additional places proposed to be brought within the operation of the Act, *Greene* 755, 756—Suggestion that concurrently with an extension of the area to fifteen miles all the places should be specified in the schedule to the Act, *Romaine* 964-968.

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Foreign Countries. Suggestions with a view to procuring statistics of the result of restrictions upon prostitutes in France and other foreign countries, before the question of applying restrictions in reference to the population generally of this country is decided upon, *Simon* 1507-1511. 1517-1528.

Fortnightly Examination. Advantage of the system of fortnightly examination of prostitutes; difficulty of examination more frequently, *Sloggett* 119. 122. 127.

Furlough. Facility and advantage of the examination of individual soldiers on return from furlough, *Balfour* 1143, 1144.—Reasons for an examination of men on return from furlough such reasons not applying to men in quarters, *ib.* 1276-1280.

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Godalming. Doubt as to the necessity of including Godalming in the Aldershot district, *Smith* 1105.

Gonorrhœa. Reference to gonorrhœa as a perfectly distinct complaint from syphilis, *Barr* 747-752.—Effect of the Act as regards gonorrhœa, in preventing an increase of the disease rather than in causing a decrease, *Balfour* 1124-1126.—Absence of necessity for legislation if it were merely a question of gonorrhœa, *ib.* 1231, 1232.

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Gravesend. The Act might with advantage be applied to Gravesend, *Balfour* 1152.—Approval of Gravesend and certain adjacent places being brought under the Act, *Mallalieu* 1467. 1483-1485.

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Greene, Aylmer. (Analysis of his Evidence.)—Statement of the amount of money taken in the Army Estimates of the present year for the purposes of the Act of 1866, under different heads, 753, 754.—Application of the Act to all the places in the Schedule except the Curragh, where the Hospital is in course of completion, 755, 766.—Several additional places proposed to be brought within the operation of the Act, 755, 756.—Information relative to the Lock Hospital accommodation now available at each station, and the extent to which the beds are used, 757-765.—New arrangements proposed for the accommodation of patients from different places, when the Act is extended as contemplated, 767-776.

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Grenadier Guards. Non-adoption of periodical examinations in the Grenadier Guards, *Balfour* 1175.

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Guildford. Approval of Guildford being included in the Aldershot district, *Smith* 1102-1104—Guildford ought probably to be included in the Aldershot district, *Mallalieu* 1473—Statement showing the expediency of bringing Havant within the operation of the Act at Portsmouth, *Parsons* 297-300. 339-342.

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Household Cavalry. The household cavalry regiments are not subjected to inspection, *Balfour* 1176, 1177.

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Imprisonment. Alterations proposed in the 29th and 32nd clauses with reference to periodical examination of prostitutes, after discharge from imprisonment, *Romaine* 949, 950.

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Number of prostitutes discharged as incurable in each quarter of the year ended 31st March 1869; total of seventy-three such cases in the year, *App.* 90—Return showing for each station or district the number discharged as incurable, *ib.* 94, 95. 118-126.

India. Arrangement at some stations in India by which some woman is paid to look after the bazaar women, and to find out who are diseased, *Balfour* 1178-1181.

Isle of Grain. Improvement if the Isle of Grain were included in the operation of the Act at Sheerness, *Swales* 431.

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Lavatories. Improvement if there were night lavatories in every barrack, and if men absent during the evening were required on return to freely cleanse themselves, *Barr* 623, 660, 661, 696—Suggestion that the keepers of low lodging houses and of public-houses be required to provide lavatories, *ib.* 696-698—Recommendation that it be compulsory upon all keepers of brothels, &c., where prostitutes congregate, to provide lavatories, *Balfour* 1151, 1244-1247—Great importance attached to facilities for ablution when the men return to barracks in the evening; satisfactory provision at Chelsea barracks in this respect, *Wyatt* 1381*-1383.

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