



THE COUNTY ASYLUM FOR PAUPER LUNATICS

Introduction

The County Asylum for Pauper Lunatics was built on the eastern outskirts of Wells at South Horrington. It therefore does not appear on the Sewerage Plan of 1860. However, we have included information on the Asylum as it forms an important part of the story relating to the poor and needy of the city in the 1800s. Other parts of the story included in this exhibition are the Union Workhouse and Courts and Tenements.

Historical Background

What was the care provision for the mentally ill before the establishment of lunatic asylums in the mid-nineteenth century? The options were principally:¹

❖ Private madhouses:

Before the 1890 *Lunacy Act*, people of means had to make private arrangements for any lunatics in the family. Typically, they were placed in private madhouses which were licensed by justices of the peace, and were examined by government commissioners.

❖ Workhouses, houses of correction or prisons:

Pauper lunatics were dealt with locally under the poor law, vagrancy law or criminal law. They were therefore likely to end up in workhouses, houses of correction (places for the punishment and reform of the poor, convicted of petty offences through hard labour) or prisons. Workhouses also began to contract out to private madhouses the care of the more challenging lunatics that they had become responsible for. The care provided to these people, and the conditions in which they were kept, was often terrible and the report from the select committee set up in 1807 to examine these conditions noted that they were 'revolting to humanity'²

¹ <http://www.nationalarchives.gov.uk/help-with-your-research/research-guides/mental-health/> (accessed 17 Jan 2016)

² S Marshall, *Mendip Hospital, An Appreciation*, (Melrose Press, Ely, 2006), p 4

Following the 1808 Act for the better Care and Maintenance of Lunatics, being Paupers or Criminals in England, known as Wynn's Act, justices of the peace were encouraged, but not obliged, to build county lunatic asylums to house any pauper lunatics in their county. In 1845, this became compulsory with the County Asylums Act which together with the Lunacy Act of the same year, formed mental health law at that time. The 1890 Lunacy Act gave them a wider role, and patients with means also began to be admitted to asylums.

The County Asylum for Pauper Lunatics, Wells

Introduction

Somerset had been slow to set up its own asylum and it was not until the 1840s that the Somerset justices put in motion the creation of a county asylum; land in Wells was purchased in 1844 and by 1848 the asylum, known as The County Asylum for Pauper



Figure 1 Wells Lunatic Asylum. Reproduced with kind permission from Wells & Mendip Museum Library

Lunatics, was completed and up and running, serving the county and the city of Bath until the opening of the Western Joint Asylum (Tone Vale) in 1897. The building, shown in figure 1, was designed by George Gilbert Scott and William Moffat, his partner.

Gilbert Scott (1811 – 1878) was a prolific and famous English Gothic revival architect, chiefly associated with the design, building and renovation of churches and cathedrals. His buildings included: The Albert Memorial, Kensington Gardens, London; Midland Grand Hotel at St Pancras Station; and, St Mary's Cathedral, Edinburgh (Episcopal).

Profile of Patients

“The first patients were drawn from three sources: the workhouse, licensed house (sometimes known as ‘private Bedlams’) and from their own homes.”³ The images in figures 2 and 3 are of the first male and female patients admitted to the asylum.



Figure 2 Lithograph of the first female patient admitted to Wells Asylum, 1848. Reproduced with kind permission of South West Heritage Trust. Held at Somerset heritage Centre (DD\X\JENS/7)



Figure 3 Lithograph of the first male patient admitted to Wells Asylum, 1848. Reproduced with kind permission of South West Heritage Trust. Held at Somerset Heritage Centre (DD\X\JENS/7)

³ Dr MS Hervey, *Mendip Hospital Under its Physicians Superintendent*. Lecture given 20/10/2000

The occupations of patients being admitted were highly varied as this table from the 1859 Annual Asylum report shows:⁴

Showing the Occupation of Patients admitted in 1859					
MALES				FEMALES	
Agricultural labourers	16	Railway Labourers	5	Agriculture	8
Baker	1	Philosophical Instrument Maker	1	Charwoman	6
Blacksmiths	2	Paler Maker	1	Domestic Servants	11
Butchers	3	Pensioners	2	Knitter	1
Basket Maker	1	Policeman	1	Gentlewoman	1
Cabinet Maker	1	Porters	2	Glove Maker	1
Coal Hauler	1	Sailors	3	Straw Bonnet Maker	1
Currier	1	Servants	2	Household work	15
Druggist	1	Shoemakers	2	Labourers' Wives	8
Farmers	4	Soldiers	2	Needlework	6
Gamekeeper	1	Tailors	4	Laundrywomen	2
Grooms	2	Thatcher	1	Paupers	3
Innkeeper	1	Woodman	1	Schoolmistress	2
Hawkers	2	Weavers	3	Shoebinder	1
Masons	2	No occupation	4	Shopkeeper	1
Miners	2			No occupation	6
Total	41	Total	34	Total	73

The annual reports also give insight into how psychiatric conditions were classified in the early days.⁵

Showing the Forms of the Disorder in the Admissions of 1859			
FORM OF DISORDER	MALES	FEMALES	TOTAL
Mania	29	17	46
Ditto, Recurrent	10	18	28
Ditto Puerperal	0	5	5
Dementia	3	4	7
Monomania	2	1	3
Melancholia	11	18	29
Moral Insanity	1	0	1
Congenital Idiocy	1	1	2
Epilepsy	5	5	10
General Paralysis	5	1	6
Delirium Tremens	6	0	6
Fatuity	2	3	5

⁴ Asylum Annual Report 1859, p 36, South West Heritage Trust (D\H\men/2/3/1)

⁵ Asylum Annual Report 1859, p 39, South West Heritage Trust (D\H\men/2/3/1)

The causes of the disorder are also reported on.⁶

Showing the causes of the Disorder of those admitted in 1859					
MORAL	MALE	FEMALE	PHYSICAL	MALE	FEMALE
Disappointment	0	1	Accidental Injury	6	1
Dread of Poverty	0	1	Sunstroke	1	0
Fright	0	2	Disease of Nervous Centre	9	3
Grief	5	3	Fatuity	1	3
Loss of Property	4	0	Previous Illness	7	5
Love & Jealousy	0	1	Hereditary Predisposition	9	21
Religious Excitement	4	2	Intemperance	12	5
Bad Education	1	0	Puerperal Disease	0	5
Embarrassed Circumstances	0	2	Congenital	3	4
Remorse	1	1	Ill treatment	0	2
Total	15	13	Total	48	49
			No cause assigned	12	11

The First Physician Superintendent

Dr Robert Boyd (1808-1883) was the first Physician Superintendent to be appointed in charge of the Asylum. He left the posts of Resident Physician, Marylebone Infirmary and Lecturer, Charlotte Street School of Medicine to take up the position in Wells. His qualifications were: M.R.C.S (Membership of the Royal Colleges of Surgeons) – aged 22, graduated M.D, Edinburgh – aged 23.

Dr Boyd was one of several enlightened medical practitioners who were determined to provide better and more humane treatment of individuals suffering from mental illness. As Susan Marshall notes in her book *Mendip Hospital, An Appreciation*, his opinion was: “It is to be hoped that the prejudice which has so long regarded lunatic asylums as places of ignominy and torture, may through the modern benevolent treatment be removed, and that they may be looked upon not as prisons for the detention of offenders against society, but as hospitals for the alleviation of the sufferings of the most helpless class of human beings”.⁷ He was clearly a compassionate man. And as Pat Jenkins said in her article in the Family Tree Magazine: “During his 21 years in Somerset, Dr Boyd laid the foundations of a caring, therapeutic community”.⁸

The Board of Trustees were also shown to be supportive of best practice. The Asylum Annual Report of 1865 includes a detailed description of Dr Boyd’s trips to many other

⁶ Ibid

⁷ S Marshall, *Mendip Hospital, An Appreciation*, (Melrose Press, Ely, 2006), p 5, quoting from: *First Annual Report of the Somerset County Lunatic Asylum for Insane Paupers, from 1st March to the end of the year 1848*

⁸ P Jenkins, *Mid-19th century treatments and records of the Somersetshire Asylum* (Family Tree Magazine, May 1995)

asylums around the country, at the instigation of the Board, to identify improvements which could be introduced in Wells. Detailed recommendations were made following these visits.

Inspection of Asylums

Asylums were inspected by The Commissioners in Lunacy (established in 1845) and reports written. Their report of 1861 commented on the wards being “*cheerless and depressing by reason of [...] and the want of simple decorations and objects of character*”. In 1862, the asylum’s annual report showed that this concern had been acted on: money had been spent on decorating the interior of the asylum with prints, engravings and ‘ornamental papers’.

One man was clearly moved by his treatment at the asylum and penned the following song:

A poem by Thomas White, 1852⁹

*This mansion is on the decline of the hill
With rustic scenes around.
The bright sun on its towers shine
To shade the beauteous grounds.*

Chorus:

*In the morning when it rises
It flows into my heart
And brings to mind I have
A faithful friend left yet*

*And when I trace the valleys round,
It reminds me of past days spent
And tells me I am not confined,
Which gives my heart content.*

Chorus

*I love to feel the breezes blow
And the glorious sun shine bright;
He is like my older friends
Who depart from me at night.*

Chorus

⁹ Ibid

Patient Treatment and Care

Dr Boyd's treatment and care of his patients contrasted starkly with that of some other institutions where insanitary conditions were the norm, and restraint with chains and handcuffs was frequent. Patients, or lunatics as they were called, were “*dehumanised by brutality and neglect*”¹⁰. Boyd's approach was to:

- ❖ Treat bodily health as well as mental health.
- ❖ Apply occupational therapy through suitable work, such as agriculture and gardening for the men and needlework and household tasks for the women. Analysis of figures in the Annual Report of 1859, shows that on average almost half (45%) of patients were in some form of occupational therapy.¹¹
- ❖ Provide recreational activities for the enjoyment of patients. In the first year of operating patients had visits to Cheddar Gorge, the circus, the Review of the Yeomanry Cavalry, church and the cathedral. Other activities included dancing, participating in sports such as cricket, reading books and indoor games.
- ❖ Promote better personal hygiene including twice weekly baths.
- ❖ Treat patients with respect.¹²

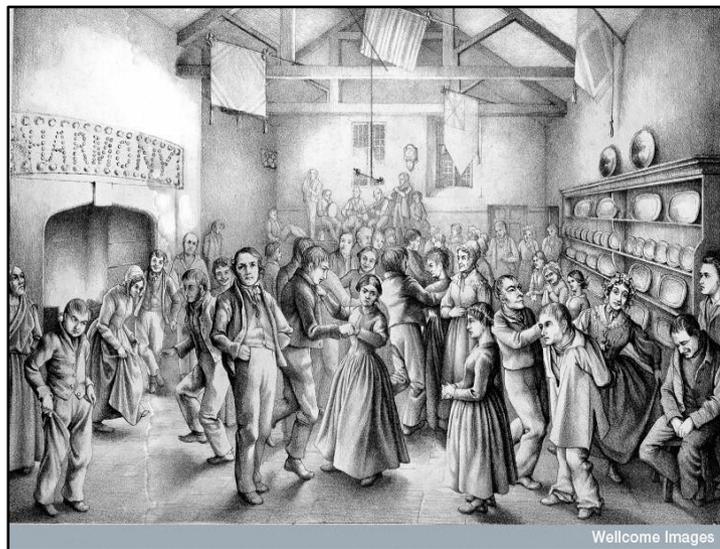


Figure 4 Mentally Ill patients dancing at a ball at Somerset County Asylum. Process print after a lithograph by K.Drake c. 1850/55. Published: Backhouse Wells & Ackerman & co [London] (96 Strand). Reproduced with the kind permission of The Wellcome Library, London

Respect was an important rule of the asylum. Orders laid out at the start included:

- ❖ “*That no patient be struck or kept in perpetual seclusion*”
- ❖ “*All attendants be instructed to treat their patients kindly and indulgently and never to strike or speak harshly to them*”¹³

¹⁰ S Marshall, Mendip Hospital, An Appreciation, (Melrose Press, Ely, 2006), p 17

¹¹ Asylum Annual Report 1859, p 36, South West Heritage Trust (D\H\men/2/3/1)

¹² D Duncan, *The Mendip Hospital*, 1958

¹³ Ibid

Rules in 1877 included:

- ❖ *“The cook was to be civil and courteous to everyone with whom he may be brought into contact”*
- ❖ *“Any attendant or servant who shall strike any patient or use unnecessary force or violence, or be found intoxicated, may be at once discharged”¹⁴*

Restraint was used very little and only as a last resort. Visiting Justices in 1850 noted: *“It is a great satisfaction to see persons so unhappily afflicted, many of whom were received with the marks of long continued mechanical restraint upon their persons, now entirely free from it”*.¹⁵ The annual report of 1859 showed only 11 incidents of restraint for the entire year.¹⁶ Seclusion was also a last resort but was used when required and in the same report was shown to have occurred 63 times over the year, an average of about 5 times a month.

Plans of the building show that men and women were segregated and further segregation was used according to the nature of the patient’s condition and other factors. This was a common approach taken by asylums. Appendix 1 shows a plan of the Asylum c. 1900 illustrating how extensive the buildings and grounds were.

Demand for Places

Over the next decades demand for places in the asylum grew leading to further building work to expand the premises, sometimes having to resort to temporary accommodation. Some patients were temporarily housed in other asylums during building work. The following table shows how demand grew over 50 years

Date	Nos of patients
1848	284
1854	363
1862	520
1876	668
1879	742
1889	864
1904	898

¹⁴ Ibid

¹⁵ Ibid

¹⁶ Asylum Annual Report, 1859, p36, South West Heritage Trust, (D\H\men/2/3/1)

The Wells asylum, in common with other asylums, found that it was increasingly acquiring patients from workhouses who did not want responsibility for the mentally ill. In the Asylum Annual Report of 1865 it was reported that the number of “*feeble and paralytic cases sent from workhouses*” was increasing and that this had been because of “*the change in law, rendering pauper lunatics chargeable to the (workhouse) Union instead of the parish*”.¹⁷ The report went on to state: “*Under the existing law there is every inducement to convert all sick, troublesome, and aged paupers into lunatics*”. This became an even bigger problem from 1870 when workhouses were given a grant of 4 shillings per individual sent to the asylum. Much of the increase in demand for places over the decades was as a consequence of individuals coming from the workhouse, leading to overcrowding and a struggle to carry out the level of care that asylums sought to deliver. Some patients were ill because of the conditions within the workhouse from which they came. With suitable treatment and care, they recovered but it was considered inhumane to return them to the conditions of the workhouse and with no other place to go, they remained in the asylum.

What treatments were used?

In addition to the measures outlined above, a wide range of treatments was employed. Susan Marshall writes that in the early days these “*were crude, drastic, sometimes effective, and probably always unpleasant, with the possible exception of warm baths. It could be a case of ‘kill or cure’*”.¹⁸ In the early days, knowledge of psychiatric conditions was poor and consequently much treatment was experimental. Today we have a vastly different picture and we need to acknowledge the numbers of mentally ill patients over the years who have submitted, willingly and unwillingly, to different treatments which has considerably informed psychiatric care and led to its improvement.

Self sufficiency

From the outset, the asylum was set up to be as self-sufficient as possible. It had its own gasworks for heating and light, sewage works, water supply, vegetable garden, some agricultural land and workshops for a variety of trades carried out on site such as carpentry, plumbing, shoemaking. There was also a tailor, brewhouse and bakery. The patients worked in many of these as part of their occupational therapy.

¹⁷ Ibid

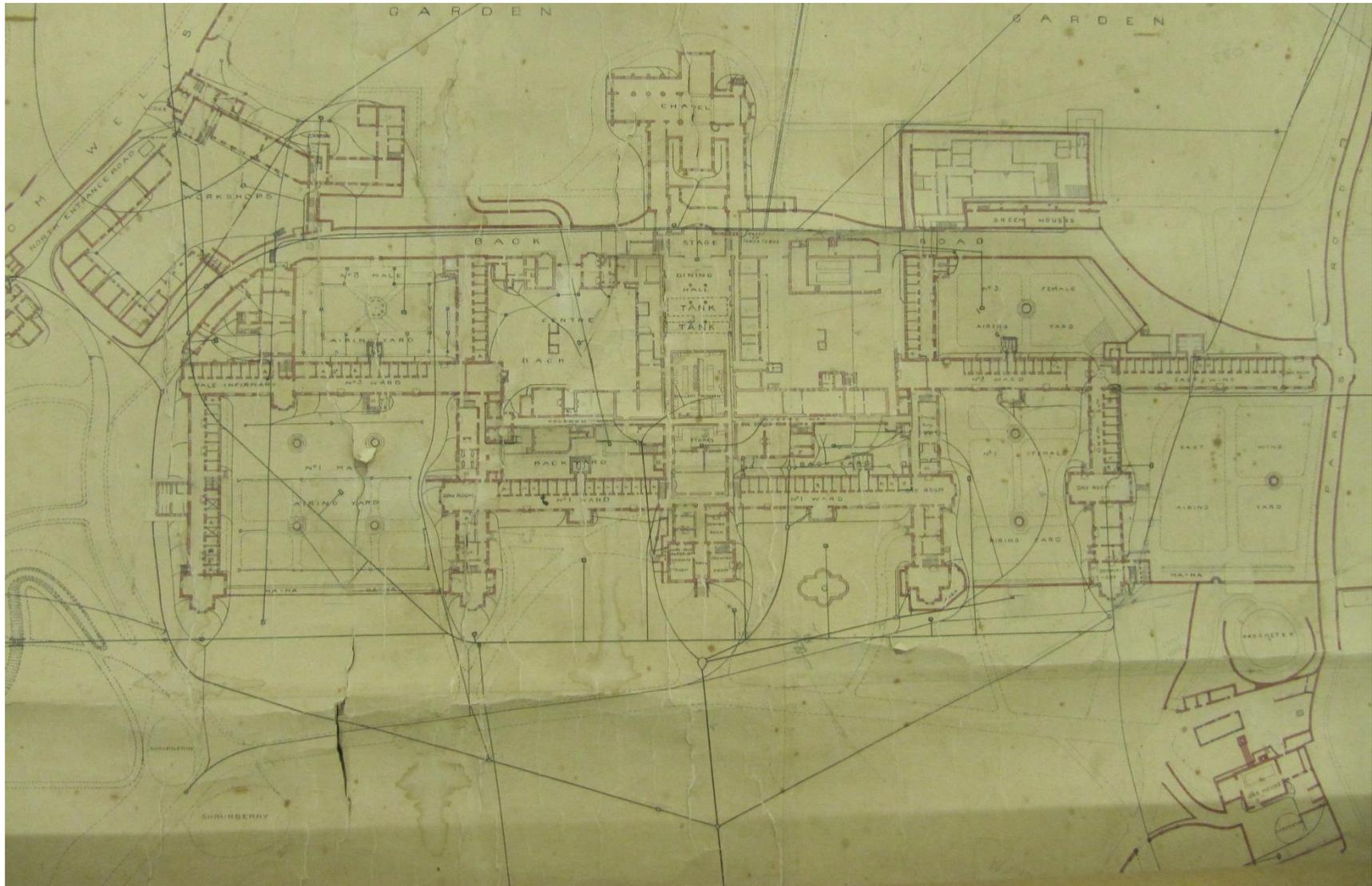
¹⁸ S Marshall, *Mendip Hospital, An Appreciation*, (Melrose Press, Ely, 2006), p 16

Later years

This research has concentrated on the early years of the asylum. However, the principles and approach laid out in those years, which put the well-being of patients first, continued to inform its development. Throughout its life, it was highly respected as a place of good care, treatment and safety for mentally ill patients. Known by different names over the decades - Somerset and Bath Asylum, Wells Mental Hospital, Somerset and Bath Mental Hospital (Wells) and Mendip Hospital (from 1948) – the asylum finally closed in 1991 following a complex closure programme and the buildings were converted to houses and flats. In a link with the past, charitable work with individuals across the Mendip area who are affected by mental health issues has continued on part of the original site (by Mendip Vale Workshops between 2002 and 2010, then by Heads Up since 2012).

If you would like further information on the history of Wells and its buildings, you are welcome to contact or visit Wells City Archives (archives@wellsmuseum.org.uk) and Wells & Mendip Museum (admin@wellsmuseum.org.uk).

Appendix 1



'Somerset and Bath Lunatic Asylum', c.1900. © Wells City Council Archives (WCC/3401/2).