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Variations in the official prevalence and disposal of the insane in England under the poor law, 1850–1900

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In the latter half of the nineteenth century, the vast majority of those recognized as insane were pauper insane. The local poor law officials and magistrates determined who was regarded as one of the pauper insane and what happened to them. This paper shows that there was considerable variation across England in the proportion of the population regarded as insane. Although most of the insane were committed to an asylum, a substantial minority (20–25%) were retained in the workhouse, and there was also considerable variation in the numbers dealt with in this way. Contrary to views expressed at the time and more recently, areas with higher levels of industrialization did not have higher rates of insanity. In fact the trend was definitely in the reverse direction. The factors that influenced the poor law authorities to retain the insane in the workhouse did not appear to be the additional expense of asylum care or the availability of beds in local asylums. The majority of the insane retained in the workhouse were idiots and imbeciles rather than lunatics, although some workhouses contained considerable numbers of the latter. The management of the insane in the workhouse was generally poor.

Keywords*: admission rates; asylums; industrialization; insanity; England; pauper insane; psychiatry; 19th century*

In more recent times the historiography of insanity has started to explore the role of the poor law in society's response to the problem of insanity (e.g., Bartlett, 1999; Forsythe, Melling & Adair, 1996; Murphy, 2003). The public lunatic asylums of the nineteenth century which followed the 1808

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and 1845 Acts, were designed to cater principally for the pauper insane. In 1845 over 80% of those regarded as insane were paupers, and this proportion increased further throughout the rest of the century (Walton, 1979). While these proportions refer to England and Wales combined, they are highly likely to be typical of the English counties outside the metropolis which form the focus of the analyses presented in this paper.

Both Bartlett (1999) and Wright (1998) have described the procedures laid down for the admission of the pauper insane to asylums. Although the system changed marginally over the period, it was the responsibility of the local poor law officials and magistrates to determine who was regarded as insane. Those considered to be possibly insane would come to the notice of the poor law relieving officers, quite often at the instigation of their family, and the relieving officers would present the case to a magistrate and a medical certificate would be obtained. For much of the period this certificate could be provided by the poor law medical officer. The magistrate could then order committal to an asylum, although this was not the only possible response under poor law provisions. Regardless of disposal, this procedure ensured that the poor law system played a central role in determining who was regarded as one of the pauper insane.

The Parliamentary Papers of the House of Commons (PPHC) contain the annual reports of various statutory bodies including those relating to the poor law and insanity. The *Report of the Local Government Board* for 1900 gives summary data covering the previous four decades, in relation to the pauper insane (PPHC, 1900: 368). This reveals that in 1860 about 50% of the acknowledged pauper insane were located in county and borough asylums and that this proportion increased steadily to around 75% by 1900. The second most likely disposal was to admit the individual to the workhouse. About 25% of the pauper insane were resident in workhouses in 1860 and a little less than 20% in 1900. It was also the case that some insane paupers were held in the workhouse for a short period before being sent on to the asylum. Other possible disposals were to offer outdoor relief under the poor law or to send the person to a private asylum, although the latter had become a rare option by 1860.

The first point that follows from this is that not all those considered to be insane were sent to asylums, and a substantial minority were looked after using the conventional poor law provisions of admittance to the workhouse and outdoor relief. Secondly, the asylum and its officials, including the superintendent, had little or no influence over who was determined to be insane and admitted to the public asylum – a point that is acknowledged by Hunter and MacAlpine (1974: 17) in their account of the Colney Hatch Asylum. Finally, even in the latter half of the nineteenth century, the workhouses contained substantial numbers of the insane: around 17,500 in 1900.

One characteristic of the poor law as it applied to England and Wales was that it required key decisions concerning individuals to be taken at a local level.

This was still so under the 'new poor law' of 1834 onwards. This was despite provisions for a degree of central control in the 1834 Poor Law Amendment Act, partly in an attempt to ensure uniformity of practice. Research into the workings of both the old and new poor law has generally shown that local decision-making led to wide variations from place to place in the application of the provisions of the poor law in general (e.g., Brundage, 2002; Crowther, 1981; King, 2000). Although not specifically studied previously, similar variation might be expected in the poor law response to insanity.

The present study explored variation in the official prevalence of insanity in England between 1850 and 1900. The annual reports of the Poor Law Board and its successor from 1871, the Local Government Board, provide tables indicating the numbers offered relief, whether indoor or outdoor, on 1st January of the relevant year and also show the numbers considered to be insane (PPHC, 1850, 1860, 1870, 1880, 1890, 1900). In these particular tables, the insane classified as receiving indoor relief were those resident in the workhouse. The insane listed as receiving outdoor relief (i.e., outside the doors of the workhouse) included those in asylums whether public or private, as well as those provided with conventional outdoor relief. The data analysed in this paper were those given for the years between 1850 and 1900 inclusive, considered at 10-year intervals and so providing six sets of data.

Before going on to describe the data, it is necessary to draw attention to three main limitations. Firstly, the data in the tables are aggregated by counties and in consequence analyses had to be carried out on a county-by-county basis. Under the new poor law, each county would contain several poor law unions which were groups of parishes that acted together for poor law purposes, including the provision of workhouses. Since unions could vary quite considerably within a county, it might have been regarded as more desirable to carry out the analyses by comparing unions rather than counties. On the other hand, the numbers of insane in many unions would have been quite small, making the data from individual unions subject to considerable influence from chance fluctuations. As will be seen, appreciable variation across counties did occur, and counties vary enough in character to enable some exploratory analyses to be carried out.

The second major limitation arises from the fact that the method of aggregation of data from the metropolis and the three home counties of Kent, Middlesex and Surrey varied across the period. A similar problem was found with Wales. Initially the data for separate Welsh counties are given, but in later years groups of Welsh counties are considered together. Because of this, and to preserve comparability across the period, the data analysed were based on the 38 English counties after the metropolis, Kent, Middlesex and Surrey had been excluded.

Finally, the data considered relate to the numbers of insane officially recognized by the poor law authorities. It is highly unlikely that local officials were trying to apply any uniform criteria to determine who was to be regarded as

insane. In consequence, at least some of the variation in prevalence described below is probably attributable to the use of different criteria.

Variation in prevalence

Since the tables containing the data on which the analyses are based also provide the latest population estimates for the counties, it was possible to convert the total numbers of the insane for each county into rates per 100,000. This then permits comparison across counties which vary considerably in population (Rutland at one extreme had a population of around 20,000 in 1880 and Lancashire, at the other, had a population over 100 times greater). Table 1 shows the mean rates across all 38 counties, the standard deviation and the 95% confidence limits for each decade between 1850 and 1900. (It was considered better to indicate the extent of inter-county variation in terms of the 95% confidence limits because providing the overall range, as indicated by highest and lowest, is liable to being heavily influenced by random variations at the extremes.)

It can be seen that the mean rate tends to increase over time and by a factor of about 2.7 between 1850 and 1900. In addition, there is considerable inter-county variation in the rates of insanity. Standard deviations are quite substantial as compared with the means, and in every instance the upper end of the 95% range is at least twice that of the lower end. This means that the county with the highest rate always has a rate that is, at the very least, twice that of the county with the lowest. For some years, especially 1850 and 1900, the variation between counties is much wider than this.

Another way of examining variation is by geographical location. This remained fairly constant over the period, with central counties in the Midlands and further south tending to have the highest prevalence (such as Northamptonshire, Buckinghamshire, Berkshire, Gloucestershire, Wiltshire and Hampshire). Those counties such as Derbyshire, Yorkshire, Cheshire and Northumberland, which lie north of the Wash, tended to have lower prevalences, and the same was also true of the extreme south-west, especially Cornwall.

TABLE 1. *Rates of insanity per 100,000 population*

Year	Mean rate	Standard deviation	95% confidence limits
1850	107.0	32.8	42.7–171.3
1960	186.0	35.2	117.0–255.0
1870	239.2	43.3	154.3–324.1
1880	268.3	53.0	164.4–372.2
1890	264.4	59.9	147.0–381.8
1900	290.8	76.0	141.8–439.8

Explaining the variation in prevalence

If it is accepted that the variation in the official rate of insanity across counties is appreciable, the question arises as to why there is such variation. The first possibility is that there is nothing special about the variation in rates of insanity. It may be that those areas which recorded the highest levels of pauperism in general were exactly the same as those with the highest rates of insanity. Explaining variations in insanity then amounts to explaining variations in pauperism as a whole.

This argument does not stand closer examination, and three lines of evidence attest to some considerable independence between rates of insanity and rates of pauperism in general. In the first place, rates of insanity increased considerably during the period 1860–1900 at a time when the levels of pauperism in general were declining (PPHC, 1900). Secondly, Williams (1981) has pointed out that 'every class of nineteenth-century pauper, with the exception of lunatics, was more numerous in winter than in summer' (p. 74), thus indicating that seasonal fluctuations in pauperism did not affect lunatics in the way that they affected other classes of pauper. Finally, when the rate of insanity is correlated across counties with that for pauperism as a whole, the correlations turn out to be positive but only modestly so. In 1870, a typical year, the overall rate of pauperism correlated at 0.54 with that for lunacy. This means that variations in pauperism as a whole in this year can account, at the very most, for only 29% of the between-counties variation in insanity.

It follows that some other explanation for the variation in insanity is necessary. As has been indicated above, there is some systematic variation linked to geographical location. In very rough and ready terms, southern counties generally have a higher rate of identification of insanity than those in the north. However, this still begs the question as to why north-south differences should arise, although it has been shown that poor law provision in general was more generous in southern than northern counties (King, 2000).

One possible explanation can be derived from contemporary attempts to account for the steady rise in the overall number of the insane across most of the nineteenth century – a rise which was well in excess of what might be expected solely on the basis of population growth and which had been noted quite early in the century (Halliday, 1829). There was a considerable contemporary debate over the reasons for this rise, with various positions being aired in a discussion of the problem which was included in the *Fifteenth Annual Report of the Commissioners in Lunacy* (PPHC, 1861). The various ideas put forward in this discussion have been set out by Scull (1993). One group of explanations for the rise embodied the notion that the increase was due to some sort of artefact. For example, there had been alterations in the ways that the data were recorded and it might be the case that there was increasingly better recognition of those who were mentally disturbed. Many

eminent nineteenth-century figures regarded the increase as more apparent than real (e.g., Maudsley, 1877; Robertson, 1871).

Of more relevance to the present paper are those contemporaries who regarded the rise in numbers identified as insane as reflecting a true rise in the prevalence of insanity and not merely an artefact. More specifically, the argument was that the increase in insanity was brought about by the pressures of industrialization or 'mechanical civilisation' (e.g., Bucknill and Tuke, 1858; PPHC, 1861). This is a hypothesis that has also attracted some more modern interest, with Torrey (1980) and then Hare (1983, 1986) claiming that there had been a true increase in insanity, especially schizophrenia, across the nineteenth century. Apart from the increase in the official numbers of the insane, Hare argues that descriptions of cases with symptoms akin to schizophrenia are rare prior to the nineteenth century and only start to become common as that century progressed. The implication of this argument, Hare argues, is that schizophreniform disorders would have been caused by, or made much more common, by the occurrence of industrialization. As Hare has argued, if a true rise was the consequence of industrialization, this would have implications for the aetiology of psychotic disorders.

If increasing industrialization was responsible for the whole or even a part of the increase in insanity over time, it would be expected that, at any one time, the more industrialized counties would have higher rates of insanity than those which were more predominantly agricultural. Indeed, it was this version of the hypothesis that was actually explored by Bucknill and Tuke (1858). They had identified seven counties as being more extensively industrialized at that time (Lancashire, West Riding of Yorkshire, Durham, Cheshire, Derbyshire, Nottinghamshire and Northumberland) and seventeen as being more predominantly agricultural (Leicestershire, Norfolk, Suffolk, Essex, Cambridgeshire, Northamptonshire, Hertfordshire, Bedfordshire, Buckinghamshire, Oxfordshire, Berkshire, Sussex, Wiltshire, Dorset, Somerset and East and North Ridings of Yorkshire). This selection of more industrial as opposed to more agricultural counties was adopted here. It can be noted that once the metropolitan counties of Kent, Middlesex and Surrey have been excluded, this selection of more industrialized as opposed to predominantly agricultural counties is very similar to that used for other industrial versus agricultural comparisons by Williams (1981).

For each of the years studied, the mean overall rates of insanity for the more extensively industrialized counties were compared with those from the predominantly agricultural counties. The results of this analysis are given in Table 2. Contrary to the hypothesis that industrialization is associated with higher rates of insanity, in each of the instances the pattern shows the reverse trend and to a statistically significant degree for five out of the six data points.

TABLE 2. *Comparison of more industrialized and more predominantly agricultural counties with regard to recorded prevalence of insanity (probability levels for comparison based on use of* t*-test)*

Year	Industrialized mean (*SD*)	Agricultural mean (*SD*)	*p*
1850	88.5 (19.9)	105.5 (23.5)	0.061
1860	145.7 (25.7)	204.3 (29.1)	< 0.001
1870	190.8 (28.4)	260.4 (36.5)	< 0.001
1880	220.1 (34.6)	279.3 (43.9)	< 0.001
1890	198.1 (31.0)	282.4 (50.1)	< 0.001
1900	234.7 (38.1)	310.0 (41.6)	< 0.001

It can be noted that the outcome of this analysis is directly opposed to that of the analysis carried out by Bucknill and Tuke (1858). The source of this contradiction lies in the use of different indices for the rate of insanity. The present paper has used the rate of insanity per unit of overall population as the dependent variable, whereas Bucknill and Tuke (1858) used the proportion of insane within the total number of identified paupers. If it is right to accept the argument set out above to the effect that insanity was only, at the very best, weakly linked to pauperism as a result of other causes, then the Bucknill and Tuke (1858) index is inappropriate, and the only meaningful index of insanity for present purposes is that used in the current analysis.

Another possible explanation, which still holds some present-day interest, might be that areas of high population density are likely to have higher rates of mental disorder, as was found in a recent epidemiological survey in Sweden (Sundquist, Frank and Sundquist, 2004). Correlating population density with the rate of insanity for each of the six years studied between 1850 and 1900 produced correlations which were negative in every case, contrary to the hypothesis linking density with rates of insanity. For four data points these negative correlations were statistically insignificant, but those for 1890 and 1900 were significant at the 5% level (–0.39 and –0.35, respectively). If anything, areas of lower population density were associated with higher rates of insanity.

Areas with high population density would be expected to overlap with areas of high industrialization to a considerable degree. It is therefore not surprising that if more industrial areas had lower rates of insanity, then areas of higher population density would show the observed tendency to lower levels of insanity as well. As a result, the findings with regard to industrialization and population density complement one another. While statistical procedures exist, in principle, to tease out the relative independent effects of industrialization and population density, the available historical data do not permit their deployment.

Variation in disposal

As already stated, the poor law authorities could deal with those regarded as insane in many ways. This raises the possibility that different places may differ in the proportions of their insane population that they sent to the asylum, retained in the workhouse, and so on. There is indeed evidence that such variation occurred across the different poor law unions within Devon and between parishes in East London (Forsythe *et al*, 1996; Murphy, 2003).

The data available in the various annual reports on which this study has been based, enable counties to be compared with regard to the extent to which they retained the insane within the workhouses. The mean number of insane housed in workhouses expressed as the rate per 100,000 overall population for each of the years studied, together with an indication of the between-county variation (standard deviations and 95% confidence limits), is given in Table 3. Again it can be seen that the variation across counties between 1850 and 1900 is quite considerable.

What explanations were there for this variation? It is known that the cost of keeping an insane person in the asylum was always appreciably larger than looking after that same individual in the workhouse, so making it possible that cost was a significant factor. In those counties whose unions were generally more financially stretched, it would be expected that a greater number of the insane would be retained within the workhouse. The fact that cost appears to have been a factor in determining whether some pauper lunatics were sent to an asylum earlier in the century adds some plausibility to this hypothesis (Hodgkinson, 1966)

There are two sets of evidence which suggest that cost was not a major factor in determining whether the authorities sent an insane pauper to the asylum in the second half of the nineteenth century. Firstly, changes in funding having the effect of making it appreciably less financially burdensome for the local poor law authorities to support their insane in the asylum were introduced in 1874 (a grant in aid of four shillings per week per person sent to the asylum). However, the table of summary data for 1859 to 1900

TABLE 3. *Rate per 100,000 of total county population residents regarded as insane and held within a workhouse*

Year	Mean	*SD*	95% confidence limits
1850	36.4	11.1	14.6–58.2
1860	44.3	17.7	9.6–79.0
1870	52.7	16.7	20.0–85.4
1880	53.2	17.9	18.1–88.3
1890	48.1	16.1	16.5–79.7
1900	40.7	16.1	9.1–72.9

provided in the report of 1900 (PPHC, 1900: 368) suggests that the number of paupers in asylums increased steadily and linearly with no indication of any sudden increase around 1874 or shortly after, as might be expected if unions at this time were having an appreciable financial burden lifted, or at least drastically reduced. Secondly, if the variation in use of the workhouse was due to some counties being more affected by financial considerations, then the extent of inter-county variation would be expected to decline after 1874. There is no sign of this.

Another potential explanation for variation in the use of the workhouse lies in the fact that the period 1850–1900 was also one of considerable asylum expansion because of the rapidly increasing need for beds. Possibly in those places where there was a greater pressure on beds, the poor law authorities were constrained to retain greater numbers of the insane in the workhouse. This hypothesis was examined for one year, 1880, by which time all the counties had at least one public asylum. If shortage of asylum beds was an important factor, it would be expected that there would a negative correlation between bed numbers in the local asylum(s) and the number of insane in the workhouses when both numbers were corrected for overall population size. This was not the case in 1880, and the correlation actually obtained was 0.04 which is extremely close to zero and far removed from any of the usually accepted levels of statistical significance. This argument does not take account of the continuing use of private asylums by poor law unions. However, the use of private asylums was so small by this time that any impact of the use of these on the obtained correlation must be very small.

Neither of the possibilities explored above have come near to explaining variation in the use of the workhouse, but a further question might be addressed: whether there is anything that particularly characterized those insane retained in the workhouse as opposed to those transferred to the asylum. A preliminary attempt to answer this question was made, based on the workhouse returns for the 1881 census. The vast majority of these have been reproduced by Higginbotham (2002), and a random sample of 40 unions was taken from this source. It was not an ideal random sample because this source does not include all workhouse returns from the 38 counties studied. However, the sample used did cover workhouses from a variety of counties in different parts of the country and workhouses from more rural and more predominantly industrial areas. Given the circumstances, the sample chosen appears to be reasonably representative, although a truly random sample would have been preferable.

In the census of 1881, unions were required to record all inmates and to indicate those who were insane, subclassified as either lunatics or as idiots/imbeciles. In the whole sample from 40 unions there were over 12,000 residents of whom 1227 (or marginally over 10%) were considered insane. Of this insane group, very nearly 80% were classified as idiots or imbeciles, with the remaining 20% being lunatics. It was especially noticeable that within

the 40 unions in the sample, two of these (Preston and Bolton) stood out as being very different from the rest. At Preston 84% of insane workhouse residents were classified as lunatics and in Bolton this was 81%. Just why these two unions should be so different from the rest is not clear. Their common features appear to be that they are both in Lancashire and both in relatively industrialized areas of that county. However, checking on a few additional Lancashire unions from the more industrialized parts of that county (e.g., Burnley, Haslingden and Salford) reveals a pattern of insane residents in their workhouses very much in line with the overall trend elsewhere. Just why Preston and Bolton were so dramatically different would bear further investigation.

If the two anomalous unions are dropped from the original sample of 40, the overall proportion of lunatics among the insane workhouse residents drops from around 20% to 6%. To put it another way, the proportion of idiots and imbeciles rises from around 80% to 94%. Setting Bolton and Preston and any others like them aside, it appears that by 1881 the overall majority of those regarded as lunatics, who were by far the largest subgroup of the insane, must have been sent to asylums, with very few being retained in the workhouses.

This contrasts with the position in 1837 when almost exactly 25% of the insane in workhouses were lunatics (Hodgkinson, 1966) as opposed to around 6% in 1881, assuming that Bolton and Preston were anomalous. This is consistent with the view that the increasing availability of beds in public asylums, together with the requirement in the 1845 lunacy legislation to transfer all dangerous lunatics to an asylum, resulted in a reduced tendency to retain lunatics within the workhouse. That many idiots and imbeciles continued to be housed in the workhouses is not surprising since it is only rather later that institutions funded by public sources and specifically designed to cater for idiots and imbeciles became available. The very few specialist institutions for this group in existence by this time were subscription asylums such as Earlswood in Surrey and heavily biased to the care and training of children (Wright, 2001).

Discussion

Despite the steady increase in the proportion of the population regarded as insane between 1850 and 1900, the picture in terms of the factors studied here appears to have remained relatively static. There was an increase in the proportion of the insane sent to asylums but a smaller decline in the proportion retained within the workhouses. Although the proportion retained in the workhouse declined by about 5% over this period, the dramatic rise in the overall number of the insane meant that in terms of absolute numbers there was an actual increase of insane within workhouses, and the figure reached about 17,500 in 1900 (PPHC, 1900).

The main finding emerging from the present study is the wide variation in the administrative prevalence of insanity in the non-metropolitan counties of England in the latter half of the nineteenth century. Explaining this variation is not easy. Where contemporaries considered that the steady increase in official rates of insanity was real, as opposed to being an artefact produced by such things as the ways in which insanity was recorded, the favoured explanation was that the pressures of a modern, industrial civilization were responsible. Applying this hypothesis to the data analysed in this paper failed to confirm this view, and there was a clear trend in the contrary direction, with more agricultural counties generally having the higher prevalence. Consistent with this, given the link between high population density and industrialization, for 1880 there was a trend towards lower rates of insanity in those counties with the lowest population densities.

The finding of lower rates of insanity in the more industrialized counties is contrary not only to the views of many contemporaries but also to some more recent authorities such as Hare (1983, 1986) who have wanted to use industrialization as a causal factor for schizophreniform disorders. In passing, it can also be noted that the recent publication of John Monro's casebook for 1766 (Andrews and Scull, 2003) raises doubts in relation to Hare's claim that disorders akin to schizophrenia were rare before the nineteenth century. Not only did Monro describe specifically psychotic symptoms like hearing voices and apparent delusional ideas in some of his patients, but the way he described clinical features, or sometimes failed to do so, suggests that he paid little attention to what would now be regarded as key features of psychopathology. Possibly accounts of schizophreniform disorders are rare, if not absent, prior to the nineteenth century simply because mad-doctors did not think it important to record the relevant signs and symptoms.

It has already been mentioned that Bucknill and Tuke (1858) claimed to have found higher rates for insanity in more industrialized counties but that this conclusion can be discounted in view of the inappropriate index of insanity used. Of greater potential relevance in relation to the present findings is Walton's (1979) analysis of admissions to the two county asylums then existing in Lancashire (Haydock Lodge and Lancaster) for the years 1848–50 according to the previous place of abode or settlement. The latter was subdivided into four categories. The large-scale urban centres of Manchester and Liverpool with their surrounding areas were responsible for a disproportionately large number of admissions, given their total populations. The textile towns, such as Rochdale, Oldham and Blackburn where a third or more of the adult male labour force was involved in the textile industries, were, in contrast, under-represented in terms of the proportion of the population admitted. Other areas in the county, especially the rural areas, showed an admission rate more or less consistent with their population size.

That the textile towns in Walton's (1979) study show a relatively low rate of asylum admission fits in with the present findings, although the higher rates for Manchester and Liverpool do not. What complicates any comparison of Walton's data with those of the present study is that Walton was only concerned with those admitted to asylums and not the overall rates of insanity which would include those with other disposals. Walton's splitting of places into four different categories also involved a more sophisticated analysis of area of origin than was possible in the present paper. Nevertheless, Walton's findings indicate that the true picture may be more complex than it has been possible to determine by the current study and that the relationship between types of industrial setting and rates of insanity might benefit from further study.

A major potential limitation of the analyses carried out in this paper, as indicated earlier, is that the data on which they were based are for the official numbers of the insane, and the variations described may reflect differing criteria used to identify the insane rather than any variation in 'true' rates as based on some more objective or replicable criteria for defining insanity. This is certainly the case, but even if all the variation could be satisfactorily explained by the use of different identification criteria, this only pushes the question one stage further back. Why then were there some systematic inter-county biases in the readiness of local poor law officials to recognize insanity?

This latter question is not one that can be explored within the parameters of this study. However, one possibility lies in the fact that the northern industrial counties did differ from many of those in the south in their reactions to the requirements of the new (i.e., post 1834) poor law (e.g., Hirst, 2005) and that these attitudinal differences may have impacted on their response to a possible case of insanity.

Not only was there a variation in rates of insanity, but there was also considerable variation in disposal and particularly with regard to the numbers retained in the workhouses. Again, explaining the variation proved difficult. The cost of sending insane paupers to the asylum does not seem to have been a significant factor, although it may have been an issue for a few unions. If the data for 1880 are typical, availability of asylum beds does not seem to have had a great influence on the numbers looked after within the workhouses. The 1881 census data show that few lunatics remained within the workhouses and, setting aside a small number of unions, the poor law authorities appear to have sent most lunatics to the asylum and retained idiots and imbeciles in the workhouse. Just why a few unions such as Preston and Bolton, had high numbers of lunatics in their workhouses cannot be explained by the data considered here, although perusal of the relevant local poor law records, if they are still available, might give some indication.

Marked variation in the willingness of poor law unions within circumscribed areas, namely Devon and East London, to send their pauper insane to public

asylums has been noted elsewhere (Forsythe *et al.*, 1996; Murphy, 2003). These have been ascribed to local political differences, and it could be that local political factors might have affected the readiness to use asylums in many other parts of the country.

Finally, this paper also further emphasizes the increasingly recognized view that any reasonably complete account of the way in which the insane were dealt with in the nineteenth century must take into account the important role played by the poor law and its local systems. Not only did the poor law officials and magistrates determine who was to be regarded as insane, at least for the great majority of the insane who were classed as pauper insane, but they also determined their disposal (to asylum, workhouse, etc.). Furthermore, the workhouse continued to be the place where a substantial minority (20–25%) of the insane were cared for during the latter half of the nineteenth century.

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