



# MEASURING THE PSYCHIATRIC SPACE OF THE EUROPEAN LUNATICS IN COLONIAL INDIA THROUGH THE AUTOBIOGRAPHY OF OWEN BERKELEY HILL

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## ABSTRACT

The work will use the autobiography of the Superintendent of the European madhouse at Ranchi to delve into the case histories of his patients and to bring to notice how the management and treatment of the lunatics depended on the Superintendent's style of managing the psychiatric space. How and why did his role become essential in the running of the asylum, the paper's focus is to understand the Superintendent as the essential figure of the asylum with his diverse approaches towards the malady of the patients. With the state of the asylum depending on the style of management and maintenance from its supervisor, the authority of the Superintendent played an important role in reordering the life of lunatics in the asylum.

**KEYWORDS:** Psychiatric Spaces, European Lunatics, Autobiography, Lunatic Asylum, Colonial India and Berkeley Hill.

## INTRODUCTION: Structuring a Psychiatric Space for the European Lunatics in Ranchi, 1917

The asylum at Bhowanipore in Calcutta will not be tolerated in any large town in Europe. It's a disgrace to the Indian Government that it should have been so long neglected. There is a scandal. Should any man or woman of good standing and gentle birth have the misfortune to be condemned to a temporary seclusion in Bhowanipore? That so great a scandal should exist in 20th century in a city like Calcutta is incredible.

Statesman, 1913

A visitor to the European Lunatic Asylum at Bhowanipore writes the above letter to the editor of Statesman to bring to the attention of the Government of India, the urgency and the requirement of providing an Asylum for the Europeans to keep up with a good civilized government. The subject of improving the atmosphere of the above institution for the inmates was a necessity for there was no comfort of any kind in the present asylum. He described the inmates as poor wretches who suffered to sleep in the cells in the night while during the day were allowed only in two large sheds having corrugated iron roofs and surrounded on all sides by thick galvanised wire netting.

Many accusations like these have been raised up against the asylum spaces. Topp (2007) refers how lunatic institutions were blamed of introducing patients into the confinement of the asylum restricting their freedom of movement. The lunatic asylum at Bhowanipore was also accused of being a disgrace to the government as it mistreated and confined European lunatics with miserable conditions of the asylum. Hence, the proposals to establish a European asylum at Ranchi in 1914 began with the hope of overcoming such accusations of alienation and confinement to lunatics in the asylum. For the British, the institutions of the colonial state like hospitals, schools, jails and psychiatric institutions were representative of their supremacy. These institutions were not just the part of the administrative foundation of the colonial state but were the symbols of British colonialism in India. Ernst (1999) refers that the institutions of the colonial state were the demonstration of their patriotic pride and symbols of benefits to their superior, rational and progressive civilisation. The idea of a civilising mission to project light and knowledge to people through their institutions was challenged through the criticism of the psychiatric institution at Bhowanipore in 1913.

With the rise in stir in Calcutta concerning the European lunatics in India, the Government of India in 1914 began opening proposals to build two asylums in Ranchi, one for the Indians and the other for the Europeans and Anglo Indians. Though much works have been concentrated on the native lunatic asylum at Ranchi, my concern, however, is to highlight how the European lunatic asylum at Ranchi, which was a small institution, was envisioned to become an institution of refuge, a structure to characterize a home for the European lunatics.

The asylum space for the European patients projected in the planning report on the construction of European Lunatic Asylum at Ranchi for the year 1913, planned to furnish a space that was generous to give the sense of home to the lunatics. Every attempt was to be made to reduce the idea of prison like confinement. The congregation of patients in one large building like that of Bhowanipore was to be avoided and housing in the cottages and villas were measured superior to the older method of compulsory detention in a building. A veranda space was emphasized in the plan, as it would be a medium through which the patients would acquire an open air space. Along with the veranda space, it was decided that the patients would receive benefit from the establishment of garden lawns.

The whole area of the asylum was proposed to be grassed and adorned with flower shrubs and trees. The establishment of the institution with greater focus on the environment of the asylum with the building of verandas, shelter houses, gardens and villas was planned to give a feeling of home to the European lunatics in the colony and to give assurance to the patients that it was a part of hospital treatment.

Such became the prerequisites to build an institution, which would characterize the appearance of a home and not a prison to the lunatics. Tomes (1981) opines that such attempts of institutional forms had an impact to a society when the establishment of the institution brought in moral changes to restore social stability. A good asylum could itself be a campaign for curing insanity and that when madness could become a curable disease in such places, it would be best treated in a mental hospital.

## Superintendent's Expectation and Reality of a Psychiatric Space from the Autobiography of Berkeley

In 1906, Owen Berkeley Hill passed the examination for Indian Medical Service while working in a Lock Hospital in London. He greatly disliked the Indian Medical Service as it was compared to a lion's den of military discipline. After his arrival to India, he took the position of a Superintendent of the European Asylum at Ranchi. As a Superintendent, he was disappointed to be given charge of the asylum for he recalls 'It did not take me long to see that I had been asked to take charge, not of an asylum, but of a bear garden. My heart sank'.

The institution could not meet Berkeley's expectation of an ideal asylum for the European lunatics, as there was no sense of life inside or outside the asylum. There was no garden outside the institution but only a dejected looking pony standing in the veranda. There had been no attempt to build a garden adorned with flowers and trees nor had any attempt been made to grass the area. The inside of the asylum welcomed him with plenty of dust and rubbish with few chairs and bed and a couple of tables and bathroom furniture available for the patients. On a thorough inspection of the establishment, he was greatly disillusioned to find out the inadequacies of the asylum with inefficient patients' care. Many were provided with no proper clothing and many found themselves a bed to sleep on the wooden takt-posh populated with bugs. There were also inadequacies with regard to the feeding arrangements of the patients with few half-starved cows providing a very small fraction of the milk to the asylum patients. At the same time, the lack of the staffs in the asylum could be explained in the inadequacy of their salaries. It was precisely for the lack of pay that theft had also become common in the asylum. Not only was the clothing but also the food of the patients were stolen. Every aspect of the institution was thus in greater necessity of modification.

In his office, Berkeley had found a mass of files written by his predecessors complaining to the administration of the inadequacies of the asylum and the need of reforming the institution. He made a collection of the most urgent files and tying these to his borrowed cycle, he rode off to discuss the lack of facilities in the asylum to the Chief Secretary. The unexpected arrival of the Superintendent at the residence of the Chief Secretary, Sir Walter Maude with a bundle of files was anything but welcome. However, with no hope of alterations coming from the Chief Secretary, he packed up his files and returned.

Seeing no way out to bring alterations, Berkeley writes that he had even appealed to the press. The European Lunatic Asylum at Ranchi was described as worse

than a kaffirs' kraal in an important article published in the 'Statesman'. A prodigious uproar in the official circles followed when the Government of Bihar and Orissa telegraphed to the Government of India to have the Superintendent of the European Lunatic asylum at Ranchi removed. However, with an apology from Berkeley, the storm died down against him.

Thus, when we see the larger truths of the asylum history from the perspective of the Superintendent of the asylum, his expectation of an ideal asylum at Ranchi was hit by the realities of the asylum planning and hospital life in colonial India. The hope of having an ideal comfortable asylum for the European lunatics became dissolved into the words of Berkeley when he calls the asylum as a scandal, fraud and a wilderness.

#### Restructuring the Psychiatric Space: Berkeley as the Essential Figure

In 1920, the European Association requested the Government of India to send a deputation to the European Asylum at Ranchi. The deputation was to investigate into the situation of the institution and report to the government. With the arrival of the deputation, the inspection of the asylum building was led by the colonial officer Edwards who pointed out the mistakes in the structure of the asylum. The cells of seven European patients were constructed in a way with the slope of the floor built towards the door, with the result that when a cell was washed out, the filth from the room flowed across the veranda and then into the surface drain which was at a short distance away. The result was that the veranda was polluted with filth when washed down from the cell. This brought into the question of drainage system, water supply and sewage disposal, which was of vital importance to the structure of the asylum.

Not forgetting the other requirements of the asylum, he moved on to highlight many other wants of the asylum like clothing and laundry for patients, heating water for bathing purposes, locomotion requirements of the place as well as a dairy, bakery, and a garden for the asylum inmates. He remarked: 'How vast the requirements of the place are that expenditure will be heavy'. In fact, Edwards received a list of more requirements of the place from Berkeley. These were as follows:

**Amusements:** In the recreation room of the inmates, furniture was not available for any indoor activities. Even for outdoor facilities, they did not have equipments for the cricket matches. A request was thus made to the European Association and the Jewish Community at Calcutta to supply such equipment for the patients.

**Beds:** the ordinary beds available at present in the asylum were not appropriate for the sick patients and they needed special beds like the Lawson Trait hospital beds with mosquito frames.

**Bug tanks:** Bug tanks was one of the essential requirement of the place as the presence of bugs created nuisance for the patients with their bites. At the same time, they were equally troubled with body lice that were most prevalent among the dirty patients. Thus in order to destroy the lice in the clothing of the patients, they were in need of a thresh disinfectant.

**Dairy Buildings:** the great difficulty in getting milk for the patients called for the asylum's need to establish dairy buildings to house cows and calves for a steady supply of fresh milk.

**Vegetables:** the cultivation of superior kinds of vegetables by the patients themselves within the asylum building would bring into savings as a large amount of money was spent on the purchase of vegetables.

**Hot water:** the supply of hot water for bathing purposes of the inmates was largely ignored. Even in the hospital wing of the asylum, there was no supply of hot water to the patients. Since a larger portion of the asylum inmates contained dirty patients, proper bathing arrangements were needed. It was not just for bathing but a good supply of hot water was required for hydrotherapy, especially for those suffering from mania and excitement.

Berkeley's attempt to bring into the attention the needs of the asylum patients and the management of the European Lunatic Asylum at Ranchi began to bear fruit. Things shortly began to happen in real earnest with the reorganisation of staffs in the asylum and with the increase in the number of employees in the institution. The numbers of nurses were increased to fourteen. A military assistant surgeon was appointed as a Deputy Superintendent with the new appointments of two sub-assistant surgeons and a compounder. The asylum building was to receive two operating theatres with good electric lighting introduced. The construction of the theatre created entertainment and was a source of amusements for the patients. In terms of transport, the modern use of motor vehicles was to supersede the use of country carts and buffaloes. The occupation and the recreation activities of the patients were given greater focus with funds made ready from the Government of India to finance games for the patients like football, tennis, cricket and croquet. A gymnasium was also built for the patients with the charge of it being given to a physical culturist. Room was also given for the occupational therapy for the patients, as it was a part of hospital treatment.

A large garden for the patients was also established with trees planted, flower-

beds and shrubberies laid out. A school was formed to take into the needs of not only the children of the staffs but also for many ayahs and ward boys working as attendants in the asylum. It would be the medium to train them in English while many others learnt to read and write in Hindi. The institution was also provided a Samaritan Fund to help the indigent patients. With the charity of the public, the asylum was able to gather a thousand rupees for the needs of such patients. So we can see how Berkeley's patience and continuous efforts to write to the Government of India about such wants of the asylum finally brought fruit when drastic changes were made to the asylum overcoming the earlier shortages in the asylum.

#### Superintendent and the European Lunatics: Case Histories

Ernst (2009) refers how the Superintendents of the asylum managed their mental health institutions. The condition of the asylum depended on the Superintendent's style of management of the asylum. In dealing with the management of the Calcutta Asylum in 1856, the Superintendent Surgeon Cantor believed that the best way to reduce the expenditure of the institution was by curtailing the food provision for second-class patients of the asylum. On the other hand, Superintendent of the Patna Asylum, Sutherland projected a warm attitude towards his patients. He was of the opinion that the patients in the asylum were to be dealt with a degree of affection. His successor, Dr Hutchinson followed practices that would ensure comfort and safety to the inmates of the asylum. He aroused a criticism against himself when he was known to have introduced nautches (dance) for his patients as a part of their amusements. Such practices he believed were necessary to be introduced as part of the treatment and which served as a great delight to the patients.

It was working on these lines that Berkeley as the Superintendent of the European Lunatic Asylum at Ranchi dealt with his patients with fondness and patience. The attitude of many medical practitioners like that of Berkeley's was much more varied and not always hegemonic. It is true to the fact that comprehending the right kind of care for lunatics was a difficult task for the Superintendent of the asylum. More than their needs and requirements, the understanding of care and treatment to the nature of their malady was of concern. Berkeley wrote that some lunatics disliked the idea of approaching them from behind. When it was patients who were suffering from delusions of persecutions, there was always the possibility that they would turn and strike back at the person unexpectedly with aggression and irritation. Sometimes their aggression manifested in their violence towards others when they disliked the feeling of being touched. For in the language of the patients, it meant an insult when one would place an arm around the waist of the patient. Therefore, if a patient became hurtful or destructive, the matter called for treating his restlessness with prolonged bathing in a darkened room for such patients.

In dealing with the patients suffering from suicidal tendencies, a very careful watch over the patients was required especially for those who were subjected to deep mental depression and melancholia. The attention of the watcher over the patient could sometimes be easily diverted. At this very asylum at Ranchi, an ayah was asked by a middle-aged woman lunatic to bring her a cup of tea. As the patient was suffering from suicidal tendencies, the ayah had been instructed as to not let the patient be out of her sight. However, the request for tea by the patient was made in such a matter of fact a tone that the ayah was completely taken in to her demands. Later she found that the patient was dead when she returned. The patient had strangled herself with a sheet. Treatment of such lunatics lay in comprehending the psychological state of their minds. Berkeley recalls a patient who approached him with the aim to kill himself and to whom the Superintendent immediately provided a six yards of rope through which he could kill himself. However, after the incident, he never heard of any talk of suicide from the patient. Another patient who had been suffering from excitement and restlessness tore open his shirt asking the Superintendent for a knife to push it into his stomach. Berkeley to this state of affair responded him with a stern order to be prepared to clean the mess on the floor after killing himself and that if he wanted to kill himself, he was advised to go to the lake and drown himself in a respectable manner. Hence, no more threats of suicide came from this patient as well. It was a belief of the asylum Superintendent that a patient who threatened to commit suicide would barely carry out the threat.

The behaviour of the insane patients was very likely to resemble the behaviour and attitude of ordinary children at home. Many patients were accustomed to indulge in activities of catching insects, reptiles and birds. Sometimes the attendant would notice a snake or two in the pockets or socks of the patient or a bird under their hat. For instance, Berkeley found a patient who had caught a large snake and having bitten off its head had swallowed it. As many patients exhibited attitude like that of children, it was common for some to say malicious or do embarrassing things.

Berkeley was also against the idea of separating lunatics into criminal or non-criminal lunatics neither did he allow the separation of male and female lunatics in the asylum as had been suggested by the colonial officer, Major Robertson in a letter from L M Jacob, Secretary to Government of India to the Secretary to Government of Bengal. The colonial state's intervention to separate the lunatics was formed on a strategy of power, a policy of separation based on the idea of exclusion. The idea of exclusion as referred by Foucault (1988), addresses the system of exclusion to be based on control, fashioning the individual, to discipline nor-

malization by bringing a binary between two sets of masses. Exclusion of the lunatics from each other would result in their isolation. As Bashford and Strange (2003) have discussed that isolation was the policy of the state agencies to identify certain problem populations who were undesirable or dangerous from the rest of the public, the segregation of the populations created identities. While the intervention of the colonial state to isolate the lunatics from each other in the asylum at Ranchi was justified in terms of modernity to manage the lunatic populations, Berkeley did not implement the plan and allowed greater freedom to the inmates of the asylum.

He also expressed his patience and tolerance by never resisting to all kinds of attitude of the patients in the asylum. His nearness to the patients and the familiarity with which they recognized him can very well be expressed through the story of two patients named Miss B and Patient M. Berkeley's wife was known to have organized many garden parties for the patients in the asylum. A patient named Miss B, who was known to have a great liking for Berkeley disappeared one day when a garden party was being held in the asylum compound. The nurses and attendants who accompanied the patients in the garden parties began a search operation for Miss B. In spite of having many searches for her around the asylum, she was nowhere to be found. Just as her disappearance was becoming to be quite problematic, it was Berkeley's daughter Rosamund who had found Miss B inside the Superintendent's house seated on Berkeley's bed. On finding her, she said to her mother: 'Mummy, Mrs B is in Daddy's bed.'

It was not just Berkeley's tolerant attitude towards his patients but also the enormous trust he kept on his patients that gained him the confidence of his patients. The account of Patient M will clarify the Superintendent's reliance on his patients. In the 1920's, the European Lunatic Asylum at Ranchi was provided with a machine gun by the Government of India to protect the British lives from the growing unrest of mob fury. A patient who had been a military soldier in the past had killed his friend under mental abstraction. Nevertheless being an attractive soldier, he was ashamed of the offence he had committed. His record in the military was captivating as he had been an expert machine gunner and had possessed many military medals. This was Patient M and on whom Berkeley entrusted the responsibility of handling the machine gun in the asylum. He appointed him to the post of Officer Commanding machine gun. However, the asylum was visited by the General Officer Commanding, Presidency and Assam Brigade to inspect on what terms the asylum authority was with the machine gun. When Patient M was presented to him as the operator of machine gun, the General was astonished to find that a mad lunatic patient was handling a gun in the asylum. The General was of the view that the Superintendent of the European Asylum at Ranchi was certainly a lunatic himself to have allowed a machine gun to the patient that the very day of the visit of the General; the machine gun was taken away from the asylum authorities.

As the Superintendent of the asylum, he manifested his ideas of dealing with the patients through kindness and patience. His experience of working with the staffs and patients in the management of the institution indicated that his practices were neither hegemonic nor was he a disciplining agent of the colonial state. Initially his belief and vision of an ideal asylum did not ensure its success with the understanding of the hard realities of a hospital life. He encountered the restraints on his power and authority as the Superintendent of the asylum when the morality of order and control in the management of the hospital life was directed towards disruption and disorder. Berkeley had to struggle against the worsening conditions of the buildings with bug-infested rooms with poor ventilation, poor water supply and electricity, which remained the institutional facts of everyday life in the asylum. Sometimes it took time-consuming efforts for him to get hold of the cooperation of the inmates when they refused to be orderly and exhibited violence and destruction in the place through suicides and escapes. Domestication of such disorder was a difficult task for the Superintendent.

At the same time, he maintained his efforts throughout to re-build the asylum and to propose the idea that the very institution of the insane could be the best place for the mentally ill. He created the situations in the asylum to re-form a pleasant image of the asylum life devoting his attention to the ethics of asylum management. Focussing on the asylum's wants and needs, he began restructuring the place with the intention of making it comfortable and impressive for the patient's care and attendants. His style of maintenance of the asylum clearly shows the one-man rule of the superintendent. If this brings into question as to whether he was establishing a psychiatric legitimacy in the asylum and was acquiring a position then it was also true that he was using such an authority to reorder the disintegrated society of the lunatics in the asylum.

## CONCLUSION:

The existing historiography on madness and insanity which has exclusively run an anti-psychiatry movement have covered upon the perception of the asylum as structures of paternal authority to recognise madness as a disorder to only punish it with the principle of fear. Terror at the confinement was one of the medium to manage the insane. The inspection of the mental asylums in India brought to light the cruelty and the miserable position of the insane in the institutions. Psychiatrists like Berkeley who considered the brutal treatment meted out to the patients as unjust rejected such position of the mental institutions as a prison like confinement. As a Superintendent at Ranchi and the asylum planner, he improved the liberty of his patients through entertainment, music, games, etc. and manifested

many changes to bring improvement in the condition of the patients. The restructuring of the asylum begun by Berkeley did away with such physical restraints to the patients to having let them out from the closed asylum into the fields and playground and into the gardens and kitchens where they could find some work and live a life of normal existence.

It is true many scholars have perceived the mental asylum as a space where the freedom of the patient was curtailed through confinement and punishment. The asylum was looked upon as a fortress of moral order that judged the treatment of lunatics on the basis of coercive disciplinary techniques like regulating movement and surveillance of lunatics. The cure for madness was confinement and punishment in the institution through which the asylum had become not only as a disciplinary site but also as a normalizing site that fashioned the behaviour of the lunatic. However, this work that has highlighted the restructuring of asylum space by Berkeley for the European lunatics at Ranchi can be looked as a progress towards a movement that was trying to dissolve the perception of chains, lock and confinement of the patients. As a part of the treatment to the malady of the insane patients, logical and compassionate principles could be followed with patients having the freedom of a free movement in and out of the asylum and with restraints imposed only in cases of necessity.

Along with the history of lunatic asylums, the management of the mental institutions has also entailed a broad area of study among the historians. Skull (1999) for instance has pointed out that with the rise of mental institutions; there was the centralization and growth of the profession of psychiatry. It was a professional imperialism as he argues that expanded the boundaries of the asylum. It endorsed a social order through segregation and removal of the deviant individual from the environment. Such a profession according to him served in building up a museum filled with lifeless artefacts of humanity.

Nevertheless, this work looks at the working of certain asylums being entirely depended on the superintendent's style of management making him the essential figure of the asylum. Unlike the psychiatric profession that turned the asylum into a museum of lifeless artefacts based on punishment and power, the same profession could reincorporate the alienated individuals into the asylum with an order that was not based on punishment but on healing.

It is interesting to look how institutions like the lunatic asylum were essential to bring a connection between medicine and colonial power. By the act of seclusion in the asylum, the lunatics were classified on the basis of deviant behaviour, illness or criminality. The classification of the lunatics was central to their management and control that it became one of the ways for the state to manage such problem populations. Hence, the doctors in managing such lunatics became the tools of empire to fashion colonial subjects in these spaces of segregation and isolation. This study on the other hand, tries to show that not all doctors were the normalizing or disciplining agency of the state. Unlike the classificatory scheme of seclusion of lunatics, many asylum doctors were against such division of the lunatics with more attention being devoted to build a regime of comfort and care. Marked by dissimilarity to those who advocated negligence and cruelty to patients, the position and outlook of certain doctors like Berkeley were neither repressive nor exploitative. Moreover, they were more determined to bring cure to madness than to create subjectivities

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