

History Armagh



Special Edition : St. Luke's Hospital

Contents

“Confinement rather than cure” 4
by Marjorie Halligan.

The first asylum minute book 9
by Sean Barden

Castledillion Hospital Farm 15
by Kevin Quinn

World War Two 17
by Mary McVeigh

First Citizen’s’ charity work went un-rewarded 19
by Eric Villiers

Army and police were ‘blacklegs’ in 1918 strike 20
by Mary McVeigh

Give up your politics or get out! 22
by Mary McVeigh

Armagh District Lunatic Asylum 24
by Kevin Quinn

Moral Management to Medicalisation 27
by Kevin Quinn

From Asylum to Hospital 1886-96 29
by Kevin Quinn

Extracts from Annual Reports 31
by Kevin Quinn

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“Confinement rather than cure”

Mrs M. McTier on asylums, 1789.

by Marjorie Halligan.

In 1789, Mrs McTier (1742-1837) made this pertinent remark about a husband's motive for committing his wife to Downpatrick private asylum in a letter to her brother, Dr. William Drennan (1754-1820).¹ She was dubious about the sincerity of the husband's motives. Her concern is just one example of the criticism that was levelled at private asylums at the end of the eighteenth century.

Earlier, Jonathan Swift [1667-1750] contributed to the debate in the “Digression on Madness” in his satire, *A Tale of a Tub* [1710]. This gives a dramatic description of what he called “Madness in a Commonwealth”. The mad were people suffering from a “Phrenzy”[sic], for which they might be “tied fast” and might “incur ... Whips and Chains, and dark Chambers”, in the “Academy of Modern Bedlam” [Williams, edit. 102, 105]. It is unsurprising that Joseph Robins drew heavily on the works and life of Swift to illustrate eighteenth century madness, in his book, *Fools & Mad A History of the Insane in Ireland*. He noted that Swift had been a governor [1714] of Bethlem [Bedlam] the London Hospital for the insane. The “Fools and Mad” in his title comes from *Verses on the Death of Dr Swift*. In them Swift promised to leave money towards the building of a hospital for the “Fools and Mad”. This promise was honoured by a bequest in his will whereby he left £11,000 towards the building of a hospi-

tal for the insane in Dublin. St. Patrick's Hospital, Dublin, which opened in 1757 to cater for insane pauper patients, was the first hospital of its kind in Ireland. It was funded by Swift's bequest and a grant from the Irish Parliament. Swift's aim in providing the hospital was to provide a refuge for the insane thus saving them from the reach of the Vagrancy Laws [Robins 143]. McTier highlighted



Dean Jonathan Swift (1667 - 1750)

the sterility of confinement without cure in the treatment of insanity. Between them they provide a useful focus for examining the lunacy laws which created our asylum system.

Legal antecedents

Lunacy laws did not begin with the eighteenth century Vagrancy Laws. As far back as the Brehon Laws which dated from before the birth of Christ the care of the insane had been codified. These laws

which remained in force until Elizabethan times recognised many grades of mental defect based on the contribution the insane could make to society. Protection of their property by their family or tribe reflected these distinctions. When their behaviour became unruly fettering was allowed [Fleetwood, 8-10]. English laws were also specific when it came to dealing with the property of the insane. In a law of 1324, Edward II (1284-1327) established that the property of all lunatics was protected by the crown [Robins, 152]. By the eighteenth century the court of chancery was responsible for this care under the direction of the Lord Chancellor. So, legal protection was established for the insane with property, those without were in the care of their families and at the mercy of society.

Children of a Lesser God

By the eighteenth century society was less tolerant with the irrational behaviour of the insane. For most families this irrationality caused huge problems. It made many seek cures at centres of pilgrimage. The most famous of these was in Glannagalt (the glen of the mad) in County Kerry famous for the healing properties of its wells and cresses. There were several similar places of pilgrimage in County Donegal. The insane were left in these places to return home when cured. Sadly many were just left [Robins 12]. Abandonment was widespread throughout Ireland. These circumstances created the constituency of vagrants the state began to control by law.

Vagrancy Acts

Between 1700 and 1834, twenty-eight statutes dealing with vagrancy brought vagrant lunatics within the criminal law. The Act of 1714 gave magistrates

or Grand Juries the right to detain wandering lunatics. Local prisons, Bridewells or Houses of Correction were the only centres for such detention. The increased number of lunatics this added to the prison population led to the Prison Acts of 1763 which provided for the separation of the insane from other prisoners. Prison reports after 1780 showed that this directive was ignored. Jeremiah Fitzpatrick (d 1810), a Dublin physician continued to lobby for the separation of the insane. His efforts led to the Act of 1786 which created an inspector-general for prisons. It had little beneficial effect. They were still confined as criminals. By the Prisons Act of 1787, Grand Juries were allowed to establish lunatic wards in Houses of Industry which were to be inspected by the inspector-general of prisons

Poor Laws

The Poor Laws provided a relatively softer option to prisons for the vagrant insane. In 1703, an enabling act of the Irish Parliament created the Dublin workhouse for healthy paupers. Its remit was extended in 1708 with the creation of cells for violent lunatics. Their number was increased to forty in 1727 [Fleetwood 95]. In a variation of this theme a statute of 1772 allowed the building of Houses of Industry in every county to deal with its undeserving poor. The insane were eventually admitted to them in 1808. The House of Industry in Dublin was making special provision for seventy-six lunatics all of whom required confinement and coercion by 1820 [Robins 35].

McTier, again

Against these centres of confinement St. Patrick's Hospital for insane paupers in Dublin stands out as a specific hospital for the insane. Its example was followed by the creation of private asylums in Cork, Carlow and Downpatrick catering mainly for the middle class. An Act of 1774 provided for their registration and regulation. Despite this regulation it is obvious from the correspondence

between McTier and her younger brother, Drennan that all was not well in Downpatrick Asylum and St. Patrick's hospital. Their correspondence which also included her husband, Samuel McTier, covered the years 1775 to 1820 and ran to over 1,400 letters [Chart edit.vii]. In a chatty letter of spring, 1789, McTier describes to her brother the woeful plight of the once beautiful "Mrs F". "Mrs F. evidently mad" had been found wandering the streets of Belfast having escaped Downpatrick asylum where she had been placed by her husband who had made it known that "she was gone to a convent" [Chart, 49]. Both her arms and legs bore the marks of fetters. The lady had become deranged as a result of an illicit love affair hence her removal to Downpatrick asylum by her husband. McTier's comments have already been noted. Drennan, himself, was equally scathing about asylum care as can be seen from a letter to his brother-in-law of March, 1794. He wrote, "As to taking care of some person of unsound mind I could tell you such stories as would shock you both in Swift's Hospital and in the patient's own *houses*" [Chart, 190]. It should be noted that Drennan's medical expertise was as an "accoucheur" [Chart viii]. By 1804, there were about two hundred places in private institutions. These comments pinpoint the problems in existing asylums. McTier's comments are the more prescient.

Towards the Culture of Cure: The Richmond Asylum and Moral Management

Confinement and cure were to coalesce in the Richmond Asylum which opened in Dublin, in 1815. The asylum was built with a government grant to the Dublin House of Industry in 1810, to establish a separate asylum for lunatics from all over Ireland in order to ease the pressure on existing public institutions. It was named after the then Lord Lieutenant. There is a link with Armagh Asylum as both were built to the design of Francis Johnston (1760-1829). It was originally intended for two hundred and eighteen patients with forty-two places for those able to

pay. Its first physician, Alexander Jackson (1767-1848) believed in the treatment which became known as Moral Management and his use of it in the Richmond raised the profile of this philosophy. Markus Reuber describes this philosophy succinctly in his article on Moral Management as a treatment for insanity in the nineteenth century. He refers to the philosophers like Joseph Locke (1632-1704) and Jeremy Bentham (1748-1832) and to practitioners in the field of mental care such as William Tuke of York, Philippe Pinel (1745-1826) of Paris and William Saunders Hallaran (1765-1825) of Cork; all of whom contributed to the growth of this philosophy. The treatment focused on control of the individual patient by psychological means that could lead to a normalization of his or her behaviour. Control was maintained by constant observation of this behaviour, "The Unseen Eye" as it was sometimes known. The design of asylums was specific to making this observation possible. The asylum environment should also provide physical comfort and opportunities for what we would call occupational therapy. Such treatment allowed for the recovery of some patients and eased the lot of the chronic insane [Reuber 208-234]. The Richmond Asylum quickly became overcrowded showing how acute was the need for more asylums in Ireland.

A Narrow Escape

Events in London were to focus attention on this acute need. James Hadfield's attempted assassination of George III (1760-1820) in 1800, failed by the narrowest of margins. The legal consequences of Hadfield's court case were significant. He was acquitted on the grounds of insanity and confined in Bedlam. The resultant Criminal Lunatics Act of May, 1800 made provision for the safe custody of insane persons charged with offences and allowed magistrates to commit a dangerous person suspected of being insane to similar custody. [Finnane 89]. It did not apply to Ireland but it did extend the boundary of criminal lunacy with its consequences for the provision of secure accommodation. It was felt

that Ireland severely lacked sufficient accommodation. This lack prompted Sir Robert Peel (1788-1850) in his role as Chief Secretary for Ireland (1812-1818) to investigate the need for additional regional provision for the mentally ill (Reuber, 215). His select committee's recommendations were incorporated into the legislation which was passed between 1817 and 1826. From this came the Lunatic Asylums (Ireland) Act of 1821 which created the public asylum system, of which the first was Armagh Asylum opened in 1825. Moral management had the opportunity to flourish. In an article in the *Newry Commercial Telegraph* of February 1828, Thomas Jackson, the first Moral Manager of Armagh asylum and a staunch believer in the philosophy was commended on the particular attention he paid to finding suitable employment for patients.

The System in Practice

Within ten years, Armagh was followed by seven further asylums in Limerick, Belfast, Londonderry, Carlow, Portlaoise, Clonmel and Waterford at the cost of £245, 000. Armagh provided 162 beds in 1871. By 1896, the number of beds had increased to 408 [Finnane Appendix, table E]. Elizabeth Malcolm points out that in the latter half of the nineteenth century, Ireland with a declining population saw the per capita admission rates to public asylums increase by five hundred per cent [177]. The asylum population was smaller than that of the local workhouse which had 1,034 inmates in 1871 and 1,152 inmates in 1880 [McCourt, 78-81], however, the important difference between the two institutions was that most inmates were in asylums by involuntary admission. Terms of admission and means of admission were controlled by the law. Certain events were to have a dramatic effect on the terms of admission.

The Murder of Nathaniel Sneyd

Deputy Director of the Bank of Ireland. Nathaniel Sneyd was murdered on July

29, 1833 outside the Bank of Ireland on College Green by John Mason, who was described as a lunatic. Another report described him as having been refused admittance to the Richmond Asylum [Robins, 144]. Under the terms of the 1821 legislation insane criminals could be acquitted in court but detained in indefinite custody in an asylum "at the pleasure" of the Lord Lieutenant. The outcry about Sneyd's murder led to demands for more specific terms for the detention of dangerous lunatics. Another important factor was that as yet asylums were few on the ground. The Dangerous Lunatics (Ireland) Act, 1838, allowed the committal to gaol of any person considered to be a dangerous lunatic or dangerous idiot who was found acting in an insane way and intent on committing a crime. Subsequently this same person could be transferred to an asylum if such accommodation was available. The committal was made on the authority of two justices of the peace who had the option of using medical evidence to inform their decision. The Lord Lieutenant still retained the power of unlimited detention at his pleasure. This Act gave rise to criticism of its admission criteria and as a result of this it was amended in 1843. The amendment required at least one credible witness to give evidence on oath about the degree of derangement and criminal intent of any person for whom committal was sought [Robins 145]. The boundaries of criminal lunacy had, however, been extended in Ireland and were to remain so until the twentieth century.

Sir Robert Peel, again

Peel once more played a pivotal part in influencing legislation, if inadvertently. In January, 1843, Daniel McNaughton shot Edward Drummond, Peel's private secretary in Whitehall. He had intended to kill Peel. His trial and the special verdict declaring him insane was a sensation. The *Sunday Times* of March 12th 1843 wanted the gallows for McNaughton. McNaughton was committed to Bedlam [Roberts, 4.7]. The House of Lords judgement as a result of this

case became known as the McNaughton Rules. They were to have significance in Ireland for legal judgements in crimes involving insanity. They stated that an accused, even if insane was punishable if he knew what he did was contrary to the law. If a plea of insanity were to succeed the accused person had to be shown to have been insane at the time of the offence [Robins 148]. The trial and its aftermath influenced the Central Criminal Lunatic Asylum (Ireland) Acts (1845, 1846) where provision was made for the creation of a central asylum for insane persons charged with offences in Ireland. In 1850, the Central Mental Hospital at Dundrum was opened. Here again Ireland took the lead, Dundrum was the first criminal lunatic asylum in the British Isles. The legislation creating Dundrum, however, made no differentiation in admission criteria between minor and major offences; in theory anyone found to be criminally insane should have been admitted. The Inspectors of Lunacy decided that for referral to Dundrum a lunatic had to have been charged with offences involving punishment by death, transportation or lengthy imprisonment [Robins 150, 151]. Since 1843 criminal lunacy covered a wide field and often the legislation was misapplied. In one attempt to rectify this, the 1867 Lunacy (Ireland) Act made it mandatory rather than optional to seek medical opinion prior to committal to a district asylum for anyone being committed as a dangerous lunatic. Yet, in Armagh Asylum, in 1868 almost ninety per cent of all admissions both male and female were committed as dangerous lunatics. As Malcolm pointed out the public asylums answered a social need. Most committals were initiated by families. It was less shaming than the stigma of workhouse entry and easier to report being the victim of unruly behaviour to the police and begin the process that would lead to committal of the unruly one [Finnane 162, 163; Malcolm 178]. The newly created Royal Irish Constabulary (1838) played a pivotal role in the committal procedure.

“The poor lunatic when left to himself...”

This was what Jackson in Armagh hoped would not happen to anyone admitted in 1825 to Armagh Asylum [McClelland, 108]. This was before asylum commitments became skewed by the extension of criminal lunacy laws. The terms of admission he might have applied under the 1821 Act were not fully clarified until the Privy Council rules of 1843 were issued. In these, application for admission to a district asylum needed to be accompanied by a medical certificate of insanity and a statement from the next of kin confirming poverty. The next of kin also had to enter into a bond undertaking to remove the patient from the asylum when requested. These applications were considered by the physician and manager of the asylum and presented to the board for approval (Kelly 3). The physician on the staff of the asylum was appointed in a visiting capacity only [Robins, 93]. He cared for the moral and medical welfare of the patient. This necessitated his attendance at the asylum on at least three days a week or on every day when there were more than 250 patients. The physicians could admit patients in cases of emergency and were to advise the governors when patients could be discharged. This is an implication that the actual treatment of a patient was a medical responsibility, not necessarily that of a non-medical manager. By the 1850s non-medical managers were fewer.

The system was centralised by the Act of 1845 which created a separate Inspectorate of Lunacy with two inspectors appointed. They had the duty of inspecting and reporting on asylums and other institutions caring for lunatics. They operated from a separate lunacy office in Dublin

Castle. The Lunatic Asylums (Ireland) Act of 1875 admitted paying patients to district asylums [Kelly, 5]. The same act allowed the transfer from an asylum to a workhouse of any chronic lunatic who was not dangerous and had been certified by the resident medical superintendant as fit to be removed. This transfer had to be approved by the Poor Law Guardians and the local Government Board. Interestingly the transferred lunatic would remain on the asylum books as a patient and the asylum would be responsible for his or her expenses. This contradicted previous policy which had favoured the transfer of patients from workhouses to asylums and suggests a weakening in the resolve to find specialist treatment. The advent of paying patients in public



Mrs McTier (1742-1837)

institutions is also suggestive of a system that was in financial difficulties. Its costs often exceeded what ratepayers were prepared to pay.

The Rates

Ratepayers came into their own with the passing of the Local Government Act of 1898, which transferred the care for insane poor as set out in the various Lunacy

Acts to the newly elected county councils. The central Board of Control with authority for planning and constructing asylums was abolished. County councils had the freedom to establish auxiliary lunatic asylums in selected workhouse premises for the care of chronic lunatics who did not require special care or treatment. Each asylum was free to be draft its own rules, although the Lord Lieutenant's approval was necessary. The local boards of governors were to be replaced by committees appointed by the council. The county councils might appoint and remove all officers of the asylum and regulate its expenditure. The financing of this new system put the onus of finding the money on the ratepayer. The various grants-in-aid of the rates ceased. Since 1874, the government had made a grant of four shillings per head per week for the maintenance of lunatics in public asylums in Britain and Ireland. Instead the Treasury would pay a sum equal to the proceeds of the previous year's local licence dues together with a fixed grant of £79,000 into a local taxation (Ireland) account. The Lord Lieutenant authorised the payments to local authorities from this account and when demands exceeded this annual income, capitation grants were reduced thus making the ratepayers liable to meet the total cost above a certain level of spending. All commentators noted that the newly elected committees were as frugal as the boards of governors in their provisions to the asylums.

Answering McTier

Since Swift's initiative a whole system of asylums both public and private had evolved. Private asylums, too, became more strictly regulated. In 1842, the Private Lunatic Asylums (Ireland) Act required private asylums to be licensed on an annual basis. Patients could only be detained following receipt of a

certificate signed by two doctors. From this act onwards private asylums were subject to visits from the inspectors of lunacy. The 1890 Lunacy Act stipulated that private patients apart from chancery lunatics should not be detained without a judicial order from a justice of the peace specialising in such "reception orders". It was a major change aimed at protecting individual patients which would have gladdened McTier's heart. It also, however, protected the private asylum from legal action by patients and their families. The same law restricted the number of licences allowed for new private asylums but allowed the building of private wards in existing public asylums. The boarding out of pauper lunatics to family and friends was approved by this law. Boarding out like this had been standard practice at Gheel in Belgium before the 1800s [McNally 15]. The Inspectorate of Lunacy brought some cohesion to both sectors of the asylum system, as did the mixing of private and

public institutions, boarding-out pointed the way forward; however, after the early years of moral management William Ll Parry-Jones described the system in the 1870s[408] as becoming reduced to benign custodialism which I think would have disappointed McTier,

Acknowledgements

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¹ Drennan is better known for his association with the United Irishmen, 1791-1794. McTier is less well known for her voluntary work which would lead eventually to the creation of Belfast Maternity Hospital.



St. Luke's - the entrance to the original building

The first asylum minute book

by Sean Barden

Introduction

The asylum's early years are revealed here from minutes of the monthly meetings of the Board of Directors. The minute book begins in December 1824 and ends in December 1848 cataloguing a period of twenty-four years.¹ Using a single and, one must suspect, partial source may not be the most objective approach but the minutes offer an interesting view into the administration of an early nineteenth century Irish asylum. It is also presented in a consistent manner over the period allowing a running narrative to be easily extracted.

The Directors

Until October 1827 the Board is described in the minute book as the Board of Local Commissioners but from November that year they were known as the Board of Directors. For consistency I will refer to them the Board.

The men whose names appear in the minute book lived locally and were dominated by Church of Ireland clergy. Many of them sat on other committees and most would have known each other socially. Perhaps from its inception and certainly from 1844 each of the counties comprising Armagh District were also represented by two members on the board. There is no record of any of these eight men ever attending a meeting, See illustration for their names.

Arthur Irwin Kelly (1772-1841)² was chairman of the first meeting; he was the Church of Ireland Primate's agent and a prominent figure in local government. He had been a Burgess of Armagh Borough since 1805 in which year he was also appointed Sovereign of the city.³

John Winder (1781-1828)⁴ was a retired captain in the Royal Artillery and William Algeo was a local landowner, the latter's residence at the Pavilion had pleasure grounds that virtually marched up to the walls of the asylum. Robert Thornton (d.1850)⁵ was another Armagh landowner, indeed

the ground on which the asylum stood had been Thornton's. This is probably one of the reasons Algeo and Thornton were appointed. John Waugh appears in contemporary leases, usually described as "merchant of Armagh" and in one case as "gentlemen".⁶ Pigot's directory of 1824 records him as Gaol Inspector in Armagh. His name disappears from the minute book after October 1830. William Paton was magistrate, treasurer of Armagh Savings Bank and sometime Chairman of Armagh Borough Commissioners.⁷ When the workhouse was established Paton was one of the Poor Law Guardians who administered it and he was the last person to hold the post of Sovereign of Armagh. George Robinson had interests in the well-being and improvement of his native city, he and Paton were Mall Trustees. They were also associated with Armagh's concert Hall, known as the Tontine rooms and Armagh Agricultural Association, he was honorary secretary of both and Paton was treasurer. Robinson was also one of the original trustees and Macan's asylum for the blind in Armagh.⁸

The church of Ireland was strongly represented during this period and seven out of sixteen men who attended meetings

were clergy. Rev. Samuel Blacker (c.1772-1849) was rector of Tynan at this time and is one of the first Board. He attended many meetings during the early years but his name does not appear after 1835. The Dean of Armagh the Rev James Edward Jackson (c.1778-1841) also attended regularly usually attending six or more meetings per year. Rev Charles Richard Elrington (1787-1850) became rector of Armagh on Jackson's death and replaced him on the Board although he did not attend quite as often. Although the asylum was built in Corporation townland which is in Armagh parish, a short step across the river that bounded the original premises is Mullynure townland in Grange parish. The modern establishment straddles both parishes. The Perpetual Curate of Grange, Rev. Thomas Twigg (c.1786-1872) sat for a short period on the Board from 1832-34. He was succeeded in Grange and on the Board by the Rev Cornelius William Lyne (1802-1839).⁹ The Rev. James Jones (1791-1871) first joined the Board in 1832 when he was rector of Derynoose.¹⁰ In 1840 he was moved to Kilmore parish but continued to attend regularly throughout the period covered in the minute book. The Church of Ireland Primate Lord John George Beresford came on average to three meetings annually but there were exceptions, in 1838 he attended seven times. No clergy of other Protestant denominations attended meetings but the Roman Catholic Archbishop of Armagh the Most Rev Dr Crolly (1780-1849) attended on average three meetings per year from 1845.

Attendance and absence

To investigate patterns of attendance, data from a nineteen year period (1829-48) was analysed.

The most noticeable thing that emerges is that not all members of the Board attended meetings regularly and it was not uncommon to have only two or three members at a meeting. There are several instances where a single member of the Board was in attendance. Some members

Number and Names of the Governors, the Counties for which appointed, and Attendance during the Five Years ended 31 December 1844.

No.	Name and Counties for which appointed.	Date of Appointment.	Number of Meetings attended in the Five Years ended 31 Dec. 1844.
18	The Lord Primate - " " "	not stated -	10
	W. W. Algeo, Esq. - " " "		13
	R. J. Thornton, Esq. - " " "		33
	Rev. Dr. Blacker - " " "		38
	Rev. James Jones - " " "	13 Dec. 1841	23
	Rev. Dr. Elrington - " " "	13 " "	4
	Sir James M. Strevens - " " "	13 " "	6
	Sir George Molyneux - " " "	13 " "	40
	William Paton, Esq. - " Armagh	24 " 1844	
	Viccount Ashurst - " " "	24 " "	
	Sir W. Verner - " " "	24 " "	
	E. P. Shicley, Esq. - " Monaghan	24 " "	
	C. P. Leslie, Esq. - " " "	24 " "	
	Sir A. B. Brooke - " Fermanagh	24 " "	
	Captain Morcyn Archdall - " " "	24 " "	
	Hon. J. P. Maxwell - " Cavan	24 " "	
	John Young, Esq. - " " "	24 " "	
	Archbishop Crolly - " " "	4 Oct. 1845	4

List showing Board members from Abstract of returns of District Lunatic Asylums, Ireland, 1846

attended only a fraction of the 230 or so meetings analysed while others were quite diligent in their duty. Jones, Thornton, Algeo, Kelly and Paton are the names that appear most often. It is almost certain that Paton took over from Kelly as Asylum Commissioner when he took on Kelly's role as the Primate's agent. This would mean that the Primate's agent attended more meetings by far than any one else, 174 out of total of 228. On average Kelly attended eight meetings a year while Paton managed ten. Although only on the Board for a period of three years the Rev Twigg attended on average nine meetings annually. On the other hand some members of the local gentry class attended rarely, for instance James Stronge Bart. attended just eight meetings over the seven-year period. While Sir George Molyneux made it to the same number over a four-year period. As stated above county representatives attended no meetings.

Getting established

The first few meetings were busy ones, Thomas Jackson was appointed manager and a memorial was sent to the Lord-Lieutenant asking for £2,000 per annum to fund the institution. The first patients were admitted in July 1825 and by the end of September moves were made to transfer insane prisoners from the various jails. It took some time for the finishing touches to be carried out to the building and it was November before the contractor was congratulated on completing the boundary wall and porter's lodge. It was at this meeting also that it was noted that the windows had been secured and clothing for patients and servants ordered.

The building

The formal handing over of the premises from architect to Board was accomplished at the first meeting in December 1824 when it was noted that, "We certify that William Murray, architect has this day given us possession of the Armagh District Lunatic Asylum." The newly finished building must have appeared quite austere with its newly plastered but empty interior awaiting occupation. To air the building, "10

ton of coal be ordered for this purpose immediately from Mr John Crothers of Blackwatertown".

It was not until September 1835 that the open coal fires were replaced by a more efficient heating system. At that meeting "the manager be directed to ascertain if the asylum could be heated with warm water and what would likely be the expense". It seems not all of the building benefited immediately from the new system for three years later in December 1838 Mr Gardner of Armagh Foundry was erecting the necessary apparatus to supply hot water to "two of the male divisions". Although the hot water system was well established by the 1840's the long narrow corridors were still lit by candlelight and it was not until June 1844 "that the manager be instructed to apply to the gas company to ascertain the terms on which gas would be conveyed to the asylum, and also the probable expense of lighting the institution." An application to the Lord-Lieutenant for £141 to complete the work was made at special meeting in July but it was January 1846 before the work was completed.

There is occasional mention of repairs and maintenance to the building for instance, in October 1831 the flooring in some sleeping rooms needed replaced because it had become rotten. The domed Coppola above the entrance needed attention in September 1836 because every time it rained water leaked in and damaged the ceiling.

Maintenance

The supply of day-to-day provisions such as candles, coal and milk were put out to tender each year. It was usually Armagh business people and merchants who profited. Supplies were purchased in bulk, for instance in March 1837 the Board ordered five tons of oatmeal. It was usually the lowest price that secured the contract and it is intriguing to see in 1832 that supplies of milk and buttermilk were being bought by the asylum from none other than Robert Thornton one of the Board of Directors. It is doubtful if this was seen at the time as conflict of interest but the following year he lost the contract

to one Ann Murray.

The 1832 suppliers are as follows. R. I. Thornton for new milk and buttermilk, Robert Cochran for soap and candles, James Warmoll for beef and Robert Brians for bread.

The asylum's water supply came up for discussion from time to time but it was not until May 1832 that it was decided to sink a well and install a pump for drinking water. It is assumed the water for washing and culinary purposes came from Ballynahone River which flowed through the grounds though the Scotch Street or "Dirty River" also flowed into the property and followed a subterranean route until its exit. When the Board received news in June 1839 that a source of pollution in the form of a distillery was to be erected on the banks of the river somewhere upstream the manager was directed to write to the Lord-Lieutenant on the subject. He was also ordered to inform those erecting the building that he had done so and this seems to have dissuaded them from going ahead with the development for I have found no record of a distillery anywhere along the Ballynahone River.¹¹ Later the Board was powerless to prevent another development close to the river and in September 1847 it was reported that "Much inconvenience has arisen from the deficient supply of spring water, and the foulness of the river water occasioned by the sewage of the Poor House running into the latter and rendering it totally unfit for culinary purposes."

Catchment and jails

The asylum's catchment area called the Armagh District covered five counties, Tyrone, Donegal, Armagh, Monaghan, and Fermanagh. Each county's quota of patients had been calculated on their population. Tyrone was allowed 27 patients, Donegal 26, Armagh 20, Monaghan 18, and Fermanagh 13. The District was altered in 1827 when Tyrone and Donegal were "severed and separated from the said district of the Armagh asylum" and county Cavan added.

As well as admitting patients on the proposal of their families and local doctors the other principal hope for the asylum was that it would empty the jails of what

was termed “dangerous lunatics”. During June and July 1825 the Jackson visited jails throughout the District and brought back the disappointing news that if all the insane prisoners, 68 in total, were admitted then the asylum would be overwhelmed. He suggested only prisoners thought to be curable ought to come to Armagh. This inevitably meant that people who should never have been incarcerated but had nowhere else to go, were left to languish in the county jails. We see an example of this in April 1826 when an application was made on behalf of a prisoner lately taken into Monaghan jail. She was not considered suitable for the asylum because “she was 60 years of age and had been 40 years ill”. It was rare that insane convicts would be in the first instance sent to the asylum and several requests appear over the years on behalf of prisoners held in jails asking that they be transferred.¹² In October 1832 the manager was instructed to write to the Inspectors of Prisons in the District asking that, “they will prevent as much as possible the reception of the insane persons to the prisons as it is calculated to protract recovery.”

Another more practical point that concerned the Board in the early days was the lack of security in the asylum; “the only fastening to the cell doors are spring locks of the most inferior description and by no means adapted to resist even the moderate effort of a maniac” and the windows of sleeping rooms on the upper story had no security whatever.¹³ There are occasional references to patients trying to escape from the asylum for instance June 1837 a “criminal lunatic” who had recovered and was awaiting news of his future managed to climb from his sleeping room window during the night. Although the escape was reported it is not mentioned in the minutes if the man was ever recaptured.

Staff and Servants

The recruitment of staff took place soon after the first meeting. Jackson was requested to draw up a list of persons he thought would be suitable for the posts of Porter, Gardener, Keepers, Nurses, Cook, Laundress and Kitchen Maid. It is interesting looking at the salaries of the employees and no surprise that Mr and Mrs Jackson

as Manager and Matron were granted the largest remuneration, having a combined annual income of £200 with “sufficient quantity of coal and candles”. The physician was paid £80 a year and the apothecary £30 but it must be remembered these two posts were held by local professionals who only visited the asylum two days a week. The Board was keen to ensure their visits should be regular as laid down in the rules and in November 1826 it was resolved that the apothecary shall attend “on the stated days” and Mr Jackson shall report to the Board on his attendance. Dr Wilson visiting physician at the asylum resigned from his post at the beginning of 1828, no reason was given but he must have left on good terms for the Board resolved to thank him for his attention to duties. Dr William Lodge Kidd took his place.

Samuel Walker and his wife were appointed gate keeper and gardener and paid 20 guineas per year, the hall porter was paid £10 and two male keepers the same sum. Two female nurses were paid six guineas per year and four female assistant nurses paid four guineas a year. The cook received an annual salary of £10 and the kitchen maid, four guineas. All these servants lived on the premises and their clothes and meals were included as part of their remuneration. Indeed the weekly diet for staff and patients was very similar. Breakfast consisted of one quart of stirabout made with 7 ounces of oatmeal supplemented by a pint of “new milk”. Sunday dinner was a pound of beef and two pounds potatoes washed down with a pint of beer. On Monday it was broth and potatoes and the rest of the week a variation on the theme of soup, bread, milk, and potatoes. Supper consisted of bread and buttermilk. Unlike the patients servants were allowed in addition to this plain fare, a further pound of beef three times a week. We can compare the amounts spent on servants and patients. When estimating the expenditure of the Board for the year 1826-27 it was reckoned a patient's diet cost £17-03-1, the same sum as for a servant. The servants had a little more spent on them when it came to clothing, £1-18-0 per annum, ten shillings more

than a patient. In March 1834 it was decided instead to give the keepers two guineas and nurses one to buy their own clothes. However the decision to withhold the clothing allowance and once more provide suits for the keepers was taken in September 1847. Though the rewards might appear meagre the job was not without its occasional perks, for instance in January 1827 Jackson reported on the good conduct of two nurses and the Board ordered each of them be paid a £1 premium. In 1831 it was ordered that the annual salary of the James Mahon, store-keeper be increased from £12 to £15 because of “the very proper manner...he has discharged his duty.”¹⁴ By May 1843 due to his increased duties the store keeper's salary had risen to £30 per annum. However a contradictory minute of September 1846 states that the storekeeper was awarded an increase in wages of £5 bringing his annual salary of £20.

It must have been quite difficult to recruit and retain staff in the rather unique environment of the lunatic asylum. It was decided in May 1845 as a further incentive for those employees that had many years of service that, “after long and faithful service we are of the opinion that superannuation to officers and principle servants in the District Lunatic Asylum is but an act of justice...” Although it was often reported in the minutes when staff were found drunk on duty it was not always routine that they were immediately dismissed. Several times during the autumn 1847 one particular female nurse is mentioned who seem to be constantly under the influence of alcohol; eventually in December after several warnings it was decided to dismiss her.

Dismissals fair & unfair

An insight into conditions of employment is highlighted in July 1828. Although sick leave was a rarity in the first quarter of the nineteenth century one of the keepers whose health “was very much impaired” was given leave of absence for three weeks. At the beginning of 1829 the yard keeper was dismissed as he was unfit for duty owing to an injury. When a memorial from him was read to the Board complaining that his injury had occurred in the course of duty and asking for compensation, it was ordered

he be paid five pounds. Again in July 1828 no action other than “being reported” was taken against keeper who was drunk and absent from duty. However if reports led the Board to judge a member of staff was in any way negligent they would be summarily dismissed. In October 1828 the laundry maid was dismissed for quarrelling with her fellow servants and one of the male keepers sacked for “improper conduct”. The stresses and strains of living within the confines of the asylum with so many disturbed patients led some of the servants to resort to alcohol. At the beginning of 1829 the gardener and gate keeper Mr Walker was suspended from duty for absenting himself from work and being in a continual state of intoxication. He was eventually dismissed from his post in August 1836 for the same reason. In October of that year one of the assistant nurses was dismissed for coming home drunk. In May 1837 the cook was dismissed from her post for being absent and staying out all night, her replacement held the post for just six months and in November she was dismissed for drunkenness and neglect of duty. In January 1838 two female laundry maids were dismissed for drunkenness and in August 1839 a female assistant nurse was dismissed “being drunk and other irregularities”.

Recruiting staff that had the correct temperament was another difficulty and instances of keepers and nurses assaulting patients in their care are seen regularly in the minutes. In December 1831 one of the male keepers lost his job, “for kicking a patient under his care”. In May 1832 another male keeper was dismissed because “his temper and manner with the patients rendered him unfit for the office.” Deterioration in the servants’ behaviour would not always result in dismissal but was usually noted and reported on. In October 1832 it was revealed that all of the servants had been attentive apart from Nurse Campbell, “in whose temper and manner with the patients there is a great falling off”. Two dismissals took place in July 1834 both were male keepers, “The former for repeatedly beating the patients and the latter for insubordination and mutinous conduct”. It was more common that male staff were dismissed for violent behaviour but in September 1834, “Bridget H, nurse dismissed for severely beating Jane H a

patient. Her temper and manner also render unfit to be employed in care of the insane persons.”¹⁵ For some staff it was apparently all too much and neither the bottle nor brutality answered. In April 1830 William Hearty Keeper No. 2 absconded taking with him his house clothes. There was nothing the Board could do except record that “his back months wages to be withheld to cover the expense.”

Rules

The rules for the regulation of the institution were set up at the beginning of 1826 and not wishing to reinvent the wheel, the system used by Richmond asylum in Dublin was considered and adopted. Here is not the place to detail these regulations although it is worth considering the rules regarding visitors adopted in July 1825. “...That respectable persons wishing to see or visit the asylum be requested to apply between the hours of eleven and one o’clock as the regular business of the institution cannot be interrupted no Permission be given except at these hours. It is particularly requested that no visitor will enter into conversation with any of the patients nor make any observations on them in their hearing.

Friends or relatives of patients residing in the neighbourhood of the asylum will be permitted to see them for half an hour on Monday between 10 and 12 o’clock provided the state of the patient’s health will admit of it. Those whose friends reside at a distance will be allowed to see them on any day at a reasonable hour subject to the above cautions. The attendants of the institution are by no means to receive any gratuity whatever from visitors or the friends of patients under pain of immediate dismissal.”¹⁶ Although it might surprise us that the institution was open-minded enough to permit family members to visit their relations on a weekly basis, it is also disturbing to see that the practice of “going to see the lunatics” was encouraged in Armagh.

Admission forms

The forms of admission were the official documents considered at each monthly meeting by the Board. (*see illustration page 1*) An application for admission could easily be dismissed because the form was filled in incorrectly. For example at the meeting of June 1826 a prospective patient from County Monaghan was rejected on the grounds that “the engagement to take away the patient being signed by a marksman.” In other words it had been authorised by someone who was illiterate and signed only using their mark. A difficulty would also arise if a prospective patient’s residence in the District could not be established. In July 1827 a woman described only as “Montgomery, a stranger Mullavilly” was rejected because her residence in the District could not be ascertained. By August of that year what was to become the most common reason for rejecting patients appeared in the minutes for the first time, i.e. that a county’s quota had been reached.

In the latter half of the 19th century it was not unusual to have paying patients in the asylum but there is evidence to the contrary in the early days. In a minute for May 1828 “the application of the Rev James Clark curate of Kilcluney to have a son admitted cannot be complied with, not being a pauper.”

Over population

What became known as the manager’s monthly return first appeared in July 1828. This useful table provides a breakdown of the number of patients currently in the asylum, those admitted and those sent home. It also informs us of patients’ health, whether or not any were currently being confined or restrained and how many were in employment. By the end of the year pressure was clearly on the Board to accept patients for whom they had no room. There were nineteen patients on the waiting list and it was suggested by Jackson that a large vacant room be converted to accommodate five of them. The Board did not take a decision one way or another but instead resolved that a letter be written to the Lord-Lieutenant on the subject. Six months later in July 1829 came the prospect that some extra places

would be made available. A letter was read to the Board stating that the asylum in Derry was ready for the reception of patients and it was recommended any from that county who were in the Armagh asylum be transferred. This movement resulted in ten spaces for male patients and five for females.¹⁷ It is not recorded how fifteen patients who were not belonging to Armagh District had come to be in the asylum in the first place. With places at a premium the manager was always keen to send recovered patients home, however a dilemma less easily resolved arose in the case of a convict. He had been transferred from Monaghan jail in a state of insanity but was now considered of sane mind. As happened not infrequently the Lord-Lieutenant was written to for advice.¹⁸ Even though there were no vacancies, exceptions were made if cases were serious. In April 1833 a female patient for whom there was no place was nevertheless admitted because she was “a bad case”. Again in January 1834 the reason given for two admissions was that they were “Recent and urgent”. Occasionally the Constabulary would be involved with the admission. In August 1835 they apprehended what was described as a “dangerous maniac” in the neighbourhood of Loughgall and brought him to the asylum, there was little the manager could do other than admit the patient. If these unwilling decisions were taken by the Board themselves, on other occasions they were forced against their better judgement to accept patients. In May 1833 at the request of the Lord-Lieutenant, they reluctantly admitted and insane soldier who was regarded as incurable. They could however put their foot down even from a request by someone as important as the Secretary of War. In August 1834 he wrote to the Board with a similar appeal but the manager was ordered to reply stating that the asylum was overcrowded and the soldier was not from the Armagh District. Whether or not the refusal was accepted is not noted. In May 1835 the rules of admission were changed, in future a bail bond was to be entered into by friends of patients before they were admitted. The manager was ordered to write to the government stating that the Board would adopt the new rule but it was foreseen that in some cases it could obstruct the admission of patients owing to their

poverty and the “difficulty of procuring patients to become responsible.”

Overcrowding and finding space for all the patients was a perennial problem and it is repeated ad nauseam that patients with certain types of conditions, in the Board’s view, simply didn’t qualify for admission. For example in July 1836 they drafted a letter to the Inspector of Prisons after an enquiry from him as to how the asylum could cope with housing the lunatic poor. The Board were cautiously optimistic but cautioned that if “idiots from birth, and epileptic cases be admitted, then an addition to the institution will be required.” Incurable cases and hopeless cases from prisons put most pressure on the asylum’s limited accommodation and Jackson’s philosophy of moral management. In May 1837 the Board stated that if patients such as criminal lunatics continue to be received in the same numbers then an “extension to the building will become necessary”. This suggests not only that the Board desperately needed more beds but that they also recognised the value of separating patients with different needs and conditions. Two months later at the July 1837 meeting they took the bull by the horns and decided that “the board having taken into consideration the number of applicants for admission, and the inadequate means of meeting present pressures, resolved, that the manager be directed to write to Mr Murray the architect requesting his attendance at the asylum on Friday the 14th instant in order to consult on the best means of affording additional accommodation.” William Murray’s plans for extending the building involved building an extension onto the rear which added four wards with 4,072sq. ft. of space for beds. This was a much more efficient use of floor space than the existing small sleeping rooms which bore more resemblance to prison cells. (Murray’s plan is illustrated on back the page and is intriguingly dated four months earlier, 2nd March 1837)

The following April communication was made to the Board of Works about the building work and in November 1843 the Lord-Lieutenant was written to again

emphasising that it was absolutely necessary to build an extension. The scheme was never realised but copies of Murray’s plans are held in Armagh County Museum. The need for more accommodation was a constant one and although minute after minute records how necessary an extension is, nothing is done. In July 1846 a special meeting was called to “consider the communication from Dr White, Inspector of Lunatic Asylums for providing additional accommodation for the lunatic poor of this district.” In what must have been a display of sheer frustration the Board stated that they could give no more fitting answer than by quoting from a letter they had written to the Lord-Lieutenant two and half years earlier. A different but futile strategy was attempted at another special meeting in October 1846 when it was suggested Fermanagh be separated from the Armagh District. It was also agreed then that Dr White recommendation of an extension to house a further 80 patients should be built. The frustration is clear all through the minutes but it would be the 1860’s before any substantial extension to the building took place.¹⁹

Treatment & Recovery

From the outset Jackson’s viewpoint was that patients admitted should have some prospect of recovery and his figures show that a number of patients, albeit small, went home to their families each month. At the beginning of 1827 the Board granted Jackson permission to give patients a small sum of money to “pay their expenses home” as long as it did not exceed 18 pence. In November 1829 another resolution was passed rather begrudgingly that for some of the very poor patients going home, Jackson would be allowed to furnish them with some old clothes. Recovered patients were not the only ones to be sent home, if a patient was regarded as “incurable and harmless” he was keen to return them to the person who had become security for their removal. In November 1840 as on other earlier occasions Jackson was ordered to write to the friends of harmless patients asking them to remove their relations from the asylum to make room for “more distressing and dangerous cases.”

It was hoped the establishment of the Armagh workhouse in 1841 would help reduce the numbers of the “idiotic poor” in the asylum and it might have.²⁰ Although no explanation is given, in August of that year the manager dismissed 12 patients from the asylum. It is possible they were removed to the workhouse but it is not certain. They could have been returned to their families as seen above and again in the case of nine patients in November that year. The hope that the Workhouse would take large numbers from the asylum was probably optimistic for again in March 1842 we see Jackson ordered “to make every exertion to have the above patients [41 in number] sent to their friends in order to relieve the many pressing cases wanting admission, particularly those present confined in different county jails.” In 1842 was decided that the visiting physician Dr Kidd should examine the patients and draw up a list to be presented at each meeting of those he considered recovered. If patients on Dr Kidd’s list had no friends to whom they could go then it was agreed he should inform the Poor Law Guardians. In other words it was likely their fate was a life in the workhouse.

Treatment

The minutes provide no specific details of the type of treatments received by patients. The manager’s monthly returns do however provide the bare facts about those who were most disturbed. For example in September 1828 we learn that, “a considerable degree of excitement has been exhibited among the patients this month but all enjoying good bodily health”. It is not known what form the excitement took but the steps taken to contain it can be gleaned from the table for the following month. Four patients were secluded in their rooms “for being high” and five were “under restraint by waistcoat”. The waistcoat it is presumed was a form of straitjacket. Each month one or two patients are noted as being under restraint, however there is generally no more information than the numbers. One of the few exceptions is revealed in September 1832 when we learn that, “3 female and 1 male patient laboured under high degree of excitement during this period requiring

constant restraint, all the other patients with two exceptions enjoying good bodily health and were as usual occupied etc.” A month later the three female patients were still in a state of agitation. We can only hope that they were not still being restrained as they had been four weeks earlier. Disturbingly one of these patients is reported in the minutes of December as having died, “evidently worn out by great and continuance excitement”. There was obviously a wide range of illnesses and abilities in the asylum and solitary confinement and the straitjacket were one extreme of the type of treatment patients might expect. At the other end of the spectrum we read that manager asked the Board to set aside sums of money to buy books “to be lent to such patients is might derive benefit from mental occupation.”²¹ The differences in the type of attention afforded the male and female patients is not explicitly stated either but by 1830 it seems control was more important than care for the men. A minute of September that year states “the situation of nurse in the male department is recommended to be abolished there appearing at present no necessity for continuing the office.” Control and watchfulness was Jackson’s principles but sometimes staff were not vigilant enough. On a few occasions patients either attempted or successfully committed suicide. For instance one male patient attempted to hang himself in February 1829 as did another in September 1833. In June 1838 a female patient attempted suicide by cutting her throat in the early hours of the morning and a male patient succeeded in hanging himself from his bedroom window with a twisted sheet in May 1840.

Asylum employment

As can be read in other articles Jackson recognised the benefits of occupational therapy and keeping his patients busy, twelve looms and 25 spinning wheels were ordered at the first meeting of the Board in December 1824. It was reported in February 1829 that although the female patients were kept busy making their own clothes, there

was virtually no work for the male patients because of the severity of the weather. When the weather improved they were busily occupied in the gardens and in October it was recorded they were also weaving. However a lot of the time the male patients were involved in the same type of hard manual labour that was common in prisons. Stone breaking and working in the gardens are two of the most frequent for the men.²² Evidence for oakum picking appears in June 1837 when the manager was ordered to purchase “old rope for employing the patients”. The income from this work may not have been great but it was nevertheless profit. In the year to March 1840 the asylum received £11-12-3 for oakum sold and £13-2-6 for 450 yards of linen woven.²³ In March 1847 the sum of £10-1-3 was in the manager’s hands from “woven linen and turnips sold”. For a brief period an asylum school was established, it first appears in the minutes of January 1843 when 12 male and 20 female patients are at school. By November the number of female patients had written risen to 37 but by then the male school had ceased functioning. By February 1845 the female school had ceased operating too but recommenced in October 1847 and the following month 24 patients were attending it. No words can describe the frightening situation many poor mentally ill people found themselves in when sent to the asylum but the pages of the minute book from its formative years give at least a glimpse behind those asylum walls.

Number Daily Employed

	Male	Female
Garden Labour, ...	12	
Weaving Looms, ...	4	
Winding and Wazping for Weavers, ...	8	
Tailoring, ...	1	
Breaking Stones, ...	15	
Picking Oakum, ...	17	
Pumping Water, Washing Potatoes, &c., ...	5	
Spinning Flax, ...		22
Making up Clothing and Bedding, ...		8
Knitting Stockings, ...		5
Washing, ...		7
Making Mats and Quilts, ...		4
Assisting the Servants, ...		4
Total,	58	50

The following was Manufactured by the Patients, during the period

1400 Yards Linen woven,	102 Shirts,
1000 Yards of Yarn spun,	61 Bodycovers,
6 Quilts quilted,	50 Petticoats,
14 Pair Stockings knitted,	122 Caps,
4 Cloth Mats,	4 Bed Ticks,
122 Shirts,	

Forms of employment from Annual report of 1840

ARMAGH COUNTY MUSEUM REPRODUCED WITH PERMISSION OF THE TRUSTEES NWN

Endnotes

¹ PRONI HOS27/1/1

² Monument in St. Mark's Church, Armagh

³ Report of select Committee on the State of Ireland – 4th Report viz minutes of evidence 26 April – 21 June 1825, p504; Armagh County Museum, TGF Paterson ms124, p27

⁴ Gravestone, St. Mark's graveyard, Armagh

⁵ His Prerogative Will and Grant of Probate PRONI, T858/25

⁶ PRONI, D526/2E/34, D266/260/306, D266/260/266.

⁷ Armagh Guardian 8 July 1845, 23 December 1845

⁸ Ibid. 25th September 1848

⁹ Transcript of the proceedings of Board of Directors Armagh District Asylum 1 September 1834

¹⁰ Information and dates from, Fleming W.E.C., Armagh Clergy 1800-2000, 2001

¹¹ It is possible Andrew Lyle who had a brewery off Lower English Street beside the "dirty river" was considering enlarging his business but it is doubtful the asylum was using the main conduit of Armagh's sewage as a water supply.

¹² Board of Directors Armagh District Asylum 5 July 1830 and 2 August 1830

¹³ Ibid. 14 July 1825

¹⁴ Ibid. 3 January 1831

¹⁵ surnames deliberately disguised by the author

¹⁶ Proceedings of Board of Directors Armagh District Asylum 14 July 1825

¹⁷ Ibid. 3 August 1839

¹⁸ Ibid. 1 February 1830

¹⁹ McKinstry, Robert et al., The buildings of Armagh, UAHS, Belfast, 1992., p193

²⁰ Transcript of the proceedings of Board of Directors Armagh District Asylum 5 April 1841

²¹ Ibid. 20 Feb 1829

²² Ibid. 10 Jan 1848

²³ Fourteenth Annual Report of Armagh District Lunatic Asylum, 1840, p5.

Castledillion Hospital Farm

by Kevin Quinn

"The purchase of the Mullinure Farm and the Estate and Demesne of Castledillion mark an epoch in the history of the Institution"

This is how Dr Lawless the Resident Medical Superintendent reported the acquisition in the 1930 Annual Report. Castledillion Estate and Farm and Mullinure Farm was bought for £8,337 8s 3d and £1700 respectively by the County Council for the use of the hospital committee. This brought the total area of land in the hospital estate from 53 acres 2 roods and 17 perches in 1928 to 706 acres, 2 rods and 17 perches, 340 acres was under cultivation, 90 in grass and 221 acres 2 rods 17 perches occupied by buildings, airing courts and woods. The farm profit for the first year was £714 0s 5d, two thirds of the yearly profit was used to pay off the loan used for the purchase of the estate which was cleared by 1944. A James McLauchlan was appointed Farm Manager on 12/8/1929 on an annual salary of £350, retiring in January 1965 after 37 years service.

Over Crowding

In 1930 the patient population of the Armagh County Mental Hospital (St Luke's) was 535 the hospital bed allocation was only 486, leaving an excess of 49. Relieving the overcrowding especially on the male side was probably the pri-

mary factor behind the purchase. By 1931 Castledillion accommodated 50 male patients which helped to relieve the congestion on the female end on the main site. By the early 1940's Castledillion had a male patient population of over a hundred. In October/November of 1941 a hundred male patients and 12 female patients were evacuated to St Luke's from Purdysburn hospital in the aftermath of the Belfast blitz. In order to accommodate them the numbers at Castledillion had to be increased.

Self-Sufficiency

The secondary motive behind the acquisition of additional land was the desire for the hospital to be self-sufficient in meat, milk and vegetables. In the first year of operation the estate provided enough meat and mutton and nearly half the milk supply for the patients and staff. A poultry farm was also put into operation with the aim of supplying fresh eggs. The breeding of pigs and their eventual sale was very lucrative and over the years helped to boost the profits. The profit for



Castledillion house

1942 before deductions was £3,383 12s 7d. In 1938 a new piggery and abattoir was erected and in 1943 a new dairy sterilizing plant was built to improve the quality of the milk supply. In October 1942 the Castledillion water supply scheme was completed at a cost of £7,776. Water was filtered and pumped from Castledillion Lake to the hospital, finally solving the hospital's water shortage especially to the hill building. The scheme provided unlimited supply of pure water at a pressure capable of dealing with fire. In 1963 the St Luke's site was connected to the mains supply. By 1952 the farm was able to supply the hospital with pork to value of £1,407 5s 8d, milk to value of £6,402 4s 1d, vegetables and fruit to the value of £2,643 4s 0d, with the surplus being sold, livestock to the value of £1,825 6s 8d, grain to the value of £668, milk 5 shillings and fruit and vegetables to the value of £165 1s 5d.

Employment of Patient Labour

The hospital farm at one time had over a hundred patients helping out in the every day farming jobs. Unlike certain wards on the main site, Castledillion operated an open door policy, allowing the patients significant degree of freedom and independence. Patient employment or work therapy had always been integral part of the patient's care. With the absence of any effective treatment, work was seen to help to alleviate the symptoms of mental illness. With the introduction of successful treatments in the late 1940s and a greater emphasis on rehabilitation there was a gradual decrease in long stay patients.

A patient's time in hospital was further reduced with the use of anti-psychotic drugs from the late 1950's and early 1960's. This meant that the remaining long stay population could now be accommodated on the main hospital site. So by the early 1960's the hospital farm was gradually run down with farming ceasing in 1964 and the land let. On the 4th December 1967 the remaining patients were transferred to the main hospital complex. Castledillion estate was purchased by the Ministry of Agriculture who took possession on the 1st January 1968.

A patient's reflections on Castledillion; 1956-1967

Personal Interview January 2011

"I was transferred to Castledillion from the main hospital in late 1956. The view was the most beautiful I had ever seen. You could go on long quiet walks in the grounds especially the orchard. There was a bird sanctuary and I spent many hours' bird watching and also watching the fishing parties rowing their boats on the lake. When I arrived there were around 60 patients at Castledillion with 5 to 6 patients to a large room. Breakfast was between 7.30am and 8.30am and work began on the farm at 9.00am. Lunch was at 12.00pm and tea at 5.00pm. My job was cutting sticks, mowing the lawn in the summer months and looking after the flower beds. I received five shillings a week. There were sixty dairy cows, 400 pigs, sixty acres of potatoes and 60 acres of oats. I hadn't much contact with the public except with the families that lived on and around the estate. I didn't go up the town for five years but I had plenty of

chums and the staff were very kind and friendly. Castledillion got a television in 1956 and it was the first time I ever saw one. There was one channel until 1959 and we could watch television from 5pm to 12am. Every Thursday night the hospital entertainment's officer would show a film mostly westerns on a projector and on a Monday night we were brought in to the hospital for the weekly dance. In the summer months there were trips to seaside mostly to the County Down coast. At the time of its closure patients who had been there a life time could not believe that they were coming back into the hospital. The staff even had some difficulty getting some patients to board the bus. I was very sad leaving and it took me a long time to settle in the main hospital. Some former patients got it very hard to settle and for a while used to walk back out to Castledillion".

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World War Two

from the annual reports

by Mary McVeigh

Over one hundred patients were transferred from the Belfast Mental Hospital to Armagh during the Second World War. They first arrived towards the end of 1941 and, according to the Annual Report, they were able to be accommodated because there had been a drop in patient numbers, the lowest in almost ten years; an increase in the number of discharges and deaths as well as greater use being made of the Castledillon facility. Contrary to what had been expected they soon settled in and by the end of the year only one left at the request of relatives. It was late 1945 before the remaining 91 Belfast patients returned to the city and they certainly left on a happy note. The Residential Medical Officer, Dr R. Thompson, in his annual report of 1945-46 wrote: "These patients had settled down very well in Armagh and many were excellent and willing workers and it was with a certain amount of regret that we parted with them". In the first year of the war there were 15 service patients and they were apparently 'well contented and well nourished'. At no stage was war mentioned in the annual reports though there were references which obviously related to it. For instance, in 1940-41 it was remarked that 'the sand-bagging of four day rooms to provide air raid shelters, the blacking out of roof lights and the fitting up of black-out curtains took up a considerable amount of time'. In 1941-42 it was noted that a feature of the admissions that year was the large number of elderly patients, especially in the female side. "In former years many of these patients would have been nursed at home, but in present conditions with families scattered this no longer appears possible". There was also mention in 1942-43 of troops entertaining patients and in 1943-44 of 'travel restrictions' preventing some helpers from participating in entertainments.

There were several references in the reports to Castledillon and the farm. In 1939-40 it was noted that a new pig-

gery and abattoir were erected and in the following year among increases in expenditure was £200, used primarily for building up a dairy herd free from tuberculosis. In 1941-42 an extra £935 was spent in the purchase of additional dairy cows. However, in the Medical Inspector from the Ministry of Home Affairs report in 1943-44 it was noted that although the patients there were comfortable and generally well-cared for 'much mud' was being carried into the house by the farm workers and it was advised that the provision of house shoes for them some time in the future would result in considerably less cleaning and general wear in the various rooms. In 1944-45 it was reported that the loan on the purchase of Castledillon was now paid. The farm continued to make a profit throughout this period.

Over the years expenditure generally would seem to have risen quite significantly. In 1940-41 the main increases apart from the farm were £500 for salaries, £300 for tobacco, £850 for provisions and the sharpest rise was £1,250 for cloth and bedding due to the price increase in linen sheeting. Although bedding was down in the following year an increase in the cost of fuel and light amounted to £1,996 but this was due to buying in a reserve stock of coal, presumably because of fears of war-time shortages. By 1943-44 the additional expenditure had risen to some £7,000 and this was due to an increase in the cost of 'almost every item'. Bread alone cost an additional £250 and the increase in cost of Grade A meat supplied amounted to about £400. For the first time in a number of years estimates fell short of expenditure and a supplementary grant of £5,000 from the Armagh County Council was required.

Improvements in the various buildings were carried out over the years. In 1940-41 these consisted of eight new wash-up

rooms with terrazzo floors, new staff bathrooms, a new dental surgery, the re-flooring of five day rooms, the erection of four shelters complete with sanitary equipment, the lowering of 14 day room windows and the provision of terrazzo floors in six existing lavatories. However, the same volume of work did not appear to be carried out in any of the other war years although a new water supply from Castledillon to the main hospital was provided by the end of 1942. Indeed the Medical Inspector's report in the previous year had been very critical of the water supply which he described as 'deplorably inadequate' and went on to say: "The acute water shortage with its consequent diminution of cleanliness makes one apprehensive of a major outbreak of enteric fever". The reports from the Medical Inspector, T.W.H. Weir, from 1943 onwards seemed very thorough and he was certainly did not appear reticent about mentioning where he considered there was room for improvement. After his inspection in September 1943, for instance, he wrote: "The bed linen in the male side of the New Building was far from clean. Such a state of affairs is far from satisfactory as absolute cleanliness is most essential, especially where there is the possibility of undetected typhoid carriers being about. The male hospital ward badly needs painting and some re-arrangement of furniture in it similar to what has been done in the female hospital ward. The stove used for heating the back observation dormitory is unsatisfactory. Smoke from it has blackened all the adjacent walls and must render it difficult to keep the dormitory clean as well as being unhealthy for the patients in it". He recommended replacing the stove by an electric heater.

In the previous year's report he raised the issue of dental treatment. He pointed out that the visiting dentist attended regularly but only to extract teeth. His view was that the preservation of natural teeth was of

equal if not more importance than their removal and he therefore recommended widening the scope of dental treatment to include filling and scaling. It took another two years however, before this suggestion was implemented.

He was also concerned about the lack of occupational therapy for patients and mentioned it on an annual basis. He wrote in January, 1943: "No form of organised occupational therapy has yet been introduced for the benefit of those patients unable to apply themselves to the more active routine work". A year later when he was referring to the various types of work being carried out by patients such as farm work, housework etc he went to note: "There remains however, many patients who are idle because they are unable to do the forms of work mentioned but who could be taught various handicrafts if suitable personnel were available to teach them. Prolonged periods of idleness are even more harmful in mental cases than in normal persons and the promotion of interest in patients through some form of occupation is a most valuable aid in the process of restoration to a normal mental state".

Entertainment was another area where the Medical Inspector thought there was a need for a more advanced approach. He acknowledged that concerts and dances were held on a regular basis but he pointed out in January, 1943 that no provision was made for 'picture shows' which he said was a form of entertainment now taking its place 'inside mental hospitals as much as in the outside world'. He went on to add that whilst newspapers and periodicals were supplied to wards there was no central library and what was available to patients in the way of books was very limited. He suggested that use be made of the 'County Library scheme' to obtain books on loan. In his next year's report he advocated the provision of more wireless sets throughout the hospital as he thought they would be 'much appreciated by patients'.

The hospital seemed to be plagued every year with outbreaks of both typhoid and diphtheria. For example in 1942-3 various outbreaks of typhoid fever resulted

in nine male and seven female patients plus one nurse being affected. Two female patients in poor health died from it. Dr Thompson, in the annual report, stated: "For some years all members of staff have been inoculated against typhoid and all under 25 years inoculated against diphtheria. It is hoped by this method to reduce the incidence of the latter disease which is particularly liable to affect young, recently joined, nurses and attendants". The numbers who caught both diseases may have been reduced through inoculation but they were never eradicated during the years of the Second World War. In 1944-45 the Inspector noted: "Cases of typhoid fever made their appearances during the year showing that the disease continues to be endemic in this hospital". There were 12 cases of it with one patient dying from it and nine cases of diphtheria affecting both patients and nurses.

Advances in mental healthcare were also recorded in the annual reports. Towards the end of 1943 the 'apparatus for ECT, Electric Convulsion Therapy was purchased and in the report of 1944-45 it was heralded as the 'most important advancement in the past century' for depressive illnesses. Dr Thompson noted: "In all depressive states we have found this treatment of immense value, recovery often takes place in a matter of weeks, and the patient being spared months of suffering with the attendant risk of suicide or heart failure. Up to December 1944 thirty-four cases of depressive illness have been treated by this method and all but four recovered completely. In some 600 treatments given to 70 patients during this year we had no complications of any note". He went on to add that however there were other types of mental breakdowns unfortunately which would not respond to this form of treatment. A year later insulin Shock treatment was introduced and the annual report stated that although it was in 'its early stages' it promised to give 'gratifying' results in cases which, prior to its adoption, could have been 'almost regarded as hopeless'.

It was on the advice of the Medical Inspector, that out patient clinics were

opened in Armagh and Lurgan. He wrote in September, 1943: "This mental hospital though old in design offers up-to-date treatment to the mentally ill persons residing in the county who require hospital care. It is now realised that the mental hospital only forms part of the provision required to meet the needs of the mentally ill". He went on to point out that not all people with bodily ailments needed to stay in general hospitals. In many cases their conditions could be treated and cared for by attending external clinics where they would be seen by the hospital doctors. The same applied to persons suffering from mental 'abnormalities'. He thought that the establishment of these clinics would be 'a step in building up an efficient mental health service for the county'. In February 1945 there were 37 new patients at the clinics bringing the total to 66 and it was noted that should the volume of work at them increase an additional Medical Officer would be required. Indeed in the following year a new post of house physician was created which was filled by Dr D.H. McDowell.

During the war years there were a number of changes in the medical personnel. Dr W.R. Wright, the Assistant Medical Officer from 1938, resigned in 1943-44 and the post was filled by Dr Margaret Dixon. Pending her appointment a locum, Dr. James Wallace Mathew, who then went to the services, was employed. Dr Dixon stayed just a matter of months and was replaced by Dr Brian Glancy who had worked for several years in Omagh Mental Hospital. In the 1939-40 report it was noted that Head Attendant Rafferty resigned due to ill health from his post at Castledillon after 24 years service and he was succeeded by Robert McFadden.

Every year without fail during this period Mr Owen Webb was thanked and praised for providing entertainment for patients and the British Legion and the 'Not Forgotten Association' were recognised for their contributions to ex-service patients.

First Citizen's' charity work went un-rewarded

by Eric Villiers

In mid-20th Century Armagh charity concerts organised by Armagh pianist Owny Webb and held at St Luke's Hospital were a highlight of the social calendar for many people. The public flocked to join the patients and staff enjoying a programme put together and starring Webb who was something of a 'resident' concert star at the hospital.

Webb who lived in Railway Street was arguably the city's most popular figure and his dedication to helping charities through his performing talents became legendary.

Perhaps it was his own life-long struggle against illness (an unspecified incapacity which left him lame) that was the foundation of Owny's generosity – although it seems that altruism was a family trait, his brother was a doctor in Dublin and his sister was Mother Provincial of the Good Shepherd Order in Ireland.

Week in and week out he gathered talent from a wide area to give free concerts on Friday nights in St Luke's. His own signature tune was 'When I Was A Boy At School' and his stage act was reminiscent of Percy French with humorous songs and patter.

Such was his standing that when he died in 1952 the editor of the Armagh Guardian berated the Government for failing to reward him with a royal honour.

While he was well known across Ireland for his charity work his obituary made the national press probably because of his fame as a talented pianist who regularly performed on radio for the BBC and Radio Eireann.

It was in July 1952 in the wake of the 77-year-old's death that the Guardian's editor was annoyed enough to chastise the powers that be for failing to bestow

an honour on Webb for the devotion he had shown to his community.

Quoting the late Mr T. W. Reid, former county council secretary, the editor maintained that while Mr Webb had died a poor man, that was easily explained – he sacrificed his money to help the less well off in and around Armagh.

The lengthy editorial, carried on the front page of the paper below a photograph of Webb, included this: "The late Mr Thomas E. Reid once declared to me that Owny Webb was undoubtedly Armagh's First Citizen... Strange, that those who compiled the lists of those to be honoured never included the name of our 'First Citizen' ... none had greater claim."

Around Armagh and further a-field he was always affectionately referred to as 'Owny' – a saint-like being who gave up his time freely running charity concerts in prisons and hospitals. Armagh shopkeepers knew him as the customer who invariably asked for his change in shillings and sixpences, to facilitate his generosity to children who crossed his path.

Mr Reid's praise seems to have been the only public acknowledgement from a government source of Mr Webb's work.



The photo from Mr. Webb's obituary, although poor quality it is the only one the author could trace.

Army and police were ‘blacklegs’ in 1918 strike

by Mary McVeigh

*“During the course of this great war the cost of living has advanced to such a high figure that it must be acknowledged that workers cannot exist on the same wages as they did prior to the war, and recognising this fact employers are prepared to admit that a war bonus is necessary”.*¹

This quotation from the *Lurgan Mail* in 1918, the last year of the First World War aptly sums up the economic situation of the time but it omits to mention that the amount of war bonus offered was often a bone of contention. There were many instances of workers being forced to resort to desperate measures, namely industrial action, to get it increased. In the early months of the year, for instance, those who gave notice of strikes included dispensary doctors in Enniskillen, women employed in the manufacturing of ‘fancy’ linen in Lurgan, cabinet makers in Richhill and corn mill employees in Coalisland.

Armagh asylum attendants were also driven to ‘down tools’. Both the local papers of the time, the *Armagh Guardian* and the *Ulster Gazette* reported in their editions of 16th March that information had been received from the Armagh workers that they had notified the Committee of Management of the asylum, meeting on 11th March, that they would go on strike on 20th if their demand for a ‘reasonable’ bonus was not granted. They were now looking for ten shillings a week for all as opposed to what they were currently getting: one shilling for singles and two shillings for those who were married. Apparently their request had first been raised in January and then again in February. It had obviously fallen on deaf ears, hence now the strike ultimatum. This time the Committee chose to discuss the matter in private and the perception was that it did not bother to communicate its decision to staff.

Thus on the morning of the 20th March 48 out of a total of 52 attendants and nurses, 21 male and 27 female, ‘marched in a body out of the institution, leaving the inmates in bed, and the doors locked’.³ They marched along the Moy Road for a bit, listened to speeches from ‘their leaders’ and then adjourned to the Swan Café in Lower English Street where they all had breakfast. On 29th March the *Armagh Guardian* reported that there had been no progress on the strike. On the following Tuesday afternoon the strikers held a meeting on the Bridge Hill and were addressed by a Miss Hampton from the executive of the Irish Asylum Attendants Union. “She pointed out that the strike was not such a minor matter as some people thought. Its result would have far reaching consequences in as much as attendants in other asylums were prepared to stand by Armagh even to the extent of a general strike...The very idea, she said, of the majority of the Armagh staff only receiving one shilling advance since the war began should commend the sympathy of every member of the community”.⁴ Another meeting was called for the following week but there is no mention in the papers of it and indeed despite Miss Hampton’s assurances of solidarity and public sympathy by early April the strike had petered out.

The outcome was certainly not a happy one for the workers. It would seem that not only did they gain nothing but some actually lost their jobs because at the April meeting of the Committee of Management the Resident Medical Superintendent, Dr G.R. Lawless was ‘happy to be able to report that the strike of attendants and nurses was over. He had been able to secure the services of a good number of new attendants and

nurses and he had also taken back some of the old staff on the same terms of pay etc’.⁵

Why did this strike which started off with a great show of strength fail so abysmally? It is likely that a major factor was the use of police and troops as strike-breakers and indeed as a form of intimidation because who was going to picket a workplace in the presence of police and military might? At that time the asylum had been left in the charge of Dr Dora E. Allman, the assistant R.M.S. as Dr Lawless had gone to serve with the Royal Army Medical Corps. When she realised that the threatened strike was actually going to happen she alerted the police and from the night before it was due to take place there was a contingent guarding the asylum building. Next morning at 7.00am when the attendants were leaving after having seen that the 527 inmates were comfortable and, according to the *Ulster Gazette*, ‘everything was left in order’ Chief Constable Long demanded that they hand over their keys⁶. However, they refused to do so on the grounds that they had not been dismissed and were not leaving the service. More staff than anticipated went out so Dr Allman took further action. “The services of the military were requisitioned and about 60 men of the Irish Fusiliers under the command of Major Ferguson were marched down to do duty inside the institution while a number were placed on guard at the approaches to the building. During the day a large number of extra police from the surrounding districts arrived”.⁷ The military guard was kept for just one day but Colonel Fitzgerald sent two cooks and six orderlies from the barracks as all the kitchen staff had gone on strike. They were joined by ‘lady volunteers’ from the town.

Ironically although Dr Allman's action in bringing in the police and military was sanctioned by the Committee of Management and she was thanked for her 'readiness and courage in meeting the emergency' she was obviously not considered sufficiently competent or experienced to maintain control for the duration of the strike. Within two days Dr Lawless came on leave to take over the reins of the asylum and she was relegated to second place. This was very much in keeping with the prevailing attitude of the time towards women doctors. According to Elizabeth Malcolm writing on 'Hospitals in Ireland' by 1916 there were only about 40 women doctors in Ireland out of some 3,000 medical practitioners. Some of them had been able to get work as assistant medical officers in district asylums and union workhouses but 'such posts had little status and limited progress'⁸ Dr Allman who was originally from County Cork had to wait another 18 years for promotion. In 1931 she became the resident medical superintendent, the first woman in Ireland to be appointed to such a post. It might well be argued that it was long overdue as she served as assistant for 32 years⁹

Another reason for the strike's lack of success could have been the intransience of the Committee of Management. It would appear that there was only one member, Mr A. Donnelly, who was prepared to declare any sympathy for the strikers. When the Chairman, Mr H.B. Armstrong said that he thought it was all very well in a trade where there was 'squabbling' over profits for men to go out on strike but in an institution like Armagh Asylum with hundreds of patients incapable of taking care of themselves, it was quite another matter altogether. Mr Donnelly retorted that in this case it was 'squabbling' to get the means of living.¹⁰ In the early days of the strike the management spelled out in the local press its three part stance on the conflict. One was that it would not be moved by 'threats'; a second was that if the attendants chose to break their agreements by leaving without giving the due month's notice they then would forfeit their superannuation and finally; the view was that 'indoor' attendants were provided with food and clothing and therefore were not affected by price rises.¹¹

Interestingly the *Lurgan Mail* expressed some criticism of the way in which the Committee of Management handled the dispute. "The strike of the attendants employed in the Armagh Asylum would seem to place the Governors of that beneficent institution in a rather awkward position. Unquestionably the strike was precipitated by the refusal of the Governors to consider an application for increases of wages and the failure to arrange a compromise or make some provision for the continuance of the work pending a settlement, would appear to leave them open to official censure".¹² It went on to say that only the local police had stepped into the breach there was no saying what might have happened in an institution peopled by 527 'irresponsible lunatics', many of whom were, no doubt, 'suffering from homicidal and vicious mania'.

A lack of leadership, particularly at local level could also have contributed to the failure of the strike. It would appear that the asylum staff had not long been unionised when they decided to take strike action so their representatives were unlikely to have had much experience in industrial relations. They certainly kept a very low profile! The fact that the Secretary of the union in Limerick rather than a local official sent the letter to the Committee of Management giving notice of the intention to strike would bear this out. Indeed the only communication from the strikers published in the press would seem to have been a small notice in response to advertisements seeking both male and female attendants to replace them. It stated: "AS THE STAFF (Males and Females) of the Armagh District Lunatic Asylum ARE NOW ON STRIKE for INCREASED WAR BONUS, they hope that INTENDING APPLICANTS WILL NOTE THE FACT".¹³

Their spokesperson at a meeting with the Committee of Management was a local solicitor, Mr Patrick Lavery, and the only public speaker quoted on behalf of the strikers was Miss Hampton from the union's executive and sadly the promise

of solidarity from workers in other asylums was wishful thinking on her part. It is likely that their main concern was their own rates of pay. Indeed during the Armagh strike attendants in two other asylums also resorted to strike action. However, they seem to have fared better than their Armagh counterparts. A strike in Letterkenny was settled in a few days and it took just a week for staff in Monaghan to get a rise in the war bonus. They had asked for ten shillings but settled for four. Even before they took strike action they were better off than the Armagh staff. They had already received a pay increase in the previous month bringing the most senior members up to £48 and the lowest to £30 per annum before bonuses etc. The highest pay for nurses was £41 and the starting salary was £16 per year¹⁴ In Armagh the maximum before bonuses etc. for first class attendants was £32 and the second class went up to £27. Armagh nurses could earn a maximum of £24 and those starting out earned £14 a year.¹⁵

The Monaghan asylum workers certainly seemed more militant than those in Armagh. They maintained pickets on the building and refused entrance when an attempt was made to bring in extra nurses. A local councillor, Mr Francis Duffy, had a notice on his window naming those who were still at work as well as warning off those who might have considered taking up temporary employment in the asylum. It would seem that there was some public support for the strikers because they were joined on the picket line by people from the town. If there were any public expressions of support for the Armagh strikers from any section of the community they were not noted in the local papers. In the second week, when it was reporting that new attendants were being recruited the *Ulster Gazette* remarked that 'just now public sympathy seems to be with the strikers'.¹⁶ However, in the previous week's edition of the *Armagh Guardian* it was stated that public opinion was divided on the strike. "Some express sympathy with the strikers and others consider the attendants favourably off as they have not to buy food or clothes. Others again hope that the

Committee will seize the opportunity to employ men who have done their duty to their country, and let the able bodied attendants go to the land where they are needed, when they will not join the army or the navy. The leaving of many lunatics unattended has also been unfavourably commented upon," it declared¹⁷

The Armagh Asylum strike ended in a victory for the Committee of Management and it certainly helped Dr Allman's reputation. She has gone down in local legend as the woman who brought in the army to put down a strike¹⁸. However, it was undoubtedly a sad time for those

who participated in it. Some of these workers had over 20 years service so it is highly unlikely that they took the decision to strike without a great deal of soul-searching. They gained nothing and for many of them it was not just a case of lost earnings but the loss of their jobs and superannuation as well.

Endnotes

¹ *Lurgan Mail*, 20th April, 1918

³ *Armagh Guardian*, 23rd March, 1918

⁴ *Armagh Guardian*, 29th March, 1918

⁵ *Ulster Gazette*, 13th April, 1918

⁶ *Ibid.* 23rd March, 1918

⁷ *Armagh Guardian*, 23rd March, 1918

⁸ "Hospitals in Ireland" ed. By Elizabeth Malcolm, "Field Day Anthology of Irish Writing, vol.5: Irish women's writing and traditions", p. 709, Cork, 2002

⁹ *British Medical Journal*, May 23, 1931

¹⁰ *Armagh Guardian*, 12th April, 1918

¹¹ *Ibid.* 23rd March, 1918

¹² *Lurgan Mail*, 23rd March, 1918

¹³ *Ulster Gazette*, 30th March, 1918

¹⁴ *Northern Standard*, 23rd March, 1918

¹⁵ *Ulster Gazette*, 23rd March, 1918

¹⁶ *Ibid.* 30th March, 1916

¹⁷ *Armagh Guardian*, 23rd March, 1918

¹⁸ PATERSON, T.G.F., "The Hospital Strike at the Armagh County Medical Home" (Typescript), *Armachiana*, vol. xi, Armagh County Museum

Give up your politics or get out!

Storekeeper given ultimatum by Asylum management.

by Mary McVeigh

Give up your politics or get out! This was effectively the ultimatum put to Edward Donnelly in April, 1918 by the Committee of Management of Armagh Asylum. Mr Donnelly, who was employed as a storekeeper was the local Sinn Féin president which did not sit well with the asylum authorities. Thus he was given the choice of his job or his politics. He was not prepared to relinquish his political role and at the May meeting of the committee the Resident Medical Superintendent, Dr G. R. Lawless reported that Edward Donnelly had tendered his resignation but was willing to remain on duty until his successor was appointed. Mr Donnelly gave his side of the story in a letter to the *Ulster Gazette*. He wrote:

"The following is a copy of a resolution passed at Armagh Asylum Board meeting, about which there seems to be some doubt locally: Proposed by Mr Compton, D.L., seconded by Mr Cowdy, D.L., 'That Mr Donnelly be allowed a month to decide whether he will sever his public connection with the Sinn Féin organisation, of which he is reported in the press to be chairman or president. Failing this,

he will be given a month's notice from this date (6th April) in which to terminate his official position as storekeeper in this institution'. By the wording of above you will see that I was dismissed unless I resigned the presidency of Armagh Sinn Féin Club. For obvious reasons it was my desire to remain in charge of my stocks etc., until my successor would be appointed and I did not submit or formally tender any resolution whatever. The above resolution made it unnecessary."¹

There was only one dissenting voice at the committee meeting, Mr A. Donnelly, a Nationalist member, and his plea to give his namesake a 'second chance' fell on deaf ears. If there was any public outcry it was not recorded in either local paper but two letters of protest were published on consecutive weeks in a Newry paper, the *Frontier Sentinel*. The first was from Frank Short writing on behalf of the committee of the Armagh Sinn Féin Patrick Pearse Branch who asked that attention be drawn to the 'glaring case of victimisation' and 'act of intolerance' which had taken place in Armagh. He pointed out that Mr Donnelly had served

for 20 years in the institution and he was the 'last Nationalist who held a position of any importance under the control of the Armagh County Council'.² Bernard McGivern, a native of Armagh but living in Motherwell in Scotland wrote in response. His view was that the 'cowardly action of Mr John Compton and company' could not be too widely known.³

Edward Donnelly who was born near Middletown and during his time in Armagh lived with wife and four children in Edward Street⁴ went on to have an eventful political career. He became a full time organiser for Sinn Féin in Armagh and its director of elections in north-east Ulster in 1918 and 1921. When Michael Collins, the Volunteer leader, Minister for Finance in the First Dail and indeed Sinn Féin MP for the county came to Armagh in September 1921, an event which attracted some thousands of visitors, was seen in cinemas far and wide on Pathe News and even merited a report in the *New York Times*, it was Edward Donnelly who first welcomed him. He gave the opening address and presided over a packed meeting in the City Hall.⁵

He was also a member of the platform party and a speaker at the big meeting in the College Grounds held later in the day. In his City Hall speech he said that the world knew, Ireland knew and Great Britain knew the type and character of Michael Collins. He knew that every man, woman and child in Armagh, including those who had voted against him were all glad to meet the leader of the Volunteers and a 'brilliant Irishman'⁶. Nonetheless, in spite of his high regard for Collins when it came to the Civil War Edward Donnelly took the opposing side and served terms of imprisonment on both sides of the border as a result.

He successfully contested the 1925 Stormont election for one of the four County Armagh seats. By this time he was known as Eamon rather than Edward Donnelly. It would seem that his entrance into the election contest caused some consternation among the Nationalists who had put forward two candidates, expecting both to be elected. According to the *Ulster Gazette* which described him as 'well known in Armagh as a former storekeeper at the County Asylum as well as Sinn Féin director of elections' his nomination 'almost at the last minute' was a 'big surprise'. He was proposed by James Trodden of Irish Street and seconded by Rev. Felix McNeece, Middletown and those who signed his nomination form were: Dr John Walter McKee, Russell Street; William John Quigley, Lurgancullenbeg; Anthony Morgan, Dromintee; Peter McFadden, Dromintee; Arthur Thornbury, Lurgan; James McAvoy, Ballinamoney, Lurgan; Patrick Toner, Corran and John O'Reilly, Ann Street, Milford.⁷ The sitting Nationalist who had been elected in 1921, John Dillon Nugent, an insurance manager and General Secretary of the Ancient Order of Hibernians, a native of Keady but now residing in Dublin, lost his seat. His colleague, Newry solicitor, John Henry Collins, was successful but polled lower than Eamon Donnelly who never took his seat because as a Republican he did not recognise the Northern administration. After he was elected an exclusion order was served on him which meant that he could only reside in County Antrim, excluding Belfast. He was twice found breaking it thus ending up in jail.

He was a founding member of the Fianna Fáil party and unsuccessfully fought elections in Monaghan, Sligo-Leitrim and Laois-Offaly before finally achieving success in Laois-Offaly in 1933. In that year he was also appointed chief organiser of the party. When the 1937 constitution was being drawn up in the Free State he pushed for the right of Northern MPs to participate in the Dail. Apparently incensed by De Valera's indifference to Northern Ireland, he moved a Dail amendment that the constitution be deferred until the issue of partition was adequately resolved.⁸

He did not seek re-election in 1937 and returned to the north though it would seem that he did not return to Armagh, instead he and his family moved to Newry. In 1942 he was elected to Stormont as an abstentionist Republican MP for the Falls constituency in Belfast. He was the secretary of the Green Cross Fund which raised £45,000 for the dependants of Republican prisoners and internees in Northern Ireland. He was also actively involved in the campaign to reprieve Tom Williams who was hanged in 1942 in Belfast for shooting a policeman. Eamon Donnelly died on 29th December, 1944 in a Dublin nursing home. He was aged 67. Both his life history and his funeral to St Marys church and cemetery in Newry, one of the largest ever seen in the area, received extensive coverage in the newspapers. *The Newry Reporter* described him thus:

"A man who gave of himself willingly to the cause to which he bore allegiance, even to the point of sacrifice, Mr Donnelly, throughout his life, was an ardent supporter of the nationalist policy, though in recent years he set himself to follow the destinies of Sinn Féin, it being, as he believed, the more virile movement, the best through which he could serve the Irish nation".⁹

Another Newry paper, the *Frontier Sentinel*, also wrote highly of him: "By the death of Mr Eamon Donnelly M.P., there disappears from the sphere

of Irish National affairs one of the most remarkable figures it has seen during the past half century and one who commanded universal respect for the honesty of his views and the courage and sincerity with which he expressed them and endeavoured to give them effect".¹⁰

According to the *Irish News* 'three bishops of the Northern Province, an Taoiseach, Mr Eamon de Valera; members of the Eire Government and representatives of the Northern House of Commons and the Dail and members of both Senates' were present at the funeral.¹¹ However, it would seem that this report was not wholly accurate because Eamon de Valera was represented by his son, Vivion, in Newry. The Taoiseach had in fact been at a Requiem Mass held in Dublin on the previous day attended by members of the Dail, the Irish Judiciary and the legal profession. There were many Armagh people mentioned among the mourners in Newry including Nationalist Sen. J.G. Lennon, Labour MP Paddy Agnew and close personal friend and fellow Republican, Charles McGleenan from Blackwatertown.

The *Armagh Guardian*, never a paper to shy away from letting its editorial opinion be known, noted the passing of Mr Donnelly in a brief curt paragraph, referring to him as 'Edward' rather than 'Eamon' and once again drawing attention to the reason for his departure from employment in the Armagh Asylum.¹²

Endnotes

¹ *Ulster Gazette*, 18th May, 1918

² *Frontier Sentinel*, 25th May, 1918

³ *Ibid.* 1st June, 1918

⁴ 1911 census

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Armagh District Lunatic Asylum

The panoptic architecture of moral management and the different phases of construction

by Kevin Quinn

The Main Building Known as “The Hollow”

The foundation stone (main building constructed of limestone ashlar and limestone squared rubble) was laid on the 21st May 1821 based on the plans by Francis Johnston the Superintendent of the Board of Works. The construction was under the direction of William Murray a nephew of Johnston. The work was carried out by the local firm of McCartney and Ballentine at a cost of £20,900. The Building was handed over to the Board of Governors on the 8th December 1824 for the accommodation of 105 pauper Lunatics. The first patients were admitted on the 14th July 1825.

The Panoptic Architecture of Moral Management

The panoptic idea was an optical system based on the principle of perfect observation. In theory the moral manager could observe all, nothing could escape his view. From this position, with no necessity to move, the moral manager's eye could penetrate every single cell without himself being observed. The structure itself was the “panopticon” whose periphery was open to complete inspection from a central vantage point.

The desired effect of this complete inspection was the embodiment of the ideals of moral management such as the insurance to the patients of a more than ordinary degree of individual liberty, exemption from restraint and seclusion, personal security and comfort and enjoyment. Another important feature of the design was the means of separation by gender, ranking the degree of insanity and rank in life. The panoptic principle had initially been designed for jails but was first applied to asylums such as the Lunatic Asylum for Incur-

able Females at Guy's Hospital London in 1794 and Glasgow Lunatic Asylum opened 1804. As the medical profession gradually took over the management of asylums, they found the design a barrier to progressive treatments. The design left little scope for expansion due to the single cell plan and its restrictive layout led to overcrowding. So by the second phase of Asylum construction in the 1850's the panoptic plan was abandoned due to its limitations.

The Panoptic Plan of Armagh Lunatic Asylum

The architectural plan of the “The Hollow” was panoptic and radial. The design consisted of a rectangular structure “the Panopticon” with four wings consisting of two storeys and a basement radiating from a centre inspection block in a K shaped plan with the top and bottom of the K plan connected by L shaped sides with a small return. On either side of the central block was the male west wing and female east wing, an arrangement that still continued up to the mid 1980's. (See

fig.1 1835 OS map for plan of the Hollow Building)

The Central Block

The Internal ground floor arrangements of the central block consisted of the manager's accommodation on either side of the entrance hall and a board room and parlour on either side of the main staircase. In between both was a hallway that led to the inspection lobbies on either side. Unlike the original panoptic design it was necessary at Armagh for the moral manager to move from his quarters to the inspection lobbies for him to observe.

The Front Elevation

Two wings extended from the sides of the central block with the internal plan arrangements on both wings being the same. The division of space on each wing consisted of twelve individual cells sandwiched between a scullery on the east side and stairs separating the cells from a substantial sized day room on the west side, with a corridor running the complete length of the wing allowing



The asylum building as it appeared on the first edition OS map, (Armagh Sheet 12, 1835)

access to all rooms and cells. The second floor had identical internal arrangements. On the exterior and running parallel with the ground floor cells, was a gallery type structures called walking sheds. It had a sloping roof at the first storey sill level and was sandwiched between the projecting fronts of both the scullery block and staircase block. It was accessed on all four wings from an entrance in the stair blocks.

The Radiating or “Annular Wings”

The angled wings that radiated from both corners of the north side of the central block had a slight variation in the use of a room otherwise they were identical in the internal and external arrangements on both floors as the front facing wings. Rather than a scullery at one end, the angled wings had a toilet situated on the north end of the wing. Within the “V” shaped space of the wings was a rectangular courtyard that was completely opened on the north side. On the south side of the courtyard was the Governor’s yard which could be access from external steps from board room and from the central stairs on the north side of the central block. Within the rectangular courtyard on the north side was a complex of build-

ings on each side in an L plan with a bath house annex on both sides attached to the heel of the L plan both sited in the Governors yard. A kitchen yard made up the area between both groups of buildings with laundry and kitchen sited on the returns. The kitchen had three ovens and the Laundry appears to have a circular tub with an area for drying. Running from the kitchen side towards the yard’s open end was a store, stable and scullery and on the laundry side was a privy and a scullery. The kitchen and store were interconnecting, the other building were accessed from the kitchen yard. Two triangular shaped airing yards were sited to the rear of both set of buildings, being enclosed on the three sides by the angled wings walking sheds, kitchen and laundry complexes and by a north facing enclosing wall.

The Work Shops and the Noisy Wings

As similar to four cell wings the division of space within both side elevations was identical. The internal arrangements on both floors consisted of four work shops and a straw room which was used for storing the bedding straw for the cells. The work shops ran from south to north with a return consisting of five cells and

corridor connecting the north end of angled wings with the fourth work shop creating a complete interconnecting panopticon. The cells situated in the returns housed the noisy and wet patients (more disturbed and incontinent). To the north end was the straw room which along with the return, the north gables of the angled wings and the north wall enclosed small rectangular airing yards. The largest use of space was taken up by the two triangular airing yards situated within the top and bottom V’s areas of the K shaped plan.

The Basement Floor

It is uncertain as to the arrangement of the division of space on the basement floor. However, from the 1875 plan for the alterations to the front entrance it appears that the basement floor was used to quarter the kitchen staff, maintenance staff, and attendants.

The 1837 Proposed Addition

In 1837 due to overcrowding and the limitations of the single cell panoptic design it was decided to extend the asylum in order to accommodate another hundred patients. William Murray one the original architects was asked to draw up plans for the extension. The 1837 plan consisted of four new wards two on each side with connecting day-rooms and four airing yards. The new build was to extend out from the north exterior wall towards the river. However, according to the 1862 Ordnance Survey map the extension was never built. One interesting observation from the proposed new build was the abandonment of the single cell and the adoption of the dormitory style ward.

The Second Phase of Construction 1860-62

By 1860 the problem of overcrowding was so acute that in order the ease the problem two blocks with canted towers on their ends were added to each side of the front elevation. The original build was 33 bays wide, the extension



The asylum building as it appeared on the third edition OS map, (Armagh Sheet 12, 1908)

increase it to 55 bays wide. The removal of four workshops two on each floor on both sides of the original structure significantly shortened the side elevations, completely severing the solid connection between the front wings and the angled wings at the returns on the north side. Unlike the front elevation it appears that only one block was added to the angled wing on the west side. The fourth workshop and straw room on the both sides were widened and converted into dayrooms/dormitories. The architect for this phase of construction was John Boyd and the builder was Richard Cherry. The cost for the additions and alterations was £5,794 12s 9d. (See fig 2 1908 OS map for the plan of the Hollow Building after the 1860-62 additions and alterations)

The Third Phase of Construction 1875

In 1875 alterations were made to the front entrance and a water tower built of stone in the style of an Italian campanile was added. It is uncertain as to when the Gothic style hospital church was constructed but it is thought that it was constructed around this time. Richard Cherry was also responsible for this phase of construction.

The Fourth Phase of Construction 1886-96

In 1886 Dr William Graham was appointed Resident Medical Superintendent. During his ten year tenure a programme of structural alterations, new builds and the installation of various types of equipment was carried out. (See chapter on Dr William Graham for a list of his works)

Dr Graham's New Asylum Hospital Known as "The Hill Building" 1891-1897

The architects for the new hill building were J.J. Philips of Belfast and the construction was carried out between 1891 and 1897 by Belfast based firm McLaughlin and Harvey. The new asylum hospital was for acute cases and was the first of its kind in Ireland. The publication "Buildings of Armagh" describes

the hill building in the following; "The symmetrical design is in the French Renaissance style and has steeply pitched and mansarded roofs. The silhouette is enlivened by decorative iron crestings, copper clad ventilating cupolas and massive stone chimneys; the central unit has two storeys and an attic decorated by a tower"

The cost of construction was £40,000 and the first patients were admitted in April 1898.

The same architects and builders were responsible for Roman Catholic Chapel which was consecrated in December 1896.

Alterations and Additions between 1901-1948

In 1900 John Charters Boyle the County Surveyor was responsible for planning new entrance gates. In 1901, 1903 and 1907 piggeries, slaughter house and attendants houses were built. Also single rooms were converted into dormitories as well as alterations to the corridors in the Hollow Building. Internal alterations were also carried out on the male side of the Hill Building. This phase of construction was carried out by Boyle's successor as County Surveyor Henry Richard Dorman. Between, 1937-38 renovations and modernizing was carried out at a cost of 30,000 and in 1948 alterations and additions were carried out by builders Ferguson and McIlveen.

Ancillary Buildings

The row of four red brick houses on the Loughgall Road beside the Orchard Veterinary Surgery were constructed in 1904 for married hospital attendants. In 1929 the County Council purchased Castledillion Estate and Mullinure Farm on behalf of the hospital committee. The Gardener's cottage replaced in the late 1930's was originally the lower gate lodge. In 1943 five Nissen huts were constructed to the rear of the hill building, three of them were utilised as wards. Three dual purpose buildings as they are referred to in the annual reports or

"The Villas" as they were officially called were opened in December 1956. The tuck shop was opened in 1954; the three red brick houses (known as the Doctor's Houses) constructed 1955 and the nurse's home opened 1957. In the late 1950's a former World War Two RAF wooden nissen hut was used as an occupational therapy department. A purpose built occupational department was constructed in the mid 1970's.

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Moral Management to Medicalisation

by Kevin Quinn

The Beginning

In 1817 mandatory legislation made provision for Ireland to become the first country in the western world to establish a system of public asylums for the insane poor. On the 11th July 1817 a bill for the provision of asylums for the lunatic poor became law. Armagh was chosen above Lisburn and Roscommon to be the first in a network of ten District Lunatic Asylums. In 1819 William Todd secretary of the Asylum Commission and the Archbishop of Armagh negotiated the purchase of four acres land in the townland of “Knockaboys” from a Robert Thornton for the construction of an asylum. On the 14th July 1820 the Lord Lieutenant and the Privy Council under the 1817 Act ordered the erection of the first District Lunatic Asylum at Armagh. Under the subsequent 1821 Irish Lunatic Asylum Act for the Insane Poor, the foundation stone for asylum was laid on the 21st May 1821 by the Sovereign of Armagh. Armagh Lunatic Asylum was built to the plan of Francis Johnston the celebrated Georgian architect (b Armagh 1760-1829). Johnston was architect to the Board of Works and was responsible for the panoptic, radial and classical style asylum plan. Construction was carried out by a local firm McCartney and Ballentine. The work was supervised by William Murray (b Armagh 1798-1849) a nephew of Johnston and his official assistant at the Board of Works. On its completion the total acreage of the site was 32 acres 2 roods and 8 perches, 7 acres under buildings. On the 10th December 1824 the building was handed over by William Murray to the Board of Governors. A memorial of 13th April 1825 declared the asylum ready for occupation for patients from Tyrone (27 patients) Donegal (26) Armagh (20) Monaghan (18) Fermanagh (13). The number of patients from each of the five counties in the Armagh district was on a quota system based on the 1822 census. On the 14th July 1825 Armagh District Lunatic Asylum, the first purpose built hospital of its kind in Ireland and the western world

under mandatory law admitted its first patients. A female by the surname of Geddes from Killylea was the first name to be documented in the Asylum Minute Book for admission. The total cost including purchase of land, construction, furnishings and equipment was £20,900 4s 5d. £2000 was received from the Lord Lieutenant and placed in the Bank of Ireland to cover running costs for the first year.

Armagh Lunatic Asylum 1825-1863.

Thomas Jackson was appointed manager of Armagh Lunatic Asylum. He had been in charge of the lunatic section of the Dublin House of Industry. Jackson had considerable experience in the treatment of the insane poor and was deeply committed to the moral methods of treatment. Jackson had been greatly influenced by the likes of William Tuke who had pioneered enlightened humanitarianism. The moral approach had been developed by the Quaker Tuke family in York and was practised in the Quaker Retreats at Donnybrook Dublin and near Richill in County Armagh. Jackson extended these principles of humane and enlightened care, first practised at Richmond Asylum in Dublin to Armagh and then to the new network of public asylums.

Curable or incurable

The new asylum legislation was unclear as to whether asylums were to be for the curable or incurable patients. In the early years at Armagh, anyone deemed to be incurable or a chronic case was excluded. Jackson was of the opinion that incurables “imbeciles and idiots” would not benefit from his therapeutic therapies and would only hinder the process of those he considered curable. He was also concerned with the possibility of overcrowding from such “unsuitable cases”.

Within a few years of opening, Armagh Asylum’s strict admission policy was soon abandoned due to the growing numbers of patients with chronic a condition seeking admission. By 1839, the patient quota for Armagh Asylum had surpassed its capacity of 105 to 119, peaking in 1848 to over 140, due to both Fermanagh and Monaghan being badly affected by the famine.

Employment as a therapeutic tool

Jackson was a strong advocate of employment as a therapy and this was clearly evident in the number of workshops in the asylum, 16 in total. He believed idleness would inevitable lead to incurability or idiocy. At Armagh he introduced selective employment for patients whose mental and physical conditions he believed could cope with such activity. Work was allocated based on what was thought appropriate for their gender and to what their mental condition would permit. Work therapy consisted of manual outdoor and workshop activities. This included stone breaking, farming activities, husbandry and weaving for the male patients, and for female patients sewing, spinning and assisting nursing and kitchen staff. Work therapy also brought economic benefits, as Jackson strived to achieve self-sufficiency especially in areas such as food and clothing.

Recreational activities

In a complete contrast to stone breaking, recreational activities included tennis and gymnastics. In 1839 an English traveller visiting the asylum commented that,

“Gymnastic exercises and a tennis court have been lately established”

It is somewhat remarkable for this period that Thomas Jackson had the foresight to introduce such original and innovative activities as part of the overall therapeutic environment.

The Asylum School

Another noteworthy achievement was the opening in September 1841 of a school initially for female patients by Thomas Jackson's wife Matilda who was the asylum Governess. According to the 1843 Inspectors of Lunatic Asylums report, the school had 36 students in attendance, 9 could read and write, 11 didn't know the alphabet and 16 had forgotten how to read and write. The curriculum consisted of counting, poetry, reading, reading the testament, history, tales and interesting stories. Mrs Jackson was of the opinion that the school played a crucial role in the rehabilitation of its students. According to Mrs Jackson, one girl who had been a patient for four years and was considered incurable began to show a remarkable improvement in her mental condition after attending the school. Within six months she had recovered and was sent home, "a good reader and writing tolerably". The inspector's report also points to a school for male patients but does not provide any details.

Struggle for control

By the 1830's Thomas Jackson's moral methods of treatment which chiefly consisted of employment, kindness, moral government and freedom from restraint came under persistent criticism from the medical profession which at this time was in its infancy when it came to lunacy¹. The debate basically centred on if insanity should be treated by moral or medical means. The not so hidden agenda of the medical profession was to wrestle control away from the moral managers and to leave them as Jackson expressed "a head keeper". The general tactic used to undermine the moral managers by the physicians was constant condescending attacks on their intellect, stating that they had no core of knowledge and that they were completely devoid of medical skill. This new emerging profession or an early form of psychiatry eventually won the battle for supremacy. In 1843 a new act proclaimed that the visiting physician would replace moral managers as the chief executives of the asylums. However, this victory by the medical profession over lay managers ignited an internal battle

within the profession between the visiting physician and the new position of Resident Medical Officer. This struggle continued until the 1862 Act placed the Resident Medical Officer in control and the then visiting physician became a visiting consultant. So the outcome of this three way struggle was the replacement of moral methods with primitive medical methods and custody which led to overcrowded and ineffective institutions.

1856 the Last Documented Year of the Moral Treatment Era

Managerial co-operation

The 1856 annual report appears to be the only existing detailed primary source for Armagh Lunatic asylum between 1848 and 1896. In 1856, Thomas Jackson still held the position of manager, his wife was the Governess and Thomas Cumming was the physician. Although Thomas Jackson was the author of the report, Dr Cumming's name does appear above his in positions held which probably indicates that control had shifted away from the manager but Jackson still appeared to have retained daily managerial responsibility. However, the report would suggest that managerial co-operation was the order of the day at Armagh, as Jackson refers to the continuation of the same system of management and treatment that had been in place in recent years. He also refers to a new joint power given to the physician and manager to admit urgent cases at their discretion.

Early intervention

The main themes running through the report is Jackson's firm belief that inmates deemed "curable" should always take precedence over "incurables" and that an early intervention was crucial for any recovery. He points to the fact that of the 67 inmates admitted on the application of their friends and the 16 admitted as dangerous lunatics upon the warrant of the lord lieutenant, only 3 of the latter had recovered compared to the 37 of the former and not only

had they recovered but they were eventually discharged. According to Jackson the new discretionary powers of admission had been most successful as some of the urgent cases admitted had been cured in the intervening period between their first presentation and the planned date for their formal admission.

Overcrowding

Overcrowding had always been a major concern to Jackson. The fear of "incurables" swamping the asylum was never too far from his mind. On this occasion he warns that if the asylum is extended to meet the pressing number of applications, admissions would have to be strictly regulated or else it would become the refuge of every "harmless object". The distinction was very clear to Jackson, the asylum was exclusively for the insane poor, preferably those deemed curable and the workhouse was for the sane poor. Within a decade Jackson's fear had become a reality, as two-thirds of inmates were chronic incurables the other third a treatable minority. Sometime between 1856 and 1861 Jackson's tenure came to an end, as by August of 1861 all asylum managers in Ireland were medical men. In 1863 Dr Robert McKinstry became Armagh Lunatic Asylum's first Resident Medical Superintendent, a position which would continue for over the next 130 years or so.

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Endnotes

¹ An indication of just how far medical treatments had progressed by the late 1890's was that in the financial year 1899-1900 for Armagh Asylum, £149 had been spent on tobacco and snuff compared with £5 0s 4d on medicines and surgery.

From Asylum to Hospital 1886-96

The work of Dr William Graham

by Kevin Quinn

In December 1886 Dr William Graham was appointed Resident Medical Superintendent for Armagh Lunatic Asylum. Aged just 26 he was the youngest occupant of such a post in Britain. Within his ten year tenure, Dr Graham propelled Armagh Lunatic Asylum to the position of being one of the leading public institutions in Ireland for the insane poor. From his appointment he began a programme of modernisation which included new builds, structural improvements and the installation of new systems which were all for the purpose of improving the patient's conditions and care. Dr Graham's work laid the foundations of the hospital that we know today. Dr Graham initiated nearly thirty works with the majority of them being done with staff and patient labour. His greatest achievement was the construction of "The New Asylum Hospital" or more commonly referred to as the Hill Building. The new hospital was constructed between the years 1891-97, at a cost of almost £40,000 and was the first hospital of its kind in Ireland for the treatment of recent, acute and infirm cases. The new hospital accepted its first admissions in April 1898.

Promotion

Dr Graham's important reforms at Armagh were soon rewarded with his promotion to the much larger Belfast Asylum on the Grosvenor Road in 1896 where he had been the assistant Resident Medical Superintendent before his appointment to Armagh. Dr Graham's first annual report was such a revelation that the Governors refused to believe it. His findings that the Grosvenor Road site was not fit for purpose were eventually accepted, and largely through his initiative the new villa colony system was established at Purdysburn in 1900.

Great Regret

Dr Graham's departure was deeply regretted by the hospital board and by the Inspector of Lunatics Dr George Plunkett O'Farrell.¹ Such was the loss, that it was felt that Dr Graham's achievements be listed in the 1897 annual report. According to the Inspector Dr William Graham had.

"During the period of his administration in Armagh, the asylum has been raised to the very front rank of public institutions for the insane poor; and when Governors look back at what the condition of the Asylum at the time Dr Graham took charge of it, and compare that past with its present condition, they must experience a feeling of satisfaction at the great good which has been accomplished by Dr Graham,...how many suffering persons have been restored to family life, who under different treatment would have remained as life patients, and how much brighter the surrounding, and, consequently, how much more contented must be the lives of all the patients"

Dr Graham's works as listed in the 1897 Annual Report.

1. A conservatory 100 feet long by 14 feet wide and 14 feet high.
2. A range of piggeries 47 feet long and 25 feet wide, with boiler house attached.
3. A surgery and medicine room has been constructed and fully equipped.
4. An Engineer's and Plumber's workshop, with all the necessary appliances, has been fitted up.
5. The entire dormitories, lavatories, and two day rooms of the older portion of the asylum have heated by a low pressure system.
6. The entire sanitary system

inside and outside the asylum has been reconstructed, providing new lavatory and water closet accommodation for every department.

7. The dining hall has been completely renovated and partly reconstructed. The roof lights and ventilators have been remodelled, and the area ventilated by an Aland's fan. The floor has been taken up, and the space underneath asphalted and ventilated, and new flooring laid in closely-jointed pitch pine. An orchestral platform has been built at one end of the hall, and fitted up with drop curtains and side scenes.

8. Attendants dining hall has been built adjacent to the general dining hall.

9. The kitchen has been completely rebuilt. It is now 35ft square with a high open timbered roof, ceiled and panelled in wood, and fitted up with the most modern approved apparatus. A new scullery has been provided, two pantries adapted to the requirements of the institution.

10. New stores have been built, including a specially ventilated meat store, spacious compartments, heated by hot water pipes, is also provided for clothes, bedding, groceries, etc.

11. A reception yard for stores has been formed, with glass roof, and electric communication established with clerk's office.

12. A new laundry has been built, and fitted up with washing machinery of the most approved type, while a series of Cypress-wood wash tubs have been provided in the annexe for hand washers.

13. In conjunction with the laundry, a disinfecting house has been erected and fitted with a Bradford Patent Disinfecting Apparatus

14. The hot and cold water supply to the male and female divisions has been reconstructed, and spring water has been laid on to both sides of the institution for

drinking.

15. The entire asylum has been painted, decorated, and furnished throughout.

16. A tiled general bathroom on the male side has been erected and fitted with patent white enamelled basins. The large swimming bath has been heated with a Bailey's Patent Noiseless Steam Injector. (This was a plunge pool that could bath up to 70 patients at a time. Single baths introduced 1910)

17. A series of internal and external hydrants have been provided as a safeguard in case of fire.

18. Gas lamps have been erected at the front entrance lodge, standard lamps at the front, side, and back avenues, and large bracket lamps at rear of buildings

19. The passage leading from the male divisions to the general dining hall has been graduated and tiled.

20. Electric tell tale clocks and fire alarms have been erected, and telephonic communication established between the new hospital, the old buildings, and the various departments throughout the asylum.

21. A mortuary has been erected opening directly on to the main road, in order that funeral corteges need not come into the asylum grounds. It includes four departments, a waiting room, two chambers for the dead, and a medical officer's post mortem room and pathological laboratory.

22. A new Roman Catholic Church, capable of accommodating 300 patients, has been erected. It is built of Armagh lime stone. With brick facing, and the total cost, including furnishing and heating, has been £1100.

23. A detached hospital of the most advanced type, completed in every respect, for recent acute and sick cases, has been built. The masonry is of Armagh limestone, with rock faced shoddies and cut stone dressing. The hospital is ventilated and heated on the Plenum system (a type of air conditioning). The floors are laid in polished block wood, and all the rooms are lighted by electricity.

24. A new chimney shaft 120ft high, boiler house and coal store, have been built.

25. Two new steam boilers, 27ft 6in. by 7ft. 6in. have been erected, and provided with "Green Economisers". (Named after Edward Green, the economist increased the efficiency of stationary steam engines)

26. Hydraulic rams to supplement steam pumps have been fitted up, and water pipes and ducts connecting them with the old and new building have been constructed.

27. A Pearn's Patent Pump (named after Frank Pearn, a pipe manufacturer in Manchester) has been erected, with pipes leading to old and new buildings.

28. Connection has been made between the high water filter cistern and the mains spring water cistern, so as to obtain a supply should the spring water from the filtering cistern fail.

Patient Care

It is evident from the Dr O'Farrell statement that the reforms introduced in patient care by William Graham were highly significant. Due to the loss of the annual reports between the years 1886 to 1896 which covers most of his tenure, it is uncertain as to exactly the nature of the reforms in patient care. However, an article giving a brief history of the asylum written in the early 1950's by TGF Paterson the curator of Armagh County Museum at the time does provide some insight into some of Dr Graham's reforms in patient care. (Paterson's source/sources are not listed)

According to TGF Paterson;

"When Dr Graham came to Armagh he instituted many needed reforms. At the time patients were liable to be treated as beasts if violent. The dormitories were cells with small barred windows in some of which on the ground floor patients of the more troublesome kind were bedded in straw on flagged floors, the cells being washed out each morning with water and seldom dry in the evening when the unfortunate inmates were returned to them. Dr Graham, however, changed all that new patients were bathed and fed upon arrival. Attendants were ordered to show kindness and patients were allowed out for walks in small groups...at

the same time he succeeded in inducing the committee to purchase a farm on the Loughgall Road thus enabling patients to be employed in useful work".²

Dr William Graham was an exceptional Resident Medical Superintendent whose far-seeing reforms brought about immense improvements in conditions for patients along with a more enlightened humanitarian understanding of their needs.

A Great Loss

Dr Graham took up his new position shortly before the opening of the new hospital in April 1898. The moral manager Thomas Jackson would have been delighted with the new build, as it separated those with chronic conditions from those with acute conditions and considerably eased the problem of overcrowding, the two things he constantly campaigned for. Dr William Graham passed away in 1917 aged 56yrs³. His death was due to complications from a fracture he had received whilst out walking.

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PRONI. HOS/27/1/2/72. 72nd Annual Report of the Armagh District Lunatic Asylum. 1897. TP Patterson. St Luke's Hospital. Armagh County Museum.

Endnotes

¹ Sir George Plunkett O'Farrell MD was born in Boyle County Roscommon in 1845, and was the son of Dr Harwood O'Farrell. He retired from the office of the Inspector of Lunatics in 1910 and received a Knighthood in 1911.

² Castledillon Estate and Mullinure Farm were not purchased until 1929.

³ Dr William Graham was born in Dundrod County Antrim in 1859 and graduated from QUB in 1882. He continued his studies in London and on the continent. His obituary said "he had a fine humanitarian spirit with a deep sympathy with the insane...endowed with great powers of organisation...he insisted on the highest standard of efficiency...much liberty was allowed...he insisted on outdoor work, consequently very little bodily restraint was ever needed. At the time of his death his title was Lieutenant Colonel William Graham M.D.

Extracts from Annual Reports

recounting the problematic years 1898 to 1901

by Kevin Quinn

Background to the decline in patient care

Within a year of the departure of the exceptional Dr William Graham Armagh District Lunatic Asylum quickly descended into a period of slack, shoddy and careless management which culminated in tragedy. The probable reasons for this uncharacteristic period were the loss of experienced staff within a short period of time, the inexperience of the new appointments, compounded by a somewhat detached and on occasion naive Board of Governors and their replacement by an Asylum Committee from 1898. This drift into limp management did not go unnoticed and was promptly recognised and acted upon by Dr George Plunkett O'Farrell the Inspector of Lunatics, the same person who a year previously had lavished so much praise on the institution and its management.

The Problematic Years 1898 to 1901

The annual report for 1898 provides an insight into the initial failings of management. A significant number of concerns had been raised by the inspector regards to different aspects of patient care and the general management of the asylum

Inspection 10th November 1898 by Dr George O'Farrell Plunkett

He began by congratulating the Governors on the completion of the New Asylum Hospital, the very first of its kind in Ireland for the treatment of sick, infirm and acute cases. He continued the praise by stating how comfortably it had been furnished, along with its electric lighting and the new heating system. However, according

to the inspector, "it was now in full occupation with the class of patient that it was not intended for". Dr O'Farrell stated "that it was very discouraging to see the new hospital being occupied by chronic working patients for whom the simplest of accommodation would have been suitable" and furthermore "it was not being properly utilised". Dr O'Farrell continued by stating that the two sections that should have been infection wings were now being inappropriately used by staff. One had been given over to accommodate nurses and servants and the other as a residence for the clerk/store keeper. The consequence of this was that ordinary sick patients were still been treated in the infirmaries of the old building. Dr O'Farrell recommended that the position of Clerk/Storekeeper be separated and the clerk to become non-resident and the post of storekeeper to become an unmarried position, being accommodated in the basement of the old building.

The Governors also did not escape his criticism. Dr O'Farrell voiced his regret that according to the records the governors had neglected their role as a visiting committee which had been regular past practice. In Dr O'Farrell's opinion "such visits showed a special interest in the patient bringing great sunshine into their lives".

Dr O'Farrell was also concerned with the use of restraint. Three male patients had received fractured ribs after struggling with male attendants in three separate incidents. He pointed out they had occurred within a 12 month period in a relatively small asylum. Dr O'Farrell was satisfied that the restraints were necessary but he was concerned that the attendants might have been slightly over zealous. He recommended that attendants should

be carefully instructed in how to deal with violent patients.

The use of a strait jacket or mechanical restraint on a female patient in Dr O'Farrell's opinion had broken the law. In this case the female patient had been put in a strait jacket for a total duration of 312 hours. Dr O'Farrell pointed out to Dr Lawless that the reason given for the application of mechanical restraint i.e. "to prevent her tearing and pulling off her clothing" was not one of the justifiable reasons specified in clause 11(1) of the Privy-Council Regulations, dated 14th April, 1897.

R Bourke, Junior, the local government auditor was extremely unimpressed with a £5 payment to Leicester water diviner. The new hospital had an inefficient supply of drinking water during the summer months. It seems that some committee members employed the services of a water finder to help alleviate the shortage by sinking a well. However, to quote Mr Bourke

"As there is no order from the Governors to employ a Gataker and I consider that the so-called services called "a water finder" cannot legally be paid for out of public funds. I disallow and strike out this amount of £5 (five pound sterling) and surcharge the same to Messrs. RJ McCrum, M Coyne and John Johnston, who signed the cheque and declare the same due by them and direct the amount be lodged forthwith with the treasurer to the credit of the Governors of the Armagh District Lunatic Asylum"

Inspection 3rd November 1899 & 2nd March 1900 by Dr George Plunkett O'Farrell

The conditions found in the asylum by the inspector on the 3rd November 1899 were far from satisfactory. He had grave concerns with the condition of the asylum

and the treatment of the patients. Dr O'Farrell considered it only fair to the responsible officers to postpone writing a report until he had again visited the asylum and could see how far the causes of complaint were of a temporary character and if they had been addressed.

Returning on the 2nd March 1900, Dr George Plunkett O'Farrell began by outlining the concerns he had found in November 1899. His findings were the filthy conditions of the bedding in some of the refractory single rooms on the female side. Some parts of the building occupied by patients such as No.8 Female Division was rat infested, which the matron stated "came out at night and alarmed the patients". The insufficient temperature maintained in the old building and the large number of broken panes, "notwithstanding the time of the year". The accumulation for many years of the patients clothes in the matron's stores. Dr O'Farrell also found in a good many cases that the male patient's clothing was shabby or torn and a few of the patients appeared to be in a neglected condition.

Improvement March 1900

On the return visited Dr O'Farrell stated "that it the four months that had elapsed between visits a great improvement in many of the cases had taken place. The windows have been glazed, rat holes plugged and this objectionable vermin have been got rid off except in the dining room and kitchen".

(November Inspection 1899)

On his November visit he had found some of the patients in the female refractory No.6, extremely noisy and excited with one or two lying on the floor or under the seats. Dr O'Farrell was most concerned about an imbecile girl who was wearing no stockings or shoes, "nor clothing of any kind except a quilted dress". He stated that there was no doubt that the child was difficult to manage and was degraded in her habits but with proper attention she could be made comfortable and kept clean and tidy.

November Inspection 1899

Dr O'Farrell then turned to the state that he had found the beds on his November visit. He had observed that the beds were unmade and the mattresses were folded up. On spreading out a few, he found that they had been wet during the previous night and had been folded up and left in a disgusting condition, instead of first being thoroughly dried. He also found the blankets folded up with the mattresses which were soiled with faeces. On discovering such a site he remonstrated very strongly with the matron for permitting such a state of things and thought her excuse that it was linen changing day "was very feeble indeed".

Return Inspection March 1900

On his second visit he found wire woven bed-frames neatly made up with hair mattresses and bed clothing folded up on top. However, on closer inquiry it was revealed that the wire frames and bed clothes were there for show purposes and what actually occurred was that these types of beds were removed each night and replaced with straw ticks with only a rug for bed clothing. When it was brought to the attention of the superintendent, he declared that he was totally unaware of the practice. Dr Plunkett O'Farrell recommended that both the superintendent and the assistant medical officer should in future be more involved in the management of this part of the hospital. Other observations by Dr O'Farrell were wet blankets had been returned from the laundry and that bed coverings only weighted 7lb 3oz, "which was inefficient for this time of year" instead of the recommended 20lb.

November Inspection 1899

Another area for concern was meals and their content. In November Dr O'Farrell had observed patients at dinner and according to the dietary scale the dinner for that day consisted of 8oz. bread; 1 pint coffee; 4oz rice; 1oz sugar, and $\frac{3}{4}$ pint of milk for each patient. He also remarked

his disappointment on the ending of the custom of making the rice more appetising by boiling it with Sultana raisins or currants and that the "coffee did not appear to contain anything like a sufficient quantity of milk".

Return Inspection March 1900

On his return in March he noticed that there was no milk at all in the coffee. According to the Superintendent, the storekeeper had informed him that that the milk supply was short that morning. However, the Dr O'Farrell informed the superintendent that this was not the case as he had inspected the pantry and had found a sufficient supply of milk. Dr O'Farrell further suggested that "a dinner of potatoes and milk would be preferable to stodgy boiled rice and coffee without milk" which he had witness being served. The service of the meal was also unsatisfactory; the tablecloths were not clean, the floor was also not clean and he suggested that the floor should be stained and kept with bees wax and polished.

Patient Observation November 1899 & March 1900

According to Dr Plunkett O'Farrell, it was regrettable that the committee had not yet made provision for the constant supervision of suicidal and epileptic patients. Until this has been done, "it would be deemed that the committee had failed in their responsibility towards these patients". He recommended the establishment of an observation ward and the employment of attendants for the sole purpose of observation especially at night.

The Blind Patient - November Inspection 1899

It was brought to the Dr O'Farrell's attention the case of a blind patient called Mr Mc Kinney. His wife had made a formal complaint to the committee regards his unclean condition. In order to examine

Mr McKinney thoroughly, Dr O'Farrell had him undressed and placed in bed. On examination he found the lower part of his flannel shirt and under drawers wet and soiled with faeces. He had an excoriation on one of his ankles, and between the buttocks and a large bruise four or five inches in diameter over the shoulder blade. The bruise seemed to be of recent origin, and had not been detected by staff. The Assistant Medical Officer explained that the patient had a habit of throwing himself on the ground and this may have caused the bruise. To prevent injury grey wadding had been placed around his upper body, which according to the inspector would have been difficult to keep free from vermin. Dr O'Farrell recommended that Mr McKinney should be nursed by trained staff. Although he had been in the care of a dedicated young attendant, "his needs could only be met with more skilful nursing". He further suggested that both the female and male sides of the new hospital should be put in the charge of a trained nurse and this could only be achieved by hospital training. He was also of the opinion that if Mr McKinney had been nursed by trained staff he would not have been in the state which he had found him. Dr O'Farrell also referred to the practice of allowing Mrs McKinney to wash her husband's flannels at home. In his opinion this was an improper practice and should not be allowed in a public institution.

Coroner's Inquest

Dr Plunkett O'Farrell referred to the case of a 34 year old male who had died from the result of a piece of bread becoming lodged in his throat. According to the Inspector the deceased was of the "lowest type of mental capacity, who had an uncontrollable desire for food". The patient would have rushed at food when he saw it; snatch it from other patients; "eat it out of the pig's trough and gnaw any old bone like an animal". Dr O'Farrell stated, "That taking these habits into consideration, his feeding was always a cause of great concern and one of potential danger". On the occasion of

his death there seemed to be a lack of supervision, as his habits had not been sufficiently guarded against".

Temperature and Fire Safety November 1899

The inspector was concerned with the substantial areas of the old building that were unheated and more importantly the neglect of fire safety procedures. He was somewhat surprised to find that both the new hospital and old building had no fire escapes and that no fire drill was being practised. It was pointed out that the new hospital had been fitted with internal and external fire hydrants with a sufficient water supply. However, the old building lacked the necessary piping. Dr O'Farrell recommended that the committee urgently address both concerns of fire escapes and fire drill.

Scenes depicted by Hogarth November 1899

Dr Plunkett O'Farrell acknowledged the great many improvements that had been achieved over the preceding 10 years. However, it was a matter for regret that he could not conscientiously report more favourably in some particulars. He recommended that the visiting committee go through Refractory D wing No.8 and witness for themselves the level of noise and turbulence which almost, "reflected the scenes depicted by Hogarth"¹. The state of chaos in his opinion was due to the, "cramping of turbulent and excited patients into insufficient and cheerless dayrooms, without any attempt to treat them individually which was further compounded by the absence of trained staff".

Sub-Committee March 1900

The board of Governors formed a sub-committee to report back on the concerns raised by Dr O'Farrell. The Sub-committee submitted their report in April 1900. They accepted most of Dr O'Farrell's findings and recommended that steps be taken to address these concerns.

Summary of Inspection May 1901

The year 1900 could be described as Armagh Lunatic Asylum's "Annus Horribilis". It appears that the death of two staff members probably could have been avoided. Both deaths were indirectly linked to the absence of constant supervision and a failure of management to adhere to proper procedures.

Theft and hopeless book keeping - Report May 1901

After some initial glossing over and tactful avoidance, the Superintendent somewhat reluctantly arrived at the neglectful and fraudulent activities of the storekeeper and clerk and their subsequent deaths.

"One would naturally conclude that this expenditure was incurred during the time when the Store Keeper's books were in a hopeless state of neglect, as already reported, and which resulted in the suicide of the unfortunate man, and in the culpable neglect of the late Clerk who has been shown to have been dishonest".

Dr Lawless concluded, "That the serious neglect of duty of the late clerk and storekeeper had marred the positive work of the past year and their actions had been a matter of great regret".

Auditor's report: "The unfortunate storekeeper"

The Auditor reported that he had been informed that the storekeeper had put an end to his life on the 3rd August, leaving his accounts very much in arrears. According to the Auditor, "the books were in a state of hopeless arrears being partially written up that they cannot be accepted as an accurate record, nor were they in a condition for audit". He further stated, "The records were so inefficient that it was impossible to produce a true record of the workings of the asylum". He continued by stating, "That no definite conclusion can be arrived at regards the extent and manner of misapplication of asylum stores alleged as the cause of the increased expenditure". The auditor

finally stated that he would try to produce an accurate record based on the available figures but will not take any responsibility for them.

The dishonest clerk

The auditor was less sympathetic towards the late clerk stating that when he was exposed he subsequently absconded. However, even in death the clerk was still going to be liable, as immediate steps would be taken by the auditor to recover the amount stole from his sureties. According to the auditor the clerk failed to lodge the sum of £52 14s 6d received from the Land Stewart for the sale of pigs. He was also accountable for a sum of £2 9s which he also failed to lodge and for a £1 for the sale of rags, lodging only £3 12s 3d instead of £4 12s 3d. Seventy three payments totalling over £2 on the pay sheets required stamps which the Clerk failed to do when paying the wages. He also wrongly paid 16s 9d to a suspended attendant and made five incorrect payments to contractors.

The buck stops here

The auditor firmly placed the blame for the sorry state of affairs with the Superintendent and the Committee. He stated that both had failed in their supervision of both the clerk and storekeeper. The Auditor sternly concluded that in future the Superintendent and the Committee should exercise the “intelligent supervision” over the books of the Asylum as stated in Article 8 of the “Asylum Accounts Order 1899” and to ensure by “periodical examination” that the various officers are discharging the duties for which they are paid. He even implied that if it would of have been possible he would have surcharged the Superintendent and Committee for the losses.

No free lunch

A somewhat irate auditor stated that he was left with no option but to surcharge some members of the committee for their monthly luncheons at rate payer's expense. The auditor referred to the previous annual report where he had

asked for the practice to be discontinued. He continued by stating that some of the members chose to ignore his advice so consequently he disallowed the expense, “which had been illegally placed upon the rate payers”. However, owing to the state of the books it was impossible to ascertain the exact cost of the meals. The auditor got round the problem of cost by examining eight different store accounts such as wine and meat before finally arriving at a surcharge of £5 17s 8d against the gentlemen who authorised the payments. The auditor concluded, “That it was only proper to state that a large number of the committee were opposed to the lunches and did not attend”.

Twine for bootlaces

According to Dr O'Farrell, that in the past he had frequently acknowledged the “liberality” of the governing body of Armagh Asylum. However, recently he could not help noticing, “a tendency to push the economy too far in some small matters”. Dr O'Farrell expressed his surprise after noticing that blackened twine was used in tying the patient's shoes. On inquiring he was informed that twine was cheaper than bootlaces. In his opinion this practice was fine when it came to ordinary paupers but was misplaced when it came to the insane. He continued by explaining that the difference between bootlaces and twine meant very little when it came to the rate payers but such a trivial detail might mean so much to “the hypertensive and diseased mind of an insane person”. Furthermore, according to Dr O'Farrell, “the use of twine could be used for self strangulation” therefore was unsafe.

By 1904

Unfortunately the annual reports for 1901, 1902 and 1903 are missing from the public records collection which does leave a significant gap in our knowledge in just how the asylum gradually emerged from the significant teething problems it encountered after the major change of senior staff in the

middle of 1897. However, it would seem from the 1904 annual report that the Asylum was now firmly in the grip of a stronger administration. The tone of the Resident Medical Superintendent's report was positive and enthusiastic. Dr George Plunkett O'Farrell inspected the Asylum that year and was generally satisfied with what he found but was still as thorough, noting that he had observed female patients walking on the grounds “with neither head coverings or shawls even though it was a cold and showery day”.

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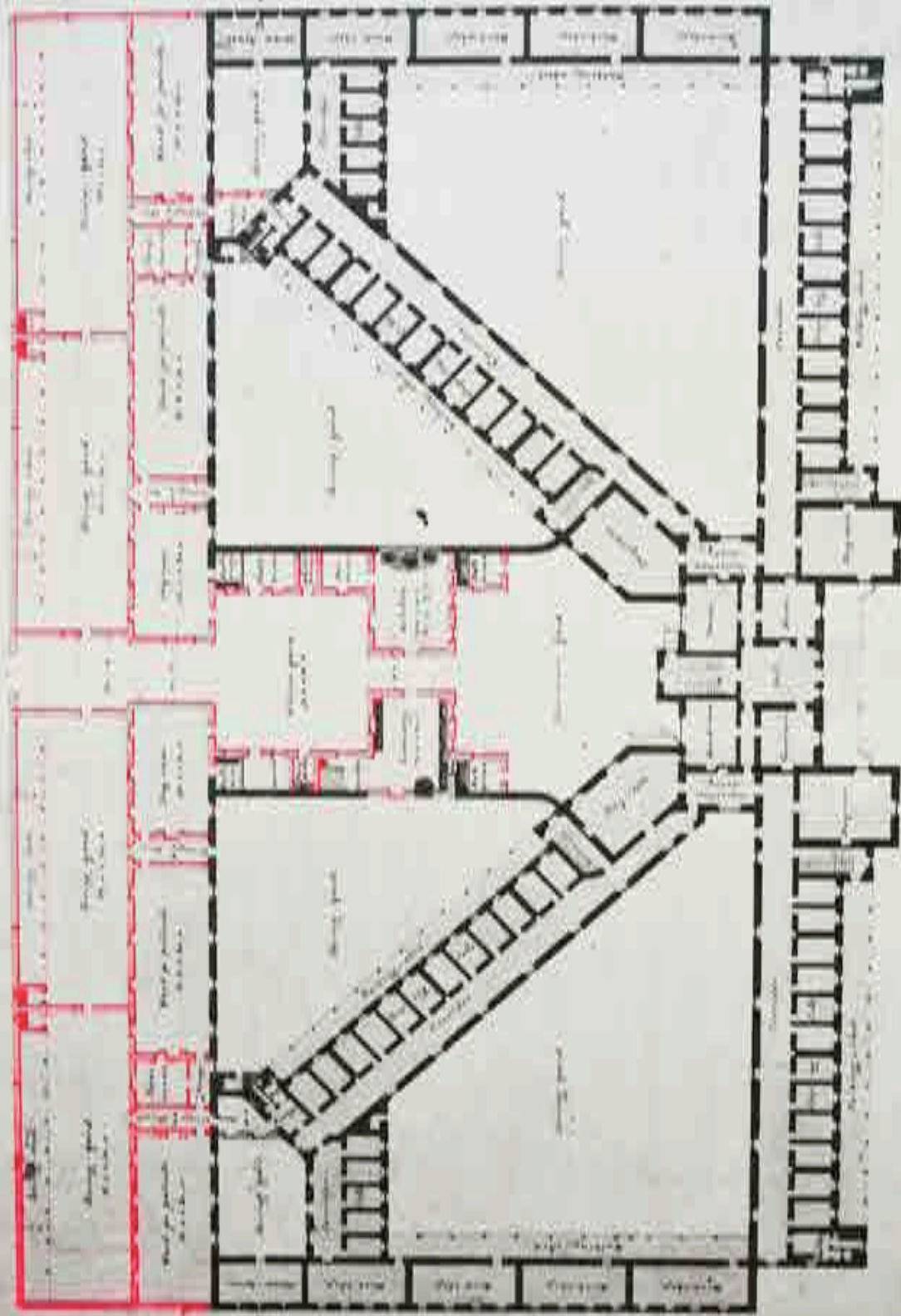
The asylum building as it appeared on the second edition OS map, (Armagh Sheet 12, 1862)



Resident Medical Superintendent, Dr G.R. Lawless



Staff pictured in the grounds of the hospital c.1975



PLAN OF THE ARMAGH LUNATIC ASYLUM showing a proposed Addition

for the accommodation of 100 patients.

William Murray Smith
To be built by the Armagh Lunatic Asylum Committee

March 22, 1874

See the plan of the proposed addition on the opposite page. The plan shows the proposed addition to the existing building. The addition is a long, narrow building with a series of small rooms, possibly for patients, and a larger room at one end. The plan is oriented with the main building on the left and the addition on the right. The title 'PLAN OF THE ARMAGH LUNATIC ASYLUM showing a proposed Addition' is written in the center. The date 'March 22, 1874' is written in the bottom right corner. The name 'William Murray Smith' is written in the bottom left corner. The text 'for the accommodation of 100 patients' is written in the bottom right corner. The text 'To be built by the Armagh Lunatic Asylum Committee' is written in the bottom right corner.