

Theaters of Madness

*Insane Asylums and Nineteenth-Century
American Culture*

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questions so painfully evaded in Emerson's work. In challenging the authority of depersonalizing, normalizing institutions in the democratic culture he so hoped to foster, Emerson blinked when it came to asylums. The moral treatment movement, however, also had its blindness. In depending so heavily on the universal convertibility of unreason to civility, it examined neither its own presuppositions nor the resistance it might encounter. For all Poe's nihilism, he had the virtue of never flinching, in part because he had made a career of staring down the animal within.

CHAPTER SIX



Out of the Attic

Gender, Captivity, and Asylum Exposés

VIRTUALLY COINCIDENT with the rise of the asylum movement in the nineteenth century was the rise of a new genre of captivity narrative: that of the patient wrongfully deemed insane who, upon release from an asylum, bravely exposes the institution that deprived him or her of the rights of an American citizen. After narrating his harrowing stay at McLean in the early 1830s, Robert Fuller moralized that “the liberty which we have enjoyed, and which the half finished monument on Bunker Hill was intended to commemorate, has vanished.—Let that monument be torn from its base,—we are no longer worthy of it.”¹ In this literature of countersubversion, the back asylum wards—where the unruly patients were kept, out of sight of visitors—are filthy, violent, raucous places where the mania of the patients is matched by the wanton sadism of the attendants. In one account, a man is killed for kicking over a water pail.² In another particularly gruesome tale—one pilloried by asylum authorities as evidence of continued mental illness—attendants kill several patients on a whim, even roasting one alive.³ Nearly every former patient who published a memoir protested that his or her incarceration in an asylum was a matter of disciplining deviant political and/or religious views. Far from representing American ideals of life, liberty, and the pursuit of happiness, they were bastilles, slave pens, or institutions more worthy of the Inquisition than of the American republic.

Some of these narratives sold well, although not always on terms that the authors intended. Phebe Davis's exposé of the Utica asylum, which the author of another exposé faulted as being detrimental to the cause, nevertheless went through four print editions; but in its sequel, she noted

painfully that her local paper had mentioned that “the extensive sale of her work proves that there are more lunatics out of the Asylum than inside of it.”⁴ Internal evidence in many of these texts suggests that authors read each other’s work. Moses Swan, for instance, wrote that “since I left the asylum I have availed myself of books written by different authors who have been shut up in lunatic asylums, whose disclosures correspond with the facts herein set forth in regard to the treatment of patients.”⁵ This self-conscious participation in a literary community indicates not just a narrative genre in the making, but the developing seeds of a protest tradition, one that would extend through the nineteenth century with the reportage of Nelly Bly (published in book form in 1887 as *Ten Days in a Madhouse*) and into the twentieth with such insiders’ narratives of institutional life as Clarissa Lathrop’s *A Secret Institution* (1890), Clifford Beers’s *A Mind that Found Itself* (1908), Mary Jane Ward’s *The Snake Pit* (1946), Ken Kesey’s *One Flew Over the Cuckoo’s Nest* (1962), Sylvia Plath’s *The Bell Jar* (1963), and Kate Millett’s *The Loony-Bin Trip* (1990). Most but not all of these were driven by a desire either to reform or to dismantle the power of psychiatric hospitals.

Radical as some of this later writing is, the first wave of American protest writing against institutional psychiatry generally shied away from the absolutist position that asylums should be abolished. Most writers in this burgeoning tradition accepted the central tenets of the moral treatment movement: that mental illness was a disease that should be cured by doctors; that treating patients in an enclosed environment would both protect them from perverting influences and keep society safe from the threat they posed; and that most of the patients inside were indeed insane.⁶ Time and again, after detailing horrific abuses, the writers stop to praise this or that superintendent and to acknowledge the necessity and even essential humaneness of such institutions. Elizabeth T. Stone, whose 1842 memoir of her incarceration at McLean detailed her persecution for her religious views, conceded that “there is no dispute but what there should be such an institution as an Insane Assylum [*sic*].” Her protest was specifically against private asylums and seemed to endorse the logic of state-run institutions: “But let it come under the jurisdiction of the Legislature and not have all the power consigned into the hands of a few individuals, over a distressed class of beings, a money-making system, at the expense of happiness, in a great measure.”⁷ Protests against public asylums also by and large accepted their necessity, albeit in some reformed state. “Although I have received maltreatment, in asylums in New York and Vermont States,” wrote Moses Swan, “I am not altogether opposed to these institutions, for there are insane persons who

have no homes, yet I protest against maltreatment.”⁸ Such acceptance could be motivated by humanitarianism, as in Swan’s case, or by a desire for law and order. In the midst of detailing the monumental idiocy of her captors, Mrs. George Lunt assures her readers that she does not contravene “the rational opinion of every social, intelligent being” that insane asylums are necessary. She is careful not to have imputed to herself a dangerous position: “As though some one would abolish them, or would, through falsely enthusiastic philanthropy, free all the inmates at once, thus launching upon society a fresh race of helpless beings incapable of self-protection”—or, she seems to imply, peaceable behavior.⁹

Typically, therefore, these protesters champion some sort of reformist agenda rather than a revolutionary liberation of all the inmates. Former patient Hiram Chase, a Methodist minister from Troy, New York, wanted to require a board of at least five asylum overseers chosen by the people to make a determination of each prospective patient’s sanity, to be followed by a jury trial. Those five board members were to be doctors familiar with state asylums. This would ensure that the asylum superintendent did not have total control of “the destinies of so many hundreds of souls.” Additionally, he advocated regulations governing doctors’ use of medicine beyond a certain period of confinement and treatment.¹⁰ Phebe Davis wanted the physicians to be older, for “we need fathers here, but we have only boys.”¹¹ She was also opposed to the admission of “foreigners” in “any of the public institutions in the United States.” (She found that Catholics in particular “took delight in annoying the American ladies.”¹²) Finally, she felt that “insane institutions are built much too large and too far apart. There should be about four in the State of New York, where there is now only one, for I noticed that the nearer a patient’s friends were to the institution, the better they were treated.”¹³ Most of the others simply wanted asylum superintendents to live up to the ideals of the asylum movement instead of abandoning them.

The reasons for this moderation on the part of the protesters are several. First, unlike advocates of the abolition of slavery, who formed the greatest protest movement of the nineteenth century, these men and women primarily argued not on behalf of an entire class of people, but on behalf of themselves. They were motivated at least as much by efforts to reclaim their social standing and reputations as by any sympathy for their brothers and sisters in bondage. They did not want to eradicate the social distinction between sanity and insanity—as most black (and some white) abolitionists wanted to eradicate the social distinctions between the races—but simply wanted to prove to the world that they were sane. That distinction, of course,

depended on the notion that others truly *were* insane; and so the pages of these memoirs are filled with descriptions of the delusional, bizarre, and sometimes frightening behavior of fellow patients. Writing of the patients he encountered on the notorious eleventh hall of the Utica asylum, Hiram Chase declared: "Many of them are so crazy they are obliged to be kept bound, some in cribs, some hand-cuffed, some tied down in seats, some with muffs, and many of them in strait jackets. I am not censuring anybody for this, unless it be the patients themselves, who have brought themselves to this state by imprudence and debauchery."¹⁴ Moses Swan described patients who "are more fit for penitentiaries than places like these."¹⁵

Despite the protesters' desire for more humane treatment, the effect of these narratives, then, was often to legitimize the custodial aspects of the asylum and to call into question the more ennobling goals of the moral treatment movement. If the patients who could benefit from medical treatment, elaborate cultural programming, and finely kept grounds were in fact threatened by being thrown in with violent maniacs, then perhaps the best response was to retain only the hardest cases and to release the "curables"—those in whose name the asylums had been established in the first place. The narratives alone, of course, did not cause the downfall of the moral treatment movement in asylum medicine. The hopelessly inflated cure rates offered by asylum superintendents were in time exposed; this gave cost-cutting legislatures strong arguments to reduce funding for state institutions. The Civil War added new financial burdens on the states and diverted the nation's attention from the problems of mental illness and the promise of new treatments; additionally, it introduced a new generation of shell-shocked veterans whose disturbances presented challenges that the often complacent and programmatic asylum superintendents were ill equipped to handle. Even more threatening to the old asylum regime was the emergence of a new generation of neurologists who prided themselves on empirical research and derided the older asylum keepers (not entirely unfairly) as bourgeois gentlemen who had no scientific basis for their claims. And new theories of degeneracy being developed by European alienists classed insanity as a dangerous, hereditary condition that posed a threat to the strength of nations. The enterprise of returning the insane to civilized society was not only misguided; it was dangerous to the species.¹⁶ Charles Darwin himself wrote, in *The Descent of Man* (1871) that "civilized men" built "asylums for the imbecile, the maimed, and the sick" while "our medical men exert their utmost skill to save the life of every one to the last moment. . . . Thus the weak members of civilized societies propagate their kind."¹⁷ In the age of

social Darwinism, neurologists and many others came to view the civilizing mission of the mid-nineteenth-century asylum as at best an anachronism and at worst a positive threat to humanity.

Amplifying these economic, political, and intellectual forces were the words of former patients critical of the asylum regime. One woman's work in particular helped to bring some of the reformists' agenda to pass by weakening the authority of the superintendents, an important factor in the downfall of the utopian asylum movement. This was Elizabeth Parsons Ware Packard, whose memoir of her confinement in the state insane asylum in Jacksonville, Illinois, sold well enough to support her in the years after her release and helped usher in a wave of legislation—known as the Packard laws—limiting superintendents' powers to admit and detain patients (especially female ones) in numerous states.¹⁸ Her allegations were spectacular: that her husband, a Calvinist minister, had confined her in order to keep her from spreading her own more feminized version of Protestantism (she believed that the Holy Ghost was "the Mother of the heavenly Christ"¹⁹) and also to keep his children from her influence; that the asylum superintendent, Dr. Andrew McFarland, admitted her only on the word of her husband and two physicians who were in her husband's Bible group; that McFarland essentially held her as a prisoner in order to satisfy her husband, while knowing full well that she was sane; and that McFarland's motives for holding her included a sexual attraction for her, which—despite her early affection for him—she rebuffed. She recounted horrifying stories of the abuse of patients, and—particularly poignant in this postbellum narrative—frequently compared the plight of patients to slaves. Like most of the other asylum protests, however, Packard's did not call for the abandonment of the asylum system. She simply wanted greater oversight: "legislation—such as will hold the Husband and Superintendent both amenable to the laws of this Republic in the exercise of their legal power over the wife and the insane patient"²⁰ (fig. 13).

By aligning "the Husband" with "the Superintendent," Packard marked the asylum as a bulwark of American patriarchy that was aligned with the institution of marriage; she is remembered today as much as a protofeminist as an advocate of patient rights.²¹ Indeed, upon her release from the asylum, she found herself imprisoned in her husband's home, subject to the whims of a tyrant far more abusive than the one who ran the institution which she charged with mounting "inquisitions, which [Americans] are blindly sustaining, under the popular name of charitable, humanitarian institutions."²² In addition to reforming the admissions procedures for



Kidnapping Mrs. Packard.

"Is there no man in this crowd to protect this woman!" See page 59.

No. 1.—"And this is the protection you promised my Mother! What is your gas worth to me!" See page 61.

No. 2.—"I will get my dear Mamma out of prison! My Mamma shan't be locked up in a prison!" See page 62.

FIGURE 13. Illustration in *Modern Persecution, or, Insane Asylums Unveiled* by Elizabeth Parsons Ware Packard (Hartford, CT: Case, Brainard, and Lockwood, 1873).

insane asylums, then, her political agenda included reforming marriage laws to ensure women's property rights after marriage, a goal that—in the immediate aftermath of the Civil War—she referred to as "Married Woman's Emancipation."²³ Again and again, she compared her condition as an asylum inmate to that of a slave: "Like the fugitive, I claim protection under the higher law, regardless of the claims of the lower."²⁴

The ideological conflation of women's rights and abolition is a story well told in American history; it usually begins with the Seneca Falls convention in 1848, organized in part by Lucretia Mott, an abolitionist who was outraged at being denied a seat at an international antislavery meeting in London. Increasingly, female abolitionists came to question their own disenfranchisement and second-class citizenship, a condition whose similarity to slavery was acknowledged by figures such as Frederick Douglass, who attended the convention, and by the most famous white abolitionist, William Lloyd Garrison, who addressed the Fourth National Women's Rights Convention in 1853. For all the moderation of her legislative goals, it was Elizabeth Packard's significant achievement to include designations of insanity along with those of race and gender in the national discussion about freedom that abolitionists and feminists had regenerated. (Garrison, however, inadvertently anticipated her on this score in his remarks at the convention: "The Common Law, by giving to the husband the custody of his wife's person, does virtually place her on a level with criminals, lunatics and fools, since these are the only classes of adult persons over whom the law-makers have thought it necessary to place keepers."²⁵)

But why was the most successful of former patients' attacks on institutional psychiatry during the moral treatment regime conducted by a woman, in the name of women's rights? And if reforming the asylum meant reforming other powerful American institutions, why was it marriage that came in the line of fire? It is true, as Packard protested, that many state laws allowed husbands to commit their wives to insane asylums "without the evidence of insanity required in other cases."²⁶ But male patients occupied asylum wards in roughly the same numbers as females, and as numerous narratives by male former patients make clear, the susceptibility of women to the authority of their male superintendents and husbands in no way implies that men were exempt from arbitrary detention and the specter of the stigma of insanity. In fact, one could argue that institutionalization was more of a threat to nineteenth-century masculinity than to femininity, since many of the chief liberties that were rescinded by the asylum authorities were male prerogatives: the rights to vote, draw up wills, and, in some instances,

hold property (women ceded these latter rights to their husbands under the law of coverture.) Recent scholarship has shown that men's illnesses were more likely than women's to be ascribed to immoral behavior like alcohol abuse or sexual promiscuity; that women—unlike men—were more likely to be sedated rather than physically restrained for violent behavior; and that women were more likely to be discharged cured than were men.²⁷

The convergence of asylum reform and women's rights is particularly striking when we consider that the abolition of slavery often highlighted the struggles of black men, and for over a century afterward the figure of the "freedman" rather than the "freedwoman" was considered the standard bearer of abolition. In iconography, the end of slavery is represented most memorably by Thomas Ball's Emancipation Memorial in Washington, DC, with its image of a standing Lincoln reading the Emancipation Proclamation while a kneeling male slave breaks the chains of slavery. The nearest analogue in asylum reform is Tony Robert-Fleury's 1876 painting *Pinel Freeing the Insane*, which represents male wardens liberating a disheveled young woman while Pinel stands erect, gazing on the spectacle of chained madwomen in various states of undress (see fig. 12 in chapter 5). Elaine Showalter reads the spectacle of female depravity on display in this painting as an indication of the association of madness with femininity, and yet, one might view it as anticipating the convergence of feminism and the critique of institutional authority that came in the twentieth century by suggesting that institutional confinement was mainly a method of controlling—or abusing—women.²⁸ Although the painting does not so much propagandize for the liberation of women as it does for their transfer from an abusive authority to a properly paternalistic one, it indicates visually the narrow rhetorical opening that institutional confinement could offer for women, rather than for men. For Elizabeth Packard, freeing herself from the institutional matrix of authoritarian marriage laws and a patriarchal asylum regime allowed her to fulfill her role as a wife and a mother. It is hard, conversely, to imagine a former male patient adapting Frederick Douglass's famously macho line about the emasculation of slavery and the potency of freedom: "You have seen how a man was made a lunatic (slave); you shall see how a lunatic (slave) was made a man"²⁹ (a fight with his overseer ensues, in which the overseer is given a sound thrashing).

A generation of feminist critics and historians in the United States has essentially elaborated on the conflation of the women's rights movement with the asylum protest tradition that Packard's appeals brought to prominence. In her influential *Women and Madness*, Phyllis Chesler argued in 1971 that

"madness and asylums generally function as mirror images of the female experience, and as penalties for *being* 'female,' as well as for desiring or daring not to be."³⁰ Chesler viewed Packard as a trailblazer who revealed that psychiatric institutions "tend to mirror or support the institution of marriage," a situation Chesler found held as true at the end of the twentieth century as it had during Packard's lifetime.³¹ Sandra Gilbert and Susan Gilbar's *The Madwoman in the Attic* (1979), a pioneering work of feminist literary analysis, does not explicitly address the historical conflation of feminism and asylum reform; but, like Chesler, the authors found that women (especially women writers) in the nineteenth century were doubly oppressed by restrictive social conditions and by an association with madness. The recurrent image of the confined madwoman in nineteenth-century women's fiction, they argued, was a figure for women's frustrated creative energies in a patriarchal society that denied them avenues of expression; the madwoman was a "double" for the writer's own secret self who allowed the writer to express "her own raging desires to escape male houses and male texts."³² Elaine Showalter, in *The Female Malady* (1985), argued against the dangerous romanticism of madness indicated in Gilbert and Gubar; instead, she viewed feminine madness as "the desperate communication of the powerless." Showalter acknowledged that women were not always more susceptible to confinement in institutions than men were; nonetheless, she accepted Chesler's notion that the conjunction of madness and femininity was pervasive both in cultural and medical realms in the last two centuries of social and literary history. "Madness," she wrote, "even when experienced by men, is metaphorically and symbolically represented as feminine: a female malady."³³ Finally, in her feminist analysis of asylum memoirs, *The Writing on the Wall* (1994), Mary Helene Wood returned to Packard herself, reading her narrative as a forceful protest against a patriarchal culture that defined in an extraordinarily confining way "to what extent women could be considered rational beings."³⁴

Each of these works builds powerfully, directly or indirectly, on Packard's protofeminist attack on the authority of the asylum by highlighting the ways in which psychiatric institutions could be used to do a patriarchal society's bidding. But they do not explain where Packard's attack came from, what conditions in the nineteenth century enabled her to come out of the attic—that is, what enabled her to represent her situation as a lunatic in a way that emphasized gender politics, and what allowed her message to be heard when the cries of many other former patients—and virtually all male patients—went unheard. The history of the asylum, in this light, is

remarkable as much for the unusual role it opened up for women to speak out against a powerful institution as it was for levying what Chesler called the "penalties" for being female.

One reason Packard found an opening for protest where so many men did not is that Packard frequently cast her appeals as defending traditional gender roles, rather than attacking them. Her husband, she argues, had abandoned his proper role as her "protector" by persecuting her: "It was the *protection* of my identity or individuality which I was thus claiming from my husband, instead of its subjection, as *he* claimed."³⁵ Critics of Packard's reformist agenda sometimes pointed out that Packard admitted in her memoirs that she fell in love with Dr. McFarland and hinted that spurned affection may have prompted her vendetta against him and the institution he represented. But Packard addresses this issue in the memoir itself, citing her earlier love for McFarland as the natural feelings of a woman who has been thrown from one protector to another: "In choosing him as my only earthly protector, I merely accepted of the destiny my friends and the State had assigned me, and in return for this boon thus forced upon me, I willingly offered him a woman's *heart* of grateful love in return, as the only prize left me to bestow."³⁶ In the words of Packard's biographer, "She wanted to be married and protected by a husband. In the absence of protection by him, she wanted protection from him."³⁷

A broader factor licensing Packard's protest is that despite the paternalism of insane asylums and hospitals, care for the indigent and sick was still traditionally considered to be women's work. One of the few nineteenth-century institutions other than schools over which women exerted authority was orphan asylums, where female leadership was consistent with the exalted roles for women in the domestic sphere.³⁸ Insane asylums, too, were domestic spaces writ large; the asylum's model of a well-regulated family was of a piece with the proliferating child-rearing literature of the nineteenth century, much of it written by women such as Catherine Beecher and Lydia Maria Child, who—according to David Rothman—"wished to bring the rules of the asylum into the home."³⁹ And so a political program that attacked a prominent antebellum institution in the name of women's rights could avoid being cast as unfeminine because it spoke from a position of domestic, rather than overtly political, authority.⁴⁰ After all, the greatest champion of the asylum movement was a woman, Dorothea Dix, who saw herself as doing a woman's traditional work of caring for the needy while she plunged into the masculine realm of politics. Even as she took on state legislatures and formed political alliances at the national level, Dix opposed

the reforms of the Seneca Falls convention and declined to give speeches in public out of a sense of feminine decorum.⁴¹ And so a political role had been created for a woman like Packard before she came along to inhabit it: that of the critic of the asylum's institutional authority as an abuse, rather than a defense, of domestic order.

Finally, asylum care was in some ways less stigmatizing for women than it was for men. The leading causes of insanity for women were disturbances in their domestic roles, such as the physical stress of childbirth and nursing, intense emotions, uncontrolled passion, or tight lacing of corsets. For men, insanity was thought to be brought on by intemperance, prolonged study, intense application to business, or sexual indulgence (especially masturbation), all of which were either dangers brought on by the competitive world of nineteenth-century capitalism or were thought of as threats to success in a marketplace that demanded regulated behaviors.⁴² Female patients could be cured by accepting the authority of the male physicians and transferring that acceptance back into their submissive roles as wives and daughters. In contrast, men were in something of a double bind: they had to passively accept authority within the asylum, but that acceptance was to be transmuted, somehow, into self-mastery and self-control on the outside. Carroll Smith-Rosenberg has argued that "the sick role" paradoxically empowered some women, who were temporarily released from the pressures of housework and relished a dynamic in which they could expect to be tended to rather than having constantly to care for others. Through bouts of hysteria or other women's illnesses, they "could express—in most cases unconsciously—dissatisfaction with one or several aspects of their lives."⁴³ Asylum care was an ordeal that most women would not wish for, but others wrote letters to their doctors thanking them for their care and remembering the asylum as a respite from their domestic duties. As one former patient of the Bloomingdale asylum wrote to Pliny Earle, "I think so much of you all that I shall continually recommend your establishment to all my acquaintances and friends and tell my husband to take me to no other place should Providence afflict me again as heretofore."⁴⁴ Men could be appreciative, too, but friendly letters from former male patients to Earle tend to be nervous in their acknowledgment: one man, who donated fifty dollars to the State Hospital for the Insane in Northampton, Massachusetts (where Earle had been chief physician since 1864) years after his release, wrote that "I am glad you did not mention my name in your report and would like it kept private all though I forgot to say so at the time."⁴⁵ Whereas men could lose their standing by entering an asylum, women could, in a sense, have

theirs enhanced. Smith-Rosenberg writes that in such scenarios, it was not uncommon for women to manipulate their doctors by willfully refusing to be cured.⁴⁶

And so when Elizabeth Packard spoke of her asylum tribulations, she still had a certain amount of gendered social capital to draw upon, in that her asylum stay did not rob her of her feminine authority in the way that a confined male might lose his masculine prerogative. As a writer, she drew strength from certain developments in literary culture as well. The grounds for Packard's campaign of asylum reform had been elaborately laid, in heavily gendered terms, in popular literature—especially in the very forms of writing that asylum superintendents warned the public against reading. In this explosive literature—whether coded as sensational or sentimental—the narrative of wrongful confinement almost invariably conformed to nineteenth-century literary conventions that feminized victims of social injustice. Packard's literary role was one that, paradoxically, treated women (including “madwomen”) as passive victims of nefarious male power, but in so doing, it created an opening for a gender-based challenge to institutional authority.

IN THE WORLD of nineteenth-century popular fiction, it is only a small exaggeration to say that the moral treatment movement in asylum medicine never happened—or that if it did, it was an elaborate ruse for the confinement of women, the punishment of deviants, the gratification of unscrupulous relatives (usually husbands), and the sadistic pleasures of doctors and their attendants. Rothman identifies popular women's literature as a natural ally of the asylum movement in its frequently didactic appeal to regulating the emotions and sanctifying the values of the middle-class home; curiously, however, when this literature explicitly pictured the asylum, it frequently presented it as a site of abuse of women.⁴⁷ In the so-called sentimental novels so popular among middle-class women, the entrance of the asylum into the plot line almost inevitably signaled the oppression of a strong-willed woman by a scheming husband or another male villain. In Fanny Fern's enormously successful *Ruth Hall* (1855), the protagonist and her daughter visit a friend, Mary, who is a patient at an asylum architecturally modeled on the leading designs of the day: “Fair rose the building in its architectural proportions; the well-kept lawn was beautiful to the eye.” They gaze at first on its “terraced banks, smoothly-rolled gravel walks, plats of flowers, and grape-trellised arbors,” and then inquire of the gate-keeper about Mary, a beautiful, “queenly” woman confined at the will of her husband, who has

evidently grown tired of her frequent headaches and her reluctance to engage in “common female employments and recreations.”⁴⁸ The gate-keeper informs them that “her husband left her here for her health, while he went to Europe” but that Mary had died.⁴⁹ Inside, the superintendent reveals that he is “an intimate friend” of Mary's husband, a “fine man” who “left her under my care.” Ruth persuades him to let her see the corpse; and as the matron leads her toward the body, she hears a woman screaming. The chief female attendant explains that it is “only a crazy woman in that room yonder, screaming for her child. Her husband ran away from her and carried off her child with him, to spite her, and now she fancies every footstep she hears is his.”⁵⁰ She goes on to explain that the woman had complained to a judge about the loss of her children, but learns that “the law . . . as it generally is, was on the man's side. She's a sight of trouble to manage. If she was to catch sight of your little girl out there in the garden, she'd spring at her through them bars like a panther; but we don't have to whip her *very* often.”⁵¹

A similar sequence occurs at the denouement of E.D.E.N. Southworth's best-selling *The Hidden Hand* (1859). The novel recounts the story of a plucky young orphan girl, Capitola Black, who is rescued from the streets of New York where she has been passing as a boy in order to find work. Eventually, Capitola discovers that she is the rightful heiress of a large Southern plantation, and the novel's swirling adventures all coalesce around the mystery of Capitola's missing mother. It turns out that she had been the victim of her nefarious brother-in-law, who, upon the death of his brother, schemed to steal Capitola and lock up her mother in order to claim his brother's inheritance. First, in true gothic fashion, he locks her in an attic; then, as the plot thickens, she is drugged with a delirium-inducing sedative and dragged to a private mad house outside of New Orleans. She tells the superintendent her story, but he dismisses it as a hallucination; and so whenever he presses her she lapses into a haughty silence: “Why should I speak when every word I utter you believe, or affect to believe, to be the ravings of a maniac?” Toward the end, she is found languishing at the asylum, “a large, low, white building, surrounded with piazzas and shaded by fragrant and flowering southern trees, [which] looked like the luxurious country seat of some wealthy merchant or planter, rather than a prison for the insane.”⁵² But a prison it is indeed, used “by some unscrupulous men, who wished to get certain women out of their way, yet who shrank from bloodshed.”⁵³

In these sequences, virtually all of the themes that Elizabeth Packard would stress thirteen years later are already present in fictional form: the

asylum as a space of male authority in which “difficult” women are put away at the convenience of men; the contrast between the outward serenity and inward chaos of the institution, as well as between its reputation as a space of healing and comfort and its actual practice of brutality; the connections between women’s lack of legal standing and their subjugation both in marriage and in medicine; the use of the asylum as a tool to challenge women’s natural role as primary caregivers for their children; the women’s pleas of wrongful incarceration taken as further evidence of their insanity. Each of these novels used the plot of institutional confinement to make a challenging point about women’s subordinate position in society (and especially in marriage); one critic notes that Southworth’s male characters tend toward “tyranny . . . brutality, and stupidity” and that the novel undercuts the period’s elevation of marriage to a sacred ideal.⁵⁴ One could easily say the same of Fern’s novel, where the fiercely independent protagonist’s liberation comes when she recognizes that in order to find her true calling (as a writer) she must do so outside of the confines of marriage; otherwise, she may find herself screaming in the back wards of an asylum.

Interestingly, the image of the asylum as a site for incarcerating troublesome women took on such a life of its own that in other forms of popular fiction, it came to symbolize other types of oppression and did political work quite apart from (and sometimes at odds with) the liberation of women or the reform of marriage laws. In the racy and violent urban gothic fiction favored by readers of the “mechanic” classes and indulged as a guilty pleasure by many young clerks, the wrongfully incarcerated woman was both a semipornographic image of captive femininity and a figure for the economic exploitation of workers by capitalists and moral reformers. Toward the end of *The Quaker City* (1844), George Lippard’s rich fantasia of city crimes set in Philadelphia, readers are given an exterior view of an apparently genteel private hospital for the insane run by Signor Ravoni: “Twelve massive pillars of dark-hued marble rose from the variegated floor, to the dome above, and around each pillar, were clustered vases of solid stone, filled with rare and beautiful flowers, mingling their hues and perfume, while they rustled gently in the light. . . . Beyond these pillars, was a cloistered space, but dimly penetrated by the light, yet full of music and beauty.”⁵⁵ The scene is complete with images of exotic plants, twelve shimmering fountains and a courtyard with chirping birds, an almost over-the-top version of the self-image of the insane asylum during the heyday of the moral treatment movement. But even the casual reader of Lippard and other urban gothic writers will know that the facade of Ravoni’s institution

is sure to conceal a chamber of horrors, since institutions of humanitarian reform are invariably figured in their work as sites in which the social elite abuse, enslave, and rape those who come under their control. In this case, the asylum turns out to confine beautiful brainwashed women who become the mad doctor’s slaves; and the asylum subplot culminates in a postmortem operating theater, in which the dissecting table becomes the altar for Signor Ravoni’s ascent to a demonic priesthood. In an orgiastic revelation of Ravoni’s prophesy of a state of existence in which death is conquered, he raises his scalpel above the body of a decapitated ex-patient: “And then the bosom, ha, ha! The Scalpel makes love to it now!”⁵⁶

Lippard’s asylum/dissecting table scene was imitated and perhaps topped by his colleague and competitor George Thompson, whose 1855 novel *Dashington; Or, the Mysteries and Iniquities of a Private Madhouse* tells of a beautiful young somnambulist who is framed for a murder and “treated” in an asylum by a doctor who rapes female patients and threatens to kill troublemakers and sell their bodies to scientists for dissection.⁵⁷ Lippard’s and Thompson’s work, printed in the cheap yellow-covered format (identified by superintendents such as Isaac Ray as signals of disease-generating literature), has generally been understood as appealing to a working-class readership hungry for scenes that turned the tables on their social superiors, both by casting the urban elite as sadistic hypocrites and by openly indulging in a taste for sex and violence that bourgeois reformers were trying to stamp out.⁵⁸ At first blush, it is difficult to read these scenes in *The Quaker City* and *Dashington* as simple class-based criticisms of the asylum. Neither the workers who constitute the core implied readership for these novels, nor the noble working-class male characters who form their (weak) moral core are in danger of being confined in the institutions that are pictured; for the asylum scenes of the novels are set in expensive private mad houses rather than state-run lunatic asylums. But in each of them, the mental patient—and particularly the beautiful young female patient—becomes a surrogate for the suffering of the downtrodden. Significantly, in Thompson’s novel, she is rescued by an asylum worker, a good-hearted attendant whom Thompson characterizes as “nature’s gentleman.”⁵⁹ What attracts Lippard and Thompson to these private mad houses is the ways in which defenseless human beings are turned into money for others; unscrupulous relatives try to fix wills in their favor by disposing of inconvenient family members; doctors are only too happy to lock up these unfortunates indefinitely as long as the family members continue to pay. The mental patient is in this way a figure for the economically abused; and philanthropy toward the insane is exposed as a cover for the economic exploitation of the vulnerable.

These novels vacillated between images of victimization (rape, dissection, and bondage) and revenge (violent retribution, exposure of hypocrisy, and attainment of wealth). In keeping with the intensely masculine perspective of the narratives, revenge was a male prerogative, and victim status was feminized. But the “madwoman in the attic” meets her grisly fate in the asylum in a wide range of fictional texts, from the gritty urban underworld of Lippard and Thompson to Fern’s and Southworth’s world of a female middle class striving for autonomy and respectability. Why would writers from such disparate social positions who were writing toward such different ends settle on the same figure? Part of the answer is that the feminization of victims was a long-standing literary strategy, one that could yield payoffs in a number of contexts. The ubiquitous captivity narratives that detailed the threats posed to European settlers living among “savages” classically featured white female captives held in bondage to red men.⁶⁰ By the mid-nineteenth century, picturing the confinement of defenseless women was a nearly universal strategy in writing about inequality. According to Amy Schrager Lang, reformers routinely feminized the objects of their philanthropic schemes in an effort to mask or minimize the threat that releasing them would pose to the bourgeois social order. In classic reformist texts such as Harriet Beecher Stowe’s *Uncle Tom’s Cabin* and Rebecca Harding Davis’s *Life in the Iron Mills*, gender is at once “the lens through which substantial inequality becomes visible” and an obstacle to viewing the origins of social inequality in class.⁶¹ To treat women as victims—or, in the case of Uncle Tom, to feminize victims—is to appeal to a male code of honor; if the victims were imagined as masculine, championing their cause might seem to threaten the prevailing order rather affirm its inherent justice. Even in the works of Lippard and Thompson, the fallen woman—either incarcerated in an asylum or forced into prostitution—might serve as a safety valve for readers’ more radical urges; while the authors raise their readers’ hackles at the injustice of the economic order, they also reaffirm the hierarchies of gender by saving the women from their sadistically imagined doom.

Elizabeth Packard, then, made her appeals on behalf of women’s rights in a form that was familiar to readers as a method of restoring—rather than challenging—patriarchy.⁶² Women novelists such as Fern and Southworth had subtly reworked the old image of the entrapped woman in order to question the patriarchal institutions (marriage and psychiatry) that held her, and Packard’s critique of the social order that allowed her husband and her doctor to hold her in bondage reflected that movement. At her most radical moments, she compared the married woman’s lot with that of the

slave before the Emancipation Proclamation: “It is our legal position of *nonentity*, which renders us so liable and exposed to suffering and persecution.” Women’s special vulnerability to incarceration in the asylum makes their slave-like status clear: “If it were not for this *slave* labor, the State would be compelled to have double the number of attendants to do all this work, which it now gets as a gratuity out of its prisoners.” But in the end, she simply wanted a reformed patriarchy, just as she wanted a reformed asylum regime. Despite her calls to allow married women to retain property rights and to equalize other aspects of the marriage bond, she affirmed that “Woman’s love for man is based on the principle of reverence. We can never truly love a man who has never inspired in us the feeling of fear, or reverence. . . . Fear, respect, and reverence, are emotions which superiority alone can inspire.”⁶³ To remove herself from one type of subordination, she pictured another, more perfect one.

BUT WHAT of male asylum protesters? What recourse did they have to redress their wrongs? And what language did the culture offer for them to shape their experiences? At first blush, it appears, practically none. In a culture that stressed male self-making, workplace productivity, and business competitiveness, an appeal to victim status could only reinforce one’s alienation from the mainstream. Just as the broader culture lionized up-from-the-bootstraps masculinity, asylum physicians pathologized male laziness, failure, and nonproductive behaviors outside of the asylum, which they purported to cure by disciplining and reenergizing the male body.

Taming the male body but also reenergizing it: this was the special task of asylum physicians in regard to male patients. Elizabeth Packard learned how to speak within the domestic circuit that linked asylums to nineteenth-century notions of the home: in both spheres, she was a woman in search of protection, but she found it in neither. Men, however, could not hope so easily for a rescue, for a knight in shining armor to afford them protection: this was not a voice that they could find in the broader culture. Instead, the voice had to assert its own manliness, something that the asylum itself stripped away time and again. Male critics of the asylum resort to ever more fantastic images of conspiracy and violation in order to detail how their own self-control could be robbed from them, how they could find themselves wrongfully locked in the asylum to begin with. For instance, Hiram Chase wrote that he was removed from his position as minister by scheming congregants who objected to his being retained beyond the traditional two-year period. Once he was committed, he did begin to suffer religious

hallucinations, but this was an *effect* rather than a cause of his confinement, in which he was forced by attendants to eat table scraps, in which his every action was under surveillance, and in which he feared to complain because he knew that these complaints would be interpreted as signs of his continuing illness.⁶⁴ The superintendent, he writes, is a tyrant who brooks no opposition to the smallest demand, and Chase's memoir is a narrative of being broken, being forced into a total submission to the asylum regime.

It is not surprising that when he published his memoir upon his release, the superintendent at Utica saw fit to contradict his charges, as well as to question his manhood. In the 1868 annual report of the institution, superintendent John P. Gray rebutted Chase's charges by reprinting notes on Chase's case from the patient casebooks. Though Gray does not name Chase's ailment (or its cause), here we find a portrait of a classic masturbator: "He is feeble in health, thin to emaciation, has no appetite, even loathes food; is sleepless, depressed under the delusion that he is utterly lost; that he has committed the unpardonable sin, mourns constantly over his state; declares that his family is coming to starvation, and that some have already perished."⁶⁵ And upon his release, he writes a book that is evidence only of his return to his former state:

The next thing we hear of our clerical friend is through a sensational book, a loose, disjointed production, full of evidence of a threatened return of his former condition. This book of the unfortunate man, written under the shadow of disease, or rather, under the illumination of a disordered fancy, he calls his experience; and it may be received by many as such, although it is but the reminiscence and reflected flashes of his insane delusions during his stay in the asylum, and is just as true and real as those, and just as worthy of confidence.⁶⁶

Chase was trapped by his own speaking position, that of the man too feeble to resist his tormentors or his own delusions, whether inside the asylum or out of it. Any attempt to stand up for himself and speak back to the doctors is a delusion brought on by his "disordered fancy," a mere simulacrum of male self-mastery. The figure of the "passive man"—thin, feeble, devoid of energy, unable to shift for himself—was the ruinous masculine correlative to the perfect female speaking position. The "sensational book" that Chase produced was in some sense like those other books that asylum physicians railed against: the ones that led boys and men to libraries and bookshops in search of the ubiquitous volume that "has something, prose, poetry, or picture, which can be perverted" to the service of male self-amatory practices.⁶⁷

Luther Bell's anti-masturbation tract, *An Hour's Conference with Fathers and Sons, in Relation to a Common and Fatal Indulgence* (1840), reported that in both public and private asylums, masturbation was a leading—if not the leading—cause of insanity among men;⁶⁸ Nathan Benedict of the state asylum at Utica confirmed in 1851 that it was the leading cause there, too, mainly among men;⁶⁹ and Samuel Woodward of Worcester State Hospital for Lunatics wrote that "no cause is more influential in producing Insanity" than masturbation.⁷⁰ Bell found that especially prevalent among "the pale student of the school, the college, or the seminary," the foul practice turned once vigorous youth into profoundly passive sloths, minds and bodies wasted not from want of muscular capacity or nourishment, but instead from an "unnatural draught upon the nervous influence."⁷¹ At least since Samuel Woodward's graphic reports of male patients masturbating openly in the Massachusetts asylum at Worcester, male patients were thought to be prolific onanists—masturbation being at once a leading cause and an indication of insanity. (There were scattered cases of erotomania and onanism in female wards of the asylum, but superintendents devoted scant attention to female self-pleasure; and in the popular imagination, female masturbators tended to become prostitutes rather than mental patients.)⁷² Youths drawn toward the vice will forego sports and other "exciting plays of boys" for "some trashy novel, or sedentary amusement, because that energy and excitability of the system, which nature instinctively requires to be worked off in muscular exercise, has been expended, exhausted, wasted, in this unnaturally debilitating process."⁷³ Once gratified, the predilection fed upon itself:

This same nervous exhaustion displays itself in a constant disposition to assume a recumbent position; to loll about on chairs, or the sofa; to lay on the bed in the day time, not for the purpose of sleeping, but to gratify this feeling of weakness; to read in bed at night, and to continue in bed in the morning, after being awaked. The mind becomes fascinated with the morbid gratification of exciting and libidinous reading and imaginings; the power of fixing the attention steadily and deeply is lost; and of grappling with any thing that is abstruse in studies. The imagination runs riot; day dreams, fanciful castle-building in the air, involving especially the sensual, usurp the place of the practical, and common sense views of things.⁷⁴

The reading scene pictured is a kind of harem of one: it is both what the masturbator seeks and what beckons to him, luring him away from productive behaviors. It was crucial in the asylum not only to correct such nasty habits (through use of restraining straps, constant surveillance, blistering

the genitals, and occasionally even surgical procedures), but also to provide rational and healthful amusements that would discourage such dissipation. Andrew McFarland (Elizabeth Packard's tormentor in the Illinois State Hospital for the Insane) wrote that asylum amusements were necessary distractions to keep patients from giving in to the "secret vices that gnaw . . . in the hidden recesses of the soul."⁷⁵

Ellen Dwyer reports that many women in the nineteenth century turned themselves in to asylums in order to protect themselves from abusive and/or alcoholic husbands,⁷⁶ but if male patients had been abused, it was most likely self-abuse that was at issue. As Russ Castronovo has argued, masturbation was frequently understood as a sort of auto-enslavement practiced by white males. An article in the *Library of Health* made the analogy clear:

The public mind is, at the present time, all excitement about slavery—the slavery of two or three millions of our fellow men, by a nation professing to love and regard personal liberty beyond any nation on the globe. And why should it not be so? . . . Yet admitting it to be much more dreadful than it is, what is this sort of slavery compared with the slavery of man to himself, or rather, to his own appetites and lusts? And what is freedom, dear as in itself it truly is, to those who are carried captives by Satan at his will; who bow down their necks to the yoke of passion, fashion, appetite; and even rejoice in their own bondage?⁷⁷

Even abolitionists sometimes accepted the comparison between masturbation and slavery; Garrison's antislavery newspaper, the *Liberator*, for instance, railed almost as forcefully against self-abuse as it did against Southern bondage. One reformer even saw the emancipation from self-abuse as the first stage in the assault on bondage of all forms: "We are not fit to plead the cause of Freedom until we get free from the tyranny of our own passions."⁷⁸ If men like Chase were charging that the asylum was a space of tyranny, the asylum authorities could turn the charge right back on the patients, submitting wild fantasies as evidence of a greater tyranny: the tyranny of their own passions.

In a culture that lionized male self-possession, then, to speak out as a victim was to court ruinous associations. Whether one had been sent to an asylum for masturbation or not, the male former patient was effectively neutered as an agent of protest by the very system that had entrapped him. Compared to the outpouring of sympathy that met Elizabeth Packard's crusade against the wrongful confinement of women, protests by wrongfully confined men met a deafening silence, proceeding from a culture reluc-

tant to hear (or fearful of hearing) the voices of failed men. This is a dynamic that is explored with extraordinary artistry by Herman Melville in his short story "Bartleby the Scrivener." Melville himself seems to call up his culture's association of lassitude with masturbation when his narrator obliquely speculates that Bartleby might be a closet masturbator. One Sunday morning, as the narrator makes a visit to his office while killing time before hearing a "celebrated preacher," he is perturbed to find the door locked from the inside. When the key turns from within, he is greeted with the vision of Bartleby in his shirt sleeves, and otherwise "in a strangely tattered dishabille, saying quietly that he was sorry, but he was deeply engaged just then, and—preferred not admitting me at present." As the narrator slinks away from the office, he works himself up into a state of moral outrage. He wonders if "anything amiss" is going but ultimately convinces himself that Bartleby, whatever his eccentricities, would never "violate the proprieties of the day," nor the purity of the office space.⁷⁹

By the end of Melville's story, Bartleby has been removed not to an insane asylum, but to the Tombs, where he is held as a vagrant. But in asylums, pale young clerks, nervously exhausted preachers, and other men who found themselves unable to master their passions and conform to the demands of the workplace haunted the halls. (Indeed, Samuel Woodward's portrait of one male masturbator sounds curiously like that of the most famous of nineteenth-century nonproductive men: "He was pale, feeble, nervous—lost his resolution—had no appetite—took to his bed much of the time, and became dull, almost speechless, and wholly abstracted in melancholy."⁸⁰) And yet the sequestered masturbator remained largely a figure of fear, an externalization of an ambient dread of male incapacity, sterility, and failure. If female patients could be pictured—or occasionally could picture themselves—as slaves to the male-controlled institutions of marriage and asylum medicine, male patients' cries of victimhood were too easily read as an entrapment by oneself, a failure to transcend the body, a submission to pernicious fantasies and the poisoning elements of nineteenth-century culture.

EMERSON WROTE, in "The American Scholar," that one of the "auspicious signs of the coming days" which will see the emergence of a new, postrevolutionary cultural disposition, is that

instead of the sublime and beautiful, the near, the low, the common was explored and poetized. That which had been negligently trodden under foot by

those who were harnessing and provisioning themselves for long journeys into far countries, is suddenly found to be richer than all foreign parts. The literature of the poor, the feelings of the child, the philosophy of the street, the meaning of household life, are the topics of the time. It is a great stride. It is a sign—is it not? of new vigor, when the extremities are made active, when currents of warm life run in to the hands and the feet.⁸¹

Emerson's comment could refer to the extraordinary interest shown to patients' writing in the *Opal*, or, for that matter, to former patients detailing their sufferings to the reading public. But what did the extremities have to say to those in the mainstream, and what could be heard? Melville's story anatomizes the impossible demands of a culture that presses, even forces, its Others to speak, but structures the language in such a way that no real communication is possible. Nineteenth-century asylums were full of chatter: doctors and attendants lecturing patients on morals and correct behavior; patient/pupils reciting lessons and compositions, debating each other to show their reasoning skills, and masquerading as minstrels or other ludicrous characters to show their mastery of folly; chaplains and their wards uttering the vows of a rationalized religion; visitors and legislators conversing with doctors and patients to satisfy themselves about the benefits of the institutions. The extremities may have been activated, but in each of these scenarios, patients were asked to play proper roles, to speak as if of their own free will but to tell their superiors what they wanted to hear. The superiors then would be confirmed in their benevolence, their humanitarian concern: they wanted to think of themselves as listening to society's victims rather than simply shutting them away. Elizabeth Packard found a way to carry on a dialogue under these terms while still retaining her sense of self and even criticizing the institution that structured her role. Melville's story recounts a perhaps more common response, from one who found himself unable to say anything meaningful at all. As the narrator presses Bartleby to speak, to tell him something, anything about himself that might explain his strange behavior, the clerk answers simply, and maddeningly, "I would prefer not to."

EPILOGUE



Echoes

HISTORIES OF psychiatry tell us that the moral treatment movement in America ended in the decades after the Civil War. And yet it is not entirely over, even today. In a strange coincidence that has prompted me to think about its legacy, my parents are—as I write this—en route to western Massachusetts, where my father, a psychiatrist, will be Erikson Scholar-in-residence at the Austen Riggs Center, a progressive psychiatric hospital that has carried on and developed some key features of the movement. I have written about the moral treatment in a historical light; he will have a chance to observe some of its traces in a living milieu.

As it happens, my father is not the first person in my life to make a connection with Riggs. In researching this book, I have thought frequently of Ike Schambelan, a friend who spent seven years as Riggs's theater director in the 1980s. On its Web site, Riggs explains that its focus on "therapeutic community" fosters patients' sense of citizenship through focus groups and "patient-government structures" as well as work programs and "an innovative program of arts and crafts." The latter was introduced by Joan Erikson, wife of the influential ego psychologist (and Riggs staff member) Erik Erikson. She described it this way:

Art, crafts, drama, intellectual pursuits, involvement in the nursery school or greenhouse program are productive for personal growth and development in any individual. These activities . . . promote change in a positive direction, support competence, and enhance the dignity and identity of the person involved.

43. See Roy Porter, *Madness: A Brief History* (Oxford: Oxford University Press, 2002), 95; Porter, *Mind Forged Manacles: A History of Madness in England from the Restoration to the Regency* (London: Athlone Press, 1987), 119-20.
44. Poe, "The System of Doctor Tarr and Professor Fether," 699 ("the regulations"), 702 ("repose confidence").
45. *Ibid.*, 702.
46. *Ibid.*, 716.
47. *Ibid.*, 703.
48. *Ibid.*, 700.
49. On the professionalism of nineteenth-century French psychiatrists, see Goldstein, *Control and Classify*, 8-40.
50. Hannah Arendt, *On Revolution* (New York: Penguin, 1963), 63.
51. Weiss, *Marat/Sade*, 76.
52. Brigham, "Insanity and Insane Hospitals," 91.
53. Klaus Doerner, *Madmen and the Bourgeoisie: A Social History of Insanity and Psychiatry*, trans. Joachim Neugroschel and Jean Steinberg (Oxford: Basil Blackwell, 1981), 127.
54. *Ibid.*, 130. Dora B. Weiner, however, believes that Pinel's concern was to elevate the indigent insane "to the dignified status of medical patients in the newly formed republic." See Weiner, "Le geste de Pinel: The History of a Psychiatric Myth," in *Discovering the History of Psychiatry*, ed. Mark S. Micale and Roy Porter (New York: Oxford University Press, 1994), 232-47 (see esp. 232).
55. Doerner, *Madmen and the Bourgeoisie*, 120.
56. *Ibid.*, 98.
57. *Ibid.*, 121.
58. Brigham, "Insanity and Insane Hospitals," 103.
59. Weiner, "Le geste de Pinel," 237.
60. See Patrick Vandermeersch, "Les mythes d'origine" in the History of Psychiatry," in *Discovering the History of Psychiatry*, 219-31.
61. Jarvis, *Insanity and Insane Asylums*, 6.
62. Quoted in Goldstein, *Console and Classify*, 74-75 (original emphasis).
63. Poe, "The System of Doctor Tarr and Professor Fether," 713.
64. See Doerner, *Madmen and the Bourgeoisie*, 124.
65. See *ibid.*, 129; Goldstein, *Console and Classify*, 101; and Gerald N. Grob, *Mental Institutions in America: Social Policy to 1875* (New York: The Free Press, 1973), 41-44.
66. See Goldstein, *Console and Classify*, 83.
67. Poe, "The System of Doctor Tarr and Professor Fether," 702.
68. *Ibid.*, 716.
69. David J. Rothman, *The Discovery of the Asylum: Social Order and Disorder in the New Republic* (Boston: Little, Brown, 1971), 110.
70. Benjamin Rush, *Medical Inquiries and Observations, Upon the Diseases of the Mind* (Philadelphia: Kimber and Richardson, 1812), 68-69.
71. *Ibid.*, 71, 69.
72. Cited in Thomas S. Szasz, ed., *The Age of Madness: The History of Involuntary Mental Hospitalization, Presented in Selected Texts* (Garden City, NY: Anchor Books, 1973), 140.
73. See Dain, *Concepts of Insanity*, 14-23.
74. Quoted in Szasz, ed., *The Age of Madness*, 24.
75. See Nancy Tomes, *A Generous Confidence: Thomas Story Kirkbride and the Art of Asylum-Keeping, 1840-1883* (Cambridge: Cambridge University Press, 1984), 26-30.
76. See Szasz, ed., *The Age of Madness*, 26, 28.
77. Tomes, *A Generous Confidence*, 4-5.

78. Weiss, *Marat/Sade*, 4.
79. Castel, *The Regulation of Madness*, 64.
80. Nussbaum similarly asserts that the tradition of liberal social contract theory—from Locke and Kant through Rawls—founders on the question of nonrational social actors. "The classical theorists," she writes, "all assumed that their contracting agents" (those capable of freely and rationally entering into social bonds with each other for mutual benefit) "were men who were roughly equal in capacity, and capable of productive economic activity" (Nussbaum, *Frontiers of Justice*, 13).
81. "Celebration of the Birth-Day of Pinel at the State Lunatic Asylum, Utica, N.Y., April 11, 1846," *American Journal of Insanity* 3, no. 1 (July 1846): 78-87 (see pp. 78-79 for the hymn and p. 80 for the poem).
82. R.O. Matthiessen, *American Renaissance: Art and Expression in the Age of Emerson and Whitman* (New York: Oxford University Press, 1941), xii n3.
83. See, for instance, Douglas C. Baynton, "Disability and the Justification of Inequality in American History," in *The New Disability History: American Perspectives*, ed. Paul K. Longmore and Lauri Umansky (New York: New York University Press, 2001), 33-57.
84. See Rosemarie Garland Thomson, *Extraordinary Bodies: Figuring Physical Disability in American Culture and Literature* (New York: Columbia University Press, 1997), 41-44.
85. The best overall study of Poe's treatment of race within the context of national politics is Terence Whalen, "Average Racism: Poe, Slavery, and the Wages of Literary Nationalism," in *Edgar Allan Poe and the Masses* (Princeton, NJ: Princeton University Press, 1999), 111-46.
86. See *The Poe Log: A Documentary Life of Edgar Allan Poe, 1809-1849*, ed. Dwight Thomas and David K. Jackson (1987; repr. New York: G.K. Hall, 1995), 633-34, 642.
87. See Kenneth Silverman, *Edgar A. Poe: Mournful and Never-Ending Remembrance* (New York: HarperCollins, 1991), 312-16.
88. Henry Maudsley, MD, "Edgar Allan Poe," *American Journal of Insanity* 17, no. 2 (October 1860): 152-98 (this essay was originally published in the April 1860 edition of the *Journal of Mental Science*).
89. See Philip Young, "The Earlier Psychologists and Poe," *American Literature* 22, no. 4 (January 1951): 442-54.
90. John Bryant also considers Poe's treatment of apes to be somewhat self-reflexive, but he finds this to be a matter of "sexual anxiety" that is ultimately "displaced" onto readers through rituals of humor. See Bryant, "Poe's Ape of Unreason: Humor, Ritual, and Culture," *Nineteenth-Century Literature* 51, no. 1 (June 1996): 16-52.

CHAPTER SIX

1. Robert Fuller, *An Account of the Imprisonment and Sufferings of Robert Fuller, of Cambridge* (Boston: privately printed, 1833), 29.
2. Moses Swan, *Ten Years and Ten Months in Lunatic Asylums in Different States* (Hoosick Falls, NY: privately printed, 1874), 85.
3. Quoted in Karen Halttunen, "Gothic Mystery and the Birth of the Asylum: The Cultural Construction of Deviance in Early-Nineteenth-Century America," in *Moral Problems in American Life: New Perspectives on Cultural History*, ed. Karen Halttunen and Lewis Perry (Ithaca, NY: Cornell University Press, 1998), 51.
4. Phebe B. Davis, *The Travels and Experience of Miss Phebe B. Davis* (Syracuse, NY: J.G.K. Truair & Co., 1860), 27.
5. Swan, *Ten Years and Ten Months*, 135.

6. One exception is the narrative of Robert Fuller (1832), whose account of his stay at McLean is cited above. Fuller's narrative, however, was written before the first state institutions were constructed.
7. Elizabeth T. Stone, *A Sketch of the Life of Elizabeth T. Stone, and of Her Persecutions* (privately printed, 1842), 35.
8. Swan, *Ten Years and Ten Months*, 91.
9. Mrs. George Lunt, *Behind the Bars* (Boston: Lee and Shepard, 1871), 36-37.
10. Rev. Hiram Chase, *Two Years in a Lunatic Asylum* (Saratoga Springs, NY: Van Benthuysen and Sons, 1868), 34-38.
11. Phebe Davis, *Two Years and Three Months in the New York Lunatic Asylum at Utica* (Syracuse, NY: privately printed, 1865), 24-25.
12. *Ibid.*, 45.
13. *Ibid.*, 50.
14. Chase, *Two Years in a Lunatic Asylum*, 92.
15. Swan, *Ten Years and Ten Months*, 55.
16. On causes for the decline of the asylum movement, see David J. Rothman, *The Discovery of the Asylum: Social Order and Disorder in the New Republic* (Boston: Little, Brown, 1971), 265-95. On cure rates and costs, see also Nancy Tomes, *A Generous Confidence: Thomas Story Kirkbride and the Art of Asylum-Keeping, 1840-1883* (Cambridge: Cambridge University Press, 1984), 290-93; on the effects of the Civil War, see Ellen Dwyer, *Homes for the Mad: Life Inside Two Nineteenth-Century Asylums* (New Brunswick, NJ: Rutgers University Press, 1987), 8; and Lynn Gamwell and Nancy Tomes, *Madness in America: Cultural and Medical Perceptions of Mental Illness Before 1914* (Ithaca, NY: Cornell University Press, 1995), 121; on the challenges posed by neurology, see Tomes, *A Generous Confidence*, 107, 292; and Norman Dain, *Concepts of Insanity in the United States, 1789-1865* (New Brunswick, NJ: Rutgers University Press, 1964), 133; on degeneracy and psychiatry, see Ian Robert Dowbiggin, *Keeping America Sane: Psychiatry and Eugenics in the United States and Canada, 1880-1940* (Ithaca, NY: Cornell University Press, 1997).
17. Quoted in Dowbiggin, *Keeping America Sane*, 72.
18. See Elizabeth Parsons Ware Packard, *The Prisoners' Hidden Life, or Insane Asylums Unveiled* (Chicago: privately printed, 1868); and Barbara Sapinsley, *The Private War of Mrs. Packard* (New York: Paragon House, 1991).
19. Quoted in Sapinsley, *The Private War of Mrs. Packard*, 45.
20. Packard, *Modern Persecution; Or, Insane Asylums Unveiled*, vol. 1, Introduction (Hartford, CT: Case, Lockwood, and Brainard, 1875; repr. New York: Arno Press, 1973), xxxii (citations are to the 1973 edition).
21. See Phyllis Chesler, *Women and Madness* (1972; repr. San Diego: Harcourt Brace Jovanovich, 1989), 10-16; Mary Elene Wood, *The Writing on the Wall: Women's Autobiography and the Asylum* (Urbana: University of Illinois Press, 1994), 25-47.
22. Packard, *The Prisoners' Hidden Life*, 84.
23. See Packard, "My Plea for Married Woman's Emancipation made before Connecticut Legislature in New Haven State House, June, 1866," in *Modern Persecution*, vol. 2, 393-406.
24. Packard, *The Prisoners' Hidden Life*, 335.
25. William Lloyd Garrison, "Speech at the Fourth National Women's Rights Convention," in *Against Slavery: An Abolitionist Reader*, ed. Mason Lowance (New York: Penguin Classics, 2000), 123.
26. Quoted in Sapinsley, *The Private War of Mrs. Packard*, 3.
27. Nancy Tomes, "Feminist Histories of Psychiatry," in *Discovering the History of Psychiatry*, ed. Mark S. Micale and Roy Porter (New York: Oxford University Press, 1994), 360.
28. Elaine Showalter, *The Female Malady: Women, Madness, and English Culture, 1830-1980* (New York: Pantheon, 1985), 5.
29. On Douglass's masculinist position as a writer and historical figure, see Deborah E.

- McDowell, "In the First Place: Making Frederick Douglass and the Afro-American Narrative Tradition," in *African American Autobiography: A Collection of Critical Essays* (Englewood Cliffs, NJ: Prentice Hall, 1993), 36-58.
30. Chesler, *Women and Madness*, 15.
31. *Ibid.*, xx.
32. Sandra M. Gilbert and Susan Gubar, *The Madwoman in the Attic: The Woman Writer and the Nineteenth-Century Literary Imagination* (New Haven, CT: Yale University Press, 1979), 85.
33. Showalter, *The Female Malady*, 5, 4.
34. Wood, *The Writing on the Wall*, 26.
35. Packard, *The Prisoners' Hidden Life*, 64.
36. *Ibid.*, 326-27.
37. Sapinsley, *The Private War of Mrs. Packard*, 17. On Packard's love for McFarland, see also Thomas Cooley, *The Ivory Leg in the Ebony Cabinet: Madness, Race, and Gender in Victorian America* (Amherst: University of Massachusetts Press, 2001), 197-202.
38. Timothy A. Hacsí, *Second Home: Orphan Asylums and Poor Families in America* (Cambridge, MA: Harvard University Press, 1997), see p. 75.
39. Rothman, *The Discovery of the Asylum*, 218.
40. This is consistent with a pattern described famously by Mary Kelley in *Private Woman, Public Stage: Literary Domesticity in Nineteenth-Century America* (repr. ed., Chapel Hill: University of North Carolina Press, 2002).
41. Thomas J. Brown, *Dorothea Dix: New England Reformer* (Cambridge, MA: Harvard University Press, 1998), 168.
42. Gamwell and Tomes, *Madness in America*, 105.
43. Carroll Smith-Rosenberg, *Disorderly Conduct: Visions of Gender in Victorian America* (New York: Alfred A. Knopf, 1985), 208.
44. Sarah Appar to Pliny Earle, May 24, 1847, in Pliny Earle Papers, American Antiquarian Society, Box 5, Folder 1, Worcester, MA.
45. W.B. to Pliny Earle, June 22, 1873, in *ibid.*
46. Smith-Rosenberg, *Disorderly Conduct*, see pp. 209-10.
47. The poetry of Lydia Sigourney was an exception. A close family friend of Amariah Brigham, she composed many flattering poems on asylum themes, some of which were read at official institutional pageants.
48. Fanny Fern, *Ruth Hall and Other Writings* (New Brunswick, NJ: Rutgers University Press, 1986), 109 ("fair rose the building"), 50 ("queenly"), 51 ("common female employments").
49. *Ibid.*, 109.
50. *Ibid.*, III.
51. *Ibid.*, III.
52. E.D.E.N. Southworth, *The Hidden Hand* (Oxford: Oxford University Press, 1997), 394-95.
53. *Ibid.*, 400.
54. Joanne Dobson, "The Hidden Hand: Subversion of Cultural Ideology in Three Mid-Nineteenth-Century American Women's Novels," *American Quarterly* 38, no. 2 (Summer 1986): 223-42 (the quote is on p. 234).
55. George Lippard, *The Quaker City or The Monks of Monk Hall: A Romance of Philadelphia Life, Mystery, and Crime* (Amherst: University of Massachusetts Press, 1995), 526.
56. *Ibid.*, 538.
57. Greenhorn [George Thompson], *Dashington; Or, The Mysteries and Iniquities of a Private Mad-House* (New York: Frederic A. Brady, 1855?).
58. See David S. Reynolds, *Beneath the American Renaissance: The Subversive Imagination in the Age of Emerson and Melville* (New York: Alfred A. Knopf, 1988); Michael Denning, *Mechanic Accents: Dime Novels and Working-Class Culture in America* (London: Verso, 1987); and Shelley Streeby, *American Sensations: Class, Empire, and the Production of Popular Culture* (Berkeley:

- University of California Press, 2002). Questioning the subversiveness implied by most of these analyses is Christopher Looby, "George Thompson's 'Romance of the Real': Transgression and Taboo in American Sensation Fiction," *American Literature* 65, no. 4 (December 1993): 651-72.
59. Thompson, *Dashington*, 54 (original emphasis).
60. See Christopher Castiglia, *Bound and Determined: Captivity, Culture-Crossing, and White Womanhood from Mary Rowlandson to Patty Hearst* (Chicago: University of Chicago Press, 1996).
61. Amy Schrager Lang, "Class and the Strategies of Sympathy," in *The Culture of Sentiment: Race, Gender, and Sentimentality in Nineteenth-Century America*, ed. Shirley Samuels (New York: Oxford University Press, 1992), 128-42 (quote is on p. 130).
62. Castiglia notes that many captivity narratives hinted at a protofeminist underplot that featured "confinement within the home, enforced economic dependence, rape, compulsory heterosexuality, prescribed plots." But before the women's movement of the 1840s, such texts were rarely overt in their appeals to women's rights (Castiglia, *Bound and Determined*, see esp. 4).
63. Packard, *The Prisoners' Hidden Life*, xii ("It is our legal position"), 158 ("this slave labor"), 316 ("Woman's love").
64. Chase, *Two Years in a Lunatic Asylum*.
65. The page from the *Twenty-Sixth Annual Report of the Managers of the State Lunatic Asylum for the Year 1868* is in turn pasted in the case book entry for Chase. See New York State, *Utica State Hospital Patient Case Files*, vol. 19, p. 416 (New York State Archives).
66. *Ibid.*
67. Luther Bell, *An Hour's Conference with Fathers and Sons, in Relation to a Common and Fatal Indulgence* (Boston: Whipple and Damrell, 1840), 24. On connections between reading and productivity in the reform imagination, see David M. Stewart, "Cultural Work, City Crime, Reading, Pleasure," *American Literary History* 9, no. 4 (Winter 1997): 676-701.
68. Bell, *An Hour's Conference with Fathers and Sons*, 11, 16.
69. New York State, *Annual Report of the Managers of the State Lunatic Asylum of the State of New York*, vol. 8 (Albany, NY: 1851), 38-39.
70. Samuel B. Woodward, "Insanity, Produced by Masturbation," *Boston Medical and Surgical Journal* 12, no. 7 (March 25, 1839): 109.
71. Bell, *An Hour's Conference with Fathers and Sons*, 24, 48-49.
72. See Smith-Rosenberg, *Disorderly Conduct*, 46; Helen Lefkowitz Horowitz, *Rereading Sex: Battles over Sexual Knowledge and Suppression in Nineteenth-Century America*, (New York: Random House, 2002), 106.
73. Bell, *An Hour's Conference with Fathers and Sons*, 50.
74. *Ibid.*, 51.
75. Quoted in Dain, *Concepts of Insanity*, 92.
76. Dwyer, *Homes for the Mad*, 90.
77. Quoted in Russ Castronovo, *Necro Citizenship: Death, Eroticism, and the Public Sphere in the Nineteenth-Century United States* (Durham, NC: Duke University Press, 2001), 69-70.
78. Quoted in Castronovo, *Necro Citizenship*, 76, 82.
79. Herman Melville, "Bartleby the Scrivener," in *Melville's Short Novels* (New York: Norton Critical Editions, 2002), 3-34 (quoted material in on pp. 16 and 17).
80. Cited in Horowitz, *Rereading Sex*, 102.
81. Ralph Waldo Emerson, "The American Scholar," in *Essays & Poems* (New York: Library of America, 1996), 51-71 (the quote is on p. 68).

EPILOGUE

1. See <http://www.austenriggs.org/>
2. Alex Beam, *Gracefully Insane: The Rise and Fall of America's Premier Mental Hospital* (New York: Public Affairs, 2001), 13.

3. <http://www.mclean.harvard.edu/about/facts/>
4. See T.M. Luhrmann, *Of Two Minds: An Anthropologist Looks at American Psychiatry* (New York: Knopf, 2000), esp. chapter 6.
5. Clifford J. Levy, "For Mentally Ill, Death and Misery," *New York Times*, April 28, 2002.
6. Alan Judd and Andy Miller, "Death in Georgia's Mental Hospitals," *Atlanta Journal-Constitution*, January 7, 2007.
7. Judd and Miller, "Feds to Probe State System," *Atlanta Journal-Constitution*, April 20, 2007.
8. Susanna Kaysen, *Girl, Interrupted* (New York: Vintage Books, 1994), 92-93.
9. See Sharon L. Snyder and David T. Mitchell, *Cultural Locations of Disability* (Chicago: University of Chicago Press, 2006), 180-81.