The Beginnings of State Care for the Mentally Ill in Ireland

ARThUR WILLIAMSON

Our purpose in this paper is to examine the background and development of state care for the mentally ill in Ireland. Today, with a rapidly growing awareness of the needs of people with psychiatric problems, many agencies, state and voluntary, are doing excellent work; and in Ireland the recommendations of the Commission of inquiry on mental illness, published in 1966, did much to bring into focus the strength and weakness of this facet of the social services. It drew attention to a number of disturbing statistics, among them those indicating that, with 6.6 beds in mental hospitals per 1,000 of the population in 1965, the incidence of in-patient treatment is the highest in the world. In the fiscal year 1966–67, over £6.5 million, or 20 per cent of the total budget for health, was spent on services for the mentally ill in Ireland. Research into the beginnings of state involvement in mental health services is therefore of much more than antiquarian interest; and an examination of the background of social policy with respect to the mentally ill may be of significant help in understanding subsequent attitudes and the legislation which they produced.

This article will examine a number of aspects of social policy and state provision for the mentally ill at the beginning of the last century. An important primary source is to be found in the report and minutes of evidence of a select committee appointed in 1817 by the House of Commons to inquire into the conditions of the lunatic poor in Ireland. Following the report of this committee, legislation was enacted which resulted eventually in the establishment, between 1825–35, of a network of district lunatic asylums, Ireland's first mental hospitals, of which most continue in use until the present day. These hospitals applied the enlightened principles of "moral treatment" which had come into vogue following pioneer work by the Quaker Tuke family at York, and Philippe Pinel in Paris, in the

3. 57 Geo. III, c. 106, 1817; 1 Geo. IV, c. 98, 1820; 1 & 2 Geo. IV, c. 33, 1821; 6 Geo. IV, c. 54, 1825; 7 Geo. IV, c. 14, 1826.

281
The period immediately following the French revolution. We shall also consider some features of these pioneer psychiatric hospitals and their importance in the history of public care for the mentally ill in Ireland.

The movement toward lunacy reform in Ireland

The period 1805–17 saw a rapidly rising tide of interest in lunacy reform in the British Isles. The illness of George III caused widespread discussion. Quaker experiments in treatment gave new hope. A tendency to reject supernaturalistic explanations of the origins of insanity, and a reaction against Calvinist doctrines of total depravity, expressing itself in an almost Pelagian belief in the essential goodness of the individual, contributed to moulding a new attitude to mental illness. In 1805, Sir John Newport, M.P. for Waterford, and later to become a prominent Whig, had attempted to obtain legislation to set up a network of four asylums in different parts of Ireland. His attempts were defeated by party rivalry in the wake of Samuel Whitbread’s attempted impeachment of Lord Melville. In 1808, Charles Williams-Wynn succeeded in obtaining legislation that would provide for England what Newport had wished to provide for Ireland. Under the county asylums act, asylums were established in a number of counties in England. The years 1808–13 saw the publication of a number of articles drawing attention to the needs of the “lunatic poor” in Ireland. One of these took the form of an open letter, signed by Sir John Newport, at that time chairman of the Board of Governors of the Waterford House of Industry. Addressed to “all Irishmen, friends of suffering humanity”, it was widely circulated throughout Ireland and found its way, in 1816, into the minutes of evidence of a select committee on English madhouses of which Robert Peel was a member.

Robert Peel had come to Ireland in 1812 to take over the administration at Dublin Castle. As chief secretary and Chief Whip at Westminster, he occupied the most influential post in the Irish administration. Peel became interested in the problems of the mentally ill in Ireland in 1814 when, through his undersecretary, William Gregory, and the inspector of prisons, Foster Archer, he initiated an investigation into public establishments in which lunatics were con-


8. The county asylums act, (Wynn’s act), 48 Geo. III, c. 96.

9. Quoted in *First report: minutes of evidence taken before the select committee appointed to consider of provision being made for the better regulation of madhouses in England*, p. 94, H.C. 1816 (227), vi. Although Ireland fell within the initial terms of reference of this committee, the conclusions and report do not deal with Ireland.
Archer's enquiries revealed that twenty-three of the thirty-two counties of Ireland made no provision for lunatics, although grand juries had power, under an act of the Irish parliament of 1787, to provide funds for this purpose. In 1816, a scandal at the Dublin House of Industry lunatic department led Peel to undertake an exhaustive investigation into conditions there. The reports which he obtained confirmed the need for government intervention; and on 4 March, 1817, Peel rose in the House of Commons and spoke "animatedly" of the need for public provision for the accommodation of lunatics in Ireland. He concluded his speech by moving that "a committee should be appointed to inquire into the expediency of making further provision for the relief of the lunatic poor in Ireland."

Peel's interest in the mentally ill seems to have been motivated both by his extreme distaste for administrative disorder, and by deeply-felt pity. Other members who supported his motion in the Commons referred to a number of benefits which would accrue from state provision for the insane: Charles Williams-Wynn stressed that, quite apart from kindness to the insane individual, it was "a most prudent measure and economic proceeding" to erect lunatic asylums, since they would cure and restore to the community many who would otherwise be a burden upon it. George Rose, the evangelical philanthropist, lent his support also, and deplored the fact that the mentally ill were so often objects of public amusement.

The evidence considered by the committee was principally personal contributions by members and the replies to a circular letter sent to all cities and counties in Ireland by the chairman, William Vesey Fitzgerald, supplemented by data furnished by Peel. It provides us with valuable information concerning public attitudes to the insane and the conditions in which they were accommodated, in rural areas, in public institutions, and in Ireland's most prominent private asylum, St. Patrick's Hospital, Dublin.

Denis Browne, Member of Parliament for Mayo and a privy councillor, indicated to the committee the lengths to which people were often compelled to go in dealing with relatives who became insane.

When a strong young man or woman gets the complaint, the only way they have to manage is by making a hole in the floor of the cabin, not high enough for the person to stand up in, with a crib over it to prevent his getting up. The hole is about five feet deep, and there they give this wretched being his food, and there he generally dies.

10. These documents are preserved in the state papers at the Public Record Office (official papers, second series, no. 417/14, carton 556).
11. 27 Geo. III, c. 39, s. 8.
12. Senior physician's report (P.R.O.I., official papers, second series, no. 451/6, carton 561); report of the army medical board, 8 Oct. 1816 (N.L.I., MS 7816).
14. P.R.O.I., official papers, second series, no. 488/7, carton 569.
In conclusion Browne expressed the view that, "of all human calamity, I know of none equal to this in the country parts of Ireland which I am acquainted with". The practice to which he refers may owe something to a medieval Irish form of treatment which Lady Wilde mentions in her *Ancient cures, charms and usages of Ireland*.

Conditions at some of the public-supported institutions in Ireland were often equally disturbing. Thomas Spring Rice, the Irish lunacy reformer who was to succeed Sir John Newport as chancellor of the Irish exchequer in 1839, and a life governor of the Limerick House of Industry, made a tour of a number of houses of industry in the southern part of the country. Though praising the Cork Lunatic Asylum which had been founded in 1791 by Dr. William Hallaran, he severely criticised conditions at the Waterford and Clonmel Houses of Industry. Speaking of that at Waterford, Spring Rice said that it resembled "an ill-conducted gaol". At Clonmel he had found thirty-two lunatics of whom some were lying naked upon straw in a yard; and at Limerick conditions were worse than at either Waterford or Clonmel. In several rooms in the House of Industry at Limerick corpses had been lying for a number of days before one of his visits. Two patients had died from exposure and another had lost limbs. Patients were chained together in a fashion that resulted in some being permanently deformed. In another department, Spring Rice stated, "the most atrocious profligacy" was practised, and had spread to the lunatic department. The keeper had been dismissed, and was replaced by male and female attendants loaned by Dr. Hallaran of Cork.

At Kilkenny the problem of providing accommodation for lunatics had come to a head in 1816. Information preserved in the Irish state papers supplements that contained in the minutes of evidence of the select committee. In the county gaol five lunatics had been confined, the return of criminals indicating that two of them had been simply charged with "being a lunatic", and a third with "paroxysms of insanity". As there was no separate accommodation for lunatics during the day, they were confined in a corridor with other prisoners. In the city, where gaol conditions were even worse, it was reported that there the other prisoners tormented the lunatics. Lack of space made lunatics "the greatest possible inconvenience." The debtors’ section of the gaol, likewise overcrowded, was disturbed by the cries and shouts of the lunatics. At the House of Industry at Kilkenny conditions were slightly better. Each patient was provided with a sheet, a blanket and a quilt. Whereas in the county gaol the daily allowance of

16. Giving evidence before the select committee on medical charities in Ireland in 1843, Rice stated, "My attention during my whole life has been turned to the state of the lunatic poor in Ireland". p. 1, H.C. 1843 (412), 355.


18. Reply to circular letter of William Vesey Fitzgerald from C.F. Philips, April 1817 (P.R.O.I., official papers, second series, no. 488/7, carton 569).
food was seven pounds of potatoes and a quart of new milk, in the House of Industry the diet included beef or mutton on Sundays. The minutes of evidence of the committee contain an architect’s plan for proposed new accommodation for twenty lunatics in connection with the House of Industry at Kilkenny. To be erected at an estimated cost of £1,738 14s. 6d., the new building was to accommodate twelve “supposed enraged lunatics and eight convalescents.” At the time of the report building had not started although the grand juries had made several presentments towards the estimated cost.

Apart from Ulster, where there were no houses of industry, in the rest of Ireland the pattern was the same: the mentally ill and defective were shut away in prisons and houses of industry, together with the blind and handicapped, criminals, debtors, petty thieves and prostitutes. Only in Dublin, where the Richmond Asylum had been established in 1815, and in Cork, was there any public establishment for the mentally ill.

No mention is made, in the minutes of the select committee, of private asylums other than St. Patrick’s Hospital in Dublin. Little is known of these, apart from Cittadella at Cork, founded in 1799 by Dr. William Hallaran; Bloomfield, the Quaker Retreat founded in 1810 at Donnybrook and patterned on the Retreat at York, and Farnham House at Finglas, established in 1814 by Dr. Alexander Jackson, first physician to the Richmond Lunatic Asylum. Another private asylum, Hampstead House, was started in 1826 by Dr. John Eustace, a Quaker whose sister had been active in supporting the Bloomfield Retreat. Eustace, with his two partners, Dr. Richard Grattan and Mr. Isaac Ryall, charged 200 guineas a year, twice the sum required from the 19 “chamber-boarders” at St. Patrick’s.

The Irish Parliament had contributed to the cost of establishing and maintaining St. Patrick’s Hospital. Dr. James Cleghorn, the physician, in a lengthy letter to the committee, complained that, but for grants of £4,000 in 1811, and £4,180 in 1812, the government had contributed nothing to the hospital since the Union. He remarked that “the expense of feeding the boarders is high as they have the best meat in the market and the best joints, with tea for breakfast”. Accommodating, in addition to the nineteen “chamber-boarders” referred to above, forty-four hard-boarders and 107 paupers, St. Patrick’s Hospital had the high staff/patient ratio of 1:5.3. In addition to the non-resident physician and surgeon, the staff included the master, matron, six ward-keepers, two laundry maids, a cook, a porter, thirteen chamber-keepers and a barber.

20. The Richmond Lunatic Asylum was established as an institution separate from the Dublin House of Industry by an act of 22 June, 1815, 55 Geo. III, c. 107.
21. Records of the Retreat at Bloomfield are in the custody of Mrs. Dorothy Sawyer, secretary. Records of Hampstead House, including the original minute book, are in the possession of Dr. H. Jocelyn Eustace, 44 Fitzwilliam Square, Dublin 2, a descendant of Dr. John Eustace, co-founder.
22. A list of voluntary contributions and state grants to St. Patrick’s Hospital is given in J. Warburton, J. Whitelaw, R. Walsh, History of the city of Dublin (1818), i. 691.
The establishment of district lunatic asylums in Ireland

The select committee recommended that a number of district lunatic asylums should be established in different parts of Ireland. It had considered providing accommodation at infirmaries, by the erection of wards for lunatics, but decided against this in favour of regional asylums in view of the evidence given by John Leslie Foster (a governor of the new Richmond Asylum in Dublin and later a baron of the exchequer), concerning the moral methods of treatment used at the Richmond. Advocates of moral treatment considered that the insane were normal people who had lost their reason as a result of extreme stresses, the "moral" causes of insanity. Moral treatment aimed at relieving the patient by friendly association, discussion of his problems and "employment", the daily pursuit of useful activity. It would have been impossible, it was claimed, to properly apply moral methods of treatment, using untrained staff, in more than a score of locations throughout the country. The committee therefore opted for a number of district asylums, similar to the Richmond Asylum in Dublin, and practising moral methods of treatment.

Before parliament rose for the summer in 1817 a bill was presented and on 11 July, the last day of the current session, it became law. Drafted by Spring Rice and presented by Vesey Fitzgerald, this act implemented most of the recommendations contained in the report. Recognizing that only nine English counties had availed themselves of the powers granted to them under Wynn's act of 1808, the legislation placed the establishment of lunatic asylums in Ireland in the hands of the lord lieutenant, and not, as in England, in those of the local magistrates. The country was to be divided into administrative areas in each of which an asylum would be established. A national board would coordinate the erection of the new asylums and the lord lieutenant had power to appoint unpaid local governors to superintend the administration of each institution.

The legislation of 1817, proving to be inadequate in a number of respects, it was found necessary to introduce amending acts in 1820, 1821, 1825, and 1826. These gave the lord lieutenant additional power to raise money, to change districts, to obtain land, and to institute a system of inspection which was to be the responsibility of the inspectors of prisons in Ireland. Their annual reports constitute a valuable, if sometimes partisan, source for a study of the early years of the asylums.


24. The governors of the Richmond Asylum in Dublin had, in fact, already recommended this. Unfortunately their correspondence with the select committee was lost in the fire at the Four Courts, Dublin, in 1922. The lost papers are listed in the Index to official papers, 1790–1831 (P.R.O.I., p. 375).

25. An act to provide for the establishment of asylums for the lunatic poor in Ireland, 57 Geo. III, c. 106.

26. The board of general correspondence and control of lunatic asylums.
The first asylum was opened at Armagh in July, 1825. We are fortunate that many of its early records, including the first minute-book of its board and the first case-book of its moral manager, have survived. They provide interesting insight into early admission procedures, methods of moral treatment, problems of administration and changes in public attitudes vis à vis the new institution. As at the Richmond Asylum, at Armagh admission was very strictly limited to those whom, it was thought, moral treatment would cure. This, of course, meant that many cases were rejected. Mental defectives and chronic patients were consistently turned away and returned to their relatives or to the gaols of the five counties, Armagh, Fermanagh, Monaghan, Tyrone and Donegal, which composed Armagh’s district. The governors and Thomas Jackson, the moral manager, argued that the asylum was for the cure of insanity by moral means: to allow chronic cases to fill the wards would mean that before long there would be insufficient room for those with a favourable prognosis. However, while there was much in favour of that argument, it limited the usefulness of the asylum, and excluded classes of patients whom the government had clearly intended should be accommodated there. The national board, which had been set up by the lord lieutenant in 1817, had power to set up rules to govern admission and administration in the asylum. It did not exercise this power. Consequently, Jackson ran the asylum on an ad hoc basis until 15 February, 1826, when the rules of the Richmond Asylum in Dublin were adopted.27 These, of course, were intended for an institution exclusively for the treatment of curable cases: patients at the Richmond Asylum who proved incurable were returned to the Dublin House of Industry. Definition and clarity by the national board of this important point would have done much to avoid confusion concerning the role of the first mental hospital in Ireland.

Thomas Jackson advocated strongly the use of moral treatment of the insane. Like other moral managers, he placed little faith in so-called “medical” methods of treatment, which included the use of a rapidly revolving swing chair developed by Dr. Hallaran of Cork,28 copious bloodletting, practised by Dr. Edward Percival29 of the Dublin House of Industry, and the “bath of surprize”, a cold bath into which an unsuspecting patient was suddenly plunged. Moral treatment, in contrast, “taught patients to restrain their evil habits and propensities, to correct their conduct and behaviour by giving them ideas of order, industry and decorum.” It sought to “return them to society better, not alone in health, but in their moral character.” Jackson, in a letter to Henry Goulburn,30 chief secretary,
explained what he felt were the qualifications of a moral manager. He must be a man of "feeling and consideration . . . who shows by the mildness yet firmness of his manner that, though kind, he must be obeyed." He should "soothe with kindness the intemperate passions" of recalcitrant patients, and "turn to advantage any interval of fury and meet with love their otherwise unmanageable extravagancies." Coercion was to be permitted only when the safety of the patient or of others demanded it. A case history of an unnamed patient illustrates moral theory in practice and provides a grim reminder of the means to which friends and relatives had often to resort as they tried to restrain those who were deranged. The case is recorded in Jackson's annual report for 1828.31 A patient had been brought to the Armagh District Asylum with "as much rope coiled around him as would have secured a wild beast." The horsedrawn cart on which he was tied was surrounded by six relatives all of whom were afraid, on arrival at the asylum, to untie him. Jackson remarks that it did not prove necessary to use any coercion with this man; and in three months "he was perfectly recovered and expressed often and feelingly his gratitude for the kindness he received, being fully aware of his former treatment." Occupational therapy was also stressed. "To confine the insane without means of employment," wrote Jackson, "is contrary to right reason, to humanity and experience; the poor lunatic, when left to himself, without occupation or the busy and active scene of some pleasing employment, soon graduates into a state of incurability or idiocy and is left a burden to himself and to the community."

It was not long before Jackson's humane approach to the problems of mental illness became widely known. His annual report for 1826 stated that, previous to its opening, many of the poorer classes had been heavily prejudiced against the asylum.32 This prejudice, however, was rapidly breaking down and "the friends of the unhappy sufferers are anxious for their admittance, apparently placing every confidence in the institution."

Under the legislation of 1817-26, eight district lunatic asylums were set up in the period 1825–35, at an expense of £245,000. These were at Armagh, Limerick, Belfast, Derry, Carlow, Portlaoise (Maryborough), Clonmel and Waterford.33 In 1830 the Richmond Asylum, Dublin, became a district lunatic asylum, as did the Cork Asylum in 1845. In the same year an act was passed establishing a criminal lunatic asylum at Dundrum (opened 1850) under the direct control of the government. Between 1852 and 1869, twelve more district asylums were erected. The published reports of official and unofficial visitors during the decade following the establishment of the first asylum provide valuable assessments of


32. *Annual Report of the Armagh District Lunatic Asylum*, 1826, printed in *Copies of all the correspondence and communications between the Home Office and the Irish government during the year 1827, on the subject of public lunatic asylums*, p. 3, H.C. 1828 (234), xxii.

33. A table listing the asylums established 1825–35, and analysing cost per patient, percentage of cures, etc., is given in Denis Phelan, *Medical charities of Ireland* (1835), appendix, table xi.
the new institutions. In 1827, Elizabeth Fry and Joseph Gurney visited the new district asylum at Armagh and Limerick, in addition to the Richmond Asylum in Dublin, and recorded their observations in a Report addressed to the lord lieutenant (London, 1827). They found the governors enlightened, that patients were suitably classified in accordance with their type of mental illness, and that very few were confined to their cells. A large number of patients were employed, particularly at the Armagh and Richmond Asylums, where occupations included, for women, knitting, cleaning, spinning or needlework, and, for men, either gardening or weaving. The authors concluded: “In this respect the treatment of lunatics in Ireland is superior to that adopted in many of the best asylums in England.”

Other visitors expressed similar praise for the Irish district asylums. A Dr. James McDonald, physician to the Bloomingdale Asylum in New York, now a teaching hospital attached to Cornell University, visited Ireland in 1832. He had made an extensive tour of asylums in England, France and Germany. Writing on Ireland, McDonald said that the district asylums there formed a more complete system than in England. Asylums in England and Ireland were “probably superior in construction and management” to those in any of the countries he had visited. Another writer on lunatic asylums, Sir Andrew Halliday, gave his assessment of Irish asylums:

... the system is so excellent and has been found to work so well that I am anxious it should be imitated in this country [England].

An extract from the report of the select committee on the state of the poor in Ireland, published in 1830, gave an official assessment:

The house will thus see with satisfaction that in reference to one of the most painful afflictions to which humanity is exposed, there has been provided within a few years a system of relief for the Irish poor as extensive as can be wished, and as perfect and effectual as is to be found in any country.

The report continued,

The question of asylums for idiots and incurable lunatics, whether the disease arises from epilepsy or other causes, is still to be considered.

The early optimism of Jackson and his fellow moral managers was dampened by the insuperable problem of accommodating the chronic insane. By 1835, most of the asylums were overcrowded, and their managers were forced to turn away new, and often curable, cases. Financial pressures made it convenient to rely more

34. McDonald’s report is recorded in the minutes of the Bloomingdale Asylum Committee, 3 November 1832, and is reprinted in W. L. Russell, The New York Hospital: a history of the psychiatric service, 1771-1936, New York, 1945, pp. 496-506.
heavily on the income from patients' labour and this in turn led to an emphasis on remunerative but therapeutically valueless work. Slowly the asylum came to resemble the workhouse and, as the early stress on therapy and cure was lost, so popular opinion began once more to distrust those who cared for the insane. Moral theories of treatment went out of favour during the latter half of the century; and as early as 1843, following a controversy between physicians and moral managers, the introduction by the lord lieutenant of a set of uniform rules for all the district asylums in Ireland removed the final authority in asylum administration from the moral manager and gave it to the physician.36

The building of large hospitals in the second half of the century made it impossible for the physician to keep in close touch with his patients. As patient numbers grew, so it became necessary to employ increased numbers of untrained staff. Changes in legislation, which emphasized the “liberty of the subject”, safeguarded the interests of the insane to such an extent that it became very difficult to admit a mentally ill person to any asylum until the disorder was very far advanced. Moral treatment was replaced by the isolation and safe custody of the mentally ill; and the best medical superintendent was the man who ran his hospital with greatest economy, and had his patients guarded so carefully that none escaped.

We have traced the beginnings of public provision for the mentally ill in Ireland; and we have considered the contribution of a number of those who championed the cause of the mentally ill, and who recognized the duty of the state to provide for its underprivileged and unfortunate members, sane and insane. The development of social policy is not readily amenable to simplification, however. The scope of the present paper naturally precludes a comprehensive treatment of the growth of social policy in early nineteenth-century Ireland. It is hoped, however, that our preliminary survey may encourage interest in the history of social theory and administration in Ireland, and may contribute to a greater understanding of the background and original structure of the Irish mental hospital service, and of the grave social problem which it attempted to alleviate.

36. For this controversy see John Jacob, Observations and suggestions on the management of the Maryborough District Lunatic Asylum submitted to the consideration of the governors (1833), and Thomas Jackson, Remarks on Dr. Jacob's pamphlet respecting the bye-laws for the district asylums in Ireland, Armagh, 1834.