

## **Insanity and The Raj : Lunatic Asylums in Colonial Bengal**

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### **Abstract :**

History of insanity in India went back to the Vedic period when people were treated with hymns and prayers. During the Muslim rule provision for treatment of the insane was there. But the advent of the British East India Company was a disjuncture from the previous practices for mental healing. The prestige of the Crown was a vital facet of colonial ideology and it was thought that the "Victorian Dignity" would be lowered in the eyes of the natives if the lower class European lunatics were allowed to move freely. Thus a new institution came into being, the lunatic asylums. Gradually 'Native Only' asylums also introduced to detain the frenzy people and put them behind the bar in order to stop disorder. A sharp racial discrimination was evident in the internal management and treatment of the insane in those institutions. Native patients were never been a concern of the colonial government. They were given poor accommodation, food, medicine and treated with painful electric shock. They were forced to do manual labour, like road making, gardening which earned massive profit for the asylums. Though the asylum products increased the income of the British Government but the profits were never used for the benefit of the inmates.

**Keywords :** *Psychiatry, Lunatic Asylum, Ganjah, Occupational Therapy, Hegemony.*

This paper is concerned with the social and institutional history of insane asylums in Nineteenth century colonial Bengal. Psychiatry as a 'Disease' has little relevance in social history but if it is placed within the socio-political context of colonial India, it has a different scopes and history beyond the walls of asylums. It seeks to read the colonial mind. Through it we can actually peep into the real intention of the colonial government, the social tension between the sane and insane, the conflict between tradition and modernity. Understanding the mystery of mind was still in an embryonic form in the early stages of colonial rule in India. But the dread emanated from the proliferation of insanity both in European and Native section created havoc in Colonial administration. The social disorder created by these frenzy people stigmatized the very notion of Victorian modernity and challenged the authority of the colonial administration. As a result of these social tension, thus came into being a new institution, the 'Asylums', to control the 'mind' and 'irrationality' of the colonized. This paper therefore attempts to locate the question of insanity in the larger colonial project of hegemony and control.

The trading ships of the English East India Company had started their journey towards India and took advantage of the power vacuum developed there after the decline of the mighty Mughal Empire. Slowly did the traders become the rulers of the Country. The eastern part of India especially Bengal due to its advantageous strategic location became the nerve centre of colonial administration and trading activities. Thus Bengal became the "British Bridgehead." But unfortunately the marshy topography and sultry weather made the journey of the colonizer a bit difficult. The new settlers were succumbed to annual attack of cholera, malaria, smallpox, kala-azar. The death toll mounted leaps and bounce. Apart from these 'physical ailments', Nineteenth century Bengal witnessed the proliferation of mental diseases among the 'Boy' soldiers and sailors of the Company as well as among the natives.

Prior to the advent of the British, there were persons who had lost their 'power of reasoning'. But they were treated through Ayurvedic medicines, Yoga, Vedic prayers, healthy diet within the family, without any confinement. Ayurveda has eight branches of which one is 'BhutVidya'(Psychiatry).<sup>1</sup> During the Tughlaq period there were several mental hospitals built by Sultan Muhammad bin Tughlaq and Firoz Tughlaq to provide accommodation to these vagrants. Not only that, the inmates of those hospitals were also given healthy food.<sup>2</sup> But the arrival of British in India was a disjuncture from these all traditional practices which were used for mental healing. The prestige of the crown was a vital facet of the colonial ideology and it was thought that the "Victorian Dignity" would be lowered in the eyes of the natives if lower class European lunatics were allowed to move freely. Thus a new institution came into being, the 'lunatic asylums', to detain all these frenzy people and put them behind the bar.

Western medicine in India was introduced by the Portugues rulers of Goa but the credit of establishing mental asylums went to the British East India Company. Gradually they became concerned about the mental health of their

employees. The Proceedings of Calcutta Medical Board dated 3rd April, 1787, mentioned that a medical hospital was in existence at Calcutta at that time which was established by G.M Kenderdine, a surgeon of English East India Company. In 1787, a Government sponsored hospital was established by Dr. William Dick, a surgeon of E.I.C, on a monthly salary of Rs/-200. It was in close proximity to Presidency General Hospital.<sup>3</sup> But after the retirement of Dr. Dick it was failed to maintain its standard and Government was forced to close it on 1821. But in the mean time in 1817 another private asylum was established exclusively for the Europeans, behind the boundary of P.G Hospital, Bhowanipur by Mr. Beardsmore. The hospital was started with half a dozen patients. But very soon it became popular among the Europeans for its amenities and good services.<sup>4</sup> All these three asylums were exclusively meant for Europeans.

Natives were never been the concern of the colonial masters. But by the early nineteenth century Court of Directors decided to establish asylums for native lunatics in order to keep these frenzy people behind the bar and it also offered a promising business prospect. Near Russapuglah jail in 24 Pargana, a plan of establishing a native asylum had been sanctioned to accommodate 50-60 patients within a budget of Rs/-7500. But the site was very unhealthy. It was beset by a marshy topography. In 1819 and 1821 two more asylums were established at Dacca and Patna.<sup>5</sup> Patients from adjacent areas also visited these asylums. The following table exhibits the rate of cure and mortality in the years 1839 and 1840, in the several insane hospitals.

DIVISION	YEAR	IN HOSPITAL ON 1 <sup>ST</sup> JANURY	ADMITTED IN THE YEAR	TOTAL	NUMBER CURED AND DISCHARGED	RATE OF CURE	NUMBER DIED	RATE OF MORTALITY
TWENTY-FOUR PERGUNAHS, OR RUSSA	1839	133	130	263	95	36	34	13
	1840	133	125	258	80	31	28	11
MOORSHEDABAD	1839	63	43	106	26	24.5	25	23.5
	1840	55	42	97	38	39	8	8
DACCA	1839	87	98	185	60	32	17	9
	1840	108	86	194	48	24	24	12
PATNA	1839	41	44	85	18	21	28	32
	1840	39	48	87	32	32	18	21

**Source: Journal of the Statistical Society of London, Vol-8, No.1, (Mar., 1845), P-58.**

During 1850s three important socio-political decisions generated a Pan-Indian reform in asylum management system. These Acts were -i) Act XXXIV of 1858(The Lunacy Supreme Court Act), ii) Act XXXV of 1858(The Lunacy District Court Act) and iii) Act XXXVI of 1858(The Lunatic Asylum Act). These Acts collectively provided better care for the natives and codified the procedure of admitting the insane to these asylums.<sup>6</sup> According to the Section 4 of Act XXXVI of 1858, "If the medical officer shall sign a certificate the form A in the schedule of this Act, and the magistrate shall be satisfied, on personal examination or other proof, that such person is a lunatic."<sup>7</sup> The new law empowered the Magistrates to detain any person on the basis of a proper medical certificate issued by a medical practitioner. But it created a new administrative problem. The Magistrates who did not have any medical knowledge about insanity started intervening in the internal management of asylums. They detained persons who were not actually insane and dumped them into the asylums. Thus asylums became overcrowded and services disrupted. The Superintendent of Bengal mentioned that 'unnecessary' admission crowded the asylums in 1862. Now the question is that who took admission in these asylums? 1857 onwards the Annual Report on the asylums were written in great details with statistical tables. Patients were categorized according to their caste, religion and occupation on the contrary to pathological classification. The following tabular statement showed the caste of the persons admitted in different asylums of Bengal in the year 1865.

	Admission and Re-admission during the year	Hindoos	Mahomedans	Christians
Dullunda	177	122	51	4
Moydapore	41	52	36	-
Dacca	114	56	58	-
Patna	76	57	19	-
Cuttack	30	24	2	4
<b>Total</b>	<b>438</b>	<b>311</b>	<b>166</b>	<b>8</b>

**Source: Annual Report of the Insane Asylums in Bengal for the Year 1865, P-2**

The above table shows that the number of Hindus admitted is double that of the Muslims. Some criminal lunatics also admitted in the asylums for the first time.<sup>8</sup>

Patients and doctors were the main protagonist in Colonial Asylums. In the European asylums the patients were mainly the soldiers and sailors of the Company. There were several reasons why the 'Sahibs' became driven crazy. The hot and humid tropical weather was mainly responsible. They were unable to adjust with this new situation and gradually lost their mental balance. With this physical uncomforness added the loneliness as they left behind their near and dear one to serve in this country. Moreover, the very regimental barrack life definitely had an adverse impact on their mind. They had a parade centric life in the barracks. Life was not easy there. 365 days, 18 hours a day were spent on parade. In this dull and monotonous life, the only ray of hope was the letters, which came from their relatives in the distant lands. The military corporal screamed, "Come on! Mail up, boys!" Then he distributed the letters to Davies, Smith, Jones, Brown, Green and so on. Nevertheless, those who did not get any news got frustrated. However, their mates tried to encourage them by saying, 'Cheer up. Better luck next time.'<sup>9</sup> Again army rations were not adequate and most of their earnings were spent off in buying food from outside. Thus the extreme climate, hunger, regular death of the co-soldiers and tedious barrack life had a degenerative effect on their mind and body. As a result they had selected 'Bottle' or 'Brothel' as their friends. Thus they infected with various deadly venereal diseases which ultimately made them frenzy. Causes of insanity among the native men were many. Consumption of intoxicating substances like bhang, ganja was mainly responsible for insanity. Mainly young and middle aged men were admitted to the asylum for having addiction to these narcotics. But the Government never banned the selling of Ganjah rather issued more licenses to earn more duties from them. The increased issue of licenses dropped the price of Ganjah and thus increased the consumption.<sup>10</sup> The following table shows number of shops and licenses, and the quantity of Ganjah sold during the year 1875-1876 & 1876-1877.

YEAR 1875-76	NUMBER OF SHOPS	NUMBER OF LICENSES	AMOUNT OF FEES PAID	QUALITY SOLD			AMOUNT OF DUTY REALIZED			YEAR 1876-77	NUMBER OF SHOPS	NUMBER OF LICENSES	AMOUNT OF FEES PAID	QUALITY SOLD			AMOUNT OF DUTY REALIZED		
				RS	MDS	S	C	RS	A					P	RS	MDS	S	C	RS
Actual up to end of January	108	110	35,685	290	28	2	29	089	80	Actual	107	135	42,799	391	61	12.5	39,514	10	0
Estimate for February & March	---	---	---	60	0	0	60	0	0	Estimate of March	---	---	---	34	20	0	3,550	0	0
<b>Total</b>	<b>108</b>	<b>110</b>	<b>35,685</b>	<b>350</b>	<b>28</b>	<b>2</b>	<b>35</b>	<b>089</b>	<b>80</b>	<b>Total</b>	<b>107</b>	<b>135</b>	<b>42,799</b>	<b>426</b>	<b>81</b>	<b>12.5</b>	<b>43,064</b>	<b>10</b>	<b>0</b>

**Source: Annual Report of the Insane Asylum in Bengal for the Year 1876, P-21**

Women were emotionally more vulnerable and prone to insanity. Delirium, 'Deranged mind', and melancholia were the main causes of mental instability among the Victorian ladies. While W. J Moore opined that, "...frequently exposure to chilling winds and moisture, neglect of suitable clothing, the tedium and fatigue of a long march up country, and, lastly, the early marriages of constantly negotiated, all powerful agents to disturb the uterine, nervous, and vascular system."<sup>11</sup> Moore considered early marriage and sexual life and uneven flow of menses as the causes of insanity among the European women resided in India. Native women outnumbered the male patients in different asylums. Proper menstrual function, frequent puerperal mania and puerperal fever were the main causes behind insanity. But in 1884 the report on lunatic asylum mentioned that, "One woman is set down as having suffered from effects of bhang (Dullunda), while opium is alleged to have caused mental disease in another (Patna)."<sup>12</sup>

Little is known about the internal management system and methods of treatment that followed in the mental hospitals. Racial discrimination was very much apparent in the asylum management system. European patients were divided into Class -I and Class-II on the basis of their professional position in the Company's service. Class -I patients were allotted separate rooms and dining provisions. Aggressive patients were separated from the rest and supervised by Anglo-Indian staff only. Fish, fruit, pudding, cheese and spicy food were given to them at the expense of Rs. 100/- per month. Whereas only Rs. 1/- was allotted for the daily diet of 16 native patients in 1844. They were given only one meal consisted of rice, pulse and occasional fish or meat.<sup>13</sup> The following table exhibits, under the several items of expenditure for the year 1861-62.

YEAR	ESTABLISHMENT	CLOTHING & CONTINGENT CHARGES	BAZAR MEDICINE	DIETING	TOTAL
1861	6,131	777	22	6,410	1,3340
1862	5,867	1,090	30	5,727	1,2714

**Source: Annual Report of the Insane Asylum in Bengal for the Year 1862, P-9**

The above table showing an absolute reduction of Rs/-626 on total expenditure.<sup>14</sup> Thus the rate of mortality was very high due to malnutrition and unhealthy condition of the asylums. The following table shows the mortality of patients from different diseases other than insanity.

DISEASES	NO.OF DEATHS	DURATION OF CONFINEMENT			REMARKS
		YEARS	MONTHS	DAYS	
APOPLEXY	1	12	6	8	
CACHEXIA	4	17	6	18	
CHOLERA	7	1	4	18	
DIARRHEA	2	2	3	26	
ENCEPHALITIES	1	2	0	23	
PHTHISIS	7	31	0	28	
PNEUMONIA	5	22	0	20	
RUPTURED SPLEEN	1	0	5	21	
<b>TOTAL</b>	28	AVERAGE PERIOD OF RESIDENCE, 3 YEARS, 3 MONTHS, AND 21 DAYS.			

**Source: Annual Report of the Insane Asylums in Bengal for the Year 1865, P-64.**

The treatment of the insane was some kind of guess work. The doctors of these asylums were incompetent to diagnose the nature of the disease and much more interested in private practices. They followed a homogenous process to treat different layer of insanity. The patients were given a simple diagnosis on basis of their appearance when they arrived in the asylum. They were classified as 'Ganja smokers', 'Wanderers', 'No family' etc. These types of classification did not have any clinical authenticity. The following table exhibits the different causes of insanity among the natives.

	CUTTACK	DACCA	DULLUNDA	MOYDAPORE	PATNA	TOTAL
EPILEPSY	-	9	13	-	-	22
GANJAH	21	165	114	19	70	389
LIQUR DRINKING	-	6	3	-	25	34
MASTERBATIONS	-	-	1	-	-	1
OPIUM	2	8	3	-	4	17
CHURUS	-	-	1	-	-	1
DISSIPATION	1	1	-	1	-	3
JUNGLE FEVER	1	3	-	-	-	4
ANGER	3	-	-	-	-	3
RELIGION	3	4	-	-	-	7
GRIEF	6	5	-	-	-	11
LOSS OF CROPS	1	4	-	-	13	18
LOSS OF RELATIVES	-	-	-	-	28	28
FRIGHT	1	-	-	-	-	1
POVERTY	1	-	-	-	-	1
JEALOUSLY	2	-	-	-	-	2
HERIDITARY	-	15	-	11	1	27
CONGENITAL	-	5	-	-	-	5
CAUSES UNKNOWN	6	127	254	57	49	493
TOTAL						1,067

**Source: Annual Report of the insane asylums in Bengal for the year 1865, P- 3.**

W.A Green ,the Principal Inspector General of Medical Department point out the fault of reporting such a way by saying that , "...the causes of Insanity are shown to be intemperance, and intoxicating drugging in four fifth of the known causes; in the cases of half of admission, nearly, no cause is assigned, so imperfectly are the histories of Insane reported."<sup>15</sup> Likewise the causes the types of the insanity was not established by the doctors on clinical ground. The following table showing the confusion related to the classification of the types of insanity.

FROM OF INSANITY	TOTAL NUMBER	SEX		CURED	AVR.PERIOD UNDER TREATMENT DAY	AGE OF ADMISSION				
		MALE	FEMALE			UNDER 20 YEARS	20 TO 30	30 TO 40	40 TO 50	50 & UPWARDS
MONOMANIA	1	1	-	-	-	-	-	-	-	1
MANIA	46	37	9	7	217.7	-	9	26	8	4
DEMENTIA	5	4	1	1	142	-	1	2	1	-
AMENTIA	3	3	-	-	-	1	2	-	-	-
TOTAL	55	45	10	8	179.85	1	12	28	9	5

**Source: Annual Report of the insane asylums in Bengal for the year, 1862, P-65.**

Without proper diagnosis the treatment was improper. The common mode of treatment were using morphia, tincture, bromide of potassium, Chloral Hydrate with cold and hot bath.<sup>16</sup> Class-I European patients were sent back to Pembroke Asylum in Ealing in England for better treatment, if they did not recover within six months of their admission in a mental hospital in India. This practice started in 1818 and continued till 1891. The passage money and other expenses were paid by E.I.C as loan, to be reimbursed by the patients after recovery. Gradually the flow of patient was reduced as the Royal Indian Asylum was closed down in the 31st December, 1891.<sup>17</sup> The process of treatment for native insane was different. In the last quarter of 19th century "Current electricity" was frequently used in the native asylum of Dullunda. Dr. Payne the then Superintendent of that asylum expressed his satisfaction regarding the result of electric shock treatment. It was very painful. It is interesting to note that Dr. Payne was simultaniously a Superintendent of a nearby European hospital. But he never implemented this method of treatment on his European patients.<sup>18</sup>

Another mode of treatment was "Occupational therapy". But it was introduced only in Native Asylums as working on the sunlight might be harmful for the Europeans. But in case of native asylums, the inmates were forced to do work, but their work was said to be 'Voluntary'. These forms of labour was known as 'Lunatic Labour' which included garden products, castor oil ,mustard oil manufacturing, soorki manufacturing, coir weaving, wheat grinding, road making and so on. The Asylum reports categorized these different jobs collectively as "Asylum Industries."The females were principally employed in grinding wheat, spinning, thread and soorke making.The hours of labour were from 7 to 11 AM and from 2 to 5 PM.<sup>19</sup> All these productive business generated lots of money as profit for the asylum. The Annual Report of the lunatic asylum contained multiple chapters on these profit making industries. The following table shows the profit of the labours in Asylum at Dacca for the year 1862.

NATURE OF OCCUPATION	AMOUNT OF PROFIT			REMARKS
	RS.	AS.	P	
MUSRARD OIL MAKING	155	0	9	
ROPE & STRING MAKING	63	0	9	
BAMBOO & CANE WORK	133	0	9	
GARDINING	78	8	9	
SOORKIE PONNDING	58	13	0	
CARPENTING	151	6	9	
COOLIES' LABOUR	250	0	0	
DOMESTIC DUTIES	371	1	0	
TAILORING	12	0	0	
GRINDING WHEAT	7	12	0	
TIN SMITH'S WORK	4	0	0	
TOTAL LABOUR FOR LUNATIC LABOUR FOR 1862	1,284	411	9	

**Source: Annual Report of the insane asylums in Bengal for the year, 1862, P-62.**

The Report of 1862 mentioned the success of gardening. They were only in the second year of production and already started feeding the native asylum, European asylum as well as jails. Dr.Payne the Superintendant of asylum was in tension as garden production was not satisfactory in 1862.<sup>20</sup> Quest for profit was the motto of the colonial government. They were concerned only with the profit margins and never felt it necessary to utilize the garden fresh fruits and vegetables for the benefit of the asylum inmates.

We may conclude that, the history of psychiatry in Bengal mirrors the history of psychiatry in India. Through this institutional health services we can actually peep into the actual intention of colonial masters. They came here with a 'Civilizing Mission' and tried to teach us a lesson of discipline, morality, humanity. But in every field they have violated all these ideology. Profit and power were their sole motto in India. To establish their hegemony they have colonized the body as well as the mind by establishing such quarantine institutional services. Thus, Lunatic asylums were simply another site in which Europeans implemented colonial power.

## References :

1. Kymberly, Brumlik.C, “Lunacy for Profit: The Economic Gains of ‘Native –Only’ Lunatic Asylums in the Bengal Presidency, 1850s-1880s” in *Journal of South Asian Studies*, 02(01), 2014, p-1.
2. Basu, Amit. Ranjan, “A New Knowledge of Madness-Nineteenth Century Asylum Psychiatry in Bengal” in *Indian Journal of History of Science*, 39.3(2004).p-26; also in Varma ,L.P, “History of Psychiatry in India and Pakistan” in *Indian Journal of Neurology and Psychiatry*,4. 1-2(1953).pp-3-4.
3. Crawford, D.G, *A history of Indian Medical Service*, London, 1914, pp-428-429.
4. Ernst, W, “The European Insane in British India, 1800-1858: A case Study in Psychiatry and Colonial Rule’ , in Arnold,David (ed), *Imperial Medicine and Indigenous Societies*, Delhi, OUP, 1989,pp-27-44.
5. Basu,Amit.Ranjan ,*op.cit*.p-262.
6. Bhattacharya, Anoushka, *Indian Insanes: Lunacy in the ‘Native’ Asylum of Colonial India, 1858-1912*, Doctoral Dissertation, Harvard University, 2013 p-35.
7. Das, Debjani, *Houses of Madness: Insanity and Asylums of Bengal in Ninetheenth Century India*, New Delhi, 2015.p-18.
8. Annual Repot of the Insane Asylums in Bengal for the Year 1865, Calcutta, 1866, p-2.
9. Allen, Charles(ed), *Plain Tales from the Raj: Images of British India in the 20<sup>th</sup> Century*, London , p-162.
10. *Annual Report of the Insane Asylums in Bengal for the Year 1876*, Calcutta 1877, p-21.
11. Moore, W, J. *A Manual of the Diseases of India*, London, 1861, p-130.
12. Das,Debjani, *op.cit*,p-162.
13. Banerjee, Gauranga, “Mental Hospitals and Healing Practices in Colonial India” in *Mental Health Review*, 2001, p-3.
14. *Annual Report of the Insane Asylums in Bengal for the Year 1862*, Calcutta 1862, p-10.
15. *Annual Report of the Insane Asylums in Bengal for the Year 1865*, Calcutta 1862, p-3.
16. Basu,Amit.Ranjan ,*op.cit*,p-269.
17. Banerjee, Gauranga, *op.cit*,p-3.
18. Banerjee, Gauranga, *op.cit*, p-4.
19. *Annual Report of the Insane Asylums in Bengal for the Year 1862*, Calcutta 1876, p-21.
20. Kymberly, Brumlik.C, *op.cit*, p-4.
19. Annual Report of the Insane Asylums in Bengal for the Year 1862, Calcutta 1876, p-21.
20. Kymberly, Brumlik.C, *op.cit*, p-4.