The lunatic asylums

The asylum system of containment of lunatics and idiots was early forced upon the administration of the Colony by the growth of population, which by 1810 had increased to 11,566. This expansion posed serious sociological problems arising from an increase in indigency, as prisoners who had completed their sentences, or who had been pardoned or emancipated, remained in the Colony and were unable or incapable of supporting themselves from the limited opportunities available. The convict segment was also much increased, and these two groups provided a reservoir which threatened the harmony and even the security of the Colony. The loose system of supervision with minimum restraint was no longer adequate for lunatics and more formal methods and institutions for security were established. There was no fine distinction drawn between social incompatibility and insanity, and the goal was the common repository for both groups.

Castle Hill Asylum

Lunatics were confined in the town goal at Parramatta where conditions even in a rigorous age were harsh and unrelenting. Crowded with other prisoners, preyed upon, abused, subject to the vicissitudes of inmates and staff alike, they drew Macquarie’s commiseration on ‘the unhappy condition of persons labouring under the affliction of mental derangements’. Macquarie’s sympathy, enhanced by the pressure on space at the Town Goal, conditioned him to allot the buildings on the farm lands at Castle Hill specifically for an asylum in 1811.

Despite his prediction that ‘every provision that humanity could suggest has been made for their accommodation and comfort’, the buildings were poorly constructed, in a state of decay and unsuitable for the purpose. Nonetheless, it was a distinct improvement on the accommodation at the goal, and there is evidence that convicts feigned insanity to secure transfer from the goal to the asylum. It was soon overcrowded, with patients sleeping in the kitchen, and, due to its distance from Sydney, inspection and maintenance of its facilities were neglected.

The control of the asylum was vested in a non-medical Superintendent responsible to the Governor and not to the Principal Surgeon. Apart from the Superintendent, it was staffed by convicts, chosen haphazardly and without consideration of personal capacity for these duties. It was to Castle Hill that William Bland was sent in 1814 as a professional prisoner and the first resident medical officer. It is no wonder, knowing of Bland’s temperamental and personal difficulties that he was soon complaining that George Suttor, the Superintendent, was interfering with him in the performance of his medical duties. It was this interference, as much as his disgust with the standard of accommodation and regime, that conditioned Bland to request a transfer some fourteen months later.

The principle of a resident medical staff to the asylum was established in advance of its time when compared with the asylums in Great Britain. Equally enlightened were the rules and regulations drawn up by Governor Macquarie for the conduct of the asylum with insistence on cleanliness, comfort, humane treatment, recreation, medical attention and records.

George Suttor, landowner and free settler, was appointed second Superintendent (there is no information available to identify the first Superintendent). He was a humanist with a reputation of personal integrity and dedication to the cause of the under-privileged. His administration was marred by excess bureaucracy, difficulties with staff and discipline, and constant bickering between the medical and civil establishments. He was dismissed in 1819 and replaced by William Bennett, largely due to the contriving of Surgeon Parmeter to obtain medical control. Parmeter succeeded Bland and was assisted by an Assistant Surgeon, who was non-resident.

Suttor was replaced as Superintendent by William Bennett at a salary of £50 per annum. This circumstances of his dismissal were a callous injustice to one, who strove conscientiously to fulfill his duties under trying and difficult circumstances, lacking support from the Governor and frustrated by his medical antagonists.

The Castle Hill Asylum was an improvisation to meet the immediate needs of the Colony, and as such it was inevitable that it must be replaced as the demands upon it increased.
Liverpool Asylum

In 1825 a Grand Jury reported adversely on the standard of care and adequacy of the buildings at Castle Hill, and recommended ‘that these afflicted and unfortunate persons should be secured in a proper hospital more directly situated in the vicinity of the town’ (51). When this report was made the Castle Hill Asylum was accommodating twenty-seven male and eight female patients.

The report was expedient to Governor Darling as the land at Castle Hill had been granted to the Church and some other arrangements was necessary to give effect to this grant. Ignoring the recommendation for ‘a proper hospital’, Darling allotted the Court House at Liverpool as the Government building which afforded the best and ‘indeed the only means of accommodating them (the lunatics) at the moment’ (52). The problem was urgent. The accommodation was so strained at Castle Hill that a number of lunatics were lodged in the Hyde Park Barracks – a matter of some concern to the Superintendent of Convicts.

The first Superintendent at the Liverpool Asylum was probably William Bennett. It is not certain when, or how, he ceased to occupy this position. His successor was a Mr Lloyd who was probably appointed in 1827, and promptly removed in 1828, to be replaced by Thomas Plunkett, then Superintendent of the Convict Barrack at Parramatta. His salary was £100 per annum plus £32.10.0 lodging allowance. Plunkett’s tenure lasted until the establishment of the Tarban Creek Asylum in 1838, and the appointment of the first lunacy administrator with specific experience – Joseph Thomas Digby.

The basis of the administration and regime at the Liverpool Asylum did not differ significantly from that of Castle Hill. There were but three units of salaried staff authorised, including the medical service. The remainder were bonded convicts.

The cost of the asylum was a constant pinprick to the Government, and, as the staff and patients were almost exclusively convicts, expenditure was kept to a minimum. Such free settlers as were admitted were charged 7/- per day, which was met by guarantors or from their estates unless they were paupers, when the Government met the cost from the Civil Purse. After 1836 the proportion of costs involving medical salaries and medical stores were paid from the Military Chest.

Central supervision over the asylum was by monthly reports from the Superintendent to the Governor through the Colonial Secretary. Medical records were maintained and diagnoses were made and annotated by the medical staff. With increasing emphasis on forms of civil administration after 1827, the monthly reports and supervision became the prerogative of the Colonial Secretary rather than of the Governor per se.

Just as Castle Hill ceased when it had served its immediate purpose, so also the passing of the Liverpool Asylum was inevitable when it could no longer meet the needs of a rapidly growing population. In 1838 it was replaced by the Tarban Creek Asylum (now the Gladesville Mental Hospital).

Tarban Creek Asylum

In 1837, following representations from Governor Sir Richard Bourke, Joseph Thomas Digby was selected in England as Stewart (Superintendent) of the proposed new asylum at Tarban Creek, and his wife was likewise appointed Matron. So commenced an era of psychiatry which was to become the dominant arm of the Government Medical Service under the later regime of Frederick Norton Manning. There was now, with Tarban Creek, an institution built specifically for its purpose, under a Superintendent with previous experience and training in the care of the insane. Commencing also was a period of bitter friction and competition between medical and non-medical administrators, which had not subsided when the author was appointed Inspector General of Mental Hospitals in 1961.

The asylum opened on 29 November 1838, when the female convict attendants were transferred from the Liverpool Asylum together with female patients from the female factory at Parramatta. Male patients were transferred in 1839 from the Liverpool Asylum, which then ceased to function.
Tarban Creek received both free and convict patients, the proportion of the former increasing as transportation diminished. Correspondingly, the establishment was varied towards a greater content of civil (free) staff to care for private and free patients, with the convict staff catering for its own group and pauper lunatics.

The admission of free patients brought complications in the financing of the asylum. Should there be some reimbursement from colonial funds for the care of pauper lunatics, as distinct from expenditure on the care of convicts now financed from the Military Chest? A Board of Enquiry was appointed under the chairmanship of the Colonial Secretary to report on this issue at the Tarban Creek Asylum and the General Hospital. The Board recommended a per diem payment of 1/9 per patient. Although this was implemented as the General Hospital it was never introduced at the asylum. Governor Gipps, realising that the transportation system was doomed, decided the asylum should be retained wholly as a colonial institution and its expenditure met from colonial sources.

Tarban Creek Asylum was the first Government medical institution to be granted full civil status, preceding the General Hospital by nine years. This action is interesting in reflecting the opinion of John Vaughan Thompson, one of the members of the Board of Enquiry, that the Tarban Creek Asylum should be classified as a hospital – an opinion that was vigorously and successfully pursued by his successor, William Dawson, in his opposition to Digby as Superintendent.

Digby was a conscientious administrator and firm believer in the existing philosophy of insanity, viz that it was due to moral causes associated with undue social and psychological stresses. Therapy emphasised ‘close and friendly association with the patient, intimate discussion of his difficulties and daily pursuit of purposeful activity’. This philosophy was the underlying factor in the struggle for control by medical staff, in the belief that only with medical control could a sympathetic therapeutic milieu be maintained in each institution.

Medical staff continued in full-time attachment to the Tarban Creek Asylum, from the staff of the Deputy Inspector of Hospitals, who demanded and received quarterly standardised return of admissions, discharges, deaths etc. The assistant surgeon had supervision of those patients actually ill, but no control over the others or the conduct of the asylum. All orders of admission etc. were addressed to Digby.

Digby’s administration of Tarban Creek Asylum is an important milestone in the history of psychiatry in this State. His was an endless fight against frustration and opposition, and yet withal there is continuing evidence of his strong dedication to the welfare of his charges. He was pilloried for his failings and but grudgingly acknowledged for his successes.

His deposal commenced with a series of letters published in the *Sydney Morning Herald* in 1846, under the nom-de-plume ‘Iatros’, and obviously written by a medical man, which stated the case for medical executive control over the asylum. A Select Committee of Enquiry of the Legislative Council twice reported on this principle, the second report of which recommended that ‘it was indispensable that the head of the institution should be a medical man’. The report recognised Digby’s services and proposed that his services should be retained as Keeper or Steward. Other recommendations forecast a change in the official attitude to the function of the asylum, and dealt with staffing, inspection, registers, accommodation, recreation and finance.

So ended the administration of Digby, and Dr F. Campbell was appointed the first Medical Superintendent and commenced duty on 1 January 1848. Digby remained as Steward until 1850 when he was dismissed after two further Boards of Enquiry and returned to England. He was responsible for a change in attitude on staffing from convict members to salaried staff with internal training programmes. During his administration legal procedures were developed for the admission and transfer of patients; for the protection of the liberty of persons committed; for the admission of voluntary patients; for the establishment of visiting days, and for official inspections. Many of these improvements were incorporated in the *[Dangerous Lunatics Act of 1843]*.
Campbell remained as Superintendent of Tarban Creek Asylum until the appointment of Norton Manning in 1867. Campbell’s fame rests upon his reputation as a clinician. He introduced concepts of non-restraint, adequate diet, planned recreation and clinical regimes. He failed as an administrator and was personally criticised to Henry Parkes by Surgeon George Walker as ineffectual.

Dr Frederick Norton Manning is an important name in Australian psychiatry who reorganised the asylums into a central system of administration, the pattern of which remained essentially unchanged until the Mental Health Act of 1958.

He was appointed by Henry Parkes following yet another commission of Enquiry into the Tarban Creek Asylum, which recommended, among other recommendations that:

“...care should be taken to secure for the management of such an asylum, the highest medical talent, the largest amount of experience, and the greatest benevolence.”

Norton Manning certainly fulfilled these capacities. He was born in 1839 in Northhampton, England and joined the Royal Navy as a Surgeon, serving in Australian waters in the brig Esk during the Maori War. He was 28 years of age when appointed as Medical Superintendent of Tarban Creek – already demonstrating a capacity for administration and professional skill. He was an ideal public servant, never attempting to usurp or minimise ministerial authority. It was this attribute that gained the support of Henry Parkes to his later proposals for an asylum service, a support not lightly given by a Premier who had an almost pathological distrust of senior public servants. He was an austere upright man, dedicated to his purpose and profession, who was respected by all for his contribution to medicine and to society of his day. He succeeded the Hon. H.K. MacLaurin as Medical Adviser to the Government and likewise President of the Board of Health in 1889. He retired on the grounds of ill health in 1898 and it is typical of the man that he would not accept a testimonial. It was said of him that ‘justice and impartiality have marked your official actions, there has been shown to us all (the staff of the asylums) the kindliest feelings of personal interest, help and encouragement’, and of the doctor and administrator ‘the treatment of the insane, has, under your guidance, been elevated and placed on a scientific basis, so that the hospitals for the insane in NSW now compare favourably with the most enlightened in other parts of the world’. He died after a painful illness in 1903 at his residence in Phillip Street, tended in his last days by his two great friends Norman MacLaurin and Christolm Ross. He was buried in the grounds of Tarban Creek Asylum, and the regard in which he was held was exemplified by eulogies from the Supreme and Equity Courts, both Houses of Parliament and obituaries in all newspapers.

Tarban Creek Asylum bore the main brunt of admissions to the lunatic asylums until Callan Park was established in 1873. It was a source of constant frustration to Norton Manning with its buildings becoming more dilapidated and for ever overcrowded. An editorial in the Cumberland Mercury in 1877 described Manning’s efforts to stimulate Government action:

‘Year after year, for a long time past, Dr Manning has found it his duty to warn the Colonial Secretary, and through him the legislature and the people, that the accommodation at Gladesville was getting more straitened. That being so there is reproachful significance in his last report – that for 1876 – telling us on the 31 December, there were 642 people in the Institution, that great number in an old, badly constructed, inadequately fitted, and totally overcrowded building ... in which there is only proper cubic space for 450.’

Tarban Creek Asylum was for a short time the headquarters of Dr Norton Manning after he relinquished his post of Medical Superintendent in 1878 to become Inspector General of the Insane. It is illustrative of Norton Manning’s vision that, shortly before, he succeeded in having the name of the institution changed to the Gladesville Hospital for the Insane, although officially it often appeared in documents as the Gladesville Asylum.
During the latter years of his superintendentship, Norton Manning was involved more and more in the reorganisation of the asylums into a common system, centrally controlled, and the development of the Lunacy Act of 1878. It was inevitable that the immediate administrative supervision of Gladesville Asylum was exercised by the Manager, although Manning still found time to involve himself in clinical activities, and scientific meetings both within and external to Gladesville.

**Other asylums**

The establishment of other asylums will be indicated briefly in chronological sequence, more to outline their functions as separate institutions later to be coordinated within the framework of the Lunacy Department of the Chief Secretary’s Department.

**Parramatta Asylum**

The Convict, Lunatic and Invalid Establishment at Parramatta was established in 1848 in the buildings of the Female Factory, which were adjacent to the land on which the present Parramatta Mental Hospital is located. The Female Factory was established by Governor Macquarie as a workshop and barracks to house the women convicts largely through the instigation of the Reverend Samuel Marsden. The structure was completed in 1821 to house 300 women, and was subsequently enlarged, mainly by the addition of cells for recalcitrant inmates. The institution was a source of discontent and a focus for riots by the women lodged therein, who were described by the Governor in 1846 as ‘the dregs of the convict system’.

In 1847 the need for this factory ceased to exist, and it was closed down by granting the women convicts who were remaining either discharge or tickets of leave. It was thus cleared except for those women who were invalids and lunatics. When it was converted to an asylum, it was for the purpose of housing chronic or deteriorated patients, all of whom were paupers. Its first Matron and Superintendent were Mrs and Mr Stratham respectively, and it was regarded as a benevolent asylum remarkably similar in purpose and content to an English workhouse.

Its name was changed to the Parramatta Lunatic asylum in 1850, and Patrick Hill, the Adviser to the Government and Head of the Civil Medical Service, became its first Surgeon Superintendent in 1852. Hill was the first Adviser to the Government, which position also carried the responsibility of Inspector and Consulting Physician to the Tarban Creek Lunatic Asylum.

He was succeeded, on his death in 1852, as Adviser to the Government and Inspector to the Lunatic Asylum by Bartholomew O’Brien, who was not appointed as the Surgeon Superintendent at Parramatta. O’Brien was probably a part-time appointment. Richard Greenup was given the post of Surgeon Superintendent at Parramatta, in turn succeeding O’Brien as Adviser to the Government etc in 1855. Greenup’s role at Tarban Creek included also the post of Chairman of the Official Board of Visitors recommended by the commission of Inquiry on the Lunatic Asylums of NSW of 1855. Later it is evident that he also acted as Official Visitor to the Private Asylum at Tempe. He achieved the sad distinction of being murdered by one of his patients at Parramatta.

The Parramatta Asylum was as much a benevolent institution as a place for the reception of lunatics. It received male patients in 1852, and in 1855 it accommodated 187 males and 92 females. It was used to assist Tarban Creek in its overcrowding especially of female patients, and it received also destitute persons suffering from forms of chronic disease with mental deterioration from Government institutions, the Sydney Infirmary and the benevolent asylums at Sydney and Liverpool. It is not to be confused with the Government asylum at Parramatta which was established in Macquarie Street towards the end of the next decade.

The Surgeon Superintendent was responsible to the Colonial Secretary and this responsibility was discrete from that of the Medical Superintendent of Tarban Creek. Admission was probably informal between the two institutions by transfer, or otherwise direct from summary jurisdiction. The impression is gained that certification under the Dangerous Lunatics Act of 1843 directed patients to Tarban Creek and not Parramatta.
A small prison was erected in the Parramatta Asylum in 1866, authorised by a special Act of Parliament (24 Vic. No. 19), to serve as an asylum for criminal lunatics. The conditions of confinement were soundly condemned by Norton Manning in his report. Otherwise the Parramatta Asylum remained a repository for harmless chronic dements, receiving patients from the Government asylums as well as Tarban Creek Asylum.

One of the first tasks of Dr Manning in his capacity as Inspector General of the Insane was to report on the Parramatta Asylum in 1879, which was then recently included in the Department of Lunacy. Previously in his major Report of his overseas visit in 1868, Manning had been very critical of the facilities at Parramatta, which had not improved in the intervening ten years. He was particularly critical of the facilities for the criminally insane. He excused the deficiencies of the asylum and its management with the superficial comment ‘the Parramatta Asylum has been placed at a great disadvantage in being isolated from other institutions for the insane for some years past’. He mentioned in passing, without the credit it deserved, Greenup’s successful attempt to acquire the vineyards adjoining the asylum in 1865, with the hope, which was not realised, that the additional land would be used for the building of a new asylum. It was there that the new buildings were erected for the criminally insane in 1878.

Manning’s report of 1879 was most forthright and proposed a programme of rehabilitation and restoration of buildings, until rebuilding was feasible. He was successful in having the Queen’s Pleasure inmates removed from the criminally insane section to other asylums.

The Lunatic Reception House Darlinghurst

The Reception House was opened at Darlinghurst on 24 July 1868 authorised under S.1, 31 Vic. No. 19. Procedures of admission were defined as follows:

(i) Patients on warrant from the Governor for detention in a lunatic asylum were detained at the Reception House until they could be transferred. This applied particularly to country patients.

(ii) Other than (i) and (ii) no person could be received unless there were two independent certificates from medical practitioners, or unless two medical practitioners swore in open court that the person was of unsound mind and likely to commit an indictable offence.

The Asylum for Imbeciles and an Institution for Idiots, Newcastle

This was the first asylum specifically for idiots and imbeciles and was established in the old military barracks in Watt Street, in 1872. Since 1867 the barracks had been a reformatory for delinquent girls and prostitutes taken from the streets of Sydney – much to the consternation and opposition of the citizens of Newcastle. The opposition increased as frequent riots occurred in the reformatory, usually encouraged by hoodlums outside the walls offering noisy and vociferous support. A special police detachment was permanently located at the reformatory to maintain order.

On the 16 March 1871 a public meeting of protest was held under the guidance of the Mayor, Aldermann James Hannell. A deputation was appointed to wait upon the Colonial Secretary (the Hon. John Robertson) who agreed that the locality was unsuitable for a girls’ reformatory. The citizens of Newcastle were not appeased when they heard that a lunatic asylum was to substitute for the reformatory, the Government being determined not to waste the site and buildings as an institution. A further public meeting was to no avail, and the first inmates were moved from Gladesville and Parramatta, under the care of Mr Michael Prin and Mrs Prin as Superintendent and Matron. Medical supervision was exercised by the appointment of visiting medical staff, the first of which was Dr Richard Harris. It was not until 1890 that a resident medical officer was appointed as Medical 39
Superintendent, and the position of Matron was separated as the senior nursing post. The first two such appointments were Dr Wilkinson as Medical Superintendent and Miss Newton as Matron. Thereafter the principle of medical executive direction prevailed as at other lunatic asylums.

Until 1887 it served a dual purpose as a hospital for the insane as well as an institution for imbeciles, with an increasing proportion of imbeciles and idiots being diverted there. The role of the Newcastle Asylum, was described in the Newcastle Chronicle, 15 April 1876:

“The asylum is set apart for the reception of chronic cases of idiocy, imbecility, and epilepsy, which are drafted off to it from the different lunatic asylums of the Colony. It is in fact a retreat for incurables, a sanctuary for the hopelessly demented, and under the system laid down by Dr Manning, and so ably carried out by Mr Cane (the Superintendent from 1873 to 1890), and his staff of assistants, it is indeed a haven of rest and peace, and even of cheerfulness, to the unfortunates for whom it has been instituted.”

This description as a sympathetic sanctuary for grossly mentally retarded persons was still apt when the author was Director-General of Mental Health from 1961 to 1963. It was then known as Watt Street Mental Hospital, retaining this name until 1967, when it became the Newcastle Psychiatric Centre, reverting to a dual purpose of a receiving and admission centre for Newcastle, and a long-stay institution for persons with congenital or acquired idiocy.

Observation Ward for Criminally Insane, Darlinghurst Goal

The exact year when this unit was established is not clear. Until 1878 it was used by arrangement with the prison authorities for temporary detention of prisoners showing signs of insanity, or remanded from the Sydney Police Courts for alcoholism. After the Lunacy Act of 1878 it was set apart for the detention of any prisoner who was supposed to be insane, or with a degree of mental imbecility unfit for penal discipline, to be there observed until certified by two medical practitioners, one of whom shall be either the Inspector General of the Insane or a Superintendent of an asylum for the Insane. Its function was taken over gradually by the Reception House.

Callan Park Asylum

The Callan Park Asylum was established in 1873 in the residential estate of Mr Ryan Brennan, which was purchased for £13,000. The residence was a substantial building of stone and brick with extensive views over Iron Cove and the Parramatta River. It needed but minor modifications to accommodate patients, of whom 44 were in residence within a year of the purchase. At this stage it was a sub-unit of the Gladesville Asylum.

Callan Park was intended to be the modern asylum of Sydney ultimately to accommodate 666 patients. As a preliminary, Mr Charles Moore, Curator of the Botanic Gardens, was entrusted with the task of laying out the grounds. In 1876 Mr Barnett, the Colonial Architect, was commissioned to plan and build the asylum, using as his model the English prototype of a large secure building for acute and disturbed patients and a series of cottage pavilions scattered throughout the parklands for patients undergoing rehabilitation, work therapy, lodging of chronic patients and imbeciles. The groups were separated according to classification and progress of therapy. Norton Manning had described similar institutions in his report.

The subsequent development and role of the Callan Park Asylum will be described in Part II of this publication.

The Private Asylum Tempe

The Private Asylum was known also as the Licensed House for Lunatics, and was established by George H. Tucker in 1865. Tucker was an American with a dubious doctorate in psychology, who previously conducted a private lunatic asylum in Melbourne. He was the author of a dull and commodious study on Lunatic Asylums of the World.

The Private Asylum was licensed under S II, 31 Vic. 19 in 1868. At first it contained private patients only. In 1870, due to the lack of demand, arrangements were made with the proprietor and Superintendent by which 25 female patients were received from Tarban Creek Asylum. This arrangement was increased to 100 in 1874 and 125 in 1876, when the number of private patients was 10 only. The Official Visitor to this asylum was the Adviser to the Government until 1880 when A. Roberts, H.G. Alleyne, M.D., and William Owen, Barrister-of-
Law were appointed Official Visitors under S 72 of the Lunacy Act of 1878. It survived as the Bay View Asylum after the expansion of the Government lunatic asylums until World War II.

The Norton Manning Report

Henry Parkes was so impressed with Norton Manning’s administration of the Tarban Creek Asylum, that he proposed to Manning that he should undertake a comparative study of asylum systems in the United Kingdom, the Continent and the United States. This was in consonance with Parkes’ liberal concept as a Chartist, providing him with the opportunity to build, in NSW, a system for the care of the insane, which would replace the uncoordinated system of independent asylums.

Norton Manning was overseas for a period of some fifteen months during which he assiduously carried out his task, and recorded his observations and recommendations in his voluminous report to the Colonial Secretary in 1868.

The magnitude of his task can be gauged by the instructions to him from the Chief Secretary as briefing for his study tour:

“You will visit the chief asylums in the United Kingdom, on the Continent, and in the United States. You will direct your inquiries in these visits to the principles on which the building have been erected... the different methods of treatment... the working of different systems of management and discipline... the efficient supervision and economy of expenditure ...you will obtain copies of all regulations dietary scales and reports... of all recent and important status, state papers and departmental reports relating to the treatment of lunatics.”

In its sections the report follows closely the terms of his briefing although not always in the same order. It became the ‘magna charta’ of the care of the insane on which was based the system of organisation of lunatic asylums, standards of care, legal procedures and even architectural details of institutions.

Norton Manning’s proposals for the legal safeguards and procedures of lunacy were incorporated into the Lunacy Act of 1879 (42 Vic. No. 7) including his concept of an official Office of a professional inspector, the Inspector General of the Insane, who would have executive and legal capacity over the asylums of the State. Not all his recommendations were acceptable. He did propose a form of statutory authority to control lunacy and its institutions. I imagine this would have been anathema to Parkes, who detested any form of power at the public service level which would gloss the authority of Parliament and its Ministers. Paradoxically he did not object to Norton Manning occupying the authoritative position of Inspector General of the Insane. But then Manning was a public servant whom he could and did trust not to overstep the boundaries of his authority. Again the organisation was constructed as a sub-unit of the Chief Secretary’s Department, in itself a secondary form of restraint over the individual.

Essentially Norton Manning proposed that all asylums should be incorporated into one organisation under the executive control of the Inspector General of the Insane. The asylums would be classified by function with separate institutions, or separated sections within institutions for acute and chronic patients, idiots, and the criminally insane. Within this system asylums would be decentralised to rural and outer suburban areas close to the populations they served. The system would be served by staff from a career service with professional and sub-professional training programmes, and subject to a uniformity of policy extending to the areas of treatment and sustenance. It would be supported by defined legal procedures for admission and committal, care of the persons’ assets, and the right of the patient after committal. Apart from the continuing supervision by the Inspector General of the Insane and his reports, a further audit in support of the patient and his rights was envisaged by a system of external visitors, who had substantial legal obligations and powers under the Lunacy Act.