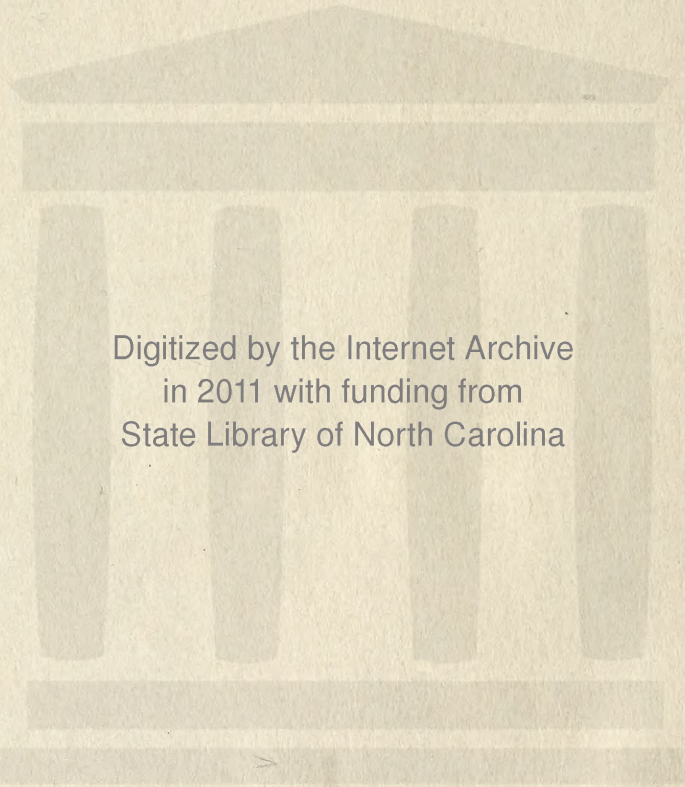


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SPEECH OF HON. THOMAS J. JARVIS, DELIVERED IN
THE DR. GRISSOM TRIAL, FOR THE DEFENCE,

FRIDAY, JULY 19, 1889



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SPEECH

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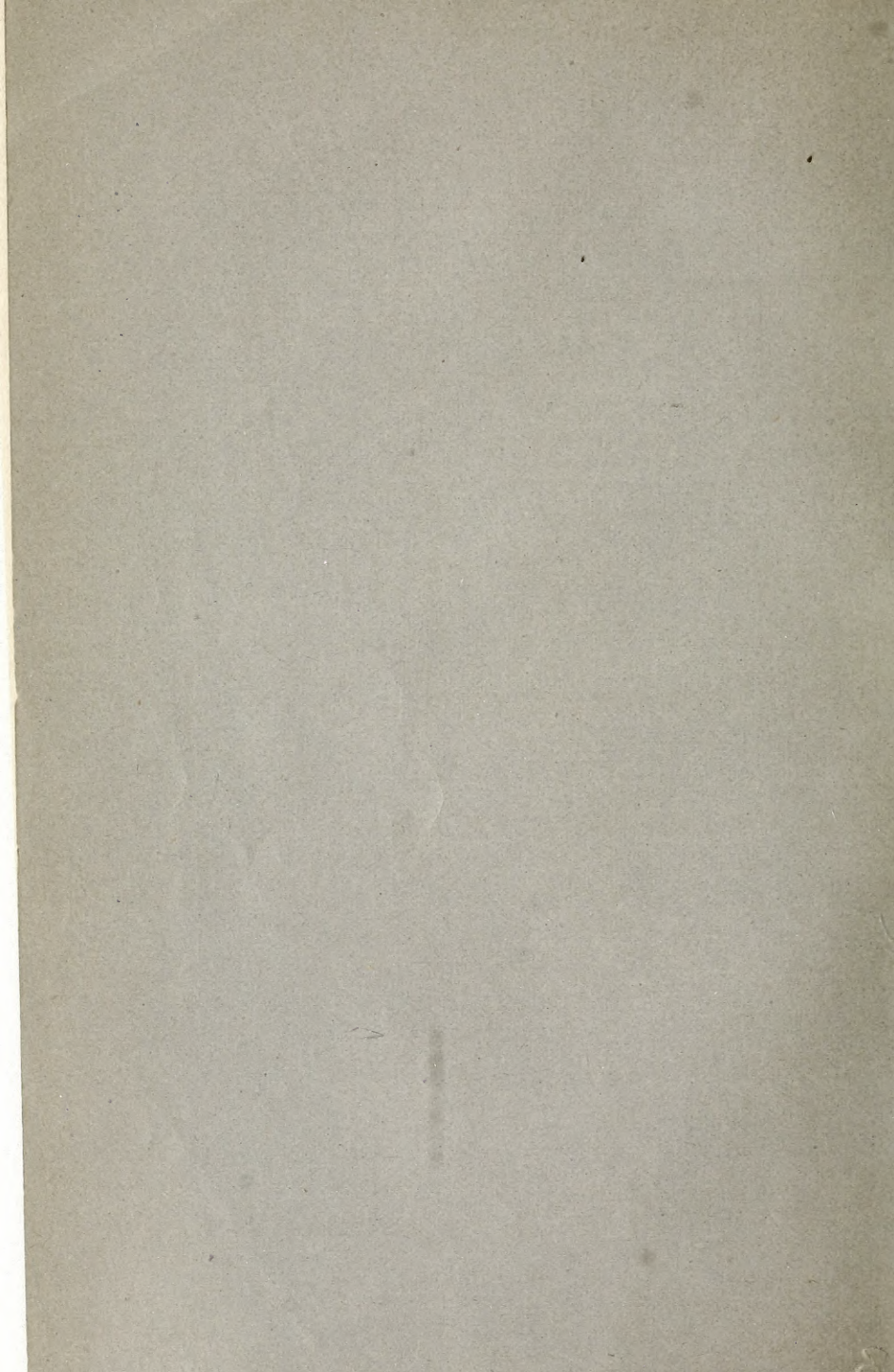
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FRANCIS J. BARNETT

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SPEECH

OF

HON. THOMAS J. JARVIS,

Delivered in the Dr. Grissom Trial.

Mr. Chairman, and Gentlemen of the Board of Directors:

I am gratified we are nearing the end of a long and tedious trial. Tedious though it may have been, yet of such importance, not only to the person arraigned for trial, but to the people of North Carolina, that I am sure, while you have often felt fatigued, yet when you remember it you have nerved yourselves to new energies and determinations to pass on to the end patiently, with the earnest desire to render that conclusion that shall be in keeping with your own common sense and enlightened conscience, whether it shall be approved by anybody else or not.

The gentlemen who have preceded me have very properly tendered you their thanks for your patience. Were I called upon to name eight of the most patient men in North Carolina, I would name the eight which compose this Board. It is now more than three weeks since we began this investigation, and although the testimony occupies much of the time, still you never have exhibited the least impatience at the long speeches to which you have listened. And while I congratulate you, I still more congratulate the people of North Carolina.

It would be idle for me to say that the people of this State are not taking a deep interest in what is now going on here. Their eyes are turned towards the capital of their State, and

they are looking with anxiety to learn how this great trial proceeds. And I congratulate them that these issues are submitted to men of such high character, of such known integrity and such fixedness of purpose to do justice and to do right; that your verdict will be their verdict, and that from the mountains to the sea-shore they will be ready to hold up your hands and say, "Well done, good and faithful servants!"

I trust I may be pardoned for making some allusions personal to myself. I have felt in this trial more than a simple attorney's interest. In the dark and troublesome days of 1868 my official relations to this institution began, and I remember as well as if it had been but yesterday, in July, 1868, as a member of the General Assembly of North Carolina, when Eugene Grissom was placed at the head of this institution. I was bold enough to denounce the act—not because it was Eugene Grissom, but because the Governor of North Carolina had seen fit to introduce politics into this institution. I believed that, however high the waves of party strife might rise, beat and waste themselves at the capital and elsewhere, that this institution at least ought to be spared the shifting and variable features of political strife.

In 1870-'71 it was my lot to preside over the "House of Representatives." A new Legislature came into existence under a different political party. We had not long been assembled before a bill was introduced to abolish this institution—on paper—and on paper to organize another, the effect of which was well known—to legislate the then superintendent out of office and pave the way for somebody else. A warm personal friend of mine in that Legislature approached me and asked me for my assistance. In that conversation he said he desired to have his father appointed as superintendent. I told him I could render him no assistance. He said: "Did you not denounce Dr. Grissom's appointment to that institution?" I said "Yes," and he said: "What do you mean?" I said: "My friend, you

do not understand me. When I denounced the appointment of Dr. Grissom, I meant to denounce the pernicious principle of carrying politics into this institution. I am as much opposed to carrying politics into it 1870-'71 as I was in 1868." In pursuance of what I felt to be my duty, I left the chair and addressed the House on that subject. I have not looked over the Journal of that date since, but if any one has the curiosity to do so now, I think they will find that, out of one hundred and twenty members, only fourteen were in favor of bringing politics into this institution.

So, if any principle has been established in North Carolina by the great body of conservative people, I believe it is that politics shall never enter into the asylums of this State. But notwithstanding this, there has been, from time to time, various movements looking to legislating out one superintendent and legislating in another; there have been also various movements in the Board of Directors looking to the same end, but they have met with like results. Later on in my life, it so happened that the welfare of this institution fell upon my shoulders, in common with many other interests in North Carolina, and again I was approached on the same subject, and I have given one uniform reply to all, and it was about this: "I am opposed to carrying politics into that institution. Go to Dix Hill—send your legislative committees—go yourself, and make a thorough inspection—examine it from turret to foundation-stone, and if you can show me by facts that the Superintendent has been faithless to his great trust—has been incompetent to discharge his duties—has been cruel to his patients; when you bring these facts before me, whatever power and influence I have, officially or individually, shall be used to the utmost to rid the institution of an incompetent or faithless servant." And I trust I am not going too far, gentlemen, when I say to you that when the Superintendent asked me to appear for him in this trial, I said I would appear for him upon *that* principle, and upon no other; and the moment it should appear to me that

he had been unfaithful to his trust, that moment I intended to rise from my seat and tell the Board of Directors that, in my opinion, he ought not to remain in this institution. I feel I owe it to those who employ me as an attorney faithful service; but, gentlemen, in a case like *this*, I owe to the people of North Carolina more than I owe to any individual, and when the interests of the people are on one hand and the interests of an individual on the other, it will not take me one moment to determine where the path of duty leads.

I come before you to-day to discuss these questions now presented in that spirit. I come before you as a North Carolinian, to talk to you as North Carolinians, and I ask you to discard from your hearts and your minds any feeling and thought other than that of an honest desire to *faithfully discharge your duty*. Some of you may not like the Superintendent personally, some of you may be very fond of him, but I ask you to discard prejudice and favor alike from your minds, and approach the final determination of this case to-day as North Carolinians, and let us discharge our duties with a single eye to the service of the State, "regardless of the consequences."

Now, gentlemen, there are three charges which have been preferred against the Superintendent of this institution. Those charges were preferred the first day of the session. They were short and terse and simple, and so brief that they gave us no indication as to what they would undertake to prove, nor did they give to us such indications as would enable us to prepare for our defence. Therefore, the Board of Directors, at our request, caused the prosecutor to file specifications, which were in the nature of a "bill of particulars," so we might have our attention directed to the matters about which inquiries were to be made. The next day, and still the next day, these specifications were filed. And now the methods by which you are to pass upon these charges are to be determined by you.

There is no precedent by which you can be governed. The rules appertaining to courts-martial, nor the rules that obtain in the courts of justice, will neither serve as an exact guide. So you must establish some rules for yourselves when you come to vote upon these questions. These rules may be that you will simply vote upon the charges, regarding the specifications as simple notices to the Superintendent to enable him to prepare his defence. Or, if you choose, you may take up each specification under each particular charge and determine it. These are questions you may determine for yourselves. It seems to me that the records themselves should settle the question—that is to say, that you will pass simply upon the charges preferred against us at the first opening of the session; but you must make your own rules and follow your own inclinations.

There is another preliminary suggestion I wish to make.

It will be remembered that when the prosecution closed its evidence there were two specifications under the first charge upon which no testimony had been introduced. It will also be remembered that we asked to have those charges stricken out. This motion was resisted by the prosecution, and I desire to call your attention especially to the fact that one of the attorneys for the prosecution rose in his seat and protested against the specification being stricken out, and in so doing he declared to the Board that when the testimony was closed on both sides, and before the argument began, he would say to the Board frankly what charges and specifications they thought had been proved and what had not. That gentleman has addressed you, and, notwithstanding the fact that not a word was said in the testimony about these two specifications, he said not a word about striking them out. On the contrary, he confined himself exclusively to the second charge, and although he filed under that charge more than twenty specifications, he confined his discussion to ten of them. Now, shall we conclude he has abandoned the other specifications under this charge? The

frankness that he avows while resisting the motion to strike out certain specifications seemed to me to require him to say to this Board, and to us, that he did or did not abandon these specifications, so that we might confine the discussion to those in issue. But we have heard nothing more of his boasted frankness, and we are left to conjecture as to whether or not these charges are still to be kept before the Board for them to pass upon. Hence it forces me to take up much more of your time than it would otherwise, because they have not kept their promise to be frank.

I do not know what will be their position when they come to close the case, hence I must cover the whole case as fully as I can within the limits I propose to address you. I shall reverse the order in which these charges have been made. I will take up the third charge first, and I will consider the specifications under this charge by taking up the last first, and going up the list until I reach the charge itself. This leads me to consider specification 4—

“That said Superintendent, during the same period, has used and appropriated drugs and medicines for purposes not connected with the institution.”

I take it, gentlemen, that I need not detain you upon that charge, for since Mr. Adams was upon the stand I have never heard another word about the “drugs and medicines.” There are certain drugs and medicines purchased for the institution that do not appear upon the books of the druggist for reasons that are fully explained, and I presume it was that discrepancy between his books and those of the Steward that gave rise to those charges. The discrepancy was so fully explained by the testimony, and so fully understood by all, that it has never been alluded to since the testimony in the case was closed.

Specification 3.—“That said Superintendent, during the same period, has appropriated to his own use large quantities of provisions belonging to said institution.”

This specification, I take it, is intended to refer mainly to the \$500 due by Dr. Grissom to the institution for the purchase of provisions. It will be remembered that the fact that this sum was due and unpaid was shown on the Steward's report, was known to the Executive Committee and to members of the Board. It was not paid, as the evidence shows, because Dr. Grissom felt that he had an equitable claim against the institution for about that amount, which he wished the Board to pass upon, and if allowed it would be quite sufficient to extinguish the \$500. This equitable claim arose, as you have been told, by his conditional consent to a ten per cent. reduction of his salary at a time when it was supposed the appropriation would be insufficient for the support of the institution. His salary could not be reduced except by his consent. He gave that consent on the condition that the reduction should be ascertained to be a necessity. It turned out, fortunately, that the reduction was not necessary; and, as the condition did not arise, he felt that the amount taken from him under this apprehended contingency ought to be restored to him. It is, therefore, a plain business proposition. It is for you to say, at some other time, whether you will allow his equitable claim or not. If you allow it, he owes nothing; if you refuse to allow it, he is able and ready to pay the \$500. There has never been any concealment about the matter, and it ought not to have been brought into this case.

Specification 2 charges him with having sent away from the institution "large numbers of turkeys belonging to the institution."

The only proof that *he sent away any* comes from his own admission and the testimony of Mrs. Lawrence. He frankly tells you that he did send a few, eight or ten in all, to the preachers of Raleigh, and, it may be, some others, who do special service for the institution, as a Christmas present. He also tells you that Mrs. Lawrence purchased the turkeys with her own funds from which these were raised, and that

he felt at liberty to do what he did, and that he made no concealment of it. As to those he used himself for his family and the visitors of the institution, I maintain he had the lawful right to use them, because by the law itself he had a right to use anything *produced* at the institution. So he must stand acquitted of this specification.

Specification 1, which charges him with sending away large quantities of the produce of the garden, may be briefly disposed of by the exact line of argument as the last specification. He frankly tells you that he did, on several occasions, send to ministers of the gospel, and other friends of the institution in Raleigh, a few bunches of celery, but that he *never* disfurnished the institution, but that all the patients and attendants had all they desired; and I say there is not a particle of testimony before you in conflict with this. The first specification must therefore fail.

Having disposed of the specifications which support the charge, I now call your attention to the charge itself, which is in these words: "That Dr. Eugene Grissom, while Superintendent of the North Carolina Insane Asylum, has misappropriated the property of said institution." The prosecution does not pretend to charge that Dr. Grissom ever appropriated one penny's worth of the State's property to his own use for gain, and when I asked the question they were hasty in disavowing any such purpose. The charges, and the specifications under them, were filed with an apparent air of boldness and sincerity, but as the trial progressed they have been allowed by the prosecution to pass out of sight, and although the attorney who filed them spoke a whole day in the prosecution of the case, he did not once allude to this charge.

It does, therefore, seem to me, upon a fair review of the testimony upon this charge, and of the manner in which it has been prosecuted, that the respondent must be acquitted by the unanimous verdict of this Board, unless to charge him with wrong-doing be sufficient, in the sight of some, to convict him.

I will now take up the first charge, it being the charge of immorality; and in discussing this charge I will, as I did with the third charge, take up the last specification under the charge first, and then proceed in regular order up the list till I reach the charge itself. This brings me, then, to consider the fifth specification, which is in these words, to-wit:

“*Specification 5.*—That at some time during the year 1887, the said Superintendent, at and in said Asylum, made improper and insulting advances to Miss Rosa Bryan, an attendant of said institution.”

Now, you will remember, gentlemen, that there has not been the slightest attempt made, so far as we know, to introduce any testimony in support of this specification. Certainly none has been introduced; and in consequence of this, I feel fully authorized to make this criticism upon the conduct of Mr. Thompson, one of the prosecutors in this trial. I am not here to attack his character, but I am here to censure that which is censurable in his conduct; and I maintain he ought not to have made this charge without some testimony to support it; and I conclude that as he introduced none he had none. When he sat down and deliberately put in print such a charge, and sent it out to the people of the State, he was not only charging the Superintendent of this institution with an improper life, without any evidence to support it, but he was publishing the name of a poor, but virtuous and honorable young lady, in a manner, and with an indifference, that does not reflect credit upon him, and for which he is justly censurable.

Specification 4 is of like character. It charges that in the same year Dr. Grissom made improper and insulting advances to Miss Delia F. Morris, an attendant in this institution. It will also be remembered that there was not one word of evidence introduced to support this charge. This is another illustration of the ease and indifference with which the prosecutors have made charges against Dr. Grissom. Does this

conduct comport with the high and chivalrous character given to Mr. Thompson by his admirers? I trow not. It looks more like the handiwork of Dr. Rogers, and it may be that it came about in this way. These two ladies, Miss Bryan and Miss Morris, were not quite as pliable as he found Miss Edwards to be, and they did not respond to his appeals for help to ruin Grissom as readily as she did. Miss Edwards came, but they did not. She testified according to his diction, so I verily believe; but they were not under his baleful influence and could not be induced to come here and tell a story prepared for them in advance. Hence, we hear nothing of the fifth and fourth specifications after they were first read at the opening of this trial. Do these circumstances, taken in connection with the plan outlined in the letter of Dr. Rogers of June 12th, to "Dear May," and the exactness with which Miss Edwards follows the directions given in that letter, have no signification in determining the value of the testimony introduced in support of this charge? I think so. In the first place, there is a great similarity between the second, third, fourth and fifth specifications. In the second place, there is testimony as to two of them and none as to the other two. In the third place, there is a wonderful similarity between the testimony introduced and the plan outlined in Dr. Rogers' letter. It seems to me that it is drawing upon one's credulity pretty heavily to ask him to believe these things *happened* to be so. If I am correct in this, then the Board should look with suspicion upon anything pertaining to this charge, and I shall so argue as I proceed with my discussion.

Specification 3 alleges, that between November, 1886, and April, 1888, Dr. Grissom, at and in the asylum, made improper advances to Miss Ella N. Edwards, an attendant in said institution.

Gentlemen, I believe this Board is composed of men who are possessed of a very high degree of intelligence. I believe, also, that each member of this Board is possessed

of a high degree of earnestness to do justice, and believing those are the motives that will influence this Board, I will not take up much of your time in discussing this specification.

I think I might as well say, that for all purposes, not only as to the proofs of this particular specification, but as to the proofs sustaining any charges, where the proof depended upon Miss Ella Edwards' testimony, that it had as well be eliminated from this trial. I do not believe there is a single member of the Board who attaches a particle of importance to her testimony. I do not mean here to make any severe animadversions upon Miss Edwards; I never desire to speak harshly of any one, and certainly I do not desire to speak harshly of a young woman; but her conduct in this case has not commended itself to the especial favor of this Board. Her demeanor upon the stand put the Board upon its suspicion. Have you not been sitting in a court-room as spectator, time and time again, and seen witnesses upon the stand, and time and time again have you not said in your hearts, "that witness is not telling the truth," or "that witness is prejudiced," or "that witness is not to be relied upon"? I am sure, in all my experience and observation, I never saw a witness on the stand that gave her evidence under greater suspicion than did Miss Edwards. To-be-sure, she has brought witnesses here who have testified to her *good character*, or rather to her reputation as having a good character. But, gentlemen, there is a vast difference between "reputation" and "character." It is not every one who walks the streets dressed in handsome clothes, whose neighbors and friends would say, "he is a man of pure motives and spotless reputation," who would be entitled to this high commendation if all his misdeeds were laid bare to public gaze; and I will give you a striking illustration of this later on. It is possible that in her quiet home she may conduct herself with propriety, and, for her own sake and the sake of her father and mother, it is to be hoped she will remain under their care and attention, and not venture away from

home again. Certainly, for her own peace of mind, and for her own good name and reputation, she had better stop all intercourse with Dr. Rogers. I say her conduct upon the stand not only fills you with suspicion, but she tells you that, upon leaving this institution, she told Dr. Grissom she was not going to return; in less than two hours, sitting on the cars, bathed in tears, she said to a gentleman who entered into conversation with her, "Dr. Grissom is one of the best men I ever saw; the institution is well managed, and everything goes on like clock-work; the most perfect harmony exists between the officers and patients. Whether my mother lives or dies, I am going back." I will call your attention to this much of the testimony, because I apprehend the learned counsel on the other side who is to follow me will undertake to persuade you that Miss Edwards is worthy of belief, and that upon her testimony you can find your charges.

I now allude to specification *two*, as follows: "That the Superintendent made immoral advances and proposals to Mrs. Lily B. Perkinson, the wife of an employee of said institution."

She, too, has brought witnesses here who testified to the fact that, in her early life, when she was a school-girl, that she was beautiful, pure and innocent, and altogether lovely. She has certainly carried with her one of those characteristics to this day—that is her *beauty*. But I have a reflection to make upon her—and I say I can show that one of two things is *true*, is *obliged* to be true—either Mrs. Perkinson is not the pure, virtuous woman she was as a girl, or else her story, as told here upon the stand, is not entitled to be believed. She comes before you and tells you that on at least four occasions Dr. Grissom made improper and insulting advances to her. Now, I want to put this question to you, and I want you to answer it as practical, common-sense men: Is it possible that a pure, virtuous woman, who has been insulted by a man, would come a second, and a third, and a

fourth time into that man's presence, privately, to beg him for favors?

You know a modest, good woman would not do that, for you may take the poorest woman who treads the soil of North Carolina, and if she be pure in heart, and spirit, and thought, should a man make indecent proposals to her, that woman would sew by night, would walk the streets and beg by day, rather than go again and put herself in the presence of that man who had insulted her.

There is no resisting that conclusion—it is not the way good women do—so one of two things must be true: either that Dr. Grissom did *not make* these proposals, or Mrs. Perkinson is a bad woman.

It is in reason to believe Dr. Grissom's statement, that the first time she came to him crying, in great distress, begging him to give her husband employment, and that in compassion for her state of mind he kissed her, and that there it ended.

If she states that she allowed herself to be persuaded to come again and again into his presence after he had offered indignities to her (as she stated he did) repeatedly, then we can only conclude that either she has misrepresented the entire matter, and that Dr. Grissom never insulted her, *or that* she is not a virtuous woman. No experienced man can take another view of the matter.

Do me the favor now, gentlemen, to follow me through a brief discussion of specification one, and the testimony bearing on it. This specification charges Dr. Grissom with adultery with one Nora Burch, who is now an inmate of the Morganton Asylum. The testimony upon which the prosecution relies in the specification is that of W. P. King, and one Jones, a colored boy, but I imagine it will be chiefly upon King's, as they brought a number of witnesses here to testify to his good character. The distinguished gentleman who is to follow me will no doubt ask, "What interest has King in this matter; what motive has he to testify falsely?"

Gentlemen, I am not here to deal with the motives of men—I am here to deal with their acts. Men frequently have motives for doing things of which we cannot even guess; and men of good *reputation* often do things which are bad. Men of good *reputation* have testified falsely, and it is not impossible that King may have done so. Because his neighbors give him a good *reputation*, it does not follow that his testimony is absolutely reliable. I see no reason why he should be believed in preference to Dr. Grissom, Mrs. Lawrence and Miss McKoy. But, says the prosecution, he has a good *reputation*. Let me give you a striking illustration between *reputation* and one's *true* character :

On last Friday morning—just one week ago—Dr. Rogers appeared before this Board, and, through his counsel, read a bold, manly demand that there should be an investigation. He declared to you that an imputation had been cast upon him, and that he was *so* pure, *so* righteous, and *so* virtuous, that not even a hint of an imputation should be cast upon him, and he desired there should be an investigation. That very morning one of the leading journals of this city—a paper of large circulation—writes of him: “One thing is true, he is a brave, courageous man;” and I have no doubt, on last Friday morning they could have brought a number of witnesses from the city of Raleigh to testify to Dr. Rogers’ good reputation. And yet, gentlemen, while the people of North Carolina, before the close of the evening, were reading that “Dr. Rogers was a brave, courageous man,” the veil of hypocrisy and falsehood, under which he had been concealing his villainy for weeks and months, had been torn away, and he stood before you as a perfidious monster.

So, gentlemen, we need not always suppose that a witness is swearing to the truth simply because the neighbors can say, “he is a man of good reputation.” Now, I undertake to say that I believe that, in a very brief speech, I can show you that Plummer King and Emanuel Jones did *not* see what they say they saw. I have the thing so well fixed in

my own mind that I believe I can show it to you if you will simply follow me for a few moments.

This charge is a blow to Dr. Grissom's morality, to his religion, to his life, and to his family. It is a blot upon the Board and upon the State. If it is true—if he is guilty—say so; but I appeal to you as fathers, as citizens, as men of justice, unless these charges are fully proved, say he *is not* guilty. Now, gentlemen, King is the first witness sworn. He has said that he saw from that rostrum Miss Burch go into that door and close it. You can see how impossible it is. Now I undertake to say that, in all my experience in court-houses, I have never seen testimony so "patched up" as King's was. His testimony first delivered was that, from that rostrum, he saw through the key-hole this illicit intercourse. He did not say, in his first testimony, that he went to the door and peeped. Now, gentlemen, I will call your attention to this: From that testimony arose the inadmissibility of some of the evidence, and we all came out in the hall and left you gentlemen in the room, and a number of us came upon the rostrum and saw how totally impossible it was for a man standing upon that rostrum to see through the key-hole. When we went back into the room he had found it necessary "to go to the door and get on his knees." Then he told us what he saw by going to the door and getting on his knees. Afterwards, a second time, some of us came out, taking a position on the stage and looking at the door, and it was observed it was impossible to see from that stage whether the door was shut or not. Then he said he knew the door was shut because he "heard it." *Now* it is the sense of hearing—*before* it was the sense of sight; but each time he "knew the door was shut" Now he takes another trail, and tells this Board he saw no other human being up there—not a human being that he saw, except Dr. Grissom and Miss Burch. Later on, Jones comes upon the stand and tells his story, and he sees that the testimony brought out from Jones was intended to apply to a totally different

time. Now Jones went on and testified; he was cross-examined, and, at the end of the cross-examination, it appeared that Jones was trying to testify to the same thing and to the same time that the other testimony applied to; and then they got mixed, and got in each other's way, until one of the members of the Board arose and asked the question, "Do you mean to say that Emanuel Jones is testifying to the same thing and to the same time that King testified to?" The prosecution made no response, but we said "Yes." And so King, as I stated, was in Jones' way, and either Jones was telling what was not so, or King was telling what was not so. Do you not see it resolves itself into that? Jones, when he was on the stand, testified that King talked to him about it. King had testified that he had first talked to Mr. Bell about it, then to Dr. Rogers, then to some one else, but never a word that he and Jones had of conversation about the matter. If King and Jones had had some conversation, as Jones swore, why did not King state that fact in giving his evidence? But King and Jones contradicted each other, and it was necessary to bring King back upon the stand. He comes back and says: "I saw Jones peep, and after Jones went away *I* went and peeped." If that had been true he would have told it in the first instance. He was a willing witness; nothing was kept back; he was an enemy of Dr. Grissom's. Don't you know if he had seen Jones peep first, he would have *told it* in the beginning? There is no resisting the conclusion. But he does not do it. Jones and he are in each other's way, and so it is necessary to get Jones out of the way, and therefore he comes on the stand and makes a contradiction of what he has testified to.

Now to go on. If there is any other proof of a perverted testimony, it is as to the location of the bed in the matron's room. Mrs. Lawrence fixes the location *absolutely*, so does Miss McKoy. I am sure none of the witnesses ever demeaned themselves with more modesty than did this latter lady. I am sure, also, that she impressed this Board with her bearing.

She was confident how the furniture stood in that room, and tells you she knew it because she was an attendant and it was her duty every morning to give in reports to Mrs. Lawrence, and that she went into the matron's room for that purpose. She stated she was then put in charge of the sewing-room as chief, but her duties took her into the matron's room several times a day, and she certainly knew how the furniture stood in it. She locates the furniture, and tells you that at *no* time did the bed ever stand in front of that door. Now, it was impossible for King's statement to be true—that he saw what he stated—as the bed was placed at that time. *He says* the bed was right in *front* of the door, with the foot towards the door, far enough for the door to open; but, mind you, he *HAD* to put the bed in that position to coincide with his statement. Now, to believe his testimony about the location of the bed, is to discard the testimony of both Mrs. Lawrence and Miss McKoy; and you are obliged to choose between the validity of the statements of Mrs. Lawrence and Miss McKoy on one hand and Plummer King on the other; you must take one "horn or the other of the dilemma." *Therefore*, if you conclude that Mrs. Lawrence and Miss McKoy were speaking the truth, the testimony of King must be false, and this specification must fall.

Now, I will show you another inconsistency: In Jones' testimony, he says he saw Miss Nora Burch pass Mr. Thompson's office in the month of April; it was then he told Mr. Thompson. Now, Miss Burch was insane and confined to her room in the month of April. Still, Jones said when he told Thompson that Miss Burch happened to be passing Mr. Thompson's office, that circumstance was in the month of April. Yet the fact is, that Miss Burch was taken insane on the *last of February*, and in April was confined to her room as an insane person. Now, here you have both Jones and King discredited by each other's statement. Now what more? King admits that he never fixed anything on the stage but once, and he tells you what he did, a work of about

five minutes ; and it was when he went to fix the scenery on the stage that he locates his story. Mrs. Lawrence tells you that when she gave the order to him that she came with him, and that he finished the work in about ten minutes, and afterwards went down stairs. She tells you it was the only time she ever gave him the order, and that she came with him upon the stage. Miss McKoy tells you she stood in that door and saw the work when it was done. So there is Mrs. Lawrence again testifying to a material fact which contradicts King. I say before any member of the Board can say that this charge is true they must say that Mrs. Lawrence and Miss McKoy have not told the truth. I leave that with you, gentlemen. There was never a clearer proposition to my mind in the world. What motives King may have had I do not know. Again, here is a book written since this occurred, in which he says, under his own handwriting, "I never heard of any immorality." And yet he says, "I never saw anything about immorality in that book. I never heard of it." Yet he hears it from Jones; but had not *Jones* testified the argument would have been made by the prosecution that the witness never *heard* of it because he *saw* it; but Jones comes upon the stand and says King *told* him of it; yet King says, under his own handwriting, "I never heard of it" Now, King says that particular sentence was not there. Now take that book and examine for yourselves. If you decide that those words were not put in there when that book was signed, then I say I have no hope of convincing such a one; but it is impossible for you to examine that book and come to any such conclusion. And now, gentlemen, I believe we are entitled to your unanimous verdict of "not guilty" on this charge. Speaking as one man to another, in the interest of truth and justice, I say I feel it in my heart of hearts to ask each and every one of you to *say* he is *not guilty*. I feel that I am authorized to come here and ask you, upon this testimony, not to blight the name and reputation of a poor but unfortunate woman who now

lies confined within the walls of another insane asylum. The counsel appealed to you, in words that have made the tears flow from the eye, to protect your unfortunate people. They say "save these unfortunate people, whom God in His wisdom has stricken with the curse of insanity—save them, and save them from the cruelty of *that man*. I come here and ask you, in the name of justice, to save one of these unfortunate beings from the vile, slanderous tongues of "key-hole peepers." I feel that I have a right, upon this case, to ask you to acquit the accused on the *first* charge.

I now take up the second charge—

"That Dr. Eugene Grissom, while Superintendent of said Asylum, has been guilty of mismanagement of, and cruelty to, patients under his charge, and of perpetrating indignities upon them."

You must bear with me, if I tax your patience, because I feel right here is debatable ground. I feel that the counsel for the prosecution has here "built his battle-ground"; that here he thinks he has strength for his case. I also feel, gentlemen, that it is incumbent upon me to do what I can to prevent a false issue being raised in the State. It is very evident to me that the speech of the gentleman made the other day is expected to fall upon other ears, and to be criticised by other eyes, than those who heard it that day. It was a speech of great power, if the assumptions made by that gentleman are admitted, and if the application of the testimony to these assumptions is taken. Now, you remember, gentlemen, that the tenor of his speech was the doctrine of restraint. Now, he has paraded before you the apparatus with which the patients have been restrained, and, with powerful philippics, has denounced that apparatus. He has called it a "machine of torture." He has denounced the man who applies that apparatus to the patients in this institution as cruel and inhuman, and, I fear, under the whip and spur of this powerful argument, and under the effect of those powerful philippics he passed upon the Superintend-

ent of this institution with reference to the application of "mechanical restraint," that there is a *possibility* of the people of North Carolina being led away from a proper idea of the treatment of the insane. Now, gentlemen, he challenged us to show a single authority, or a single writer on insanity, who had ever justified the application of mechanical restraint for any other purpose than to prevent the patient from doing himself harm, or doing somebody else harm, or destroying property. The gentleman of the prosecution turned to us, and defied us to produce a single authority or a single work on insanity that has ever showed that mechanical restraint was advocated or even tolerated as a "*treatment.*" I have accepted the challenge, and I am going to meet him on his own chosen battle-field. I shall read you some authorities. I know there are a number of physicians on this Board, and no doubt all these authorities I shall read are familiar to them; but you must remember there are several persons on this Board who are not physicians—men quite as intelligent, but whose vocations have led them to read upon other subjects, and, therefore, I beg the physicians of this Board to bear with me, while I read them extracts from men who have made insanity and its proper treatment the study of a life-time.

I am speaking for the future as well as for the present, and I am anxious that the directors of this institution should not be led to adopt the false notions advocated by a few false philanthropists or ill-advised persons who think the proper way to heal insane persons is to remove *all* restraint. Gentlemen, each and every one of us, every day of our lives, is living under restraint. With *us*, this restraint is *conscience* and *reason*. If these forces are very strong and healthy and vigorous, our passions and appetites are restrained and our lives orderly and well regulated; but when these forces are *weak*, then conscience and reason which hold us in restraint are not developed, and bad and evil passions get the ascendancy, unholy desires lead us astray, and we become bad men. When these forces die we become insane, and then, not being

restrained by conscience and reason, other restraint must be applied to us, to prevent injury to society, injury to ourselves, and injury to property. Hence, we have insane asylums created. It seems to me the gentleman has a wild theory of insane asylums without restraint. Why, the asylum itself is a species of mechanical restraint. Every one of these patients within these walls are under restraint. Open these doors—open the wards—throw wide open the cells, and how long do you suppose these patients would remain here? They are deprived of their personal liberty. The *law* makes it a privilege to go where one pleases, but *these* persons do not. Why? Because the law restrains them for the good of society and for their own good.

Now the great medical profession has given us great men, who have given to the world their time and their talent in the study of insanity, its causes, and its proper treatment. I think I can show you, gentlemen, that mechanical restraint is advocated by many of the greatest of these great and good men as a known means of treatment. You remember that the speech of Mr. Whitaker the other day was based upon the idea that whenever mechanical restraint was used as a treatment it was cruel and should be denounced; and, proceeding upon this theory, he has denounced Dr. Grissom in bitter terms for his method and his treatment of the insane in this institution. Now I shall attempt to justify everything he has done, with but *one* exception; with that single exception, I stand here before you to justify everything he has done. I propose to do that by showing you, first, from high authorities, what the proper treatment of the insane is, and then by showing that what he has done is justified by this proper treatment. Believing, myself, in the authorities which I shall cite, I repeat, I stand before you not to beg for mercy, but to justify Dr. Grissom's treatment of the insane; and if this controversy is to be transferred to another theatre, I propose to go there and justify him before the people of North Carolina. I beg your indulgence while I read some of these authorities, upon which I confidently rely for his justification.

J. PARIGOT, M. D., Hastings-upon-Hudson, N. Y., says:

"Many authors on mental diseases have remarked that, although serious lesions of tissue may exist, the judgment and conscience are not always entirely abolished. The family life of the insane brings light on this subject. At Gheel, one of my duties was to draw trial reports on the insane paupers belonging to the city of Brussels.

"In one part of these reports I detailed the occupations of the patients and their ties of friendship with their attendants. I had thus plenty of occasions to determine their relative capacities for judgment and conscience. But then, if the remainder of personality is not sufficient for self-government, it certainly permits the sufferer to sympathize more or less with those around him, and even, to a certain degree, to appreciate the care he receives, and the mode of treatment to which he is subjected.

"These moral feelings cannot be without influence on animal and vegetative functions, and they being favorable to the harmony of soul and body, it only remains then to find a convenient medical treatment.

"Two well-known levers act on our moral nature. What love cannot obtain, fear must accomplish. The power of volition must be put in activity either by one or the other, and although I condemn violence in all cases, I believe that in certain cases an effort of the patient may be provoked or elicited by moral fear, intimidation, and even a certain degree of restraint. Well, in such extremity, the sympathy may still exist between both patient and physician. Do we not love a mother or father in spite of chastisement? The great problem is to obtain a principle of action."

Dr. JOHN P. GRAY says:

"If we examine the history of our art, we shall find that mental impressions were a most important part of the means employed in the treatment of disease by the fathers of medicine. It is hardly necessary to say that

the most learned and successful physicians thenceforward to the present time have insisted upon the permanent value of moral remedies. The space of this notice might easily be filled with extracts from their writings to that effect. But the great difficulty has been, and is, so to systematize and apply moral medicines as not to encourage superstition and imposture.

“Homeopathy, which must be considered a pure travesty of scientific forms, having for its basis mental impressions only, is an instance of great practical success in applying hope and expectation to the cure of disease. The methods of this so-called system, however, really forbid the use of any medicinal agents, and, could they be generally accepted, would surely put an end to all true science. Valuable as moral impressions are in the hands of the wise and honest physician, he cannot afford to discard all other remedies, or to blot out all the noble conquests of science that bring their tribute to his art. It must ever be impossible, we fear, to treat in a formal system anything so infinite in its aspects, and so intangible in its essence, as mental emotion.

“The chief aim of Dr. Padirleau, in fulfilling the purpose of the Academy, is, then, to remind the physician of the grand truth, that in his patient there are presented two distinct orders of phenomena; and that in the practice of medicine, all doctrine which makes little or no account of the moral and intellectual in man, is insufficient and incomplete. ‘A woman complained of some difficulties of digestion as a result of brutal treatment. Urged to point out the exact place in the epigastrium where she had been struck, she confessed that she had not received the blow aimed at her, but that it had greatly frightened her. She died of cancer of the stomach.’ ‘A patient upon whom Antoine Petit had operated for stone was attacked with profuse hemorrhage. The blood had been flowing for several hours when Petit arrived. ‘It is all over with me,’ said the patient, ‘I am losing all my blood.’ ‘You have lost so little,’ replied that expert sur-

geon, 'that you shall be bled within two hours.' This firm and supporting answer had so happy an effect that the hemorrhage immediately ceased.'"

Dr. PADIRLEAU says:

"Moral medicine consists essentially in the knowledge of those secret and profound causes which so often escape the eye of the superficial observer, yet have a most powerful influence upon the organism. It is the psychological analysis of a suffering being; it is the study and the knowledge of that moral therapeutics, so important and yet so much neglected; it is, in short, the art of so gaining the control of the faculties and emotions of a patient as to cure, or, at least, relieve him. *Nosce teiksum* is a saying of ancient wisdom: *Nosce ægertatem*, let us say in our turn—that is, study the human heart, its sufferings and its secret anxieties, so well named by Haller *animi agritudines*.

"Neither can we refer here to all those means, so well known in our specialty, which may be termed the hygienic part of moral medicine." (It will not be amiss, however, to mention that, both as a *hygienic* and *curative* agent, *restraint* is given an important place by Dr. Padirleau. The strange notion, so fixed in the doctrines of our British confreres, that, in a world where external force is so necessary as a discipline for the healthy man, the first condition for the treatment of disordered mind is non-restraint, receives no support from him.)

"Medicinal agents, it is well known, soon cease to have any effect unless exhibited in constantly-increased doses, while the moral increase in power the longer they are applied. (*Moral means are also more direct and simple*. Most of the drugs which we use to control disordered nervous functions seriously interfere with nutrition throughout the entire system. Moral medicine is not open to this objection. Finally, it presents to us remedies at once powerful and direct, simple and harmless. Difficult as it no doubt is to systematize and

adapt them to use, it is certain that this work has been far too much neglected. Such books as that before us are, therefore, greatly needed, and we hope they may direct toward the study of moral therapeutics the attention it so well deserves.)”

Dr. JOHN CURWEN, of the Pennsylvania Hospital for the Insane, Warren, Pa., said :

“With the class of cases we are constantly obliged to receive in our hospital, I do not believe it prudent or proper to say we will use no means of restraint, for at times the lives of the patients, of the attendants and officers will be jeopardized without some restraint is placed on a certain class of patients for a time; and I believe the life of a patient is often saved, and their recovery often facilitated, by a timely, judicious use of certain modes of mechanical restraint.”

Dr. WM. M. COMPTON, of the State Lunatic Asylum, Jackson, Miss., said :

“I imagine it to be very difficult to conduct an asylum for the insane, of any magnitude, without having a few who now and then require some kind of restraint. This restraint may be rendered more frequently necessary by having incompetent attendants, or perhaps it would have been better to have said that much of the restraint may be avoided by having patients under the control of attendants who possess a great deal of patience and the proper tact. I think an asylum cannot be found in this country, where the first thing a boy learns to read is the Declaration of Independence, and where every youngster learns that he is ‘in the land of the free and home of the brave,’ in which restraint will not be found necessary. Patients are often quarrelsome, frequently mischievous, and sometimes violent. We must either confine such patients in a solitary room, or permit them to remain at large with the other patients, subject to some kind of personal restraint. I would not send an insane

child of mine to the care of a superintendent who professes and practices an absolute system of non-restraint. I would be constantly looking for a letter informing me that some violent maniac had knocked him on the head with a chair, bitten off his ears, or gouged out his eyes."

Dr. H. T. CARRIEL, State Hospital for the Insane, Jacksonville, Ill., said :

"I consider some form of mechanical restraint absolutely necessary, as in cases of acute delirium or acute mania. Restraint is absolutely necessary sometimes, to preserve the life of the patient, by keeping him in a recumbent position, and thus economizing the vital force. Then in cases of melancholia the same reason for restraint appears. In epileptic and other delusional cases, sometimes there are those who are very quiet, and then suddenly rise up and make a violent attack upon somebody, without provocation or warning. I have such a case now, where I consider restraint necessary. It is a question whether you will use mechanical restraint or seclude such a person. My observation is that seclusion is just the last means to be resorted to in such cases. If you want to make a man noisy, destructive and filthy, shut him up. Then there is a class that denude themselves, and tear their clothing, when restraint or seclusion becomes necessary."

Dr. EVERTS says :

"I think that we are all agreed ; but the question seems to be, how much and what kind of restraint is required? I know of no other object in sending these persons to an insane hospital than that of proper restraint. So far as medical treatment is concerned, any other physician is supposed to be as competent to administer medicine, understanding pathological conditions, as well as the superintendent of a hospital. The hospital can administer restraint. The building itself is a mechanical restraint. I believe that what we call mechanical restraint is often preferable to chemical restraint,

or the restraint of medicinal influence. True, it may be better to knock a man down with chloral than with a club, but it is better to knock him down than to permit him to kill himself by unrestrained action. The tendency of the time, evidently, is to reduce mechanical restraint, as an element of treatment, to its lowest practical point."

W. LAUDER LINDSAY, M. D., F. R. S. E., says:

"Among the general results, then, of my own observation, correspondence, and reading are, *inter alia*, these:

"1. The use of mechanical restraint is advocated by at least ninety per cent. of physicians engaged in lunacy practice throughout the world.

"2. The minority is not greater than is that of the general population who believe in and propagate such absurdities as spiritualism

"3. But the *advocacy* of mechanical restraint is one thing, its *use* another; for there are many strenuous advocates of its use who, nevertheless, in practice seldom or never have, or have had, occasion to use it.

"4. What such advocates contend for is perfect freedom, both of opinion and action—unfettered liberty to employ or apply what they consider the *best thing for a given patient under given circumstances*, without reference to the current creeds of other people, to the tyranny of a false public opinion, or of a spurious public philanthropy, or to the amiable crotchets of mischievous enthusiasts.

"5. The use of mechanical restraint is advocated, or it is itself employed, by the most eminent specialists of the day—men as conspicuous for their advanced humanity or philanthropy as for their general culture and professional ability.

"6. Mechanical restraint forms an occasional feature of treatment in those asylums which have the noblest history and highest reputation.

"7. In other words, it constitutes an essential feature in the most modern, most enlightened, most humane treatment of the insane; while—

"8. It is itself unquestionably the most humane mode of treatment that can be adopted in certain exceptional circumstances.

"9. One proof of this is to be found in the fact that maniacal patients themselves are sometimes the first to recognize its benefits by *requesting* its application, just as they voluntarily, in similar conditions, betake themselves to *seclusion*.

"10. The *substitutes* that have been introduced by those whose extreme views have led them to renounce everything savoring of mechanical restraint, are productive of much more serious and numerous evils."

G. F. BODINGTON, M. D., F. R. C. P., says:

"Exhaustion results not alone from disturbance of function of the nervous centres, but likewise from the superadded long-continued exertion of the muscles and motor nerves, the fatigue of which, after prolonged or unusual exertion, we are conscious in our own bodies, arises partly from an exhaustion of the muscles, partly from an exhaustion of motor nerves, but chiefly from an exhaustion of the central nervous system concerned in the production of voluntary impulses.

"If it be true, as here stated, that ordinary fatigue in a state of health is due partly to an exhaustion of the muscles and motor nerves, it must likewise be true that exhaustion in states of mental disorder is partially derived from the same source. Any one who is familiar with acute insanity must, indeed, recognize the fact that the resulting exhaustion is, to a large extent, directly proportionate with the bodily restlessness and disorderly muscular movement. Hence it follows that, if excessive muscular action be subdued, the tendency to exhaustion, *quoad hoc*, will be diminished.

“Treatment, therefore, must be directed to securing rest, by checking incessant and disorderly muscular movements. Exhaustion being the chief danger, the removal even of a portion of its source is an advantage gained. Lightening the burden may just make all the difference between life and death. But the removal of that amount of exhaustion merely which is due to over-fatigue of the muscular and motor nerves is not the total gain.

“If the muscular movements are duly restrained, the ‘central nervous system concerned in the production of voluntary impulses’ is also controlled. So long as muscular movement is possible voluntary efforts continue, but movement being made impossible, the efforts are discontinued, and the volitional motor centres come to a state of rest. Such, at least, is the case according to the experience of the present writer. Hence it is that we have in the application of restraint a valuable remedy, as previously alleged, calculated to bring the whole of the voluntary motor apparatus into a condition of rest, and thus to obviate the tendency to exhaustion, degeneracy of function, and death.”

W. LAUDER LINDSAY, M. D., F. R. S. E., Physician to the Perth Royal Asylum of Scotland, says:

“In short, an analysis of such a Blue Book of the English Lunacy Commissioners, directed to the discovery of the extent to which mechanical restraint really prevails in the treatment of the insane in England, should, once for all, explode the absurdities and tyrannies of Conollyism, by demonstrating that the most humane and experienced physicians in England consider the *most humane treatment* of the insane, in certain exceptional conditions, to be mechanical restraint.”

Dr. A. M. SHEW, of Connecticut, says:

“In my recent brief visit to European institutions, I saw in use the same mechanical appliances that are found in American, hospitals, viz.: comisolet waists, leather wristbands

and 'protection beds'; and in one asylum the shower-bath—a form of 'mechanical medication' which I have not found in any American asylum—was in daily use, with good results, according to the testimony of the assistant physician. With one exception, the medical officers in charge of British asylums conversed with me freely respecting the moderate use of mechanical protection in preference to personal seclusion, or manual restraint by attendants. The impression gained by these interviews and personal inspection of institutions, confirmed the statement already made, viz.: that during the past few years a strong and general reaction in favor of the moderate use of mechanical protection in the treatment of the insane had taken place.

"This is conclusively shown in the published statements of leading foreign alienists. Thus Dr. Blandford, in his excellent manual for students, says: 'At the suggestion of the Commissioners in Lunacy, I have employed mechanical restraint.'

"A leading article in the *Medical Times* on 'The Insane and their Management,' referring to acute maniacs, insane epileptics and general paralytics, declares 'restraint in some form or other is necessary.'

"Among other well-known names of those who approve of the use, in certain exceptional cases, of some simple form of mechanical restraint, may be mentioned Dr. W. A. F. Browne, the late Dr. Forbes Winslow, Dr. Murray Lindsay and Dr. Ashe, of Dublin.

"In an article on 'The Theory and Practice of Non-Restraint in the Treatment of the Insane,' published in the *Edinburgh Medical Journal*, April and June, 1878, Dr. W. Lauder Lindsay, Superintendent of the Murray Royal Institution at Perth, says: 'Among the general results of my own observation, correspondence and reading, are these: The use of mechanical restraint is advocated by at least ninety (90) per cent. of physicians engaged in lunacy practice throughout the world. Mechanical restraint forms an

occasional feature of the treatment in those asylums which have the noblest history and the highest reputation.'

"In other words, it constitutes an essential feature in the most modern, most enlightened, most humane treatment of the insane.

"I have asked your indulgence in making the foregoing remarks respecting restraint, because I believe the public have been misled by some recent American writers and teachers, who have endeavored to compliment the foreign—especially the English—asylums, at the expense of our own institutions. After many years' experience in the one, and no inconsiderable freedom in visiting the other, I would remark—

"*First.* That the foreign institutions are more substantially constructed than our own; or, in other words, that the buildings cost more. This is seen in the stone floors, and fire-proof stairways, and thick walls, and turreted roofs.

"*Second.* The foreign asylums are not so well furnished as the American, and there is less of the home-like, comfortable appearance which many of our institutions have.

"*Third.* Less attention is paid to heating and ventilation. Many of the English asylums have simply old-fashioned fire-places, protected by iron cages; and one superintendent told me frankly that he knew nothing about ventilation or its principles—'that belonged to the engineer.'

"*Fourth.* The same forms of mechanical restraints are in use in both countries. The only difference seems to be that in England they abolish the name but retain the thing—restraint—while here we retain the name but virtually abolish the thing.

"In confirmation of this statement, I would simply mention the fact that at Hanwell, near London (the scene of Connolly's labors), I saw more in the way of 'bolts and bars,' 'coercion and confinement,' in one day than can be found in this institution in any ten days. And the babel of noise and confusion in one of the male wards exceeded anything

in my previous experience. From the moment I had passed the well-guarded lodge, by permission of the uniformed gate-keeper, through the locked front door, had waited twenty minutes in the large, uncarpeted and sparsely-furnished visitors' room, until a uniformed turnkey was ready to accompany me through the wards, halls, kitchen and store-rooms, an uncomfortable feeling of restraint and utter helplessness took possession of me and remained with me until I was once more outside of the high walls. It was the same sort of feeling that one experiences in visiting a penal institution. Yet this was Hanwell, the scene of Connolly's life-work—an institution which has been held up as a model to be copied, and about which so much has been written.

“Perhaps I have said enough to indicate that I am an advocate of the moderate use of mechanical protection in the treatment of the insane; or, in other words, to employ or apply what I consider the ‘*best thing for a given patient under given circumstances,*’ without reference to the creeds of other people. Each case is studied individually. It would be unwise to restrain nineteen (19) of every twenty (20) patients, because they do not require it. It would be equally unwise *not* to restrain the twentieth, who is destructive, dangerous and turbulent. Safety and *moral discipline* require it no less than the general good of the large majority who are quiet and orderly.

“Among the most common causes for its application I would mention extreme mischievousness, determination to disrobe, repeated attempts at homicide, repeated attempts at suicide, maniacal excitement, masturbation, and destruction of clothing. One male patient was slowly but surely wasting his enfeebled frame by persistently standing. Here we found a covered bed, or, as it has been unjustly called, ‘the Utica Crib,’ of not only practical service, but a real necessity. In this covered bed the patient could be comfortably kept in a horizontal position on a soft mattress, entirely free from other restraint.”

M. CHRISTIAN, of Paris, said :

“ M. Motet had a short time ago received two pamphlets from the late Dr. Lauder Lindsay on the subject under discussion. These showed that coercive measures were no less abandoned in England than with themselves when necessity imposed their use. Moreover, the English Lunacy Commissioners had borne testimony to the skill, zeal and humanity of physicians who used mechanical restraint, as well as to the successful management of their asylums.

“ Such attestation should, to quote Dr. Lauder Lindsay, ‘ once for all explode the absurdities and tyrannies of Conollyism, by demonstrating that the most humane and experienced physicians in England consider the *most humane treatment* of the insane, in certain exceptional cases, to be mechanical restraint.’ M. Motet referred to Dr. Lindsay’s other pamphlet, entitled ‘ Rib-Fracture in English Asylums,’ in which the conclusion was stated that the real offenders were not so much the poor, defenceless attendants, as the promulgators of the ‘ absurd and mischievous dogma that in *all cases* mechanical restraint is unnecessary and improper.’ ”

DR. JOHN H. CALLENDER, Medical Superintendent Hospital for the Insane, Nashville, Tenn., in his presidential address, says :

“ Regarding one subject—the entire disuse of mechanical restraint in the management of the insane—its expressions voice the almost unanimous sense of skilled American alienists, and is in antagonism to that of quite a number of distinguished and estimable gentlemen in Europe. This is an admitted vexed question here and there, where it is warmly discussed. Viewed from different standpoints, it is as puzzling a problem as the rule in Shelley’s case, and the doctrine of contingent remainders, to our brethren of the law. A recapitulation of the facts adduced and arguments advanced on either side would not be pertinent in the scope of this address. Two or three incontrovertible propositions,

however, may be stated. While, if it were held feasible and judicious, every asylum officer would abolish restraint totally, and does endeavor to reduce its use to the minimum, the principle of restraint in some form is the fundamental idea in the care of large numbers of the promiscuously insane. Their collection and isolation, whether in hospitals, cottages or colonies, implies control. Secondly, no successful example has yet been produced of absolute non-restraint, manual or mechanical, for any considerable time in a company of mixed insane patients, where calamitous accidents and corporal injuries have not been the consequence. Thirdly, there are types and stages of insanity in which temporary seclusion and mechanical restraint are humane and curative agencies. In the insane in older countries, gathered from populations for ages in degraded social caste and semi-serfdom, there may be a physical docility and tractability, even in mental aberration in all of its forms, which permits personal restraint to be wholly dispensed with. It is the candid experience of the body of American hospital superintendents, that such conditions do not exist or prevail universally in the insane population of this country. The clamor for the institution of so-called reform in the total abolition of restraint, incited in mingled ignorance and malevolence, has vented much objurgation against this position of the Association, and sought to cast odium on institutions for the insane, and arouse popular distrust and hostility. Medical men, regardless of the canons of the code of ethics, have participated in these unjust but futile crusades, and may be left in silence to their chagrin. It was a fitter work for politicians and sensational pulpiteers, and a class of pragmatists of both sexes, or rather of whom it may be conjectured they were in character bisexual, to invent crude schemes for the prevention of insanity, and sermonize and drool over imaginary needs for the protection of the insane. There are some who think, with their aid the counsels of the Almighty in creation or

the order of evolution might have been amended, but usually they do not discern true reform, or effectually accomplish it.

“The world will wait in vain for improvement in modes of mitigating the sum of insanity, or promoting the welfare of its sufferers, in dependence upon pretentious and empirical precepts from such sources.”

Dr. ORPHEUS EVERTS, of Cincinnati, says :

“Conservation of energy, with ‘incidental protection,’ being the chief ends of special restraint, in the treatment of the curable insane, my belief is that the ‘protection bed,’ properly constructed and furnished, is the least objectionable and most generally applicable mechanism for restraining such insane persons as require more than partial or momentary restraint, of any now in use.

“It is preferable to a strong-room, because it really limits the motions of the patient’s body, instead of simply hiding the patient from public observation. It is better than the camisole or pack, because it limits the general, without embarrassing the special, motion of the body, and does not beget resistance by irritating contact with the person. The incidental protection afforded by it is all that can be desired.”

I have furnished you with these authorities, for, as I stated in the outset, I consider them very important in justifying Dr. Grissom’s methods of restraint for the care and cure of the insane.

I am here to justify Dr. Grissom in what he has done, and I take these authorities as proper treatment for the insane, for, as you know, in these high authorities which I have read mechanical restraint is justified by the force of their opinions to the effect that it is not only a proper method of treatment, but a most *humane method of treatment*. Here is a person who has lost his reason, he is a raving maniac ; his friends manacle him at home, but it may be the impressions made upon him there have a tendency to aggravate him, and

as soon as a place can be found in the asylum he is brought here. It is no use to give him medicine; it is not the body that is diseased, but the mind, and the treatment must be for the mind and not for the body. Now the first thing is to get some control over that patient. Notwithstanding the ridicule which the distinguished opposing counsel has heaped upon the idea of "mental impressions," these authors say it is necessary to make mental impressions upon insane persons. They say it is not always necessary to use medicines, but that it *is* necessary to use moral remedies. Our worthy friend laughed at the idea of using *moral remedies*, but the authorities say "make mental impressions," (and I beg you to note that they use the expression "mental impressions" and "moral remedies" in the same sense, and that in any connection they fully endorse mechanical restraint). It is an undeniable fact that mechanical restraint has been used in this institution, and because of it the opposing counsel has called the institution a *hell on earth*, and has gone so far as to say "he who enters here leaves hope behind."

What say the two hundred and fifty and more who have gone out from its portals cured of their maladies? They rise up and call this much abused man blessed. Their friends and relatives love him. Some have come here to testify in his behalf; not a single patient who has been in this institution, nor the friends of such, have come here to testify against him. Are these facts worth nothing? Yes. They form an armor for the accused which the poisoned weapons of the prosecution can never pierce. It is along this line I ask you to follow Mr. Guthrie through his long and intelligent testimony, and to follow him without prejudice, giving full credit to his integrity. I believe his testimony will make the same impression upon you that it has upon me, and that is that Dr. Grissom has got hold of the true theory of the treatment of the insane.

It is true, in applying this treatment he may sometimes use methods that, to unlettered and ignorant persons, might

seem cruel. He sometimes does things that even to you might seem cruel, but, in the sight of Heaven, I declare to you that I believe he has done everything which has been so bitterly denounced as cruel with the conscientious conviction that it was the proper treatment for that poor insane person committed to his care; and for one I stand here and *protest* against his being driven from this institution because, in his own judgment, and in his own enlightened intelligence, he has pursued methods which seemed to those who looked upon them as cruel.

Here is a poor child—it is but a few weeks old and has a crooked leg. The doctor takes it, puts it in a compress, and, with the assistance of an appliance, forces it into a position to grow straight. You can see the face of that little child depicting great agony; the little one suffers, but is it not a necessary suffering? Is it not for the welfare of the child? What would we think of a man who would denounce the doctor as cruel who applies that apparatus?

I remember a few months ago riding in the streets of one of the great cities of this continent, and I saw a little girl standing in a machine on wheels, and under the chin was a strap by which the head was fastened to a beam above. An attendant was slowly rolling the child along the street, and the little child was forced to step, though it gave it great pain to do so. That little one had spinal trouble and paralysis of the lower limbs, and she was being exercised for the benefit of that sad and painful trouble. Would you say that the doctor who prescribed the machine, or that the attendant who was rolling it along, was cruel, when it was being done for the child's own good and future benefit?

Here are these people with wild emotions, with paralyzed judgment and dethroned reason—is it not to the credit of the Superintendent that he does for these people what he thinks conscientiously is for their *best good*? The attendant near by, may be, does not understand his motives for doing it, being ignorant of the methods and their results, and so he

tells about it, and it goes from one mouth to the other; it is exaggerated, and then you have *this great investigation*. The exaggerated stories having all this time accumulated, these people come here and tell these various incidents, which have occurred, in the most exaggerated form. Take, as an illustration, the testimony about the patient *Cone*. The attendant says that Dr. Grissom "got down upon him and choked him until his face was black and blue—until the man lay limp and motionless, as if dead." Now, does anybody believe that? A brute would have done that, and Dr. Grissom is not a *brute*. Dr. Grissom tells you that this patient had peculiar disorders, always ready to jump upon people unawares, and that on one occasion, when he was passing through the wards, the patient *Cone* jumped upon him, and that he pushed him down on the floor with both hands, and then threw some cold water in his face for the purpose of making a "mental impression" upon him. Now, can any one doubt that Dr. Grissom's account of the affair is the correct one? I think not. "But," says the prosecution, "the act of throwing water in his face was in itself an act of cruelty." I remember about two years ago I was suffering with a delirium in an attack of malarial fever. In one of those delirious moments I lost consciousness, and when I recovered I found that my pillows and clothing were saturated with water. I did not think that was cruel, because it was done as the best thing for my condition; and I believe, in the sight of Heaven, that when Dr. Grissom threw that water in the face of that patient he did it for a good purpose, and with the idea it would be productive of good results. Now take Mrs. Lowther's case. How eloquent Mr. Whitaker became on this subject! He called on the spirit of Mrs. Lowther to give him additional power; he commanded her ghastly presence to parade up and down these halls, and look upon him while he denounced Dr. Grissom for causing her to be strapped to the bed, because, as he alleged, "she refused to go into the bath-room to bathe." His whole denunciation, his whole argument, was

built upon the theory that she was strapped to the bed because she would not bathe in the bath-room, when, in fact, there was not anything in the testimony of the witnesses upon this stand—not the slightest intimation—that Mrs. Lowther was strapped for that reason. Peruse the testimony of those who testified most particularly in this case, and I repeat, most positively, you will search in vain for the single utterance of a single witness, to justify this assumption; it is simply the fabrication of his fancy. Now, is there the slightest evidence that her death was the result of being strapped? Not the slightest. “Ah,” said Mr. Whitaker, “she had some lingering recollection of her refined and joyous days, and one of those recollections was that she used to bathe in the privacy of her own room, and because Dr. Grissom said she could not bathe in her room she rebelled, and was, therefore, strapped until she died.” The *testimony* is, that after she was released she took a bath in the quiet of her own room; that after she had dressed herself she ate a good meal, and about two hours thereafter she died. Now, if this be true, I humbly suggest that brother Whitaker ought to put a postscript to his prayer. After calling upon the spirit of Mrs. Lowther, and after assuming the testimony to be as best suited *his* purpose, he lifted his eyes towards Heaven and prayed an awful prayer, in which he invoked curses, dire and fearful, upon Dr. Grissom. But I say he ought, in view of the facts in the case testified to by the witnesses, to put two postscripts to his prayer before he publishes it, and I suggest that they be about in these words:

P. S. No. 1.—“O Lord, I know that in my prayer I did not say that Mrs. Lowther was strapped because she would not go to the bath-room to bathe, but a little thing like that—just a *little* variation from the facts like that—ought not to count, because, you see, O Lord, I was after that ‘old scoundrel.’”

P. S. No. 2.—“O Lord, I *did* say that Mrs Lowther died in consequence of being strapped. Of course there is no *evidence* to that effect, but saying it to the people of North Carolina in strong language will make a deep impression upon them. Although it does not exactly coincide with the testimony, I ought not to be required to strike it out of the prayers, for if I do it will spoil my whole case.”

I say these two postscripts ought to be added, if the testimony as well as the denunciation is what the reader desires to see. And so I might go on with case after case, set out in the specifications under the charge of cruelty, and after getting at the facts as they really *are*, and after examining them in the light thrown upon them by the eminent authorities I have read, the Superintendent of this institution stands before you fully justified, with the single exception of the Upchurch case.

In making up your judgment upon this charge, will you be guided by the vague and hastily-formed opinions of lawyers, as to the proper methods for the care and treatment of the insane, or will you rely more upon the well-defined opinions of eminent doctors who have made this subject the study of a life-time? If you are to be guided by the doctors and not by the lawyers, by the facts and not by the conjectures of counsel, I feel that I can ask you, with great confidence, to find the second charge in our favor.

There is, however, as I before said, one specification under this charge that I do not ask you to pass upon in our favor, without such criticism as you think proper. I am going to be frank about it. If I were sitting here upon this Board I feel that it would be my duty to say that in the Upchurch case, in a moment of excitement, Dr. Grissom lost command of himself, and, taking his own account of the occurrence to be true, he ought not to have put his foot upon Upchurch. He ought to have called Mr. Thompson to assist him in holding him down, for it was the duty of Mr. Thompson, *without* being called upon, to assist Dr. Grissom; and if I were on

this Board, while I would find the charge of cruelty strongly in his favor, I would say that in the case of Upchurch, in a moment of excitement, he lost his self-control, and was guilty of doing an improper thing in putting his foot upon the patient.

But just here I wish to call your attention to a significant fact in connection with this Upchurch case. It occurred six years ago, and the witnesses are testifying from memory as to what took place six years ago. It so happened, however, that the case, with all its attendant circumstances, was written up by *Dr. Rogers*, only one year after it took place, when the whole case was fresh in the memory of all. This report was copied into a book by Mr. Thompson, to be read and to be preserved. This report has been read to you, and nowhere does it mention any horrible things now detailed by him in this connection. I have this to say of Mr. Thompson: It is too late for him to pose before the people of the State as a disinterested patriot. All the allegations now made by him are based upon things known to him from six years downward to the present time. Boards of Directors have met and adjourned, Legislatures have come and gone, but not a word was ever heard about these matters about which he and his attorneys put on so much assumed indignation. He was on the lookout before the last Legislature to *preserve his place* in the institution, but not to call attention to these alleged outrages. If Mr. Thompson was the humane, honorable and just man he is credited with being, it was his duty to have gone to Dr. Grissom and said: "I will not be a party to preparing a report to go out from here that does not state the whole truth." If he had pursued this course he would have deserved the high commendation that has been heaped upon him so profusely during this investigation.

Another reflection about him. I trust Mr. Thompson *is* a good man. I believe he has been misled. I do not believe he is wholly responsible for this trial, but I do say *this*:

That on last Friday he ought to have stood up and said: "Dr. Rogers, you and I have been partners until this time in this business, but I cannot approve of such a course of conduct as you have pursued. After your character has been so stigmatized I am not willing to stand before the people of the State as approving it."

There has been a great deal of talk about not putting Dr. Fuller upon the stand. I beg, gentlemen, that you will remember that this prosecution closed its case without examining Dr. Fuller, or attempting to do so. They have undertaken to give as a reason, that Dr. Fuller was connected with Mr. Thompson. They said: "It is improper to put Dr. Fuller on the stand, because of his relationship to Mr. Thompson." Thompson's brother married Dr. Fuller's sister; I call that a "remote contingency." But they did not hesitate to examine Thompson himself, nor did they hesitate to examine Mr. West, who is directly connected with Mr. Thompson. How insincere, then, must be the reason assigned by them! But I am asked why *we* did not put him on the stand, and to this I reply that when the time arrived when it was proper for us to do so it was well known to us that he was physically unable to undergo the fatigue of an examination. We recognized the fact that Dr. Fuller had been connected with this institution since it was first opened. We recognized the fact that Dr. Fuller had given up his life to it, and had literally worn himself out in its service. He is now a wreck of his former self; but I tell you, gentlemen, his present condition is a monument to his fidelity to this institution. We esteem him too highly to take a part in calling him to the stand in his present prostrated condition, but we do not intend that our love and regard for him shall be used against us; on the contrary, I intend to comment upon the pregnant facts to which I now call your attention.

You have heard these witnesses upon the stand. When asked to whom they had told their stories, they said: "We told Dr. Rogers," and "we told Mr. Thompson," and we told

this one and the other one, but where is the witness that has said he told *Dr. Fuller*? Where is he? Now, if there had been the intention to make these reports for the "good of the institution," tell me, was not *Dr. Fuller* the very one to go to? It is in evidence here that many of these persons who have been mechanically restrained were restrained by *Dr. Fuller's* order. It is impossible that these things could have gone on in this institution without *Dr. Fuller's* full consent and knowledge. It is impossible that if mechanical restraint had not been considered by *Dr. Fuller* as a proper means of treatment (if properly applied) that he would have allowed it. He is modest, retiring and unassuming, but I defy a man to say that *Dr. Fuller* is not just and independent. No salary could have induced him to stay here if he thought that the methods of this institution were wrong. The mere mention of it is a slander upon the man who has given his life to these unfortunate people. When the time came to organize the Western Asylum the then Governor of North Carolina, recognizing the eminent fitness and experience of *Dr. Fuller*, appointed him a member of the first Board of Directors, to organize that institution. We heard a letter read the other day from the Superintendent of that institution regarding the faithful and efficient service that *Dr. Fuller* had rendered in that particular, and I believe firmly that a large measure of the effective work of that institution is due to his suggestions in its organization. No nobler man lives in North Carolina than *Dr. F. T. Fuller*, and I repeat, that these prosecutors and their attorneys slander *him* when they tell you that the institution of which he is the First Assistant Physician is mismanaged and the patients therein mistreated. This I consider an additional reason why the second charge should be found in our favor.

These charges have been brought. The prosecution, placing themselves behind their own breastworks, have dealt charge after charge, as witness after witness testified, until it began to look like we were pretty badly wounded.

Reports of this violent and damaging testimony went out to the State, and it began to look to some as though it was time for us to surrender. Some said, "Let us not decide yet"; others said, "Dr. Grissom must go down beneath such an array of witnesses." But the time came at last when *we* opened *our* artillery, and shot after shot, and shell after shell, were sent, knocking away all their breastworks. We brought up, last Friday, a stupendous bombshell and exploded it, and one of the captains of this fight on the other side went down, and from that day to this no one has been found to say a kind word of him, or, so far as we know, *to* him. Perhaps, in the hours of seclusion, his friend Emanuel Jones may speak a word of comfort to him. It is possible, when no eye can see or hear, that his other dear friend, Plummer King, may peep through the key-hole at him; but "only that and nothing more."

Now, it seems to me, that from the course of the speech of the counsel who opened the case for the prosecution, that, being satisfied one of his clients ought to be driven from this institution (for Dr. Rogers certainly cannot expect to remain), that his object now is to tear down the building and leave Dr. Grissom in the wreck; but I expect you, gentlemen of the Board, not to permit any such folly as that. If both of his clients want to leave, let them do so, and let them take with them such friends and sympathizers among the attendants as choose to follow them, but I *do* ask you, in the name of the people of North Carolina, not to permit the usefulness of this institution to be destroyed through a false notion of the proper treatment of the insane; but, having your own convictions plain before you, do that which your conscience and country require of you, and let the results take care of themselves. If you do not think the Superintendent is guilty of immorality, cruelty, or peculation, *say so*, and let it go out to the people of North Carolina that with this man no fault is found in your eyes, but that you believe that, as a public servant, he has been faithful in the dis-

charge of his public duties. Let it go out to the people of North Carolina that this skillful alienist is to remain here to administer his skill in the care and cure of the unfortunate insane.

It is no *small thing* to make the reputation of a life-time. What is a State but its people? You may have your broad acres and your fine buildings—your forests of valuable timber and your wealth of mines—but, after all, it is the brave men and virtuous women that make a State. It is one of the faults of the people of North Carolina that they have esteemed too lightly the reputation and honor of their own public men. Other States have perpetuated the memory of their great men, but we have never been distinguished in that patriotic work. The brave men of North Carolina have been foremost, since the earliest days of our country, in making its history, but they have not been mindful of *how* that history has been written.

For the first time in North Carolina, eight of its citizens have been called upon in a case like this—to sit in judgment upon a man who started in the humbler walks of life and has risen to the highest summits in his profession. His life is ours, and his work is ours, and his reputation is ours, and only upon the most satisfactory testimony should the charge, that “Eugene Grissom has been unworthy the confidence, esteem and respect of this people,” be sustained by you.

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