

Introduction

As I cannot count on sufficient fair play according to my state of health and in every way my great need of fair play ... I am badly in want of a powerfull [sic] friend so as to be able to work out much more good than usual – I feel sure he [John Redmond MP] will be able latter [sic] on to exercise his powerful influence over his own people for Ireland's best interest – when I was in Dublin some years ago I went in for a high tone [sic] I am still going in for the same as far as my state of health will permit – I am a lot better now than when I first came to Ireland – owing to the fact of having been driven into a state of dispair [sic] in England by means of going in for a low tone unconsciously, I have been driven into the extremes of it.¹

However I see it is my duty to state that my present state of health and capacity for doing good is all due to the goodness of the government in the person of Dr Drapes because I was out of my right mind and incapable of doing good only from extremes of foul play so far as my health is concerned also because I was unable to follow the advice of a good soul when I was in England owing to overwhelming weakness ... because so long as I am here in the country, if I have the name of being ill they can claim a right to come and distinguish themselves by a rare sort of kindness towards the sick patients ...²

Between 1912 and 1914 Anastasia O'D., a patient in Wexford District Lunatic Asylum (Enniscorthy asylum), penned several letters to John Redmond, leader of the Irish Parliamentary Party and a local Waterford MP. In her correspondence, Anastasia provided her own narrative of her behaviour, of the events that contributed to her 'state of health' and of her future needs and requirements. Anastasia's letters never reached John Redmond. Dr Thomas Drapes, the Resident Medical Superintendent at Enniscorthy asylum from 1884 to 1919, withheld them.³ Anastasia's

narrative is sometimes confused and confusing, but it is useful in several respects. By her own account, Anastasia had been in and out of institutions in Dublin and in county Wexford. She believed the period she spent as an Irish migrant in England was crucial in precipitating her illness and identified her history of consumption as contributing to her mental decline. Throughout her correspondence, Anastasia displayed gratitude to Drapes as her carer, although this became more muted in later letters. She was acutely aware of her social status as someone who was 'ill', recognising that those outside the asylum distinguished themselves in relation to her: as kind but also as sane. She mapped her own behaviour and requirements onto contemporary national political debates. Her need for a 'powerful friend' reflected the Irish people's need for powerful advocates in a time of political turmoil and she claimed she abstained from religious services to ease national sectarian tensions.⁴ She therefore inserted herself into the colonial relationship between Britain and Ireland. Anastasia was one of thousands of Irish people to enter asylums in the nineteenth and early twentieth centuries.

A state-funded system of district asylums was introduced to Ireland in July 1817.⁵ The provision of welfare institutions bolstered the union between Britain and Ireland and was part of colonial endeavours 'to bring order to Ireland, to foster the conditions in which the transition to a prosperous, capitalist agricultural society might be effected.'⁶ Central government retained high levels of control over the new Irish asylum system, and its administrative and bureaucratic structures were similar to those subsequently established in colonial contexts in Australasia. For example, lunacy inspectorates, which were less autonomous bodies than the English lunacy commission, oversaw both the Irish and the Australasian asylum systems. Also, legislation allowing the confinement of 'dangerous lunatics' was used extensively in both contexts, thereby ensuring the police fulfilled an important role in certification processes.⁷ While Ireland's status as a colony has been contested, an assessment of the national governance of the asylum system indicates that it had colonial characteristics.⁸

Historians of asylums in India, South Africa and Australasia have stressed the importance of 'colonialism' as an analytic tool in the assessment of the activities of asylum officials and doctors. Catharine Coleborne, Shula Marks and Megan Vaughan have emphasised how asylum doctors and administrators educated in the metropolis transported European medical ideas and institutions to Africa, Australia and New Zealand.⁹ As

Waltraud Ernst and Jim Mills identified, anxieties to assert ideas of racial superiority resulted in the provision of separate institutional spaces for European and non-European mentally ill patients. In her study, Coleborne locates a distinctive 'colonial family' and explores its engagement and negotiation with nineteenth-century asylums. In provincial Ireland, differentiating between 'the indigenous' and 'the settler' was no simple matter. The well-established nature of the colonial relationship and the waves of settlers moving into Ireland over several centuries meant that by the nineteenth century cultural cross-fertilisation ensured that there were 'varieties of Irishness'.¹⁰ As the nineteenth century progressed, Irish-born doctors, often trained at universities in Dublin, Glasgow and Edinburgh, began to emerge from the ranks of the rising Catholic middle classes to join their Protestant Irish counterparts in the medical profession and the asylum system. The major determining factors that influenced asylum doctors' attitude towards patients were class and gender though racial stereotyping sometimes featured. As chapter two shows, occasionally the Irish lunacy inspectors and asylum doctors invoked the language of racial difference when talking about patients however, while racial theories were deployed to explain susceptibility to mental illness, such discourses were less explicit than in other colonial contexts. Though Anastasia inserted her own story within a colonial discourse, she was exceptional in doing so.

Taking as case studies the Carlow lunatic asylum district and Carlow and Enniscorthy asylums, this book explores the interactions and negotiations of local protagonists (such as Anastasia) with the Irish asylum system that Mark Finnane meticulously delineated. The selection of an individual asylum district has facilitated a detailed study of changes in the political, social and cultural history of several forms of nineteenth-century institutional provision for the mentally ill. The Carlow lunatic asylum district was the sixth of nine asylum districts created under the original lunacy legislation.¹¹ It initially served four counties – Carlow, Wexford, Kilkenny and Kildare – situated in the province of Leinster in the southeast of Ireland.¹² The first asylum to open in the district in February 1832 was in Carlow town. The selection of the sites of individual asylums depended on several factors. Generally, the chief town in the county was chosen as preference was given to towns with thriving markets and a sufficient number of physicians and local gentry to serve in the asylum.¹³ Both Carlow town and Kilkenny city met these requirements. However, the cost of sites in Kilkenny city was higher and instead Carlow

town was selected. Soon after opening, the new Carlow asylum became overcrowded and the original Carlow asylum district was divided. Two additional asylums were constructed: one in Kilkenny city to serve county Kilkenny (1852) and, from 1868, another in Enniscorthy town, serving patients from county Wexford. It was the largest of the three asylums in the original Carlow district.¹⁴ The population of the four counties in the district was 543,000 in 1831.¹⁵ By 1911, following the reduction of the Carlow asylum district to counties Carlow and Kildare, the population served by the original institution was 102,879.

The rationale for the selection of the southeast of Ireland for a detailed study of asylum provision rests on several factors. By 1911, counties Carlow, Wexford and Kilkenny exhibited particularly high rates of institutionalisation. Amongst Irish counties, the proportion of the population in asylums and workhouses was the sixth highest in county Carlow, and the eleventh highest in county Wexford.¹⁶ By the twentieth century, there was a similarly high usage of dispensary and other medical services.¹⁷ In addition, Carlow and Enniscorthy asylums are representative of a group of moderately sized asylums in provincial towns in Ireland that have been relatively absent from the literature. Neither asylum developed into monolithic institutional complexes. The region and asylums differed therefore in several respects from other institutions examined by historians to date. Connaught lunatic asylum in county Galway, explored by Oonagh Walsh, was one of the largest Irish asylums. It served a peculiarly expansive and mainly rural district that continued to exhibit the social and cultural traits of pre-Famine Ireland in the later nineteenth century.¹⁸ Joseph Reynolds' and Elizabeth Malcolm's studies of individual asylums focused on the social role of the institutions in an urban context – Dublin – and highlighted the fortunes of public and charitable institutions in a city that exhibited extreme levels of poverty.¹⁹

The Carlow district is interesting in several other respects. It experienced many of the social, cultural and demographic adjustments that changed post-Famine Ireland. The main economic activities in the four counties were agricultural although there were pockets of industry. In the 1830s, there was a distillery on the outskirts of Wexford town as well as breweries, tan-yards and rope works.²⁰ Wexford was a maritime county with two steamers on the Wexford and Liverpool line. In county Kilkenny, the region north of Castlecomer was known for its collieries and, by the end of the century, the mining seams had been largely exhausted, resulting in

widespread poverty. In addition to the mines, there were some distilleries in the county. County Kildare, which possessed rich agricultural lands, had almost no industries: it was renowned for its racing tracks and, later, for the military camp on the Curragh.²¹ There were pockets of urban development and of affluence in the asylum district including Kilkenny city with its imposing medieval castle, St Canice's Cathedral, and the impressive courthouse and gaol. While not as badly hit as other regions, the district suffered during the Great Famine (1845–51). Over the course of the nineteenth century, the Carlow district also benefitted from social and infrastructural developments. In the post-Famine period, the population of the district had high levels of literacy, and from the 1840s there was significant development in railway and other communication and transport infrastructures.²² Similar to the rest of Ireland, the region suffered depopulation as a result of emigration: between 1861 and 1911 men formed approximately 54 per cent of the emigrant population from counties Carlow and Kildare. By 1911, 58.8 per cent of the population was single, never having married and most were men (58.4 per cent).²³

The sources used in this study will be discussed in more detail in the relevant chapters; however, it is appropriate to make a few comments here. In addition to official sources, newspapers and medical periodicals, institutional and legal records were used extensively. Because Carlow asylum was one of the first nineteenth-century Irish asylums, the records from that institution lent themselves to a statistical analysis of patterns of usage over an extended timeframe. The sources used in the analysis were the Carlow admission, discharge and death registers, and through nominal linkage these sources have been used to construct a social profile of patients admitted between 1832 and 1922. This incorporates 5,517 admissions into Carlow asylum. The certification warrants for 340 individuals from counties Wexford, Kilkenny, Carlow and Kildare certified as dangerous lunatics to Carlow asylum between 1838 and 1868 were also used extensively. Surviving casebooks from Carlow and Enniscorthy asylums provided the springboard for an in-depth exploration of late Victorian asylum patients and doctors. The records of poor law institutions in counties Wexford and Carlow – workhouse and medical dispensaries – ensured a more complete assessment of medical and welfare provision for the mentally ill could be established. This brought protagonists that have previously occupied a peripheral position in our

understanding of provision for the mentally ill in nineteenth-century Ireland to centre stage.

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The Carlow asylum district, and Enniscorthy and Carlow asylums, form the basis for an exploration of how civil society and its local protagonists – legal, medical and lay – negotiated and interacted with institutions of the nineteenth-century state in Irish provincial towns. As Patrick Joyce has demonstrated, the state can be interpreted ‘as a neutral administrative machine reacting to social and economic problems in terms of pragmatic reform’ and ‘a centre from which power radiates’ as well as a ‘coordinating entity’. In the latter incarnation, the state and its elaborations – asylums, workhouses and legal courts – are more ‘structureless’.²⁴ The less rigid manifestation of the state, which Corrigan and Sayer have characterised as the ‘state as an effect’, ensure that ‘the boundaries between the state and civil society – the family and the community’ can be disrupted.²⁵ Robert van Krieken has made similar observations in his work on child welfare in Australia.²⁶ Similarly, this book will demonstrate how, in negotiating the meanings of, and various responses to, mental illness in the southeast of Ireland in the nineteenth century, the boundaries between the state and civil society were porous. It therefore contributes to post-Foucauldian debates on the governmentality of mental illness and the mentally ill, one of the key concerns in histories of asylumdom and psychiatry. Foucault’s account of the rise of the asylum and of the dispersed nature of power in society has been challenged and nuanced by subsequent scholarship, which has studied the consumers of the asylum and mapped ‘resistance as well as the domination’ of psychiatry and the asylum.²⁷ Therefore, this study will assess how local actors and groups, in responding to and challenging state interventions, altered and negotiated the administrative, legal and cultural structures of local asylums.

Chapters one and two build on Finnane’s study of the origins and subsequent development of the asylum system. His work has provided a comprehensive assessment of the legal and administrative structures that bound Irish asylums and remains the most important text on the history of asylumdom in Ireland. Chapter one outlines the national context to the introduction of asylum legislation and situates the Carlow asylum district within the topography of institutional provision, while chapter

two considers the local debates that surrounded the division of asylum districts. Both chapters confirm Finnane's assertion that the governance of the Irish asylum system was centralised. Nonetheless, as will be argued local groups, including poor law guardians, magistrates and grand juries, fought over the control of asylums, partly in opposition to the centralised nature of Irish local governance and partly to align themselves as willing participants in the state's endeavours to transform, reform and pacify Ireland. Unlike other elements of local government in Ireland, throughout the nineteenth century, the governance of Carlow and Enniscorthy asylums continued to be dominated by landed elites who were politically loyal to British interests in Ireland. These governors were joined by local religious figures. Both chapters demonstrate that the individuals who provided the 'social leadership' in the 'promotion of the asylum'²⁸ – those who regularly attended asylum meetings and those who lobbied for new asylums – emerged from groups that were not only politically loyal but also committed to the vision of modernisation and improvement that the asylum represented in local contexts. The financial burden of the asylum would subsequently qualify this local enthusiasm. The politics of welfare is further examined in chapter six, which focuses on the national and local relationship between the poor law and the asylum system in Ireland, a subject that has received relatively little scholarly attention.²⁹ While the Irish asylum system remained formally separate from the poor law, asylum staff looked to workhouse facilities when managing the mentally ill throughout the nineteenth century. However, differing eligibility criteria limited the integration of the two systems.

The remaining chapters focus more explicitly on local actors in civil society – patients, families, poor law guardians, magistrates, police and doctors – and their interactions with asylums and with each other in responding to and managing the insane and insanity. What emerges from these chapters is that asylums and certification procedures were less prescriptive in form and structure than previously suggested. The role of the asylums and the certification procedures were repeatedly redefined through interactions with different groups in local contexts. This was in part facilitated by the patchy and faulty lunacy regulation and legislation as well as by informal manoeuvring and negotiations around legal and administrative structures.³⁰ The chapters also suggest that those who managed the asylums and the certification procedures could be flexible and responsive to pressures placed on them in local contexts. Chapter

three delineates the evolution of various asylum certification procedures – ‘ordinary’, dangerous lunatic, and urgent certifications – identifying the lunacy inspectors’ drive to publicly and practically place medical certification at the centre of the different procedures and establish medical rather than legal actors as asylum gatekeepers. Included here is a discussion of the structure and development of certification forms in Ireland. This allows an exploration of developments in medical definitions of mental illness and of the establishment of asylum doctors as expert in its treatment.

The existing literature on asylums in Ireland has emphasised the disciplinary function of the family, the asylum and certification procedures.³¹ Forming a central part of these arguments are the accounts of the extensive use of the dangerous lunatic legislation to certify individuals in Ireland.³² Finnane’s 1985 article offers a revision to this argument.³³ In chapters four, five and seven these arguments are developed in relation to the politics of the Irish family and household. Irish families have been regularly portrayed as economic units that prioritised survival strategies at the expense of emotional satisfaction.³⁴ Here it is acknowledged that at times families invoked certification into an asylum to impose normative roles and to resolve conflict,³⁵ but this was complicated by individual and household poverty, distress and emotional disintegration. Gendered domestic roles among pauper households were disrupted when relatives negotiated with legal and medical authorities to access welfare. At times, these negotiations took place during petty session court hearings as part of the dangerous lunatic certification procedure. As chapter four will argue these legal procedures put ‘insanity on display’, publicly governing individuals’ behaviour and manners, and also disseminating knowledge of certification procedures. This dispersed medical interpretations of aberrant behaviour among differing socio-economic groups in Irish society. The relationships between asylum doctors, patients and families within and outside the asylums are the focus of chapter seven. This includes an exploration of experiences within provincial asylums, utilising late nineteenth-century casebooks from Carlow and Enniscorthy. The now familiar tale of the demise of the optimism that first attended moral treatment and the advance of bleaker theories of degeneration and hereditary insanity that defined medical responses to mental illness is identifiable in Carlow and Enniscorthy asylums. However, while theories of degeneration were deployed to account for the apparent ‘increase’ in mental illness

in the late nineteenth century, environmental factors such as poverty, class, fatigue, disappointment and difficult life circumstances continued to feature in psychiatric aetiologies explaining susceptibility to disease. This is in keeping with the evidence that has emerged in relation to the certification procedures and the complicated and multifaceted domestic reasons for committal, as outlined in chapter four and five. This book emphasises the degree to which the asylum 'was a contested site, subject to continual negotiation amongst different parties'.³⁶ It endeavours to place at the centre of the narrative individual protagonists and the various groups that navigated medical, legal and institutional provision and structures. The struggles and alignments between these groups reveal how asylums and the mentally ill were understood and defined in the nineteenth century by the forces pivotal to the processes of institutionalisation in Ireland.

Notes

- 1 St Senan's Psychiatric Hospital (hereafter SPH), Enniscorthy, File of miscellaneous letters, Anastasia O'D. to Mr [John] Redmond, 21 November 1912.
- 2 SPH, Enniscorthy, File of miscellaneous letters, Anastasia O'D. to Mr [John] Redmond, 29 July 1914.
- 3 Thomas Drapes, who had acted as visiting physician at Enniscorthy asylum from 1872, succeeded as Resident Medical Superintendent in 1884. He remained until 1919 and was succeeded by Dr Hugh Kennedy, see 'Notes and News', *JMS* 65:269 (April, 1919), 140.
- 4 SPH, Enniscorthy, File of miscellaneous letters, Anastasia O'D. to Mr [John] Redmond, 30 September 1914.
- 5 57 Geo. iii, c.106 (1817).
- 6 M. Finnane, *Insanity and the Insane in Post-Famine Ireland* (London: Croom Helm, 1981), p. 18. Alvin Jackson has argued that the relationship between Ireland and the English colonial state was not always coercive, see A. Jackson, 'The Survival of the Union', in J. Cleary and C. Connolly (eds), *The Cambridge Companion to Modern Irish Culture* (Cambridge: Cambridge University Press, 2005), pp. 25–41.
- 7 C. Coleborne and D. MacKinnon, 'Madness' in *Australia: Histories, Heritage and the Asylum* (Queensland: University of Queensland Press, 2003); C. Coleborne, 'Passage to the Asylum: the Role of the Police in Committals of the Insane in Victoria, Australia, 1848–1900', in R. Porter and D. Wright (eds), *The Confinement of the Insane. International Perspectives, 1800–1965* (Cambridge: Cambridge University Press, 2003), pp. 129–148; S. Garton, *Medicine and Madness: A Social History of Insanity in New South Wales, 1880–1940* (Kensington: New South Wales University Press, 1988).
- 8 S. Howe, *Ireland and Empire: Colonial Legacies in Irish History and Culture* (Oxford: Oxford University Press, 2000), p. 37.

- 9 W. Ernst, 'European Madness and Gender in Nineteenth-Century British India', *Social History of Medicine*, 9:3 (1996), 357–382; W. Ernst, 'Out of Sight and Out of Mind: Insanity in Early-Nineteenth-Century British India', in J. Melling and B. Forsythe (eds), *Insanity, Institutions and Society, 1800–1914. A Social History of Madness in Comparative Perspective* (London and New York: Routledge, 1999), pp. 245–267; W. Ernst, 'Asylums in Alien Places: The Treatment of the European Insane in British India', in W.F. Bynum, R. Porter and M. Shepherd (eds), *Anatomy of Madness. Essays in the History of Psychiatry, III* (London: Tavistock, 1988), pp. 48–70; J. Mills, *Madness, Cannabis, and Colonialism: The Native Only Lunatic Asylum of British India, 1857–1990* (London: Macmillan, 2000); S. Marks, "'Every Facility that Modern Science and Enlightened Humanity have Devised": Race and Progress in a Colonial Hospital, Valkenberg Mental Asylum, Cape Colony, 1894–1910', in Melling and Forsythe (eds), *Insanity, Institutions and Society*, pp. 268–291; M. Vaughan, *Curing their Ills: Colonial Power and African Illness* (Cambridge: Cambridge University Press, 1991).
- 10 R. F. Foster, *Modern Ireland 1600–1972* (London: Penguin Books, 1989), p. 3; J. Leerssen, *Mere Irish and Fíor-Ghael. Studies in the Idea of Irish Nationality, its Development and Literary Expression prior to the Nineteenth Century* (Cork: Cork University Press, 2nd edn, 1996).
- 11 The three asylums opened after Carlow asylum were Ballinasloe (1833), Waterford (1835) and Clonmel (1834), see *Eleventh Report of the Inspectors General on the General State of the Prisons of Ireland (Report of Prison Inspectors)*, H. C. 1833 [67] xvii, p. 11.
- 12 *Eighth Report of Prison Inspectors*, H. C. 1830 [48] xxiv, pp. 18–19.
- 13 *Report of the Commissioners of Inquiry into the State of Lunatic Asylums and other Institutions for the Custody and Treatment of the Insane in Ireland*, H. C. 1857–1858 [2436] xxvii (hereafter *Inquiry into the State of Lunatic Asylums and other Institutions*), p. 23.
- 14 See chapter two.
- 15 *Returns Relating to District Lunatic Asylums in Ireland*, H. C. 1833 [695] xxxiv, p. 2. The population of each county in Carlow district was Carlow (81,988), Kilkenny county and city (169,945), Wexford (182,713), Kildare (108,424).
- 16 *Sixty-first Report on District, Local and Private Lunatic Asylums in Ireland* (hereafter *Report of Lunacy Inspectors*), H. C. 1912 [6386] xxxix, pp. xiii–xv.
- 17 *The Health Services and their further development* (Dublin: Stationery Office, January 1966), p. 28. Thanks to Professor Mary E. Daly for this reference.
- 18 O. Walsh, 'A Lightness of Mind: Gender and Insanity in Nineteenth Century Ireland', in M. Kelleher and J. H. Murphy (eds), *Gender Perspectives in Nineteenth-Century Ireland* (Dublin: Four Courts Press, 1997), pp. 159–167; O. Walsh, 'Gendering the Asylums: Ireland and Scotland, 1847–1877', in T. Brotherton, D. Simonton and O. Walsh (eds), *The Gendering of Scottish History: An International Approach* (Glasgow: Cruithne Press, 1999), pp. 199–215; T. P. O'Neill, 'The Persistence of Famine in Ireland', in C. Póirtéir (ed.), *The Great Irish Famine* (Cork: Mercier Press, 1995), pp. 204–218.
- 19 J. Reynolds, *Grangegorman. Psychiatric Care in Dublin since 1815* (Dublin: Institute of Public Administration, 1992); E. Malcolm, *Swift's Hospital: A History of St Patrick's Hospital, Dublin, 1746–1989* (Dublin: Gill and Macmillan, 1989).

- 20 S. Lewis, *A Topographical Dictionary of Ireland*, II (London: S. Lewis and Co., 1837), pp. 707–711.
- 21 There was an informal military camp on the Curragh at the beginning of the nineteenth century. The permanent barracks were built in 1855, see C. Costello, *A Most Delightful Station: The British Army on the Curragh of Kildare, Ireland, 1855–1922* (Cork: Collins Press, 1999).
- 22 See chapter three.
- 23 W. E. Vaughan and A. J. Fitzpatrick (eds), *Irish Historical Statistics. Population, 1821–1971* (Dublin: Royal Irish Academy, 1978), pp. 274–275 and pp. 269–271.
- 24 P. Joyce, 'Postal Communication and the Making of the British Technostate', Centre for Research on Socio-Cultural Change, Working Paper Series, 54 (August 2008).
- 25 *Ibid.*, p.4.
- 26 R. van Krieken, *Children and the State: Social Control and the Formation of Australian Child Welfare* (North Sydney: Allen & Unwin, 1992), p. 7.
- 27 R. Porter, 'Introduction', in Porter and Wright (eds), *The Confinement of the Insane* pp. 1–19, p. 5. For responses to Foucauldian interpretations and accounts of other forms of engagement with the asylum, see essays in C. Jones and R. Porter (eds), *Reassessing Foucault. Power, Medicine and the Body* (London and New York: Routledge, 1994); J. Melling and B. Forsythe, 'Accommodating Madness: New Research in the Social History of Insanity and Institutions', in Melling and Forsythe (eds), *Insanity, Institutions and Society*, pp. 1–30; A. Scull, *The Most Solitary of Afflictions. Madness and Society in Britain, 1700–1900* (New Haven and London: Yale University Press, 1993); D. Wright, 'The Certification of Insanity in Nineteenth-Century England and Wales', *History of Psychiatry*, 9 (1998), 267–290; D. Wright, 'Getting Out of the Asylum: Understanding the Confinement of the Insane in the Nineteenth Century', *Social History of Medicine*, 10:1 (1997), 137–155; D. Wright, 'Family Strategies and the Institutional Confinement of "Idiot" Children in Victorian England', *Journal of Family History*, 23:2 (1998), 190–208; R. Adair, B. Forsythe and J. Melling, 'A Danger to the Public? Disposing of Pauper Lunatics in Late-Victorian and Edwardian England: Plympton St Mary Union and the Devon County Asylum, 1867–1914', *Medical History*, 42:1 (1998), 1–25; R. Adair, B. Forsythe and J. Melling, 'Families, Communities and the Legal Regulation of Lunacy in Victorian England: Assessments of Crime, Violence and Welfare in Admissions to the Devon Asylum, 1845–1914', in P. Bartlett and D. Wright (eds), *Outside the Walls of the Asylum. The History of Care in the Community* (London: The Athlone Press, 1999), pp. 153–180; J. K. Walton, 'Lunacy in the Industrial Revolution: A Study of Asylum Admissions in Lancashire 1848–50', *Journal of Social History*, 13:1 (1979), 1–22; J. E. Moran, 'Asylum in the Community: Managing the Insane in Antebellum America', *History of Psychiatry*, 9:34 (1998), 217–240; J. E. Moran, *Committed to the State Asylum. Insanity and Society in Nineteenth Century Quebec and Ontario* (Montreal and Kingston: McGill-Queen's University Press, 2000); N. Tomes, *A Generous Confidence: Thomas Story Kirkbride and the Art of Asylum-Keeping, 1840–1883* (Cambridge: Cambridge University Press, 1984); C. M. McGovern, 'The Myths of Social Control and Custodial Oppression: Patterns of Psychiatric Medicine in Late-Nineteenth-Century Institutions', *Journal of Social History*, 20:1 (1986), 3–23.

- 28 J. Melling and B. Forsythe, *The Politics of Madness. The State, Insanity and Society in England 1845–1914* (London and New York: Routledge, 2006), p. 6.
- 29 The exceptions are O. Walsh, 'Lunatic and Criminal Alliances in Nineteenth-Century Ireland', in Bartlett and Wright (eds), *Outside the Walls of the Asylum*, pp. 132–152 and H. Burke, *The People and the Poor Law in Nineteenth-Century Ireland* (Dublin: Women's Education Bureau, 1987), pp. 256–261. For studies of England see P. Bartlett, 'The Asylum and the Poor Law: The Productive Alliance', in Melling and Forsythe (eds), *Insanity, Institutions and Society*, pp. 48–67; P. Bartlett, *The Poor Law of Lunacy: The Administration of Pauper Lunatics in Mid-Nineteenth-Century England* (London: Leicester University Press, 1999); P. Bartlett, 'The Asylum, the Workhouse and the Voice of the Insane Poor in 19th Century England', *International Journal of Law and Psychiatry*, 21:4 (1998), 421–432; Adair, Forsythe and Melling, 'A Danger to the Public?'; B. Forsythe, J. Melling and R. Adair, 'The New Poor Law and the County Pauper Lunatic Asylum. The Devon Experience 1834–1884', *Social History of Medicine*, 9:3 (1996), 335–355; B. Forsythe, J. Melling and R. Adair, 'Politics of Lunacy: Central State Regulation and the Devon Pauper Lunatic Asylum, 1845–1914', in Melling and Forsythe (eds) *Insanity, Institutions and Society*, pp. 68–92; J. Melling and R. Turner, 'The Road to the Asylum: Institutions, Distance and the Administration of Pauper Lunacy in Devon, 1845–1914', *Journal of Historical Geography*, 25:3 (1999), 298–332; D. Wright, 'The Discharge of Pauper Lunatics from County Asylums in Mid-Victorian England: The Case of Buckinghamshire, 1853–1872', in Melling and Forsythe (eds) *Insanity, Institutions and Society*, pp. 93–112; J. Andrews, 'Raising the Tone of Asylumdom: Maintaining and Expelling Pauper Lunatics at the Glasgow Royal Asylum in the Nineteenth Century', in Melling and Forsythe (eds) *Insanity, Institutions and Society*, pp. 200–222; E. Murphy, 'The Lunacy Commissioners and the East London Guardians, 1845–1897', *Medical History*, 46:4 (2002), 495–524; E. Murphy, 'The New Poor Law Guardians and the Administration of Insanity in East London, 1834–1844', *Bulletin of the History of Medicine*, 77:1 (2003), 45–74; R. Ellis, 'The Asylum, the Poor Law and a Reassessment of the Four-Shilling Grant: Admissions to the County Asylums of Yorkshire in the Nineteenth Century', *Social History of Medicine*, 19:1 (2006), 55–73.
- 30 Melling and Forsythe make a similar point in the case of Devon Asylum, see Melling and Forsythe, *The Politics of Madness*, p. 6.
- 31 For examples, see E. Malcolm, "'The House of Strident Shadows': the Asylum, the Family and Emigration in Post-Famine Rural Ireland", in E. Malcolm and G. Jones (eds), *Medicine, Disease and the State in Ireland* (Cork: Cork University Press, 1999), pp. 183–185; E. Malcolm, "'Ireland's Crowded Madhouses": the Institutional Confinement of the Insane in Nineteenth- and Twentieth-Century Ireland', in Porter and Wright (eds), *The Confinement of the Insane*, pp. 315–334; Á. McCarthy, 'Hearths, Bodies and Minds: Gender Ideology and Women's Committal to Enniscorthy Lunatic Asylum, 1916–25', in A. Hayes and D. Urquhart (eds), *Irish Women's History* (Dublin: Irish Academic Press, 2004), pp. 115–136; O. Walsh, 'Gender and Insanity in Nineteenth-Century Ireland', in J. Andrews and A. Digby (eds), *Sex and Seclusion, Class and Custody. Perspectives on Gender and Class in the History of British and Irish Psychiatry* (Amsterdam and New York: Rodopi, 2004), pp. 69–94.

- 32 Finnane, *Insanity and the Insane*, pp. 87–128; P. M. Prior, 'Mad, Not Bad: Crime, Mental Disorder and Gender in Nineteenth-Century Ireland', *History of Psychiatry*, 8:32 (1997), 501–506; P. M. Prior, 'Prisoner or Patient? The Official Debate on the Criminal Lunatic in Nineteenth-Century Ireland', *History of Psychiatry*, 15:2 (2004), 177–192; P. M. Prior, 'Dangerous Lunacy: the Misuse of the Mental Health Law', *Journal of Forensic Psychiatry and Psychology*, 14:3 (2003), 525–541; Walsh, 'Lunatic and Criminal Alliances', pp. 132–152. It was not used as frequently in England, see J. F. Saunders, 'Institutionalised Offenders: a Study of the Victorian Institution and its Inmates, with special reference to Late Nineteenth-Century Warwickshire' (PhD dissertation, University of Warwick, 1983).
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