

Outside the Walls of the Asylum

*The History of Care in the Community
1750–2000*

Edited by

PETER BARTLETT & DAVID WRIGHT



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munity, closely regulated and supervised, or, to echo the assessment of Henderson, was 'the first medico-social experiment in the community care of the mentally afflicted'.⁹² As a contribution to the on-going debate regarding the best mode of provision for the mentally ill, it is maintained that the innovative system of boarding-out in Scotland in the nineteenth century had much to recommend it. Johnson's declaration regarding the role of history appears particularly apposite when set in the context of current concerns:

to judge rightly of the present, we must oppose it to the past; for all judgement is comparative, and of the future nothing can be known . . . The present state of things is the consequence of the former; and it is natural to inquire what were the sources of the good that we enjoy, or the evils that we suffer. If we act only for ourselves, to neglect the study of history is not prudent. If we are entrusted with the care of others, it is not just.

CHAPTER SIX

Enclosing and disclosing lunatics within the family walls: domestic psychiatric regime and the public sphere in early nineteenth-century England

Akihito Suzuki

At the outset, in order to put the concept of psychiatry and community in a historiographical context, it seems helpful to distinguish two interpretive models in the present scholarship in the history of psychiatry from the early modern period to the nineteenth century. One is centred around the psychiatric institution; the other lays emphasis on what happened within family. In the institutional model, the sinew of the development of psychiatry was incarcerating institutions (asylums and psychiatric hospitals, as well as General Hospitals of the *ancien régime*, houses of correction under the Old Poor Law, and workhouses under the Old and New Poor Laws), with their medical, legal, political, and ideological apparatuses. The most forceful and well-known advocate of this view is Michel Foucault.¹ In his *Histoire de la folie*, Foucault identified the starting point of the prototype of modern psychiatry in the creation of public institutions for confining lunatics with petty criminals and vagabonds by the French absolutist state. The subsequent unfolding of psychiatry was, according to Foucault, the development of different techniques to cope with the incarcerated insane within institutional walls. Similarly, Andrew Scull's account of the making of English psychiatry is framed around the creation of the nation-wide system of publicly-funded county asylums, which emerging 'psychiatrists' or 'mad-doctors' appropriated as the power-base to consolidate their professional status.²

The 'domestic' approach, on the other hand, emphasizes the importance of the family's private need to cope with the problem

of the lunacy of their family member. The work of Michael MacDonald best represents this direction of investigation.³ In his examination of the psychiatric practice of Richard Napier, MacDonald has clarified that Napier's psychiatric encounters were initiated by the clients, rather than being imposed by an authoritarian and disciplinarian figure. The patients and their families disclosed their personal and domestic problems, and the sympathetic clergyman attentively listened to them, tried to console the patients, soothed their personal agony, and sometimes forced them into behaving in socially acceptable ways. One of Roy Porter's arguments on psychiatry in eighteenth-century England follows a somewhat similar line, stressing the role played by the family in the development of profit-making institutions for the insane.⁴

There are several recent attempts at integrating the two models by self-consciously examining the interaction of the institutional and the domestic. Robert Castel views French asylum committal as the post-Revolutionary replacement of *lettres de cachet*, which had been a powerful means for a patriarch to punish wayward family members. From this, Yannick Ripa argues that the way in which domestic problems were settled was influenced by the presence of public asylums in the day-to-day landscape of late nineteenth-century French society.⁵ Ripa maintains that alongside recourse to police, the 'voluntary' committal of lunatics gave the family another means to settle the family discord by mobilizing public authority's intervention, and asylums served the purpose of suppressing juvenile and female domestic rebellion as well as silencing political and social protest. In her article on committal to a late-nineteenth-century Parisian asylum, Patricia Prestwich shows that the family's increasing demand for institutional psychiatric service created a new role for the asylum and its doctors: the asylum and alienists were unexpectedly seen as a convenient and temporary access-point for settling or relieving domestic problems.⁶ In her study of Boston Psychopathic Hospital, Elizabeth Lunbeck has perceptively pointed out that family did not necessarily protect its members from society's oppressions, surveillance, and control; rather, family became a powerful vehicle of 'domination, management, and regulation of individuals' that were functions of the hospital and medical authority.⁷ These recent works have shown that psychiatry in the past was shaped by a multitude of complex bilateral interactions between the family's need and the institution's power and

authority. On the one hand, the power of psychiatrist and public authority embodied in institutions penetrated into domestic realm, sometimes reinforcing the patriarchal power over wives and children, sometimes transforming the power-structure within the family.⁸ On the other hand, the psychiatric apparatus designed, established and maintained by the state or other public authorities was under constant improvisation by the clients, to which doctors had to respond by inventing – sometimes unwillingly – new roles for themselves.

These sophisticated analyses, however, tend to bypass the intermediary area between the family and the institution, a vast realm which lies outside the immediate family, and at the same time, outside the institutional walls. Only marginal attention has been paid by historians of psychiatry to the role played by agents in this middle area, namely, extra-familial relatives and kin, neighbours, men and women on the street, except in studies of 'care in community' as an alternative to or antithesis of asylum.⁹ Although organized provision for the insane outside the institution is an important phenomenon, there existed other aspects in the extra-familial or 'public' sphere, which were crucial in moulding the culture of psychiatry in nineteenth-century England.¹⁰ The aim of this paper is to fill the historiographical lacuna and to examine the influence exercised by community, neighbourhood, and public space in general on the general outlook of Victorian attitude to the insane. The family with an insane member attempted to construct a barrier of surveillance, control, and management between private and public spheres, and between the domestic realm and the world outside in their attempt to *contain* the patients within the private sphere. At the same time, the barrier was under constant threat, and vulnerability was intrinsic to its nature. This was largely because of particularly strong interest which people outside took in lunatics in the private sphere. Motivated by kindness, sense of justice, interested concern, and, of course, nosy curiosity, neighbours, friends, the crowd on the street forced their way into the closed domestic world in which the family tried hard to enclose the patient. In other words, the existence of a lunatic in a family itself destabilized the boundary between the public and private spheres and invited forceful intervention from the outside world.

A few words are necessary about the sources used herein to explore this somewhat nebulous area. In many ways, the records of

the court of commission *de lunatico inquirendo* or commission of lunacy by inquisition provide extremely rich material. The Commission of Lunacy (not to be confused with the Lunacy Commission or Commissioners *in* Lunacy) was a legal mechanism, allowing any person to ask the Lord Chancellor to examine whether a person in question was a lunatic or an idiot, and, if so, to deprive him or her of some of his or her civil rights, and to appoint a person (usually the next of kin) to take care of his or her property.¹¹ In order to prove the insanity or sanity of the alleged lunatic, the petitioner or the respondent produced witnesses. These were often family friends or neighbours, whose experience with the alleged lunatic was reported in detail. The family's difficulty with coping with the alleged lunatic was also fully described (usually by servants and keepers, who were directly responsible for taking care of him or her), with strong emphasis being laid on the embarrassment caused by their odd behaviour in the public spaces such as the street, church, places for business and so on. These commissions took place in an open court before a jury and large audience. Most importantly, the Commission of Lunacy was attended by a host of shorthand reporters for national newspapers, whose fully detailed accounts of the examination appeared in the paper the next day. Between 1825 and 1845, there are about 150 reports of the Commission of Lunacy in *The Times*. Those trial reports usually filled several columns, occasionally more than an entire page for a week or even longer period. These newspaper reports, which have been utilized only partially in the history of psychiatry, form the core material of the argument below.¹²

There are, however, two limitations in this source material. Firstly, the Commission of Lunacy had a very large bias toward the wealthy sector of the society, and the practice discussed below seems to have been limited to the upper- and middle-classes. The emphasis on the code of respectable behaviour and on the sacralization of family were disproportionately found among the upper sections of the society, if not specific to them. The second limitation is that of periodization. For unknown reasons, regular coverage of Commission of Lunacy trials in *The Times* was restricted in the two decades between 1825 and 1845, and the number of the cases reported declined sharply after the period. It is thus difficult to tell whether the patterns presented below were common features found throughout the long history of the legal practice. This chapter

concentrates on the structure of the private and public sphere framed around the issue of insanity in the wealthy section of the English society at a given time, largely leaving the question of the class-specificity and periodization open to further investigation.

The word 'community', with its implications of shared values, toleration, and the spirit of co-operation, now often carries positive meanings and associations. The resonance in discussion over modern psychiatric care is no exception: with all its shortcomings, care in community is something to be defended and developed. In the nineteenth century, which was the heyday of asylum, people thought otherwise, many equating the growth of public institutional provision for the insane with the march of enlightened humanitarianism, Christianity, and medical science.¹³ Moreover, the Victorian period was also the pinnacle of family and domestic values, and well-off families who had to take care of mental patient must have seen the idea of 'community care' as out-and-out anathema. From what was reported in detail at the trials of Commissions of Lunacy, one can see how hard families tried keep their insane members out of the *notice* of the public. To be brief, their basic strategy was to contain and enclose the lunatic in the private sphere and to prevent his or her lunacy becoming a public problem.

It is proverbial that insanity was a great stigma to the family, who tried hard to conceal the existence of insanity in the family blood.¹⁴ To conceal and hide the physical presence of their insane members, the family had several options. Committal to a licensed house and boarding them at a private lodging attended by keepers were usual choices, while secretly shutting the lunatic up in the attic in one's own house, immortalized in *Jane Eyre*, seems to have been relatively uncommon.¹⁵ Besides these radical means, which uprooted the patients from their ordinary lifestyle, there were more unstable makeshift means, achieved at their own houses, to prevent the lunatic from 'exposing' his or her lunacy in a public space--on the street, at church, at public dinner-table, at a place of business, and so on. Without removing the patient into an abode designed to detain inmates, the family continued to live with the patient and could persuade, influence, or intimidate the lunatic into behaving well in public places, avoiding public attention and keeping up ordinary appearances.

The most prominent concern within this makeshift domestic regime, reported in court, was to control property transactions of

the lunatic in question, from minor purchase and signing a cheque for a small amount to transactions to an entire estate. There were a variety of means to achieve this end. The most simple but effective one was not to give any pocket money to the lunatic. Before Mather R. Ebbing, formerly a merchant with extensive business, was put in Kensington House, he temporarily lived with his sister. A servant testified: 'His sister took his purse. He used not to pay his own bills when I knew him, but his sister discharged them.' The fourth Earl of Portsmouth, who had an annual income of £20,000, did not have the command of money and had to sometimes borrow money from his gardener.¹⁶ Another simple and crude solution was to deprive the lunatic of access to shops. Lady Charlotte Sherard was kept in a private asylum but does not seem to be particularly violent or dangerous. When she wished to walk about, the medical attendant did not allow her to do so, 'as she was so extravagantly disposed of money', and 'her trustee, aware of this improvident expenditure of money, desired her to draw no more draughts on Messrs. Goslings.'¹⁷ Similarly, personal vigilance over the lunatic at a shop was sometimes necessary. Rosa Bagster, a weak-minded heiress of a wealthy London printer and a subject of a Commission of Lunacy in 1832, was said to have 'never made a single purchase' during the whole course of her life. One of the governesses recalled that she was so ignorant of the value of money that she would have paid a shilling or a sovereign for a yard of two-penny riband at a shop, if the governess had not been with her.¹⁸ When Barbara White, whose obsessional grief over her deceased mother and some bizarre delusions alarmed her relatives, went to an ironmonger's shop in Oxford Street and wanted to purchase an iron bath to prevent people from seeing her, her clerk prevented the purchase in a discreet way, without making his control too overt: he 'motioned to the shopman not to serve her.'¹⁹ Although these examples sound minor, these disruptions signalled for the family and other people a potential danger of more serious damage to property. When Miss Louisa Ridge, of a wealthy family near Yarmouth, was found to have paid her poulterer's bill without inquiring the price of articles, her relative expressed her fear: 'she was very imprudent in her domestic concerns, and it is my opinion that any designing person could have easily duped her out of property.'²⁰ Outside the protected domestic sphere, the family feared, lunatics would be easy prey to unscrupulous wretches. The

public sphere, with its relatively free contact between people, meant danger to the lunatic and his or her property.

The surveillance of female behaviour, especially those acts related with the sexuality of young single women, was particularly tight, partly because large amounts of property were often at stake. The family of Princess Bariatinski, a weak-minded daughter between an English mother and a Russian nobleman, finally petitioned a commission of lunacy when they found that the Princess wrote a letter to one Mr. Newman:

Since I have had the pleasure of seeing you I have thought of a pleasant scheme. I think I should like to go to Walmer [sic]. I dare say Mrs. Brooks will let me go with you any day, and I should like to have a child very much.²¹

The family had to prevent the Princess's pleasant scheme of having a child with Mr Newman before it was too late, to protect the family reputation and to prevent the unwanted property transaction through marriage.

Likewise, the sexuality of weak-minded Rosa Bagster, who also successfully ran away with and married a man, was constantly subject to subtle and almost invisible vigilance. One Mr. Windus, a family friend, recollected that at a public dinner held at the Mansion House, he took his seat next to Rosa. He did not know her before, and he paid her the usual courtesy of inviting her to take wine. At that moment, 'she turned round and looked at me very full in the face'. In a few minutes, 'she said she was in love' and then told him that 'she was going to be married to Mr Jupp'. Mr Windus was astonished at the conduct of the granddaughter of the Lord Mayor, which he communicated to Crowder's family and the chaplain. He was not only concerned with just Rosa's breach of decorum at the dinner-table, but also anxious about her over-familiarity, her over-intimate conversation, and the lack of the sense of genteel distance which a girl of her class was expected to keep between herself and members of the other sex. Mr Windus, therefore, advised that 'she ought not be sent into company without being "fenced" in . . . by female friends on each side.'²² He clearly thought that the family should create a covert and discreet gender barrier and prohibit Rosa's uncontrolled association with men, especially on public occasions.

The breach of the code of behaviour of the lunatic in public

space posed serious problems and embarrassment for the family. Particularly, serious misconduct at church, one of the most important public spaces, embarrassed the family great deal.²³ The family of Lord Suffolk was so shocked when Princess Bariatinsky laughed, put out her tongue, and made faces at church, that they stopped allowing her to attend service.²⁴ The family of Solomon Cohen thought that his serious departure from a rule of Jewish religious ritual was 'the first positive indication of his insanity'. It is notable that the family thought this breach of public religious behaviour, which was in itself harmless (rinsing his mouth with water), was greater evidence of insanity, than the serious domestic violence threatened by him (putting his sister's baby upon the fire).²⁵

Likewise, the family of Rosa Bagster were gravely concerned with her behaviour on the street, as well as at the public dinner table. One thing which particularly annoyed the family was 'the crowd' in town. Miss Clayton, one of many governesses of Rosa, remembered that Rosa's violent and strange behaviour assembled a crowd at every public place they went to:

I accompanied, Mrs and Miss Bagster, in August last, on a tour to the West of England. . . . In the course of this tour, Miss Bagster conducted herself very violently; and at Lauceston, she tore her mother's bonnet, also Mrs. Horn's bonnet and dress, and threw the reticule, and her mother's watch, out of the carriage window. We were not got out of the town at the time, and a crowd assembled; . . . It was 9 o'clock when we got to Holdsworth, and it was past 11 before we could get her into the inn. Miss Bagster attempted to kick a witness, but was restrained by some persons in the crowd which had assembled. Miss Bagster laughed at the crowd, and asked what they were staring at her for. . . . When we were about to leave, a great crowd of persons had assembled to see her, in consequence of her conduct on the preceding evening. . . . [In Dover], She suddenly rushed upon her mother, tore her hair, and threw her shoes and other articles out of the window into the street. On the quays also she behaved and conducted herself in a most violent manner before all the spectators. . . . At New Romney, I believe, she behaved in a most childish manner, and the passengers laughed at her, and inquired if she was in her senses.²⁶

The governess was aware that outside the protected private space of the carriage and a room in the inn, there existed an open public space with curious people who would assemble into a crowd looking at and laughing at lunatics.

As is suggested in one passage in the quote above ('We were not got out of the town at the time . . .'), town was particularly full of such curious people. When John Brome insulted and struck women at York Place and Bond Street, he collected a crowd around him and Sir C. Aldis, his relative and medical attendant, had to get him into a cab and take him home.²⁷ The private space of a carriage or a cab was precarious, however. Princess Bariatinski was put into the carriage but 'laugh[ed] out of the windows in such a manner that people would frequently stop to look at her.'²⁸ Even the private house had windows to the world outside. Mrs Catherine Jennings, a lunatic widow with large property, lived in Windsor. When the castle was illuminated in honour of the marriage of Queen Victoria, she 'got out of bed, and remained an hour and a-half standing at the window looking into the street, causing a mob of 200 or 300 persons to assemble, with nothing on but her night chemise.'²⁹

When there was no attempt by the family to contain the insane behaviour within the private space and curb its exhibition, things might grow wild. Such was the case with Daniel Gundry, an insane gentleman of means living in Albany. When his wife, who had been continually abused by him since marriage, finally left him, he was entirely left on his own:

[He] sat upon the [horse] opposite the door for an hour and a quarter, making the most extraordinary gesticulations all the time. He collected a crowd of about 200 persons round him, and it was eventually found necessary to send for the police to disperse them. . . . Latterly, whenever he went out on horseback, he was followed by a mob calling after him, 'There goes mad Gundry.'³⁰

Unlike most people today, who, when passing by a lunatic on the street, try their best to ignore him or her or to conceal their curiosity, the mobs and crowds mentioned in the testimonies were highly and openly interested in watching lunatics. The family had to hide the lunatic from their curious eyes.

The crowd were, however, far from just curious or searching for entertainment of freak show.³¹ As the social history of 'mob' and popular movement has clarified, the crowd had their own sense of justice and morality and often acted accordingly. Especially when they believed that a wrongful confinement was going to take place, they frustrated the attempt. G.M. Burrows, a leading London alienist in the 1820s explained as follows:

It frequently happens, in removing a lunatic from one place to another, that he is very violent, or endeavours, by making artful appeals to those near him, to attract their attention, and raise a feeling to rescue him. In such a case, the populace are almost always sure to side with the lunatic, and sometimes liberate him.³²

It seems that Burrows frequently experienced the crowd's intervention. When keepers of his asylum tried to remove Edward Davies, a neurotic tea-merchant, from Furnival's Inn Coffee House to Davies's own house at the request of Davies's mother, the coach was stopped by people at the coffee house, and it was only by the production of a faked certificate of lunacy signed by Burrows that the coach could go on.³³ In *The Mysteries of the Madhouse*, an anonymous fiction published in 1847 which dealt with the wrongful confinement of a young gentleman, a very similar scene was depicted: a coach arrived at an inn; an appeal was made by the alleged lunatic to people around him or her; people assembled, involved themselves in the situation, and showed their readiness to rescue the alleged lunatic.³⁴ An alleged lunatic's appeal to strangers for help at public places and the intervention on behalf of the lunatic seems to have been a commonly held idea in the mental landscape of early nineteenth-century English people. From the viewpoint of the family, therefore, there existed at a public space the danger of the disruption and frustration of the control over the lunatic: from the lunatic's viewpoint, a public space meant a greater chance to escape the family's control with the aid of strangers. Perhaps the protesting Rosa Bagster might have been vaguely aware of the existence of this culture of public place, sensing that she could embarrass the family more effectively by carrying her struggle in public places with potential enemy against the family and potential allies with her.

As well as anonymous crowds on the street, familiar faces in neighbourhood seems to have been often dreaded by the family, who attempted to limit and control the lunatic's contact with neighbours. One tactic of avoiding neighbours and removing the patient is seen in account of Nathaniel Hastings Middleton, a London banker whose mother became insane in 1816.³⁵ When the news of the mother's mental breakdown came to Middleton, he was first optimistic and did not take the situation seriously. Before he actually saw her, he wrote that this mother would benefit from

living with his family with the children at his own house, offering kind hands of help to the afflicted mother:

the seeing and cohabiting with our darling children might successfully tend to stimulate her depressed sensibilities, and the known disposition of the two elder gentle creatures [his wife and himself], to sympathise with, and soothe those they see in affliction, will be pleasing, & comfortable to her.³⁶

The promised 'known disposition of the two elder gentle creatures', however, evaporated quickly as soon as he saw the actual state of the mother. Just after he saw her, Middleton suddenly changed his opinions, writing that no benefit could be expected from 'receiving her into our family, or even having her near us', since she was totally incapable of appreciating the tenderness and attention of his sympathetic and kind family.³⁷ The true motive of his was, no doubt, his fear of rumour among his neighbours. A few days later, he wrote as follows:

With respect to an asylum for my severely-visited parent, I conceive that [his house in] Brighton should be the *last* place proposed – she would not be there twenty-four hours, before, busy slander, ever mischievously inclined, would noise throughout the whole town, that Mrs Middleton, once so provident, and highly-gifted, was under surveillance & incompetent to the management of her own affairs, and thus a stigma would be thrown upon herself and family, and a publicity given to the occurrence which would aggravate our misfortunes, and render her return to the world, and to her friends, doubly difficult . . .³⁸

Instead, he proposed that the mother might be better placed in 'a small house in an open situation, on the sunny side of London, somewhere about Clapham or Stockwell'.³⁹ His fear of rumour and his preference for suburban anonymity made him give up living with and providing tender care to the mad mother. In this case, the power of rumour removed the patient away from the family of her immediate son to a private lodging in a comfortable but remote and anonymous place.

The Smith family near Birmingham reacted differently, but the fear of neighbours played no less significant a role in their strategy in coping with their weak-minded brother, George Smith. Isaac Smith, the father of George, was a wealthy farmer in the county of Stafford. George was born around 1785, and he had been feeble-minded from his early childhood. His parents treated him with

affection and tenderness, according to the lawyer for the plaintiff, 'as was often found where infirmities had fallen upon a poor child'. The mother, who had mainly taken care of him, died in 1807, and the father's death followed in 1812. After their death, the major duty of taking care of him fell upon the shoulders of Sarah, the eldest sister of the family.⁴⁰ Perhaps Sarah was the only member of the family whom the parents could ask to play the role of a full-time house-nurse for George. Many servants and ex-servants to the Smith family testified to the almost religious self-sacrifice of Sarah in taking care of George.⁴¹

There is no reason to cast cynical doubt onto the devotion of Sarah and tender care of the rest of the family. The problem was that all these acts of familial love, affection and tenderness went on behind a strictly closed door. Soon after the mother's death, the father moved the family to a new farm in Mucklestone Wood and kept George in a separate room in the house. The window of the room where he was lodged was literary bricked up, on the pretence that they found the light tended to irritate George and to throw him into fits. One of the purposes of their doing so was obviously to hide George from the sight of other people. George was hidden even from the sight of visitors to the house: although Martha Haskett described herself as having 'an intimate knowledge of Mr Smith's family for the last 30 years', she testified that 'she had never seen George but once in her life.'⁴² The Smith family's secrecy about George aroused curiosity and suspicion of people around, which in turn aggravated the family's nervous concern to hide him. Whether true or not, a newspaper article said that 'the brother and sister then spread a report that their house was haunted, in order to deter persons from visiting it.' Mary Hulme, the servant to the house, recalled that 'there was people (the Standwickses) always jawing her, and telling her to go to Mucklestone Wood to see the madman.'⁴³

The vicious circle of secrecy and suspicion culminated in the forceful raid on 25 January 1826 on the Smith house by two magistrates, who believed they were going to find flagellant and cruel abuse and neglect of an idiot.⁴⁴ The magistrates sent for John Garret, house surgeon to the Staffordshire County Lunatic Asylum, to which George was taken in the same evening.⁴⁵ Moreover, the magistrates later openly propagated what they saw at the house perhaps with great exaggeration, upon which William brought an

action against Broughton for having propagated calumnies. Broughton responded by prosecuting the family for cruelty to their brother. While these suits were pending, *Birmingham Journal*, a Whig-radical newspaper, published two articles which included a totally fictive account of cruelty of the family toward George. William brought another legal action for libel, this time against the proprietors of the paper. After a trial which involved contradicting testimony of major protagonists, William Smith won the case and the proprietors of *Birmingham Journal* were fined £400.⁴⁶

In this case, the influence of rumour among neighbours was crucial, both for the public authority and for the private family. As already noted, the family's secrecy fermented unfriendly curiosity and suspicion among neighbours. The counsel for the defendant argued that the magistrates took this rumour seriously – or, believed it before they examined the house.⁴⁷ When the magistrates arrived at the house, therefore, they treated the family members just as they did criminals, forbidding them to move and threatening the use of force.⁴⁸

Most importantly, there are some signs which seem to show that the Smith family themselves felt keenly awkward about the situation. The servant admitted that she had once told a lie and denied the existence of George in the house, because she wanted to keep out people's curiosity.⁴⁹ The testimonies of both the servant (on behalf of the plaintiff) and the magistrates (for the defendants) revealed that the brother initially did not tell the magistrates in a straightforward way that they kept an idiot in the house.⁵⁰ Any firm protest from the Smith family against the forceful intervention of the magistrates at the moment was conspicuously absent, as if they had committed a crime or had something to be hidden.⁵¹ Perhaps, at the bottom of their heart, the family was not absolutely sure about the propriety of taking care of George behind a closed door and bricked window of their own house.

The examples analyzed above are largely anecdotal, and do not lend themselves to definitive conclusions. Nevertheless, a few points seem to be worth making for future research and historiographical reflection. To begin with, it should be noted that the barrier the family tried to set up to enclose its insane member was under constant threat, not only from the inside, but also from the outside. Of course, it must never be easy to contain a mentally

diseased person within the private sphere and present an ordinary outlook (or its semblance) to the world, for the inability to behave in socially acceptable ways and to act an expected 'sick role' is one of the most common features of the disease. It does not seem appropriate, however, to assume that the difficulty *felt* and *experienced* by the family has been historically constant, being independent of cultural context. The intensity of the threat from outside, or the level of readiness of outsiders to intervene into the domestic realm over the issue of insanity, seems to differ among different cultures and different ages. A crowd assembling around a mental patient on the street is, for example, no longer a familiar part of urban landscape. In the early nineteenth century, the domestic regime was not only resisted from within by the lunatic, but also threatened from outside.

The role of public authorities in undermining domestic control of lunatics was ambiguous. In some cases, they forced their way into the closed door. The case of Brent Spencer, was a relatively straight-forward case of abuse at one's own house, with the all-too-familiar story of neglect, cruelty, and filth.⁵² The example of George Smith presents a more ambiguous case. The conduct of the magistrates was severely criticised by the counsel for the plaintiff: 'he [the counsel] could fearless[ly] assert their conduct on this occasion to have been indiscreet and improper'.⁵³ The legal power for county magistrates, or any public authority, to inspect a non-pauper lunatic in his or her private family or remove him or her from there was at best dubious.⁵⁴ The Englishman's castle was, at least in theory, legally guarded even when there was a lunatic in it. That does not mean, however, that there was no moral pressure on the family. The same counsel that criticized the magistrates did not think that the Smith family was entirely blameless: 'he was not there to say, that this family had acted wisely in not sending this poor creature so some great asylum, where he might always have had at hand the best medical aid.'⁵⁵

Moreover, Commission of Lunacy sometimes provided relatives outside the immediate family with a means to break the domestic barrier. Anyone could petition to the Lord Chancellor for a Commission of Lunacy, although notice had to be given to spouse of the alleged lunatic if he or she was married.⁵⁶ While the family could use the state machinery to control the lunatic, that very machinery could itself be used to frustrate their interest.

There were many cases in which relatives and 'friends' outside the direct family asked for a Commission of Lunacy, to break the domestic barrier set up by the family to control the lunatic.⁵⁷ If a relative outside the immediate family was not happy at the domestic situation of his relative whose sanity was questionable, he could ask for a Commission of Lunacy to effect a drastic change in the situation so that he would benefit. The 'benefit' could mean various things: effecting direct financial gain, preventing the family reputation from being tarnished, or rescuing one's daughter from an unsuccessful marriage.⁵⁸ The cases of Robert Clement and J.P. Robinson, two cases involving rich old men whose property transactions were controlled by their wives, exemplified the private motivation of petitioners to break into the domestic barriers. The nephews of J.P. Robinson asked for the Commission of Lunacy in order to 'protect his property' and delivered barely concealed criticism against his wife for exercising undue influence on the matter of the old man's finance and property transaction.⁵⁹ In Robert Clement's case, the claim of the petitioner was that if Mr. Clement had remained capable of managing his own affairs, he would have appointed the petitioner's son as a partner in his bank. This rather shaky petition undermined all efforts of Mrs Clement to keep the lunacy of her husband within the private sphere and to present a 'normal' outlook to the world of his business, by tutoring him to sign a deed, cheque, etc.⁶⁰ Moreover, from the early 1830s, under the lead of Henry Brougham, it was designed to make it easy for people to make use of the Commission of Lunacy, by simplifying the procedure and lowering the cost.⁶¹ The domestic barrier guarding the lunatic within the family walls was thus made more vulnerable to the extra-familial intervention.

Although there is no case in which unrelated neighbours initiated a commission, madness seems to have offered neighbours a legitimate entrée into the domestic realm. Finding or inventing a lunatic in another person's family effaced the boundary between the private and public realms and made the usually closed sphere an open one. This is exemplified in the testimony of one Mr Edward Harris, a highly respected Quaker living next door but one to George Davenport, whose religious zeal was regarded as excessive by his wife's family:

It was not until I heard that the [psychiatric] keeper had been sent here that I offered my advice and assistance to Mrs. Davenport; but since then I have been in the daily habit of coming in and sitting with him.⁶²

Apparently, the attendance of a keeper to George Davenport, indicating the existence of a lunatic, acted as a license for him to intervene. Harris felt entitled to meddle into the personal affairs of his neighbour, only when he was proven to be a lunatic.

Most importantly, the vulnerability of the domestic psychiatric regime and the threat from outside seem to have been internalized by the family member themselves. This is exemplified in the Commission of Lunacy for Major Andrew Campbell in 1842. Major Campbell suffered from a delusion that there were galvanic wire figures 'which twitched his face into various contortions, and compel him to swear against his will.' He was kept in the notorious Whitmore House at Hoxton, which seems to have aggravated his disease. The major's half-brother was responsible for the choice of the site of his care, and he rather apologetically explained his motive for putting his brother in such a madhouse:

Only that witness and the Major's family were on bad terms, he would not have sent him to Whitmore-house, but would have taken a house and put him under the surveillance of two keepers, who should have complied with his whims; but he did not do so for fear his motives might be misrepresented.⁶³

The crucial difference between a house with two keepers and Whitmore House was that the former was an essentially private and semi-domestic dealing, while the latter was sanctioned by public authority, in the form of two medical certificates and quarterly visits by the Metropolitan Commissioners in Lunacy. These procedures made the option of the Whitmore House a more public way of dealing, and reduced the chance of his being 'misrepresented'. Being without any sort of inspection by public authority, the private lodging, on the other hand, had the ample room for suspicion and doubt and perhaps smelled of secrecy and abuse. Here, the brother's fear of other people's suspicion and misrepresentation removed the patient from the private lodging with better care to the publicly sanctioned place of detention with inferior quality of care. Here, the fear of suspicion, doubt, and malicious rumour disfranchised the private sphere as the proper place to care

for the patient, and the public authority provided a safeguard against the suspicion.

Although this chapter has made only tentative suggestions about the role of the public sphere in moulding the family's strategy in coping with its insane member, I hope I have thrown some light on the complex relationship between the psychiatric private and public spheres – the family, relatives, neighbours, crowd on the street, public authority, and so on. The family's strategy to contain and control the lunatic was constantly undermined by external factors. The family with a lunatic was always aware and afraid of the external forces hostile to them, penetrating through the domestic barrier, and frustrating their attempt to contain and control the lunatic. The records of Commissions of Lunacy, disclose numerous attempts by 'designing' persons to take advantage of the lunatic, outwitting the guarding family. When the lunatic behaved strangely on the street and started a struggle with the family, he or she assembled a curious crowd, who sometimes took the side of the lunatic. Gossip in the neighbourhood about a lunatic in the attic, or the 'politics of rumour' tormented the family, and the family suffered from their lack of confidence in the private dealing of their own lunatic family member. There was a constant erosion of the domestic psychiatric regime. An alleged lunatic in a family was, thus, by his or her very existence, constantly threatening to transform the domestic sphere of the family into an open field of contention.