THE FORMATION OF THE ASYLUM IN UPPER CANADA

BY

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THE FORMATION OF THE ASYLUM IN UPPER CANADA

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The purpose of this dissertation is to develop an explanation for the formation of a lunatic asylum in early nineteenth century Upper Canada. In order to understand the separate institutionalization of the mad in lunatic asylums, I examine the asylum within the context of the transformations in social life in the late eighteenth and early nineteenth centuries.

The dissertation addresses the question: Why in the period 1841-53 did the Upper Canadian State provide for the separate institutionalization of the mad in asylums? This question has led to the investigation of events and social processes prior to the establishment of the Toronto Lunatic Asylum which determined its formation. In order to understand the event of asylum formation, I have introduced a holistic explanation based in the general principles of Marxist political economy.

Embedded within an explanation of asylum formation in Upper Canada is not only the social structure of Upper Canadian Society but also the history of the confinement of the mad prior to asylums. The latter covers the confinement of the mad within the institutions of public welfare and their
association with poverty. Since Upper Canada was a colony of Great Britain, its organization was closely tied to Britain. Their histories are intertwined and their methods of incarceration similar.

This dissertation illustrates the point at which the insane were pushed out of the institutions of public welfare and into the hands of the medical profession. Asylum formation is an event that marks the end of one era of treatment of the mad and the birth of another. It is an event which begins the process of separating the mad from the poor and associating the mad with the sick, a process which, in its institutional form, took over a century to complete.
BARRY EDGINTON

BIOGRAPHY

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It is not immaterial that mad men were included in the proscription of idleness. From its origin, they would have their place beside the poor, deserving or not, and the idle, voluntary or not. Like them they would be subject to the rules of forced labour. More than once, in fact, they figured in their singular fashion within this uniform constraint. In the workshops in which they were interned, they distinguished themselves by their inability to work and to follow the rhythms of collective life. The necessity, discovered in the eighteenth century to provide a special regime for the insane, ... (is) linked to the experience of madness available in the universal necessity of labour. ... It was in this other world, encircled by the sacred powers of labour, that madness would assume the status we now attribute to it. ... it is no longer because the madman comes from the world of the irrational and because its stigmata; rather it is because he crossed the frontiers of bourgeois order of his own accord, and alienates himself outside the sacred limits of ethic.

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CHAPTER 1

Asylum Formation: An Event in the History of Madness

1 Introduction

There have been a number of recent studies on the history of madness (e.g. Scull, 1979; Skultans, 1979; Rothman, 1971; Rosen, 1968; and Foucault, 1965). However, these studies have paid little attention to the question of why institutions for the confinement of the mad (lunatic asylums) appeared at a particular point within the history of madness. The focus of the above-mentioned studies is not the "birth of the asylum" as a special event within the history of the confinement of the mad, but rather the situation of madness within a particular social and historical context.

As yet, no answer has been given to the question posed by David Rothman in his introduction to the Discovery of the Asylum: Why in the early decades of the nineteenth century did the state erect lunatic asylums? "Here was a revolution in social practice" (Rothman, 1971: xiii). Every student of the history of madness has pointed to the importance of this event as a break in social practice. Each has acknowledged it as a cardinal event within the history of madness. Yet, we still have no adequate explanation for the rise of state supported asylums in the late eighteenth and early nineteenth centuries (Skultans, 1979: 105).

We know that there were isolated instances of the confinement of the mad before the period of asylum formation. Two examples of this
are Bedlam (Scull, 1975: 19) and the asylum in early Spain built by the Moors (Bassoe, 1944-45). But, these are specialized instances (Scull, 1979: 19) and do not lead to the systematic development of lunatic asylums. It is a fact, however, that the systematic development of asylums and later mental hospitals stems from the experiences of asylum formation in the early nineteenth century, corresponding with the industrial revolution or the "great transformation" (Polanyi, 1968) in social life (see Burdett, 1891-1893).

The purpose of this dissertation is, then, to develop an explanation for the formation of the lunatic asylum situated within the context of the transformations in social life in the late eighteenth and early nineteenth centuries. Since it is impossible to cover all the examples of asylum formation in western civilization, I will concentrate my inquiry on one particular example: the Toronto Lunatic Asylum. My reasons for using the asylum in Upper Canada are twofold: first, there is little material published on the confinement of the mad in that colony; and second, unlike the other studies of madness, this work will specify the institutional effects of colonialism (see Howells (ed.), 1975: xxii), i.e. how institutional confinement in the mother country forms the basis for institutional development in the colony.

The specific question I am asking in this dissertation is: Why in the period 1841-1853 did the government of Upper Canada provide for the separate institutionalization of the mad in asylums? In other words, what were the social conditions in Upper Canada at that particular point
in history which led to the erection and control of the Toronto Lunatic Asylum by the state? The question I pose here leads us to ask what were the events or social processes prior to the establishment of the lunatic asylum which determines its formation. And, by what theory can we place these events into a pattern which explains the formation of the asylum?

Part of the explanation of the formation of the Toronto Lunatic Asylum involves not only the social structure of Upper Canadian Society but also the history of the confinement of the mad prior to asylums. This latter point covers the confinement of the mad within the institutions of public welfare and their association with the poor: "the problems of lunacy were closely related to those of pauperism, in that a considerable number of lunatics came under the authority of the Poor Law" (Skultans, 1979: 15 and Fessler, 1956: 20). Since Upper Canada was a colony of Great Britain, its organization (social, political and economic) was closely tied to that of Britain. In every way their histories are intertwined and their methods of incarceration similar (see Greenhouse, 1968, Spalen, 1965, Hart, 1953 and Strong, 1930).

My contribution to the sociological study of the confinement of the mad will be to add theoretical consistency to the explanation of events surrounding the formation of the Toronto Lunatic Asylum. I will integrate the particular conditions relating to the confinement of the mad in Upper Canada with the more general history of the confinement and association of the mad with the poor and also with the "great
transformation" in social life affecting the universal development of the asylum as the historical predecessor of the mental hospital.

II Theoretical Outline

The main impediment for those who have attempted to explain the emergence of the asylum is that asylum formation has been treated as an isolated event, an event without a history and with no specific connection to the social structure of which it is an integral part. In this dissertation I do not want to lapse into an "eventist approach," (Mora, 1970: 2) prevalent among the historians of insanity (see Howells (ed.), 1975). As Mora suggests, this conventional approach views historical events as isolated incidents only explicable through the individual abilities of "great men" in the history of psychiatry (see Alexander and Selesnick, 1966). This approach is not specific to history but also has a following in sociology (Shils, 1965) where individual social actors become initiators of social change and transformation. This conventional or eventist approach will be used as a point of departure for a discussion of a general theoretical framework for understanding the separate institutionalization of the mad in asylums.

The history of the confinement of the mad is not the aggregation of a number of events tied together only by their topic and time sequence, an approach having an implicit "natural flow" of history in which events differ only because they precede or succeed another event (Vilar, 1973: 17). The dynamic, the determining effects of events on
each other, is lacking in this approach and produces a pseudo-evolutionary model in which treatment of the mad progresses with civilization (see Rosen, 1968). There is no connection made between the material conditions of life (Rader, 1979: 10-14) and those to be confined and disciplined in the institutions of public welfare (Rusche and Kirchheimer, 1968).

A) Eventism

The mistrust of eventist historiography is the focus of F. Braudel's (1972) essay on the relation between history and the social sciences. Braudel (1972:14) says that there are two critical points in the study of "short term" history: 1) there is a relation between events and their specific history which is usually ignored, and 2) there is a relation between the specific event under study and other events occurring at the same time with different histories. In the case under study, the former point refers to the relation between the confinement of the mad in asylums and their confinement with the poor before the asylum period. The latter point refers to the relation between the separate confinement of the mad and the disciplining of the labour force in the general institutions of confinement, along with the rise of the medical profession.

Discussion of the treatment of madness in western civilization is closely tied to the discussion of events in a particular history of madness. This discussion has become the simple description of event
after event without any attempt to show the pattern of development within the larger history of confinement or the effects of a particular social structure on the form of incarceration used. By contrast, the purpose of this dissertation is to locate the event within its history - the history of the confinement of the mad - while at the same time attending to the particular conjuncture of social processes occurring along with asylum formation (Ackerknecht, 1943: 38).

Even though the history of a particular event is a crucial component of its explanation, the event is not determined by its history. Historical trends become necessary prerequisites for asylum formation but are not the sufficient conditions for asylum formation. My purpose is not to remove or replace historical trends but to place them in their social context. I am not rejecting the social facts documented by the historians of madness and I have not discovered any new facts. My contribution will be to establish a continuity in the social history of madness which sees asylums, with other institutions of social welfare; as being related to the political economy of the society in which they are established. By doing this I seek to establish a holistic explanation based on general theoretical principles.

Now, I will turn to the construction of a method which will allow for the explanation of the appearance of the Toronto Lunatic Asylum. According to deductive models of historiography (Scheffler, 1963: 27-28 and White, 1959: 359) there are two parts to an explanation of an historical event: first, there are the empirical conditions which
would describe the initial boundary conditions for the occurrence of the final event," that is "the determining conditions for the event to the explained," and second, a theoretical framework which places the empirical conditions mentioned above within a context of conceptual totality (see Althusser and Balibar, 1970: Cap.9). We can then deduce from the specific patterning of historical processes the formation of a specific event.

Within the first condition of explanation, for this study, there are three separable social processes (explanans) with partially separable histories. These explanans become the "determining conditions" which, in their conjuncture, form the boundary conditions for asylum formation. The first of these is the political economy of the area in which the asylum is developed. That is, the formation of the event is shaped by the position of Upper Canada as a colony of Great Britain (Teeple, 1972). The second is the history of the institutional confinement of the insane and their association with the disciplining of the poor (Foucault, 1977). This history is associated with the demands of the labour market for specific types of labourers (Scull, 1979: Cap. 1). The last factor is the organization and political support for a specialized group of professionals to assume control over the mad (Scull, 1979: Cap. 5 and Larson 1977: Cap. 1).

These three empirical explanans form the boundary of social conditions necessary for asylums to develop in Upper Canada. The description of these processes will form the empirical chapters of this
dissertation. The theory of covering law (Dray, 1974: 67), which brings together these historical processes into a pattern of events which form the basis for asylum formation, will be situated in the general principles of Marxist political economy.

Part two of the model presented above demands the formulation of a theory which serves to connect events in understandable patterns of social relations (Scheffler, 1963: 43 and 76): a theory that will allow us to organize the empirical evidence for the formation of the event in question. To accomplish this I will use the Marxist model of the creation of a wage-labouring population (Marx, 1967, Vol. 1, Cap. 25). Using the "general law of capitalist accumulation" within Marxist theory as my theoretical base, I will present a set of guidelines for an interpretation of the empirical facts presented.

The next section will outline the general law from which I will proceed to an explanation of asylum formation. This will also include a brief discussion of the empirical explanans involved in this explanation.

B) Theory

The event is described as (1) occurring within a short chronological time period, and (2) embedded within a larger set of social relations with a particular history. However, the event is neither the embodiment of the entire set of social relations within a particular society nor is it explicable solely by an examination of the event as
an isolated phenomenon (Vilar, 1973: 68). The event refracts the structure of the set of social relations within society (Vilar, 1973: 100). Now, to understand the formation of the lunatic asylum as a specific event in the history of the confinement of the mad two things are necessary: (1) an analysis of the general forms of confinement; and (2) the relation of these forms to the larger social structure.

To locate this event within a particular society at a given point in time (see Poulantzas, 1973: 33) an outline of the social forces which constitute what is meant when using the term "society" will be clarified. The society in which social events occur is determined, within Marxist political economy, by the combination of "relations" and "forces" of production (Rader, 1979: 24-27). This combination of interacting processes is referred to as the "mode of production". The mode of production refers to the material conditions of production in different periods of time dominated by the relation between the material forces of a society and the social relations between the owners of the means of production and the producers of wealth. For example, capitalist society is dominated by wage-labour and a highly developed system of production, technical and organizational.

The development of the specific mode of production, then, dictates the qualitative organization of the factors needed for its own development, i.e. the development of a highly efficient means of producing commodities and the formation of a labour force to work in this type of production. It is the qualitative changes in the market demand
for specific types of labourers which result in the disciplining and control of those who must labour to provide for their own reproduction. In this system the role of the state is to separate those who can be disciplined to work under capitalist social relations of production from those who cannot work to the dictates of the labour market. Simply, the demands of capitalism are such that profits must be earned. To do this labourers must be able to work productively. In the early stages of this process, the industrial revolution, those physically able to work had to be taught the regimentation of the factory (Thompson, 1967). Those not physically able or those who acted irrationally (lunatics) were separated from the potential work force.

The general time period of asylum formations within the capitalist mode of production was the late eighteenth and early nineteenth centuries. The reasons for the building of asylums had little to do with the specific dates involved but rather was determined by the organization of a disciplined wage-labouring population. The qualitative development of a wage-labouring population, needed in the industrial establishments at the turn of the nineteenth century, is directly effected by the extent of capitalist development and accumulation (Marx, 1967, Vol. 1, Cap. 25). The organization of a relative surplus population and its management by the state through the system of public welfare (Poor Law) determined the organization of the separate confinement of the mad in asylums (Marx, 1971: 64-69).
i) Relative Surplus Population

Within the Marxian framework the development of the capitalist mode of production is characterised by wage-labour and the accumulation of capital on an extended scale (Marx, 1967). Accumulation of capital is the result of the extraction of surplus-value from the wage-labour of the working class. This extracted value is transformed into capital and reinvested (Marx, 1967, Vol. 1, Cap. 4). Within this sphere is the tendency to reduce the ratio of capital to labour by using only the most productive labourers and also a tendency for the organic composition of capital to rise (Marx, 1967, Vol. 1, Cap. 25, Section 3). The process of capitalist accumulation distinguishes between the various qualities of labour-power. Productive labour within the capitalist mode of production is, by definition, labour that can produce surplus-value (Marx, 1967, Vol. 1: 467-477).

Historically, the process of lowering the costs of production or employing the most productive labourers has been extended, filtering through the system of public welfare to ensure the supply of a productive, disciplined labour force. "Hence the notion of productive labour implies not merely a relation between work and useful effect, between labourer and product of labour, but also a specific, social relation of production, a relation that has sprung up historically and stamps the labourer as the direct means of creating surplus value" (Marx, 1967, Vol. 1: 477). The conditions of employment in capitalism do not
require that a specific person be able to work, but that she/he be able
to do so at a specific level in the work process, i.e. not all
labour-power is marketable.

A portion of the labouring population is defined as unable to
work and provide for themselves because the labour-power they have to
sell is not productive enough for the generation of surplus value (Scull,
1979: 30-31). This group is usually referred to as the deserving poor
those who cannot provide for themselves given the conditions of the
labour market. (Marx (1967, Vol. 1: 602-603) refers to this group as the
"lowest sediment of the relative surplus population ".

The capitalist mode of production dominated the period in which
asylums appeared. As an institutional form which supported the
capitalist mode of production can be considered to be an integral part of
that mode of production.

The relations of production (i.e. social
organization in its broadest sense) and the
material forces of production, at whose level
they correspond, cannot be divorced. (Hobsbawn
(ed.), 1965: 17)

Order, rules and discipline, dictated by the demands of the
labour market, organize the working life of the wage-labourer.

Work Rules, formalized, impersonal and
occasionally printed, were symbolic of the
new industrial relationships. Many rules
dealt with disciplinary matters only, but
quite a few laid down the organization of the
firm itself. 'So strict are the instructions
that if any overseer of a room be found talking
to any person in the mill during working hours
he is dismissed immediately - two or more
overseers are employed in each room, if one
be found a yard out of his ground he is discharged ...
... everyone, manager, overseers, mechanics, oilers, spreaders, spinners and reelers, have their particular duty pointed out to them, and if they transgress, they are instantly turned off as unfit for their situation." (Pollard, 1963-64: 258)

... social control under capitalism ... is rooted, ..., in the existence of the factory and its key ancillary institutions: the prison, the school, the workhouse, poorhouse etc.... (Lea, 1979: 77)

Not only was it necessary for the worker to be disciplined in order to enter the labour market but that discipline continued in the factory itself, reproducing the conditions already set in the workhouses, i.e. differentiating between those who could be disciplined from those who could not. The "workhouse had become a kind of factory" and in turn the "factory should be regarded as a kind of workhouse" (Redford, 1964: 25). The transformations of the industrial revolution demanded specific types of labourers. It became the role of the public welfare institutions under the Poor Law (workhouses) to provide capitalists with the type of labourers needed. The institutions, then, had to separate those who would be able to work from those who for some reason could not conform to the dictates of factory discipline.

Marx (1967, Vol. 1: 595-596) argues that within the organization of a labour force there also arises a surplus of labourers ready to enter the process of production as capitalism expands. This surplus is relative to the development of the means of production and operates as a "reserve army of labourers" (Braverman, 1974: 377-401) living on the boundary of the labour market or on the dole. In the early
stages of transforming the labouring population from an agricultural
based community to an industrial one, labourers "were faced with the
alternatives of partial employment and the poor law, or submission to a
more exacting labour discipline, the factory" (Thompson, 1967: 78). The
institutions which provided for those on the boundary of the labour
market and at the same time disciplined labourers for their new part in
production - public welfare institutions - were run by the state.

The transformations in the demand for specific types of
labourers during the industrial revolution became refracted in the
industrial organization of the poor. Definitions of the workers' ability
to labour became definitions of the rationality of the individual to be
disciplined. Those who could not adhere to the rigor of the workhouse
and the discipline of factory production were separated from those poor
who were potential labourers. The distinctive factor between the period
of industrialization and the preceding period is the institutionalized
distinction between the types of labourers cared for by the state. The
specialization of institutions for the confinement of various types of
paupers was based on the demand for a specific type of labourer. There
emerged a structured qualitative difference among those confined in the
institutions of public welfare: a difference based on their ability to
be trained and disciplined workers, a difference based on rationality, a
difference between the mad and the sane. The state played the role of
formalizing this process by institutionalizing the definition of an
able-bodied labourer.
ii) The state

Since lunatic asylums were public institutions controlled by the state, not privately organized or supported, the relationship between the state and capitalist industrial development forms one of the preconditions for asylum formation. The state played the role of producing and reproducing the conditions which led to the strict management of the surplus population. The form of institutions developed by the state for the support of the unemployed labouring population corresponds with the development of capitalist demands for productive labourers.

The organization, assistance and control of paupers by the state in England can be traced from the introduction of wage-labour as a means of providing the necessities of life (Van der Slied, 1936). Since that time the state has controlled and maintained the surplus population of labourers at a level of subsistence: providing in hard times and restraining in good (see deSchweinitz, 1961).

In organizing the surplus population the state, because of its relation to the unemployed, has the ability to coerce the poor to do the labour needed for production. Public welfare was the means of coercion. The role of the state is also to incorporate the reproduction of the conditions for capitalist production to take place (Burawoy, 1976) and have the ability to synchronize this with the changing demands of the capitalist labour market.
iii) Reproduction

...reproduction presupposes the existence of what is being reproduced. ... Social relations, ..., do not merely exist but have to be produced again and again - that is, reproduced. (Buraiow, 1976: 1051, **12**).

The reproduction of capitalist social relations over time is manifested in the formalized institutionalization of the wage-relation. Public welfare institutions support the existing mode of production by reproducing the conditions of labour, dependence on a wage, and ensuring that state assistance will not eliminate workers from the reserve labour population. To accomplish this, the state, in the period of industrialization, was able to sustain the pauper population at a level of existence which would ensure their quick entry into the factory. The workhouse accomplished this even though, during this period, part of the population was still living on the boundary of the labour market.

However, the workhouse was a means of assistance which ensured the misery of the working class by making the conditions of public support worse than the conditions of the lowest paid wage-labourer.

The workhouse ought to be so conducted as that the labouring part of the community might not behold it better furnished, better provided, more comfortable than their own homes. They should not, in Winter, see all its chimneys cheerfully smoking, when their homes are cold ... nor all comforts ... pervading the abode of the pauper, when their own habitations presented scenes of want and wretchedness ...
The dread of the poorhouse has decreased...
I wish to see the poorhouse looked to with
dread by our labouring classes and the
reproach for being an inmate of it extend
downwards from father to son... Let the
poor see and feel that their parish, although
it will not allow them to perish through
absolute want, is yet the hardest taskmaker,
the closest paymaster and the most harsh and
unkind friend they can apply to.

George Nicholls, *Eight Letters of the Management of our Poor... in the Two Parishes of Southwell and Bingham.* (Longmate, 1974 46-47)

Social reproduction of the labour force is, however, dependent on the specific stage of capitalist development. The actual forms of state support will vary due to the conditions and demands of capitalist production. In the period of asylum formation the state comes to play an increasing role in the confinement of the insane because of the particularity of the place of the mad within the institutions of public welfare. This role is exemplified by the qualitative change in the organization of the workhouse system and the type of labourer confined there under the old and new Poor Law (Taylor, 1969). As Buraway (1976: 1056) states, the role continually performed by communal or private organizations was transferred to the state. In treating insanity, the transfer was from family confinement and local begging to the gaol and workhouse (Scull, 1979).

Reproduction enters at the point at which the state assumes.
control of institutions of confinement, when workhouses were tied to the discipline of a wage-labouring class, when those who could not conform to the discipline and regimentation of the workhouses had to be separated from those who could: the "able-bodied" poor. The conformity of the workhouse, as an institution of public welfare, to the demands of industrial capitalist production initiated the process of separating the different levels of the relative surplus population. It separated the useful from the inept (Hodgkinson, 1963: 147).

There is a tendency for the state during this period to assume control over the institutions of public welfare since it is not in the interests of the capitalists to provide sustenance for those not in their employ. Furthermore, it is less in their interests to support those who could not possibly work as labourers. The latter is the issue at hand, the management of those who are of no benefit to society; the management of those that the family will no longer support and that charity will no longer tolerate. Because of the relationship between the workhouse and the labour market even the institutions of public welfare did not want the mad.

In the absence of public asylums, many pauper lunatics who were 'not so violent as to be perfectly unmanageable' were frequently abandoned, and left to 'linger out their existence in a workhouse'. ... But though the maniac was here reduced to the status of inconvenient object, whose condition required no more than the minimal efforts to be made to ensure his physical survival, yet his presence was still a burden upon the workhouse administrators, and on the lives of the sane inmates. If nothing worse, the latter were forced to
tolerate the disruptions and unpleasantness brought about by the lunatics' refusal to conform to ordinary social conventions, so that, under even the most brutal and unfeeling management, 'lunatics in Workhouses' unavoidably remained an extreme annoyance to the other inhabitants to those houses'.

(Report of the Select Committee on Madhouses, 1815) (Scull, 1979: 91)

Within the framework presented above we are brought to the point at which lunatics, previously confined with other paupers, are separated and confined in specialized institutions called asylums. In an analysis of asylum formation we must now incorporate at this juncture the reasons for their separation and their subsequent control by the medical professional (psychiatry). As Scull (1979) has already shown, the particular form of separate confinement is also influenced by 'moral entrepreneurs' both in medicine and social reform (Skultans, 1979: 104).

The two points that come out of this discussion and form the basis of the rest of the dissertation are: (1) Lunatics are defined in relation to their capacity and willingness to work within capitalist production; and (2) The medical profession assumes control over the treatment of the mad by controlling asylums, which were founded on the basis of the re-organization of the poorhouse.

C) Lunatics and Psychiatrists

In conjunction with other processes which constitute the formation of the asylum, an already confined population of lunatics are
joined by the emerging profession of mad-doctors (Parry-Jones, 1972). These are two relatively autonomous historical traditions which play a significant part in asylum formation. I am not presenting a model in which control of lunacy by the psychiatric profession 'happened' or was initiated by the profession, but rather a model in which the medical profession struggles for control over an already segregated and organized clientele (Larson, 1977: 9-10). Therefore, I am arguing that lunacy was institutionalized before a specific segment of the medical profession (psychiatry) became their keepers. This process of gaining control had to be fought with the legal profession and the juridical processes already established for the labelling, treating and confining and the mad (Bynum, 1974: 323; Hodgkinson, 1963: 141). The control exercised by medical men over the confined population of lunatics did not occur with the erection of the asylum but developed gradually after. This development was completed with the "mental hospital" in the twentieth century. We cannot say that it was control over specialized knowledge of insanity that enabled psychiatry to assume its position as keepers of the mad since the knowledge of the medical profession concerning madness in the early nineteenth century was no greater than that of the legal profession or the workhouse master (Scull, 1979: 125).

Initially, the traffic in this species of human misery (insanity) was a trade monopolized by no single occupational group. (Scull, 1979: 126)

My discussion will focus first on the origins of the asylum
population and then on the psychiatric profession.

i) Origins of the Asylum Population

Before the period of asylum formation there was a stage in which lunatics were primarily confined in public welfare and penal institutions. Foucault (1965: Cap. 2) refers to this period, from the early seventeenth to the late eighteenth century, as the "great confinement". Insanity in seventeenth century England was considered a threat to the entire parish and, with the limited resources of the parish, treatment was usually restraint (Fessler, 1956: 906). Institutions which housed these lunatics also confined every other type of pauper (Hoogkkinson, 1963). This period is of great importance to the history of madness because it was at this time that the distinction between mad and sane became institutionally entrenched.

The private madhouses of the eighteenth century were run for a profit (Scull, 1979: 126). The system, called the "trade in lunacy" (Parry-Jones, 1972) housed the wealthy madmen. These "lunatic persons of property" escaped the gaol and house of correction and were incarcerated in a separate set of institutions, run by "mad doctors", not associated with the medical profession. In some instances the parish would provide funds for sending some pauper lunatics to these houses where they were made to work for their keep (see Parry-Jones, 1972). Most often the financial state of many parishes required that most of the pauper lunatics be incarcerated there (Fessler, 1956: 906). The legal status of
própertyed lunatics had a great influence on the form of treatment that emerged for the wealthy (Jones, 1955; Brontë, 1945 and Reade, 1863).

If the first inmates of the asylum were drawn from other institutions of confinement and if the treatment of those confined in the first asylums corresponded to their treatment in the poorhouses then how did the medical profession gain control over the lunatics? Why was one form of control - order and discipline - replaced by another based on the promise of a cure?

Speculators from a wide variety of backgrounds looking for easy profits, as well as more 'respectable' groups such as the clergy, all sought to obtain a share of a lucrative market. It was at precisely this stage that the medical profession (or rather, diverse individuals laying claim to possess some sort of medical training and knowledge) first began to assert an interest in lunacy. (Scull, 1979: 126) (See Foucault (ed), 1975: 251)

Control over the mad was focused in the debates on the origins of madness, debates on whether the seed of insanity was in the mind or the brain (Bynum, 1974: 330). If the cause was in the mind, as proposed by laymen such as Samuel Tuke with their ideas on "moral treatment" (Glover, 1972 a and b), then why should the mad become the exclusive domain of medicine? The debates over the causes of madness were not isolated from the debates over the causes of pauperism. Causes of insanity were linked to class and racial characteristics. Class distinctions became manifest not only in the private asylums (Parry-Jones, 1972) but also in the public asylums (Macalpine and Hunter,
The medical profession, because of its incapacity to deal with madness as a disease, was looked on with considerable distrust.

If physician qua physician could do nothing for the lunatic except treat his bodily afflictions, then the medical man had no special claim to a unique place in the treatment of mental illness. Their income, prestige, and medical theories were all threatened.

(Bynum, 1974: 325)

The only option was for the medical profession to incorporate moral treatment into its grab-bag of treatments for madness (Scull, 1979: 129-145).

The question then is how the psychiatric profession gained control of the mechanism of differentiating the mad from the sane.

ii) Origins of Psychiatry

In examining the point at which what was to become the psychiatric profession gained control over lunacy, it is not sufficient to say that the "crucial feature of professional monopoly is control over knowledge which functions to support the system of production" (Johnson, 1972: 45). This perspective would lead us to state that psychiatry, as a profession, controlled some new information or technical ability to treat or cure insanity which forced the separation of lunatics from the poorhouses. This analysis assumes that institutional structures of power already exist. Therefore, we must add to Johnson's (1972) argument in this specific case because there was no professional organization for the
control of the mad at the time of asylum formation. It might be argued that the medical profession solidified their control over the mad by providing a "cure" and also by first gaining control over the institution itself (see Scull, 1979: Cap. 4). Along with this we could argue that the market for a trade in the management of the mad was created by specific trends in the larger social structure which were then taken advantage of by the medical profession (see Larson, 1977: Cap. 2). On this basis I argue that institutional control over a specific population is a necessary prerequisite for any statement of "technique" or "knowledge" to have meaning. Johnson (1972) has provided us with an historically specific analysis which can be applied to the period in which the psychiatric profession was already entrenched as the keepers of the mad. However, if we are to expand his argument to the origins of the psychiatric profession we must incorporate the works of Scull (1979) and Larson (1977) into the analysis.

In the following chapters I will illustrate the structural and historical base for the control over the "knowledge" of treating the mad. Since there was little difference, in the early nineteenth century, between medical and non-medical knowledge concerning lunacy (Anon, 1847-48; Anon, 1844-45), I will argue that the profession first had to gain control of the asylum before it could monopolize "knowledge" about the treatment of lunacy.

Without control of institutional structures for treating lunatics the profession of psychiatry would not have developed the way it
has. As Johnson (1972: 24) points out, there is a definite relation between the specific "techniques" of treatment (of which knowledge is one) and the society in which they occur. This suggests that explanations of asylum formation based on the discovery of new techniques (Leigh, 1957: 237) misinterpret the casualty of events.

My argument on the origins of the psychiatric profession follows the work of Castel (1975: 150-269), while at the same time incorporating the works of Scull (1979), Larson (1977) and Johnson (1972). Psychiatry, in its infancy, created an outlet for those who could no longer be adequately handled by the state. Psychiatry assisted in the process of state control by accepting the cases of poverty and crime that the state could no longer deal with. Thus, psychiatry was able to acquire a foothold in the processing of madness. I must agree with Gregory Zilboorg (Zilboorg and Henry, 1941: 244) that psychiatry originated as the "stepchild of jurisprudence" and, as well as the population of madmen confined in asylums, it was "born in the poorhouse" (Stearns and Ullman, 1949: 801).

III Summary

I have outlined an approach to the study of the initial confinement of the mad in asylums which attempts to explain this phenomenon as a specific event in the history of madness. I have argued that the study of the incarceration of the mad in asylums cannot be separated from either the history of confinement - public welfare - or
the social conditions surrounding this confinement. To accomplish this I have introduced a method of "deductive" reasoning which allows for the "explanation" of a specific historical event. This involves the development of a theory and empirical examples of the historical and contemporary processes forming the boundaries of the event. Empirical evidence concerning these boundaries will be given in chapters III, IV, and V of this dissertation.

By criticising the use of eventism in historiography I have argued for the use of a general theory to explain the occurrence of specific historical events. Though there are arguments against this method (Mandelbaum, 1961) it is seen as a valid approach to the study of history (Atkinson, 1978: Cap. IV). The general theory I use is from Marxist political-economy; it is concerned with the organization of a working class. The model I propose stresses the importance of the development of institutions by the state for the organization and disciplining of a labour force needed in factory production. I will focus on the relationship between the institutionalization of paupers and the treatment of madness, paying particular attention to the reaction of the state - through legislation - to the demands of capitalist production. The history of the confinement of the mad is also the history of public welfare (Scull, 1979: 13-18). This will be the bulk of my third chapter, showing the relation between the state and the institutional confinement of the poor. This will form the basis of chapter IV which will outline the development of public
welfare in Upper Canada, i.e. the history of the confinement of the mad before asylum formation in Upper Canada. Lastly, I will examine the development of the psychiatric profession's control over the asylum through political confrontation with the institutions of public welfare.

The next chapter (II) will discuss alternative explanations for the rise of the asylum. It will point to the inadequacies of medical and sociological models in attempting to answer the question of asylum formation.
CHAPTER 1 FOOTNOTES

1 The definition of "explanation" is taken from C. Hempel, referred to as a "law explanation" (Atkinson, 1978: 102-115). This use of the term states that there are laws from which certain events can be deduced. There must be empirical evidence that these events occurred and also that the explanans (Dray, 1974: 67) of the event occurred. Explanation connects events into patterns and is not predictive (Scheffler, 1963: 43-44). However, history is not linear and an explanation of a particular event must consider a number of interlocking social processes.

2 Since Upper Canada and Great Britain are in a colonial relationship and both share the same economic and political base we can say that they are part of the same social unit and that the history of institutional development in Upper Canada is tied to the history of that form which is in Great Britain (Curtis and Edginton, 1979). The importance of the colonial relationship is one that has been ignored by those studying the history of madness. The reason for this is that all the material on the history of madness is treated as a national phenomenon (except Lee, 1973). Even those writing on the history of madness in the United States rarely show the connection to European models of confinement and see asylum formation as an American phenomenon (Rothman, 1971).

3 Lunatic Asylums, as used in this thesis, are public institutions and are therefore controlled by the state and not run for profit. For the case of private asylums, see Parry-Jones (1972).

4 Conjuncture is the act of joining together or the combination of historical and temporal processes in a specific "instance" to form an event (Althusser and Balibar, 1970: 311).
CHAPTER II
Confinement of the Mad: Explanations

1 Introduction

Before entering into a discussion of alternative explanations for the formation of asylums, I wish to clarify the social position of the mad in the late eighteenth and early nineteenth centuries, in order to situate historically the discussion of madness. Madness at this particular point in history was associated with one's loss of rationality:

Insanity then, is the result of a diseased brain; ... but it is only one of the results or consequences of a disease of this organ. The brain may be diseased without causing insanity; for although we say, and say truly, that the brain is the organ of the mind, yet certain portions of the brain are not directly concerned in the manifestation of the mental powers, but have other duties to perform.

(Anon, 1844-45: 99)

A man's natural benevolence or propensity to acquire, or to love, may be deranged from disease of the brain, as truly as his powers of comparing, reasoning, etc.

(Anon, 1844-45: 108)

Madness was not a malady which could only be detected by a person of the medical profession; it was obvious to all since anyone "in his right mind" could see that someone was mad by the irrational way she/he acted, e.g. the case of George III (Macalpine and Hunter, 1969).

Because no one profession had a monopoly over the diagnosis and treatment of madness there was a great deal of fighting among
professional groups over control of the mad (Scull, 1979: Cap. 5).

John Haslam, (Leigh, 1955) a noted expert on madness and melancholy,

stated in 1809: "attempts of medical writers to define insanity, have not
been more successful than those of the legal authorities to define what
constitutes unsoundness of mind. ...Medical men have been subjected to
much ridicule in our courts of law for the great variety, and sometimes
total dissimilarity, of opinions entertained by them with reference to a
correct definition of insanity" (cited in Scull, 1979: 236).

However, with the formation of the asylum and the efforts of
medical men to centre madness in the brain, the medical profession gained
control over insanity because they were guaranteed a clientele. In
looking back in history we are forced to define the mad as those socially
treated as mad. Whether they were "mentally ill" or not - according to
present definitions - does not concern or influence us here. Therefore,
I adhere to the premise that the mad were so defined because of their
behaviour (see Scheff, 1966). The cause of their behaviour - which is
impossible to determine for the mad of almost two centuries ago - is not
significant for an explanation of separate confinement.

The question that follows is, then: How are the mad socially
defined? A sociologist, George Rosen (1968), argues that students of the
history of madness believe there to be a relation between social
organization - environment - and the incidence of irrational behaviour -
madness. According to Rosen (1968: 17) "there is a widespread conviction
today that a close interdependence exists between the social environment
and the development of mental illness (emphasis mine). Even though he
tries to show the relation between social processes and behaviour, Rosen
is limited both historically and theoretically by calling madness an
"illness". By definition this places the source of irrational behaviour
within the individual. That is, and individual has an illness which
determines his or her behaviour. This illness is, however, affected by
the social environment. This assumes that individuals are somehow
affected by something outside themselves which they are not part of; i.e.
the environment, instead of being an integral part of the social
structure itself (Foucault, 1976: 3-13). The context in which Rosen
places "irrational behaviour" is a-historical because he fails to develop
a general explanatory scheme of social reasons which may not only be
applied to the mode of treating madness but also to the origins of their
maladies.

Rosen says that "mental illness", not irrational behaviour, is
a distinguishable phenomenon that occurs in every society in every
historical period. Using the concept of "illness" he says that there are
various "social, psychological and cultural" factors that determine the
place of the "mentally ill" in society (1968: xi). The causes of the
malady are the same in all historical periods but treatment is specific
to each society. Rosen (1968: 69) speaks of the Greeks, Romans, Jews,
etc. treating "mental illness" as one would speak of the differences in
the treatment of a broken arm. There is no questioning whether in fact
these people were ill or in some way social deviants.
There seems to be a contradiction in Rosen's analysis of madness in society. While trying to be historically specific he accepts concepts and terminology specific to our present definitions of this form of behaviour. However, there is no evidence to support the supposition that those treated as mentally ill were actually mentally ill. By using "mental illness" as a universal, timeless concept there is a tendency to accept every incident of irrational behaviour as psychopathological (Ackernecht, 1943: 31). This interpretation of Rosen's work is justified since he never broaches the question of causality or explanation, leaving us to believe that the different forms of treatment have no history and are accidents of a particular social environment.

As Rosen himself has argued, there is a sociological relation between the environment and abnormal behaviour as a medical phenomenon. It is understood that there is no possible way of knowing the cause of mad behaviour. All that history has left us with are symptoms which may have been caused by a physical illness. Although the symptoms may be the same for different historical periods and cultures there is no way of knowing a priori the cause of these symptoms.

Rosen would have us believe that the asylum is simply a specific historical mode of treating mental illness. The reason it is a lunatic asylum and not another form of institutional care (e.g. the workhouse) is because of the "environment". Somehow the social environment creates the necessary conditions for asylums to develop. In the same vein Gerald Grob (1966A: 510) states: "Like most institutions
that arise in response to the needs of society, the mental hospital (asylum) grew out of a specific cultural milieu and reflected the unique characteristics of its indigenous environment (emphasis mine). Grob, although he does not use the term mental illness, switches to the institutional form "mental hospital" to the undefined concept of environment or more generally society. Again, the development of a specific form of treatment appears accidental, independent of both its history and the best intentions of the lunacy reformers (Grob, 1973: 342). When social environment is used to explain a specific form of social behaviour we cannot identify empirically the conditions needed for asylum formation to occur since the term escapes description (see Scheffler, 1963: 29). Andrew Scull (1979: 257) states that the problem with Grob’s analysis is that there is no general theory to account for historical process and therefore events must have happened by accident:

... the view of reform as the product of the 'accidental', malevolent distortions of a Manichean world represents a denial of or a failure to come to terms with the multiple ways in which structural factors constrain, prompt, and channel human activities in particular directions. On a deeper level, consequences which appear unintended and 'accidental' considered from the viewpoint of the individual actor, remain susceptible to investigation and explanation.

In an analysis of the criteria for separate confinement of the mad, in the early stages of asylum formation, the anomalous definitions of sanity and insanity become critical because the development of institutions cannot be based on individual behaviour (Ackerknecht, 1975). What then are the reasons for asylum formation?
By using Rosen's work as an example we can see that there can be no acceptance of the current psychiatric definitions of mental illness to locate the cause of insane behaviour in previous historical periods. Acceptance of this model forces the analyst to describe the process of asylum formation as a reaction to the rise in the numbers of mentally ill. This research cannot incorporate the above perspective on two grounds; 1) it reduces social phenomena to diseased individuals, and 2) it dislocates time-specific organization and development.

The initial period of the separate confinement of the mad is important within the history of madness because it forms a 'break' (Poulantzas, 1969: 78) in the mode of treating insanity. This 'break' forms the transition from the association of the mad with the poor to their association with the sick. Two structural determinants mesh in the formation of the asylum: 1) the organization of labour-power by the state for factory production, and 2) the specific historical conditions associated with the confinement of the mad.

For the purposes of this dissertation I will concentrate on the specific relation between Great Britain and Upper Canada - a colonial relation - which affects both parts of the explanation of asylum formation. Similarly, if I were attempting to explain the formation of the asylums in Lower Canada an analysis of the connection of that province to France would have to be shown in order to understand the role of the church in the treatment of lunacy (Fremont, 1850).
The discussion above leads to the primary question of this dissertation: Why, in the period 1841-1853, did a particular form of confinement emerge for the treatment of madness in Upper Canada?

My argument is as follows: Prior to the period of capitalist industrialization there were various methods for the confinement and treatment of those displaying criminal or irrational behaviour. In Britain and Western Europe the confinement of the insane corresponds to the treatment of the poor. With the decreasing ability of the poor to provide for themselves outside wage-labour came the new methods of making the poor suitable for factory production (Scull, 1979: Cap. 1). Treatment of the irrational differed from place to place depending on the extent to which industrial organization determined the types of labourers needed. The rationality of factory production, in terms of an individual's ability to work, became the definition of an individual's rationality. Within capitalist society the rationality of an individual social actor is defined, in part, by his or her ability to provide for his or her own maintenance within the constraints of factory production and wage-labour (Skultans, 1979: 105).

The specific behavioural "rationality" of industrial capitalism is based on an individual's ability and willingness to sell his or her labour-power. However, in the case of Upper Canada, a further complication presents itself: There was no history of the treatment of the insane for a system of asylums to grow from. The pattern of institutional development in Upper Canada followed that of the mother country
(Splane, 1965). The colonial relationship between Upper Canada and Britain structured the possibilities for the institutional separation of the mad.

The specific case of Upper Canada is interesting because it is not a "nation" separable from the histories of other nations, but a colony. In analyzing institutional confinement in a colony we cannot ignore the impact of factory production in industrial capitalism on the political apparatus of colonial domination. In understanding colonial social structure and the adoption of specific institutional forms of confinement, the geographic locale must fit our analytic unit - the colonial state (Curtis and Edginton, 1979).

I have argued, above, for an analysis of the place of madness in society that is particular to time and place, but is also situated within the larger socio-historical development of industrial capitalism. I will now turn to a discussion of alternative models of asylum formation and critique them in the light of the material presented.

II Models of Asylum Formation

The existing literature on the subject is neither explicit nor theoretically consistent. I will therefore criticize the known approaches, using examples from the available material. Here, I will discuss the two main approaches to the explanations of asylum formation. The first, the "great man" or medical individualist approach (Mora, 1972: 2), reduces all social phenomena to the personal
characteristics of individuals who are called the "founders of modern psychiatry". The second, the sociological approach, can be divided into three separate models - 1) functional, 2) social control, and 3) idealist. These three models attempt to place the formation of the asylum within a specific context, but only describe part of the processes which result in asylum formation. After discussing these alternative approaches I will outline the empirical evidence to be presented in the following chapters in support of my thesis.

a) Medical Individualist

During the period when lunatics were first separated from the general confined population of paupers, psychiatric thought was characterized by theories of "moral treatment" (Carlson and Dain, 1962). I have already mentioned that "moral treatment" was a way of non-medically treating madness and that the medical profession made a concerted effort to show that madness was a disease and that "moral treatment" could be incorporated into the medical model (Scull, 1979: 132-141). Incarceration at the turn of the century was noted for what has been called "humanistic" methods in treating those confined. However, this "humanism" must be viewed in relation to the previous modes of treatment. Foucault (1977: 128-131) points to the switch in treatment from physical restraint to moral restraint. He shows it to be a switch in the method of creating discipline and order. Even though the chains of the lunatics were removed they were not eliminated and were used as a threat if order was not maintained.
The methods of moral treatment did have substantial effects on the releasing of lunatics from the workhouses, jails and cellars. This change in patterns of treatment, which is said to have resulted in the 'birth of the asylum', is thought to have been carried out by the "fathers of psychiatry". This humane and "tactful manipulation" (Bynum, 1974: 18) of the mad was to lead to their "resocialization" (Bockoven, 1956: 303). So, what we have, is the mad being eliminated from the public welfare institutions and being separately confined, and then the entrance of the medical profession to fight over control of institutionalized lunacy by offering to "cure" their maladies. The ideology of the cure fitted well with the goals of the state to reduce the number of those who had become a financial burden. What was needed was a plan to make the mad socially useful, the answer was the cure.

The movement to "moral treatment" assisted in the removal of the insane from the harsh treatment of the workhouse but, as soon as the asylum was seen as a viable alternative for the treatment of the mad, and controlled by the medical profession, "moral treatment" was abandoned (Rothman, 1971: xix).

As stated above, the separate confinement of the mad has come to be thought of as the work of great men in the history of psychiatry. Their "scientific" theories about the nature of insanity and the use of "moral treatment" to back up their claims (Caplan, 1969: 10) has led many psychiatric historians to believe that the new methods of treating insanity in asylums and the reasons for the building of asylums revolve around the personal efforts of these great men.
Even though "moral treatment" was never predominant among theories of treating madness, there is a close association between those known as the fathers of psychiatry (Pinel, Tuke, and Chiargui) and the use of "moral treatment" or humane methods of confinement (Bynum, 1974; Grob, 1966A). These individuals are said to have "single-handedly" removed the mad from their chains and transferred them to the humane wards of the asylum (Alexander and Selesnick, 1966: 115).

The history of psychiatry (Alexander and Selesnick, 1966), the history of medicine (Lloyd, 1971) and the history of psychology (Thomson, 1968) are dominated by individuals who are able to transform institutional structures through their superior qualities. Many similar statements about Pinel (Woods and Carlson, 1961; Grange 1961), Tuke (Glover, 1972a and b), Rush (Bockhoven, 1956) and Chiarugi (Grange, 1966) can be found.

The most famous of these is the case of P. Pinel who released the mad-women of the Sâlpetrière from their chains in 1793 (Dain, 1964; 3-5). The 'break' in treatment, from chains to fear (Foucault, 1965; Cap. 8), was said to have been made possible through the work of Pinel (Woods and Carlson, 1961).

Within the medical-individualist model, social phenomena became ancillary to an individual's attributes. But how can an individual possibly discover an institutional form? In the case of Pinel, for example, it is necessary to look beyond his personal attributes to the set of social relations of the society of which he was a part. In fact,
in his discovery of the asylum, Pinel was supported by the state (Macalpine and Hunter, 1969: 286) and other humanitarian groups. This support provided the structure Pinel needed to separate lunatics in the face of public hostility (Foucault, 1965: 242).

Ilsa Veith's (1965: 177-178) description of the work of Pinel substantiates the tendency of historians of psychiatry to reduce all social process to the ideas, beliefs, and characteristics of 'great men', while ignoring relevant social connections:

These ideas were revolutionary indeed, for at that time mental disturbances were considered incurable because, as Pinel truly said, there were uniformly accepted as the result of organic brain disease. His fervent belief in the curability of most mental diseases had the most practical consequences. It demanded complete revision of the institutional care of the insane, which had then been predicated on the futility of therapy in the category of human diseases. Physical labour for convalescent patients was initiated in the hospitals under his directorship. He arranged for a variety of occupations by inducing Paris manufacturers to supply patients with work which fixed their attention and allured them to exertion by the prospects of a trifling gain.

(emphasis mine)

Veith (1965) states that the result of Pinel's humanitarian efforts was the release of the mad from their chains to provide cheap labour for local manufacturers. Veith, here, fails to recognize the relation between the advent of separate confinement and industrialization (see Foucault, 1965: Cap. 2) and thus the restructuring of the treatment of lunatics can only be portrayed as the personal accomplishment of Pinel.
This approach to the problem of asylum formation cannot answer the question of why similar institutions were developed throughout the industrializing world, with or without the aid of the "fathers of psychiatry" (see Lee, 1973). The great man approach cannot explain why asylums developed at the specific point in time that they did. Were there not great men emphasizing the humane treatment of the mad before the asylum movement began? Even the specific form of institution - the asylum - which appeared over and over again in different parts of the world cannot be derived from the personal attributes of the founders of psychiatry.

Pinel was embedded in a set of social relations and institutional restrictions. He was part of, but not the cause of, the process of separate confinement. Through information provided by Woods and Carlson (1961:17) we find it was not Pinel's personal characteristics which ensured his appointment to the Paris school of medicine but his political affiliations and relations. On assuming this appointment Pinel was able to secure institutional control of the mad and mobilize his connections to expand his authority:

In the line of duty he (Pinel) had to be present at the execution of Louis XVI; he served as physician-in-chief of the Bicêtre and the Salpêtrière under the Revolution and the Terror. He served in that capacity under Napoleon ... Pinel was also made consultant physician to the Emperor.

(Zilboorg and Henry, 1941: 319)
Even though Pinel was able to secure himself in the vast institutional system of the Hôpital Général, there is no reason to believe that a change in the confinement of the mad could have been executed without the consent of the state whose purposes were certainly not psychiatric (Macalpine and Hunter, 1969: 289).

This responsibility (for the inmates) was entrusted to directors appointed for life who exercised their powers, not only in the buildings of the Hospital but throughout the City of Paris, over all those who came under their jurisdiction: They have all power of authority, of direction, of administration, of commerce, of police, of jurisdiction, of correction and punishment over all the poor of Paris, both within and without the Hôpital Général (which the Bicêtre and Salétrièr were part of). The directors also appointed a doctor (Pinel) at a salary of one thousand livres a year; he was to reside at LaPatie, but had to visit the houses of the Hôpital twice a week.

(Foucault, 1965: 39-40)

My emphasis here is that superior attributes of individuals (Shils, 1965) can explain neither the formation of asylums or why madmen are institutionalized at all. The inadequacy of the medical-individualist interpretation opens the question of the relation of not only the madman to society but also of the social role of psychiatry. This leads to a discussion of asylum formation on a sociological level.

b) Sociological

I have previously argued that those who view history as 'events' in the lives of great men have bypassed the effects of larger
structural processes on the confinement of the mad.

Historians of psychiatry and insanity also have interpreted the insane asylum as a reform, a step forward for medical science. The asylum, in this view, was the result of breakthroughs in the field of medicine, the product of accumulated knowledge about mental disease. They feel no need to explain society's adoption of the program, since they see it as a logical response to scientific progress. (emphasis mine)

(Rothman, 1971: XV).

In this section I will present three sociological approaches to the question of asylum formation: 1) functional; 2) social control; and 3) idealist. The general purpose of the sociological approach is to place the event within the structure of social relations in which it is embedded. Each of these models views the formation of the asylum as part of these relations; each describes the different social roles the asylum plays in relation to other processes within the society. I will argue, however, that while each of these models may sufficiently describe the relation of the asylum to other social processes each fails to explain how the asylum - as a particular form of treatment - was developed. That is to say, they do not recognize the question I am posing in this research as necessary for explanation. Each of these approaches, while giving valuable information, fails to provide us with a theoretical approach that allows us not only to explain asylum formation but also to situate the event within the society.
i) Functional

Within the field of the history of madness and psychiatry the functionalist perspective is exemplified by the works of Rothman (1971) and Grob (1966A and 1975). This perspective states that the formation of the asylum is a response to specific societal "needs" (Grob, 1966A: 510). Rothman and Grob both reject any individualist explanation for the formation of the asylum and instead shift the nature of causality (Atkinson, 1978: 143) to "social needs".

The functionalist model as used by Rothman and Grob argues that for any specific time and place there is a "proper functioning of society" (Rothman, 1971: XIX). For example, Rothman states that one of the primary aspects of "proper functioning" during the Jacksonian period of American history is "order" (1971: Cap. 5). The asylum is then "discovered to maintain order". The emergence of this particular institutional form, a "revolution in social practice" (1971: XV), is attributed to the cultural milieu of the American experience; a cultural milieu that needs order. The American experience was not the only one to want to establish order, and the asylum was developed in other cultural milieus also. The unifying experience, here, is not national but relates to the development of factory production.

For the functionalist model, the concept of social environment is synonymous with the concept of society or more correctly, nation-state. The implications of this are that when we speak of the
larger social structure—the society—we are really speaking of specific nations. However, if we use this concept as the basis of social needs, an explanation of asylum formation becomes a mystery since asylums appear in different nations at points in time particular to those nations. Rothman attempts to circumvent this problem by asserting that asylums are "discovered". How the asylum comes into being can, in his model, only be described in terms of its function once it is established. There is little evidence to suggest that all of a sudden, at this particular point in history, there are social needs to be filled, needs that were not there before and dictates that people will not struggle against. This type of explanation is teleological because it explains the occurrence of an event on the basis of its goals (Scheffler, 1963: 88-89).

The formation of the asylum is seen, here, as an epiphenomenon of a system adapting to its natural environment and constrained by the universal need for order (Godelier, 1972: viii). Previously, I argued that the use of the concept "environment" cannot provide definitions of the larger social whole which will allow for the explanation of a specific historical event. If the environment is the social totality which stabilizes and reproduces itself then, what are the needs of the system and how are they institutionalized?

If the social system operates to ensure national stability, then what would be the reason for the disequilibrium that would cause asylum formation and not any other mode of confinement.
The functional model leaves the analyst without a definition of the workings of the environment that would allow for the reconstruction of the pattern of events which created asylum formation. It also remains to be seen why asylums develop in nations that have no need for the specialized confinement of the mad (see Lee, 1973 and Fremont, 1850). The functional model does not provide us with the ability to understand analytically the relation between the particular institutional form and the dynamics of the larger social structure in which the event is embedded. History, for the functional model, becomes "... the succession of accidental events which have caused a society to become what it is" (Godelier, 1972: xxiii).

On the other hand, I would argue that the workhouse could more than adequately control the confinement of the mad. The public welfare system before asylum formation "functioned" to provide the needs of the state for order and control. The question that cannot be answered by this model is why there was a "break" in the types of control and treatment of lunatics. Rothman's analysis, which I have cited (p.4) says that asylums were a break in the treatment of the mad; however, he does not tell us how this break came about. If there is a change in the treatment of the mad, this particular one being most influential, then there must be a set of reasons particular to the treatment of madness and its place in society. Functionalism cannot come to grips with this since it confuses the creation of an event with its functioning once established.
However, functional analysis does give us some points to be incorporated into the analysis I will present. The use of the specificity of time and place which Rothman and Grob stress is one of these points. However, my focus is not on the functioning of the institution but rather on its formation.

ii) Social Control

All sociological approaches take into account that the role of the asylum is to protect the public from dangerous lunatics and to protect the lunatics from themselves. Both the functional and the social control models focus on the spread of these institutional forms to maintain social order. Moreover, the social control model has the same problem as the functional model - the inability to separate the inception of the institution from its social role. But while the problematic of the functional model is to "explain a phenomenon in terms of its effect on a complex of which it is a part" (Scheff, 1966: 203) the social control model attempts to explain phenomena in terms of the connection they have to the organization of the society.

The social control model does not exclude historical process as does the functional. Proponents of this model (Piven and Cloward, 1971) find causality for the development of public welfare institutions in the conscious effort of a specific group (elite or professional) to control members of society for their own social and economic interests (Muraskin, 1975). In contrast to the functional model, the necessity
for social order is not viewed as natural law (environment) to which institutions adapt, but a "created rule" by which force is used to ensure order. This is stated to be either in the interests of the industrial bourgeoisie, who need disciplined workers, or the landed aristocracy, who need to reduce taxes:

Some of the aged, the disabled, the insane and others who are of no use as workers are left on the relief rolls, and their treatment is so degrading (under the New Poor Law) and punitive as to instill in the labouring masses a fear of the fate that awaits them should they relax into begging and pauperism.

(Piven and Cloward, 1971: 3)

Again, punishment and control are outside the social relations of the labour process and something imposed on a population that will immediately conform and not struggle against the will of the state.

Rothman (1971: xvi) clarifies this point in the social control model:

... coercion and not benevolence was at the heart of the movement ... institutionalization was primarily a method for regulating and disciplining a work force.

The only difference between the two is in whose interest is this done, the society or the bourgeoisie.

It has been sufficiently documented by social historians (Bynum, 1974; Taylor, 1969; deSchweinitz, 1961) that the social role of the lunatic asylum was the same as that of the public welfare institutions; to restore individuals to the normal life of society. The society control model fits into this by making every social reformer,
conscious or not, a tool of groups interested in having normal individuals (Rothman, 1971: xvi). This model implies a priori rationales for controlling the population because it neither develops a theory of social change or illustrates the connection of the whole society to its parts (Muraskin, 1975). The explanation developed by Piven and Cloward (1981: 20-21) supports my argument:

> If compassion was not a strong enough force to make the ruling classes attend to the danger that the poor might starve, fear would certainly have made them think of the danger that the poor might rebel. ... This fear and pity united to sharpen the wits of the rich, and to turn their minds to the distresses of the poor.

The formation of social welfare institutions by the state and not directly by the bourgeoisie becomes, for Piven and Cloward, "ancillary to economic arrangements" (1971: 3); meaning that the state is simply a tool of the ruling class, used only to fulfill their needs. However, the connection between the state and the bourgeoisie in relation to the development of public welfare is, for social control, based on the function of the institutions once established. The reasons, then, for the formation of the asylum are based on the supposed threat to the rule of the bourgeoisie by the proletariat. The asylum as a means of coercion is used to calm the threat of revolt. Even if there was a threat, this model does not allow for an explanation of the specific method of social control used. There is no reason to believe that the workhouses, gaols and houses of correction were less able to control lunacy than the asylum.
The role of social welfare must go beyond this interpretation. The social control model may adequately describe one of the possible roles of public welfare institutions and it may even be able to document a conspiracy among members of the bourgeoisie or a professional group for the development of these institutions. However, there is no reason to believe that the institutions of public welfare should be of any concern to the bourgeoisie (Marx, 1967, Vol. I: 602-603).

If we are to be able to explain the formation of the institution as a specific historical event, a distinction has to be made between the role of the institution at any specific historical point in time and the cause of the institution's formation. To document that asylums and other institutions acted in a way that would ensure the disciplining of a labour force for capitalist manufacturers is totally different from showing that the capitalist class was motivated to develop these institutions for that specific purpose. There are many documented cases of physicians developing asylums for the betterment of those confined. We can only assume that their motives were in the best interest - of the mad - e.g. moral treatment (Bynum, 1974). The problem here is an explanation based on individual motives. I do not deny that these reformers had the right motives; however, I question the use of a motive as the cause of institutional reform. If we were to construct an analysis of asylum development from the motives of every reform group involved in separate confinement, for whatever reason, we would never be able to explain the event. Why do some motives to separate the insane
take hold and others fail? Why do certain motives work at one historical point in time and all in others? These are the questions that face us if we adopt this model. The pattern of connections which link events to one another cannot be derived from motive (Scheffler, 1963: 88).

The purpose of the social control model is to explain 'why relief exists' (Piven and Cloward, 1971: xiii). In doing so, this model fails to deal with the specific manifestations of relief: public, social, family, etc. There can be no explanation derived from the social control model of why the mad were separated into asylums and then taken over by the medical profession instead of remaining in the workhouse.

The problem plaguing the social control model is that they view institutional change and development as stemming from the necessity of individuals and groups to maintain their socio-economic position, while the group being administered to refuses to struggle against this process. Also, the issue of whether or not institutional structures of public welfare can provide for the maintenance of individuals at a given level of subsistence is not the same as the question of maintaining social order.

According to Marx (1967), the dynamics of capital, as a social relation, must be separated from the particular interests of a given capitalist in the disciplining of labour or the control of social deviants. It must be remembered that the state organizes public welfare institutions and not individual capitalists. If we accept the social control model we will be forced to say that some form of control must be
implemented without being able to specify the form of control.

iii) **Idealist**

Unlike the two previous models which attempt to deal with the concrete causes of institutional development, the idealist model concentrates on the impact of "ideas" on the separate institutionalization of the mad. The emphasis switches from the needs of a system to the "ideas" that create certain perspectives on "rational" behaviour.²

This model can be separated, for analysis, into two distinct approaches to the question of asylum formation. The first, which I will call the "rational" approach, presents rationality as a force which dominates the social organization of institutional structures through scientific and non-partisan development. The formation of the asylum is explained by the development of scientific or objective criteria which necessitates a transformation in the treatment of the mad (Howells, (ed), 1975: xi). The supposed evolutionary development of a 'natural law' in conjunction with the process of industrialization is shown to be the basis of an explanation which states that the asylum was more scientifically "rational" than the previous mode of confinement, i.e. the gaol and the workhouse. The second approach, which I will call the "ideological", views rationality as a form of social control which is specific to every society. Foucault (1965), for example, views the period of separate confinement as the "age of reason". This interpretation of rationality places the definitions of madness within a specific
discourse rather than in the everyday treatment of madness (see Foucault, 1972). According to this interpretation every society has its own rationality, and, even though there might be a progression towards rationality, this development is not perceived of as 'natural'.

Both the 'rational' and 'ideological' approaches to the question of asylum formation share the assumption that ideas about the rationality or irrationality of human behaviour can be used as the basis for an explanation of asylums. They differ only in that the first approach supports the proposition that the asylum was the most scientific and advanced - rational - means of dealing with the mad, while the latter presents 'rationality' as the specific product of a particular time in history - capitalist industrialization (Godelier, 1972: 304). Within these two perspectives is the idea that rationality is the basis for understanding asylum formation. However, there is little discussion in either model of how these ideas and discourses originated and became dominant enough to influence the transformation of institutional forms of confinement (see Rotenberg, 1975; Foucault, 1965).

The idealist model describes, in general, the process of socially acknowledging madness as the historical development of an idea that "lunatics" are dangerous because they act differently - irrationally (Rotenberg, 1975: 158). At the time, this idea had developed to the point that madness was thought to be "so palpable a thing that no one can fail to recognize it" (Maudsley, 1897: 74). That is, in the period of the initial separation of the mad it was assumed that anyone could
recognize a madman and the official labelling of madness was a judicial function and not a medical one.

Irrational behaviour was associated with the refusal, willful or not, to function normally - i.e. to support oneself within the constraints of capitalist society. The 'dangerous classes', of which the mad were a part, could be detected by their willful refusal to work (Radzinowicz, 1966: 40). The dictates of a rational capitalist society provide for themselves from those who could provide for themselves from those who could not, reflecting the separation of the good from the bad and the sane from the mad (Szasz, 1971).

The problem for the idealist model is the point at which this behaviour came to be detected as "irrational" and the point at which the irrational had to be separated from the sane in gaols and workhouses.

The 'rational' approach locates the cause of the rise in lunacy rates, and therefore the need for asylums, in a reaction to depersonalization brought about by a rational society. "Little wonder ... that drastic change creates a population of misfits" (Braginsky, 1969: 167). The implicit hypothesis here is that as society becomes more complex and 'rational' there are fewer places for the marginals to 'fit into' (Grob, 1966A: 511). These individuals become dysfunctional by the definition that they are irrational and therefore must be made to be normal or functional in that society. Empirical evidence to support this argument is usually presented in the form of a comparison of rates of insanity at two or more given points in time (see Brenner, 1973). It is deduced
from this that since the rates of insanity rise, so does the need for institutional structures to accommodate that rise. However, there is no reason to believe that there was more insanity in the population after the industrial revolution than there was before (Scull, 1979: Cap. 7). Even though the rates can be shown to rise, it does not follow that this rise is simply related to the fact that there were now more cases of insanity (Rosen, 1955). It is highly improbable that madmen became a comparatively greater proportion of the population. In fact, they only became more "obvious" in a system in which everyone was to provide for their own-being: as Jarvis (1851: 333) notes,

... it is impossible to demonstrate, whether lunacy is increasing, stationary, or diminishing, in proportion to the advancement of population, for want of definitive and reliable facts, to show, how many lunatics there are now, and still less to show, how many lunatics there have been at any previous period. Wanting these two facts, we cannot mathematically compare the numbers of insane or their proportions to the whole people at any two distinct periods of time, and then determine whether lunacy increases or retrogrades.

Such data as illustrated in a different historical context by Brenner (1973), are only the reclassification of a population that was already there:

At best such statistics classify the 'same' forms of behaviour in different categories and 'different' forms in the same category. Thus, the 'source or contexts' of the behaviour are obscured.

(Kitsuse and Cicourel, 1963: 133)
The phenomenon of increased rates of madness should be viewed as "indices of organizational processes rather than of indices of certain forms of behaviour" (Kitsuse and Cicourel, 1963: 137). Scull (1979: Cap. 7), in addition, argues that the rise in numbers of persons classified as insane is ancillary to, rather than the cause of, asylum formation.

Even if we accept the 'rational' approach on its own grounds, there would still be a contradiction in the analysis. In the period of developing rationality of the social structure, associated with the 'protestant ethic' and its implicit leanings toward individualism, why would an elaborate institutional system develop to assist those who could not adapt to industrialization (see McClelland, 1970). The "spirit of psychiatry" (Rotenberg, 1975) in the developing "people-changing sciences" is, then, in sharp contrast to the growing tendency to accept rationality as a natural phenomenon. Furthermore, if there was a growth in the mad population after the industrial revolution, then there would be a tendency towards irrational rather than rational behaviour in a society assumed to be more rational. This is not natural rationality but capitalist rationality - a rationality based on one's ability to conform to the demands of capitalist production at a specific point in time. Is it necessary for a rational society to develop methods of treating and curing irrational behaviour? This can only be answered when we examine the empirical evidence on the treatment of the mad and not the ideas about madness.
In support of the 'ideological' approach, Foucault (1965) demonstrates that the concept of rationality is part of a developing ideology supporting a specific social structure and thus affecting the treatment of irrational behaviour. In attempting to deal with rationality as an aspect of ideology, this perspective explains why lunatics were confined in asylums instead of workhouses. The most important reason for the confinement of lunatics in asylums, according to this perspective, was to adapt them to "normal life" (Bockoven, 1956: 170). This was manifest in the theory of the cure espoused in the discourses of the developing psychiatric profession:

The legends of Pinel and Tuke transmit mythical values, which nineteenth century psychiatry would accept as obvious in nature. But beneath the myths themselves, there is an operation, or rather a series of operations, which silently organize the world of the asylum, the methods of cure and at the same time the concrete experiences of madness. (Foucault, 1971:243)

The asylum, for this approach, becomes the manifestation of social relations which have developed through the history of madness. Ideas and discourses about madness and the fear of irrationality had slowly developed from the end of feudalism to culminate in the "birth of the asylum" (Foucault, 1965: Cap. 1). As portrayed by Foucault (1965) the idea of madness in capitalist rationality became 'concrete' in the formation of the asylum.

The approach used by Foucault focuses on the discourses about madness by the various quasi-medical and legal persons associated with
the confinement of the mad. Foucault is concerned with the appearance of a particular subject as an object of the discourse of a particular profession (1972: 48). Concrete regularities of treatment result from the formation of discourses - ideas within a social relationship.

Let us generalize: in the nineteenth century, psychiatric discourse is characterized not by privileged objects, but by the way in which it forms objects that are in fact highly dispersed. This formation is made possible by a group of relations established between authorities of emergence, delimation, and specification. One might say, then, that a discursive formation is defined (as far as objects are concerned, at least) if one can establish such a group; if one can show how any particular object of discourse finds its place and law of emergence; if one can show that it may give birth simultaneously or successively to mutually exclusive objects, without having to modify itself. (Foucault, 1972: 44)

For Foucault, the conditions necessary for the appearance of an object (the asylum) are found in the discourses about the object, making madness a concrete object of investigation by psychiatry. However, the "formation of relations" that make an object possible lie not in the discourse itself but in the larger set of social relations which Foucault refers to but never makes concrete. Foucault is looking for the dynamic which organizes a group of ideas to form a discourse without looking at the effect of the concrete conditions on the discourse.

The question that still must be answered is how a particular discourse becomes concrete and enters into the process of organizing and building lunatic asylums - concrete objects of a specific discourse. The
problem not answered by Foucault is how specific discourses about madness are affected by the development of industrial capitalism so that at particular points in time discourses become concretized. By using the capitalist mode of production as the large social unit in which social relations exist, we can expand on Foucault's model by specifying these social relations in their concrete form.

An explanation of asylum formation must go beyond an analysis of the discourses on madness. Definitions of madness within a specific discourse are justifications for the separate confinement of the mad; they are the determinants of a judicial process which enforces the confinement of the mad in a particular institution at a particular point in time. Transformations in the methods of treating the mad are determined by the same structural forces that determine the object of the discourse on madness. This is the concrete treatment of madness and not the ideas concerning its treatment.

III Summary

The functional and social control models describe the position of the asylum, once established, as an integral part of society's need for order. Both of these models extrapolate to the formation of asylums from the role the asylum fills in the control of social behaviour by either society or an elite. On the other hand, both models give us much information about the workings of the asylum once controlled by the medical profession; however, they are tied to using "needs", after the
fact, as an explanation for the origins of that social institution. The idealist model, in contrast, attempts to explain the establishment of asylums in terms of the ideas about madness at the time of separate confinement. The 'rational' approach focuses on the development of rational thought, "the age of enlightenment" (Retterstol, 1975: 215), in the definition and treatment of the irrational. The assumption in this approach is the presumed ability of the physician to identify and cure the so-called illness". Foucault, while focusing on the discourses on insanity, rejects the rational approach but fails to illustrate the process by which specific ideas about insanity structure the treatment of insanity.

So far I have argued that an explanation of the formation of the Lunatic Asylum in Upper Canada must be viewed within the context of the development of public welfare since this was the form of the concrete treatment of the mad prior to the formation of the asylum. Since the vast majority of the lunatics in the first asylums were poor (Skultans, 1979: 104) I will examine, in the next chapter, the historical relation between the state - the organizer of public welfare - and those who could not provide for their own physical reproduction. This will be examined by outlining a history of the confinement of the mad prior to asylum formation and the role of the state through legislation to enforce the conditions of confinement.

The following chapter is important to this dissertation in that it gives the empirical evidence needed for an analysis of the real
conditions of the confined mad and not the ideas of how they should be treated. It will also provide us with historical consistency, showing that the treatment of the mad at a specific historical point in time is related to the treatment of the poor and thus the organization of labour.

This history will provide us with a general framework in showing the importance of a person's ability to labour, under given circumstances, and the definition of their rationality.

Thus, to approach the transformation in the treatment of the mad, lacking in the above models, the impact of historical process in conjuncture with the dynamics of capitalist production during the industrial revolution will allow us to fill the gaps left by the above models.
CHAPTER II FOOTNOTES

1 The specific "ideas" on rational and irrational behaviour are generated by a person's behaviour in a social context. Ideas have a concrete reality and are part of a social structure. Therefore, I argue that ideas or discourses about the formation of asylums could only occur when the specific structural conditions necessary for asylum formation were present. Policy debates or social reform statements are part of the process of the asylum formation and do not cause asylums to occur. The works of K. Jones (1955) and V. Sulkans (1979) more than adequately cover the discourses of the time but give no reason why asylums were formed.

2 Within the history of public welfare or the community's responsibility to the aged, sick, blind, lunatics, etc., there are two distinct periods. The first is marked by the idea that those who could not provide for themselves had a "right to relief" and the second is marked by the idea that the poor should "provide for themselves".
CHAPTER III

The State and the History of the Institutional Confinement of the Insane

I Introduction

The purpose of this chapter is to demonstrate that the history of the state's control over the poor through the development of institutions of public welfare goes hand in hand with the history of the institutional confinement of the mad. I will refer specifically to legal history to show how the state organized, through statute, the control of the reserve army of labourers. The definitions of one's ability to provide for oneself through labour and the responsibility of the state to those who cannot provide for themselves will be shown to change through the history of confinement.

Only since 1530 (embodied in 22 Henry VIII, Cap. 12) has there been a distinction, conceived and enforced by the state, between the "able-bodied" and "deserving" poor. This separation was based on the ability of the "surplus population" to maintain themselves as labourers. State-run public welfare has developed as the embodiment of the above principle. The organization of the reserve labouring population into these two distinct groups points to the role of the state as organizer of a disciplined labour force.

Public welfare is the social assistance organized and awarded by the state for the support, maintenance and reproduction, of those who cannot provide for themselves within capitalist social relations; i.e. by the sale of their labour-power for a wage in some other way:
Here non-capitalist institutions, more or less bound up with the state, intervene to guarantee the reproduction of the labour force within the terms set by the need to perpetuate insecurity of employment, and in a manner which will ensure the maintenance of discipline at work. (deBrunhoff, 1978: 10)

Public welfare is the socialization of previously individualized responsibilities for the care and treatment of the destitute (see Scull, 1979: 18-48). The development of public welfare also coincides with the gradual elimination of alternate means of support outside the wage relation. The state is then a political means of satisfying the historically determined definitions of social sustenance (Oppenheimer, 1942: ix). "Changes within capitalist accumulation, and in the forms of class struggle, have transformed the conditions in which state management of labour-power operates, but there is a permanent residue derived from previous phases" (deBrunhoff, 1978: 11).

The state is a complex of institutions of administration, legislation and coercion governing a particular juridical structure (Anderson, 1975: 10). The history of state intervention in the population's ability to provide for itself is the history of public welfare.

A) The Role of the State

The role of the state in the organization and enforcement of a national system of welfare in England is historically associated with a growing dependence of the labouring population on a wage. This is also
maintenance and reproduction. This relation forms the history of the
development of public welfare in Upper Canada.

No matter the form of the British State from the time of the
Poor Law (1601) to the birth of the asylum in the early nineteenth
century, the state assumed or appropriated the responsibility of
maintaining those who could not support themselves. Since its purpose
was not to maintain the poor over an indefinite period, the state
attempted through the organization of welfare to ensure the readiness of
the poor to labour productively. This affected not only the poor but
also those on the edge of poverty where a retraction of state support
would throw part-time labourers and whole families into the poorhouse.

The role of the state in the organization of public welfare has
been related to the historical development of productive forces and the
type of labouring population needed for their operation (Marx, 1967: Vol.
III, 219). This is not to say that the state is the only structure
assisting the poor and destitute. However, the state is the only form of
organizing social assistance that can use force in the "rehabilitation"
of the poor on a national scale. The history of public welfare then is
also the history of crime control (Leonard, 1965: 3).

In a society dominated by capitalist social relations the
labourer is given one thing, a wage, to exchange for all social
requirements of reproduction and maintenance previously guaranteed under
other social relations of production. In England, feudal or in-kind
relations, in which those lower in social rank and the higher social
classes were required to protect and maintain their inferiors, were replaced by capitalist social relations. Under capitalism, the employer had the responsibility of paying a wage to his labourers and did not have to care for their protection. Functions of reproduction of the feudal manor were gradually assumed by the state with the establishment of capitalist social relations of production. In the capitalist era, institutionalization of public welfare by the state follows the denial of all previous rights of the population to acquire means of subsistence from forest or field and substitutes the discipline of wage-labour in its place (Homans, 1970: 256). The historical role of the state was to provide for those who could not provide for themselves as wage labourers. This role became more pervasive as alternate means of support vanished with the enclosure and private appropriation of forest, waste and common.

It is possible to assume that there has always existed a judicial structure in class societies which took responsibility for those who could not provide for themselves. This does not mean that everyone in specific societies in history will be kept from a premature death, but that the political institutions of the society will ensure the survival of the labouring class over a period of time. Within societies dominated by pre-capitalist social relations there existed either statutory or non-statutory traditions which attempted unsuccessfully to perpetuate the social existence of that society by ensuring the perpetuation of their labouring population.
8) Outline

The remainder of this chapter will illustrate the relation between the organization of the reserve labouring population and the social assistance given to the poor by the state. This history will be broken into three periods. The first period is the time prior to the passing of the Poor Law in 1601 when the prerequisites for the establishment of a national organization of public welfare under absolutism were beginning to appear. The second time period, 1601-1723, spans the developmental period in which the national system of public welfare was introduced. In the third and last period, 1723-1834, institutions of the previous period — gaols, houses of correction and workhouses — were used to differentiate and discipline labourers as they were needed for industrial production.

II The History of Public Welfare

Although some form of jurisprudence, administrative or coercive, has existed since feudalism, it has not always supported the interests of the "dominant" class, as Piven and Cloward (1971) would have us believe (see Scott and Scull, 1978). Within feudal society, the social relations of production are identical to the relations of social reproduction of the labouring population (Anderson, 1975). The lord of the manor was not only the owner of the means of production, but also the political force for ensuring the reproduction, over time, of the social
relations needed to perpetuate the manor as a social unit. Relieving the destitute and pauper population who cannot or will not provide for their own sustenance is the charge of the owners of the means of production. The economic and political aspects of perpetuating the social unit are the same. However, this is not true in capitalist society.

The owners of the means of production in capitalism are no longer responsible for the reproduction of the labour force, nor are they concerned with the support of those who cannot or will not work. Their only concern is that the existing productive organization is not disturbed by rebellion, theft or taxation. The owners of the means of production are not responsible for the reproduction and maintenance of those not in their employ, and are only concerned with the latter if there are no replacements available. The unit of production within capitalism, unlike feudalism, is no longer the unit of reproduction and maintenance.

Under capitalism the state, along with friendly societies, kin, etc., assumed the role of ensuring that a labour force be available and disciplined. Provision for those not actively engaged in production - those who could not or would not work along with those who could not find employment - was gradually assumed by the British State from the 1300's. Care and maintenance of this non-labouring population came less and less to be the responsibility of the manor, household or parish and more the responsibility of the national state. The history of public welfare since the Ordinances of Labourers (1349) is the history of state
support for the non-labouring population. To accomplish a change from local to national control of the labouring population and the poor, the absolutist regimes from the fifteenth century extended the administrative control of the state to encompass the entire nation. This control was initiated in part as a means to control the movement of labour and also to protect private property.

The period from the Ordinances to the Poor Law (1601) was a time of transition in the assumption of responsibility for the maintenance of the poor and unemployed by the local government (parish). From the Poor Law to the initial development of workhouses on a national scale (1723) the scope of welfare assistance began to take national proportions. In the period from the workhouses to the New Poor Law (1834), and the development of asylums, the welfare system was used to differentiate among the population of the paupers and discipline those who were thought to be capable of work and relieve those who could not help themselves. Among the latter group were the mad.

The significance of the distinction between the able-bodied and non able-bodied poor thus increases pari passu with the rise of the wage labour system.

(Scull, 1979: 38)

In illustrating the development of poor relief, which was also the care of the insane before asylums, I will focus on some important aspects involved in the history of the treatment of the poor. The first period illustrates the gradual elimination of traditional ways of supporting the dependent, i.e. all forms of relief associated with
feudal rights were cast aside. The second period shows the appropriation by the state of all forms of controlling the treatment, relief and movement of the poor. The third period is one in which the state attempted to differentiate between the types of labourers it controlled and to separately confine those who could not conform to the discipline of the workhouse.

A) Pre Poor Law Relief

In the period leading up to the national organization of public welfare at the end of the sixteenth century there was a considerable transformation in the care of those who could not provide for themselves. This transformation occurs, roughly, during the period from the Black Death (1348-49) to the legislative beginning of the national poor law policy in the later sixteenth century. At the start of the period, methods of providing for the non-labouring and destitute population were locally controlled (manor or parish) and at times mediated by the church within the feudal manor. By the end of the period, the problems of a growing number of destitute, criminal and unemployed caused by the breakdown of the manor pressed upon the political stability of the country to such a degree that destitution was made a crime (Pound, 1971: 39-43). Transformation in the relief of poverty, however, was not fully realized until the enactment of the New Poor Law in 1834.

Though the Tudor state (1485) began to assume responsibility for the care and maintenance of the non-labouring and destitute
population, relief continued to be organized and paid for locally under the representative of the monarch - the Justice of the Peace. The funds necessary for relief were derived from the poor rate (Dowell, 1965). The transition from manor/church relief to state control on a national scale closely followed the rise of the wage-labouring population. Leonard (1965: 3) points out that prior to the 16th century, the local juridical unit was increasingly controlled by the agent of the crown. The initial function of these agents was to suppress vagrancy, regulate the poor and assist in the organization of wage-labour - primarily agricultural.

Accompanying the change from relief under the conditions of feudal indenture to the state run public welfare structure was a change in the ideology of relief. Within the traditional manorial system every individual, no matter their ability to labour, had a right to relief. This "right to life" was transformed into the principle that the individual should provide his/her own relief, if they were able, and not be a burden on the community. Under capitalist social relations, this ideology assumed that there was enough employment for everyone and those who wanted work could find it. Those to be relieved were without the ability to labour productively. The entire history of the administration of poor relief, from this period, became a test of the ability of the pauper to work. This was not an immediate transformation but one which developed over time into a historical tradition in public welfare. The realization of the test of eligibility is in the Poor Law of 1834 which provided that those able to work would not seek relief. The cry of the
social reformers became "let the poor provide for themselves" (Foucault, 1965: 38-64).

The transitional period (c. 1349-1601) contains many dynamic processes whose cumulative effect marks the beginnings of public welfare on a national scale. These processes are: breakdown of the manor, rise in the population, return of ex-servicemen, devaluation of money, decline of real-wages, disease, and the dissolution of the monasteries (Pound, 1971: 3-24). These processes have their own historical traditions, but they are by no means isolated from one another and occur as part of the same social whole. This does not mean that we can make an analysis which isolates a single causal "factor" to explain the emergence of the national state as the organizer of poor relief. Rather, we must examine the conjuncture of these processes which have separate histories as a means of understanding this complex social phenomenon.

i) Legislation to 1601

By outlining the enactment of legislation for the control of those who could not provide for themselves, I hope to illustrate how the state has assumed or acquired the responsibility of providing assistance for the mad. It may be possible that these acts had little to do with the actual treatment of the destitute, but they did set the guidelines for the treatment that has developed through the history of public welfare. More important, for the purposes of this dissertation, is that legislation is an action taken by the state in its gradual assumption
of control of the destitute. The pieces of legislation outlined below set the historical tradition of how the state institutions became the initiators of separate confinement. The legislation empowered the judicial apparatus of the state to take action against poverty and crime. I will discuss here how the state attempted to control labour, poverty, vagrancy, destitution and labour mobility under the scope of the same legislation.

The first attempts of the British state to control labour came in 1349 with the enactment of the Statute of Labourers. Under this statute, until 1510, begging, vagrancy and labour shortage were treated in the same manner (deSchweinitz, 1961: 6). In 1377 the problem of labour shortage in the manors was so acute that Richard II attempted to force the villeins and tenants back into feudalism. However, because of the war with France and the rise in wool and cloth manufactories there was more than sufficient employment until the end of the fifteenth century (deSchweinitz, 1961: 11).

In 1388 (12 Richard II) the Statute of Labourers was revised to allow the deserving poor to beg on a local basis (parish) and able-bodied labourers were not permitted to wander between parishes in search of employment. It was the responsibility of the local government (parish) to find employment for its labourers and to assist its poor. Legislation dealing with the provisions of poor relief continued to be revised and in 1495, a revision to the initial legislation defined the categories of the poor who were deserving and thus allowed to beg. The harmless.
were among those allowed to wander the streets and beg.

The forms of alms-giving and social assistance were the guilds, religious organizations and charitable foundations set up by merchant philanthropists (deSchweinitz, 1961: 14). By the seventeenth century, the English state had brought these selective forms of poor relief under its control and they played the role of state-administered public welfare institutions. The initial institutional forms of relief were called hospices and were established by the different levels of government - town, village, parish, county and state.

The initial institutional form for the treatment of madness was St. Mary's of Bethlem - Bedlam - established in 1403 for the confinement of "lunaticks" who became a nuisance to the citizenry in the early fifteenth century (Bromberg, 1975: 92). Bedlam opened with nine inmates, six of whom were "deprived of their reason" (Rosen, 1968: 139). However the function of the new asylum was still linked to the suppression of the destitute:

Londoners knew Bedlamites to be lesser criminals, prostitutes, vagrants, beggars, and the feebleminded in addition to the insane. Bedlam was known as a place for punishment of n'er-do-wells rather than a hospital offering help. ... Bedlam became a circus operated for the profit of the wardens. Londoners went of (sic) a Sunday afternoon to titter at the madmen for the payment of one shilling. (Bromberg, 1975: 92)

This treatment in Bedlam continued well into the eighteenth and even
into the nineteenth century, e.g. the case of William Norris who was found to have been chained in Bedlam for twelve years in 1815 (Deutsch, 1949: 100). Bedlam was given to the City of London by Henry VIII for the confinement of "lunaticks" in 1557 (Leonard, 1965: 35-36).

As labour became more abundant and employment lessened in the sixteenth century, vagrancy became both a local and a national problem. With increased enclosures (Homans, 1970: 18), the closing of the wool markets, and the increase in the prices of consumables (Brown and Hopkins, 1956), there was a growth in the numbers of the destitute. The immediate reaction of the state was to suppress vagrancy and protect person and property. Legislation in the sixteenth century dealt with the problem of destitution harshly and acted as a deterrent for those who would turn to crime to support themselves. Through legislation the state attempted to force people to provide for themselves during a time when there was little employment to be found (see Henry VIII, c. 12, 1531; 27 Henry VIII, c. 25, 1536; and I Edward VI, c. 3, 1547). The harshness of the legislation – slavery, maiming and death – was an attempt by the state to coerce the poor to work. However, because of the lack of employment or any other options the poor were faced with the choice of crime or punishment (See Marx, 1967: Vol. I: Cap. XXVIII).

By 1555 the problem of vagrancy had grown to such an extent that towns and villages were forced to tax their land holders for the support of the poor within their jurisdiction. The larger towns (London) had begun elaborate systems of poor relief prior to the action taken
by the state for the institution of a national administrative apparatus of public welfare. The first "House of Correction" - Bridewell 1555 - was started as a local system of poor relief in London before legislation was enacted in 1576 for the incorporation of houses of correction into the national system of poor relief (Rusche and Kirchheimer, 1968: 41-52). As opposed to the harsh legislation in the beginning of the sixteenth century, the intent of the new legislation in establishing houses of correction was not only to deter vagrancy, but to make vagrants socially useful by reforming them. Other purposes of the institution were to formalize the process of differentiating between the deserving and the able-bodied poor and to ease the tax burden on the property holders.

By the end of the sixteenth century legislation had paved the way for a state-wide organization to control those who could not provide for themselves. Its culmination was the Poor Law of 1601. Legislation, in this argument, acted as a means of controlling and differentiating among the poor and also acted as a means of collecting revenue for the support of the destitute. The administrative approach of the state to the problems of vagrancy, unemployment, begging, lunacy, crime, etc. was the same. All those who could not provide for themselves became the recipients of public welfare, the only means of assisting economic distress, natural calamity, personal disorder and disease. Throughout this chapter I am assuming that the state reacts through legislation to control a "social problem" and that the enforcement of the legislation is particular to the place. However, legislation does set a precedent
for the treatment of poverty and does in some way reflect general social patterns of behaviour.

B) Poor Law to Workhouses: (1601-1723)

In 1576 the justices in every area were ordered to buy or hire buildings and to equip them with 'wool, hemp, flax, iron ... that youth might be accustomed and brought up in labour and ... may not have any just excuse in saying that they cannot get any service or work'. These 'houses of industry' seem to have been non-residential and though they contained the seeds of the future workhouse, the term itself had not yet come into use. It was not until 1652 that the word was first used in its modern sense and not until the nineteenth century that it finally supplanted such rivals as "poorhouse" and "parish house". (Longmate 1974: 14-15.)

We have seen that the administrative apparatus necessary for the national control of the able-bodied and the destitute poor arose in the period 1349 to 1601. In the next period, 1601-1723, this administrative structure came entirely under the control of the state (Hill, 1961: 13).

During this time span, referred to by Foucault (1965: 38-39) as the "age of confinement", the state attempted to institutionally separate the deserving from the able-bodied poor. The purpose of this separation was twofold: first, it allowed for a decrease in the taxes - poor rate - paid by the occupiers of the land (Cannan, 1896: 85) if the able-bodied were forced to pay for their own relief (Webb and Webb, 1927, Vol. 9: 109); and second, this separation would allow for comprehensive policing
of criminals and the disciplining of paupers. The state maintained that it was in the interest of national wealth and private property that the idle and criminal be separated from those who genuinely needed public relief. The state attempted to create institutional structures which would act as a litmus test for real destitution. Institutions of relief would have to be created in order to provide work for the destitute, punish the criminal and ease the plight of the unfortunate, which included the insane (Rosen, 1968: 161).

Thus we see that the changes in the institutionalization of the poor in the late eighteenth and early nineteenth centuries have their roots in the historical development of the state's control over the able-bodied and deserving poor.

The problems of the previous period (1349-1601) - access to land, wages and population growth - were also of social concern in the "age of confinement". Enclosures, dissolution of feudal relations, decreases in real wages and the civil war all added to the growth of the pauper population. Together these factors destroyed the dominance of one set of social relations and became the basis for the development of capitalist relations of production (see Hobsdawn, 1954 A and 1954 B).

The period 1601-1723 starts with the decline of the absolutist state and ends with the rise of the bourgeois state (see Anderson, 1974). The foundations of a national system of control and punishment of the poor is historically rooted in the policies of the Tudors and early Stuarts (Rusche and Kirchheimer, 1968: Cap. 3). The absolutist
administrative structures served as the backbone for the attempted separation of the deserving from the non-deserving poor.

1) **Historical Background**

The condition of the majority of the British population in the seventeenth century was not good. There was great misery among the labouring classes as the transition to capitalism took its toll economically, legally and socially. That is, there was a continuation of the same processes by which the population became more and more dependent on wage-labour (Meredith, 1933: 194-195). Land was scarce as the limits to pasture and common were reached through enclosure. As the population increased, most of the "wastes" were settled which only added to an already increasing population of beggars in search of employment (Meredith, 1933: 200). Taxes rose to such an extent that landholders began to push for pauper labour and self-sufficiency. These factors set the stage for the development of industrial capitalist production and in conjunction with this the desire of the state not to tax unduly the gentry or yeomanry.

The organization of local government and its ties to the state are particularly important in this period because the parish was the local unit of political, economic and social organization. It became important as a focal point for the confining and disciplining of the poor until the passage of the New Poor Law in 1834. The creation of the position of Justice of the Peace by earlier regimes, in order to tie
local government to the crown, acted after the civil war as the focus of control of relief and institutionalization by the bourgeoisie (Anderson, 1974: 119). In the early seventeenth century the Justice of the Peace was directly tied by appointment to the crown; by the eighteenth century he was a member of the local gentry politically tied to parliament (Webb and Webb, 1963: 398). The ties set up by the absolutist regimes between the local government units and the state influenced not only the methods of controlling the "free" labourers but also acted as the organizer of taxation and relief (Anderson, 1974: 140-141). The control over the parishes by parliament also supported the developing unity of the nation-state on the principles of wage-labour (Hill, 1961: 14).

ii) Legislation and Poverty

Action taken by the British state in the period from the Poor Law to the Workhouse Act of 1723 takes on a different character from the legislation of the preceding centuries. This change is especially relevant in relation to the destitute and labouring poor. From the institution to the Poor Laws, 1597-1601, to the outbreak of the Civil War in 1640, the Privy Council succeeded in setting up a state apparatus for the smooth functioning of a national system of relief and public welfare. The function of this apparatus was to separate the able-bodied poor from the deserving poor (Webb and Webb, 1963: 60). The real poor could then be cared for and the healthy poor be set to work (Longmate 1974: Cap. 2).
The enactment of the Poor Law of 1601 (39 Elizabeth, Cap. 4) provided for the punishment of rogues and vagabonds, the erection of hospitals and working houses for the care of the paupers (39 Elizabeth, Cap. 5) and the maintenance of the indigent poor who could not provide for themselves (39 Elizabeth, Cap. 3). The treatment and care of the poor was not only considered a matter of national security but also a cushion against rebellion and class struggle (Webb and Webb, 1963: 61). The Webbs (1963: 402) point out that the "relief of destitution practiced under the English Poor Law was not only expedient: it was a State of necessity".

The Justice of the Peace was to administer the Poor Law on the local level (parish) and was also authorized to collect the poor rate taxes for the maintenance of the poor. The Privy Council ensured centralized control of the local parish through the Book of Orders (1631). This did not inhibit local variation in the enforcement of the Poor Law but did bring the control of labour within a national perspective.

The passage of the Poor Law was an action taken by the absolutist state to protect its subjects from famine, despair and death and to protect the properties classes from the possibility of revolt by the poor. The extent to which the labouring poor posed a possible threat to the stability of the nation is illustrated by the fact that the poor composed one-quarter to one-half of the population of seventeenth century England. The portion of the population that lived below the
"poverty line" is what we mean here by "poor" (Coleman, 1956: 283-284).

It was a common belief in the seventeenth century that poverty was a necessary evil (Coleman, 1956: 280). That necessity, however, was treated as a crime. The entire state apparatus for the control and separation of the poor was based on the principle of making the poor provide for themselves (Webb and Webb, 1963: 406). The treatment of those who could not provide for themselves was based on the assumptions of punishment.

Up to the outbreak of the civil war, legislation dealing with poverty had the following purpose: 1) to constrain both the movement and wages of the labouring poor, 2) to set up a centralized administrative system which ensured national control and local funding, and 3) to separate the able-bodied from the deserving poor. The last point emphasizes the penal nature of poor relief with the attempt to institute Houses of Correction in every country to relieve the destitute (see I James, Cap. 4).

In the period of the outbreak of the civil war to the restoration (1640-1660), there was no legislation passed concerning the relief of the poor and the control over labour. Even though there was a general breakdown in the laws concerning the movement of labour, who were during this period permitted to move between parishes in search of employ - especially in the waging armies - the poor law structure remained intact with regard to the deserving poor. The only change occurred in 1647 when the poor rates and the church rates were combined.
for the relief of the poor (Cannan, 1912: 104). The combination of the various rates enabled the state to take complete control over taxation without interference from the church.

The most important piece of legislation after the restoration was the Law of Settlement (13 and 14 Charles II, Cap. 2, 1662). This act continued in the vein of the 1601 Poor Law in that it attempted to restrict the movement of the labouring poor through the strict enforcement of place of birth as place of relief. The parish was responsible for the maintenance of its poor. The act was to ensure that the poor of one parish would not become "chargeable" to another parish (deSchweinitz, 1961: 39). The Law of Settlement gave the parish and the Justices of the Peace more control of the poor of their parish (Marshall, 1926: 246).

The victory of the landed class in the struggle for control over the state apparatus (Taylor, 1969: 4) had both positive and negative consequences for the labouring poor. It provided a social base for assisting paupers and at the same time, it again restricted the free movement of labour to places of employment (deSchweinitz, 1961: 39). The impetus behind the Law of Settlement came from the civil war period when labourers roam free in search of a job. The enactment of the Law of Settlement was a direct response by the state under Charles II to control the wandering poor and possible threats of another uprising. In other words, parish organization was again restored to the form it had before the civil war (Webb and Webb, 1963: 101).
The state policies of the latter part of this period returned to the principles behind the legislation before the civil war. From 1601 to 1640 the state made an effort to set the poor to work, and from 1660 onward, the state changed its position only slightly. The poor were now expected to work profitably and provide for themselves for the "good of the nation" (Webb and Webb, 1963: 102). Logically, the idea that the poor should provide for their own upkeep came from those saddled with the poor rates, the land-owning classes.

By the end of the seventeenth century, there were not only bills introduced in parliament for the national organization of workhouses and consolidation of parishes, but also private bills to establish and operate workhouses in the growing manufacturing centres of England. The first workhouse established with the goal of profitability in the relief of pauperism was built in Bristol (1696). The local act took the responsibility of support away from nineteen parishes of the city and combined them into a "union" of the whole city. Within fifteen years, thirteen other cities followed the example of Bristol and placed the charge of the poor under a Board of Guardians. As with most state action in England and Upper Canada, national policy followed local example and initiative (Webb and Webb, 1963: 116-120). This process of building independent workhouses culminated in 1723 with legislation passed to provide for the establishment of workhouses on a national scale. The rise of workhouses was not immediate and was initiated by the more advance manufacturing towns. However, the legislation provided
the option of profitably employing the poor which previously did not have state organizational and financial support.

Even though the Poor Law of 1601 initiated the setting of the poor to work, there was nothing in the legislation to provide for the actual establishment of institutions to carry out this mandate. Not until the building of the workhouses in the late seventeenth century did the institutional structure for the employment of the poor appear. This institutional movement initiated the era of the workhouse when these institutions provided for the training and disciplining of the poor (Redford, 1964: 24):

These workhouses were established, and mainly conducted with a view to deriving profit from the labour of their inmates ... The Workhouse was in truth at that time a kind of manufactory ... employing the worst description of the people.

The problem of the workhouse, however, was to differentiate between those who could work and those who could not (Webb and Webb, 1963: 102).

Poor Law legislation from 1601 to 1723 centred on the control and maintenance of the poor. The Poor Law provided an apparatus for the protection of the state, collection of poor rates, and the treatment of the destitute and labouring poor. Moreover, it provided the apparatus to curb dissent (Webb and Webb, 1963: 405). The state became the focus of the struggle between the labouring classes and the landed classes over the maintenance of the population at a minimal level of subsistence. At the same time, the state provided for the separation of those who could provide for themselves from the "deserving" poor.
... the functional requirements of a market system promoted a relatively simple, if crucial, distinction between two broad classes of the indigent. Workhouses and the like were to be an important practical means of making this vital theoretical separation, and thereby of making the whole system efficient and economical. ... it rendered problematic the whole question of what was to be done with those who could not or would not abide by the rules of the house—among the most important of whom were the acutely disturbed and the refractory insane. (Scull, 1979: 40)

The institutionalized mad or "pauper lunatics" were under the jurisdiction of the Poor Law authorities. There were no asylums, save Bethlem, for the confinement of the mad outside those that we used for the confinement of the poor and destitute. Legislation during the period took little account of the mad until 1714 (12 Anne, Cap. 23) when there was a distinction made between pauper lunatics in the Poor Law institutions and the "Rogues, Vagabonds, Sturdy Beggars and Vagrants" houses therein (Thomas, 1980: 6).

In the study of the history of the confinement of the mad, Dr. A. Fessler (1956) has uncovered much information on the treatment of the mad in the seventeenth century by using quarter-session records. The quarter-session records were kept by the Justices of the Peace, "Officials (who) had to concern themselves for various reasons with many of the cases of lunacy that occurred among the lower and middle social classes" (Fessler, 1956: 901).

... Justices often had to concern themselves with the management of lunacy ... from the fact that once the houses of correction had been established, it soon
became the practice to admit dangerous lunatics to these institutions; no person, however, could be admitted to such a house, or released from it, without an order issued at a quarter-session.

The evidence that has been uncovered clearly links the care and maintenance of lunacy, both melancholy* and mania, with the administration of the Poor Law by the state.

The insane, in the seventeenth century, who went through the quarter-sessions were either boarded-out or sent to a house of correction. The place and type of confinement depended on the cost of relief and care to the parish. Fessler (1956: 903-905) cites three ways the parish dealt with lunacy in this period: 1) Justices granted a special allowance to hire a person to look after a lunatic; 2) The parish officers provided a means for keeping the insane person under guard; and 3) The Justices arranged to have the lunatic sent to the nearest house of correction. The financial support of the lunatic came from the poor rates and the control over the labelling and treatment of the lunatic was done through the administrators of the state, and not medical experts (Fessler, 1956: 904).

The next period, however, has presented a problem to students of the history of madness since there is little material on the management of the insane by the state. This is because no records were kept of the insane inmates in the workhouses and houses of correction.

* Fessler (1956: 902) says that melancholic persons were thought to be unruly or hard to be governed.
in the eighteenth century (Fessler, 1956: 901; see also Jones, 1955).

C) Workhouse to Madhouse

During the eighteenth century many private lunatic asylums were established; however, they were not for the general confinement of the mad but only for "lunatic persons of property", i.e. the insane of the upper classes (Parry-Jones, 1972). These private madhouses were run for profit and had no association with medicine. The majority of the insane were still under the care of the Poor Law and controlled by the parish through the Justice of the Peace. This class bias in confinement lasted throughout the period and into the lunatic asylum itself where there was segregation based on social class. There were not only differences in the treatments given but also in the maladies one could have.

This period opens with the appearance of the workhouse as a means of profitably employing the poor and ends with the realization of those earlier principles in the Poor Law of 1834. (However, in the Poor Law of 1834, the New Poor Law, employment within the house gave way to deterring the poor from entering the institution and forcing them to work for whatever wages they could get outside public welfare.) The initial problem of the house was first how to employ the poor and second how to discipline the inmates in the "habits of industry". These two categories are not separable. With the need to differentiate between the deserving and able-bodied poor came the creation of specialized institutions—gaols, deaf and dumb asylums, hospitals, reformatories, schools and
lunatic asylums - which would separate those who could not be disciplined for industrial wage labour from the workhouse.

This section of the chapter will delineate the mechanisms at work in the separation of those who could not work for themselves and point to the processes at work in the formation of lunatic asylums.

Since confinement was a product of an individual's "categorization" in a given society and not the product solely of an individual's attributes or mental condition, it is extremely important to understand the social position of the mad in the pre-asylum era, as part of the larger category "deserving poor".

i) Historical Background

Poverty became a pressing problem in the period from the organization of the workhouse (1723) to the passing of the New Poor Law (1834). In this period of British history, we see a rapid transformation in the process of capitalist production in agriculture and industry. This period has been called the "industrial revolution" (Toynbee, 1956). In other words, there was increased capitalization in agricultural and industrial production. This rapid change in the techniques of the productive process was reflected to some degree in the organization of a labour force to work under those specific conditions of production. Since much of the labour force had already been influenced by capitalist relations of production, the problem was to discipline the potential labouring population in the social skills necessary for
factory production. The discipline of the clock and regimentation of the factory became the model on which the labouring class was to be organized (Thompson, 1968). The workhouse fitted into this labour organization by being not only an instrument of the landed classes for the reduction of property taxes, but also the instrument of the state to control the movement of labourers and the problems of poverty. Thus, the workhouse was the means by which the functional labour force of the early industrial revolution could be disciplined for factory production (Webb and Webb, 1963: 405).

... it is not very fanciful to suggest that the new factories may have been shunned originally as an industrious sort of workhouse, This being so, the factory masters turned to the workhouses for a large part of their labour supply. ... This practice of scouring the countryside for workhouse labour seems to have been a general method of recruiting workers for the country mills until the 'thirties of the nineteenth century'.

(Redford, 1964: 25)

Many of those disciplined in the workhouses were also sent by the institution to factories for apprenticeship (Redford, 1964: 26).

The workhouse is then, the point of initial separation of types of labourers because of its connection with the labour market. This institution is the point of departure for our study of separate confinement.

Taylor (1969: 3-6) describes the position of the poor in the
eighteenth century as a majority of the population "who were not as yet part of the political nation". The Poor Law became the political means of separating the classes of the destitute. The inheritance of the Poor Laws was that of absolutism when the landed classes were morally responsible for the care and maintenance of the poor. Now that the parish became the unit of organization for the assistance of poverty, the legacy of responsibility still continued. The question of financially supporting those who could not provide for themselves permeated the state policies of the early eighteenth century and culminated in the development of workhouses throughout England. The workhouse principle of lessening taxes by making the poor work for profit was coupled with the inheritance of providing for those deserving relief. These became the historical prerequisites for the separation of the lunatics from the rest of the institutionalized poor. The separation of the deserving from the able-bodied could only be operationalized with the pressure from the productive process for specific types of labourers (Marshall, 1937: 43). However, history was to point out the impossibility of making the poor provide for themselves profitably (Taylor, 1969: 18). What influenced the move toward separate confinement was the attempt.

There has been considerable debate over the relative plight of the labouring classes in Britain in the eighteenth century (Ashton, 1949). It is not my purpose here, to enter into this debate but only to point out that from the data I have examine (Bowley, 1972; Ashton, 1949 and Gilboy, 1939) it would be unwise to treat England as a homogenous
unit. Even though we see a relative rise in wages in the industrialized towns together with a demand for consumables, the conditions of rural England, especially the west, show that the standard of living in 1790 was lower than in 1700 (Gilboy, 1939: 241). Also, the class distribution in England in the eighteenth century (Mathias, 1957: 44-45) shows an increase in the labouring classes, especially in manufacturing. Together with these factors also came the rise in the institutionalized population. Even though wages were better at the end of the century, there were more people competing for those positions. Thus, we have a rise in criminal behaviour and destitution.

Table I

Commitments to the County Jails in Norfolk

1800-1830

<table>
<thead>
<tr>
<th>Year</th>
<th>Number</th>
<th>Year</th>
<th>Number</th>
<th>Year</th>
<th>Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>1800-1804</td>
<td>250</td>
<td>1819</td>
<td>639</td>
<td>1826</td>
<td>784</td>
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<td>1805-1809</td>
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<td>1820</td>
<td>811</td>
<td>1827</td>
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<tr>
<td>1810-1814</td>
<td>309</td>
<td>1821</td>
<td>722</td>
<td>1828</td>
<td>745</td>
</tr>
<tr>
<td>1815</td>
<td>415</td>
<td>1822</td>
<td>943</td>
<td>1829</td>
<td>899</td>
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<td>489</td>
<td>1823</td>
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<td>1818</td>
<td>669</td>
<td>1825</td>
<td>812</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Since there was a great economic flux in the period (c. 1790-1834) and since there was a decrease in the available means of supplementing wages, the conditions of the British labouring population grew worse. The unfavourable position of the poor in the industrializing period of English history led to a proliferation of workhouses. This was joined by a like proliferation of institutions to confine those that the workhouse could not discipline. The differentiation of those who could
provide for themselves from those who could or would not give impetus to
the organization of asylums (Rosen, 1968) and penal institutions (Bayley,
1975).

Workhouse authorities, too, sought to use
the asylums to relieve their wards of
many old people who are suffering from
nothing else than the natural failing of
old age; as well as rid themselves of
troublesome people in general.
(Scull, 1979: 245)

ii) Wage Assistance Programs

Public systems of relief established in the latter part of the
eighteenth century were in direct response to the deterioration of the
"living wage". The two major systems of wage assistance were the
Speenhamland (Polanyi, 1965: 77-85) and the Roundsman Systems
(deSchweinitz, 1961: 71-76). These programs attempted to substitute
public relief for an increase in wages. However, the effects of "wage
assistance" usually created destitution instead of relieving it.

These assistance programs enabled employers to pay the new
"assisted" labourers at a lower rate than those already employed,
encouraging capitalist to hire the subsidized labour and release the more
expensive labourers. "Relief in aid of wages" put considerable pressure
on the landholding classes since they paid for the relief of the poor
through the parish poor-rate. By 1834, there was great distress created
by these "relief" programs. The taxpayers, especially the yeomanry, were
virtually destroyed by the great rise in land taxes (Harrison, 1971: 81).
The capitalists were also upset by the employment of less efficient and less disciplined labourers. Labourers found their wages decreased and their jobs eliminated by the employment of the paupers through state assistance (deSchweinitz, 1961: 75-77).

The failure of these systems, together with conflicts over taxes and labour discipline, culminated in the passing of the New Poor Law in 1834. This ended "out-relief" and other types of wage assistance in favour of harsher and more disciplined programs of relief (Harrison, 1975: 84). Thus, by 1834, all forms of state assistance were removed and the able-bodied poor were "free" of all restrictions to compete on the labour market (Polanyi, 1965: 82-83).

The various systems of public relief prior to the 1834 Poor Law accomplished only greater pauperization through wage subsidies. Together with settlement restrictions, wage-assistance made the labouring-poor totally dependent on the parish. The New Poor Law (1834) abolished all forms of "out-relief" and forced applicants for assistance to enter the workhouse in order to receive assistance "in-relief". Living conditions were made worse than the conditions of the lowest paid labourer in order to force the working population to accept any job rather than enter the workhouse. "Even the poorest families amongst the working classes made strenuous efforts to avoid bringing the disgrace of the workhouse upon themselves" (Scull, 1979: 92). The new policy of determent kept wages and taxes down while separating the deserving from the able-bodied poor (Harrison, 1971: 81-84).
iii. Legislation: 1723-1834

This period starts with legislation for the erection of workhouses on a national scale and ends with the New Poor Law of 1834. This is concurrent with a growth in the responsibility of the state for the care and maintenance of those who could not provide for themselves. However, the national organization of relief still depended on the parish where there was considerable struggle over the treatment of the poor. The struggle was between the traditions of moral responsibility of the gentry for the care of the needy and the immediate financial reality of the costs of relief. This local movement developed into a national organization for the confinement of the poor. Marshall (1969: 11-12) illustrates the financial primacy of the workhouse in the use of discipline and parish apprenticeship laws.

Here, we see the notion of a fixed standard of living for the worker. Faced with fluctuating prices, relief enabled the worker to consume at his usual standard. However, this notion disappears after 1834.

In outlining the legislative history of this period I must point out that there are two distinct principles involved in the relief of the poor. The first is the principle of "in-relief" and the second is the principle of "out-relief". The institutionalization of the concept of "in-relief" made the workhouse the direct instrument of confinement and discipline by forcing the poor to enter the workhouse to gain relief. The second, "out-relief", is the opposite. Out-relief was introduced by
Gilbert in 1782 and made the workhouse the middleman between the poor and employment, i.e., the poor need not enter the institution to receive relief. The latter was, of course, more liberal and corresponded with the wage assistance programs discussed above. Like the assistance programs, out-relief was doomed and tossed aside in favour of the harsher Poor Law of 1834 with a renewed policy of in-relief.

iv) Institutional Confinement

Not until early in the nineteenth century were provisions made for the public organization and support of lunatic asylums under the Poor Law (see 48 George III, Cap. 8, 1808). If we look at the legislation from the beginning of the period we see the gradual transformation from the control of the Poor Law to the specialized control of lunatics under the medical profession (see Chart A).

Separation of paupers within the poor law institutions started early in the eighteenth century on the principle of differentiating the deserving from the non-deserving poor. The predecessor of the asylum was the workhouse, and associated institutions. The control over the treatment of the mad was not a medical responsibility but a state charge.
Chart A

General Public Statutes Dealing With Lunacy
1723-1858

9 George I, c. 7. (1723)  An Act for the Erection of Workhouses

17 George II, c. 5. (1744)  Vagrancy Act

14 George III, c. 9. (1774)  An Act for the Regulation of Private Madhouses

22 George III, c. 83. (1782)  An Act for the Better Relief of the Poor – Gilbert's Act

39 and 40 George III, c. 94 (1800)  Criminal Lunatics Act

48 George III, c. 96. (1808)  County Asylums Act
Amended:
51 George III, c. 79. (1811)
55 George III, c. 46. (1815)
59 George III, c. 127. (1819)

9 George IV, c. 40 (1828)  County Asylum Act

9 George IV, c. 41. (1828)  Madhouse Act

2 and 3 William IV, c. 107. (1832)  Lunatics Act

4 and 5 William IV, c. 76. (1834)  Poor Law Act

5 and 6 Victoria, c. 87. (1842)  Lunatic Asylums Act

8 and 9 Victoria, c. 100. (1845)  Lunatics Act

16 and 17 Victoria, c. 70. (1853)  Lunacy Regulation Act

16 and 17 Victoria, c. 96. (1853)  Lunatics Care and Treatment Act

16 and 17 Victoria, c. 97. (1853)  Lunatics Asylums Act

21 and 22 Victoria, c. 90. (1858)  Medical Registration Act
The act for the erection of workhouses (9. George I, c. 7) in 1723 permitted the Overseers of the Poor in the parish to establish workhouses and contract out the poor to local capitalists. Relief was refused to anyone not willing to enter the workhouse. Labour done by the inmates was not paid, but their maintenance was guaranteed. The workhouse received the wages of the labourers it contracted out and sold articles made by the inmates of the house. This was referred to as "in-relief".

Workhouses and the like would thus 'perform the double service of administering and punishment for idleness and providing training in the habits of thrift and industry'.

(Scull, 1979: 35-36)

Distinction between the types of paupers confined in these institutions was first made possible by the vagrancy act of 1744. This act placed in the hands of the local magistrate, power to define and confine the poor and destitute. Paupers defined as mad by two local magistrates were confined to the local poor law institution (Jones, 1955: 28). Treatment of the mad was confinement for the quiet and chaining for the raving. Length of confinement was at the discretion of the magistrate or the keeper of the institution, all non-medical personnel. Payment for the confinement of lunatics in these institutions was either from the estate of the lunatic or from the poor-rate. The latter form was the most prevalent. The act of 1744 was a first step in the institutional separation of the mad from the sane. However, because of the slowness of instituting this legislation, this act can not be seen to be
immediately effective outside the industrial centres. It is, though, the setting of the precedent which is important here (Jones, 1955: 29).

The turning point in the period 1723 to 1834 was Gilbert’s Act in 1782. This Act repealed the 1723 Act, for the contracting out of the poor, and initiated a system of out-relief in which only those “not willing or able to work” were to be confined. The act also provided for the amalgamation of parishes into “unions” in order to share the costs of confinement. The importance of this legislation in the confinement of the mad, was that it physically differentiated the deserving from the able-bodied poor. It provided labour for the able-bodied and relief for the deserving. Because of the financial constraints on the organization of relief, this act was initiated wherever possible. Even though this act provided the structure for the differentiation between the able-bodied and the deserving, it had trouble locating employment for the able-bodied once they were separated (Webb and Webb, 1927: Vol. 7, 171). As with wage assistance programs going on at the same time, this only added to the hardships of the labouring poor in the late eighteenth and early nineteenth century (Hammond and Hammond, 1970: 99-182).

v) Separate Confinement

The order and discipline of the whole workhouse were threatened by the presence of a madman who, even by threats and punishment, could neither be persuaded nor induced to conform to the regulations (of the workhouse).

(Scull, 1979: 41)
The first legislative step to separately confine the mad was the County Asylum Act of 1808. This legislation, together with the amending acts of 1811, 1815 and 1819, provided an alternate system of confinement of the mad within the state structure. Separate confinement was a slow process and it took nearly a century to completely remove the mad from the gaols and the workhouses, "to confine such persons in a common Gaol, is equally destructive of the recovery of the insane and of the security and comfort of the other prisoners." (Report of the Select Committee on Criminal and Pauper Lunatics, 1807, cited in Scull, 1979: 55). By 1838, there were nine county asylums confining 1,046 lunatics and by 1842, there were sixteen asylums confining 3,734 lunatics (Jones, 1955: 116, 149).

K. Jones (1955: 69) clearly illustrates that the impetus for the separate confinement of the mad was not caused by their specific maladies, but rather the necessity of separating those who could work from those who could not.

Until 1828, lunatics were under the direct control of the magistrates of the Poor Law administration but with the Madhouse Act in that year (9 George IV, c. 41. 1828), the control of all confined lunatics was put under the Commissioners of Lunacy. This commission was composed of barristers, laypersons and physicians* (Jones, 1955: 191). The Commissioners controlled lunatics confined in gaols, asylums, houses of correction and workhouses. The 1834 Poor Law added to the process of differentiation through the use of the "workhouse test".

* This is the first time physicians were given any control over the public confinment of the mad.
Through the eighteenth and early nineteenth centuries, the workhouse, under the administration of the Poor Law, served as: 1) a general hospital, 2) an almshouse, 3) a foundling home, 4) a lying-in hospital, 5) a school house, 6) a lunatic asylum, 7) an idiot asylum, 8) a blind asylum, 9) a deaf and dumb asylum and 10) a workhouse (Webb and Webb, 1927: Vol. 10; 132).

The use of legislation in this chapter has been to point to the consistent effort made by the state to control those not able to support themselves within the constraints of capitalism. The immediate effectiveness of legislation is only important if we are looking at the state's ability to enforce its policies. Here, we are looking more at the trends in the use of legislation by the state as an apparatus to organize and control a section of the population. Also, it is important to understand the precedents set by certain statutes and the power or organization and financial support legislation brings to the confinement of the poor. My emphasis here, is that the mad were separately confined because the state attempted to organize the able-bodied poor in specific ways, ways corresponding to the need for an organized, disciplined and available labouring population. The impetus for the formation of the asylum comes from the organization of the larger category of which the mad are a small part, i.e. the poor. The pressures to build separate lunatic asylums for the confinement of the mad do not originate from the medical profession, the malady of the madmen or the rise in insanity associated with supposed industrial growth. Legislation, then, must be
seen in the light of what it attempts to do and the refinement of those directives over time.

III Summary

The relation between the advent of public welfare and the ability of the labouring population to reproduce itself is simple and complex at the same time (deBrunhoff 1978: 11-15). It is simple, because when real wages decrease, a number of social remedies arise to ease the plight of the destitute. The best organized and most efficient of these remedies is public welfare. However, the process of relief in aid of wages and welfare to those unable to provide their own subsistence is very complex. It is complex, because of the many social processes directly involved in the distribution of welfare (political, economic, ideological, class struggle and group interests) which influence the form the dole takes.

The development of institutional relief for the relative surplus population is part of the relation between the formation of the state and the accumulation of capital. Relief organizations set up by the state allowed for the accelerated accumulation of capital by organizing and disciplining the labour necessary for accumulation to take place. Public welfare must be seen as a part of the process of capitalist social relations and not simply the humanitarian efforts of a small group of social reformers.

In previous pages we have seen how the state attempted and
refined its attempts to organize the labouring population demanded by capitalist production. The role of public welfare as a part of the state apparatus was, then, to support those who could not provide for themselves which included the marginal labourers who could not support their families with the wages they received. Whatever the reasons for this take-over of public support, it had specific effects on those receiving state support. We must remember that this take-over of relief by the state was gradual and coincided with the elimination of alternate forms of support (forest, field and common) leaving the poor totally dependent on the wage.

Throughout the history of the development of public welfare institutions there have been transformations and breaks in the types of confinement of relief used to help the poor. These transformations have always reflected the changes in the larger social structure, especially in relation to the costs of confinement and the requirements of the labour market (Rushe and Kirchheimer, 1968). Asylum formation is a specific case in this history. It occurs in a break in the mode of public welfare organization. The focus of this chapter has been to outline the specific historical processes leading to the transformation in the methods of confining the insane.

As in the British Isles, institutional relief in Upper Canada began to develop at a time when there was little opportunity for the labouring population to reproduce and maintain itself outside wage-labour. Institutions of public welfare reflected these social relations
- wage-relations - and acted as an integral part of capitalist development.

Because Upper Canada was a settler state and part of the British Empire, its institutions of incarceration followed the British example in form and function. The purpose of such institutions in Upper Canada was the same as described above, to discipline the able-bodied and support the deserving. However, at the time of asylum formation in Upper Canada (1841) there was no pressing need for a disciplined labour force.

This anomaly can only be explained if we go beyond using Upper Canada as our unit for analysis and see the colony in its direct relation with the mother country (Curtis and Edginton, 1979). The historical roots of Upper Canadian institutions of public welfare are in Great Britain since there is no local history of Upper Canadian state support before 1791. The colony adopted the institutions of the mother country at that particular point in the history of the province. However, Upper Canada and Britain were not at the same point in terms of industrial development and the remedies for one did not fit the demands of the other.

Therefore, the history of the formation of the asylum in Upper Canada is located in the history of that institution's formation in Great Britain. The following chapter will place the formation of the asylum in the colony with the development of public welfare institutionalization there.
CHAPTER III FOOTNOTES

1. This statement is based on the long-term history of public welfare; it is not an attempt to explain the ups and downs of every instance.

2. It is impossible to talk of the unemployed, labouring poor or destitute as exclusive categories since employment was not regular and there were alternate means of subsistence available.

3. I assume here that there was also class struggle that entered into the picture when determining what was sufficient support for the labouring poor.
CHAPTER IV

The Development of Public Welfare in Upper Canada

I Introduction

The focus of this chapter will be the structural pre-requisites for the emergence of public welfare in Upper Canada, i.e. the forces that created the basis for the development of institutionalized welfare. This basis is to be found in the historical relationship between Great Britain and Upper Canada - a colonial relationship.

There are two points crucial to an understanding of the development of Upper Canada and the subsequent establishment of relief institutions. The first is the availability of land for settlement, and the second is the seasonal nature of employment. Together with the above factors there must be added a third, the fact that there was little capital available to manufacturers. The result of this meant a difficult situation for wage-labourers.

The production of raw materials in the colony in the early nineteenth century was not extensive enough to maintain a stable labouring population. Also, the system of land granting eliminated mass settlement of the interior of the colony. During the great migrations of the early nineteenth century, therefore, Upper Canada became merely a way station for the excess population of the British Isles on their way to the free land of the western United States or the industrial employment of the eastern United States.

Unlike Britain, there was no local history of poor relief in
Upper Canada. Yet, with the mass migrations and the accumulation of paupers in the cities along the St. Lawrence, Upper Canada had to develop its own method of poor relief. This method of relief would be based on the system of relief already in practice in the mother country. I will argue then, that any attempt to explain part of the development of public welfare in Upper Canada must look at its historical development in Great Britain, as well as to intrinsic factors (Curtis and Edginton, 1979).

Since the major reason for the development of public welfare is to assist and discipline the poor, then the creation of pauperism in Upper Canada is of importance. The creation of this population, however, is not internal to the colony but structured by the migrations from Britain in conjunction with the lack of land and employment in the colony. This chapter will show that, even though Upper Canada and Great Britain are geographically separate units, they are not separable socially, politically or economically.

I have divided my argument into three parts. The first will specify the conditions which created a surplus population in Great Britain, leading to the great migrations. The second part will describe the conditions in Upper Canada into which the migrants entered. Lastly, I will concentrate on the impact of the above two processes on the development of public welfare institutionalization in the colony. The latter point will tie in with the material of the previous chapter on the development of public welfare in Great Britain.
II. Emigration From the British Isles

Pauperization and hence emigration were not caused by the inability of "nature" to provide sustenance for an entire population, as Malthus (1970) suggested, but by an overabundance of labourers in a market of limited employment without the assistance of the state. This overabundance in England was exacerbated by the ingress of Irish and Scotch labourers lacking similar forms of state assistance (Redford, 1964: 17).

The social reorganization that occurred in England also occurred in Ireland and Scotland. Landlordism, concentration of farms, application of machinery, the introduction of traditional agricultural methods on a large scale and the Poor Laws - in sum the forces of industrial capitalist development - created a great mass of surplus labourers (paupers) migrating throughout the British Isles (Redford, 1964) and to the colonies (Carrothers, 1971).

The process of land accumulation in Ireland and Scotland forced the labourers of these countries to migrate to England where employment possibilities were greater and wages better. The fact was, however, that Irish labourers worked for less than the English working class. The Irish required less to produce and maintain themselves as a labour force (Carrothers, 1971: 43) thus taking many of the jobs from their English counterparts. Therefore, Irish migration to England opened employment opportunities for the Irish while driving down the average wage and

The growing pressures of unemployment, reduction in wages and the state policies of non-assistance to the able-bodied poor pressured the state to seek a remedy to this potentially disruptive situation. The remedy was emigration. Two and a half million persons emigrated from the British Isles prior to 1850 (Carrothers, 1971: 305).

Some authors (Guillet, 1972; Macdonald, 1968 and Morehouse, 1928) argue that the cause of the great migrations was "natural" and not determined by the development of industrial capitalism in Britain. Their argument, like that of Malthus (See Marx, 1971A: 67-68), focuses on the relation of demographic growth to the resources available to sustain a given population. This perspective sees demographic growth as an aggregation of independent factors unrelated to the soci-economic conditions of the country in which overpopulation occurs. Redford (1964: 18-19), in contrast, argues that the growth of industrialization, and the concomitant need for child labour and economic concessions from the state to families greatly influenced the rise of the birth-rate during this period. This was also accompanied by the delivery of organized medical care to large populations which lowered the death-rate. Are these "natural phenomena" which happen or are they caused by some socio-historical process?

There is a tendency among historians who study the migrations of the early nineteenth century to draw attention to crop failures or economic depressions as events outside the social order which caused
the peopling of Britain's colonies. These specific events did occur; however, they are by no means "natural" (a term never defined). Even though these authors do mention the processes of land reorganization, development of industry, and the amounts of capital and labour needed for industrial development, they fail to bring these processes forward as reasons for migration. They treat the above processes as isolated events that come together by accident (we assume) to produce migration. The explanation is then quantified to push-pull indices which are to explain both why people left Britain and why they went specifically to Upper Canada (Cowan, 1968: 3).

Morehouse (1928 A: 306) describes the migrations of the 1840's in relation to normal and abnormal periods. The probability of migration is said to vary proportionately with the degree to which subsistence levels fall below normal:

The first five years illustrate the changes and reactions of normal times; the second five, what may happen when famine stalks the land.

(emphasis mine)

Emigration data provided by Carrothers (1971: 305)(Table II) from the British Isles to Australia, British North America and the United States raise three questions about the conditions discussed by Morehouse (1928) as underlying migration in the 1840's: 1) What are normal times
111

and for whom are they normal? 2) Why are there distinct differences in the number of migrants leaving the British Isles after 1815, 1830 and 1845; why are these years normal or abnormal? and 3) Why are there differences in the numbers of people going to the various destinations?
### TABLE II

**Place of Destination of Migrants from the British Isles**

<table>
<thead>
<tr>
<th>Years</th>
<th>B.N.A.</th>
<th>U.S.</th>
<th>Aust., N.Z.</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>1815-1819</td>
<td>52,699</td>
<td>43,614</td>
<td>0</td>
<td>97,799</td>
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<tr>
<td>1820-1824</td>
<td>67,030</td>
<td>26,024</td>
<td>2,815</td>
<td>95,030</td>
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<td>1825-1829</td>
<td>59,598</td>
<td>55,635</td>
<td>5,175</td>
<td>121,084</td>
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<tr>
<td>1830-1834</td>
<td>223,848</td>
<td>143,360</td>
<td>13,434</td>
<td>381,636</td>
</tr>
<tr>
<td>1835-1839</td>
<td>96,918</td>
<td>150,132</td>
<td>39,845</td>
<td>287,358</td>
</tr>
<tr>
<td>1840-1844</td>
<td>171,022</td>
<td>221,506</td>
<td>62,716</td>
<td>465,577</td>
</tr>
<tr>
<td>1845-1849</td>
<td>257,354</td>
<td>690,614</td>
<td>64,221</td>
<td>1,029,209</td>
</tr>
<tr>
<td>1850-1854</td>
<td>186,722</td>
<td>1,158,646</td>
<td>270,088</td>
<td>1,638,445</td>
</tr>
<tr>
<td>1855-1859</td>
<td>71,738</td>
<td>472,175</td>
<td>228,449</td>
<td>800,640</td>
</tr>
</tbody>
</table>
The distribution of emigrants, shown in Table II, becomes particularly interesting when viewed in conjunction with available land in the new territories (1830-1860). The availability of land in Upper Canada is crucial in understanding the relation between those who came to the colony and those who actually settled there. The fact that after 1849 at least one-third of those arriving in British North America went directly to the United States adds confusion to the impact of emigration on the colony. Although there is no way of verifying how many emigrants left the colony after a short stay we can assume from other information that this number was also high (Cowan, 1961).

The problem here is the effect of the great numbers of emigrants on the number of unemployed in the colony and consequently on the development of public welfare. This social process is by no means "natural", i.e. either being the product of natural causes or the working out of a natural historical process.

I am suggesting that we look at this problem in a different way, by studying the organization and development of surplus population and its subsequent emigration. The redundant population of the British colonies was created by a specific historical process of capitalist industrial development. It was not created by natural processes. As Marx points out:

"... the higher the productiveness of labour, the greater is the pressure of the labourers on the means of employment, the more precarious, therefore, becomes their condition of existence..."

(1971 A: 111-112)
The object of capitalist development, at the time of the industrial revolution, was to form an industrial reserve labour force which would drive wages down (Mencher, 1967: 93-129; Dobb, 1960: 232). However, for both the landed gentry and the capitalist it would certainly have been preferable that pauperism did not exist— with all its social and political ramifications — because of its drain on the fiscal resources of the state. The problem was that pauperism did exist and the state became the only apparatus for organizing it within the confines of capitalism (deBrunhoff, 1978: 19-20). In this situation, emigration was a real alternative and seen by the state as a means of relieving the pressures at home.

Above we have examined the social conditions in Great Britain which structured the great migrations. We will now turn to an analysis of the conditions the migrant population faced on entering Upper Canada.

A) Social Conditions in Upper Canada

At the end of the American Rebellion, the British Government wished to establish a more secure base in North America. To effect this policy, the Imperial Government acquired territory from the Six-Nations Indians in 1791 (Ryerson, 1975: Cap. 27). This territory came to be known as Upper Canada. In order to secure the province militarily, the Colonial Office enacted a policy of settling loyal British subjects along the border with the United State (Ryerson, 1973: 18). Initial settlers in Upper Canada were those wishing to escape "American Republicanism"
and remain loyal to the Crown (Lower, 1946: 228). This group was known as the United Empire Loyalists.

To entice Americans to the new territory, the British Government empowered the Governor of the Province of Quebec (prior to 1791) to distribute free grants of land in the western territory (Upper Canada) to Loyalists of the British Crown. As a gesture of appreciation, the Crown granted land to between 6,800 and 10,000 "loyalists" who entered the territory between 1770 and 1780 (MacNutt, 1963: 16-41).

Along with the settlement of the loyalists was the settlement of soldiers which was more to the point of the protectionist policies of the Colonial Office. Free land grants to military personnel, especially after 1815, were also part of the British policy to relieve overpopulation at home. Land in Upper Canada was granted to soldiers on the basis of rank, while the location of their settlement was determined by the colonial defense strategy.

In 1783 service-officers were granted 1,000 acres, while privates were given 50 acres. In 1788 the amount of acreage granted to officers was increased to 5,000 acres (Johnson (ed.), 1975: 34). It was policy to settle men and officers of the same units together to order to facilitate their easy organization when invasion threatened (Canniff, 1872: 447).

Although the policy of military defense, combined with the help of the Six-Nations bore fruit in the War of 1812, it inhibited settlement. For the type of settlement which was designed to defend
the province left most of the lands unoccupied and uncultivated. Moreover the free-grant system brought about land speculation which ultimately hindered the settlement of the province. These first patterns of land-granting became a structural impediment to the settlement of the migrants who came to Upper Canada in the first half of the nineteenth century.

The second goal of the Colonial Office, after defense, was the settlement of an agricultural population to provide raw materials and food to a growing British economy (Ryerson, 1975: 268). However, the fulfillment of this goal was inhibited by the free land-grant policies of the period from 1780 to 1824 (Richards, 1958: 198).

By 1824, 13/17 of all land surveyed in Upper Canada - 13 million acres - was either settled or allocated (Richards, 1958). From 1825 to 1838 there were less than 600,000 acres disposed for settlement. This reduction in land grants does not indicate that the province was overflowing with people. On the contrary, only ten percent of the land was settled by 1838 and less was cultivated (see map 1).

Land policies structured the settlement of the province and also the formation of a landed-merchant class, indigenous to Upper Canada, called the Family Compact (Saunders, 1957). The Family Compact controlled both the legislative and executive councils of the local government.

The place of Upper Canada within the British Empire was a supplier of raw materials and a receiver of manufactured goods and
'surplus population'. This relation succeeded in bringing the colony within the economic sphere of the Empire, just as the introduction of British Civil Law (Jackett, 1968: 8-9) and colonial status placed Upper Canada under the control of the British State.

British methods of land tenure, coupled with speculation, did little to enhance the internal economic growth of Upper Canada. One of the policies of the British State was to give free-grants of land to "deserving" settlers, i.e., those who had accumulated some wealth or status. The "deserving" did not include the majority of the immigrants who had little capital on arriving in the 'new world'. British land-settlement policy tended to reproduce a portion of the class structure of England in Upper Canada (Johnson, 1971: 41).

The population of Upper Canada was 157,923 in 1825 and 339,422 in 1838; 363,134 British migrants arrived in this span of thirteen years (Cowan, 1961: 288). However, many of the migrants did not stay in the colonies of British North America but went on to employment and land in the United States. This 'flow through' was not immediate and caused much distress in the cities along the St. Lawrence (Johnson, 1971: 60).

Land policies greatly influenced the distribution of available land in the colony at an early date, thus structuring the opportunities of the great majority of the migrants:
TABLE III

Land Holdings in Upper Canada: 1851 and 1861

<table>
<thead>
<tr>
<th>Population of Upper Canada</th>
<th>Year 1851</th>
<th>% of Total</th>
<th>Year 1861</th>
<th>% of Total</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>952,004</td>
<td></td>
<td>1,396,091</td>
<td></td>
</tr>
<tr>
<td>Occupiers of Land*</td>
<td>99,906</td>
<td>10.50</td>
<td>131,983</td>
<td>9.45</td>
</tr>
<tr>
<td>Acres owned</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>0-10</td>
<td>9,746</td>
<td>1.02</td>
<td>4,424</td>
<td>.32</td>
</tr>
<tr>
<td>10-20</td>
<td>2,671</td>
<td>.28</td>
<td>2,675</td>
<td>.19</td>
</tr>
<tr>
<td>20-50</td>
<td>19,143</td>
<td>2.01</td>
<td>26,630</td>
<td>1.90</td>
</tr>
<tr>
<td>50-100</td>
<td>47,427</td>
<td>4.98</td>
<td>64,891</td>
<td>4.65</td>
</tr>
<tr>
<td>100-200</td>
<td>17,515</td>
<td>1.83</td>
<td>28,336</td>
<td>2.03</td>
</tr>
<tr>
<td>200+</td>
<td>3,404</td>
<td>.35</td>
<td>5,027</td>
<td>.36</td>
</tr>
</tbody>
</table>

(Census of the Canadas, 1851 and 1861)

The policy of the government's land agent - the Canada Company - was to sell farms of only 1,000 acres each at 35 shillings per acre. This price put land out of the reach of a majority of the migrants coming to Upper Canada (McGee, 1862). Contrary to the wishes of the British State to create a stable agricultural population, Upper Canada became a speculators' dream, with most of the desirable land taken before 1840.

The restrictive settlement policies of the Canada Company reflected the interests of the Family Compact (Saunders, 1957) to create

* This category refers to landholders and not cultivators.
a large number of unattached agricultural labourers to work on their lands. This resulted in an overabundance of free labourers in agriculture, manufacturing and domestic service (Colonial Office, 18: 8). Even during the free land-grant period a settler required between £47 and £300 to survive as an agriculturalist (Teeple, 1972: 56). Cowan (1961: 189) shows that in 1833 a family of eight would need £421.17.0 to become an agricultural producer, which was far above what a typical family could pay after arriving in Upper Canada.

In tandem with the small proportion of the population who owned land and the unavailability of new land, there was little development in manufacturing and hence little employment. Masters (1947: 15) points out that most of the industries in Upper Canada were related to the extraction of raw materials. There was little manufacturing in the colony because of Upper Canada's position within the Empire - exporter of raw materials and importer of finished commodities. The landed-merchant class - the Family Compact - gained considerably from the commerce in both directions (Ryerson, 1973: Cap. I).

This article appeared in the *Globe*, 16 January 1850:

The Board of Trade congratulated itself in January, with the assertion that rapid strides had been made during recent years in domestic manufacturers.

Statistics on manufacturers during the period clearly show that the Board of Trade - members of the Family Compact - only meant manufacturers of raw materials for export. According to Spelt (1972: 74-75) there were 1,500 industries in South-Central Ontario (See map 1) which
employed almost 6,500 labourers. Since a more precise number of labourers is not available for all of Upper Canada, we can use Spelt's data as a basis to estimate that at most two percent of the population of Upper Canada prior to 1850 was employed as wage-labourers in manufacturing. The census of 1851 gives some indication of the amount and type of labour employed:

**TABLE IV**

<table>
<thead>
<tr>
<th>Industry</th>
<th>Number</th>
<th>Employees</th>
</tr>
</thead>
<tbody>
<tr>
<td>Grist Mills</td>
<td>692</td>
<td>1,150</td>
</tr>
<tr>
<td>Saw Mills</td>
<td>1,567</td>
<td>3,670</td>
</tr>
<tr>
<td>Carding Mills</td>
<td>147</td>
<td>213</td>
</tr>
<tr>
<td>Fulling Mills</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Woolen Mills</td>
<td>74</td>
<td>632</td>
</tr>
<tr>
<td>Distilleries</td>
<td>102</td>
<td>168</td>
</tr>
<tr>
<td>Breweries</td>
<td>50</td>
<td>118</td>
</tr>
<tr>
<td>Tanneries</td>
<td>222</td>
<td>458</td>
</tr>
<tr>
<td>Foundries</td>
<td>97</td>
<td>925</td>
</tr>
<tr>
<td>Oatmeal Mills</td>
<td>?</td>
<td>45</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>2,951</td>
<td>7,379</td>
</tr>
</tbody>
</table>
In order to fully illustrate the relatively small size of the wage-labouring population in Upper Canada, especially in Toronto, we must look at the distribution of classes throughout the province. Due to the categorization of the population by the census into "sectors", some extrapolation must be undertaken to picture the class structure of the province. Therefore, for example, the "industrial sector" will be composed of labourers, capitalists and petty-producers. While the categorization is not exactly what is needed for our analysis, we are able to assume that the labourers and petty-producers form a greater portion of each sector than the capitalists (Ryerson, 1973: 174):

**TABLE V**

**Sector Employment in Upper Canada and Toronto**

<table>
<thead>
<tr>
<th>Sector</th>
<th>Toronto</th>
<th>Upper Canada</th>
</tr>
</thead>
<tbody>
<tr>
<td>Agricultural</td>
<td>183</td>
<td>86,637</td>
</tr>
<tr>
<td>Commercial</td>
<td>1,447</td>
<td>9,297</td>
</tr>
<tr>
<td>Domestic</td>
<td>1,815</td>
<td>18,031</td>
</tr>
<tr>
<td>Industrial</td>
<td>3,270</td>
<td>44,950</td>
</tr>
<tr>
<td>Professional</td>
<td>454</td>
<td>6,789</td>
</tr>
<tr>
<td>Unskilled</td>
<td>1,584</td>
<td>80,773</td>
</tr>
<tr>
<td>Total Population</td>
<td>?</td>
<td>952,004</td>
</tr>
</tbody>
</table>

(Census of the Canadas, 1851)
Now, by taking the percentage of Toronto's population by sector, and adding in the categories of day labourers and servants, we can get a clearer picture of the organization and opportunities for labour in the city where many of the poor were accumulating for short periods of time.

TABLE VI
Percentages of Sector Employment to Total Population

<table>
<thead>
<tr>
<th>Sector</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Agriculture</td>
<td>6</td>
</tr>
<tr>
<td>Commercial</td>
<td>4.7</td>
</tr>
<tr>
<td>Domestic</td>
<td>5.9</td>
</tr>
<tr>
<td>Industrial</td>
<td>10.6</td>
</tr>
<tr>
<td>Professional</td>
<td>1.5</td>
</tr>
<tr>
<td>Unskilled</td>
<td>5.1</td>
</tr>
<tr>
<td>Day Labourers</td>
<td>4.2</td>
</tr>
<tr>
<td>Servants</td>
<td>5.3</td>
</tr>
</tbody>
</table>

The above data are given only because they point to the structure of employment and settlement opportunities in one of the major cities of Upper Canada. This is important to my argument in that it provides a view of the colony into which the great migrations will flow.

The effects of lack of new employment under-employment (seasonal labour) and the unavailability of land created a growing pop-

* The reason for using Toronto is that it was the site of the first public welfare institutions in Upper Canada.
ulation of paupers in the cities, especially Toronto. The conjunction of these processes initiated the demand for public welfare and control of the migrant population in the colony. It is important, however, that we understand that the push for public welfare in the province of Upper Canada was in some ways not related to the internal development of the colony. But because of the specific structuring of the economy in terms of job creation and available land, the great influx of migrants put a strain on the social organization of British North America.

In order for industrial development to have occurred in Upper Canada, and with it employment, two conditions had to be met. First, there would have to be sufficient return on capital invested, and second, there would have to be a large, disciplined labour force willing to enter industrial employment. Since investment in Upper Canada was in an area that would yield the greatest return on capital invested - raw material extraction - the labour force was organized to support this form of development. The labouring population in Upper Canada in this period was employed in either supportive manufacturing to raw material extraction or in building infrastructure - roads, railroads and canals - to facilitate raw material extraction.

The distribution of the labour force in Upper Canada was then structured by the lack of industrial development and the unavailability of land. In spite of this, there was a phenomenal growth in Upper Canada's population prior to 1850.

Because Upper Canada was a colony of Great Britain, it could
not restrict migration and also could not raise capital necessary for industrial development\(^3\) (Stevens, 1960: Vol. I, 71-72). These facts were not internally created by the "nation" of Upper Canada; they were the result of colonialism.

The Family Compact, through their control of local government in Upper Canada, struck at what they thought to be the causes of pauperism in the province. The Compact initially instituted programs of relief to control pauperism. These programs were administered in the interests of the Compact - the local merchant-landholding class - to protect private property and personal welfare. The enactment of laws providing for the poor and distressed in the city of Toronto (1830) and the erection of the Toronto House of Industry (1837) are examples of these programs.

The rise of pauperism was attributed directly to immigration; that is, to the dumping of Britain's surplus population on the shores of British North America (Johnston, 1972). The Family Compact attempted to control the huge influx of paupers by placing a head-tax on immigrants to British North America\(^4\) (Cowan, 1961: 194). Immigration fell off after 1847 but there is no evidence that this was caused by the tax (see graph 1). According to Carrothers (1965: 202) the reason immigration was as high as it was after 1847 was because of the railroad and shipping interests who benefitted from the immigrant trade. One third of those arriving after 1847 went directly to the United States. Passage to British North America from the British Isles was promoted over passage to
Graph I.

Immigration to British North America: 1315-1861

(Aprox.)
the United States because the ports were more accessible to British merchant ships as they were controlled by Britain (Boroughs, 1969: 63-64).

### TABLE VII

<table>
<thead>
<tr>
<th>Year</th>
<th>England</th>
<th>Ireland</th>
<th>Scotland</th>
<th>Europe</th>
<th>Maritime Provinces</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>1829</td>
<td>3,565</td>
<td>9,614</td>
<td>2,643</td>
<td></td>
<td></td>
<td>15,945</td>
</tr>
<tr>
<td>1830</td>
<td>6,799</td>
<td>18,300</td>
<td>2,450</td>
<td></td>
<td></td>
<td>28,000</td>
</tr>
<tr>
<td>1831</td>
<td>10,343</td>
<td>34,133</td>
<td>5,354</td>
<td></td>
<td></td>
<td>50,254</td>
</tr>
<tr>
<td>1832</td>
<td>17,481</td>
<td>28,204</td>
<td>5,500</td>
<td>15</td>
<td></td>
<td>51,746</td>
</tr>
<tr>
<td>1833</td>
<td>5,198</td>
<td>12,013</td>
<td>4,196</td>
<td>-</td>
<td></td>
<td>21,752</td>
</tr>
<tr>
<td>1834</td>
<td>6,799</td>
<td>19,206</td>
<td>4,591</td>
<td>-</td>
<td></td>
<td>30,935</td>
</tr>
<tr>
<td>1835</td>
<td>3,067</td>
<td>7,108</td>
<td>2,127</td>
<td>-</td>
<td></td>
<td>12,527</td>
</tr>
<tr>
<td>1836</td>
<td>12,188</td>
<td>12,590</td>
<td>2,224</td>
<td>485</td>
<td></td>
<td>27,722</td>
</tr>
<tr>
<td>1837</td>
<td>5,580</td>
<td>14,538</td>
<td>1,509</td>
<td>-</td>
<td></td>
<td>21,901</td>
</tr>
<tr>
<td>1838</td>
<td>990</td>
<td>1,456</td>
<td>547</td>
<td>-</td>
<td></td>
<td>3,266</td>
</tr>
<tr>
<td>1839</td>
<td>1,586</td>
<td>5,113</td>
<td>485</td>
<td>-</td>
<td></td>
<td>7,439</td>
</tr>
<tr>
<td>1840</td>
<td>4,567</td>
<td>16,291</td>
<td>1,144</td>
<td>-</td>
<td></td>
<td>22,234</td>
</tr>
<tr>
<td>1841</td>
<td>5,970</td>
<td>18,317</td>
<td>3,559</td>
<td>-</td>
<td></td>
<td>28,086</td>
</tr>
<tr>
<td>1842</td>
<td>12,191</td>
<td>25,532</td>
<td>6,095</td>
<td>-</td>
<td></td>
<td>44,374</td>
</tr>
<tr>
<td>1843</td>
<td>6,499</td>
<td>9,728</td>
<td>5,006</td>
<td>-</td>
<td></td>
<td>21,727</td>
</tr>
<tr>
<td>1844</td>
<td>7,698</td>
<td>9,993</td>
<td>2,234</td>
<td>-</td>
<td></td>
<td>20,142</td>
</tr>
<tr>
<td>1845</td>
<td>8,833</td>
<td>14,208</td>
<td>2,174</td>
<td>-</td>
<td></td>
<td>25,375</td>
</tr>
<tr>
<td>1846</td>
<td>9,163</td>
<td>21,049</td>
<td>1,645</td>
<td>896</td>
<td></td>
<td>32,753</td>
</tr>
<tr>
<td>1847</td>
<td>31,505</td>
<td>54,310</td>
<td>2,747</td>
<td>-</td>
<td></td>
<td>89,562</td>
</tr>
<tr>
<td>1848</td>
<td>6,034</td>
<td>16,582</td>
<td>3,806</td>
<td>1,395</td>
<td></td>
<td>27,939</td>
</tr>
<tr>
<td>1849</td>
<td>8,980</td>
<td>23,126</td>
<td>4,984</td>
<td>436</td>
<td></td>
<td>38,494</td>
</tr>
<tr>
<td>1850</td>
<td>2,487</td>
<td>17,976</td>
<td>2,879</td>
<td>849</td>
<td></td>
<td>32,292</td>
</tr>
<tr>
<td>1851</td>
<td>9,877</td>
<td>22,381</td>
<td>7,042</td>
<td>870</td>
<td></td>
<td>41,076</td>
</tr>
<tr>
<td>1852</td>
<td>9,276</td>
<td>15,983</td>
<td>5,477</td>
<td>7,256</td>
<td></td>
<td>39,176</td>
</tr>
<tr>
<td>1853</td>
<td>9,585</td>
<td>14,417</td>
<td>4,745</td>
<td>7,456</td>
<td></td>
<td>36,699</td>
</tr>
<tr>
<td>1854</td>
<td>18,175</td>
<td>16,165</td>
<td>6,446</td>
<td>11,537</td>
<td></td>
<td>53,183</td>
</tr>
<tr>
<td>1855</td>
<td>6,754</td>
<td>4,106</td>
<td>4,859</td>
<td>4,864</td>
<td></td>
<td>19,174</td>
</tr>
<tr>
<td>1856</td>
<td>10,353</td>
<td>1,688</td>
<td>2,794</td>
<td>7,343</td>
<td></td>
<td>22,439</td>
</tr>
<tr>
<td>1857</td>
<td>15,471</td>
<td>2,016</td>
<td>3,218</td>
<td>11,368</td>
<td></td>
<td>32,097</td>
</tr>
<tr>
<td>1858</td>
<td>6,441</td>
<td>1,153</td>
<td>1,424</td>
<td>3,578</td>
<td></td>
<td>12,810</td>
</tr>
<tr>
<td>1859</td>
<td>4,846</td>
<td>417</td>
<td>793</td>
<td>2,722</td>
<td></td>
<td>8,678</td>
</tr>
</tbody>
</table>

(Cowan, 1961: 289)
Public Welfare and Colonial Development

In England, the reorganization of land during the transformation from feudalism to capitalism played an important role in determining the history of public welfare. Development of land for capitalist agriculture was accompanied by the association of status and wealth with landed property. Land ownership within the British Empire was required for legal as well as social recognition. This ideology permeated the policies of land granting in British North America to the extent that Edward Gibson Wakefield espoused a policy of restricting free grants of land only to the deserving, which of course did not include common labourers. Those immigrants who were to populate the British colonies had to first show they were worthy of land before they could obtain it, which meant working as free-labourers and accumulating enough capital to purchase land.

Historically, the breaking of the labourers' ties to the land created a legally free labouring class, the members of which could subsist only through the sale of their labour-power (Marx, 1967: Vol. I, Part VIII). The process of land expropriation during the transition to capitalism meant that there was no obligation on the part of the landlord to see to the sustenance and daily reproduction of labourers as was the case within feudal relations of production. In tandem with the period of land expropriation - enclosures - lasting from the sixteenth to the nineteenth centuries, an alternative method of sustaining England's labouring population came into effect. During the period when capitalist
relations of production were starting to develop, the state began to take on the responsibility for the maintenance of the poor at a given level of subsistence. This change in social responsibility was made explicit in the Poor Law 1601 (43 Elizabeth, cap. 2). Methods of organizing public assistance through the state-controlled schemes had their roots in the destruction of one mode of poor relief and its transformation into another mode. For England this development was internal to the nation. We can see in the case of the European nations and in the case of England that economic development within a specific social unit shapes the development of specific forms of public welfare (Foucault, 1965: Cap. 2).

However, a problem arises if we try to apply this model to interpret the development of public welfare institutions in a colony such as Upper Canada. There was no process which constituted the breakdown of one mode of production and its related means of dealing with poverty and the emergence of another. If we assume an internal "evolutionary" model for the development of Canada before 1867, as does Pentland (1959), then the appearance of different forms of public welfare organization in the different provinces is difficult to interpret. Pentland argues that "Canada" - which did not exist prior to 1867 - went through several pre-capitalist stages before capitalism finally emerged, and that feudalism held sway in Canada until 1850. If Pentland is correct, then how do we explain the manufactories and wage-labourers in Upper Canada and where is there evidence to show that land was organized under feudal rights? On the other hand, and more to the point of our discussion, why did the
state and not the landlord assume control over the poor and unemployed? The institutions of public welfare that existed in Upper Canada were those related to capitalist social relations and not social assistance based on paternalism (see $plane, 1971; Greenhouse, 1968; Hart, 1953).

Therefore, an analysis that wishes to explain the development of specific forms of institutional relief in Upper Canada cannot attribute creation of those institutions to a breakdown in the local paternalistic maintenance of the poor. Also, Pentland attributes the state policy-making decisions to Canada before its existence as a state. The fact is that there was no unified state structure outside of Great Britain for making policy decision for all the Canadas in this period.

The development of Upper Canada by the colonial state is exemplified by the transference of British Laws to the province in 1792 (Jackett, 1968: 7-9). This made English Civil Law the law in Upper Canada under the rule of His Majesty "to make laws for the peace, welfare and government thereof" (31 George III, 1791, cap. 31). The Constitutional Act of 1791 provided for the appointment of a governor, lieutenant governor and executive council. This group controlled the local government and were loyal to the crown. Justices of the Peace, sheriffs, and a court of quarter sessions was also appointed on the English model (Canniff, 1872: 502). The province was thus organized as a settlers' state where authority was centralized and controlled by the representatives of the crown. However, the Poor Laws were not transferred to the colony since there was little need for public welfare in 1791 and it was
feared that the poor law would lead to decentralized government (Splane, 1965: 65-68).

We see, then, that Pentland's argument errrs on two points: First, the use of "Canada" as a state prior to 1867 is anachronistic, and, second, his model of development cannot account for the development of industries and the use of wage-labour in the colony in the 1850's.

It cannot simply be argued that because there was no great surge of industrialization in Upper Canada and because the background of the province's population was agrarian, the colony was feudal. These examples are insufficient for making such a statement. What is needed is evidence rooted in the definitions of "feudalism" and "capitalism".

The fact that capitalist relations existed in the province from its inception in 1791 should be illustrated by the actual social organization of the colony and not by the occupational background of the migrants. The sphere of production the people of the colony were engaged in, occurs as part of a local unit developing within a large colonial empire. The very existence of a new province, formed out of a policy of military protection and economic expansion, made Upper Canada part of the Empire. Development of Upper Canada within this particular colonial relation - industrialization in the mother country and raw material extraction in the colony - and the replacement of the native population does not give cause to analytically separate these two areas. Rather, uneven development should lead us to inquire about the dynamic of the whole of the Empire and its effects on a particular locale.
As we have seen, there were specific historical and structural conditions for the organization and migration of Britain's surplus population. We have also noted the conditions existing in Upper Canada upon the arrival of the migrants. Before explaining the effects of the migrations on the organization and development of public welfare in Upper Canada we will further examine the connection between the mother country and this particular colony.

One specific matter of interest here is the control of colonial policy by the Imperial state. The interests of the colonial office in the various settlement schemes of Robert Wilmot-Horton and Edward Gibbon Wakefield were focused on relieving Great Britain of its "redundant" population (Johnston, 1972). But these policies did not take into account "overpopulation" in the colonies.

1) Colonial Policy

It is evident that the great number of migrants from the British Isles provided an impetus for the emergence of public welfare institutions in Upper Canada (Splane, 1965: 23). As I have already stated above, industrial capitalism and the capitalization of agriculture in the British Isles created a population greater than the forces of production were able to employ. This had a devastating effect on the condition of the working class in Great Britain, especially after 1815 (Hammond and Hammond, 1968: 12-13). Pauperism was then at its height and all the remedies had failed to alleviate the situation. The demands of
new industries greatly affected the proposed remedies for the control of paupers (Waters, 1925: 326-330). Aside from the 'rates in aid of wages' and the New Poor Law (1834) emigration seemed to be the answer.

Two programs seriously considered and put into effect in specific locales by the British Government were: 1) assisted emigration (1815-1834), espoused by Wilmot-Horton, and 2) systematic colonization (1834-1846), whose spokesman was E.G. Wakefield (Knorr, 1968: 269-270). While they disagreed on the exact methods of carrying out emigration, both were concerned with the creation of a "safety-valve" for removing the surplus population of Britain.

Assisted emigration to British North America was never popular as a method of providing parish funds for poor relief, although after the Poor Law of 1834 and its amendments, guardians of the poor were empowered to assist their parish poor to emigrate (Johnson, 1913: 87) (see map II). The annual reports of the emigrant agent in the Canadas (1837-1859) gives an indication of the numbers of assisted emigrants arriving in the Canadas:

**TABLE VIII**

Assisted Emigration Arriving at the Port of Quebec

<table>
<thead>
<tr>
<th>Year</th>
<th>Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>1837</td>
<td>1,571</td>
</tr>
<tr>
<td>1850</td>
<td>3,680</td>
</tr>
<tr>
<td>1859</td>
<td>142</td>
</tr>
</tbody>
</table>

(Imperial Blue Books, 25 August 1860)
Map II - Approximate distribution of 4,680 Poor Law Migrants and 6,403 Poor Law emigrants (1835-37) (Redford, 1964: 194)

Each dot represents 5 outward migrants
Each cross represents 5 inward migrants
Each circle represents 5 overseas emigrants
Indeed, there was a reluctance among the parish poor to accept assisted emigration since it was regarded a punishment. The practice of assisted emigration was referred to as "transportation" (Redford, 1964: 25). Early government emigration policy was influenced by the desire of the landholding class to "shovel out the paupers" without paying for their emigration. The policy of non-interference in matters of emigration led to horrible conditions in the over-sea emigrant trade. Usually, emigrants to British North America acted as ballast in the ships returning from the timber trade or sold themselves into servitude for a number of years to obtain passage (Guillet, 1972; Lower, 1922).

Large-scale assisted emigration in the period before 1825, while there was still available land in Upper Canada, took the form of settlement groups (Pammett, 1936). These types of settlement emigration groups were usually not subsidized by the parish but directly by the state or philanthropic organizations. The British state-assisted groups before the Union Period - 1841-1867 - (Guillet, 1972; Cap. 3), but after 1841 emigration assistance was usually by private emigration societies or trade unions (Macdonald 1970: 109).

Of the 21,901 migrants who arrived at Quebec ports in 1837, 1,571 were on relief, i.e. they were state assisted (Annual Reports of the Agent of Emigration, 1837: 9). In 1851, there were 3,680 assisted persons of which 2,427 were Irish (Imperial Blue Books, 7 April 1851) and in 1859 there were 142 assisted emigrants, all coming from British workhouses (Imperial Blue Books, 25 August 1860).
The second emigration scheme was that of systematic colonization. Systematic colonization was more of a colonial policy than assisted emigration in that its concerns went beyond home policy and the egress of paupers (Johnson, 1972).

The champion of systematic emigration was Wilmot-Horton, who became an M.P. in 1818 and served as Under-Secretary to Lord Bathurst at the Colonial Office from 1821-1828. Wilmot-Horton chaired the Select Committee on Emigration (1826-1827) (Bloomfield, 1961: 89). His political position enabled him to put into practice the theories of his mentor, Rev. Thomas Malthus, chief witness at the hearings of the Select Committee. Wilmot-Horton, then attempted to institute a practical alternative to Malthus' program of "moral restraint". This alternative, emigration, was calculated to reduce the poor rate (a property tax) and to ease the state's subsidization of Britain's "redundant" population. The results of this work were incorporated into the Poor Law of 1834—especially the concepts of less-eligibility and workhouse-test, but had little effect on official emigration policy aside from the provision that the state should encourage egress from the British Isles to her colonies:

He (Wilmot-Horton) held that population might be redundant to the means of employment without actually being redundant in relation to the means of subsistence. He maintained that this was the condition of things in the United Kingdom, and that the remedy lay in removing the surplus population to those parts of the empire where, if employment did not already exist, it could be created more easily and with greater advantage then in the United Kingdom.

(Carrothers, 1971: 52)
Systematic colonization, as later professed by Wakefield (Bloomfield, 1961: Cap. 6), superseded assisted emigration because it would not only ease the financial burden of poverty from the landed classes but would also transform the redundant population into colonial consumers of British manufactured goods. Thus, systematic colonization would work in the interests of the landholders and the industrial bourgeoisie at the same time.

After the passing of the 1834 Poor Law, the costs of relief were still great. Before 1834 the yearly average cost of poor relief was £6.7 million, while from 1834 to 1843 it dropped to only £4.5 million per annum. The following table illustrates the burden of relief and pauperism:

**TABLE IX**

Costs of Pauperism in England: 1775-1845

<table>
<thead>
<tr>
<th>Year</th>
<th>Cost of Relief in £ million</th>
<th>Population in millions</th>
<th>Paupers in millions</th>
</tr>
</thead>
<tbody>
<tr>
<td>1775</td>
<td>1.5</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>1776</td>
<td>1.53</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>1784</td>
<td>2.00</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>1801</td>
<td>-</td>
<td>9.73</td>
<td>-</td>
</tr>
<tr>
<td>1803</td>
<td>4.08</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>1807</td>
<td>4.27</td>
<td>9.21</td>
<td>1.23</td>
</tr>
<tr>
<td>1813</td>
<td>6.66</td>
<td>10.51</td>
<td>-</td>
</tr>
<tr>
<td>1818</td>
<td>7.87</td>
<td>11.88</td>
<td>-</td>
</tr>
<tr>
<td>1821</td>
<td>-</td>
<td>12.00</td>
<td>-</td>
</tr>
<tr>
<td>1824</td>
<td>5.73</td>
<td>12.52</td>
<td>-</td>
</tr>
<tr>
<td>1832</td>
<td>7.04</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>1834</td>
<td>6.32</td>
<td>14.11</td>
<td>1.54</td>
</tr>
<tr>
<td>1845</td>
<td>-</td>
<td>14.37</td>
<td>-</td>
</tr>
</tbody>
</table>

We can see how it would be in the interests of the landholding classes to reduce the costs to themselves in financing poverty and bring prosperity to the nation. On the other hand one can see that it would be in the interests of the manufacturing class, who escaped the "rates", to have the cheapest possible supply of labourers (Hammond and Hammond, 1970: 147). This could only be realized with a large "reserve" labouring population which would keep the supply of labour constantly above the demand for it (Knorr, 1968: 271). The struggle between the landholding and the manufacturing classes in the early nineteenth century to control government policy resulted in the blocking of any set policy on emigration with regard to British North America.

Colonial settlement, although never wholly supported by the British state, supported both of the dominant interests in the mother country (landed and manufacturing). This was accomplished by the state's not advancing one interest over the other, although, by the middle of the nineteenth century, state policy began leaning more toward the manufacturing and trading interests. The efforts of the state in this period were directed at producing the greatest possible wealth in the hands of the commercial classes.

The British state's support for the growing manufacture and trade interests becomes clear when one inspects the legislation in the British Isles during the third and fourth decades of the nineteenth century (Johnson, 1913; 377-378). Through the newly increasing political pressure of labour (feared by the state because of its potentially
revolutionary consequences) the British state began supporting manufacture and trade over landed property (Cole and Postgate, 1956: Sections 4 and 5). The British state also supported the manufacturing and trade interest at home by protecting their foreign and colonial investments by removing local opposition through colonial and military domination.

One of the effects of the British policies in relation to trade and emigration was the organization of the Upper Canadian economy. Colonial domination in British North America assisted production in the mother country with a more efficient and disciplined labour force from the new workhouses (Redford, 1964: 24-28) and a stable supply of raw materials from the colonies. Also of benefit was the captive market which was provided by the colonial population.

Having outlined the causes of the migrations of the early nineteenth century and also the conditions of subsistence in Upper Canada (land and employment) I will now analyse the effects of these migrations on local conditions of employment in the province.

C) The Effects of Migration on Upper Canada

The flood of migrants to Upper Canada affected its development as it was dominated by the development of industrial capitalism in England. One of Upper Canada's major roles within the larger unit was the reception of Britain's surplus population. Census data (Census of the Canadas, 1851) on the place of origin of those living in Upper
Canada, 1842 to 1851, show the great increase in the numbers emigrating from the British Isles, especially Ireland;

**TABLE X**

<table>
<thead>
<tr>
<th></th>
<th>England &amp; Wales</th>
<th>Scotland</th>
<th>Ireland (British)</th>
<th>U.S.</th>
</tr>
</thead>
<tbody>
<tr>
<td>1842</td>
<td>43,009</td>
<td>42,003</td>
<td>82,728</td>
<td>261,822,34,739</td>
</tr>
<tr>
<td>1848</td>
<td>64,560</td>
<td>57,604</td>
<td>140,673</td>
<td>383,084,32,579</td>
</tr>
<tr>
<td>1851</td>
<td>82,699</td>
<td>75,811</td>
<td>176,267</td>
<td>526,093,43,732</td>
</tr>
</tbody>
</table>

Nine-year Increase 92% 80% 113% 101% 25%

Even though this mass migration was supported by both the bourgeoisies of Upper Canada and Great Britain, there was a difference in the specific "type" of migrant wanted by the Family Compact and the "type" that actually arrived. The ideal migrant was one who would work as an agricultural labourer or servant, not one who wished to settle or who demanded high wages. The "need" for agriculture labourers was expressed by the Compact's land agent, the Canada Company, in circulars issued between 1841 and 1846:

Question: What class of country labourers is most in demand?

Answer: All agricultural labourers and farm servants.

Question: When the public works are in progress, are the wages generally at a higher or lower rate than those paid by farmers?

Answer: ...labourers engaged upon public works are raw emigrants, who are only fit on their first arrival for such description of work; ...

The hiring period for farm labourers ... by the month

(Colonial Office, 1841: 33-60)
Overall there seems to have been more places for servants than
farm labourers, but the number of jobs in comparison to the actual total
emigration was small. In 1842, 54,123 migrants came to British North
America from the British Isles. Of those who came, 3,184 were agricul-
tural labourers and 8,209 were servants. In 1848, of the 31,065 who
came, 7,914 were agricultural labourers and 15,230 were servants (Annual
Reports from the Agent of Emigration in the Canadas, 1842 and 1848).

The places for agricultural labourers only reflected the
interests of the landholding-merchant class of Upper Canada. However,
the effects of the migrations should be viewed from the position of Upper
Canada in relation to Great Britain and not from the wishes of the local
bourgeoisie. The Canadas became a "dumping ground" for Britain's
redundant population (Myers, 1972: 87).

Because of immigration taxes, lack of employment, low wages,
and the hoarding of land by speculators, the great majority of the
migrants subsequently went to the United States, where land and employ-
ment were available. The number of those migrating to British North
America in the period 1837 to 1859 was greater than the total population
of the province of Upper Canada in 1859. This illustrates that there was
a "second migration" to the United States. The total migration to
British North America from the British Isles from 1815 to 1861 was
1,231,555, while the population of Upper Canada in 1861 was 1,396,091
These migrations to and through Upper Canada created a situation of pauperism in the colony, for which the state assumed responsibility. This resulted in the growth of institutions of public welfare in Upper Canada. The fact that there was no available land for settlement or industry for employment produced a condition whereby relief institutions could develop. They took the form of jails, houses of correction, houses of industry (workhouses), hospitals and asylums. These institutions could provide not only for those who stayed in the province but also for those in the process of migrating to the United States. For example, of the 38,550 migrants who arrived in Toronto in 1847, 35,650 were "sent on," most finding their way south of the border (Duncan, 1974: 144).

An important cause of Upper Canada's inability to absorb Britain's surplus population was the lack of employment in the province. Though the interests of the Family Compact centred on a policy that would attract the "free, hardy and industrious" agricultural and skilled labourers to the province (Macdonald, 1966: 82) there were still two requirements to ensure that this type of migrant would come to Upper Canada. The requirement was the development of an infrastructure (roads, canals and railroads) capable of serving large scale agricultural and industrial production. This was partially solved by seasonal employment of the "redundant" migrants. It was in these occupations that the migrants of the 1830's, 40's and 50's were primarily employed instead of in "increasing productive capacity" in manufacturing or agriculture.
This type of seasonal labour made "relief" necessary in the off-season.

The second requirement was to initiate financial support for industrial development. Since the agricultural development of the province was linked to the interests of the Family Compact and landholder-merchants (Report of the Toronto Board of Trade, 1862: 6), the Compact's financial agents - the Bank of Upper Canada - would only support investment advancing those interests. The interests of the Family Company coincided with the interests of Baring Bros. and Glyn Mills and Co. (Fulford, 1953: Cap. 8) who backed Upper Canada bonds in Great Britain and thus controlled the flow of capital to the government of Upper Canada. These financial policies decreased the opportunities for a stable labouring population in Upper Canada. Instead, financial investment centred on raw material extraction which produced the highest rate of profit. According to Masters (1947: 15) "... the manufactures of Toronto were largely confined to the processing of raw materials and the making of implements for use in producing those raw materials."

During the 1840's and 1850's, the landholding merchant interests were satisfied to exploit the resources of the colony in exchange for British manufactured commodities. Structurally, they had little choice in the matter. This relation made Upper Canada, as a producing unit, financially and industrially dependent on raw material extraction. Consequently raw material extraction dictated the type of labour needed - cheap, landless and mobile. The migrations of the first half of the nineteenth century provided this labour force for the
Canadas. The problem facing the Family Compact, which also controlled the local state apparatus, was what to do with the destitute who could at best find only seasonal employment. In reality they were faced with the problem of providing assistance for a population "en-passage" from poverty in Great Britain to the free land in the United States.

Expansion of institutional relief in Upper Canada closely followed industrialization in the colony in the latter part of the nineteenth century. The close relation between industrialization and the rise of public welfare institutions could be seen also in England, France and Germany. However, during the early period of Upper Canadian development (1830-1850) there was no clear relation between the appearance of institutions for the reproduction and control of a reserve labouring population (forms of workhouses) and industrial growth in the province. The local bourgeoisie of Upper Canada found itself saddled with a potentially dangerous situation, a surplus population without land or employment. They turned to the United States and Great Britain for examples of how to develop relief institutions.

An examination of the data regarding the percentage of the population comprised of migrants gives some impression of the effect the migrations had on the organization of the colony:
TABLE XI

Place of Birth of Resident of Upper Canada as a Percent of Population

<table>
<thead>
<tr>
<th>Year</th>
<th>Population of Upper Canada</th>
<th>Ireland</th>
<th>%</th>
<th>England</th>
<th>%</th>
<th>Scotland</th>
<th>%</th>
<th>Total %</th>
</tr>
</thead>
<tbody>
<tr>
<td>1842</td>
<td>487,053</td>
<td>87,728</td>
<td>18</td>
<td>43,009</td>
<td>09</td>
<td>42,033</td>
<td>09</td>
<td>36</td>
</tr>
<tr>
<td>1848</td>
<td>725,879</td>
<td>140,673</td>
<td>19</td>
<td>64,560</td>
<td>09</td>
<td>57,604</td>
<td>08</td>
<td>34</td>
</tr>
<tr>
<td>1851</td>
<td>952,005</td>
<td>176,267</td>
<td>19</td>
<td>82,699</td>
<td>09</td>
<td>75,811</td>
<td>08</td>
<td>34</td>
</tr>
<tr>
<td>1861</td>
<td>1,396,091</td>
<td>191,231</td>
<td>14</td>
<td>114,290</td>
<td>08</td>
<td>98,792</td>
<td>07</td>
<td>29</td>
</tr>
</tbody>
</table>

(Census of the Canadas, 1842-1861)

Here it is important to remember that a large portion of the migrants arriving in British North America went to the United States either immediately upon their arrival or after working for a short period. Thus there would, at any given time, be a greater proportion of immigrants in the province not detected by the census. Comparing the Irish immigration figures from 1842 to 1847 (121,230) with the increase of the Irish population in Upper Canada (52,954), we can infer that less than fifty percent of the immigrants stayed in the province.

If we look at the mass migration from the point of view of the local bourgeoisie in Upper Canada during the first half of the nineteenth century, we see that their interests lay in having the immigrants contribute to the enrichment of the bourgeoisie. In other words, they were welcome if they were easy to exploit and readily assimilated (Macdonald, 1966: 6). This position is made clear in a letter from Upper Canada's
immigration agent, Dr. Thomas Rolph, to the Governor-General of the
Canadas, Lord Sydenham, and forwarded to the previous Secretary of State
for Great Britain, Lord John Russell on the 28th of February 1841
(British Parliamentary Papers, 1843):

The immigration this year, ..., will be
large, valuable and respectable, including
many capitalists ... But whilst the
indigent masses are so anxious to leave for
Canada, it will be gratifying to the
colonists to find that numbers possessing
ample means are now prepared to avail them-
selves of the advantages which the province
holds out, equally in the judicious invest-
ment of capital as labour; and there is
every reason to anticipate a valuable
accession this year to the wealth of the
country.

(emphasis mine)

The unification of the interests of the Family Compact with the
major British investors - Baring Bros. and Glyn Mills and Co. - guided
the specific form of development in Upper Canada. The lack of fixed
capital for industrial development and the concentration of canal, road
and railroad-building kept the migratory population mobile and thus
available for seasonal employment. The lack of yearly employment coupled
with the lack of land for settlement or any other opportunity for the
immigrants to settle permanently in the province added to the arguments
for state provisions in poor relief.

The government of Upper Canada finally inquired into the
organization of public welfare institutions in the United States and
Great Britain. In 1837 the government proposed legislation that would
provide for the erection of "working-houses" throughout the province
(William IV, 1837, c. 24). Because of the rebellion of 1837 (Keilty (ed.), 1974), the legislation was passed but never put into effect. It was thought that the organization of these working-houses would put too much power into the hands of the already dominant Compact, instead, however, a private institution was erected in Toronto - House of Industry - to provide for the "indigent poor of the city" who had previously been provided for in the local gaols (see Broadside, July 11, 1837).

III Summary

The focus of this chapter has been to illustrate the impact of the British migrations on the social structure of Upper Canada. Hand in hand with the control of the province both politically and economically, the influx of vast numbers of paupers from the British Isles had determined the development of public welfare in the province. The great numbers of "surplus population" gathering in the major centres of Upper Canada led to the rise of social problems and in response there came the typically English ways of dealing with the problem, the organization of public welfare institutions following British lines.

What I have shown in this chapter is that Upper Canada was controlled by the British State and that responses to various problems followed the example of the mother country. The reason for the surge in the development of public welfare is the result of the intersection of the great migrations at a particular point in the history of the province, a time when there were no opportunities for the migrants in Upper Canada.
Upper Canada responded to the great migrations in a way that is only understandable if viewed as part of a colonial empire. The actual development of these institutions and the separation of those based on their ability to work will be the subject of the next chapter on asylum formation.
CHAPTER IV FOOTNOTES

1 Surplus population has been described by the early political economists as "a redundant labouring population" (see Smith, 1902; Malthus, 1970; Ricardo, 1971), however, Engels (1971) defined this "surplus" in relation to capitalist production. This "reserve army of labourers", was for Engels an integral part of capitalist production.

2 For a precise list of manufactures in the pre-Confederation period see: Timperlake, J., Illustrated Toronto Past and Present, Toronto, Peter A. Gross, 1877, pp. 248-365.

3 The ability of the Bank of Upper Canada to act independently of Glyn Mills and Co. and the Baring Bros., was restricted by the Bank's indebtedness to them (Stevens, 1960: Vol. I, 71-71) and the inability of the Bank to secure loans without the assistance of these merchant capitalists.

4 The policy of a head tax in keeping down the numbers of pauper immigrants was initiated earlier in the Maritimes.

5 Colonial Office, Great Britain,

"A Statement of the Satisfactory Results which have attended Emigration to Upper Canada from the establishment of the Canada Company", London, Smity, Elder and Co., 1841, pp. 53-60. It is interesting that the Canada Company used this same pamphlet for at least five successive years with the same data for wages, food stuffs and manufactured goods, along with the same letters, questions and description of life in Upper Canada.

6 With reference to the policy of British government to back British capitalists it is interesting to see the position the Baring's played in the development of the empire, especially Canada.


"From 1841 until 1873 the London accounts of Canada were held jointly by Baring Brothers and Glyn Mills. There is no gold at the heart of every magic, black or white.

Let those who suspect the malign influence of the international financier behind all public activities search out the part played by the Barings in the History of the British Common-
Footnotes continued

wealth under Queen Victoria. Can a more beneficient family history be found than that of the descendents of Francis Baring whom Pitt made a baronet in 1773? A Baring negotiated the boundary of Canada and the United States in 1842; a Baring sat on the committee of the Canterbury Association; a Baring was Chancellor of the Exchequer in the administration that finally gave responsible government to the colonies; a Baring of the next generation was Viceroy of India; another reconstituted the government and prosperity of Egypt.

"Lord Sydenham, the Governor, who united the two Canadas, came of a banking family; his sister married William Baring, M.P."

These numbers refer to those leaving from Irish ports. There is not sufficient data on the number of Irish leaving from Scottish and English ports (see Cowan, 1961: 289).
CITY OF TORONTO

HOUSE OF INDUSTRY,

JULY 11, 1837.

ABSTRACT of Receipts and Expenditure, with the Balance in the Treasurer's hands, from the commencement of this Charity to the present time: together with a like Abstract of the number of Persons relieved, and of those now remaining on the Books, either as Out-Door Pensioners partially relieved, or as Inmates of the House wholly dependent on the Institution for their subsistence—it may almost be said existence.

FUNDS.

Amount of Cash received by Treasurer from all sources, viz.:—Voluntary Subscriptions; Profit on Work done by the Poor receiving support; with £250 Parliamentary grant... £610 3 9

Expended as per Detailed Accounts, examined and approved... £576 10 2½

By balance in Treasurer's hands... 42 13 0½

£619 8 9

AMOUNT

RELIANCE.

NUMBER OF PERSONS RELIEVED... 857

Consisting of—Widows... 87
Children... 638
Deserted Women... 37
Persons enfeebled by sickness and want of work... 95

Total... 857

Of which—Discharged... 501
Remaining on Books... 356

— 857

REMAINING ON BOOKS... 356

Which consist of—Widows... 8
Deserted Women... 5
Infirm Men... 7
Children... 26

Inmates... 46
Out-Pensioners... 310
Total now receiving relief... 855

PRESENT RESOURCES.

Balance in Treasurer's hands as above... £42 13 6½
Value of Knitting and other Work done by Inmates, and yet unsold—about... 11 10 10
Value of Stone broken by the Poor, and due by the City Chamberlain, to whom sold for Public work... £2 6 2
£70 10 6½

DUE FOR BREAD... £16 8 1½
DUE FOR MILK... 0 4 2
Balance of the Superintendent's Wages... 12 10 0
£29 2 3½
Available residue of the existing Funds... 47 8 3½
£76 10 6½
CHAPTER V
The Formation of the Asylum in Upper Canada: 1841-1853

I Introduction

The object of this chapter is to analyze the period of transition from the pre-asylum incarceration of the insane - prior to 1841 - to the formation of the lunatic asylum under the control of the medical profession (1853), i.e. the origin of the mental hospital. In the pre-asylum period, the mad were incarcerated with the poor, criminals, and others who could not provide for their own subsistence (see Jones, 1924). During the period of transition - 1841-1853 - the mad were separated from the institutions of general confinement, gaols, houses of correction and houses of industry, and put in an asylum. Although separate confinement of the mad in the specialized institutions called asylums did not happen at once, 1841-1853 marked the initial point of separation. The completion of this process took much longer. I am, then, only concerned with this initial point of separation and how one faction of the medical profession struggled for control over the mad during this period.

This chapter will focus on the conjecture of two distinct socio-historical processes which, in their combination, form the basis of the transition from confining the mad in public welfare institutions to their confinement in a lunatic asylum. First, there is the history of the confinement of the mad before the birth of the asylum, and second, there is the struggle within medical practice to monopolize the treatment.
and cure of insanity (see Scull, 1979: 129-130).

In the previous two chapters I discussed the background leading to asylum development in Upper Canada. This backdrop gives us the necessary information about the historical processes influencing asylum formation, usually referred to as a period marked by the "better management" of the insane (Buttolph, 1847: 364; Falret, 1854: 405-412). In this history of separate confinement this is only the initial step, and it is this step which is the focus of this chapter.

A) Background

Madness was relatively new phenomenon in the colony in the early nineteenth century - new in that it had no local history of treatment. That is, there were no social or legal principles to guide the treatment of madness except those which the settlers brought with them from Great Britain. This was also true of the treatment of the destitute. Therefore, asylums as specialized institutions for the treatment of the mad in Upper Canada grew from the same institutional base as those in Great Britain. This base was public welfare.

In Upper Canada prior to 1830, the insane were usually hidden from public view in the attics and basements of families trying to protect themselves from the shame of having lunatic kinsmen. Pauper lunatics, on the other hand, were either left to roam and beg, if they were passive, or chained if they were violent. Most of the pauper lunatics ended up in gaols of the province because of their inability to
provide for themselves or draw on the favours of their kin. By 1830 it was reported to the legislature of Upper Canada that many pauper lunatics were being kept in the gaols of the province without any official public assistance for their upkeep. Legislation of that year provided assistance for their stay in the gaols of the Home District (Upper Canada Statutes, 1830, Cap. 20). This legislation was later extended to include the rest of the province. However, this legislation changed nothing about the manner in which the mad were treated and confined. The legislation simply recognized that there were pauper lunatics and that keepers of the gaols should receive some financial support for the maintenance of the insane. However, the entire question of financing the gaols was problematic since legislation limited the amount that could be received from taxation (Splane, 1965: 119-121). The keepers of the gaols were salaried and were restricted in the monies they might obtain by making the poor confined there work for their upkeep because of the heterogeneous prison population - paupers, criminals, debtors and the insane (Splane, 1965: 68-69). Even though the above legislation had little effect on the confinement of the mad, it did bring the question of their treatment before the eyes of the public and more specifically before the reformers in the Legislative Assembly of Upper Canada.

In 1836 the reformer, Dr. Duncombe, reported to the legislature that the province of Upper Canada was the last place in North America to confine lunatics in gaols. He argued that the "humane" thing to do was
to create a lunatic asylum to house those unfortunate persons suffering from "diseases of the mind". In 1839, provision was made for the erection of a lunatic asylum on Queen Street in Toronto. The asylum was to be administered by a Board of Directors (medical and non-medical) and to have a physician as the superintendent (2 Victoria, Cap. 11). While the permanent asylum was being built, the lunatics in the Home District were transferred to a temporary asylum.

Before the opening of the temporary asylum in an old gaol in 1841, two arguments were made about the treatment of insanity in Upper Canada. The first was made by those in control of the public welfare institutions, they argued that the insane had no place in their institutions because they disrupted the teaching of discipline and the "habits of industry" in their establishments. The second was made by a small group of physicians, mainly reformers, who stated that the insane were poor through no fault of their own and should be under the care of the medical profession who would cure them, making them useful members of the society. Through the efforts of both groups the above legislation (2 Victoria, 1939, Cap. 11) was enacted.

Once the asylum was established as a place of treating the insane it was the view of all concerned that the treatment of the mad would change when they were no longer confined with the poor and the criminals. However, when the insane were separated from the rational poor and criminals, there was still no significant change in the methods of their confinement (Levall, n.d.: Box 2; Section 3: 31). Separate
confined did not ensure different treatment. To understand this lack of change in the treatment of the mad after confinement we must look at two things: the early conceptions of insanity, and why it was argued that the medical profession should control separate confinement of the mad.

II. Early Conceptions of Insanity

Nineteenth century etiology of insanity tended to be social rather than medical. Even by the end of the century it was still argued that insanity was "so-palpable a thing that no one could fail to recognize it" (Maudsley, 1897: 74). This simply means that an insane person would have to behave in a manner that was socially defined as mad. Therefore, we can assume that those confined as insane were people who acted according to the then socially specific definitions of what insanity was. In practice this meant that the separation of a person as insane from other institutions of confinement was based on their lack of rational social behaviour as a member of that institution. This usually meant that those refusing to follow the regimentation of the institution, discipline and labour, were not rational and therefore mad. This is not to say that lunatics were incapable of work or discipline, it says only that the institutional form of work in the public welfare institutions was beyond the ability of the lunatics.

Maudsley (1897: 78) gives a good illustration of the definitive connection between rational behaviour and sanity:
... when a person is excited, and raves more or less incoherently, he has acute mania; when, after subsiding into a more quiet state, he continues to have delusions and to be incoherent, he has chronic mania; when he exhibits insane delusions on one subject or in regard to certain trains of thought, and talks sensibly in other respects, he is gloomy, wretched, and fancies himself ruined or damned, he has melancholia; and when his memory is impaired, his feelings quenched, his intelligence enfeebled or extinct, he is said to be suffering from dementia.

Of the 288 persons confined in the Toronto Lunatic Asylum in 1851-1852 - its first year of operation - 46 had dementia, 12 were idiots, 2 suffered from melancholia, 1 had monomania and the rest suffered from mania (Census of the Canadas, 1851-1852: 580-582).

These were the current definitions of insanity during the period of asylum formation in Upper Canada (see Anon, 1844; Anon, 1847: 358). The connection between sanity and rational behaviour placed the control over the definitions of insanity in the hands of the legal profession and the state, not the medical profession. A major consequence of legal control was that the inmates of the newly formed asylum consisted of those defined as insane not by members of the medical profession but by the employees of the state running the general public welfare institutions. The report of the medical superintendent of the Toronto Lunatic Asylum made this observation almost a decade after the incarceration of the first inmates:

In the present hard times, no doubt the 'authorities' regard every person, who had nothing to eat, as dangerous to be at large; and, as the Asylum is known to be a good
boardinghouse, they conclude that it cannot be turned to a better purpose than that of relieving themselves from the duty of supporting the poor. (Report of the Medical Superintendent of the Provincial Lunatic Asylum, Toronto, 1860)

The asylum became a "dumping ground" for those not responsive to the rationale of the institutions of public welfare.

It was not an uncommon practice for hard-pressed municipalities to commit destitute persons to the county gaol and then arrange for their transfer to the Provincial Asylum as "lunatics and dangerous to be at large". (Price, 1950: 55)

Like its sister institutions the asylum used one particular form of treatment - labour. Labour became the central form of relief in all institutions of confinement in Upper Canada (see 36 George, Cap. 6, 1799; 7 William IV, Cap. 40, 1837; 14 and 15 Victoria, Cap. 35, 1851). Work was used not only as a form of discipline in the public welfare institutions but also as a method of treatment in asylums (Scull, 1979: 194). Labour, by inmates of the public welfare institutions, was used to discipline the poor in the habits of industry and to reduce the costs of running the institution which would in turn reduce property taxes, "disciplinary measures were, in fact 'medical treatment'" (Scull, 1979: 202). "Another nineteenth-century [workhouse] practice, the employment of mental defectives as cheap labour, was still prevalent in the 1940's ..." (Longmate, 1974: 281).

However, labour in the asylum and labour in the public welfare institutions were not the same. Labour in the latter had to conform to the dictates of the labour market in terms of rate of work and
discipline. Labour in the asylum, since it could not conform to the
dictates of the market, was not profitable. Labour, as a form of treat-
ment in the asylum, was supposed to serve two purposes; it benefited the
inmates mentally and physically and, it also furnished the institution
with the necessities it would otherwise have to purchase (Levall, n.d.,
Box 2, Section 3: 31; see also appendix 3).

There are two important aspects of treatment in the use of
labour in the lunatic asylum. The first is the similarity of treatment
in public welfare institutions and the asylums, and the second, is the
strong connection between the asylum and the social class of individuals
incarcerated there.3

In an analysis of the question of asylum formation there is a
definite association between poverty and insanity (Robertson, 1867). The
poor were thought to be more prone to insanity because of their lack of
ability to adopt the emotions thought to be specific to the wealthier
classes, i.e., to love or acquire (Anon, 1844-45: 108). It was also
thought that insanity or poverty were simply an epiphenomenon of each
other (Davey, 1867: 315-317). Also, since labour was only associated
with the treatment and confinement of the lower classes it reflected the
separation of the classes in terms of their position in the economy.

The patients are employed to a consider-
able extent, namely, about 60% of the
free class, from whom work alone can be obtained.

From the initial point in the treatment of insanity as a special malady
there was no question that the asylum was a class-specific institution.

... the Architect and the Commission charged with the erection of the Provincial Asylum, never contemplated providing but for pauper patients; ... Strictly speaking therefore, there is not proper accommodation for paying patients of the better class; and although the directors require payment from some of the present inmates, (19 out of a total 225) yet, this class is obliged to commingle ... with the pauper class ...

(Journal of the Legislative Assembly of the Province of Canada, Session 1850: 161)

The first patients admitted to the new Toronto asylum were thought to be chronic paupers. Dr. Scott, first superintendent of the temporary asylum, reported that many of the first 211 patients in the asylum were incurable, the cast-off of the gaols.

The poor thus had little alternative but to make use of the asylum as a way of ridding themselves of what, in the circumstances of nineteenth-century working class existence, was undoubtedly an intolerable burden, the caring for their sick, aged, or otherwise incapacitated relatives.

(Scully, 1979: 220)

The problems of overcrowding, endemic to all public welfare institutions during this period, sealed the fate of the asylum's future as a specialized custodial institution. Even if the medical profession could provide special treatment for the mad there is no escaping the fact that the asylum was a specialized gaol for those whom the gaol keepers would not bother with.

The remainder of this chapter will further detail the two periods important to an analysis of asylum formation. The initial part
will concentrate on the confinement of the insane in the pre-asylum period; i.e., the insane as part of the public welfare system and the reasons for their elimination from it. The latter part will focus on the formation of the asylum, i.e., the organization and control of the mad eliminated from public welfare institutions and controlled by the medical profession.

There was a staunch adherence to the notion that institutionalization remained the only acceptable solution to the problems of insanity. (Scull, 1979: 213)

III Pre-Asylum Confinement

The adoption of British Civil Law in 1792 left out an important part of British law in Upper Canada: the Poor Law. From the Constitutional Act (1791) on, there was no provision made for those in the colony who could not provide for themselves. However, the lack of statutes had little effect on the later adoption of British forms of colonial institutional development. Splane (1965: 68) suggests two possible explanations for the omission of the Poor Laws in Upper Canada: 1) there was no pressing problem of poverty on the frontier in the eighteenth century; or 2) the adoption of the Poor Law would demand a local system of government and property taxation, a condition the landholders of the province were trying to avoid. The latter explanation seems to be more realistic, since the problems of poverty came rapidly to the colony. As with the Poor Law in England, there were problems always associated with taxing the local landholders to pay for the care of the poor.
By 1851 there was a set of institutions in the colony which operated along similar lines to those of the Poor Law institutions; however, they had alternate forms of funding. The purpose of these institutions, as in Britain, was the disciplining of the able-bodied poor and the care of the deserving poor.

Initial institutionalization of the poor in Upper Canada occurred in 1792 when provision was made to assist those who could not provide for themselves in a local institution - the gaol (Upper Canada Statutes, c. 8). This was not an uncommon practice, since poverty was viewed as a crime:

The use of gaols to house those who were in poverty was not, however foreign to the prevailing and traditional ideas about the nature of poverty. Poverty was normally associated in the public mind with vagrancy and the willful refusal to work and save. The poor, or at any rate the able-bodied poor, were thought to be in need of correction and discipline which could best be imposed in special houses of correction, but until such institutions could be established there was held to be a case for using the gaols as a substitute.

(Splane, 1965: 68-69) emphasis mine

By 1810 the problem of poverty was growing, due to the famine migrations from the British Isles which continued to 1850 (see Carrothers, 1971). The colonial government's response to immigration was to initiate the organization of houses of correction (Upper Canada Statutes, 1810, Cap. 5) which would maintain, care for and discipline the poor. These early public welfare institutions are similar to the
eighteenth century English workhouse which provided for every type of pauper and criminal (deSchweinitz, 1961: 58-68; see also Longmate, 1974).

The rapid growth of the pauper population confined in the institutions of public welfare created a problem in Upper Canada before 1830. In order to provide for the growing numbers of paupers and the rising cost of maintaining them, the government of Upper Canada followed the British example; making the poor provide for themselves. To do this, the institutions had to separate the "deserving" poor from the "able-bodied" poor, i.e., those who could labour within specific conditions and thus provide for themselves were separated from those who could not conform to these dictates (Strong, 1930: 18-27).

The fiscal and social problem created by the poor in Upper Canada led to a primary change in the function and form of social welfare institutions, and this change reflected the British model. The change was from custody and confinement to correction and discipline (see Foucault, 1977). Those of the poor who could not be corrected or disciplined were separated from those who could. Thus, we see reason for the comments made by the first superintendents of the lunatic asylums (see pages 157 and 158). Specialized institutions were then developed for the punishment of criminals, for disciplining the unemployed, for the confinement of the mad, and for the care of the sick.
A) Institutional Confinement

The first institutional forms of confining the insane in Upper Canada were those institutions used to confine the poor. These institutions were the gaols, houses of correction, and the house of industry (Spline, 1965: 69 and 203). The first two were public institutions and the third was private. The majority of these institutions were in larger towns, especially Toronto. The reasons for this were that: 1) Toronto was a landing point for immigrants travelling to south and central Upper Canada, 2) it was the stopping point for those travelling to the United States, and 3) it was the focal point of organization for seasonal employment on the roads and canals.

The effect of these institutions on Upper Canadian Society was to provide relief for the poor and protection against potential criminals (beggars and vagabonds). These institutions also provided for the maintenance of the working class as a reserve army who would otherwise have left the province because of the lack of both employment and land. Since there was no large, fully-employed working class, the role of the public-welfare institution was one of supporting the working class between periods of unemployment.

The confinement of the insane in these institutions was not of benefit to either the insane or the institutions. The conditions provided by these institutions for the care and maintenance of the mad were, to be sure, less than adequate. In the first report of the Commissioners of the Toronto Lunatic Asylum the previous conditions of
confinement were noted:

The patients (heretofore confined as prisoners) were taken from their cells in which they were closely confined and where they had long, from the dire necessity of the case, been permitted to remain in filth and nakedness and impure air, all confirming their maladies.

(Report of the Commissioners of the Toronto Lunatic Asylum, 1851)

We can see that the confinement of the mad in these institutions did not lead to any form of treatment.

On the side of the institutions themselves, there was no argument put forward that they should have to house the lunatics. Rather, they attempted to push for the separate confinement of the mad in institutions that could treat them better and separate them from the "normal" population of incarcerates who were being disciplined for their entry or return to the labour force (Spaolen, 1965: 128).

Keepers of the gaols sought the removal of the insane from their institution to a more "suitable place" (Journals of the House of Assembly, 1836, Vol. 3, Appendix 117; Colonial Advocate, Toronto, 11 September 1834). In a presentation to the Grand Jury at Spring Assizes, Niagara, on the state of the gaol, the jury recommended to the Government that at the earliest possible date additional accommodation be procured at the provincial lunatic asylum "to accommodate all such persons who are afflicted by insanity ... they should not be incarcerated with common felons" (Fred Jagrett Papers, 4 April 1857). This argument was also made
by the Trustees of the Toronto House of Industry. In 1852 and 1854 the trustees petitioned for the erection of a special lunatic asylum to deal with "juvenile offenders" confined in the House (Reports of the House of Industry, Toronto, 1852 and 1854).

From these reports we can see that there was a concerted effort on the part of non-medical administrators of public welfare institutions and state officials to rid the institutions of correction and discipline of those who could not conform to the "habits of industry".

The commissioners affirmed the importance of industrial labour in the penitentiary both for the discipline and training of the prisoners and for the reduction of the costs of the institution. They saw "no reason why the labour of able-bodied men should not produce sufficient to pay for their sustenance"...

(Spier, 1965: 141)

Specialized separate confinement of the deserving poor only came after the failure of general institutions of public welfare to provide for their support. S.D. Clark (1942: 210) describes the effects of the immigrant/population problem on institutional development:

The accumulation of distressed persons in the small towns, the result of the failure on the land or the lack of capital to begin farming, gave rise to a growing need for such agencies as houses of refuge, hospitals and mental homes. The establishment of a house of industry in Toronto was a recognition of the new demands pressing upon the social organization. For the most part, where indiscriminate charity failed to provide for the needs of the unfortunate classes, the gaol served as a means of removing them from the local communities.
1) Gaol and House of Correction

One of the first pieces of legislation proposed in the colony was for the erection of temporary restraining facilities for criminals and debtors. This legislation (32 George III, Cap. 8, 1792) was for the erection of county gaols. The stated function of the gaol was primarily to deal with confinement and not punishment or correction (Kirkpatrick, 1964: 405). However, the intent of the legislation was subverted by the structure of the local communities. The role of the gaol became that of what was called in Britain, a "general mixed workhouse" (Strong, 1930: 68). As in the British case the gaol in Upper Canada became a general poor house confining all those who could not be supported by their own labour or by charity in the local community. This happened in Upper Canada because of the lack of either historical or legal processes of dealing with poverty through the elimination of the Poor Laws in 1792. In fact the function of the gaol became that of asylum, prison, workhouse, hospital and poorhouse, a "congregate institution" (Splane, 1965: 68-69). This multi-dimensional role continued from the erection of the first gaol in the Home district in 1792 (32 George III, Cap. 8) to the middle of the nineteenth century when it was returned to its jucicial role.

Although there is a close replication of the British gaol in Upper Canada, there is an important difference. This difference is that the English gaol developed as a private entrepreneurial venture, while its Upper Canadian counterpart was, from its inception, part of the
state. In England gaols were organized locally, by parish or county, and would be run as a private enterprise. The function of the gaol in England was to collect debts through the farming-out of inmates to local employers; it was a debtors' prison. This practice continued until 1823 when the British government annexed these institutions and regulated confinement and correction (Kirkpatrick, 1964: 407). On the other hand, the gaol in Upper Canada was controlled through the central government and the costs of confinement were borne by the colony (33 George III, Cap. 3, 1792).

Funds for the support of the gaols were hard to find since there was no method of local taxation like that of the Poor Rate in England (Splane, 1965: 65-68) and few opportunities for farming-out because of the lack of industry (Edminson, 1965: 279). This lack of taxation and lack of employment coupled with the demands on the gaol as an institution of public welfare, severely restricted the functioning of the colonial gaol. This serves as the basis of why the gaolers wanted to rid themselves of the non-able-bodied poor.

Apart from apprenticing orphan children (39 George III, Cap. 3, 1799), males to 21 and females to 18, the gaol acted strictly as a place of general confinement for those who could not provide for themselves. Until 1840 the major institution providing for the confinement of the insane was the gaol (Jones, 1924: 78-82; Leval, Box 2, section III).

As in Great Britain the gaol became a burden on the finances
of local government, "... the securing of sufficient money to construct... and operate the gaols and the court houses was to prove, in fact, to be...

"the most serious governmental problem the magistrates had to face" (Splane, 1965: 120). The initiation of the process of making the poor provide for themselves was couched in the arguments against having to be taxed to provide for the unfortunate (Splane, 1965: 70). Methods used to ease the financial situation were structured by the development of wage-labour and the definitions of character of a useful, productive person in the society. Persons in the gaols not only had to be disciplined but disciplined in specific ways, in the "habits of industry", making them useful within a capitalist society. This altered the basic function of the gaol from confinement to correction and discipline.

In England the policy that the poor should provide for themselves was incorporated in the development of the workhouse, the first being in Bristol (1696). By 1722, it was enacted that every parish or county should make provisions for the erection of a workhouse (deSchweinitz, 1961: 58-78). The pressures that were in force in Britain in the eighteenth century came into play in Upper Canada. Thus, in 1810 a law was passed (50 George III, Cap. 5) to declare the gaols of the province to be houses of correction. The role of these institutions was to provide for "all and every idle and disorderly person, and rogues and vagabonds, and incorrigible rogues, or any other person or persons who may by law be subject to be committed to a house of correction".
The purpose of the gaol between 1792 and 1810 was in fact the same as a house of correction. Legislation in 1810 only formalized a practice already institutionalized, but did change the focus of correction to another institution. Instead of confinement being the object of the house of correction, discipline and "correction" were its specific objects. The house of correction in Upper Canada became the first institutionalized embodiment of the principles of making the poor provide for themselves and not become a burden on the state. The role of the house of correction in Upper Canada in the 1830's was the same as that of the British workhouse from 1722 to 1834, to develop a new system of treatment for the disciplining of the poor.

The gaol and the house of correction were the initial institutions for the confinement of the mad in Upper Canada. The important feature of this is the association of madness with crime and poverty (Davey, 1867). This affected both the definitions of rational behaviour and the class bias of the asylum. Other forms of pre-asylum confinement in Upper Canada were the Toronto House of Industry, privately run for the disciplining of the poor, and the penitentiary.

ii) The Penitentiary

The time has been when the Prison was regarded as a mere place of punishment, ..., and the laws of terror the only rule of discipline ... Healthful labour has replaced vicious idleness ...

(Splane, 1965: 140)
One of the more specialized forms of confining lunatics in the period of transition to asylum formation was the penitentiary. As a specialized institution for punishing and disciplining criminals, the penitentiary, like the asylum, was part of a larger socio-historical process; emphasizing the rehabilitative aspects of punishment of fit the specific demands of production at that time.

In terms of criminal behaviour and treatment, there was a transformation from custody to reform in the 1830's. Before the advent of the penitentiary, criminals were subjected to four types of institutionalized punishment: 1) fines, 2) banishment, 3) corporal punishment and 4) custody. After 1835, the birth of the penitentiary, punishment was transformed into a system of specialized institutions which would re-process and reform the criminal and place him back into the society. Again, as happened to the poor, the criminals were to be disciplined in the "habits of industry" and made to provide for themselves (Spjut, 1965: 130 and 141). The principles of protecting private property from taxation and making the poor and criminal "useful" to society became the rationale of confinement and correction (Spjut, 1965: 141).

In 1832, (Statutes of Upper Canada, Cap. 30) legislation was passed for the erection of a penitentiary in Kingston. Money (£12,500) was available in 1833 (Statutes of Upper Canada, Cap. 44) and the penitentiary was completed and receiving inmates in 1835.

The treatment of criminal lunatics in the colony before 1835
was the same as the treatment of the mad not charged with a criminal
offence. Treatment was the same as for those who were destitute or
unemployed, the gaol or the house of correction. With the building of
the penitentiary in 1835 many of the criminal lunatics were transferred
to Kingston, just as, with the building of the Toronto Lunatic Asylum
(1851), many lunatics were transferred to Toronto. However, we cannot
assume that all the lunatics housed in the gaols and houses of correction
were transferred to these specialized institutions since there were
lunatics in the congregate institutions until the end of the nineteenth
century.

By legislation, all criminal lunatics were to be transferred to
the penitentiary. Since the penitentiary had few facilities for the con-
finement of the criminally insane, the mad were transferred to the
provincial asylum in Toronto in 1851 until a separate facility could be
built in Kingston. In 1859 (Statutes of Upper Canada, Cap. 108) a
special asylum for the criminally insane was built and lunatics from the
provincial asylum, incarcerated for criminal activity, were sent there.
This was Rockwood Asylum.

Transference between asylums was a matter of the 'institutions'
capacity to deal with special types of insanity. At first the conditions
in the penitentiary were inappropriate for the confinement of the mad
since it led to the inability of the keepers to correct and discipline
the criminal (Journal of the House of Assembly, 1849: Appendix BBBBB).
After the transfer of the criminally insane to the Toronto Asylum, it was
shown by the superintendents that the conditions for the confinement of the criminally insane in the provincial asylum were inadequate (Journal of the House of Assembly, 1854-1855: Appendix H; 1856: Appendix 2). Therefore, there was a concerted effort by the keepers of the criminal and the keepers of the mad to have a separate institution for the criminally insane built in Kingston.

The care and treatment of criminal lunatics in Upper Canada was affected by the same process which affected the separate confinement of all lunatics: their inability to conform to the discipline of wage-labour as a means of corrective behaviour. This separation based on one's ability to act rationally towards labour is even more pronounced if we look at the Toronto House of Industry.

iii) The Toronto House of Industry

The Toronto House of Industry was the first institution in Upper Canada to have as its specific goal the "elimination of street begging and poverty". The numbers relieved in the House in no way reflected the impact of the migrations on the social structure of Toronto (see Graph 2). By giving relief to the "industries" poor, the House was able to keep a reserve labouring population available for work, especially in the building of infrastructure, when little full time labour was available:
Graph 2

Paupers Relieved in the Toronto House of Industry: 1842-
(Annual Reports of the Toronto House of Industry)
... a law has been passed enabling magistrates to build and support workhouses for the refuge of the paupers invited by Sir Francis (Bond Head) from the parishes of Great Britain, thus unjustly and wickedly laying the foundation of a system which must result in taxation, pestilence and famine. (Guillet, 1972: 32ff)

In 1837, a reform law was passed to encourage the building of Houses of Industry (workhouses) throughout the province (7 William IV, Cap. 24). This statute was never put into practice, but it did affect the development of public relief institutions throughout the nineteenth century. Instead of the widespread development of public workhouses, as is the case in Great Britain, private institutions were established in their place. These private workhouses had the same purpose as stipulated in the legislation - "to provide employment for the indigent and idle" - but were controlled privately, although partially government funded (Journal of the House of Assembly, 1839-1840: Appendix, Vol. 1, 27-29).

It appears that the only explanation for the change from public to private houses of industry was the rebellion of 1837 and the subsequent change in government policy. The statute was originally passed by a conservative government and not enforced by the following reform government. The conservative supporters of the bill, as it went through the legislature, became the first trustees of the privately-run Toronto House of Industry on its establishment in 1837. It may seem to be a matter of historical accident that the legislation did not formally take effect; however, there was a pressing need for this type of institution and they were, in fact established throughout the province under the principles stated in the act (Splane, 1865: 86).
Because of the conjuncture of these events, the Toronto House of Industry was privately controlled and thus, subject to the same pressure as a business, to maintain certain levels of self support with limited assistance from the state. The poor relieved in the House, then, had to conform to the regimentation of wage-labour in order to enable the House to fulfill its stated role.

The development of a private house of industry is related to the control of the institutions of public welfare in Upper Canada by the conservative elite of the colony, i.e. the Family Compact and its associates (see Appendix I). Even though the influence of the Compact was diminishing after the rebellion of 1837, they still had considerable power. They formed a tightly-knit group of interlocking directorships, linking the social welfare institutions with the more conservative establishments in the colony (see Appendix II).

On 4 May 1837 a petition was submitted to the Toronto City Council (Toronto City Council Papers) by a committee of concerned citizens "... to provide for the relief of the poor and destitute, recommending that steps be taken immediately to secure the establishment of a Toronto House of Industry". The problem of poverty must have created some amount of inconvenience to the stability of the city since, just two months prior to the petition of 4 March 1837, an act had been passed to issue "relief to the poor and distressed in the city of Toronto" (4 William IV, Cap. 104), and a month later another act was passed to issue more relief. With the petition for a House of Industry,
all relief going to the city of Toronto would be issued to the institution, and subsequently controlled by the Directors of the house.

Even though the reform government of 1837 refused to carry out the building of public workhouses, on the recommendation of a select committee, it agreed that there was a need to suppress pauperism and began to support the House through taxation. This was in fact what they initially opposed. Now that the House was a private philanthropy, it qualified for public support:

The House of Industry was in the first instance established by voluntary contribution, but the great extent of distress and the increasing number of applications exhausted the funds and rendered necessary applications to the legislature which (sic) was favourably received, and a grant has been made from year to year, by which added to the resources derived from private charity, the institution has been maintained to the present period.

... The receptions from private contributions have amounted to a large sum, but are wholly inadequate to the claims of the poor and distressed, and unless Your Honourable House continues the aid heretofore given from three to four hundred persons will be thrown destitute upon the public. (Reports of Select Committee in favour of House Industry, Appendix to the Journal of the Legislative Assembly, 1839-1840, Vol. 1, pt. 2., pp. 27-29. See also: Grants to the House of Industry on the recommendation of the Select Committee: 1) 2 Victoria, Cap. LXIII, 1839 for £200 2) 3 Victoria, Cap. LXVII, 1840 for £350 3) After incorporation in 1851 it received £500 annually)
The House of Industry came to be governed by those already in control of many of the institutions of welfare and commerce in Toronto. The general interests of the elite of the province were used as directives for the administration of all institutions of relief. Paupers or unemployed who were able-bodied and deserving of relief received instruction in the habits of industry. If they refused to work they were punished. In functional terms, the House operated as a gaol for those seeking employment; it used the same methods as the gaol to correct those who had fallen into pauperism.

That all and every person committed to such House, if fit and able, shall be kept diligently employed in labour, during his or her continuance there; and in case the person so committed or continued shall be idle and not perform such reasonable task as shall be assigned, or shall be stubborn, disobedient or disorderly, he, she or they, shall be punished accordingly to the rules and regulations made or to be made for ruling, governing, and punishing persons there committed.

(7 William IV, Cap. 24, 1837)

The form of treatment specific to these institutions of confinement was labour; labour which reflected the regimentation of selling one's labour-power on the market but without receiving a wage. Rehabilitation given in the House was to prepare the incarcerated population for the capitalist labour market, which existed to a limited extent in Upper Canada. (the province acting as a point en route to the United States). Also, the labour of the inmates of the House was used as a source of income for the institution to have some degree of self-sufficiency (see Broadside).
Longmate (1974: 259) gives an example of self-sufficiency and labour in a London workhouse:

The tasks demanded ... [included] stone breaking, oakum picking and wood chopping, which seemed at first sight, more useful, though production tended to outstrip demand.

... Some women applicants for relief were put to sorting bristles for brushes, which other London workhouses required them to attend for several hours a day at needle-rooms or laundry-rooms.

Rehabilitation in the House was given to encourage "honest industry" and "prevent street begging" and "wandering vagrants". Men who needed relief were set to breaking stones and cutting wood. These were used on the building of roads throughout the county of York. Women were given needlework to do which was sold for the upkeep of the House and children were apprenticed (Reports of the House of Industry, Toronto, 1852-1860; British Colonist, Toronto, 4 February 1851). The implications of this type of administration were the same as those of the English workhouse of the nineteenth century - the protection of private property, punishment of the idle and the profitable employment of the incarcerated (Globe and Mail, 26 April 1946). Those who would not conform to the discipline of the House served no purpose and were a drain on its resources. Thus, the mad were not encouraged to enter the House. If they did manage to enter the House, their keepers sought to send them to the gaol, house of correction or the asylum.
IV Asylum Formation

... to the workhouse it would afford relief from the disorder ... of madmen; and for the maniac himself it would provide a sanctuary ...

(Scull, 1979: 91)

The erection of specialized institutions for the separate confinement of the insane appears at first glance to be a breakthrough in the treatment of the mad, a breakthrough in terms of how madness is socially perceived and treated. Even from the initial steps taken to appoint a physician from the European school of "moral treatment" it seemed as though the colony was on the verge of an enlightened era of treating insanity. However, this is not the case. The process of separately confining lunatics in the colony was a move, as in England, France and Germany, to separate the able-bodied poor from those who would not provide for themselves (Mundy, 1867; Labitte, 1853; Earle, 1852). The separation of the mad from the poor was based on one's ability to provide for oneself under specific economic conditions. This separation is witnessed by the fact that the insane, after their removal from the general welfare institutions, did not receive different treatment. In the asylum as well as the institutions of public welfare the norm was confinement and the treatment was labour. The function of the asylum was not to benefit the insane, but to benefit the able-bodied poor (Rothman, 1971: 265-295).

Insanity was a negligible problem in the province during the first decades of the nineteenth century. But by the 1830's, insanity became the focus of a number of social reforms centered on the problem of
the rapidly expanding population of poor migrants from Great Britain. Social problems caused by the lack of employment and available land became the scourge of developing towns in Upper Canada. One of the "social problems" brought from the old world was insanity, with the already established set of causes and treatments. From the emergence of the problem to the admission of the first lunatics to the Provincial Lunatic Asylum at Toronto, there was a space of 21 years. The building of the asylum was not an end to the problem. It was only the beginning of a process of separately confining the insane in an attempt to "cure" their "disease". The separate confinement of the mad proceeded throughout the nineteenth century and was not completed by the erection of an asylum in 1851.

Attention to the problem of lunacy in the colony was initiated by the case of Peter Vanalstine in 1829 who was brought before the Queen's bench to determine his ability to manage his estate. Since there was no precedent or guidelines, this case became a public act (10 George IV, Cap. 19, 1829) and set precedent for the treatment of lunatics with property. The act impaneled twelve jurors to inquire whether Peter Vanalstine was an idiot or a lunatic. The importance of this act was that the precedent for discerning insanity was in the hands of a legal authority, not medical, and that the definitions of insanity were based purely on the ability of the defendant to manage his estate, i.e. his rationality in economic matters. Section IX of the act stated that the law of England applied to cases which inquire into the mental ability to
transact business and support oneself. While the initial significance of this act may not be immediately apparent, this case laid the foundation of a conflict between the medical and legal professions over custody of the insane (see 2 Victoria, Cap. 2, 1839). The emergence of this conflict can also be seen in England at the same point in time. This conflict reflected the fact that medicine had not gained control over the treatment of the insane in Upper Canada until 1853 (16 Victoria, Cap. 18), and it took even longer to gain control of the insane outside the asylum walls. Another important precedent of the act (10 George IV, Cap. 19) is that it brought the class distinctions in treatment of the insane from the mother country to the colony.

A year after the case of Peter Vanalstine, in 1830, a committee headed by the reformer William Lyon MacKenzie was sent by the legislative assembly to investigate into the conditions of the gaols of the province. MacKenzie's committee reported the conditions of the gaols, mentioning the plight of the lunatics confined there. Pauper lunatics who had no provision made for their care and treatment were left abandoned in the gaols. The report stated that:

"... three female lunatics confined, one of them from England, and who was understood to be a mother of a family, who became deranged on her husband leaving her; another from Ireland, a young woman, and the third a native of Canada ... they are lodged, locked up in cribs, on straw, two in one crib, and the other by herself ... A gentleman confined for debt, complained (of) the smell of the dungeon in which these poor lunatics are confined ... and that their incessant howling and groans are annoying in the extreme.

(House of Assembly Journals, 1830: 162)."
The committee argued for a more humane method of confining lunatics. They echoed the statements of the gaol keepers that lunatics should not be confined with the poor and the criminal, but should be separately confined since their malady was not of their own fault, i.e., they could not be held responsible for their action.

This instance was by no means an isolated case. Any gaol in the colony or in England (see Longmate, 1974: Cap. 17) would show the same maltreatment of and ignorance regarding the mad. Since there were no provisions made for pauper lunatics in the colony, the Legislative Assembly passed an act "to authorize the Quarter Sessions of the Home District to provide for the relief of the insane disabled persons in that district" (11 George IV, Cap. 20, 1830). The act was legislated for the home district first because of the extent of the problem (see also, 3 William IV, Cap. 46, 1833). These statutes provided for the maintenance and confinement of destitute lunatics in the local gaol. Judgement in cases of lunacy was in the hands of the Justices at Quarter Sessions.

Even though basic provision for the upkeep of the insane was assured, the following decade saw no less than thirteen separate bills for the better treatment of the insane introduced in the Legislature and defeated (Index, Journals of the House of Assembly, 1846-1852). In 1835 a commission of three physicians headed by Dr. Duncombe, was appointed to look into the establishment of a lunatic asylum in the province. After their travels and research in the United States, they reported to the Legislative Assembly in 1836, hoping to secure the establishment of a
lunatic asylum on the basis of the elements they thought best in the
British and American models. Part of Dr. Duncombe's report stated the
position of the committee on the question of the treatment of lunacy in
the province:

The subject of lunacy has been until late years less perfectly understood than any
other complaint known to our country that is at this moment, successfully treated,
but thank heaven that the disease of an organ of the mind is no longer considered
a crime subjecting the unfortunate victim to imprisonment, punishment and chains;
and that with the exception of this Colony no other portion of America has their
insane confined in gaols; and I am well satisfied that this will not be the
situation of these unfortunate persons longer than until their number and present
cost of support is known, and the Legislature have time to provide a suitable
Asylum for their relief.

(Journals of the House of Assembly, Appendix; Vol. I., No. 30: 3-6)

In 1839 an act was passed by the provincial legislature "to
authorize the creation of an asylum for the reception of insane and
lunatic persons" (2 Victoria, Cap. 11, 1839). Commissioners of the
asylum were to be appointed by the Lieutenant Governor as well as the
twelve-member board of directors. Those received into the asylum would
be residents of the province, examined by three physicians or admitted
directly on certificate by the Board of Directors from the other
institutions in the province. The latter process of admissions was used
in the early stages of asylum development but gave way with the control
over the asylum by the medical profession. The expense of confinement
was on the district of the province in which the lunatic was resident. An initial grant of £5,000 was given for the erection of the institution.

The funding was not immediately forthcoming and instead of building a new asylum, a temporary one was opened in 1841 in an old gaol. The old gaol rented for £125 per year and became the only refuge for lunatics in the province separate from the gaols until the completion of the Provincial Lunatic Asylum in 1851. Prisoners were transferred to a new gaol and the temporary asylum started with seventeen insane previously confined in gaols throughout the home district:

The patients were taken from the cells in which they were closely confined and where they had long, from the dire necessity of the case, been permitted to remain in filth and nakedness and impure air, all confirming their maladies, and placed in the now purified and airy rooms; carefully washed, clothed, and placed under medical care, their food critically adapted to their physical state ... The effect of this new course of life was soon apparent, ... several have completely recovered who, but for this treatment, would probably never have exhibited another gleam of reason.

(Journals of the Legislative Assembly, Vol. I., Appendix II 2 September 1841; Report of the Commissioners of the Toronto Lunatic Asylum)

Dr. Rees, a British physician with a background in "moral treatment", was made the first medical superintendent of the temporary asylum. He, along with a warden and servants, was appointed to the temporary asylum for the "custody and safekeeping" of lunatics confined there. Control of the temporary asylum was vested in the Board of
Directors, chaired by Dr. C. Widmer. With the care to appoint a physician, such as Rees, and the backing of the physicians on the Board of Directors for humane treatment, one would think that, once the insane were separated from the gaols, they would receive better treatment. Together with the mandate to take only those "thought curable" into the temporary asylum, there should have been some progressive development in the care of the mad.

However, the asylum was cast in the role of its public welfare predecessors. The friction between the Board of Directors and the Medical Superintendent over the direction of treatment was embedded in a cost-benefit discussion of the function of the asylum, a discussion based on the function of the asylum as a part of the larger set of public welfare institutions. The initial enlightened ideals of Dr. Duncombe's report were transformed by 1845 when the temporary asylum was visited by the noted asylum reformer J.H. Tuke (1845: 215). He describes his visit to the asylum:

Toronto, September 20, 1845

Visited the lunatic asylum. It is one of the most painful and distressing places I ever visited. The house has a terribly dark aspect within and without, and was intended for a prison. There were, perhaps, 70 patients, upon whose faces misery, starvation, and suffering were indelibly impressed. The doctor pursues the exploding system of continually cupping, bleeding, blistering and purging his patients; giving them also the smallest quantity of food, and that of the poorest quality. No meat is allowed ...
doctor in response to my question, and evident disgust, persisted that his was the only method of treating lunatics, and boasted that he employs no restraint ... I left the place sickened with disgust ...

The conditions were the result of overcrowding and a denial of the principles of accepting only "curable" inmates. Since the admittance to the asylum was not fully controlled by the medical profession, but under the control of the state-controlled Board of Directors, many patients were admitted to the temporary asylum for custodial purposes only. Even in the initial years of the operation of the asylum, it reflected the national background of the migrants to the colony from Great Britain and the state of conditions for the care of the pauper migrants.

**TABLE X**

**Numbers of Lunatics Admitted to the Asylum by place of Residence and Nationality**

<table>
<thead>
<tr>
<th>Residence</th>
<th>Nationality</th>
<th>1841-1842</th>
</tr>
</thead>
<tbody>
<tr>
<td>Toronto</td>
<td>Irish</td>
<td>59</td>
</tr>
<tr>
<td>Home District</td>
<td>English</td>
<td>18</td>
</tr>
<tr>
<td>Province</td>
<td>Scottish</td>
<td>49</td>
</tr>
<tr>
<td></td>
<td>Canadian</td>
<td>8</td>
</tr>
<tr>
<td></td>
<td>American</td>
<td>11</td>
</tr>
</tbody>
</table>

| Total           | Total       | 126       |
Medical Superintendents, Drs. Workman, Clarke and Hannah, interpreted the large numbers of Irish immigrants in the asylum as evidence that they were "unsuited to the strenuous duties of pioneer life" (Hannah, n.d.: 2). This view was typical of "medical reductionism," assuming that every individual is isolated from all social connections and influences, and that their low social position "shapes" them to be "moraally" inferior:

If we seed the country with those of poor background we will reap a crop of crime, feeble-mindedness and Mental Disease. And those who we had hoped to be an asset will become a dangerous liability.

(Hannah, n.d.: 2)

I would argue against the analysis made by Dr. Hannah in that it links inferiority and an affinity with insanity with social class. Dr. Hannah forgets that asylums were primarily institutions of public welfare and not hospitals and that the backgrounds of the inmates of the asylum are not a reflection of the make up of the general population, but are connected with poverty and unemployment. The filling of the asylum with the propertyless is more a reflection of the ability of the poor to get employment and the state to deal with poverty than a reflection of their class inferiority.

By 1846, conditions in the asylum were so bad that branch asylums were purchased and fitted for the overflow of the temporary asylum. Even the east wing of the abandoned parliament buildings was used to confine the insane (Annual Report of the Medical Superintendent of the Temporary Lunatic Asylum at Toronto, April 1 - March 31, 1847).
of the open shop policy and the scarcity of formally trained medical personnel, physicians argued that there was a proliferation of "quacks and fakirs" in the colony selling their potions to a desperate population. Gradually, there was a movement by the "legitimate" physicians to control the practice of medicine and protect the population from abuse and the doctor from competition.

Since the colony was growing by leaps and bounds, because of the migrations, the immigration of pseudo-physicians from the United States forced the legitimate physicians of the province to band together and form a regulatory board. This was easily accomplished since the policy of the provincial legislature and colonial administrator was to emulate Great Britain in every possible way (Heagerty, 1928: 240). Even though there was a great deal of controversy over "fakirs", there is little evidence to prove that there actually were a great many of these men and women and less evidence that they were doing any more harm to their patients than the legitimate physicians. In 1818, a Medical Board was established to clarify the qualifications for those to practise in the colony, thus, eliminating quackery, or more correctly, mobilizing the state to suppress quackery.

The establishment of a medical board was the initial step in controlling the practice of medicine in Upper Canada. The board had the support of the Legislative Assembly and could levy fines up to £100 for practicing medicine without a licence (Spragge, 1966: 63). The board became very prominent in influencing government policy on the practice of
Custody, not treatment, remained the mode of confinement in the asylums. Conditions within the asylum did not cease to be intolerable since the stated function "cure" did not coincide with the actual function "custody". This contradiction is manifest in the conflicts between the medical authorities in the asylum and the board, each having a different solution for the problem of insanity in Upper Canada. The doctors were concerned with the patient's health, while the state administrators were concerned with the costs of treatment. The next section will cover in more detail the conflicts between these two groups and the struggles within the medical profession which shaped the formation of the asylum.

V Origins of Medical Control

The practice of medicine in Upper Canada was initially organized on an "open shop" model, with no controls over who should practice the "art" (Bull, 1934: 22). Early physicians in the colony, experienced army surgeons, received practical medical training in the Napoleonic Wars and the American Revolution. By 1815 there were approximately 40 of these medical men practising in the colony who had received degrees from old-world institutions: Edinburgh, London and Dublin (Bull, 1934: 43). This was when the population of Upper Canada was around 110,000, leaving the doctor/patient ratio in the colony at 1:3,000. Physicians were not regulated and there was no institutional affiliation or guidelines for the control over their practice. Because
medicine in the colony and controlling the influx of physicians from Europe and the United States (Kett, 1968: 65). Since there were no medical schools in the province before 1840 the board was responsible for the administration of exams and required that students have from three to seven years apprenticeship before entering the profession (Macdermot, 1967: 110). Finally in 1839 a college of physicians and surgeons was established which tightened control over the practice of medicine in the province. To complete the sovereignty of the profession over the practice of medicine in Upper Canada, two accomplishments were left: first, the establishment of medical education under the control of the profession and, second, institutions for the practice of medicine had to be controlled by the profession. Both of these were completed before confederation (1867).

Political differences in the province were reflected in the administrative control over the practice of medicine. In the years of the rebellion (1837) and the war with the United States (1812) the label "quack" or "fakir" was used as a political weapon against those physicians whose views were in opposition to the dominant Tory ideals of the established government. This weapon was not only used against those physicians from the United States; but also against the physicians of the province who were associated with political and social reform. The clearest example of this political fight within the medical profession is the development of medical schools and the control over hospital facilities for teaching.
A). Medical Education

The development of medical education in the colony in the 1840's was important in two ways: 1) it provided stable employment for the early physician who was also a teacher, and 2) it provided a base of political activity for the varying medical groups to initiate support for their treatment proposals. Like the hospitals, the medical schools afforded a structure for controlling the practice of medicine in the province. The political split in Upper Canada, Tory and Reform, was maintained in the battles within the medical profession over the establishment of medical schools and thus, medical accreditation. While the Tories gained control over the general hospital in Toronto (Cosbie, 1975: 12-13) the reformers, headed by Dr. John Rolph, controlled the medical school and the asylum. For the profession the hospital and the medical school were building blocks of security and control. They ensured the reproduction and maintenance of the profession.

The political differences within the profession also became manifest in the battle between Toronto and Kingston over the seat of the provincial government. It was argued by the College of Physicians and Surgeons that the Lunatic Asylum be located in Toronto, instead of Kingston, because of the proximity to the medical schools. It was also argued that supervision of the asylum would be easier if it were in Toronto (Hannah, n.d.: Cap. 3).

In England, the push for hospitals and medical schools in the early nineteenth century was the work of individual physicians, medical
entrepreneur (Abel-Smith, 1964: 17-18). In Upper Canada medical schools were not associated with the hospitals but with the university (Spragge, 1966: 65). The slow development of hospitals and medical schools made their control all the more crucial for specific groups of physicians attempting to establish an institutional base for practice in the province. The lack of numbers of hospitals led to fights within the Toronto Hospital, based on the political persuasion and medical school affiliation of the physician. Since the hospital was a seat of Tory power, Dr. Rolph—a reformer—sought to establish alternate institutions to secure training and work for his students.

No one ran counter to Bishop Strachan without precipitating an active feud. Strachan made much of the Trinity Medical Faculty and they were very influential men. In a short time they acquired control of the Toronto General Hospital. Rolph's political activities and his record as a rebel had much to do with the anti-Rolph sentiment and had repercussions in the treatment given Rolph's students in the Hospital... Rolph's students soon began to realize that they were 'so much dirt in the wards and corridors of the building'. Their treatment was such that they complained in the columns of the daily press and a public investigation was ordered.

(Patterson, 1961: 28)

Prior to the 1840's, medical education in Upper Canada was similar to that of eighteenth-century England, i.e., apprenticeship. Before the organization of medical schools, physicians gave private lessons to those students who could afford the fees. Dr. Rolph became
one of the major forces in the development of medical schools (Patterson, 1961: 25). Dr. John Rolph is important to the study of asylum formation because his associates and students became the first superintendents of the lunatic asylums in the province when they were controlled by the doctors and not the board of directors.

John Rolph, a lieutenant under MacKenzie in the rebellion of 1837, was a member of the Medical Board of Appraisal and founder of the Toronto School of Medicine (Patterson, 1961: 25-28). On his return from the United States and absolved of his part in the rebellion, Rolph was brought into the Hincks cabinet as a surety of his good faith. From that position Rolph wielded considerable power in matters concerning the direction of medical education in Upper Canada. The history of Dr. Rolph's part in these political rivalries is important in that it gives us the information to understand why the Toronto Lunatic Asylum, and subsequent asylums - save Hamilton, were controlled by a specific group of physicians associated with John Rolph.7

By the 1840's, two medical schools were operating in Toronto. The first was established by the department of medical science at King's College facility was the first attempt at institutionalized medical education. However, because of its university affiliation and the association with public expenditure for education, the school was abolished in 1853 by the University Act. Many of the founders of the King's College school were Tories and members of the Royal College of Physicians and Surgeons (Primrose, 1906: 169). Wallace (1927: 209)
claims that the school was abolished by the political maneuvers of Rolph who argued strongly for the passage of the University Act on the basis that a publicly-funded institution of education should not support those in such a lucrative profession. Wallace goes on to argue that Rolph did this to gain a monopoly over medical education in Upper Canada since his was the only other medical school.

The second medical school was Rolph's school - the Toronto School of Medicine - established soon after Rolph's return from exile in 1843 (Spragge, 1966: 64). The Toronto School of Medicine was a private institution but because of the necessary affiliation with a degree-granting institution it was associated with Victoria College in Cobourg (Methodist) and was recognized by McGill University in 1849 (Kett, 1968: 66). It was clear from the start that the political support of the medical schools was imperative for their success. Rolph's school attracted all the reform physicians, while King's college attracted the Tories. By 1850, there was a distinct reform/Tory split in the medical profession which was reflected in the control of the rival medical schools and also in the hospital and the asylum (Heagerty, 1928: 244; Spragge, 1966: 72).

The support given by the Hincks Government through the University Act of 1853 to Rolph's school and the abolition of the King's College school eliminated that competition for medical students. Rolph's had to contend with another rival in the early 1850's, Trinity College school (Spragge, 1966). Trinity College Medical School was the third
institution for the formal education of physicians in Upper Canada. It was established as part of the Church University under the guidance of Bishop Strachan (Anglican). In 1850 work was under way for the founding of the Church of England University (Trinity) with a medical faculty (Spragge, 1966).

The political split between reform and Tory physicians remained, as many of the Anglican physicians went from the King's College faculty to the new Trinity College. After 1853, Trinity and Rolph's school began a new political rivalry. In 1854, matters became strained when the Tories attempted to affiliate themselves with the University of Toronto, the earliest degree granting institution in Upper Canada. It was John A. Macdonald who proposed the reintroduction of the teaching of medicine at the University of Toronto. The medical faculty of Trinity College were eager to draw into an association with the established University of Toronto but the administrators saw the union as a threat to their autonomy. Subsequently, because of internal disputes and external pressure, the medical facility at Trinity was dissolved in 1856, leaving all medical education to Rolph (Spragge, 1966: 75). The conflicts internal to the development of medical education at Trinity arose out of the pressure from Bishop Strachan to incorporate a sound base of theology into the teaching of medicine. The external pressure came from the University Act. The medical faculty at Trinity was re-established in 1871.
The Toronto School of Medicine again became the dominant force in medical education in Upper Canada, a position it never really lost because of the internal conflicts over funding and curriculum in the other schools. However, in 1856 there was a split in the Toronto School when Drs. Workman and Aikins split with Rolph because of his personal dominance over the school. This split was not on political lines and left medical education still in the hands of the reformers. This split was also after Dr. Workman had been appointed the medical superintendent of the Toronto Lunatic Asylum in 1853 by John Rolph. Dr. Workman held dominance over asylum development in Upper Canada; he was medical superintendent from 1853 to 1875.

At the time of asylum formation and the appointment of Dr. Workman as medical superintendent free from the chains of the Board of Directors of the asylum, Dr. John Rolph was of considerable importance in keeping the Lunatic Asylum in the hands of the reformers. Even Dr. Duncombe who initiated the push for the asylum in the legislature was a friend of John Rolph. Dr. Rolph retired from political life in 1854 (Patterson, 1961: 25).

B) Hospitals

Hospitals, along with other institutions, were a base of support for the medical profession. The earliest hospital in Upper Canada was the Garrison Hospital, established to administer to victims of the War of 1812 (Cosbie, 1975: 5). With the establishment of the
hospital came the recognition of the need for health care in the colony.

The Legal and Patriotic Society of Upper Canada was formed to raise money for a hospital and they accumulated £8,000 by 1815. However, much of the money went to assist the survivors of the war and the families of the dead. The trustees of the society, Chief Justice Powell, Hon. James Baby and Rev. John Strachan (Tories) assigned £4,000 for the erection of a provincial hospital in Toronto (Cosbie, 1975: 7-8). The hospital from its inception was closely related to the Medical Board (est. 1819) and likewise with Dr. Widmer (Tory), the first director of the hospital (1829) and president of the Medical Board in 1823. The Toronto General Hospital was to offer students opportunities to practice their trade as well as assisting the poor and needy of the province. The hospital also offered a stable flow of patients to the students.

In the beginning the hospital was faced with some problems; first was the problem presented by the rival medical schools and permission to practice in the hospital and, second was the problem of serving the poor. The latter point was problematic in that the general population of paupers and unemployed distrusted the "ivory tower" hospital (Cosbie, 1975: 41). The problem presented by the rival medical schools was that two hostile factions were to share the same institution.

In the hospital, Rolph's students were treated with disdain and patients of physicians associated with Rolph were warned that their life was in danger being treated by such men (Cosbie, 1975: 59). Even a statement by one of the Tory physicians of the hospital attests to this
fact. Dr. Clarke admitted that "the medical officers were not chosen on account of their professional standing but because they were representatives of the different medical schools" (Cosbie, 1975: 60).

Dr. Aikins and Wright, lecturers at the Toronto school, were dismissed from the hospital but, through subsequent appeal to the provincial legislature, they were reappointed (see Patterson, 1961: 28-29). Dr. Aikins became Dr. Rolph's partner in the Toronto school in 1851 (Patterson, 1961: 27). Rumors, newspaper editorials and lower-ranking hospital staff continued the attack on Rolph's associates:

And why do they now dismiss Drs. Aikin and Wright? Is it not because they belong to the rival Medical School? Who can doubt it: There is very good reason to believe that the late examination was a mere trick to find excuses for turning out the medical men belonging to the Toronto School of Medicine... A more infamous act of injustice to the Toronto Medical School it is impossible to conceive. The affair is of a piece with the whole management of the present government. The Tory High Church institution gets the preference over all others, whether medicine or theology be taught. Everything must bend to the dominant sect.

(Academy of Medicine, Toronto. Manuscript Collection, cited in Patterson, 1961: 27-28)

The doctors in the Toronto General Hospital that were responsible for these actions—Widmer, Bovell and Hodder—were members of Trinity Medical School and were trustees of The Toronto General Dispensary, the Toronto Lying-in Hospital and the Toronto House of Industry, as well as being Tories.
The problem for Rolph et al. was that they were getting pushed out of all the institutions in which a physician could practise his trade. However, Rolph fought for the asylum, which was proposed by the reformers, and won with the appointment of Workman as medical superintendent in 1853.

C) Madness and the Medical Profession

In the period of asylum formation there was no specialized sub-discipline of medicine that controlled the treatment of the insane. Because of the different historical circumstances surrounding the separate confinement of the mad, each country had its own specific group who became the managers of the mad. In England, those most familiar with the insane — mad-doctors — were not part of the medical profession. They were private entrepreneurs engaged in the profitable trade of the eighteenth century called the "trade-in-lunacy" or the "mad business" (Parry-Jones, 1972). This group of mad-doctors gradually became accepted as those who could "cure" madness (see Macalpine and Hunter, 1969). It was this group who first gained control over the institutionalized insane and then were integrated into the medical profession (Jones, 1955; Glover, 1972 A; 1972 B). In the British case it was quite rational to assume that those most familiar with the confinement of the mad before separate institutionalization should be the ones in charge of their treatment. It appears quite understandable that the medical profession should offer the suggestion that they could cure the mad.
The cult of the "cure" (see Macalpine and Hunter, 1969) became not only an administrative asset in proposing the reduction in the costs of confining the mad, but also a vehicle of entry of madness into the sphere of medical control. The cult of the cure was, however, a facade and medicine could offer no unique treatment of the mad that could not be offered by a "humane" lay person at the time (Tuke, 1964). The development of medically-dominated asylums is not an experience based on the superior knowledge of the medical profession but the access to and control over the insane as a displaced group of deserving paupers.

Even though there has been a gradual assimilation of the treatment of madness into the medical repertoire, confinement of the mad has remained part of the system of public welfare.

In Upper Canada in the beginning of the nineteenth century, the traditions of poor relief did not exist and there was no group whose primary interest was the treatment of madness. As the cry arose to separate the mad from the gaols and the houses of correction, those who took up the call for separate confinement were the social reformers who were also physicians, e.g. Dr. Duncombe. That part of the profession in Upper Canada concerned with social reform were also those who gained control over the confinement and treatment of madness; it was not because they possessed some special skill or knowledge about insanity. This group became the forerunners of psychiatry in Upper Canada and is exemplified by the dominance of Dr. Workman in the 1870's. The peculiarity of the political splits within the province was a reflection
of the general structure of the colony: A structure in which the Tories held sway but were losing their control to the reformers. The rivalry between factions within the medical profession was fought out over control of the institutional basis which would support the profession; medical schools, hospitals and asylums.

D) Medical Superintendents

The period of the temporary asylum, 1840-1850, was one of instability in regard to the position of medical superintendent. Part of the instability of the position was the differences of opinion between the Board of Directors and the Medical Superintendent over the treatment of the insane in the asylum. In conjunction with this, was the rivalry between the medical factions, Tory and reform, over control of institutions linked to medical treatment. On the one hand, the superintendent was responsible for the care and treatment of the patients under his care. On the other hand, the Board was responsible to the Lieutenant Governor for the smooth functioning of the institution as part of public welfare within the province. The superintendents had little authority over the attendants of the asylum and could not control attendants who were cruel or harmful to the insane. The mal-administration of the asylum resulted in either the dismissal of the superintendent or his resignation out of frustration.

In 1849 (2 Victoria, Cap. 11) an act was passed authorizing the Board of Directors of the asylum as the administrators of the vested
property of the asylum and not the Crown, thus giving the Board full
control over the functioning of the asylum. This included the control of
superintendents, attendants and patients, besides policy-making powers.
This greatly reduced the powers of the superintendents in dealing with
the everyday problems of the asylum (Sessional Papers of Legislative
Council, 12 Victoria, Appendix M, No. 1, Volume 8, 1849).

Control of the temporary asylum shifted from the Board of
Directors to the Medical Superintendent. This meant a shift in control
from the Tories, under Dr. Widmer, to the Reformers, under Drs. Workman
and Rolph.

The first superintendent of the temporary asylum was Dr. Rees
(1840-1845); he was originally the physician at the York Gaol which was
converted into the temporary asylum. Rees was schooled in the European
Tradition of moral treatment and became frustrated as the function of the
asylum gradually became custodial. During his appointment he suffered a
blow from a patient and was forced to give up his position (Hurd, 1973:
Vol. IV, 586 and Report of Select Committee in the Case of Dr. Rees,
1861). His tenure as asylum superintendent followed the British
tradition of appointing a knowledgeable gaol physician to care for the
insane. Dr. Telfer (1846-1848) replaced Dr. Rees in 1845. However,
Telfer was associated with the Tory faction of the profession and ran
into political trouble with Dr. Rolph over treatment of insanity. Dr.
Rolph's Reformers managed to replace Telfer in 1848 with Dr. Park (Hurd,
1973: Vol. IV, 592). Dr. Park (1848-1850) was the first superintendent
appointed by the reformers. With his appointment came a push by Dr. Rolph and the reformers for the control over the treatment of insanity throughout the province. Park was not only associated with Rolph, he was Rolph's brother-in-law. However, because of the Tory control over the Board of Directors, Park was confronted with many differences of opinion in the treating of insanity and resigned in 1850 (Hurd, 1973: Vol. IV, 582). In the period of transition from the temporary asylum to the permanent asylum finished in 1851, Dr. Park was replaced by Dr. Scott (1850-1853). Scott resigned in 1853 and was replaced by Dr. Workman who was solicited by Rolph for the position (Hurd, 1973: Vol. IV, 599) and held the position until 1875. Scott's resignation was again over a disagreement with the Board of Directors over the running of the new asylum (Hurd, 1973: Vol. IV, 588). The conflicts between the Board and the superintendents, Tory and Reform, were not resolved until Workman's appointment and the transfer of control of the asylum from the Board to the superintendent in 1853 (16 Victoria, Cap. 188).

In the colonial situation, medicine was immediately brought into the sphere of mad treatment. Like the English experience, those brought to treat the mad, medical or lay, had little understanding or knowledge of madness and no hope of anything resembling a cure. Medical understanding of insanity was in its infancy and treatment was based more on practical management than on realization of the workings of the mind. Gaining control over the institutional structures for the confinement of madmen secured a client population for medicine and also a base for
practice. However, as in the British case, control over madmen was not given outright to the medical men but was set under a Board appointed by the government.  

Since there was much political maneuvering during the 1830's and 1840's in the province, it was imperative to gain political support for the appointment of administrators and superintendents of the asylum. Initially this power was in the hands of the Tories but after John Rolph's return from exile and his position in the Hincks government the insane fell into the hands of the reform physicians. Rolph, lieutenant of Mackenzie in the rebellion of 1837, successfully cornered the market of medical education in the colony in the late 1840's and with his colleagues controlled the asylum movement from its early stages. The inclusion of the intra-professional struggle has given the historical evidence to understand the direction of development taken by asylums in the nineteenth century.

VI Summary

In sum, the establishment of the Provincial Lunatic Asylum in Toronto did not result in the better treatment of the insane. Although the separate confinement of the mad was couched in the humanitarian ideals of the reformers, the treatment of the mad in the asylum was a product of its history - custody and discipline.
At the beginning of the Asylums there was little for the patients* to do. They wandered or sat idly in the wards or grounds, and the result was further mental and physical deterioration.

(Lavall, N.D.: Box 2, Section 3:31)

In the gaols and houses of correction those who had been defined as "insane" were locked in cells and given little treatment. With the establishment of the asylum there was only one difference from that received by the lunatics in the gaols - they were not confined to cells. Instead physical restraint was used. Humanitarian treatment is then functionally defined as separate treatment.

Throughout the nineteenth century, the role of the gaol in relation to the asylum remained the same, the gaol was to restrain the freedom of lunatics and confine the overflow of the asylum. The gaol also acted as an intermediary point of access to the asylum. In the nineteenth century, the asylum was not an autonomous institution, separate from the relief of the poor by the state in the general institutions of public welfare throughout the province.

I have noted that there were many similarities between the treatment of the early asylum and the other institutions of public welfare: 1) inmates of these institutions reflected the population of the great migrations, mainly Irish, 2) the methods of treatment were custody and discipline through labour, 3) the social class of those confined in these institutions was similar, and 4) the connections

* A patient is defined as a "detained Lunatic" (Revised Statutes of Ontario, 1877: Cap. 221).
among these institutions was based on political rivalries. Because of these basic similarities and the wedded histories of these institutions, the mad continued to be part of the population of these institutions throughout the nineteenth century.

The push for separate confinement was the dictated order and discipline demanded by the institutions whose role it was to provide the society with a disciplined and willing labour force.

After the mad were separated from the other institutions into an asylum, the medical profession began to struggle for the control of their treatment. Besides arguing that medicine could better "care" for the mad, it was argued that they could "cure" the mad, making them functional members of the labour force and not a drain on the resources of the state.

The specific form the asylum finally took in 1853, when it came under medical control, was affected by a conjuncture of processes; the pressure of the public welfare institutions from the migrations and lack of opportunities in the province, the pressure from the state for the self-sufficiency and disciplining of the poor, and the battles within the medical profession to control the asylum population.

The formation of the asylum was then, an outgrowth of the organization of a reserve army of labourers and a fight among the professions for control over that population no longer perceived as useful to the society.
CHAPTER V FOOTNOTES

1 There is a tendency in Great Britain as well as in Upper Canada to implement public welfare legislation first in the larger centres and then throughout the juridical unit.

2 The rationale of the welfare institutions was "self provision". Those who, for no apparent reason, would not conform to the rationale of the system were thought to be mad.

3 Lennell (n.d.) states that those required to labour in the asylums were from the working class. Persons of property were not required to lend a hand in their upkeep.

4 The types of funding were either local subscription (charity) or government grants (Splane, 1965: 21-43).

5 The reasons the reformers would not support houses of industry (workhouses) throughout the province were because their basis of political support was the small farmers who would not look kindly on being taxed to support the poor of urban centres.

6 Dr. Duncombe was a reformer closely associated with the rebellion of 1837 and later the establishment of the Toronto School of Medicine.

7 This analysis does not picture Dr. Rolph as a "great man" but a doctor of great influence and political power. He is situated in a number of institutional structures which allow him to gain control over the medical education and the appointment of medical superintendents to the Toronto Lunatic Asylum. His accomplishments are not because of his personal attributes, which according to historians were not that good.

8 Kathleen Jones (1955; 1959) illustrates, for Britain, the process by which the medical profession gained more and more control over the care and treatment of the insane through their participation on government committees.
### Appendix I: Institutional Interconnections

#### Social, Political and Economic Positions

<table>
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<th>Directors</th>
<th>Societies for the Poor</th>
<th>Family Compact</th>
<th>Emigration and Orphan Societies</th>
<th>Board of Trade</th>
<th>Bank of Upper Canada</th>
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**Totals**: 20 7 3 9 4 9 5 7
Appendix II  Interlocking Directors

Overlap of Important Social, Political and Economic Organizations in Upper Canada: 1837 - 1861.

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(Toronto City Directories, 1837-1861)
CHAPTER VI

Conclusion

1 Introduction

In explaining the formation of the asylum in Upper Canada, I have covered much material and raised questions both within the general social history of madness and within the historical explanation of particular events. This thesis deals with a specific historical event and its explanation and not the universal development of asylums. This work also stresses the use of deductive methodology to determine the social patterns of development which are embedded in the formation of this particular institution. The two main threads of this work are the setting up of a method for historical explanation, showing the inadequacy of alternate approaches and secondly, the empirical description of the social processes relevant to the formation of the asylum in Upper Canada. My approach follows that of Carl Hempel (1959: 354):

A description of the development of an institution is obviously not simply a statement of all the events which temporally preceded it; only those events are meant to be included which are "relevant" to the formation of that institution. And whether an event is relevant to that development is not a question of the value attitude of the historian, but an objective question depending upon what is sometimes called a casual analysis of the rise of that institution.
The particular topic addressed in this thesis, asylum formation in Upper Canada, is of importance because it is an example of crucial break in the larger history of the confinement and treatment of the mad in society. Asylum formation marks the break between the two dominant modes of confining the insane, establishing the historical predecessor of the mental hospital. The initial period of confinement was marked by the association of the mad with the poor and the criminal; the second by their association with the sick. The asylum became the vehicle of that transition.

Scull (1977: 124) suggests that the transition between the periods of punishment and treatment was, at that time, explained in terms of "better managing" the insane. Couched in the ideology of establishing institutions to manage the poor, sick, blind, insane, etc., was the idea that those who could work should be forced to and that those who could not work should be cured. This model implicitly states that the formation of the asylum was no more than a matter of bureaucratic house cleaning. However, the question still remains as to why this "better management" took this particular form. Thus, to answer the question of asylum formation we must understand how the association the mad with the poor and the criminal affected the organization of an institution within a new system to treatment (Skultans, 1979: Cap. 7).

In this final section, I will recount the argument I made in the above work. I will not only speak of the methodology used to explain this historical event but also recount the empirical material which forms
the historical explanations of asylum formation.

II Alternative Models - Background

Sociologists, in general, have been critical of psychiatric or technological explanations for the "birth of the asylum" (Scull, 1979; Rothman, 1971; Rosen, 1968; Foucault, 1965). However, the social explanations of the separate confinement of the mad are not without problems. For example, Foucault (1965) relates the historical development of conceptions of rationality to the treatment of the mad. He points out the relation between the ideological conceptions of insanity and the specific forms of the treatment of madness, while offering no support for the transformation and reproduction of these ideologies over time (Coward and Ellis, 1977). Rosen (1968), a sociologist, states the reasons for the different treatment of the mad in specific historical periods, but fails to connect the different historical periods in the overall development of the history of madness and uses psychopathological definitions of insanity (Ackernacht, 1943). Rothman (1971) discusses the discovery of the asylum in terms of the social control function adopted in Jacksonian America. Rothman offers only a teleological model to explain the "discovery of the asylum" as a general mode of treatment appearing throughout the western world in the early nineteenth century. Scull (1979), on the other hand, is the first to link the treatment of madness to the process of industrialization and the institutional constraints on the family to care for the mad
(Skultans, 1979: 104-105). However, he does not go deeply enough into the relation between the disciplining of a labouring population and the differential organization of public welfare by the state.

Many of the works on the social history of madness fill out our understanding of the place of madness within society but all are in some way limited by their methodology to explain a particular event within the larger descriptive history of madness. Generally, the works on the subject give us no conceptual framework to formulate the question posed here as one of importance to the study of the history of the mad. Since the models of asylum formation implicit in many works are either descriptive, individualist, idealist or teleological, I have emphasised the importance of developing an explicit methodology which will allow for the explanation of a specific historical event - separate institutional confinement of the mad under the control of the medical profession.

III Methodology

Since I treat methodology as logic of inquiry and not technique, I argue that implicit in any form of explanation is a method of approaching a particular topic. This guides the researcher to specific questions to be answered and specific ways that they can be answered. Part of my work was, therefore, to make explicit my methodology and, at the same time, show the inability of other methodologies to explain the specific problem introduced in the thesis.
Following the work of Atkinson (1978), Scheffler (1963), Hempel (1959) and White (1959), I maintain that in order to explain an historical event one must first start with a "theory of society" and deduce from this, principles that will allow us to organize the historical material presented to explain (Scheffler, 1959: 43) a specific social phenomenon. The use of a general law forms the basis by which we can connect several historical processes to organize social behaviour into understandable patterns.

I take as my framework, Marx's theory of accumulation (1976: Vol. 1; Cap. 25) and deduce from this hypothesis the organization and segmentation of the labouring population. This allows us to coordinate the development of industrialization and its inherent demand for disciplined wage-labourers (Thompson, 1967) with the organization and treatment of those not providing for themselves by the state. Since it is a social fact that the confinement of the mad before asylum formation was part of the larger structure of confining and treating the poor (Scull, 1977: Cap. 7), I used Marx's concept of "relative surplus population" to organize the material on the development of public welfare institutions by the state. One of the historical expanans of asylum formation is then the history of confinement and treatment of the insane before the birth of the asylum.

The separation of the mad from the institutions of public welfare was based on their inability to be disciplined and conform to the
regimentation of the institution. The relation between the institution of public welfare and the larger demand for a disciplined labour force is that they are one and the same process. The regeneration and support of one is totally bound up in the other. Evidence of this is the elimination of those who could not or would not provide for themselves. In sectioning out those who could work - the able-bodied poor - from those who could not - the deserving poor - the mad became part of the latter category. The mad, as well as the blind, lame, sick, etc., deserved relief since their inability to support themselves was through "no fault of their own". Institutional separation was based on this distinction. One set of institutions was for those who could not support themselves - the sick and the mad (deserving) - and another was for those who would not support themselves - the poor and the criminal (able-bodied).

The connection between the larger process of capitalist development and the separate confinement of the mad is within the institutional distinction made between those who could potentially be labourers and those who could not. This, so far, takes us to the point at which the mad are separated from the welfare institutions but does not explain why they were put in asylums and then under the control of the medical profession. Here, we must look at the given possibilities for the treatment of the mad in that particular historical period and see how it was determined by the history of confinement and the location of the event within a particular social structure. The concurrent development
of the medical profession with the particular developments of public
support for the poor in Upper Canada forms the other determinants of
asylum formation.

The next step is to illustrate the empirical material which
forms the conjuncture - asylum formation - showing how the general law
organizes the material to allow for an explanation of this event.

IV Outline

Within this thesis I argue that there are specific historical
processes which must occur before asylums will develop, i.e. specific
explanans of asylum formation. Besides the association of the mad with
the history of public welfare there are also the local conditions of the
place of the development of the asylum which have an effect on its
organization. In this case there are the local conditions of Upper
Canada society. The organization of welfare in the province together
with the development, expansion and control of the medical profession are
integral components of asylum formation.

For a system of lunatic asylums to develop two things are
needed. The first is the elimination of the mad from the institutions of
their first confinement within the category of the sick and the
simultaneous organization of profession to control them. However,
control over the mad by the medical profession happens after separate
confinement and not before; i.e. institutional separation temporarily
precedes asylum formation.
The added dimension of this dissertation is the explanation of the rise of the asylum in Upper Canada. Since specificity of time and place are important to an application of a general law to a specific event, a part of the conjuncture of processes will be in the structure of Upper Canadian society and its influence on the organization of public welfare. In other words, how did Upper Canada being a colony of Great Britain affect the development of welfare institutions in the province?

What I have done in the above work is to section out the three major processes influencing the formation of the asylum in Upper Canada. The first is the historical background of confinement of the mad within the public welfare structure. The second is the local conditions of Upper Canada which would lead to the development of a system of social control via public welfare, and third is the conjuncture of that history with the actual expulsion of the lunatics from the welfare structure and their organization by the medical profession.

A) Institutional Confinement and the State

This chapter (III) provided us with historical material on the institutional organization and conditions of the poor in conjunction with the response of the state to this "social problem". I have argued that the history of the confinement of the mad is inseparable from the history of treating poverty. For my argument, this background is necessary in order to place the discussion of the separate confinement of the mad within its proper context. This in turn enables us to understand
understand separate confinement as part of a larger social totality and not an isolated event or an accident of history.

This chapter relates the care and treatment of those who could not provide for themselves the material conditions of their existence, i.e. wages, availability of land, population growth and government assistance, showing how institutional relief became the form of state support. Also, we see how the response of the state to the problem of poverty actually assists the process of capitalist accumulation by forcing labourers to work for as little as possible or by assisting the wage. Institutionally, this separates those who can be productive from those who cannot, a necessary prerequisite for asylum formation.

The categories of deserving and able-bodied poor flow directly from the individual's ability to work at a given rate under a specific form of discipline. Institutional self-sufficiency only hastens to differentiate the mad from the poor.

The reliability of the British material in this chapter is determined by the choice of the specific topic. Since the history of the institutional form in Upper Canada is not located in the colony but in the mother country, the discussion of the forms of confinement in Britain is invaluable to the analysis. In the same vein, I would argue that an analysis of the introduction of a specific institutional form in Lower Canada would require an analysis of previous institutional relief developments in France. It is a fact that Upper Canada was a colony of Britain and also a settler state. To ignore this would be to ignore the
historical explainans of asylum formation. The benefit of this chapter is that institutional relief and the separate confinement of the mad are seen as part of a larger social totality and not as isolated occurrences. Thus, this chapter links the specific development of the confinement of the mad with the more general dynamic of organizing and disciplining a wage-labouring population.

B) Public Welfare in Upper Canada

Even though the attachment of Upper Canada to Britain greatly influenced the development of institutions of confinement in the province, there were still local influences on this process. These local influences modified the development of public welfare to fit the particular conditions of the colony. Therefore, the structure of Upper Canadian society must be seen in conjunction with that of Britain's influences and not in isolation from this connection (Curtis and Edginton, 1979), i.e. the development of specific events in Upper Canada was determined by the colony's relation to Great Britain.

I have noted that the local conditions in the province in the first half of the nineteenth century did little to alleviate the problem of poverty. There was little employment and no available land for the massive migrations from Britain during this period. You could say Upper Canada was overpopulated in that its resources could not adequately support its growing population. This created 'social problems' in the province. Problems of poverty, crime and health associated with the
great influx of the poor to the cities of Upper Canada. The response to this was a response taken from Britain, since the structure of the Poor Law was already functionally in place (Splane, 1971: 65-79). There was also the adoption of the principle that the poor should provide for themselves and not be a financial burden on the community. Together with this is the fact that the migrants coming to Upper Canada were already victims of the industrial revolution and knew the discipline of the workhouse and the factory.

The primary elements of the development of public welfare in Upper Canada are: 1) the colonial connection, 2) the absence of opportunities in the colony; 3) the great migrations of the poor from Britain; and 4) the genesis of the Poor Law established through colonial policy. These all contributed to the development of institutions of public welfare in Upper Canada and their patterning on the British model of discipline and "self provision".

C) Asylum Formation

In the last chapter I trace the history of the confinement of the mad in Upper Canada through the welfare institutions to the point of the separation of the mad with the building of the Toronto Lunatic Asylum. This development of the separate confinement of the mad in Upper Canada is based on the two previous chapters and placed within the context of the general movement of the separate confinement of the mad and also within the particular situation in Upper Canada. The formation
of the asylum ends with the organization of part of the medical profession to control the treatment of the mad and place the treatment of madness within the institutional structure of the hospital instead of the workhouse.

The purpose of this section of the dissertation was to illustrate the point at which the insane were pushed out of the institutions of public welfare and into the hands of the medical profession. This transition was structured by the inability of the mad to provide for themselves, i.e. by a lack of alternatives and by the idea that the mad were a threat to the community (Scull, 1977: 127).

The formation of the asylum in Upper Canada is, therefore, an event that marks the end of one era of treatment of the mad and the birth of another. It is an event which begins the process of separating the mad from the poor and associating the mad with the sick, a process which, in its institutional form, took over a century to complete.

V Summary

The asylum's development cannot be viewed as a separate isolated phenomenon associated with the psychology of those confined. Asylum formation is a social phenomenon based on the historical development of the treatment of poverty, in conjunction with the development of an organized profession to take control of those who could not support themselves for any apparent reason.
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