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# Book Review: A Geographical History of Institutional Provision for the Insane from Medieval Times to the 1860s in England and Wales: The Space Reserved for Insanity

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an ascendant national identity – a self-sacrifice for country and civil society that could be both honourable and noble. In other instances, as in the shocking suicide of the British Whig MP Sir Samuel Romilly, it might occasion a deep national discussion as to the social effects of rapid social and political change in early industrial society. Indeed, the perceived rise of suicide rates in most European communities in the eighteenth century provided fodder for those who felt that liberal thinking was leading inevitably to social anarchy.

Although individual chapters provide commentary on themes familiar to historians of suicide, there are also some unusual aspects of this history that have received less scholarly attention. More than one author, for example, examines the phenomenon of ‘suicidal murderers’. These individuals, who were mostly women, were so fearful of God’s wrath (if they killed themselves) that they purposefully murdered others. This resulted in their own execution for premeditated murder. Since their own death (their ultimate goal) would be achieved by an executioner’s hands, they would be spared eternal damnation. Children were often the chosen target of this tragic gambit, since, without sin, the victims would be guaranteed an entry into heaven. Those of less nerve might falsely confess to other murders or to bestiality, or recklessly expose themselves to danger. Early modern suicide, it would seem, occasioned a surprising degree of inventiveness.

Although the contributors to this book tend to reaffirm existing historiographical themes rather than to pose any radical new interpretations, the reach of authors rarely exceeds their grasp. Detailed archival work coupled with elegant writing reflects well on the editor, the contributors and Cornell University Press. Furthermore, the high quality of the scholarship legitimizes the value of adding historical perspectives to this troubling social phenomenon. While mental health professionals wrestle with the guilt of having done very little to dent suicide rates in the twentieth-century West, they can at least take some solace in historical perspectives on the subject, which suggest that suicide is a long-standing and robust phenomenon, seemingly impervious to most types of religious prohibition and medical intervention.

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Chris Philo. **A Geographical History of Institutional Provision for the Insane from Medieval Times to the 1860s in England and Wales: The Space Reserved for Insanity.** *Lewiston, NY: The Edwin Mellen Press, 2004. Pp. 678. ISBN 0-7734-6509-X.*

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In this ambitious study Chris Philo reinvigorates a Foucauldian perspective on the history of provision for the mad. Philo’s chief concern is to reconsider the central arguments in Foucault’s *Historie de la Folie / Madness and Civilization*

through a careful reading of an immense corpus of primary and secondary material, much of which was not considered by Foucault himself. The result is an impressive, and certainly at times brilliant, contribution to the history of madness and psychiatry that defends, nuances and extends those aspects of Foucault's work which, in Philo's view, remain compelling to our understanding of 'the space[s] reserved for insanity'. I would argue that Philo, in fact, need not feel as indebted to Foucault as he rather humbly indicates, for there are some major insights in Philo's geo-historical reconsideration of the subject which, though they may be Foucault-inspired, are more 'Philodian' than 'Foucauldian' *per se*.

Central to this book is Philo's thoughtful reinterpretation of Foucault's classic and controversial text. For Philo, there are three enduring insights brought to the debate on madness by Foucault's work: his recovery of an historical turn in the juxtaposition of reason and unreason; his deployment of a theoretical eclecticism with which to better understand this major turn; and his geographical approach to the study of madness. Philo stresses that for Foucault it is the broader 'Reason-Madness nexus' (p. 36) that is essential to understanding Western engagements with madness, and not merely how those considered mad were understood and treated (though this too becomes an essential aspect of the much larger argument). Philo reminds us that Foucault's original claim was that reason and unreason were in a state of relatively free exchange during much of the medieval period, but that the Renaissance and the Enlightenment brought to reason increasing claims over madness which culminated in a sealing off of the one from the other. Part of this process included the linguistic layering-up of reason (including an increasingly thick medical layer), which, by the nineteenth century, had effectively silenced and subsumed madness. Philo sees Foucault's use of a cocktail of theoretical approaches as an advantage to his articulation of this reason/unreason nexus. Historical materialism accounts for how a wide range of unreasonable behaviour, including madness, was brought into servitude by the economic imperatives of capitalism, while post-structuralism explains, culturally, the discursive process by which reason became disentangled and increasingly 'estranged' from unreason (p. 37). These insights, argues Philo, owe much to Foucault's 'alertness to spatial relations in the history of the mad-business' (p. 42), something that has subsequently been lost by the bulk of revisionist historians of madness whose work suffers from the 'suppression of space by time' (p. 21).

This having been said, Philo does point out that Foucault's work, though benefiting from a consideration of the geographies of madness, needs to be considerably nuanced through 'areal differentiation', that is, by a more solid geographical grounding of understandings and responses to madness. This, then, constitutes the major goal of Philo's own work – a careful siting and re-evaluation of the spaces reserved for madness in England and Wales from medieval times to the 1860s.

So, what is revealed by Philo's massive 'close' geographical study of madness in England and Wales as it relates to the more salient aspects of Foucault's 'deep' thinking about the subject? First, Philo's historical geography of mad spaces from the 1100s to the late 1600s does indeed appear to indicate that an 'untidy geography' of 'chaotic space' dominated provision for the mad. For Philo, this is significant because it buttresses Foucault's argument that there existed a more open dialogue between madness and reason during this time. Equally important, Philo's study of holy wells, holy shrines, monasteries, hospitals and retreats effectively demonstrates a diversity of responses to madness that defies earlier historians' depictions of this period as one of unmitigated harsh treatment of the mad. This is an empirical contribution that all historians of psychiatry, regardless of intellectual orientation, will appreciate.

Second, in chapters four through seven, Philo reconstructs the overlapping temporal and geographical spaces reserved for madness during the eighteenth and nineteenth centuries. He organizes these chapters by 'type' of confinement: secure places (including gaols, houses of correction, poorhouses and workhouses), private madhouses, charitable lunatic hospitals and public asylums. Certainly this massive gathering of primary material on confinement enables Philo to revisit the most contentious of claims by Foucault – that of a 'great confinement' of mad people in the Early Modern period. While perhaps not indicating that the confinement was as widespread as Foucault alleges, the careful mapping of mad spaces in Philo's work does create a picture which could perhaps upgrade Akihito Suzuki's notion of a 'small confinement' to a 'medium', or perhaps even 'large' confinement.

More importantly, in these four chapters, Philo brilliantly assesses the complex geographical and historical overlapping of discourses on madness that were embedded in each mode of confinement. In essence, Philo argues persuasively that the siting of mad spaces was very much the product of the conceptualizations of madness that informed their location. Multiple forms of mad space overlapped in the eighteenth and nineteenth centuries, and these spaces embodied competing discourses over the proper management and understanding of madness and of the mad. For example, Philo observes that charitable lunatic hospitals, though not numerous, had an 'urban bias' and a medical orientation which contributed to the separation of the mad from other confined groups, while also emphasizing the medical nature of their plight. This partly set the stage for the crucial battles between medical and moral geographies of madness – ones that underscored the rhetorical battles between William Battie and John Monro, or that differentiated the spatial and institutional constituents of the urban and medical St Luke's Hospital from the rural and moral York Retreat. Philo sees a kind of medical/moral 'fault line' emerging by the nineteenth century, one that gave way to the 'moral locational discourse' of the county public asylum and an attendant uneasy alliance of medical and moral explanations of madness. Although this is only a fraction of the insight Philo offers in his book (it is,

after all, 678 pages long!), it gives some idea of its great potential for re-evaluating madness over the long durée in England and Wales.

One important aspect of the history of madness that fits rather awkwardly in this book is home or domestic confinement. At one point Philo acknowledges that his focus might 'underplay the extent to which [the mad] ... were left in the charge of family, friends and neighbours' (p. 178). At another point, engaging with Roy Porter's claim that most mad people were not institutionalized at all during the supposed 'great confinement', Philo suggests that 'such "domestic confinement", wherein mad people commonly ended up chained alone in attics or cellars, could be seen as an element within, not as opposed to, the sequestered geography envisaged by Foucault' (p. 186). I would suggest that the very long history of domestic confinement and care of the mad, and the understudied nature of its multiple forms, make these claims difficult to sustain. While it must be said that this is not a focus of Philo's work, his challenging analysis of the spaces reserved for insanity will no doubt encourage others to consider how the emerging literature on domestic/family confinement and care fits into a geographical history of madness. What is needed is an approach to the domestic geography of madness similar to that offered by Philo for institutional provision.

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Pamela Dale and Joseph Melling (eds). **Mental Illness and Learning Disability Since 1850: Finding a Place for Mental Disorder in the United Kingdom.** *Abingdon and New York: Routledge, 2006. Pp. xii + 234. ISBN 0-415-36491-4.*

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The historical development of institutional care for mentally disordered people continues to engage the attentions of historians. That it remains a fertile field for research is amply demonstrated in this new collection of articles. Although the asylum is still the central reference point, it is no longer the sole focus of scholarly attention, as reflected in several of the chapters. Even in the nineteenth century, other institutions such as workhouses were providing a significant alternative option for many people deemed insane or otherwise mentally disordered, as Elaine Murphy's contribution carefully illustrates. In the twentieth century various newer types of institutional facilities emerged, and part of this collection represents the beginnings of an appraisal of their relative historical significance.

The book contains much to interest both historians of psychiatry and of learning disabilities. Most of the individual contributions appear to be part of