

Lunatic Asylums in South Australia – A Building History.

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South Australia's First Lunatic Asylum (1846-1851)

Before the first Public Colonial Asylum was opened in 1846, there were no formal arrangements for the care of people found to be insane and residing in the colony. The Gaol provided the only possible accommodation for those insane found wandering the streets of Adelaide, South Australia's capital. In 1841 Dr. John Palmer Litchfield, who had come to the colony in 1839, had tried to establish a private mad-house in Adelaide (Bostock 1968: 144). Litchfield was to advertise Moorcroft House Asylum in *the South Australian Register* (April 17th 1841) but as letters from the Colonial Secretary to Litchfield indicate the colony did not have any legislation in place which would allow such asylums to operate (S.A. C.S.O. Letters 24/4/78). While such legislation was not passed until 1844, in July of 1841 Robert Gouger, the Colonial Secretary wrote to Litchfield that it was the intention of the colonial authorities to entrust to him the care of lunatics under the charge of the Colonial Surgeon for which he would be enumerated (S.A. C.S.O. Letters 24/4/159). This arrangement does not appear to have been satisfactory and Litchfield does not seem to have received any lunatics paid for by the government (Quarty 1966: 15-16).

On July 22nd 1841 the Colonial Secretary asked the Assistant Commissioner Charles Sturt, the Emigration Agent J. Matioe, and the Colonial Surgeon James Nash, to form a Board to consider the appropriate care of pauper lunatics: "regarding particularly the pecuniary state of the Province." (S.A. C.S.O. Letters 24/4/171). It seems likely that this pecuniary state would have affected any arrangement with Litchfield as he was asking for £100 per annum for each referred patient (Bostock 1968: 146). The Board

recommended that medical practitioners individually take charge of lunatics (Bostock 1968: 147), a practical solution financially for the colonial authorities. Despite this recommendation the Gaol continued to be the main residence for male and female lunatics. This situation was far from ideal as prisoners were required to care for the lunatics who were confined to the Debtors Yard on the men's side and the Solitary cells (Bostock 1968: 147). The lunatics effectively remained under the charge of the Colonial Surgeon, James Nash.

In March 1846 a house adapted to the purposes of a lunatic asylum was leased by the colonial government as a temporary measure (S.A. Gov. Gaz. May 7th 1846). Located on Section 264, District A on the eastern plains of Adelaide, the house came with one acre of grounds and was leased for two years initially (S.A. C.S.O. Letters 24/6/249; 24/6/1553). The government undertook to pay for such alterations as were required to make the house fit for an asylum. These seem to have been limited to making two detached buildings in the rear of the yard into one room of 14 square feet, and in September, the addition of a fence to create separate yards for the men and women (S.A. C.S.O. Letters 24/6/461, 24/6/1173).

However, the provision of the house for use as a lunatic asylum did not solve the problems of accommodating the insane, for in November of 1847, the head keeper William Morris was to write to the Colonial Surgeon of the dangers associated with a lack of proper rooms for the care of dangerous lunatics:

...unless the Patients are separated in one or two single cells, it is impossible to maintain that control over them, which is necessary for the preservation of the lives of the inmates of the establishment: more particularly during the night (S.A. C.S.O. Letters 24/6/1049).

Morris had in the last two nights saved the under keeper from a murderous attack by an inmate, and found that bricks had been removed from the fireplace during the night by the inmates for use as missiles. Morris indicates that he had only two cells and could not

separate the inmates; the only other option was to place them all in restraints.

Consequently he requested the employment of a third keeper to spend the night with the patients (S.A. C.S.O. Letters 24/6/1049). There is no evidence as to whether one was appointed.

From this letter and an earlier letter it is clear that the house was composed of two floors, and that there was a 'visiting room' which the Colonial Surgeon used to see inmates. The use of the term 'cell' is slightly ambiguous in this setting, as the cells appear to have been two small dormitories rather than single bed rooms. A report of 1856 indicates that the asylum had five rooms but does not indicate their purposes (Bostock 1968: 154). It seems likely that these were primarily used by the inmates as the Visitors, who had been appointed March 1847 to inspect the asylum, had noted the absence of accommodation for the keeper and his family (S.A. Visitors 14/9/1847).

That this asylum did not offer sufficient accommodation for the colony's lunatics is indicated by the fact that, in August of 1849, there were eight lunatics again residing in the Debtor's Yard of the Gaol (S.A. Gov. Gaz. 16/8/1849). The lack of room in this asylum led the Lt. Governor to direct the Colonial Surgeon to consider appropriate locations for the first planned lunatic asylum. The site Nash chose was on the western side of the colonial hospital, on a gentle rise, and sufficiently elevated to catch fresh breezes and with the boundary wall lower down so that the rise the inmates would be able to see over the walls. The Dispensary of the hospital would be near and the House Surgeon could be readily called for in case of emergency. More importantly, in 1849, the site was considered far enough from town to prevent annoyance to the inhabitants, yet close enough for the Visitors appointed to the Lunatic Asylum to make their inspections, and for the visits of patient's friends (S.A. C.S.O. Letters 24/6/1343). This is an important point as Nash had probably not considered that the town would grow rapidly up around the site.

As early as 1847 it had been estimated that a new lunatic asylum to accommodate 36 lunatics would cost £3,893 16s. 6d. and the sum of £3,893 16s. 8d. had been placed in the Supplementary Estimates of 1849 (S.A. C.S.O. Letters 24/6/1640; S.A. Gov. Gaz. 6/8/1850). In his letter of April 15th 1850, the Colonial Engineer, who had been called upon to draw up plans for the new asylum in 1849, indicated that he was drawing up new

plans and specifications as the previous design could not be built for this amount and had not included accommodation for a resident surgeon (S.A. C.S.O. Letters 24/6/889).

In July the Colonial Engineer indicated that the design drawn up in 1849 would have cost between £5,000 to £6,000 to execute. The new plan would accommodate 60 patients, the House Surgeon, Head Keeper, two Assistant Keepers, Housekeeper, the Cook and Washer. As the lowest tender for this design was £4,774, he was willing to dispense with the end portion of the right wing and the back offices for the present time reducing the cost by £590, leaving an excess of £300 (S.A. C.S.O. Letters 24/6/1640). He believed the wants of the community was such that an asylum to accommodate fewer patients would not be workable. Subsequently a further £880 3s. 6d. was voted for the asylum in the Supplementary Estimates of 1849 (S.A. C.S.O. Letters 24/6/1640 cover note). Tenders for the new asylum were called for in June 1850 and in March 1852 the Governor publicly announced the existence of a new Colonial Lunatic Asylum in the Parklands (S.A. Gov. Gaz. 6/6/1850, 4/3/1852).

The Adelaide Lunatic Asylum

The first 13 lunatics were moved into the new asylum on March 22nd 1852 from the rented premises, initially they were to share the lunatic asylum with the destitute who occupied the second storey. This move based on economics was to continue until August 1853 (S.A. C.S.O. Letters 17/1/1852 and 24/6/1990). The Visitors were not happy with this arrangement as the noise of the destitute above excited the lunatics, and they suggested that one half of the building be used by the destitute and one half by the lunatics with separate entrances being used by each. Other problems with the new asylum included a lack of bars on the windows to prevent possible escapes and the lack of peep holes in the cell doors through which keepers could observe the inmates. Fencing was also required to create exercise yards for the inmates (S.A. Visitors 30/3/1852). In May of 1852 the asylum was housing 21 patients. The Visitors indicated that there was only one yard which the men and women used alternatively (S.A. Visitors 5/1/1854). Construction of the external walls began a month later and, by April, the women had their own yard and the men theirs by June. These yards were behind the main building.

From quite early on it was realised that the new lunatic asylum might not be sufficient to meet the needs of the colony. In November of 1852 the Visitors found that many of the single cells in the male department were accommodating two men and patients were sleeping on the floor (S.A. Visitors 8/11/1852). A problem exacerbated by giving some of the accommodation over to the destitute. Consequently lunatics were still residing in the Gaol rather than in the asylum. In 1853 an interesting comment in the Visitor's book indicated that two respectable females had gained admittance to the asylum causing other patients to be placed in the common gaol (S.A. Visitors 11/11/1853). Presumably these women were paying patients, and it appears that economics were more important than patient treatment, as conditions in the gaol were far from ideal.

As early as September 1853 the Colonial Architect, W. Bennett Hays, in consultation with the Colonial Surgeon, was drawing up plans for modification of the lunatic asylum. Of immediate concern was the need for additional accommodation for 40 patients. The water closets needed to be relocated into the yards, the shower bath and wash rooms needed to be relocated into the plunge bath rooms, day rooms for both men and women were needed, while the large rooms upstairs needed partitioning into smaller rooms. A laundry and drying house were required as were separate exercise yards for men and women with 12ft. high walls. The plans drawn up featured two wings extending from the back of the existing building, each of two stories to provide the necessary accommodation. These would have airing courts attached, while in the centre space between them would be a kitchen/laundry yard with a kitchen, washing room, laundry, drying room, fuel shed and boiler house. The plan also included a boundary wall to create gardening opportunities for the convalescent patients, a lodge and entrance gate, a carriage drive and side road giving access to the back of the premises. The total costs were as follows: external boundary wall with lodge and gates £2,994/4/-; airing courts £934/1/-; alterations to existing buildings £9,104/15/-; 5 per cent for contingencies \$667, a grand total of £14,020. Of which £2,937 had already been placed in the Estimates for 1854 (S.A. C.S.O. Letters 24/6/2429). In total the Estimates indicate that £3,688 3s. 2d had been voted in 1854 for alterations to the asylum considerably less than needed.

Interestingly while the lunatic asylum had been designed for 60 patients, Bennett Hays indicates that it only accommodated 40 patients (S.A. C.S.O. Letters 24/6/1990).

James Nash, the Colonial Surgeon, had earlier in the year expressed a desire for separate wards for male and female incurable patients, and in particular for those cases complicated by the presence of epilepsy. He notes that in the large asylums of England these cases would not be admitted, but he felt in the colony that they would be better accommodated in the lunatic asylum than the Gaol or Destitute Asylum. It is likely that some of the new ward space proposed would allow this to happen (S.A. C.S.O. Letters 24/6/1590).

On October 27th 1853 a Select Committee on the Expediency of Carrying out Certain Public Works was appointed and they were to consider the plans for the alterations and additions at the Lunatic Asylum. It is clear from the evidence that the Colonial Surgeon was aware of future needs in terms of the accommodation of the insane. He indicated that at the present time there were 26 lunatics in the asylum and 3 in the Gaol, and with the completion of the alterations to the first floor of the asylum it would comfortably hold 36 patients, 41 in less ideal circumstances. To meet the present population's requirements he believed the asylum should hold 75 patients at least. His figures are slightly unclear as he then proceeds to indicate that the additions should be for 40 more patients: "and it should be made to meet the case of about sixty additional patients." (S.A. P.P. 1853 No. 89). It is possible he was indicating that the new additions should be designed to allow for further additions or that the rooms should be sufficiently large for doubling up patients in rooms although he does not appear to support this option. The only alterations to the plans drawn up by Bennett Hays he recommended was that the corridors should be 10ft. wide instead of 8ft. and that they be placed as to allow a view of the country for the patients (S.A. P.P. 1853 No. 89).

Under further examination Nash suggested that the Government should consider a new lunatic asylum to accommodate 200 patients located on from fifty to one hundred acres about two miles from town, which would be convenient for friends and medical attendants to visit while keeping away curious visits from others (S.A. P.P. 1853 No. 89). In this he was closely following the recommendations of Conolly and others on the prescribed size and location of a lunatic asylum. On being examined, Bennett Hays, the

Colonial Architect, indicated that it would take him two months to prepare plans for such a building, and from a practical point of view, a portion of the new asylum could be made available in the same time that it would take to build additions to the present asylum. The Committee, who were also considering additions to the Destitute Asylum at a cost of £3,500, took a practical approach and recommended that a new lunatic asylum be built to accommodate 135 patients at a site of 50 acres some few miles from the city. This would leave the present lunatic asylum available for the accommodation of the destitute for which it was well adapted. Consequently the work on the lunatic asylum should be suspend and £10,000 added to the Estimates of 1854 for a new asylum (S.A. P.P. 1853 No. 89). The Report was subsequently passed by the Legislative Council.

The Adelaide Lunatic Asylum had been built on an area of land which had formerly been used as a police paddock, and the land around it continued to be used for this purpose. In October of 1854 it was proposed that forty acres of the paddock between the lunatic asylum and the colonial hospital be dedicated to the purpose of a Botanic Garden. The proposal was accepted and the gardens officially opened in 1857 (S.A. V. & P. 18/10/1854).

In Jan 1854 Bennett Hays and the Colonial Surgeon were of the opinion that they had found the most eligible site possible for an asylum in Adelaide. Section 848 of a block of land in the village of Woodforde, near Magill in the Adelaide foothills, had running water on it all year, had pure air, a commanding view, was a reasonable distance from the city, and was accessible from the road, but still removed enough for privacy for the inmates. This land was for sale by auction and by May of the same year the Government had completed the purchase of the land. Captain Duff was paid £2,499 6s. 2d for his land at £34 and £48 10s. an acre. The purchased comprised Blocks 837-840, 847-849, 854-856, totalling 60 acres, 3 roods and 4 perches. (S.A. C.S.O. Letters 24/6/172; 24/6/984; 24/6/1402). It appears from Bennett Hays' notes that he had also found a source of building material near to the purchased land or on it (S.A. C.S.O. Letters 24/6/984).

In August of 1854 Bennett Hays wrote to the Colonial Secretary indicating that he had prepared plans and estimates for the new lunatic asylum at Woodforde. While the

plans no longer exist, he happily went into some detail in his letter. The asylum would accommodate 228 patients, 114 of each sex, and he would importantly:

...endeavoured to follow, in planning the arrangements, the best models of English Asylums, to which I have had access, with such specifications, as are necessary to adapt it to the peculiarities of this climate (S.A. C.S.O. Letters 24/6/2506).

The centre of the main building would contain the Receiving and Committee rooms, the Chapel and offices, and the apartments for the 'Officer of the Establishment'. The men and women would be housed in wings on either side of the centre, with infirmary wards for 10 patients connected with each wing. Immediately to the rear of the centre building would be the kitchen offices, storerooms etc. Within the boundary walls on either side were to be the airing courts bounded by 12ft high walls. In the rear of these airing courts would be, on the male side, workrooms, and on the female side, a washing establishment and drying yard.

At the extreme ends of the wings would be partly detached buildings that would house wards for patients of a superior class. These were added at the suggestion of Dr. Bompas, one of the Asylum Visitors. These would fulfil the role of private asylums and would be sufficient to house the limited number of such patients for many years. Thirty acres of the grounds to the front of the asylum would be enclosed by a 6 ft. high boundary wall to allow room for patients to cultivate and garden the grounds. The entrance gates would be guarded by a lodge and adjacent stables would be provided for visitor's horses. The area behind the asylum would include a further 33 acres through which a stream ran. The stream would be fenced off. A portion of the area was given over to farm and dairy buildings, and a cottage for a cow keeper. The other acres would provide grazing for animals. The total cost would be £80,300 (Table 1) or £352 per patient (S.A. C.S.O. Letters 24/6/2506). Bennett Hays indicates that while this figure seems high, it is comparable to that of asylums in Great Britain. He notes that the average cost per head of five leading, but not named, asylums was £158, and for Irish asylums

£183. As building costs in the colony were double that of England, the Adelaide asylum compares favourable at £352 with the doubled Great Britain figures of £316 and £386 (S.A. C.S.O. Letters 24/6/2506). The design, Bennett Hays felt, was amenable to building in stages. While there are no details of the ward design it seems that the new asylum would be built with linear corridor wards and a central administration block found in many of the English lunatic asylums actually built. Hays was following these designs in his placement of the workrooms and laundry. The inclusion of the farm and dairy follow the English pattern of increasing self sufficiency. The present Lunatic Asylum had been built with no workrooms and the laundry had been an afterthought. There appears to have been little interest in developing the Adelaide site along agricultural lines.

Unfortunately, the available documents give no clear reason as to why the construction of a new asylum was not pursued. The most likely factor was the sheer cost of such an asylum, and whether the colony was in the position to spend such an amount of money on an institution for the insane. South Australia lacked the established infrastructure to be found in England to raise the necessary funds for such a project even if it fell within the domain of the 'ideal' asylum and allowed for the subsequent growth in the number of the insane to be cared for. Rather than building a new asylum work began on modifying the Gaol to take the overflow of lunatics from the existing lunatic asylum.

On January 24th 1855 the Colonial Secretary had informed the Colonial Architect that it had been decided to proclaim part of the Gaol a Lunatic Asylum, and he required estimates for altering a portion of the gaol to this purpose, allowing for separate ingress and egress to that portion and affording no opportunities for escape (S.A. C.S.O. Letters 24/6/72). Notes on the cover of the letter indicate that the appointment of a keeper to help with the lunatics in the gaol had not been made in anticipation of the building of a new asylum, and that a sum should be applied for in excess on the Estimates to pay for the modifications and for a wardsmen. The Deputy Sheriff Egan had asked for these modifications and the extra keepers as early as July 3rd 1854 as the lunatics were being cared for by prisoners day and night. This had not allowed the proper administration of medicines and medical comforts, and the constant change of carers upset the lunatics who had got used to one person (S.A. C.S.O. Letters 24/6/72). His plan of the gaol indicated where he believed the provisions for the lunatics and their keepers should be made (Fig.

1). He required four yards for the classification of prisoners: one for females convicted and awaiting for trial; one for males convicted and awaiting trial; one for debtors; and one for sailors and short sentenced men. Consequently he believed yards No. 1 and 2 were best adapted for the use of lunatics but would leave him only 3 yards. The buildings along the bottom perimeter of yard No. 1 were two storied and could be easily converted into wards and a residence. The adjoining area marked Stockade, the Colonial Surgeon Dr. Nash believed, could be easily adapted into an exercise area (S.A. C.S.O. Letters 24/6/72).

By February 6th the new Surveyor-General, Captain Freeling, had prepared plans of the proposed alterations to the Gaol. The main problem was in creating a separate access through the inner and outer walls of the Gaol for the lunatics to use, as this would allow an opportunity for the prisoners to escape. Consequently the Colonial Surgeon considered that the complete separation of the lunatic asylum portion was not sufficiently justified so as to proceed. Instead modifications were to be limited to changes in the rooms for the lunatics. These included a new floor in the tread mill room to create an upper and lower floor, and a partition in the mill room to create an area for the keeper. These rooms were to have three new windows and two doors in the back wall. Three additional rooms were to be added to the existing ones in the area between yards No. 1 and No. 2 for use by the female patients, while a veranda would be erected in the Stockade area to provide shelter in the exercise area. The total cost of these alterations would be £900 and would have to be added to the Estimates (S.A. C.S.O. Letters 24/6/545). From a note on the cover of the letter it appears work at the Gaol was not undertaken as a possible enlargement of the Lunatic Asylum was being proposed. This was probably due to the gross unsuitability of the Gaol as an asylum.

At the time these alterations were proposed the Gaol was housing 23 lunatics. By November of 1855 the Gaol was housing 35 lunatics (S.A. Gov. Gaz. 8/3/1855 and 8/11/1855). Table 2 outlines the available accommodation in both the Gaol and the asylum in 1855. At the time the average sleeping space for the women in the Gaol was 186½ cubic feet and for men 296½ cubic feet, the Gaol infirmary offered even less at 66½ cubic feet. This was in sharp contrast to the asylum space of 556 cubic feet per patient (S.A. P.P. 1855-6 No. 117). It was these appalling conditions at the Gaol and the

treatment of lunatics there that was to form one of the primary focuses of the Select Committee of 1856.

The Select Committee was appointed to inquire into the treatment of lunatics in Her Majesty's Gaol and Lunatic Asylum on January 25th 1856 and reported to the Legislative Council on February 22nd. The Minutes of Evidence of the Committee were to reveal the appalling conditions under which the insane were being kept in at the Gaol. Reflecting the pressures on accommodation within the Adelaide Lunatic Asylum, in January of 1856, there were equal numbers of lunatics in the Asylum and the Gaol (30 and 29 respectively). The lunatics in the Gaol were being cared for by a male and female keeper and there were no proper beds for them, boards and doors being used in their stead with straw mattresses. The yard was without shelter and the heat built up in the confined space. The lunatics lacked clean clothes and clean mattresses, and supplies were difficult to obtain (S.A. S.C. 1856: Q. 191, 202-3, 215, 308, 311, 314, 317, 331, 916, 1014). The fireplaces had been blocked and the Keeper was unable to heat the rooms in winter despite drawing the Colonial Surgeon's attention to the problem (S.A. S.C. 1856: Q. 334, 377). There was only one small bath available and 2 towels for 29 lunatics to use meaning hygiene was a real concern. The female keeper equally lacked the proper utensils and washing soda to wash the clothes and linen (S.A. S.C. 1856: Q. 929-931, 936). As in the main asylum women were employed in washing and mending the men's clothes, but there were no amusements such as packs of cards (S.A. S.C. 1856: Q. 997-999).

Despite the poor conditions in the Gaol, some patients were actually sent there from the Lunatic Asylum, while others had spent up to two years in the Gaol (S.A. S.C. 1856: Q. 495, 958). Keeper Morris in his evidence clearly indicates that the conditions at the Gaol were so bad as to lead to patients becoming incurable (S.A. S.C. 1856: Q. 850, 868). This to a degree reflects a treatment regime that was falling short of the moral or humane treatment trends found in England.

This was primarily a consequence of a failure to recognise the need to provide for future rises in the number of lunatics requiring care. Hence, as had been the case in England, the Lunatic Asylum had been built for the existing number of lunatics rather than in anticipation of future needs. The attempts to provide for this future need in the

form of a new asylum at Woodforde went too far, both in its planned size of two hundred patients and its great cost, which was more than the colony could sustain. As South Australia's population rose so did the proportion of cases of insanity, but only slowly (Table 3). Clearly there was no overwhelming urgency to provide a new asylum. The arguments for the provision of a lunatic asylum rested on what might be called emotive issues, these include the recognition that the insane person should be treated with the same dignity and respect as a sane person would expect, and that a comfortable environment was necessarily to be provided. Insanity or mental illness is a uncomfortable topic for many people both in the nineteenth and twenty-first centuries, and the provision of asylums crossed lines of charitable care for the 'unfortunates' and the growth of medical power to cure disease. A considerable amount of money had to be spent in the building of lunatic asylums and the maintenance of lunatics within them. This had to be seen as a viable option with some form of return or benefit for society. In South Australia the Visitors to the Lunatic Asylum seem to share some of this ambiguity towards the insane, with some individual Visitor's making thorough and regular visits, while others visited only when it was their month to inspect conditions (S.A. S.C. 1856: Q.1008, 1076, 1078).

The problems with the Gaol were also to arise partially from the system of hierarchy that directly affected the management of the lunatics. The Colonial Surgeon was in charge of the lunatic asylum but was not resident within it. Instead Dr. Thomas, who was the Resident Surgeon at the Asylum and House Surgeon at the Adelaide General Hospital, resided in the Asylum and looked after its general management. However, the majority of his time was devoted to the Hospital (S.A. S.C. 1856: Q. 584, 677). Certainly there was at this time no resident Superintendent as would have been found in English asylums of the period who would maintain a consistent management regime.

It was to become clear through the Minutes Of Evidence that while the Gaol had been declared a lunatic asylum, there was no one official placed in charge of the care of the lunatics there and the Gaol was all but forgotten by those in charge of supplies, such as clothing and linen, and by the Visitors, who did not monitor the condition of the insane in the Gaol as they did the Asylum (S.A. S.C. 1856: Q. 308, 311, 314, 317, 324).

The problems with the Adelaide Lunatic Asylum design itself were further indicated in the Minutes of Evidence. A large proportion of the available rooms were being used by staff. The Head Keeper and his wife were occupying four rooms; another two keepers who were married had two rooms and a cell for their use. The non-married keepers had one sleeping room each; these were 11 ft. by 6 ft. The Resident Surgeon was occupying a further four rooms. He had a sitting room, bedroom, kitchen and a servant's room in the Asylum (S.A. S.C. 1856: Q. 89, 633-7). While it is not stated explicitly this kitchen may have in fact been more of a scullery with the main cooking undertaken in the kitchen proper. The limited accommodation saw the doubling up of patients in cells no larger than 10ft. long and 7 ft. 4 in. wide. Dr. Gosse, the Acting Colonial Surgeon, indicated that most rooms had one occupant but one "long cell" was occupied by two patients, in contrast Dr. Thomas, the Resident Surgeon indicated that most were housing two patients (S.A. S.C. 1856: Q. 80-6, 31). Probably the latter was true as the Asylum was very full having on February 2nd 42 patients in 30 cells. The cell arrangement actually limited the possible changes to patient accommodation by their nature as small spaces.

Asked about the need for increased accommodation Dr. Gosse believed that the most suitable approach was to enlarge the present asylum, but additional land was also required if this approach was to be taken (S.A. S.C. 1856: Q. 166-7). Due to the presence of the Botanic Gardens and the bounding roads the only possibilities were to extend the yards back over the creek. In terms of shape, Dr. Gosse favoured a T shape with a two storied building which would have two rows of cells on each floor extending back from the present building. Gosse favoured the single cell over dormitories as it allowed the effective supervision of the most number of lunatics by the minimum of keepers. Failing an addition the present hospital could be utilised for the accommodation of imbeciles as a separate establishment after the new one was completed. At a more general level he believed the asylum's accommodation should be made up to accommodation for 100 (S.A. S.C. 1856: Q. 169-171, 280). Dr Thomas on the other hand believed that the lunatic asylum should be removed entirely to the country, as the dampness and the effluvia of the town made the site unhealthy. This he believed contributed to a higher death rate among the inmates (S.A. S.C. 1856: Q. 711-12, 715).

The Committee in its Report was to focus on two main issues: the failings of the Lunatic Asylum and the conditions at the Gaol. While the Committee felt that the Asylum meet standards of cleanliness and order and the patients were treated kindly, they felt a serious evil was the indiscriminate mixing of all types of patients without classification. This would hinder possibilities of recovery. Equally:

The absence of diverting sources of amusement or employment was painfully apparent, as it left the patients to saunter about, without opportunities or means of relieving their minds of subjects to them of exciting interest.” (S.A. S.C. 1856: iii).

In terms of the Asylum itself the Committee found that the yards offered no shelter from the sun or rain, and in the latter case it became unusable - making exercise difficult or injurious.

To ease the overcrowding the Committee recommended an extension to the rear of the Asylum building as the most convenient and speedy option. Coupled with the use of the old Adelaide (general) Hospital for “patients whose cases are considered hopeful and temporary, and who are of a quiet and inoffensive disposition;” (S.A. S.C. 1856: iii). The area between the Hospital and the Asylum was to be used as a garden for the inmates. The quickest remedy to the problem of the overcrowding they believed was for the Resident Surgeon temporarily to move out of the Asylum and for his rooms to be used to accommodate 12 to 20 patients. This would relieve conditions within the Gaol.

Reporting on negligence in relation to the Gaol, the Committee were to simply state the facts and note the improvements made by the Acting Colonial Surgeon. Their concluding recommendation was that funds be appropriated as soon as possible to build the needed extra accommodation.

From Commission to Select Committee (1856-1869)

In 1856 work commenced on building new dormitories to the rear of the main building of the Asylum. This new wing was to consist of two new wards of single cells

with day rooms. The building was completed by March 1857 with the upper floor immediately occupied (S.A. Visitors 6/3/1857). Reflecting possible financial concerns, the accommodation appears to have been limited to 10 single rooms in each of the two wards. Assuming keepers occupied possibly one or two rooms this allowed accommodation for only 16-18 more inmates at cost of £3,500 (S.A. P.P. 1859 No. 31). Other work included extending the exercise yard and the creation of another; the expanding of the drying yard to include the creek behind the asylum; and the creation of shelter sheds in the yards and of a garden (S.A. P.P. 1857-8 No. 102; S.A. Visitors 12/5/1857). It is possible that the Resident Superintendent had moved out as there was a reduction of the number of lunatics in the Gaol from 35 to 5 infirmary cases following the Select Committee Report. After July of 1857 no lunatics remained in the Gaol (S.A. Gov. Gaz. 3/7/1856, 31/7/1857).

The deficiencies of the available day space at the Asylum remained such that the Visitors quickly recommended that the front of the shelter sheds be enclosed to create dining rooms. This was done by Sept 6th 1858. While the pressure on male accommodation had been eased, the women's wards continued to be overcrowded, and the Visitors were to recommend further additions. Classification was still a problem and further exercise areas were needed and more land was required (S.A. Visitors 6/10/1858, 13/11/1858, 4/1/1859). In 1859 the Visitors noted the need for a larger kitchen to allow more variety in food preparation, the need for more female accommodation, and a second yard for the women to use. In an interesting side note the lack of classification of new and convalescent cases due to the limited space available meant that knives and forks could not be issued to the patients, only spoons (S.A. Visitors 152/4/1859, 6/7/1859, 10/8/1859, 15/5/1860).

Funds for further additions for the Lunatic Asylum had been voted in 1859 (£2,500) but the Government had decided to reserve the funds for a new Destitute Free School as the children were being currently housed in the old hospital.¹ The latter could then be given to the Lunatic Asylum. Additions were made to the Destitute Asylum in 1860 and these may have included the construction of a free school (Piddock 1996: 118). Certainly the Visitors appear to indicate that the hospital was available to the Asylum in 1861, but work was needed to make it habitable (S.A. Visitors 30/1/1861). The Visitors

went on to state quite clearly that the present asylum was unsuitable for its current use and that classification was impossible. They called upon the government to appoint a Commission to consider the site of a new asylum and that funds should be devoted to this purpose as soon as possible. Importantly this new asylum had to be built on a new plan (S.A. Visitors 30/1/1861).

Unfortunately, there is a gap in the Visitors Books. The ones covering May 1861 to June 1869 are lost and make it more difficult to plot changes at the Asylum. The Architect's Record Book indicates that work did begin on a second male dormitory building through 1861-3. This abutted the existing addition and offered 18 cells, two dormitories and two small day rooms over two floors, with a further day room in the partial sub-floor. As the ground sloped down away from the asylum this floor was above ground. While this provided some relief for the men, other problems continued to arise. Consequently in 1864 a Commission was established to Inquire into and Report on the Management, Etc., of the Lunatic Asylum and Hospital. Again the question of the appropriateness of the existing lunatic asylum was considered and the possibility raised of a new planned asylum.

Some of the overcrowding of the Adelaide Lunatic Asylum had been eased by the use of the old general hospital. But this in turn had presented new problems. The hospital had only dormitories and the imbecile men accommodated there would go without sleep if one patient created a disturbance. Space was still not sufficient, even though the use of the hospital had allowed for some separation of refractory and quiet males in the Asylum proper. The women were still mixed together (S.A S.C. 1864 Q. 42). In response the Commission turned its attention to the question of a new lunatic asylum.

On being asked about the best site for a new lunatic asylum, Dr. Moore, the Colonial Surgeon, offered the opinion that it should be a convenient distance from town so as to allow for visits of friends of the patients, and with sufficient grounds to allow the outdoor employment. He was not in favour of the planned Woodforde site as he believed that the gully winds would be dangerous to those lunatics suffering from brain congestion, while lunatics needed to be kept warm. The question of carriage costs also came into question as did the problem of neglect of the patients. While he does not mention neglect by whom, as there was no plans for the new asylum to have a resident

doctor it seems likely this could include medical neglect, along with neglect by the Visitors (S.A S.C. 1864 Q. 49, 52). Despite the existing asylum's faults he felt that it could be expanded to accommodate 250 patients. The current Lunatic Asylum grounds were sufficient for all but cow-keeping and agricultural pursuits on a large scale. The present asylum grounds encompassed 24-25 acres which included a creek which the men had filled in presumably to allow the exercise areas to be extended (S.A S.C. 1864 Q. 46-7, 192-3).

As with the previous Select Committee, the new Commission's Minutes of Evidence only give limited clues as to the use of space within the Asylum. For example there was no separate dining room for staff, only their own table. The dormitories housed six beds and were used for quite patients (S.A S.C. 1864 Q. 167, 185). Although the corridors were not proper galleries in the English sense they appear to be used as day time space during the hot weather (S.A S.C. 1864 Q. 274). While the day rooms in the yards were simply wooden sheds offering limited facilities (S.A S.C. 1864 Q. 610).

Dr. Gosse, who had remained a Visitor, still saw problems with the Asylum: the women were overcrowded and needed more day and night spaces; and the grounds were not sufficient for the patients to walk about in. He believed an asylum needed 200 to 300 acres, to prevent overcrowding and to allow classification in the yards. The present Asylum had become a collection of buildings comprising the original building, the dormitory additions and the old hospital (connected to the asylum by a covered way) accommodating around 150 to 160 patients. As Dr. Bayer (a Visitor) noted supervision and the visibility of the wards to the Colonial Surgeon or a Resident Medical Officer was non-existent unlike the 'best Asylums' which were 'built in a circle' (S.A S.C. 1864 Q. 371).

The Commissioner's questioning revealed other problems with the Asylum. The kitchen was not large enough and any additions made a larger one a necessity. Ventilation was poor in the main building relying totally on the cell windows and a few air bricks. Drainage was a real problem also (S.A S.C. 1864 Q. 919, 921, 922, 929, 936-7).

Further problems were arising due to the development of the town and suburbs around the Asylum. No longer surrounded by open ground on two sides with a large

portion of the grounds now abutted by the Botanic Garden, and with increasingly busy roads on the other two boundaries, the privacy of the Asylum was affected. Dr. Gosse notes that people had begun to complain that it was too close to the road and the patients could be seen (S.A S.C. 1864 Q. 277, 365, 431). This of course worked two ways with the inmates vulnerable to harassment from outside. The discomfort arising from seeing the insane in public has been argued to be one of the contributing factors in the rise of the lunatic asylum, though this is very subjective factors as a few complaints do not equal a general public attitude. Certainly the favoured option of Moore, Gosse and Bayer, and Mrs. Morris, the Matron, was to begin anew with an asylum located a few miles from town and on a large site. All extensions of the present site were practically unviable.

Considering arguments about the associated costs of constructing a new asylum, the Commission queried Dr. Bayer about the other possible uses for the existing asylum. Its use as an emigration depot, foundling hospital or destitute asylum were suggested (S.A S.C. 1864 Q. 379).² The question of a number of small institutions in populous areas was considered by the Commission but did not meet with favour among the Visitors (S.A S.C. 1864 Q. 328, 389, 521).

The overall impression given by the evidence was of the failure of the main building to be a curative environment. It lacked the space to classify patients both in the wards and in the grounds, and there were no amusements or work for the men. The women laboured in the laundry and in sewing, enjoying limited access to the grounds and to amusements (S.A S.C. 1864 Q. 305, 349). The mixture of convalescent and newly admitted patients created problems, with quiet patients being disturbed by noisy ones. For at least two visitors the Asylum was prison-like and “It is so different from what we read of places of the kind in England” noted one visitor (S.A S.C. 1864 Q. 822, 880). The question remained what could be done to improve the Asylum. The Commissioners went on to interview the Colonial Engineer and Architect about possible additions to the Adelaide Asylum. W. Hanson suggested several possible means of expansion, including an option proposed two years previously, but without the plans, which he presented, it is a little unclear about the proposed placement of this addition. It appears that a further wing was to be added running east-west behind the Asylum creating a ‘double centre’. This wing would have six non-specific rooms, twelve cells, and a house for the Resident

Surgeon and two keeper's rooms. Hanson considered this a costly proposal (S.A S.C. 1864 Q. 892-894). While the main building could be extended behind the old hospital, Hanson favoured taking the building out eastward for a 100 ft. effectively creating a new wing between the two male exercise yards. He did not believe this would affect the ventilation of the male wing and the main building. The cost of these two options was £3,000 and £4,000 respectively (S.A S.C. 1864 Q. 900-907). The option of adding a wing along the western side of the women's yard, which would run along the Botanic Gardens boundary, had been considered - creating accommodation for twenty women at a cost of £2,000. But this appears to have been rejected on the basis of causing problems with the Botanic Gardens Board (S.A S.C. 1864 Q. 914-919). On the question of a new asylum he believed that if it was built on the newest arrangements it would cost 50 percent more than the average cost of an English county asylum at £25,000 to £30,000 (S.A S.C. 1864 Q. 939-941). Clearly cost was always to be a major factor in the question of provisions for the insane in South Australia.

Faced with this evidence of problems with the Asylum as it was, the Commission's Report was to focus on the need for a new asylum, and on providing immediate accommodation while a new asylum was built. With the provision of a new asylum a new system of management could be established, including a new complete system of employment and recreation for the patients. The existing site they believed could not support an asylum for more than 250 patients, and at a cost of some £12,000. With the present rising rate of insanity this would only serve the colony for three more years. Thus they recommended the immediate setting up of a 'Commission of properly-qualified persons' to consider the plans of the "best and most recent establishments for the reception and treatment of lunatics, erected in Europe and America," that one of them may be selected or adopted for the purposes of the colony (S.A S.C. 1864). The final design should accommodate about 700 patients. They recommended the immediate purchase of a suitable site of not less than eighty acres and no more than four miles from the centre of Adelaide. The new building should be commenced as soon as possible, with the first building being appropriated for convalescent patients and the residence of a Resident Medical Officer. This would solve one of the immediate problems of the Asylum, the mixing of inmates. Meanwhile the immediate needs of the Asylum required

the building of increased accommodation for forty women at the present site at a cost of some £4,000.

The Commission rejected the Woodforde site as too far out at nearly six miles and of insufficient size. While having an asylum surrounded by a large population was undesirable, the asylum had to be easily accessible to maintain control and supervision. While not specifying by whom this control was to be exercised it seems likely this was to be by the government and the public.

Smaller works were needed to improve living conditions at the existing Asylum. Finding the atmosphere in the building disgusting, the Commission recommended the insertion of numerous air bricks throughout the asylum. The men's yards lacked drainage and water pooled in them. The water closets in the yards were not properly emptied and were grossly neglected. There was no proper drainage for the whole asylum.

Considering the failings of the building, overall the Commission felt it could commend the management of the asylum and expressed its belief much was to be done to promote the cure and well being of the inmates. They considered that a Resident Medical Officer with experience of the management and treatment of lunatics was an essential requirement. This officer would devote his whole time to the Asylum and have paramount authority if a new establishment was built away from central Adelaide. The Adelaide Asylum would remain under the control of the Colonial Surgeon.

By recommending the erection of a new asylum and the employment of an experienced Resident Medical Officer the Commission believed the following objects would be secured: 1. A complete system of employment and recreation in the open air for all patients; 2. The general classification of the patients; and 3. The direct observation of the patient's disease processes and its immediate treatment (S.A S.C. 1864 Report).

A New Asylum

In response to the Commissioner's Report the Government decided to employ a properly qualified Resident Medical Officer before proceeding with a new lunatic asylum. The Officer was to advise on the selection of a site and the design for a new asylum (S.A. V. & P. 28/7/1864). In Dec 14th 1865 Dr. Arthur Robert Harrison was

appointed Resident Medical Officer, but resigned in 1867. He was replaced in April that year by Alexander S. Patterson (S.A. Gov. Gaz. 14/12/1865, 12/4/1867).

In 1865 W. M. Hanson was preparing estimates for the new asylum to house 350 patients at a cost of £50,000. So far in comparison £19,533/5/11 had been spent on the Adelaide Lunatic Asylum (S.A. P.P. 1865 No. 130). This cost included the construction of a Medical Officer's residence in the grounds of the Asylum in 1865. Eighteen sixty six saw major undertakings occurring to improve the conditions for the care of the insane. Work began on making additions to the Adelaide Asylum which were to continue into 1867. While not providing specific details the Architect's record appears to refer to two sets of additions, an unspecified dormitory in November 1866 and new female wards through 1866-7. Certainly the Comparative Statement of the Estimated and Actual Revenue and Expenditure in the Parliamentary Papers of 1866-68 indicates a major expenditure of £8,350/9/7 on additions (S.A. P.P. 1866 No. 2; 1868 No. 3; 1868-9 No. 3). A sum that would finance two buildings.

Importantly 1866 saw the purchase of Section 264, District A, for a new asylum at £6,300 (Kay 1970: 10). The site chosen by the Colonial Surgeon and the Resident Medical Officer had been the location of the first lunatic asylum. The Parkside site comprised 134 acres just beyond the belt of parklands that ringed the town of Adelaide; within the 4 miles recommended by the Commissioners in 1864. The foundations for the new asylum were laid in December 1866 with work continuing over the next three years. It is not precisely clear who designed the new asylum as W. Hanson was to resign that December (1866) and R. G. Thomas, formerly the Assistant Colonial Architect, became the Colonial Architect holding the post until 1874, when G. T. Light took on the post (Jensen 1980: 343, 342). Unfortunately a contemporary description in the *South Australian Register* of May 23rd 1868 only refers to the Colonial Architect as having designed the Asylum without naming him and one of the assistants working in the Colonial Architect's office may have designed the new lunatic asylum.

The *South Australian Register* provided a detailed description of the new asylum as it was being built. It was located on "a preliminary section at the extreme south-eastern corner of the Parklands bounded on the West by the Upper Mitcham and the North by the Greenhill Road. The south-west corner nearly abuts on the Glen Osmond Road where it

passes the Fountain Inn. The land slopes gently towards the city and this offers facilities for drainage” and “The apartments are all lofty, well aired, well lighted, and well secured.” The construction of the walls and floors were such as to render the whole impervious to sound, to draught, and as far as possible to fire. The landings were spacious and the stairwell built so as to prevent suicides. The building was of Venetian or Italian Gothic design, with moderate ornamentation. The front building was to be 40 ft. high with the first floor 15 ft. high, the second 14 ft. high, the third 11 ft high. The central tower was to reach a height of 107 ft from the ground. The walls were to be of Glen Osmond stone (from Tea Tree Gully) with freestone dressing. The total depth of the building was to be 248 ft. and in breadth 232 ft. The present construction was to be only one fifth of the design and no provision was made for refractory patients who were to have quarters in one of the wings to be erected. It would eventually accommodate over 600 patients “no excessive provision as the present number is 245 with the annual increase of about 25.” While a connection with the Waterworks main would provide a supply of water (*S.A. Register* May 28th 1868). The new Parkside Lunatic Asylum was to have all the advantages that the Adelaide Lunatic Asylum did not have, a planned design that would offer a spacious building, a quiet and private environment, and room for expansion.

In 1869 the cost of the new lunatic asylum was reported to be £36,699/5/7 not inclusive of the land. It was anticipated that a further £18,330/14/5 would be required to complete the design for 300 patients (S.A. P.D. 5/11/1869). But there were still ongoing problems with the management of the insane and 1869 saw the appointment of a further Select Committee to Inquire into the Management of the Lunatic Asylum. Of primary concern to the Committee was the behaviour of the Resident Medical Officer and the attendants, with little attention being focused on the issues that had interested the former Committee and Commission. This was probably due to the construction of a new asylum removing concerns about overcrowding in the Adelaide Asylum and its direct effect on classification.

There is only limited information about the Asylum buildings and surrounds in the Select Committee Report. The workshops date from this period as the tailor indicates that he originally worked in a room near the entrance but was now working in the new

building (S.A. S.C. 1869 Q. 1503). The grounds had been planted with vegetables, and there was now a pig sty.

The Report of the Select Committee found that the general management was reasonable, but felt that the Dr. Paterson did not spend long enough in the Asylum to have a sufficient control of his officers. They found that irregularities in the behaviour of the attendants were proven. They found that while fodder was grown for Dr. Paterson's horses, not enough vegetables were provided for the patients. A more extensive garden was required to produce fruit and vegetables, which would in turn provide a healthy activity for the patients. The Committee also found major problems with the role of the Visitors. They were unable to effectively monitor for abuses, and through their limited powers were unable to be of any practical benefit to the Asylum. Consequently they recommended that an Executive Board should be established (S.A. S.C. 1869).

Unfortunately as with other Committee Reports only a limited response to the findings were recorded in the Parliamentary Papers and certainly no legislative changes were enacted to amend the role of the Visitors or to establish an Executive Board. Members of Parliament were divided over the value of the Committee's Report and Dr. Paterson's guilt. In the end Parliament decided that the Committee had not proved the charges and that the management of the Adelaide Asylum was satisfactory (S.A. P.D. 20/10/69).

The Tale of Two Asylums (1870-1890)

The Parkside Lunatic Asylum was officially proclaimed an asylum on May 8th 1870 and received its first fifty male patients from the Adelaide Asylum on May 18th. As indicated in the *South Australia Register* description only one of the three proposed pavilions had been constructed. This building was to be the administrative centre of the asylum while housing chronic and convalescent patients in the upper floors, and was designed to copy the administrative building at the Essex County Asylum at Brentwood in shape.

The Visitors, on viewing the new asylum, found that the interior courtyard offered too many exits to allow its use as an airing court and only one airing court had been created. It appears from the Visitor's comments that the Asylum was still being finished

when the men were moved in and it was not considered safe for the women to go there. It is certain that the men formed a useable labour force. Pressure on the Adelaide Asylum continued in the meantime, with the lack of an infirmary ward leading to ill patients being mixed with the excited ones (S.A. Visitors 3/8/1870). In October Dr. Paterson and the Visitors were considering moving 50 women to Parkside but there was no airing court for them. After considering sites, it was decided to expand the present airing court to the corners of the building and to divide it with a central fence. As the building was not complete, it was decided to use a galvanised iron fence for the meantime, with sunken fences to be used for the permanent courts (S.A. Visitors 15/10/1870). It was not until June 1871 that the women were moved to Parkside.

Extensive planting of the grounds was being undertaken over 1870-1 with 10 acres given over to almonds, 10 acres to olives, 2 acres to mulberry trees, and 8 acres to oranges, apples, pears, and loquats. In 1871 Dr. Paterson was planning on planting a further 20 acres of olives and 20 acres of mulberries (S.A. Visitors 3/8/1870, 5/10/1870, 7/6/1871, 13/11/1871).

In 1871 the need for a specialised criminal ward was recognised as the criminals were mixing with innocent patients and posed a threat to them. Dr. Paterson thought there were security problems also. A Commission to consider the issue composed of himself, Dr. Gosse and Dr. Fischer (Visitors) had come up with two options: "1. That a ward for Criminal lunatics might be erected at the Stockade, where these men might be kept to themselves and suitably located for their mental malady, or 2. A Criminal Ward with separate airing court might be established in connection with the Asylum." (S.A. Visitors 13/11/1871). The Commission favoured the first option. As previously there was to be a delay between the recognition of a need and the built response. The criminal ward located at Parkside Asylum was not to be opened until 1878, a gap of seven years having lapsed.

Through the 1870s the Annual Reports by the Resident Medical Officer of the Lunatic Asylums begin to appear in the *Government Gazette* first infrequently then regularly. From these it is possible to trace the later histories of the Asylums. In 1871 Dr. Paterson was able to report that the cure rate stood at 41.8 per cent. This he considered low and a product of the high number of cases of general paralysis and senile dementia in the asylum. These organic diseases were not curable (S.A. A.R. 2/3/1871). In 1872 Dr.

Paterson found the lack of a Hospital for Incurables was leading to many cases being admitted who were beyond cure and came to die in the Asylum.

At this time also there were 23 private patients in the Asylum who were all provided with single rooms, but they had to mix with pauper patients in the airing court. Some had argued that being mentally ill, paying patients would lose the perception of class distinctions and not notice their surroundings. Paterson, himself, had found that paying patients objected from first admission to being mixed with a lower class, and their feelings should be respected with better provisions. A further problem was the rise in imbecile children whom he felt should not mix with adults (S.A. A.R. 28/3/1872).

Earlier attitudes towards the insane that had led to their confinement behind high walls had eased with walking parties outside of the walls along with outings to public entertainments (S.A. A.R. 28/3/1872). While the new airing courts at Parkside were to have sunken fences to allow patients to see over the walls for the first time.

The Annual Report for the year ending Dec. 31st 1876 shed light upon the relationship between the two lunatic asylums. All the recent cases were being treated in Adelaide, while Parkside took the “chronic and presumably incurable”. (S.A. A.R. 19/4/1877). But the incompleteness of Parkside still led to overcrowding at Adelaide, with the Visitors indicating that in some wards there were double the number of beds the rooms were intended to hold (Visitors 6/1/1877). The immediate work required at Parkside Asylum included the creation of a male airing court at the front of the building. This would allow the use of the empty front rooms intend for a work room and a billiard room, while the offices could be used as dormitories until needed. The Visitors believed the Asylum was in need of a female airing court in the front, a criminal ward, and day/dining rooms in both front airing courts. This would increase the useable accommodation, allowing 300 patients to reside in the Asylum (S.A. A.R. 19/4/1877). Work began in 1877 on the criminal ward, the airing courts and laundry.

Up until 1878 Dr. Paterson acted as Resident Medical Officer for both Adelaide and Parkside Asylums. In 1878 it was decided to employ a second Resident Medical Officer for Parkside. Dr. William Lennox Cleland had trained in Edinburgh and had spent time at Derby County Asylum in England as a medical assistant (S.A. G.G. 5/12/1878). He was to reside at Parkside and help with duties at the Adelaide Asylum and the Gaol.

Work on Parkside Asylum had been in effect piecemeal and responsive to immediate needs, and Dr. Paterson felt uneasy about the future. The accommodation currently available at Parkside would be full by the end of 1878 and the position for the Medical Officer's would be difficult. They could not refuse admission to patients with warrants, and they had to be accommodated somewhere and new buildings were asked for. This then became a cycle where the new buildings were instantly filled with existing patients and more buildings were required. The planned female wards at Parkside were expected to take two years to build. The only solution Dr. Paterson could envisage was the use of temporary structures for the present with the annual additions to Parkside until it was complete (S.A. A.R. 30/1/1878).

The three storey criminal ward was occupied in 1879 and the Annual Report indicates the criminals were divided into classes based on whether they had become insane after the offence or were arrested as a result of their lunacy. The male dining room for 70 patients was complete, but the female airing court was not in use as there was no place for the women to eat, so the adjoining rooms remained empty (S.A. A.R. 30/1/1879).

In his 1880 Annual Report, Paterson indicates that there had been an annual increase to the asylum population of 25.7 percent for the last ten years. In 1870 there were 277 inmates and in 1880 this had risen to 524 (S.A. A.R. 19/2/1880). Such a rise was bound to put pressure on existing residential space. Parkside continued to take chronic cases as there was no hospital ward or rooms on the ground floor suitable for accommodating acute cases. Importantly as Dr. Paterson indicated, these problems arose from the incompleteness of the asylum, not from some deficiency of the design (S.A. A.R. 19/2/1880).

There is no clear evidence to suggest that it was intended to close the Adelaide Asylum when Parkside Asylum was completed, despite its anticipated large size. Even though the consolidation of the insane into one asylum may have had economic benefits and the obvious disadvantages of having a lunatic asylum so close to the city and residential homes. Public pressures do not have seemed to have forced the Government's hand, and Dr. Paterson equally does not advocate the closure of the Adelaide Asylum. Rather his primary concern was the overcrowding at Adelaide and the need for extra

buildings at Parkside to meet future requirements. This history of partial measures and limited funding of appropriate buildings was not restricted to the lunatic asylums but had formed an ongoing part of the history of the Destitute Asylum for the last twenty years. The Destitute Board of Adelaide had faced overcrowding and the mixing of different groups of inmates in a collection of buildings added to over time as the Government saw fit. They too had sought a purpose built asylum so they could manage the inmates appropriately, but by the mid 1880s had become almost resigned to not having such an institution (Piddock 1996: Chapter 8). Eighteen Eighty was to see the beginning of several years of building at Parkside. Work began on a Resident Medical Officer's residence. The assigned rooms in the Asylum building were unsuitable for a man with a family as there was no privacy from patients (S.A. A.R. 19/2/1880). Prior to Dr. Cleland's appointment the rooms had accommodated twenty men and could be returned to this use. An ironing and distribution room had been added to the laundry, large sun shades had been built by patients in the male airing court and the courts planted. On the women's side a multi-function hall was begun. This was to serve as chapel, recreation room and dining room. The Architect-in-Chief designed it with the intention that it would be a general assembly hall for the patients when the asylum was completed (S.A. A.R. 19/2/1880).

In considering the question of further accommodation at Parkside Asylum, Paterson was much taken with the wooden cottages which he and the Architect-in-Chief had seen at the Victorian Asylums on a recent visit. These allowed the creation of a home-like environment. Paterson recommended the building of two cottages at Parkside. This suggestion appears to have been taken up as in 1881 work began on a hospital cottage and a cottage for harmless patients or imbecile children at Parkside. In 1881 work was begun on the new female wing, on a Dead House and on a dining room in the criminal yard.

The corridors of the new female ward would be spacious, with the ground floor ward large enough to form a general dining room, the other corridors doubling as dormitories if necessary. The new cottage wards had been built to the rear of the main building. The site chosen presented problems as meals had to be carried some distance. To solve the problem the Architect-in-Chief had recommended a road be created between

the male and female airing courts (S.A. A.R. 24/2/1881). Other work undertaken included the construction of a lodge in 1882-3. Happily Paterson reported the opening of the new female block that had eased overcrowding in 1883 (S.A. A.R. 22/2/1883). A new morgue had also been built at Adelaide.

Problems continued to plague the Adelaide Lunatic Asylum. In physical terms the Asylum presented ongoing problems for Dr. Paterson as its age meant constant repairs were required. The Asylum had just been attached to the deep drainage system but the grounds had been so saturated with waste as to be unusable (S.A. A.R. 22/2/1883). Accusations of poor management and rough handling of patients were to lead to the appointment of a Parliamentary Commission in 1883 to report upon the Adelaide and Parkside Lunatic Asylums (S.A. Comm. 1884).

As with previous enquires there is only limited evidence in the Minutes of Evidence of the Commission about the Asylum buildings. Most attention was given to the need for further accommodation. Dr. Paterson, while noting that the colony was not a rich one, offered the view that further buildings were required at Parkside if the acute and chronic cases were to be separated at Adelaide. He did not consider an asylum of 750 patients too large, and if completed Parkside would be the admitting asylum with Adelaide filling the role of a chronic asylum (S.A. Comm. 1884 Q. 7929). This completion was particularly important as Parkside was nearly full.

At the time of the Commission there were 281 men at Parkside requiring accommodation in the limited room of the administration building, and with the completion of the female building at Parkside, the men were being accommodated in some of the female quarters (S.A. Comm. 1884 Q. 6799-6806). Interestingly the new criminal building was designed to accommodate 100 patients (S.A. Comm. 1884 Q. 8067). It is unlikely that number of criminal patients could be immediately found and it seems likely it was intended to house dangerous and/or violent patients as well as providing secure wards. It is unclear from the evidence whether criminal women would be accommodated in the same building as the men, although the strict sex segregation makes this unlikely. In terms of future provision, Cavanagh, a Visitor, offered the view that there should be separate buildings for paying patients at Parkside and one for idiot children (S.A. Comm. 1884 Q. 4947-8). In 1883 there were 50 paying patients and some

differences were made in their physical surroundings. They had carpets in their rooms and better furniture. They had a better diet, wine and medical extras, and a separate day room (S.A. Comm. 1884 Q. 390-1, 1244).

Cavanagh indicates that a pre-existing farm had been bought at Parkside but cultivation had not been undertaken (S.A. Comm. 1884 Q. 4947-8, 4956). Parkside Asylum was also not fenced completely, rather only the airing courts were walled. This allowed strangers to talk to the inmates over the ha-ha walls and enter the gardens to steal fruit and vegetables. As Dickson, Head Attendant at Parkside noted a boundary space would allow the patients more exercise room (S.A. Comm. 1884 Q. 4986-7, 5013-15, 6967).

There are few references to the use of the asylum space at the Adelaide Asylum in the evidence given. The receiving ward was in the central building just next to the main door, while No. 1 yard was being used for acute and refractory patients. One of the inmates describing No. 2 yard as the nicer yard complete with a garden and a fountain (S.A. Comm. 1884 Q. 1740, 4050). The women's department was divided in two, with two separate parts of the areas of the asylum being used, and interestingly, in terms of supervision, the worst and chronic patients were housed in the remote ward in the asylum grounds (S.A. Comm. 1884 Q. 4155-7). There was no padded room for the women; instead mattresses were laid on the floor. The children were kept in the hospital ward and were tended by the female inmates (S.A. Comm. 1884 Q. 4294). At some point two rooms had been built at the bottom of the female No. 1 airing court for the use of wet and dirty patients (S.A. Comm. 1884 Q. 5608).

The problems with the design of Parkside meant that while this was the preferable asylum for the admission of acute cases due to its better location, it had no secure wards suitable for these cases. Meanwhile Adelaide's limitations prevented proper classification of patients. There were only two airing courts for 113 men limiting classification, and acute cases were mixed with chronic cases, disturbing the latter. Paterson desired an acute airing court just for the acute ward where the same attendants could always be with the patients. The same held true with the women's side. Paterson understood that the Government would not favour any modifications to Adelaide with any extensions only occurring at Parkside (S.A. Comm. 1884 Q. 513-517). He believed it would cost £50,000

to £60,000 to complete Parkside to the point that the Adelaide Asylum could be closed. To turn Parkside into the acute admitting asylum and Adelaide the chronic Asylum would cost £13,000 to £14,000, with the construction of an acute female ward (£7,000 to £8,000), a female hospital and dependent cottages (£5,000), plus the cost of a criminal ward (S.A. Comm. 1884 Q. 518, 521).

With respect to the treatment of the asylum patients, the Commissioners found there was sufficient corroborative evidence to support the charges that more force than necessary had been used by male attendants on some occasions. On the question of the general management of the patients they found this satisfactory, the asylums were scrupulously clean and the food of high quality. The treatment of the patients was characterised by kindness and firmness. The Commissioners were happy with the employment of the women; they found few men were employed. As this was conducive to the earlier restoration of the inmates, the situation had to be corrected. They found that while rules existed for the management of the asylums, there was limited knowledge of their content among the staff. While the Commissioners did not recommend the appointment presently of a third resident medical officer, they did recommend that all the duties undertaken by Dr. Paterson not associated with the asylums should cease, allowing him to devote more time to the asylums.

Importantly the Commissioners stressed the importance of having further accommodation, as they believed much of the trouble that had been investigated had arisen from the mixing of acute and violent patients with chronic and quiet ones, particularly in No. 1 yard (S.A. Comm. 1884 iv). Further extensions were required in any case as the asylums were nearly full, along with the fencing of Parkside.

As with other Committee/Commission Reports there was little response to the 1883 Commission's recommendations initially, rather a response appears in 1885 as a Report on Certain Clauses of the Lunacy Commission Report (S.A. P.P. 1885 No. 60). In this document Dr. Paterson indicates that male employment was at over 90 percent, with the exceptions being the 100 patients in the hospital wards. Paterson was able to point to numerous improvements at both asylums. These included a new laundry at Adelaide which would provide more comfortable working environment for the women inmates; the installation of hot water appliances at Parkside; the walling of the grounds at Parkside;

and estimates had been prepared for a recreation hall and separate bedrooms for old and frail women at Adelaide, and a separate ward for the treatment of those lapsing into acute mania at Parkside. In 1884 the Government had purchased 30 perches of allotment 12, Section 254 for a new criminal ward and work on the ward began the same year. This ward was actually located to the rear of the Parkside grounds and some distance from the main building. Reflecting the nature of the ward a high wall was erected around it. The same year the cottage for imbecile children had been erected, and libraries opened at both asylums. Further additions were made in 1886 with a detached building of six single rooms and a bathroom with hot water laid on, being added to Adelaide for feeble and aged women. A further addition was made to Parkside in 1888 in the form of a new ward for violent women. This series of small additions was to continue into the next century (see Appendix 4).

The Adelaide Lunatic Asylum was to remain open until 1902 when all the patients were transferred to Parkside. The buildings were then used as a Consumptive Home, Infectious Diseases and Cancer Hospital before being demolished in 1938. Parkside Asylum continued to be added to, and was renamed as the Parkside Mental Hospital in 1913 and Glenside Hospital in 1967. Today it continues to be a Mental Hospital.

Footnotes:

1. For a history of the treatment and provisions for the destitute see Piddock (1996) *Accommodating the Destitute. A Historical and Archaeological Consideration of the Destitute Asylum of Adelaide, South Australia*. Master of Arts Thesis.
2. The need for such buildings in South Australia is highlighted in this question, particularly as the existing Destitute Asylum was overcrowded, and functioning as all these institutions at one time. See Piddock 1996.

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