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**The Study of Idiocy:**  
The Professional Middle Class and the Evolution of Social  
Policy on the Mentally Retarded in England, 1848 to 1914.

A Thesis submitted to the Faculty of Graduate Studies and  
Research in partial fulfillment of the requirements for the degree of  
Master of Arts.

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## Abstract

The professional study of idiocy began within the discipline of medico-psychology and was taken up, later, by professionals in the fields of education, social work, and philanthropy. When medical research seemed to confirm the hereditary origin of mental ability, and as studies began to assert that a great deal of social problems were due to 'weakness of mind', men and women from these professions concerned themselves with the prevention of idiocy, primarily by segregation. As social commentators in late-Victorian England became increasingly concerned about the nation's apparent decline in economic and military competitiveness, these professionals and commentators began to stridently campaign for the detention of idiots in permanent colonies. This process continued during the Edwardian period when many professionals slowly gravitated to the eugenic-led campaign for control of the feeble-minded, a campaign which culminated in the Mental Deficiency Act of 1913.


## Sommaire

Afin de promouvoir le 'progrès social' à la fin de l'époque Victorienne, des Anglais, issus de la classe moyenne se regroupèrent. Leurs intérêts communs: l'étude et la prévention de l'idiotie. Les recherches sur l'idiotie intéressaient les professionnels des domaines suivants: psychologie médicale, éducation et travail social. L'intelligentsia à l'époque, se préoccupait de plus en plus du pouvoir économique et de la force militaire du pays qui semblaient perdre du terrain par rapport aux autres nations. La recherche scientifique, au même moment, tentait de démontrer une origine héréditaire aux problèmes sociaux. Ainsi, ces professionnels anglais, impliqués dans la recherche, avaient une influence considérable et véhiculaient l'idée qu'il fallait garder prisonniers, dans des colonies pénitenciaires, les idiots, afin de limiter leur reproduction. L'internement des idiots s'est poursuivi jusqu'à l'époque du Roi Edouard VII. A cette époque, les professionnels optèrent plutôt pour une campagne de contrôle des déficients mentaux centrée sur l'eugénisme. Cette campagne atteignit son point culminant avec l'entrée en vigueur de L'Acte sur la déficience mentale en 1913.

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There are many whom I would like to acknowledge for support and advice. First of these are my fellow graduate students in the Department of History, McGill University, whose enthusiasm in this research often exceeded my own. Of these, I would especially like to thank Gabriel Tordjman for his ideas on the eugenics movement and Megan Davies for her advice on the role of women in turn of the century British philanthropy. I would like to thank Dr. Dieter Blindert of the Children's Psychiatric Research Institute, London, Ontario, for his timely summer research grants, Louise Edmonds and Neill Wright for becoming editors-in-residence, Denis Gervais for the french translation of the Abstract, and my parents who learned to stop asking how the thesis was going. Foremost I am indebted to Professor Martin Petter of McGill University for his advice, his humour, and his patience.

Finally, I would also like to thank Tracy Dillon, whose friendship and support was instrumental in the completion of this thesis and who learned well from me, that old Latin maxim, *amantes sunt amentes*.



To-morrow, and to-morrow, and to-morrow  
Creeps in this petty pace from day to day  
To the last syllable of recorded time,  
And all our yesterdays have lighted fools  
The way to dusty death. Out, out, brief candle!  
Life's but a walking shadow, a poor player  
That struts and frets his hour upon the stage  
And then is heard no more. It is a tale  
Told by an idiot, full of sound and fury,  
Signifying nothing.

William Shakspeare, *Macbeth*



## Introduction

In 1912 an alarmed commentator spoke before a formal audience on the topic of medicine and social progress. Medicine, he argued, often had ambivalent effects: While it alleviated suffering and cured diseased, it also allowed 'unfit' members of society to survive and propagate their defects. Consequently, society must promote the renewal of the race from the stocks of mentally and physically 'fit' and control the propagation of the 'unfit' in order to continue on the 'path of progress'. As an example he detailed the danger of the 'feeble-minded':

the[se] moral and physical degenerates should not be allowed to take any part in adding to the race. The increase of the feeble-minded has recently been so apparent, notwithstanding our defective statistics that there is a loud cry for legislation ....The feeble-minded are a growing incubus on the nation, and should be dealt with in the most humane manner...

His fears rested on the contention that the 'feeble-minded' contributed disproportionately to the rate of crime, and the belief that their numbers were increasing at an alarming rate.

Such thinking would arouse little surprise among historians familiar with the eugenics movement and the lexicon of social darwinism, but this speaker was not only a member of the governing council of the newly formed Eugenics Education Society, he was also President of the British Medical Association.<sup>1</sup>

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<sup>1</sup> Dr. James Barr, "Presidential Address to the British Medical Association", *British Medical Journal*, [27 July 1912], pp.157-163.

That a member of the Council of the Eugenics Education Society could be voted to the highest honorary position of the medical community shows the extent to which eugenic ideas had come to be acceptable even to the most conservative of professional bodies. While there might be debate over the extent of the relationship between the medical establishment and the eugenics movement,<sup>2</sup> the British Medical Association and its affiliate, the Medico-Psychological Association, supported unflinchingly the eugenics-led campaign for 'permanent control' of the certain social groups in the years immediately preceding the first World War. Support for this campaign came from across the political and ideological spectrum; from members of the Fabian Society, the Charity Organisation Society, the Local School Boards, the Prison Commission and even the Poor Law. All these organisations rendered support to a campaign which culminated in a Royal Commission and the Mental Deficiency Act of 1913, the first piece of legislation to deal comprehensively with the mentally retarded in Great Britain.<sup>3</sup>

The Act, however, has not received a great deal of attention by historians of social policy<sup>4</sup> as it simply does not fit into the two traditional historical interpretations of Edwardian social policy. The first school of historical scholarship attributed the social legislation, which culminated in the Liberal government 1906 to 1914, to a natural evolution of the extension of the state and knowledge or 'rediscovery of poverty' which prompted a

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<sup>2</sup> See Angus McLaren, *Birth Control in the nineteenth century England* (London:1978) p.112 and Geoffrey Russell Searle's rebuttal in Webster (ed.), *Biology, Medicine and Society 1840-1940* (Cambridge:1983), p.225.

<sup>3</sup> The Idiots Act of 1886 may be regarded by some as the first act of this nature, yet it was merely a regulative Act and did not create a new authority or extend significantly the powers of the Lunacy Commission.

<sup>4</sup> The only work to deal solely with the Mental Deficiency Act is Harvey Simmons', "Explaining Social Policy: The Mental Deficiency Act of 1913", *Journal of Social History*, vol. xi, [1977-8], pp.387-403.

growing feeling of the "consciousness of sin".<sup>5</sup> Later historians pursued a related path of inquiry focusing on the response of political parties to the enfranchisement of the working class and to the rise of a working class political organisations in the form of the Independent Labour Party, the Social Democratic Federation and the Labour Party. The Liberal Party, according to this school of interpretation, scrambled to obtain the new voters in the face of rising working class political organisations and possible social disorder.<sup>6</sup>

The Mental Deficiency Act does not fit into the paradigm of working class/bourgeois tension nor can it be explained as an attempt of the Liberal Party to buy off working class votes, since the labour organisations took little interest in legislation on the handicapped. Instead the Act must be understood in terms of a third and increasingly influential school of historical interpretation, that of the 'national efficiency' school. Bernard Semmel broke the ground in this area by demonstrating the relationship between the supporters of Imperialism abroad and social policy at home. According to Semmel, support arose in the Edwardian period for policies which would strengthen the efficiency of the nation by changes in the health and education of its individual members, support which reached its height during the arms race with Imperial Germany.<sup>7</sup>

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<sup>5</sup> Richard Titmuss (ed.), *Essays on the Welfare State* (London:1958); David Roberts, *The Victorian Origins of the British Welfare State* (New Haven:1960); Bentley B. Gilbert, *The Evolution of National Insurance in England: the origins of the welfare state* (London:1966); Maurice Bruce, *The Coming of the Welfare State* (New York:1966); Derek Fraser, *The Evolution of the British Welfare State: a history of social policy since the Industrial Revolution* (London:1973).

<sup>6</sup> Michael Freedman, *The New Liberalism: an ideology of social reform* (Oxford:1973); P.F. Clarke, *Lancashire and the New Liberalism* (Cambridge:1971); H.V. Emy, *Liberals, Radicals and Social Politics, 1892-1914* (Cambridge:1973); Samuel Beer, *British Politics in the Collectivist Age* (London:1960).

<sup>7</sup> Bernard Semmel, *Imperialism and Social Reform: English social-imperial thought, 1895-1914* (London:1960).

Semmel's earlier work was expanded by Geoffrey Russell Searle who studied at greater length this theme of 'national efficiency'.<sup>8</sup> Searle, like Semmel, identified a broad base of support for social policy aimed at strengthening the nation. This 'national efficiency movement', as he defined it, was not linked to any political party or ideology. Instead it found adherents in a cross section of the entrepreneurial and professional classes who saw private and public advantage in the intervention of the state in what had previously been the private domain.<sup>9</sup>

Searle's book, coupled with his recent work on the political impact of the eugenics movement,<sup>10</sup> has revealed to the greatest extent the national efficiency movement's support for restrictive measures popularised by groups like the eugenics movement. However the discussion of the restrictive side of social legislation still poses many interpretive problems for historians. Traditionally they have used the words 'welfare' and 'social' to imply positive uses of the state and equate its extension between the years 1870 and 1914 as a favourable historical phenomenon. The terminology of 'welfare' and 'social policy' still dominate titles of historical works, even if historians question its appropriateness.<sup>11</sup> To a certain extent this signals the reluctance or inability of historians, themselves products of the modern welfare

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<sup>8</sup> Geoffrey Russell Searle, *The Quest for National Efficiency: a study in British politics and political thought, 1899-1914* (Berkeley:1971), p.1. For an interesting reevaluation twenty years later, see Searle's introduction to the reprint of *Quest* (2nd. ed.) 1990.

<sup>9</sup> Searle, *Ibid.*, pp.i-xxvi. John Roy Hay's work on the role of business in the rise of social legislation for similar reasons of national efficiency and in this case economic competitiveness may also be considered within this school. See Hay, *The Development of the British Welfare State, 1880-1975* (London:1978); Hay, "Employers Attitudes to Social Policy and the Concept of 'Social Control', 1900-1920" in Pat Thane (ed.), *The Origins of British Social Policy*, (London:1978).

<sup>10</sup> Geoffrey Russell Searle, *Eugenics and Politics in Britain, 1900-1914* (Leyden:1976).

<sup>11</sup> Derek Fraser, *The Evolution of the British Welfare State* (London:1973); Pat Thane, *Foundations of the Welfare State* (London:1982). See also footnote #5.

state, to investigate the 'restrictive' side of this new collectivism. As Gareth Stedman Jones argued almost two decades ago:

Looking forward to the creation of a welfare state, [historians] have concentrated upon proposals for old-age pensions, free education, free school meals, subsidized housing, and national insurance. They virtually ignored parallel proposals to segregate the casual poor, to establish detention centres for 'loafers', to separate pauper children from 'degenerate' parents or to ship the 'residuum' overseas. Yet for contemporaries, both sorts of proposals composed parts of a single debate.<sup>12</sup>

Rather than being casual bystanders in the debate over social policy, certain professions played a significant part in the theoretical debate over a wide range of social problems facing late-Victorian and Edwardian England and took a lead in proposals for legislation which may be termed 'restrictive' in function. However this professional middle class still remains a little studied historical group: Harold Perkin's comment that it is the 'forgotten class' still remains largely true.<sup>13</sup>

Who belonged to this 'professional middle class' and what characteristics separated it from the rest of the middle class? Naturally, this group consisted of a wide range of individuals and organisations each with their own peculiarities, yet there were common traits which ran across the class which merit discussion. The professional association was the locus for the social and political activities of its members, regulating admission, facilitating advancement, and monitoring the association's code of ethics. Each association relied heavily

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<sup>12</sup> Gareth Stedman Jones, *Outcast London: A study in the relationship between classes in late-Victorian London* (Oxford:1971), pp.313-4.

<sup>13</sup> Harold Perkin, *The Origins of Modern English Society 1780-1880* (London:1969), p.252. Perkin's latest work, *The Rise of Professional Society in England since 1880*, (London:1989) will go a great distance to remedy this defect.

on an administrative framework and bureaucracy with a clearly defined hierarchy.<sup>14</sup> In the cases of the older professions like law, the clergy and medicine these associations represented legal monopolies over a specific service.<sup>15</sup>

After 1870 the educational and philanthropic fields emerged with similar traits to the older disciplines. Each employed well educated members of the middle class and established Societies which provided services in the areas outside the entrepreneurial sector of society. In education, the establishment of national education created over two thousand school boards, each with a well defined bureaucratic infrastructure and organised teams of educated middle class men and women empowered with decisions over curricula and imbued with a keen desire for investigation. Similarly the late-Victorian period saw the emergence of philanthropic organisations which were markedly different from their mid-Victorian predecessors, emphasizing scientific inquiry and a professional code of conduct.<sup>16</sup> These emerging professions, like their predecessors, created journals, which provided forums for professional advancement and notified members of meetings, appointments and general news. The journals also facilitated political activity by co-ordinating the lobbying of members of parliament. The professions owed their monopoly and success at least partly to the hand of government, a fact which made these organisations particularly sensitive to the formation of social policy on subjects which affected their field.<sup>17</sup>

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<sup>14</sup> *Ibid.*, p.165.

<sup>15</sup> W. Reader, *Professional Men: the Rise of the Professional Classes in Nineteenth Century England* (London:1966), p.149.

<sup>16</sup> Perkin, *Professional Society*, p.117.

<sup>17</sup> Perkin, *Origins*, p.252.

If one were to omit the older professions of law and the clergy, one may construct a common mindset of professionals who concerned themselves with issues related to the health of individuals. They placed high merit on higher education and specialised knowledge. Advancement, especially in the areas of academia and the medical sciences, was to be wholly or partly a function of original research and service to the profession. As trained experts they stressed rational organisation of their surroundings. The advancement of science was seen as concomitant with the advancement of society.<sup>18</sup> Beliefs in the efficacy of progress through science permeated their environment of ideas, so much so that Beatrice Webb attacked her professional contemporaries for subscribing uncritically to the "cult of the scientific method".<sup>19</sup>

For those outside the medical associations, the stress on organisation and efficiency may be more precisely defined. Borrowing the intellectual tools of the pure sciences, members of educational and philanthropic disciplines attempted to apply them to human affairs. Thus as chemists had made great discoveries in molecular structures and zoologists had made great discoveries in animal science, so too did these budding 'social scientists' attempt to understand the nature, cause, and effect of human behavior.<sup>20</sup> The paths of research were largely influenced by the concerns of these professionals. Social concerns shaped the direction of scientific writings which, in turn, tended to reinforce the values and beliefs of the investigators. Thus it is perhaps not surprising that these professionals dealing

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<sup>18</sup> *Ibid.*, pp.155-9.

<sup>19</sup> Beatrice (Potter) Webb, *My Apprenticeship* [1926] (Toronto:1950), pp.126-7.

<sup>20</sup> Reba Soffer, *Ethics and Society in England: the revolution in the social sciences, 1870-1914* (Berkeley:1978), pp.2-5; Philip Abrams, *The Origins of British Sociology, 1834-1914* (Chicago:1968), p.2.

with social problems became intrigued by the continuance of urban poverty and its relationship to mental ability. Slums and the existence of an underclass seemed an affront to the notion of social progress and a challenge to the professional middle class's instinctive need to organise its environment. Further, the idea of a mentally degenerate urban poor particularly frightened these professionals who saw in it groups of dangerous and unreformable social misfits. The 'idiot' class symbolically represented the antithesis of what the professionals saw in themselves, to wit, intelligence, moral behaviour and social utility. Criminals might be reformable: mentally defective criminals were beyond the 'rational' control of the professionals.

Originally each professional organisation had practical reasons to concern itself with the mentally retarded, yet each saw the remedy of the social problem in an extension of the state through an increase in the domain and scope of its own profession. The medico-psychologists,<sup>21</sup> who met idiocy in the asylums, redefined idiocy as a medical disease of the mind. The members of philanthropic agencies met with idiocy in the slums of the cities and identified it as a significant cause of pauperism. The education reformers met backward and 'deficient' children in the classrooms of state schools and constructed hierarchies of mental deficiency in terms of educational performance. Each originally proposed segregation based upon specialised, expert investigation: medico-psychologists for the treatment and investigation of idiocy, philanthropists for the diminishment of pauperism, school boards members for special education.

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<sup>21</sup> I have used medico-psychologists to describe those members of the Medico-Psychological Association who began to study idiocy in the Victorian lunatic asylums. Since psychiatry came to denote the professional study of lunacy, the term would be inappropriate to describe those who dealt with the idiot population. It should be noted that these medico-psychologists were practising physicians and thus the current division of psychology and psychiatry is not transferable.



By the Edwardian period, these earlier reasons for segregation were submerged in reasons of national efficiency. The Victorian idiots, who were pitied in the mid-Victorian journals as the 'poor creatures of Providence', were replaced by the Edwardian feeble-minded whose apparent proliferation, in the minds of these professionals, challenged the very future of the British nation. The feeble-minded were seen as the vanguard of a degenerate class whose danger seemed to be reconfirmed by repeated 'scientific' discoveries. While the fears of a degenerate mob outbreeding the 'fit' might seem ridiculous to a modern observer, the anxieties of the middle class observers were nonetheless very real, and reveal a great deal about individuals and the changing outlook on the role of the state and the position of handicapped members within society.

The 'problem of the feeble-minded', as it came to be known, was also intimately connected with the larger issue of middle class fears of an urban residuum lurking in Outcast London.<sup>22</sup> In the 1880s and 1890s the middle class as a whole began to react against the dangers of a what they perceived to be a wandering sub-class in the cities of late-Victorian England. This new 'class' of degenerates consisted of the vagabonds, criminals, insane, and mentally defective, who were being described increasingly in a biological and sociological rather than a 'moral' manner. In response to the continuance of social evils, middle class observers constructed a theory of urban degeneration which attributed social failure to the debilitating effects of the city. As Stedman Jones pointed out, urban degeneration "provided a useful mental landscape within which the middle class could

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<sup>22</sup>Gareth Stedman Jones, *Ibid.* For discussions on the changing language of class in the period to 1870, see Gertrude Himmelfarb, *The Idea of Poverty: England in the Industrial Age*, (New York:1984), Chapter xiii; Asa Briggs, "The Language of 'Class' in Early Victorian England" in Briggs and Saville (eds.) *Essays in Labour History*, (New York:1960).

recognize and articulate their own anxieties about urban existence."<sup>23</sup> As the problems of the city continued and Britain seemed to be declining in world competition, commentators began to look for explanations and solutions which would halt the decline. To use a medical metaphor not inappropriate to an age which gave high currency to the idea of a corporate nation, as a surgeon tries to isolate and remove a diseased portion of the body, so too did many contemporaries advocate the removal of the feeble-minded and other 'degenerates' into colonies or institutions to protect against their future proliferation.

The Boer War and the 'rediscovery of poverty' helped to elevate concerns of urban degeneration to fears of national degeneration. The new emphasis on the state of the nation had insidious implications for those considered to be dragging the nation down. The differential nature of the birth rate, what Sidney Webb, the noted Fabian Socialist, called 'race suicide',<sup>24</sup> focused the opinion of a wide range of professionals on both the insane and mentally defective, whose numbers were thought to be increasing dramatically. In addition to a detached professional discussion of the medical or educational ideas surrounding idiocy, these professionals became very involved in a political campaign to 'control' afflicted members of society and devise social systems which would stress social utility. As the arms race with Imperial Germany accelerated, professionals of various stripes began to look for a new avenue to further social progress using the active and restrictive intervention of the state.

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<sup>23</sup> Stedman Jones, *Ibid.*, p.151.

<sup>24</sup> Sidney Webb, "The Decline in the Birth Rate" (London:1905).

Surprisingly in the light of the amount of work done on insanity,<sup>25</sup> there has been no single historical work devoted to the mentally retarded in England. Kathleen Jones began work in this area, and, in *A History of the Mental Health Services*, she provided the first survey of the provision for lunatics and idiots in the nineteenth and twentieth centuries. Although she devotes a chapter exclusively to the "Mental Defectives"<sup>26</sup> her objective is merely to provide an overview for the period and the bulk of her work concentrates on the mentally ill.<sup>27</sup> A more ambitious work, Schreer's *A History of Mental Retardation*, traces medical ideas about this social group from Antiquity to the modern day with a special emphasis on modern America. To a certain extent his book is an enlarged and revised version of Leo Kanner's history published in 1964.<sup>28</sup>

Tyor and Bell have attempted a general survey for the American experience. In *Caring for the Mentally Retarded in America, A History*, they focus on the institutional and treatment side of the history, tracing the rise of educational facilities to the large institutions

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<sup>25</sup> Michel Foucault, *Madness and Civilization: a history of madness in the age of reason* (New York:1972); T.S. Szasz, *Manufacture of Madness: a comparative study of the inquisition and the Mental Health movement* (London:1970); Szasz, *Age of Madness: the history of involuntary mental hospitalization* (New York:1973); Andrew T. Scull, *Museums of Madness* (London:1979); K. Doerner, *Madmen and the Bourgeoisie* (New York:1979); Vieda Skultans (ed.), *Madness and Morals, Ideas on Insanity in the Nineteenth Century* (London:1975); William Parry-Jones, *The Trade in Lunacy*, (London:1972).

<sup>26</sup> Edwardians began to use "Mental Defectives" as a synonym for the broad category of Idiocy. The terms 'Idiots', 'imbeciles' and 'lunatics' were falling into disfavour by this time, and mental deficiency was often used as a substitute for what the mid-Victorians called 'Idiocy', and what Alfred Tredgold popularised as *amentia*. Jones's use of this term for the late-Victorian period is slightly inappropriate. See Chapter I.

<sup>27</sup> See Kathleen Jones, *Mental Health and Social Policy, 1845-1959* (London:1960) reprinted and revised as *A History of the Mental Health Services* (London: 1972).

<sup>28</sup> R.C. Schreer, *A History of Mental Retardation* (London:1983); Leo Kanner, *A History of the Care and Study of the Mentally Retarded* (Springfield, Ill.:1964).

at the turn of the century and to the more modern approach of de-institutionalisation.<sup>29</sup> Harvey Simmons in *From Asylum to Welfare* studies the evolution of social policy on the mentally retarded in Canada during the same period.<sup>30</sup> His work identifies the importance of the educationalists and other groups outside the Eugenics movement in the construction of social policy. In a chapter which surveys social policy and the mentally retarded in Britain from 1870 to the First World War, he offers by far the most comprehensive analysis to date. Other articles have dealt with related topics<sup>31</sup> but it would not be incorrect to state that a social history of the mentally retarded in Britain has yet to be attempted.

Even with the limited work done in this "field", the existing historical interpretations have left many questions unanswered. Scheerenberger and Kanner are both psychologists with an interest in the historical roots of the profession.<sup>32</sup> Written with a specific audience in mind, both books are directed at the psychological community, and, therefore, place more emphasis on individual physicians and their contribution to medical knowledge than placing these works in their historical context. Although Jones integrates her material with contemporary historical themes, she too is writing for a specific profession, in this case the Mental Health profession, and prefers to restrict her analysis to a survey of the major statutes.

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<sup>29</sup> Peter Tyor and Leland Bell, *Caring for the Mentally Retarded in America: A History* (London:1984).

<sup>30</sup> Harvey G. Simmons, *From Asylum to Welfare* (Downsview, Ont.:1982). Chapter III first appeared as "Explaining Social Policy: The Mental Deficiency Act of 1913", *Journal of Social History*, xi, [1977-8], pp.389-403.

<sup>31</sup> Jayne Woodhouse, "Eugenics and the Feeble-minded- The Parliamentary Debates", *History of Education*, vol ii, [1982], pp.127-137. See also note 16.

<sup>32</sup> Scheerenberger is the past President of the American Association on Mental Deficiency and editor of *Mental Retardation*.

Why were well educated middle class professionals, many with a long experience of working with idiocy, susceptible to hereditarian explanations of social ills in the years leading up to the first World War? Restrictionist solutions to the problem of the 'feeble-minded' united members of the Fabian Society and the members of the Charity Organisation Society, socialists like George Lansbury and members of the Unionist Reform Association, philanthropists like Charles Loch, imperialists like R.B. Haldane and 'New Liberals' like L.T. Hobhouse, as well as politicians from Arthur Balfour to Winston Churchill. To argue that they were deceived by the 'myth' about the danger of the feeble-minded is far too easy an explanation. There must have been common predispositions which allied these disparate and conflicting camps of Edwardian social policy and made those individuals involved ready and willing to accept such an explanation.

A second problem lies with the mentally retarded who were a marginal and voiceless (not to say powerless) class. As such, historians have tended view them as victims of conspiracies and exploitation at the hands of a small and fringe group of physicians and social policy makers. Historical research as to the influence of eugenic thought has corrected this misinterpretation.<sup>33</sup> The Eugenics Education Society did not come into

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<sup>33</sup> The principal work on the Anglo-American eugenics movement is Donald Kelves, *In the Name of Eugenics* (New York:1985). For the main works on eugenics movements within intellectual history, see: Mark Haller, *Eugenics: Hereditarian Attitudes in American Thought* (New Brunswick:1963); Richard Hofstadter, *Social Darwinism in American Thought, 1860-1915* (Philadelphia:1944). Diane Paul "Eugenics and the Left" *Journal of the History of Ideas*, vol. xlv, (1984), pp.567-590; Michael Freedon, "Eugenics and progressive thought: a study in ideological affinity", *The Historical Journal*, vol. xxii, (1979), pp.645-71. For discussions of specific eugenics movements in their national context, see Geoffrey Russell Searle, *Eugenics and Politics in Britain* (Leyden:1976); Sheila Weiss, *Race Hygiene and National Efficiency: the eugenics of Wilhelm Shallamayer*, (Berkeley:1987); Loren R. Graham, "Science and Values: the eugenics movement in Germany and Russia in the 1920's", *American Historical Review*, vol. lxxxii, (1977), pp. 1133-64; J. Schneider, "Toward the improvement of the Human Race: The History of the Eugenics Movement in France", *Journal of Modern History*, vol. liv (1982), pp.268-91.; Angus McLaren, *Our Own Master Race: Eugenics in Canada, 1885-1945*, (Toronto:1990); Greta Jones, *Social Hygiene in twentieth century Britain*, (London: 1986). On the specific debate over the class basis of the eugenics movement see "Education for National Efficiency", *History of Education*, ; Allan Garland, "Genetics, Eugenics and Class Struggle", *Genetics*, vol. lxxx (1975), pp.29-45; Donald MacKenzie, "Karl Pearson", and MacKenzie, *Statistics in Britain, 1865-1930: the social construction of scientific knowledge* (Edinburgh:1981); Searle, "Eugenics and Class" in Webster, *Ibid*. For bibliographical discussion on the recent outpouring of research on the eugenics movement see Nils Roll-Hansen, "The Progress of Eugenics: Growth of Knowledge and Change in Ideology", *History of Science*, vol. liv (1982), pp.268-91.

existence until 1907, decades after the rise of idiot asylums, idiot colonies and the movement for institutional segregation. Its roots, and the roots of restrictive social policy, lie in the crucial years between 1870 and 1914 when the professional middle class came into its own. The eugenics movement was a late and radical example of a broader trend in social policy supported by a diverse segment of the professional middle class in late-Victorian and Edwardian England.

There are more than a few examples of a "Whiggish" interpretation in histories dealing with the mentally retarded. Both Kanner and Scheerenberger see history as the slow unravelling of medical knowledge: everything that leads directly to contemporary views of mental retardation is a "constructive" historical development. Jones, Simmons and Tyor & Bell tend to see two great epochs in the history of the mentally retarded: institutionalisation and de-institutionalisation. Those who promoted segregation were somehow deceived by 'myths' prevalent at the time while others, later, 'saw the light'. In these histories, 'modern' becomes synonymous with 'compassionate'; institutions are usually prefixed by 'soulless' or 'dehumanising'. No doubt this interpretation owes a great deal to the philosophy of Normalisation<sup>34</sup> and the process of de-institutionalisation which is currently underway. This bias has led some historians and non-historians to romanticise the pre-institutional period which, they argue, stressed the care and education of the individual and community involvement. I do not wish to be an apologist for the large warehouses of the insane and retarded which persisted well into the second half of this century, but I fear that historians have been led to misread the social conditions of dependent social groups in the early and mid-nineteenth century. As one historian of the workhouse system admits, the quality of care

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<sup>34</sup> Wolf Wolfensberger, *The Principle of Normalisation in Human Service Delivery* (Toronto:1972).

in the workhouses and institutions, however meagre by modern standards, was still far higher than that at many homes and the solution was more ethical than allowing them to starve on the streets.<sup>35</sup>

There is a further problem of definitions: What was (and is) mental retardation? Jones does even attempt to answer this. Scheerenberger describes it as a "socioculturally determined phenomenon".<sup>36</sup> Similarly, Simmons says that since mental retardation is socially constructed, one must work from what contemporaries saw as being retarded.<sup>37</sup> At the heart lies an epistemological dilemma: Is there illness without modern medicine? Or more precisely: Can there be people mentally retarded without a modern professional elite which classifies them as such? There may be no answer to this question, but there are several qualifications. While the limits of the retarded population were and are subject to social attitudes: Mongolism, Cretinism, Micro- and Hydro-Cephalism were recognisable by physical stigmata and categorised as such as far back as the 1830s. Scheerenberger provides many examples of the same in pre-industrial society, some dating back to antiquity.<sup>38</sup> Those who had suffered brain damage at birth or at an early age were certainly seen as idiots whether the doctors at the time had a "modern" understanding of the medical causes or not. It was with the non physically recognisable individuals that the line became blurred, especially with the advent of the highest classification of Idiocy, known as 'feeble-mindedness'.<sup>39</sup> In many

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<sup>35</sup> M.A. Crowther, *The Workhouse System, 1834-1929* (Athens GA:1981), p.66.

<sup>36</sup> Scheerenberger, p.3.

<sup>37</sup> Simmons, p.xii.

<sup>38</sup> Scheerenberger, Chapter I.

<sup>39</sup> See Chapter Four.

respects the methodological problems are similar to those encountered in the historical study of childhood, where the dividing line between youth and adulthood changes with respect to the culture and the historical period but where few would question that youth itself exists or may be defended as a legitimate historical category.

Finally, the sensitive nature of the subject leads to problems of nomenclature. Although the terms 'idiots', 'imbeciles', 'feeble-minded', 'mental defectives' and 'lunatics' have fallen into disuse and disfavour, the pace of changing typology has not slowed. Indeed, the 1970s and 80s have witnessed 'mentally retarded', 'mentally handicapped', 'developmentally handicapped', 'exceptional children' and 'persons with special needs', to name just a few. Since language is a critical component of this paper, I will most often use the terminology that the Victorians and Edwardians used. In the few instances that I have used a more contemporary equivalent for idiocy, I have opted for 'mentally retarded' as the most recognisable equivalent and as the term with which I feel most comfortable. For reasons of prose I have tried to restrict my use of quotation marks, but have not entirely succeeded. Some may find the use of the terms idiots, imbeciles and the feeble-minded offensive, and to them I apologise. My purpose is not to dive into the current and heated debate over 'labelling', but to shed light on a piece of history partly by means of language employed. Besides, to attack individuals for not living up to linguistic standards of generations yet unborn would be cruel punishment indeed, even for the Victorians.



## Chapter I: The Medico-Psychological Association and the Causes of Idiocy

The earliest recorded ideas on mental retardation in western civilisation date back to the Greeks who commonly used the word *idiotas*, which translates as a "layman", in the sense of a man ignorant of the affairs of more educated individuals.<sup>40</sup> 'Idiot'<sup>41</sup> made its way through Latin and into Old English denoting someone uneducated and ignorant, or someone who was a "private person", set apart functionally or even physically from the rest of society.<sup>42</sup> During the last several hundred years it was most often associated with the idea of a 'natural' or 'born' fool as in Swineburne's *Testaments* from the sixteenth century: "An idiote, or a naturall foole is he, who notwithstanding he bee of lawful age, yet he is so witlesse, that hee can not number to twentie, nor can he tell what age he is of, nor knoweth who is his father."<sup>43</sup>

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<sup>40</sup> Leo Kanner suggests that the Greeks used *idiotas* to describe the 'mentally deficient' (his term). It is unclear, however, in what way the Greeks, or the Romans for that matter, perceived those who were *idiotas* and it would be misleading to consider it similar to a modern view of the condition. Kanner, *A History of the Care and Study of the Mentally Retarded* (Springfield, Ill.:1964), pp.4-5.

<sup>41</sup> Hereafter, I will no longer use quotation marks.

<sup>42</sup> *Oxford English Dictionary* (2nd ed.), vol. vii, p.625.

<sup>43</sup> As quoted in the *Oxford English Dictionary*, 2nd ed., vol. vii, p.625. A fool, born or natural, was the most common synonym for Idiot before the turn of the nineteenth century. However others less common were: 'sot', from the french 'sotte' implying foolishness most often associated with drunkenness, *Ibid*, vol. xvi, p.35; 'dunce', from an attack on the followers of the scholastic theologian John Duns Scotus, *Ibid*, vol. iv, p.1121.

In English literature the natural fool reappears periodically, such as in John Milton's description of the 'idiot born' in *Tenure of Kings and Magistrates*, William Wordsworth's *The Idiot Boy*, and Charles Dickens' more popular depictions in *Household Words*.<sup>44</sup> Historically, the real King Macbeth was affectionately known as the Idiot King, and English historians derogatorily referred to Ferdinand of Austria as an imbecile Emperor.<sup>45</sup>

Writers often associated the idiot with the other 'fool' of earlier literature and language - the 'madman' or 'lunatic'.<sup>46</sup> In the late-eighteenth and nineteenth centuries both groups came under the guardianship of the state in increasing numbers, in workhouses of the 'Old' and 'New' Poor Law, and, after the Lunatic Act of 1845, in county asylums, which regularly accepted idiots under the rubric of 'pauper lunatics'.<sup>47</sup> Because of their co-habitation and similar condition, nineteenth century psychological discourse researched idiocy and lunacy along similar paths, for the conditions were confused by the lay public and even knowledgeable members of the medical profession.

By the late eighteenth century, medical and legal experts in the field began the long process of discriminating between idiocy and lunacy. They had long recognised the difference in the advent and duration of the two conditions: idiocy was a permanent form of congenital mental debility; lunacy was temporary, but could occur repeatedly during lifetime.

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<sup>44</sup> William Wordsworth, *The Idiot Boy* (London: 1798); John Milton, *The Tenure of Kings and Magistrates* [1649] (New York: 1911); Charles Dickens, "Idiots Again", *Household Words*, vol. ix, [15 April, 1854], pp. 197-200.

<sup>45</sup> A.J.P. Taylor, *The Habsburgs Monarchy 1809-1918* (London: 1957), p. 47.

<sup>46</sup> Lunatic (or Lunatick) replaced madman by the medical community in the late-eighteenth century although it continued in more common usage until this day. For a detailed discussion of ideas on madness see Vieda Skultans, *English Madness: Ideas on Insanity, 1580-1890* (London: 1979); Skultans, *Madness and Morals: ideas on insanity in the nineteenth century* (London: 1975).

<sup>47</sup> Kathleen Jones, *A History of the Mental Health Services*, pp. 145-9.

To put it in the cruder form of a contemporary: "an idiot was a person who never had a mind, a lunatic a person who had a mind and lost it."<sup>48</sup> This formal distinction was recognised in England as far back as statutes under the reign of Edward I and Edward II where property laws identified the born fool, *fatuus naturalis*, and the lunatic, *non compos mentis, sicut quidam suut per lucida intervalla*.<sup>49</sup> By the mid-nineteenth century, 'imbecility' came to denote a second and milder form of idiocy. Like the term idiot, *imbecillis* dates back to the Greeks who used the term to denote 'weak of mind *and* body',<sup>50</sup> an important attribute when psychologists began to equate mental weakness with other physiological disorders.

It is impossible to state at what point, the handicapped moved from private to public responsibility. As early as the late-eighteenth century, a large proportion of Poor Law recipients were classified as being of 'unsound mind'. In 1828, data gathered for a Departmental Committee indicated that 9,000 lunatics, idiots or imbeciles resided in workhouses.<sup>51</sup> Even after the advent of a set of Poor Laws in 1834 aimed at restricting the giving of relief, Louisa Twining, a prominent activist and founder of the Workhouse Visiting Society, reminisced that in the 1850s idiots and imbeciles could be found in large numbers in

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<sup>48</sup> *Evidence*, Royal Commission on Care and Control of the Feeble-minded (RCFM), PP, 1908, vol. xxxv, p.339.

<sup>49</sup> Literally, "a natural fool" and "a person of unsound mind but with lucid intervals", D.G. Pritchard, *Education and the Handicapped, 1660-1960*, (London:1963), p.135. In the case of the *fatuus naturalis*, the state had the right to the possession of property permanently, to be transferred to the natural heir, after the death of the idiot. Tuke, *History of the Insane*, p.287. Since idiocy was overwhelmingly congenital, some later experts substituted the latin medical term *amentia* (literally 'without mind') and *dementia* (literally, 'down from mind') to denote congenital idiocy and lunacy, respectively. However this tended to confuse issues more as non-congenital idiocy would then be associated with lunacy.

<sup>50</sup> *Oxford Latin Dictionary* (Oxford:1968), p.831-2.

<sup>51</sup> Kathleen Jones, p.18. Jones cites a figure of 4-5,000 persons of unsound mind by 1789. *Ibid*.

every workhouse<sup>52</sup> and a commentator writing in 1866 commented that "in a metropolitan house an average of nine-tenths [of the indoor population] are chronically infirm and disabled, imbecile, or acutely sick."<sup>53</sup> This figure of 80-90 per cent of indoor recipients of Poor Law relief as being aged, handicapped or infirm, is confirmed by recent scholarship on the social role of the workhouse in Victorian England.<sup>54</sup>

The professional study of idiocy owed its origins to the general growth of an organised medical elite inside and outside the workhouses, asylums, and hospitals, and to the emergence of a small band of specialists studying idiocy. In England it was the Medical Registration Act of 1858, which capped the long "collective struggle for professional status"<sup>55</sup> begun formally by the first publication of the *Lancet* in 1823 and the founding of the British Medical Association in 1832. The Act legally restricted the rights of practice to specific individuals, and provided a central focus for the 15,000 member<sup>56</sup> organisation for political, educational and professional concerns.<sup>57</sup> Since the profession itself was seeking a greater

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<sup>52</sup> Louisa Twining, *Workhouses and Pauperism* (London:1898), p.217.

<sup>53</sup> Ernest Hart, *An Account of the Condition of the Infirmaries of London Workhouses* (London:1866), p.4.

<sup>54</sup> Anne Digby, "The Rural Poor Law" in Derek Fraser (ed.) *The Poor Law in the nineteenth century* (London:1976), p.164.; David Ashford, "The Urban Poor Law" in Fraser (ed.) *Ibid.*, p.139; Digby, *Pauper Palaces*, p.172-3; Michael Rose, *The Relief of Poverty, 1834-1914* (London:1972), p.35; Margaret Anne Crowther, *The Workhouse System*, pp.156-174.

<sup>55</sup> John Woodward & David Richards, *Health Care and Popular Medicine in Nineteenth Century England: Essays in the Social History of Medicine* (New York:1977), p.37.

<sup>56</sup> This figure is for 1860. Noel Parry and Jose Parry, *The Rise of the Medical Profession: A study of collective social mobility* (London:1976), p.138.

<sup>57</sup> See Ann Beck, "The British Medical Council and British Medical Education in the Nineteenth", *Bulletin of the History of Medicine*, vol xxx [1956], p.151.

greater 'scientific' understanding of medical problems<sup>58</sup> through research, these doctors took the route of specialisation in areas such as internal medicine, pathology, and psychiatry.

The workhouse physicians were poorly paid and slow to organise and had no opportunity to conduct research. In fact very little of the actual care or treatment was given by the physicians. The Poor Law Guardians who oversaw the running of the workhouses, decided upon levels of payment and were required to hire only one registered physician regardless of the size of the Poor Law union. While practices of the different unions varied considerably, Guardians were primarily concerned with providing a minimum level of relief of destitution, rather than a second line of 'pauper' hospitals.<sup>59</sup> Research for the most part grew out of the rapidly expanding system of local lunatic asylums which began with experiments like the Quaker retreat at York<sup>60</sup> and was augmented by public institutions created in accordance with the Madhouses Act of 1828 and more importantly with the Lunatic Act of 1845.<sup>61</sup>

Heightened competition within the ranks of the medical community partly accounts for the expansionist attitude of the profession,<sup>62</sup> expansionism which brought the British Medical Association (B.M.A.) into confrontation with the second largest employer of physicians, the Poor Law Guardians, a confrontation which would have an important impact

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<sup>58</sup> Rosemary Stevens, *Medical Practice in Modern England: The Impact of Specialization on State Medicine* (London:1966), p.26.

<sup>59</sup> Fraser, *The New Poor Law*, p.5.

<sup>60</sup> Anne Digby, *Madness, Morality and Medicine: a study of the York Retreat, 1796-1914* (Cambridge:1985).

<sup>61</sup> Kathleen Jones, p.128-9; pp.145-9.

<sup>62</sup> M. Jeanne Peterson, *The Medical Profession in mid-Victorian London* (Berkeley:1978), p.246.

on the condition of idiots and imbeciles both inside and outside the workhouse system. The Lancet Commission of 1865<sup>63</sup> on Metropolitan Workhouse Infirmaries marked the beginning of a sixty year struggle between the Poor Law authorities and the new specialised service professions.

The Report of the Commission, entitled "Workhouse Infirmaries: A National Scandal",<sup>64</sup> was intended to shock the Victorian public into supporting a wider range of public services for the sick, aged, insane and imbecile. The pages of the *Lancet* were filled with, at times, sensational descriptions of neglected patients, drunken pauper nurses, children mixing with adults, and the sane mixing with the insane. Certain passages dealt at length with the need for new and separate treatment for the workhouse idiots:

A very objectionable arrangement is made for the idiots, who are lodged in the lower wards of the infirmary; which are totally inadequate, we do not hesitate to say, to their wants, ... [of] all cases which demand our sympathy and care, surely none are more worthy our best efforts to ameliorate their condition than those of the poor creatures whom Providence has thus sadly afflicted.<sup>65</sup>

The workhouse infirmaries were substandard because, in the opinion of the Commissioners, they could not allow for classification and segregation which was a precondition to effective treatment and training. Regarding the workhouse idiots and imbeciles, the Report proposed large independent asylums based on the system of Lunatic Asylums, facilitating, they argued,

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<sup>63</sup> See *Lancet*, [1865].

<sup>64</sup> *Lancet*, [15 July, 1865], p.71.

<sup>65</sup> "Report on Greenwich Workhouse Infirmary", *Lancet*, [26 Aug. 1865], p.241.

specialised care and treatment. To allow the mixed system to continue, concluded the Commission report, would "outrage[] the conscience of the State".<sup>66</sup>

This campaign came to fruition in the Metropolitan Poor Act of 1867 which separated the administration of infirmaries from the workhouses and for the first time acknowledged the duty of the state to provide hospitals for the poor.<sup>67</sup> The Act also implemented the *Lancet* recommendations on idiots and imbeciles by erecting shortly afterward two public idiot asylums and one training school for children in the Metropolitan region<sup>68</sup> marking the beginning of segregation and classification of adults and children based on permanent mental handicap.

One of the primary beneficiaries of the drive for separate and specialised treatment was the Medico-Psychological Association, the professional body representing those concentrating on the treatment of mental infirmity. The first organisation, the Association of Medical Officers of Asylums and Hospitals, was, by its own admission, more of a social group than political organisation. Founded in 1841 the Association members who jovially referred to themselves as the 'wandering lunatics'<sup>69</sup> met irregularly and discussed topics of common concern eventually leading to the creation of their own journal, the *Asylum Journal of Mental Science*. As the asylums grew, so too did the numbers of psychological specialists: in 1827 there were nine lunatic asylums with an average size of 116 inmates. By 1870 there

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<sup>66</sup> *Lancet*, [15 July, 1865], p.72.

<sup>67</sup> Flynn in Michael Rose (ed.), *The Relief of Poverty*, p.65.

<sup>68</sup> The Darenth Asylum for Children.

<sup>69</sup> *Journal of Mental Science*, vol. ix, [Jan. 1913], p.13.

were fifty-one such asylums employing 250 physicians, with an average size of 550 inmates.<sup>70</sup>

The Association was a professional organisation within a professional organisation, attempting to establish itself as a legitimate sub-discipline within medicine and yet protect its independence from the general practitioners who reacted against the specialisation of the medical community as a whole.

As the Association expanded, it renamed itself the Medico-Psychological Association (M.P.A.) and renamed its journal the *Journal of Mental Science*.<sup>71</sup> The Lunacy Act of 1845 initiated this expansion by obliging each county to erect (or combine to erect) an asylum for the purpose of housing lunatics and further required at least one recognised physician as superintendent. Here the legal definition of 'lunatic' included "lunatics or idiots or persons of unsound mind"<sup>72</sup> thus allowing for the inclusion of idiots into these new specialised institutions. The governing body was the Lunacy Commission which staffed inspectors (Her Majesty's Inspectors in Lunacy) responsible to the Home Office.<sup>73</sup> Yet, while medico-psychologists were becoming increasingly familiar with idiocy in lunatic asylums, it was actually a philanthropic enterprise, the Earslwood Asylum, which was the first English institution devoted solely to the maintenance and education of idiots.

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<sup>70</sup> Andrew T. Scull, *Museums of Madness* (London:1979), p.198.

<sup>71</sup> The Association of Medical Officers of Asylums and Hospitals (founded 1841) renamed itself the Medico-Psychological Association between 1864 and 1868. The *Asylum Journal* was renamed the *Asylum Journal of Mental Science* in 1858 and *Journal of Mental Science* in 1860. I have used medico-psychologists to denote those within the medical profession who specialised in insanity and idiocy.

<sup>72</sup> Since 'lunatic' was defined in both the 1845 and 1890 Lunacy Acts and in the Lunatic Asylum Act (1853) as "an idiot or person of unsound mind" some historians have argued that contemporaries did not discriminate between the two conditions. I disagree. These definitions were legal or statutory definitions of the individuals who were defined under the rubric of lunacy. This does not imply that they were considered synonymous but rather, for purposes of the statute they were both subject to its provisions.

<sup>73</sup> Kathleen Jones, p.145-7.



The National Asylum for Idiots, Earlswood, began as a small training school for adolescent imbeciles at Highgate, funded primarily by philanthropic donations. As demand for the school increased, and as residents began to remain for longer durations, the school was transferred in 1855 to Redhill, Surrey, and expanded into a larger asylum for 500 inmates. Funded by a combination of donations and subscriptions, Earlswood continued to grow, doubling in size by 1889. The size and nature of the asylum demanded a full-time resident medical superintendent similar to that which existed in lunatic asylums. In 1858, the Earlswood hired Dr. John Langdon Down, probably the most famous specialist in Idiocy. Down found, unlike his colleagues in the workhouses, conditions that were favourable to medical research. Physicians were required to keep basic records and idiots tended to become long-term if not permanent residents.<sup>74</sup> The asylum populations as such represented closed experimental groups about which medical knowledge was very limited. Professional prestige and advancement, even in the mid-nineteenth century, was intimately connected to research,<sup>75</sup> and there is evidence which suggests that the asylum populations were jealously guarded.<sup>76</sup>

Between 1858 and 1867, counties in Great Britain followed the lead of Earlswood and created a system of asylums exclusively for the care and treatment of idiocy. Four other idiot asylums served the other main areas of England: an Eastern Counties Asylum at Colchester, a Western Counties Asylum at Starcross, Devon, a Midlands Counties Asylum at

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<sup>74</sup> Anne Digby, *Madness*, p.220.

<sup>75</sup> Peterson, p.246.

<sup>76</sup> See particularly the exchange between Dr. Thomas Balliard and Dr. J. Langdon Down in *Lancet* [1862], p.65, p.160, p.435, p.521.

Knowle near Birmingham, and a Northern Counties Asylum at Lancaster. From these idiot asylums half a dozen medical superintendents were to direct the medical study of idiocy for the second half of the nineteenth century. All the idiot asylums outside of the metropolis were 'subscriptions hospitals', receiving their revenue from a combination of local rates, charitable donations and yearly fees. While some room was made for charitable cases, even the reduced cost of £20-30 annually made the asylum too costly for the working classes and a good portion of the lower middle class. The Royal Albert Asylum (at Lancaster) regularly charged between £50 to 200 per annum.<sup>77</sup>

In 1867, the network of idiot asylums in place throughout England and Scotland occasioned the first ever Conference on Idiocy held in Belfast. The Conference represented a coming of age of the medical specialists studying idiocy who were in the process of establishing idiocy as a distinct and legitimate category within the field of mental infirmity. In attendance were Down, Ireland, Shuttleworth, Fletcher Beach and Forbes Winslow.<sup>78</sup> While the conference did not present any earth-shattering new research, it did map out the state of knowledge on idiocy and the direction for future inquiry on the eve of both the Metropolitan Poor Act and the National Education Acts and showed signs of future policy. The Conference concluded that the "first step towards their improvement was separation [from society]".<sup>79</sup>

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<sup>77</sup> Kathleen Jones, p.183.

<sup>78</sup> Dr. Winslow was the medical superintendent of the Hanwell Lunatic Asylum and had a special interest in idiocy.

<sup>79</sup> *Journal of Mental Science*, [1867], p.271.

The process of legitimising idiocy as a sub-discipline of insanity was aided by the numerous publications of these medical superintendents. Down condensed his work into numerous articles and two main works on the treatment and education of idiocy.<sup>80</sup> Also a member of the Royal Anthropological Society in the 1860s, Down resigned his position in 1868 to open a private home for idiots and imbeciles from upper class families,<sup>81</sup> a move which carried with it a reduced administrative schedule and greater financial return. As Earlswood grew in size in the early 1860's, the Asylum hired a young assistant medical superintendent named George Shuttleworth who had studied under Down and received promotion to medical superintendent at England's second Idiot Asylum, the Royal Albert Asylum at Lancaster, in 1868. The Royal Albert was smaller than the National Asylum for Idiots, numbering only 540 patients in 1895,<sup>82</sup> yet Shuttleworth managed, like his predecessor, to write numerous articles on idiocy.<sup>83</sup> Shuttleworth also lectured to medical societies on idiocy.

The Metropolitan Poor Act of 1867 created the first public idiot institutions, Caterham and Leavesden, which serviced up to 2,000 inmates each, and the Darenth School

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<sup>80</sup> Down, Dr. James Langdon. *A Treatise on Idiocy and its Cognate Affections* (London: 1867); "Observations on the Ethnic Classification of Idiots", *Journal of Mental Science*, vol. xiii, [Jan. 1868], pp.121-128; "On the Condition of the Mouth in Idiocy", *Lancet*, [1862], p.65; "Some of the Causes of Idiocy and Imbecility", *British Medical Journal*, [1873], p.432; "Some of the Mental Affections of Childhood and Youth" *British Medical Journal*, [8 Jan., 1887], p.49; *On the Mental Affections of Childhood and Youth*. London: J.A. Churchill, 1887.

<sup>81</sup> R. Scheerenberger, *A History of Mental Retardation*, (Baltimore:1983), p.56.

<sup>82</sup> *British Medical Journal*, [15 June,1896], p.327.

<sup>83</sup> George E. Shuttleworth, "Intemperance as a Cause of Idiocy", *British Medical Journal*, [1 Sept., 1877], p.308; "On Idiocy and Imbecility", *British Medical Journal*, [30 Jan., 1886], p. 183; "The Education of Children of Abnormally Weak Mental Capacity", *Journal of Mental Science*, vol. xxxiv, [April 1888], pp.80-4; "A Contribution to the Etiology of Idiocy", *British Medical Journal*, [21 Sept., 1889], p.651; "The Care of the Mentally Feeble Child", *British Medical Journal*, [Aug 22, 1891], p.438; "A Discussion on Points Connected with the Education of Feeble-minded Children", *British Medical Journal*, [8 Sept. 1894], p.528; "Some Slight Forms of Mental Defect in Children and their Treatment", *British Medical Journal*, [3 Oct., 1903], pp.828-9; "The Differentiation of Mentally Deficient Children", *Transactions of the International Congress on School Hygiene*, 1908, p.742; (with Potts) *Mentally Defective Children: their treatment*. (3rd ed.) London: :1910).

for Imbecile Children under the supervision of Dr. Fletcher Beach. Fletcher Beach was to have a long and successful career studying idiocy and epilepsy<sup>84</sup> in children and represented the Royal College of Physicians before the Royal Commission on Care and Control of the Feeble-minded in 1905.<sup>85</sup> William Wetherspoon Ireland, graduated from medical school in 1858 and in 1869 became the medical superintendent of the new Scottish National Institute for Imbecile Children at Larbert Scotland. Like Fletcher Beach, Ireland quickly established himself as an authority on imbecile children, publishing a text in 1877<sup>86</sup> devoted largely to the treatment and training of children. Also like his predecessor at Earlswood, Ireland, once he had made his reputation in the public institution, resigned from the public institution to found three 'private' schools in the 1880's.<sup>87</sup>

These Idiot Asylums received formal legislative certification through the Idiots Act of 1886 which regulated the conditions for their registration and inspection in a manner similar to that which already existed for lunatic asylums.<sup>88</sup> The Act belatedly standardized inspection in the wake of the creation of a national system in the 1860's and the proliferation of private homes which as yet had escaped official public scrutiny.<sup>89</sup> It

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<sup>84</sup> Epilepsy was considered an affiliated condition of idiocy because of the high number of idiots who suffered from epilepsy. More often than not legislation on one included a discussion of the other.

<sup>85</sup> *Evidence*, RCFM, PP, 1908, vol. xxxv, p.90.

<sup>86</sup> William W. Ireland, *On Idiocy and Imbecility* (London:1877).

<sup>87</sup> Scheerenberger, p.54.

<sup>88</sup> Kathleen Jones, p.185.

<sup>89</sup> Gillian Sutherland, *Ability, Merit and Measurement: mental testing and English education, 1880-1940* (Oxford:1984), p.16.

provided the first statutory definition of idiocy and detailed the procedure for certification and admission.

The classification of idiocy surrounded the issues of hierarchy, typology and etiology. A hierarchy implied an assumed mental ability which was latent and stable, thus facilitating early attempts at ranking based upon mental ability. Jeanne Etienne Esquirol, the French physician who worked on idiocy in the 1840s divided the levels of *idiotisme* into the idiot and the imbecile, a division based primarily on speech. Esquirol also included a groups of backward children or *enfants arrières*.<sup>90</sup> At roughly the same time, Samuel Gridley Howe, the American physician who had become famous for his work with the blind and deaf, and created a similar hierarchy of idiocy placing sub-groups of idiocy into 'pure' idiots, fools, the simpletons.<sup>91</sup> Still the British, not to be outdone by their American counterparts, adopted a different hierarchy still, maintaining idiot as the more extreme condition and imbecile as the lesser form.<sup>92</sup>

The grounds on which typology was constructed varied immensely. Langdon Down introduced an 'ethnic' classification based upon racial types.<sup>93</sup> Ireland in contrast divided

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<sup>90</sup> Scheerenberger, p.63. See Edouard Seguin, *Traitement Moral, Hygiène, et Education des Idiots et des autres Enfants Arrières*, &c. (Paris:1846). This was translated into English and published under the title, *Idiocy and its Treatment by the Physiological Method*, (Edinburgh:1866).

<sup>91</sup> Samuel Gridley Howe, *On the Causes of Idiocy: being the report of the training and teaching of idiots, presented to the Governor of the Commonwealth of Massachusetts* [1850] (Edinburgh:1866), p.7.

<sup>92</sup> See for example, *Journal of Mental Science*, [April 1956], p.267.

<sup>93</sup> Scheerenberger, p.57. 'Mongolism' is now commonly referred to as Down's syndrome since the 1930's. It is also quite possible that this genetic manifestation of Idiocy was recognised earlier by Drs. Mitchell and Fraser and described as a Kamluc Idiot. See Daniel Hack Tuke (ed.), *A Dictionary of Psychological Medicine* (Philadelphia:1892), p.644. For the story behind the study of Mongolism and the change in nomenclature, see Kelves, *In the Name of Eugenics*, pp.156-163.

idiocy into ten types including for the first time micro-cephalism and cretinism as associated conditions of idiocy.<sup>94</sup> Hydro- and Micro-cephalism were recognisable because of the malformed cranium and Mongolism was recognisable because of the distinct facial stigmata. Ireland also included three categories which were based on the presumed etiology of the condition - traumatic idiocy, inflammatory idiocy and idiocy by deprivation. The classification and re-classification of sub-types of idiocy, however, became increasingly submerged in a more heated discussion over etiology, for the study of idiocy was most useful, the physicians argued, if it could lead to its prevention in the future. The study of aetiology, in the days before a uniform medical curriculum had been reached, meant that the study of causality was at times merely a study of correlation, and a highly subjective one at that. Still the subjective nature of the 'scientific' inquiry reveals a great deal about the preoccupations of these medical practitioners.

Samuel Gridely Howe, who in the 1840's had been commissioned by the state of Massachusetts to study the problem of idiocy, persuaded the legislature to create the first training schools in 1848 and his report to this legislature formed the nucleus of his treatise, *On the Causes of Idiocy*, published in the United States in 1850 and widely cited in the English medical journals. This became the standard text on the subject until the release of Langdon Down's work in 1867. As the pioneer in the field, Howe identified five main 'causes' of Idiocy: consanguinity, 'self abuse',<sup>95</sup> the low condition of the physical organisation

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<sup>94</sup> *Journal of Mental Science*, vol. ii, [July 1856], p.456. Cretinism is now referred to as Hypo-thyroidism. However it is almost always accompanied by mental retardation and thus was classified as a sub-category or affiliated affliction of Idiocy.

<sup>95</sup> 'Self-Abuse' used in this context was a Victorian euphemism for masturbation. Masturbatory Insanity was a frequently discussed subject within the allied field of the study of insanity. See Szasz, *Manufacture of Madness*, chapter xi.

of the parents, intemperance and fright during pregnancy.<sup>96</sup> Ideas about frights affecting pregnancy have a long history within the medical field, but Ireland emphasized the importance of stress in mothers of illegitimate children thereby reinforcing his own belief that idiocy occurred more often in illegitimate than legitimate children.<sup>97</sup> Remarkably, Howe's five main causes of idiocy remained virtually unchallenged until the 1890's.<sup>98</sup>

The lure of Howe's aetiology of idiocy was his none too subtly disguised indictment of the habits and conditions of the labouring poor. This theme of idiocy as a predominantly working class affliction, permeates Howe's writings and played heavily on the relationship between drunkenness and the advent of idiocy in children: "The general appearance of these idiots", wrote Howe, "is said to be remarkably *like that of their parents when they were in their drunken debaucheries*".<sup>99</sup> This correlation between drunkenness and idiocy was a dominant theme in medical writings. Dr. Forbes Winslow, writing at the same time, suggested that physicians need only to look to the gin-palaces of the slums to find the 'true source' of idiocy.<sup>100</sup>

By the late-1880's, the obsession with the drink question among these professionals was taken up by Dr. Norman Kerr, a prominent member of the Medico-Psychological

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<sup>96</sup> Howe, p.24-30.

<sup>97</sup> W.W. Ireland, *Mental Affections of Children: idiocy, imbecility, and insanity* (2nd ed.) (London:1900), p.27-8.

<sup>98</sup> As late as the 1880's, physicians were still debating the role of fright in mothers as a cause of idiocy, see Dr. Arthur Mitchell, "On Strong Emotions Affecting Women as a Cause of Idiocy in the offspring", *British Medical Journal*, [24 May, 1884], p.998.

<sup>99</sup> Howe, p.27. Italics original.

<sup>100</sup> Forbes Winslow, "On Idiocy, its Causes and Treatment", *Lancet*, [13 March, 1852], p.271.

Association, who in addition to his work on Idiocy and Insanity was also President of the Society for the Study of Inebriety. "A drunken mother, a drunken father, a drunken grandparent, may hand down to their descendants an alcoholic taint which not even a lifetime of entire abstinence from intoxicating drinks can eradicate."<sup>101</sup> He was not alone in this line of argument: Langdon Down, who had posed that idiocy may well be caused in many cases by the intoxication of the father or mother during conception, also stated that in "In Norway, when the spirit duty was removed, insanity increased 50 per cent, and congenital idiocy 150 per cent."<sup>102</sup> Ireland, who believed that drunkenness was a significant contributing factor was sceptical of Down's theory about drunken conception, concluding that if it were true there would be many more idiots than could be counted.<sup>103</sup>

How were these predispositions passed down? In the days before the discovery and discussion of genetics, 'heredity' was a loosely used term. Winslow himself noted: "Men [have] devoted large sums of money...to the improvement of the breed of sheep, dogs, horses, &tc., but [are] totally regardless of the laws regulating the transmission of hereditary qualities, and the organisation and health of the *human* race".<sup>104</sup> Thus even though a study at the Lunatic Asylum at Leeds in the 1830's traced heredity in the families of 39 per cent of the lunatic and idiot inmates<sup>105</sup> one may well question how this result was deduced.

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<sup>101</sup> Norman Kerr, *Inebriety: Its Etiology, Pathology, Treatment and Jurisprudence*. (London:1888).

<sup>102</sup> *British Medical Journal*, [22 Jan., 1887], p.150.

<sup>103</sup> Ireland, *Mental Affections*, pp. 22-3.

<sup>104</sup> Dr. Forbes Winslow, *Ibid.*, [13 March, 1852], p.272.

<sup>105</sup> *Lancet*, [1843], p.527.



Heredity, however loosely understood, began to provide a biological explanation for the continuance of social evils like drunkenness and prostitution. That the continuance of social vices from one generation to another was somehow passed along, seemed confirmed by the discovery of the predisposition of offspring to similar diseases of parents discovered in other medical disciplines. Thus the medico-psychologists developed a concept of heredity which although varied, implied a Lamarckian framework rather than one which corresponded to Darwin's natural mutation, Galton's statistical theory of deviation or even Mendel's theory of heredity. The Lamarckian framework which remained constant throughout this period consisted of two components: the direct hereditary transmission and the effect of environment on the characteristics of an individual.

The medico-psychologists did not preach Darwin's line on the origins of degeneration: they were particularly ambivalent to Darwin's intellectual framework. On the one hand they believed in the eventual progress of society as it evolved to higher states. Yet the medical community was overtly collectivist and interventionist and saw progress as contingent upon the advancement of science and the intervention of 'experts'. Thus while they were easily led to accept Darwin's category of the 'fit' as representing the true elements of intelligence and respectability of a member of the middle class, they resented Darwin's amoral rationale for the need to let the 'unfit' die off. This naturally ran counter to medicine's aim of preservation of life. Darwin himself had foreseen this inevitable clash between natural selection and medicine when he wrote:

We civilised men...do our utmost to check the process of elimination; we build asylums for the imbecile, the maimed, and the sick; we institute poor laws...and our medical men exert their utmost skill to save the life of every one to the last moment...Thus the weak members of civilised society propagate their kind. <sup>106</sup>

Medico-psychologists did not reject Darwinianism; they simply found a resolution to this apparent conflict by emphasizing the preventive aspects of medicine. Doctors could maintain a faith in progress through science and reconcile the preservation of the unfit, by claiming that through hygiene and research they were preventing the manifestations of disease. Thus, prevention in their minds could take the natural form of preventing the creation of 'unfit', and the study and preservation of idiots could lead to knowledge which would eventually 'rid' society of idiocy altogether. This tendency was revealed earlier when Shuttleworth, in the same year that Darwin wrote about the dangers of medicine, wrote "The greater part of the value of an asylum...as of a hospital, consists in its usefulness as a school where a particular complaint there treated may be studied, not merely that we may know how to cure it, or how to alleviate it when it comes before us, but that, if possible, we may trace it back to its source, and so guard against it in future." <sup>107</sup>

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<sup>106</sup> Charles Darwin, *Descent of Man*, (London:1876), pp.151-2

<sup>107</sup> Dr. G.E. Shuttleworth, *British Medical Journal*, [1876], p.285.

## Chapter Two: Education, Philanthropy and the Defective Child

The Education Acts of 1870 to 1891 instituted national compulsory elementary education in England. Of the many direct and indirect effects of these acts, three deserve attention. Firstly, the Acts instituted an administrative framework which would facilitate future social investigation. Secondly, they created a new professional group of educational reformers, centred in the Local School Boards, charged with organising educational policy. Finally they brought vast numbers of working class children under the scrutiny of the Local School Boards thus revealing, far more accurately, the extent and severity of certain social problems.

The administrative framework of the 1870 Act centred on the Local School Boards, 2500 of which were created between 1870 and 1896.<sup>108</sup> The Boards consisted of five to fifteen members, elected every three years from districts on the basis of cumulative voting. For several reasons including educational requirements and low remuneration, the School Boards were invariably staffed by reform-minded members of the middle class who had been active in other municipal organisations such as philanthropic agencies, local

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<sup>108</sup> John Lawson and Harold Silver, *A Social History of Education in England* (London:1973), p.320.

government, and the Poor Law board. Competition for positions was heavy. As one member recalled, "A Seat on the School Board was a highly coveted honour".<sup>109</sup>

The School Boards included large numbers of women barred from entering other traditionally male enclaves such as medicine and academia. The school boards offered them a career which, although not high in salary, did afford a modest amount of political influence, an appealing attribute in the days before universal suffrage. Positions on the school boards were often not full time jobs, thus freeing time for philanthropic activity or familial duties.<sup>110</sup> Further, education dealt with children, a group which both Victorian men and women believed to be within the domain of female expertise.<sup>111</sup> The unprecedented situation of women and men working side by side within a professional setting seemed to foster a division of labour:

While men managed the accounts, erected the buildings, awarded the contracts, and intermittently argued theology, women members became acknowledged experts on kindergarten and on domestic economy; on industrial schools for damaged children, and special schools for delicate and 'defective' children.<sup>112</sup>

While large numbers of men actively participated in the new School Boards, it was the new women Board members who were most active in the drive for establishing education as a

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<sup>109</sup> Birmingham School Report, as cited in Lawson and Silver, p.318.

<sup>110</sup> Patricia Hollis, *Women in Local Government, 1865-1914* (Oxford:1987), p.141.

<sup>111</sup> Reader, *Professional Men*, p.168.

<sup>112</sup> Hollis, *Ibid.*

respected profession and advancing its scope and prestige by the 'scientific' study of education and children.<sup>113</sup>

The 'scientific' study of children originated with the study of physical and mental abnormalities in the schools. Along with the large numbers of children who had hitherto escaped the grasp of local authorities, there were significant numbers of children who, because of a host of physical or mental ailments, impeded the 'efficient' running of the classroom. In these particular cases, attendance officers and teachers were unclear how to proceed in discriminating between the normal, the backward and the imbecile and how to segregate based on these differences. The search for a solution led the education authorities to the medico-psychological community, which had for several years studied closely the training of idiotic and imbecile children. In doing so, an important professional association between physicians and school board officials arose which was to be instrumental later in the formation of legislation on the issue.

Helen and Mary Dendy, two of the most articulate and strident of the advocates for legislation, reflected two examples of this new and emerging woman professional. Their father, a Non-conformist minister in Salford, near Manchester, ensured that all his children received higher education. After university, the sons took up a variety of middle class professional jobs from law to the clergy. The daughters all received higher education and followed the two routes open to women - education and philanthropy. Helen after graduating from Newnham College, Cambridge moved to London to become a teacher. Mary, after graduating from Bedford College in London, moved to Manchester and began a

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<sup>113</sup> Lawson and Silver, p.352.

career in philanthropy working on schemes to improve living conditions in the slums of Manchester in the 1870s and 80s.<sup>114</sup> Within a few years they had switched professions: Mary had run for, and been elected to, the Manchester School Board in 1896;<sup>115</sup> Helen quit teaching and accepted a post as a salaried district secretary to the Charity Organisation Society in Shoreditch.<sup>116</sup> This move was to have important personal and professional consequences for in 1891 she met Bernard Bosanquet the co-founder of the Society, starting a friendship which would soon pass to marriage in 1895.<sup>117</sup>

Originally called the Society for Organising the Charitable Relief and Repressing Mendicity, the Charity Organisation Society (C.O.S.), was founded in 1869 with a strictly classical liberal ideology. It saw social problems as a function of individual moral failure. By returning once again to the 'principles of 1834', the Society hoped to restrict Poor Law relief to the 'deserving' for fear the able-bodied would become dependent upon local rates. Consequently, it sought to co-ordinate charity by organising all charities and poor law boards into one efficiently run network. Although the stated goal of the Society was to 'co-ordinate' charity relief, the Society quickly earned the derision of contemporaries who complained that the Society spent more time dissuading charity than promoting it.<sup>118</sup>

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<sup>114</sup> *Evidence*, RCFM, PP, 1908, vol. xxxv, p.137.

<sup>115</sup> Marjorie Cruickshank, "Mary Dendy: Pioneer of Residential Facilities for the Mentally Retarded", *Journal of Educational Administration and History*, vol. viii,[1976], p.27.

<sup>116</sup> A.M. McBriar, *An Edwardian Mixed Doubles - the Bosanquets versus the Webbs: A Study in British Social Policy, 1890-1929* (Oxford: 1987), pp.10-12.

<sup>117</sup> McBriar, *Mixed Doubles*, p.13.

<sup>118</sup> David Owen, *English Philanthropy 1660-1960* (Cambridge:1964), p.230.

The Society soon fell under the influence of a young Balliol graduate named Charles Loch, who was to be Secretary of the Council from 1875 until 1912. Loch, who was also a member of the Royal Statistical Society, was so thorough in his investigations that contemporaries compared his research and reports to small Royal Commissions.<sup>119</sup> Loch's scientific edge represented a second and sometimes conflicting tendency within the Society, one that sometimes undermined the Society's conservative leanings. For the Society, under Loch's guidance, was obsessively concerned with the placement of charity on a 'scientific' basis, a commitment which earned it the derogatory title of the 'scientific charity' from unsympathetic commentators.<sup>120</sup> Its members were firm in the conviction, "reinforced by every new invention and scientific discovery, that any problem, such as the problem of poverty, could be solved by study, thought, the ascertainment of facts, [and] the application of the scientific method".<sup>121</sup>

In essence, the C.O.S. developed, thanks to Loch's influence, into a professional organisation unto itself, earning it the reputation among historians as the first professional social work agency.<sup>122</sup> The central office orchestrated a complex network of district committees whose purpose was to co-ordinate the local boards of Guardians, and local

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<sup>119</sup> It surprised few when he sat as a Commissioner on the Royal Commissions on the Aged, the Unemployed, and the Feeble-minded. Mowat, *Ibid.*

<sup>120</sup> Roof, p.48.

<sup>121</sup> Mowat, *Ibid.*, p.14.

<sup>122</sup> For work on the Charity Organisation Society by former members, see Helen Bosanquet's history of the Society *Social Work in London 1869-1912: A History of the Charity Organisation Society* (London: 1914) and Madelaine Roof's *A Hundred Years of Family Welfare: A Study of the Family Welfare Association 1869-1969* (formerly the Charity Organisation Society) (London:1972). For a work by the grandson of the Society's most influential member see Charles Loch Mowat's *Charity Organisation Society, 1869-1913: Its ideas and Work* (London:1961). For a more detached analysis, see Chapter Eight of David Owen's, *English Philanthropy 1660-1960* (Cambridge: 1964).

philanthropy. It was staffed by educated members of the middle class bound by a common outlook, providing a service related to local government. It published weekly, and later monthly, journals which coordinated professional activities in a manner similar to journals of medical associations. While the medical community was studying the treatment, causes and prevention of disease, the C.O.S. began to study the treatment, causes and prevention of pauperism. As Loch professed, "It is desirable that it should be distinctly understood that it is the chief aim of the Society to deal with the *causes* of pauperism rather than its effects"<sup>123</sup>, a quotation which reinforces a particular strain of the C.O.S. platform which saw itself, to quote its own words, as exercising 'preventative' philanthropy.<sup>124</sup>

The C.O.S. became interested in imbecile children during its surveys of poorer districts in the 1870s. Working class families could not afford the cost of asylum care, and as a consequence many struggled with the financial burden of supporting dependent members. The C.O.S., determined to deal as Loch said with the 'causes of pauperism', struggled for a solution that did not rely on Poor Law relief. The Society considered this a significant enough problem to strike a committee on 13 July, 1874, to consider "the Best Means of making a Satisfactory Provision for Idiots, Imbeciles and Harmless Lunatics". Chairing the committee was Charles Trevelyan, a Liberal MP and ex-governor of Madras, who was interested in the study of the 'feeble-minded'.<sup>125</sup> Joining Trevelyan were Drs. Langdon

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<sup>123</sup> Fifth Annual Report of the Charity Organisation Society, pp.5-6, as quoted in Mowat, *Ibid.*, p.26.

<sup>124</sup> Charity Organisation Society, *Crippled and Epileptic Child and Adult*, (London:1893).

<sup>125</sup> Simmons, Jones and Pritchard attribute the introduction of the term 'feeble-minded' (always with a hyphen) to a motion put by Trevelyan before the Council of the Charity Organisation Society in 1876. All three seem to rely on Helen Bosanquet's *Social Work in London* for this reference (see p.196). Trevelyan did not invent this term: feeble-mindedness(e) can be dated back to the early seventeenth century. Nor was Trevelyan the first to use feeble-minded as a synonym for the highest class of idiocy or what the Society periodically called 'improvable idiots'. The term Feeble-minded, as has been stated earlier, was commonly used in the United States from the early 1850s as synonymous to the English term Idiot. With the abundant correspondence between English and American medico-



Down, Ireland, Fletcher Beach, and Shuttleworth, as well as the indefatigable educational reformer, Sir James Kay-Shuttleworth, guaranteeing a good mix of medical experts and specialists in educational reform.<sup>126</sup> After thirteen meetings, the committee suggested changes to the system which were uncharacteristic for any Committee endorsed by the Society. The report urged that the state take partial responsibility by a grant of 4s per week per person to the receiving institution, and put forward the idea that pauperization should not occur with receipt of this grant. Further, the committee made the distinction between 'educable' and 'non-educable' idiots. For the former they recommended special training schools; for the latter they suggested new idiot asylums.<sup>127</sup>

Although the report did not elicit any great action at the national level, it did begin a long process of cooperation between the educational, philanthropic and medical professions on the subject of childhood idiocy. The physicians involved with this committee actively pursued the subject in other arenas. Dr. Shuttleworth and Dr. Fletcher Beach in particular, continued to write articles in the medical journals and used the International Health Exhibition which opened in May 1884, in London, as a forum by which to continue the call for special schools for the special needs of feeble-minded children.<sup>128</sup> Similarly these individuals met again at the International Congress of Hygiene and Demography in

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psychologists, it is not surprising that some English physicians began to use feeble-minded in a variety of manners, but most commonly as the lightest category of mental deficiency and therefore analogous to the American sub-class termed 'Morons'. The first use of feeble-minded in this sense was P.M. Duncan and W. Millard, *A Manual for Classification, Training, and Education of the Feeble-minded, Imbecile and Idiotic* (London:1866) as referenced in Scheerenberger, p.62. See also William W. Ireland, "On the Classification and Prognosis of Idiocy", *Journal of Mental Science*, vol. xviii, [Oct. 1872], p.335. For a fuller explanation of the significance of the proliferation of the term 'feeble-minded', see Chapter three.

<sup>126</sup> Sutherland, *Ability*, p.26.

<sup>127</sup> *British Medical Journal*, [26 June, 1875], p.575; *Ibid.*, p.865; [28 July, 1877], p.109. This report was published by the C.O.S. in 1877. *Ibid.*

<sup>128</sup> D. Pritchard, *Education and the Handicapped, 1760-1960* (London:1963), p.117.

1891 which provided an excellent forum to express these views to a wide variety of medical and scientific professions.

Sitting on the C.O.S. Committee with Beach and Shuttleworth was Major-General Moberly, a retired army officer who was also an active chapter secretary and field worker of the C.O.S. Moberly illustrates well the interaction which occurred between the different governmental agencies. He was a local Guardian, ran successfully for the London School Board and chaired its sub-Committee on education of the deaf and blind.<sup>129</sup> His work with the C.O.S. undoubtedly led to his interest in special schools for the feeble-minded and his successful bid to establish London's first special schools.<sup>130</sup> In 1887, Moberly initiated several studies into the provision for the feeble-minded on behalf of the C.O.S. using his many connections in the fields of philanthropy, Poor Law, education, and medicine. He convinced Dr. Francis Warner, physician to the London Hospital and consulting physician to the London School Board, to conduct a random study of 5,000 children to determine roughly the number who would require special supervision.<sup>131</sup>

Warner's findings startled the C.O.S. enough to warrant a much more comprehensive study. For this purpose the Society obtained the active support of the British Medical Association and several other smaller charitable societies including the Metropolitan Society for Befriending Young Servants and the National Vigilance Society. The medical community fully supported the investigation for reasons which are revealing:

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<sup>129</sup> *Evidence*, Committee on Defective and Epileptic Children (CDEC), PP, 1898, vol. xxvi, p.152-3.

<sup>130</sup> Sutherland, *Ability*, p.125.

<sup>131</sup> *Evidence*, CDEC, p.77.

We have large bodies of statistics bearing upon disease, its causation and distribution, and upon pauperism crime non-employment, &c., but there is no body of facts founded upon the extended observation of school children showing their condition and its bearing upon the adult population of the next decade. <sup>132</sup>

This sentiment was echoed by Warner himself:

It is needless to argue that public benefit has resulted from the employment of scientific methods in connexion with sanitation, food supply, manufacturing...why should not the professional teacher have the benefit of precise knowledge as to the material upon which he works?<sup>133</sup>

This represented the first comprehensive investigation of the prevalence of idiocy in the general population and many reformers took advantage of the process to conduct official and non-official statistical inquiries into the prevalence of other diseases among children.

A second and more comprehensive investigation involved over 50,000 children under supervision of the London School Board. Warner's purpose was to determine the number of defective children in the school system and advise as to the appropriate provision. Interestingly, he defined 'defective' as a "deviation from the average or normal" and included the widest range of handicaps possible from simple mental backwardness to profound idiocy. With the aid of Drs. Shuttleworth and Fletcher Beach he concluded that out of 50,000 children examined, 234 were feeble-minded. If extrapolated to a population of 800,000 in the city, this figure became closer to 3,000. "If this be so, the question is one of national importance"<sup>134</sup> concluded Warner.

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<sup>132</sup> *Lancet*, [5 April, 1890], p.743.

<sup>133</sup> *Ibid*

<sup>134</sup> *British Medical Journal*, [19 March, 1892], p.590.

The importance of these figures, according to Warner, was the effect that these children would have on future social problems within society. As Warner stated to the Royal College of Physicians:

The ends which it is desired to attain through medicine are to improve the average development, nutrition, and potentiality for mental faculty, ...[and] lessen crime, pauperism, and social failure, by removing causes leading to degeneration among the population.<sup>135</sup>

This emphasis on the future of the nation as a collective entity was accelerated by the Education Acts which made investigators think in terms of national goals, national education and national health. As Warner himself summed up, the "nation collectively is but the aggregate of its components."<sup>136</sup> The C.O.S., as it promised, published Warner's study in two pamphlets, *The Feeble-minded Child and Adult* (1893) and *The Epileptic and Crippled Child and Adult* (1893) which were popular tracts meant for non-medical groups interested in the subject of childhood diseases.<sup>137</sup> The books summarised the outstanding social problems of feeble-mindedness and handicap and recommended methods of training, special schools and exemption from the stigmata of pauperism.<sup>138</sup>

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<sup>135</sup> *Ibid.*

<sup>136</sup> *Ibid.*

<sup>137</sup> *The Feeble-Child and Adult: A Report on an Investigation of the Physical and Mental Condition of 50,000 School with Suggestions for the Better Education and Care of the Feeble-minded Children and Adults* (London: 1893); *The Epileptic and Crippled Child and Adult A Report on the Present Condition of these Classes of Afflicted Persons, with Suggestions for their Better Education and Care of the Feeble-minded Children and Adults* (London:1893).

<sup>138</sup> Mowat, *Charity Organisation Society*, p.76.

The co-operation of physicians and the Local School Boards facilitated the rise of mental testing.<sup>139</sup> The London School Board, through its inspectors, picked out on the recommendation of the teacher, children across the district who were considered possibly mentally deficient. The medical officer would then investigate and decide whether the child could be certified. Certified children were sent to the Darenth Asylum for Imbecile Children; if the child was found 'normal', he was returned to the classroom. If the child was uncertifiable but in the mind of the medical officer and the teacher incapable of receiving proper education in the regular classroom then he was sent to one of several special classes.<sup>140</sup> Smaller school boards did not have the luxury, as London did, of having a separate Asylum for Imbecile children and twenty-six special schools. Only six other school districts in England had special schools by 1897 and most of these grouped all the cases who could not properly be taught in the regular system into the same classrooms. Smaller communities still sufficed with a separate classroom, and a great many made no separate provision whatsoever.

In response to these deficiencies, the National Association for Promoting the Welfare of the Feeble-minded was created in 1895<sup>141</sup>, due primarily to the efforts of three women; Pauline Townsend, Miss Jeffries and Ellen Pinsent. Of these, Pinsent would join forces with Mary Dendy to become the two most important lobbyists for legislation on the feeble-minded. Born Ellen Parker, Pinsent was, like Mary Dendy, the daughter of a

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<sup>139</sup> See Sutherland, *Ibid.*

<sup>140</sup> Pritchard, p.117.

<sup>141</sup> There seems to be some variation as to the date of the founding of the National Association. Jeffries and Pinsent testified in front of the Royal Commission that the Association was founded in 1895: *Evidence*, RCFM, p.321. but Kathleen Jones and others have marked the date as 1897. Kathleen Jones, *A History of the Mental Health Services*, p.186.

minister whose brothers took up professional work in law.<sup>142</sup> After receiving higher education she was elected to the Local School Board of Birmingham. Like many of the other women who became involved with the National Association, she had become acquainted with feeble-minded children through her work on the special schools sub-committee of the Birmingham School Board. Pinsent took it upon herself to inspect personally all the schools within the Birmingham district in order to inform the schools as to the procedure of medical inspection. With the aid of the newly appointed medical inspector, Dr. Caroline O'Conner, there were soon 600 children enrolled in the special schools.<sup>143</sup>

Under Pinsent's guidance the National Association represented eighteen charitable agencies, created strong connections within the educational, medical and philanthropic communities, and attracted the active support of the Guardians and members of county councils. Conferences with Poor Law Guardians received support of Poor Law activists like Louisa Twining in establishing 'permanent protection for the feeble-minded'.<sup>144</sup> The National Association had close ties to the C.O.S., so close that some have characterized the former as merely a wing of the larger philanthropic agency.<sup>145</sup> There was certainly a great deal of overlap; Charles Loch and Helen Bosanquet were active supporters,<sup>146</sup> the National Association often used C.O.S. facilities and the positions of the C.O.S. and the

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<sup>142</sup> Kelves, *In the Names of Eugenics*, p.98.

<sup>143</sup> Kathleen Jones, p.187.

<sup>144</sup> *Ibid.*, p.327.

<sup>145</sup> Sutherland, *Ability*, p.19.

<sup>146</sup> *Evidence*, RCFM, p.327.

National Association were almost indistinguishable. Yet the National Association included an interesting mix from other professions including Dr. Shuttleworth and Dr. Beach from the Royal Medico-Psychological Association<sup>147</sup> and Mary Dendy and Ellen Pinsent from the Local School Boards.

The original goals of the Association stressed care, self sufficiency, and protection from society. It also sought "to collect and diffuse information on the subject of practical aid and of investigation along scientific lines" and promote legislation on behalf of the feeble-minded.<sup>148</sup> But the conflicting interests of the Association could be seen in its own original goals: it sought to protect society from future social problems and "to fortify and lift the feeble-minded up in order that, so far as possible, they may be rendered self-supporting, and saved from becoming vagrant, pauper, and criminal."<sup>149</sup>

After sitting on the Manchester School Board for two years Mary Dendy took it upon herself to solicit the help of a local physician and inspect every school of the Manchester district board, 39,000 children in all, and selected 494 as defective in intellect, in the winter of 1897-1898.<sup>150</sup> In 1897 Mary Dendy had taken the extraordinary measure of creating her own organisation, the Lancashire & Cheshire Society for the Permanent Care of the Feeble-minded, of which she became honorary secretary. The Lancashire and Cheshire Society was created, as its title suggests, with the strict principle of permanent

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<sup>147</sup> *British Medical Journal*, [1904], p.24.

<sup>148</sup> *Evidence*, RCFM, p.321.

<sup>149</sup> *Ibid.*

<sup>150</sup> *Ibid.* p.137.

control, in the belief that "only 'permanent control' could be really efficacious in stemming the great evil of feebleness of mind in [the] country."<sup>151</sup> The Society had been active in the training and supervision of the feeble-minded and by 1905 had two schools whose costs were borne partially by charitable donation, partially by the Cheshire County Council and partly by the Manchester Education Committee.<sup>152</sup>

The cost of special provision and the continuing lobbying of members from the education, medical and philanthropic agencies led to the establishment of a Departmental Committee charged with inquiring "into the existing systems for the education of feeble-minded and defective children not under the charge of guardians, and not idiots or imbeciles, and ... advis[ing] to any changes, either with or without legislation, that may be desirable."<sup>153</sup> Among those interviewed were Loch, Shuttleworth, Fletcher Beach, and Mary Dendy. By 1898, the medical witnesses to the Committee were beginning to press more stridently on the question of heredity. "Inherited mental condition", concluded Dr. Fletcher Beach before the Departmental Committee on Defective and Epileptic Children, "play[s] a very important part in the production of these children." <sup>154</sup>

This Departmental Committee in 1898 recommended provision similar to that of the Elementary Education (Blind and Deaf Children) Act of 1893, which provided national grants to school boards for each blind and/or deaf child on the register. Both Acts were

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<sup>151</sup> Dendy in Charles Lepage, *Feeble-mindedness in Children of School Age* (Manchester:1912), p.293.

<sup>152</sup> Evidence, RCFM, p.137.

<sup>153</sup> Evidence, CDEC, p.1.

<sup>154</sup> *Ibid.*, p.68. See also p.72, p.141., p.164, p.146.



permissive and allowed local education authorities to implement special classes, or if the numbers warranted, special schools. The permissive nature of the legislation meant that only the wealthier and larger unions instituted the special classes. By 1909, only 133 out of 328 Local Education Authorities had exercised their powers.<sup>155</sup> Two factors prevented an extension of special classes. The first came from local ratepayers who, having had to bear over half the burden of a national education system whose cost rose from 10s. to 21 s./week from 1872 to 1896,<sup>156</sup> saw little need for the creation of special schools, especially when these schools cost significantly more per student than the regular classes. Their resistance eventually prompted many like Pauline Townsend to urge the Royal Commission in 1905 to recommend full state funding for a national system of Homes for the Feeble-minded.<sup>157</sup> Secondly, many parents themselves resented the segregation of their children into what were derogatorily called 'silly schools'.<sup>158</sup> The social stigma attached to these classrooms obviously caused great consternation to school officials who tried repeatedly to convince the parents of the advantage of these specialised classrooms.

The class interests become quite fascinating in studying the testimony of many of the female witnesses. Dendy and others obviously resented the fact that parents objected to the compulsory detention in Homes or asylums of mentally defective children. Wrote Dendy:

"When I had seen these children and seen many of their parents I became quite convinced

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<sup>155</sup> Pritchard, p.150.

<sup>156</sup> In 1898 57% of the costs of the national educational system fell on local rates. P.W. Musgrave, *Society and Education in England since 1800* (London:1968), p.45.

<sup>157</sup> *Evidence*, RCFM, p.323.

<sup>158</sup> *Evidence*, CDEC, p.158.

that to treat them only in day schools was to a very great extent, a waste of time and money."<sup>159</sup> The push to permanent 'separate care' was at least predicated on distrust of the ability of the poorer households to provide a 'morally fit' home environment.

The National Association and Lancashire Society provided loci around which the political aspirations of a diverse set of professionals could affix. Unlike the associations of its constituent members, these new professionals organisations were created and operated with one goal in mind- political power. Yet the National Association and its smaller counterpart, the Lancashire Society, both conducted themselves not unlike a regular professional associationd with governing Councils, publications, meetings and shared sense of public service. They represent a new example of the pressures of collectivist politics, where corporate entities lobbied to affect and initiate social policy.

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<sup>159</sup> *Ibid.*, p.139.

### Chapter Three : Urban Degenerates and the Colony System

On the inside cover of *In Darkest England*, there is a portrait depicting late-Victorian urban society. In the foreground men and women struggle in a 'sea' of urban vices amongst which float the words 'poverty', 'immorality', 'prostitution', 'disease', 'insanity' and 'idiocy'[sic]. In the centre rests a lighthouse, the beacon of morality and civilisation, which directs those drowning to the outstretched arms of the Salvation Army volunteers who lead the 'saved' to the upper half of the collage and into city colonies, farm colonies, and, in the distance, imperial colonies.<sup>161</sup>

The collage represents General William Booth's plan for the Salvation Army's 'way out' of Darkest England. It serves also as an allegory of a struggle, often alluded to by middle class professionals, between the urban poor and the immorality of urban living, and represents to historians a certain mind-set of the late-Victorian professional middle class which increasingly looked at the urban slums as a vortex seducing unfortunate individuals into the dark abyss of immorality. Like Booth, many professionals looked to a solution which would segregate those 'contaminated' from the deteriorating influences of the city.

Booth borrowed his title from H.M. Stanley's *In Darkest Africa*, a contemporary account of one man's adventures in the 'dark continent'. At a time when novelists were romanticising the mysteries of undiscovered countries, allusions to 'voyages' into the other

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<sup>161</sup> (General) William Booth, *In Darkest England and the Way Out* (London:1890).

*terra incognita*, London's East End, appeared to strike a chord.<sup>162</sup> The tribes of the East End represented not the respectable working class but rather a vagrant wandering underclass, variously described as the residuum or what Booth described later as the 'submerged tenth'.<sup>163</sup> This social substratum loosely encompassed the socially undesirable ranging from the criminals to the handicapped. A common theme was that this substratum constituted an urban race, physically and mentally degenerate from generations living in slums. Physical *and* mental degeneration were considered by many to be allied afflictions: "As might be expected, feeble-minds are usually associated with feeble-bodies."<sup>164</sup>

The theory of urban degeneration loosely incorporated two main streams of thought which might be divided into the Lamarckian and the Darwinian. The Lamarckian saw the city as a degenerating environment which could affect the physical constitution of the individual permanently. This physical change could subsequently be passed along to future generations.<sup>165</sup> The Darwinian believed that degeneration occurred spontaneously but that natural selection, which would have necessitated the death of degenerate offspring, had been interrupted by the advent of modern medicine and thus created a situation whereby the 'unfit' were saved, a situation dubbed, 'artificial' or 'reverse' selection.<sup>166</sup> Importantly, both theories were hereditarian in that they implied that characteristics such as idiocy were passed

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<sup>162</sup> Gertrude Himmelfarb, *The Idea of Poverty: England in the Early Industrial Age* (New York:1984), pp.356-362.

<sup>163</sup> William Booth, p.17. For the difference between the lumpenproletariat and the residuum see Gertrude Himmelfarb, *The Idea of Poverty: England in the early Industrial age* (New York: 1984), p.17.

<sup>164</sup> G.E. Shuttleworth, "On Idiocy and Imbecility", *British Medical Journal*, [30 Jan., 1886], p.185.

<sup>165</sup> Gareth Stedman Jones, *Outcast London: a study in the relationship between classes in late-Victorian England* (Oxford:1971), pp.127-51.

<sup>166</sup> Kelves, *In the Name of Eugenics*, pp.70-71. Later, eugenists would refer to their solution of selective procreation as 'rational eugenics' which would stop the irrational selection which had threatened the 'race'.

along to the next generation, yet they differed on whether the manifestation of degeneracy was spontaneous, as Darwinian theory would hold, or acquired through the environment, as Lamarckians would believe.

The urban degeneration theory was sponsored originally by professionals whose reliance on statistics led many to quantify social problems as objectifiable phenomena. This process of reifying human behavior was pronounced in the field of medicine where the moral vices of crime, alcoholism and pauperism became redefined as 'diseases' of criminality, inebriety and hereditary pauperism. As one physician remarked, "Just because one cannot see the disease, doesn't mean it is not there".<sup>167</sup> Since diseases could be treated and prevented, these commentators began to propose the segregation and control of the disease of degeneracy.

The medical profession's changing attitude to drunkenness reflects well this reification of social behaviour. Long considered a social 'evil' of the working classes, drunkenness was reconstructed by physicians as a disease, *inebriety*, with specific symptoms, etiology and treatment. Dr. Norman Kerr, the strongest proponent of the idea of alcoholism as a disease claimed that, "no disease is more common than Inebriety and yet none is so seldom recognised".<sup>168</sup> Having proceeded to accept inebriety as a true disease, Kerr then proceeded to draw charts of symptoms, and more importantly, to research the etiology of the disease, making strong links to idiocy and insanity. Kerr concluded that inebriety was strongly

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<sup>167</sup> Dr. Norman Kerr, *Inebriety*, p.3.

<sup>168</sup> *Ibid.*, p.1.

passed on by heredity and the only sure way to diminish the future occurrence of the disease was to control propagation.

Similar processes of reifying socially undesirable behavior led naturally to the development of the idea of a 'taint' to explain this predisposition to hereditary degeneration. The 'taint' was a medical description of some property transmitted from parent to offspring which made the latter susceptible to a particular disease or set of diseases. The 'degenerate taint' as it became identified, was thus a predisposition passed down by a parent to child in which the latter had a strong possibility of becoming idiot, insane, criminal or an inebriate. The idea of the taint presupposed the primacy of heredity in the determination of behaviour, echoing work in other related fields such as Galton's ideas about intelligence in *Hereditary Genius*.

The understanding of the 'taint' varied widely within the medical field. Some physicians argued that alcoholism in parents begets alcoholic children. Others argued that the taint was a broad defect of the individual's constitution and could manifest itself in a number of different ways. Again debate ensued as to the origin of the taint, was it spontaneous or acquired? Increasingly the professional discourse implicitly assumed that the taint could both arrive spontaneously and be acquired. Thus in case of idiocy occurring in members of the middle class, the physicians assumed that the cause had been spontaneous; in the cases of the working class, the physicians blamed the immoral environment of the slums for creating

feeble-mindedness. This double standard did not stop some members of the middle class from suffering from private anxieties about the advent of idiocy in their family.<sup>169</sup>

Feeble-mindedness began to occupy a central role within the taint theory. Rather than being merely one manifestation of a general degenerate taint, this category began to assume a dominant role and came to act as a convenient explanation for all anti-social behaviour. Feeble-mindedness was said to be a 'significant' contributor to crime, prostitution, and alcoholism. The explanation followed a circular path. Only people of weak minds and wills would commit immoral acts, and the fact that someone committed an immoral act was used to determine mental weakness. As a solution, commentators began to look to means by which society could prevent the advent of degenerates; they increasingly looked to a system of segregated colonies.

The labour colonies suggested by William Booth as a way out of 'darkest' England were an English adaptation of experiments begun several decades earlier in Continental countries. The first 'open asylums' were erected on the continent, for purposes of servicing the afflicted, such as the Epileptic Colony at Gheel, Belgium,<sup>170</sup> a farm colony in Bavaria at Ursberg<sup>171</sup> and a colony for Cretins at Aldenberg, Switzerland.<sup>172</sup> Each rested upon

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<sup>169</sup> Apparently Walter Bagehot, whose ideas about the collective nature of the nation paved the way for later ideas about national efficiency, suffered psychological stress over the implications of the birth of his imbecilic half brother. Peter Gay, *The Bourgeois Experience. Vol II: The Tender Passion* (Oxford:1986), p.17.

<sup>170</sup> The Gheel Colony also included a large number of the insane. See Dr. Henry Stevens report entitled "Insane Colony at Gheel", *Asylum Journal of Mental Science*, [April 1858], p.224.

<sup>171</sup> *Eugenics Review*, vol i, [May 1909- Apr.1910] pp.283-7. The Ursberg colony apparently had a variety of inmates from the insane idiotic and epileptic to the aged, blind and cripple.

<sup>172</sup> Scheerenberger, *A History of Mental Retardation*, pp.70-3.

the idea that segregation was necessary for treatment. For example, attributing the high rate of Cretinism to the 'swampy environs' of the Swiss lowlands, Dr. Johann Jakob Guggenbuehl, erected a 'retreat' high in the Swiss Alps where he laid claim to a miraculous recovery rate.<sup>173</sup>

The open asylums revolved around a network of independent homes or cottages, each operating semi-independently with a master and mistress, cooking facilities, and gardens.<sup>174</sup> The homes together would make up the 'colony' on which there would be a commonly used farm, perhaps even a chapel. In contrast to the 'closed' asylums of the mid-Victorian period, the colonies stressed an open, rural surrounding, permanent residence with an emphasis on its custodial responsibilities and a stress on economic self-sufficiency.

Although the experiments of Guggenbuehl and others were well known to professionals in England, the colony system first rose to prominence in England as a possible solution to the problem of unemployment in the 1880s. Labour colonies, proponents argued, could train men to enter into different trades and produce work which would lower the cost of the facility and differentiate it from straight poor relief. It thus served the purpose of occupying the unemployed, giving them hope for future employment, and relieved the anxieties of the middle class by removing the unemployed from the city.<sup>175</sup> Charles Booth, the noted social investigator of poverty in London, was the first to suggest such use for his

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<sup>173</sup> Guggenbuehl was later revealed as a fraud and jailed by Swiss authorities. For a more detailed account of the rise and fall of J. J. Guggenbuehl, see Scheerenberger, *Ibid*.

<sup>174</sup> See Dr. E. Toller, "Suggestions for a Cottage System", *Journal of Mental Science*, [Oct. 1864], p.342; "Cottage Home for Pauper Children", *British Medical Journal*, [8 Oct., 1898], pp.1085-6.

<sup>175</sup> José Harris, *Unemployment and Politics: a study in English social policy, 1886-1914* (Oxford:1972), p.187-99.



social groups "A" and "B" which represented a range of individuals from the criminal to the handicapped.<sup>176</sup> While there seemed obvious advantages to having the unemployed and 'dangerous' mobs of people occupied and removed from the city, in a strange way Booth, like Guggenbuehl, saw the country labour colonies as regenerating both in a moral and biological sense from the debilitating influences of the city<sup>177</sup> and saw an efficiency in segregation and classification.

The labour colonies for the able-bodied did not attract widespread support: apart from the Salvation Army's colony at Hadleigh, there were only a handful of others started by Local Boards of Guardians.<sup>178</sup> However the colony system soon found favour with philanthropic organisations and the medical communities as a solution to the problem of treating, training and housing certain classes of the 'afflicted'. The first along these lines was the colony at Chalfont St. Peter, started in 1893 by the National Society for the Employment of Epileptics. Based on the Bethel Colony for Epileptics founded earlier in Westphalia,<sup>179</sup> the National Society for Epileptics stressed a 'moral' home environment recreated in a rural setting. It consisted of a series of smaller cottages, each with a master in charge, a kitchen, bedroom and play areas. Each residence was segregated by sex (at this time for moral rather than eugenic reasons) and some larger residences by age. Part of the day would be

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<sup>176</sup> Charles Booth (ed.) *Life and Labour of the People of London* (London:1889).

<sup>177</sup> Stedman Jones, pp.127-51; p.307.

<sup>178</sup> Harris, p.198-9.

<sup>179</sup> The Epileptic Colony was founded by the same order which had started the Labour Colony at Bielefeld. Edith Sellers, "The Story of a Colony for Epileptics", *Contemporary Review*, [1895], p.683.

spent teaching rudimentary academic skills, the rest spent working in the fields.<sup>180</sup> The National Society sought to occupy the inmates with gardening, dairy work and poultry farming.<sup>181</sup> The stress was on occupation and self-sufficiency in the open country air: "Everything 'institutional'", explained one reviewer, "is kept as much in the background as possible."<sup>182</sup>

In the first issue of the *Eugenics Review*, A. F. Tredgold argued that colonies would protect "the feeble-minded against a certain section of society and protect society against the feeble-minded."<sup>183</sup> Thus the efficacy of colonies rested upon two key arguments. First, the colonies would benefit the individual idiot by removing him or her from the competition of everyday life and protect them from the 'evils of the world'. Secondly, the mentally deficient, especially those only marginally idiotic (i.e., the feeble-minded) would, if left to themselves, perpetrate crime and beget more tainted individuals who would fall upon local rate payers either as feeble-minded or as other manifestations of degeneracy. With this rationale in mind, a similar philanthropic movement for feeble-minded colonies arose soon afterward, one that sought a more comprehensive network of colonies than the homes which had sprung up for feeble-minded girls.<sup>184</sup>

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<sup>180</sup> There is evidence that these colonies often 'lent' labourers to local farmers during harvesting periods at a low wage which offset part of the cost of the colony. It is as yet unclear how widespread this practice was.

<sup>181</sup> *British Medical Journal*, [Sept. 24, 1892], p.1457.

<sup>182</sup> *British Medical Journal*, [1 Dec., 1894], p.1502.

<sup>183</sup> A.F. Tredgold, "The Feeble-minded - A Social Danger", *Eugenics Review*, vol i, [1909-10], p.104.

<sup>184</sup> Anon. "Gift of a Home for Feeble-minded Girls", *British Medical Journal*, [5 Dec., 1896], p.1678.

Ironically the Charity Organisation Society, which had been so hostile to Booth's Salvation Army plan, warmed to the idea of labour colonies for degenerates. Charles Loch gave evidence before the Royal Commission on Labour (1893) on the utility of Dutch Labour Colonies<sup>185</sup> and argued in favour of colonies rather than institutions for epileptics to the Departmental Committee on Defective and Epileptic Children.<sup>186</sup> By 1900, the C.O.S. was supporting Dendy's call for a national system of farm colonies in order to ensure 'continuous and permanent supervision'.<sup>187</sup>

The British Medical Association took hold of the idea as one which could not only provide separate treatment but also save on the rates. Even by the mid-1890's, the hereditarian underpinnings were beginning to show:

[the colony system] seems to ask support, not only from the point of view of philanthropy, but from that of social economy, for the segregation of those afflicted with feeble-mindedness in special homes would tend to diminish the evil of the next generation, while they would themselves earn something towards their support, and be less of a burden on the community.<sup>188</sup>

It also supported them for purposes of control over potentially anti-social individuals:

The presence of an appreciable number of children feebly gifted mentally but not imbecile is now fully recognised both by the [medical] profession and by the public; such cases ...tend to swell the ranks of the failures, the unemployed, and the delinquents.<sup>189</sup>

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<sup>185</sup> Mowat, *Charity Organisation*, p.137.

<sup>186</sup> Evidence, CDEC, PP, 1899, vol. xxvi, p.210.

<sup>187</sup> Mowat, *Charity Organisation*, p.202.

<sup>188</sup> *British Medical Journal*, [1 Dec., 1894], p.1264.; see also *Ibid.*, [15 Aug., 1896], p.429.

<sup>189</sup> *British Medical Journal*, [24 Oct., 1896], p.1246.

Support for these proto-eugenic measures rose dramatically as statistics were produced which purported to detail a dramatic increase in both insanity and idiocy. Asylum and poor law records recorded 36,762 pauper lunatics in 1859. By 1899 the number had risen to 105,083 and to 149,628 in 1905.<sup>190</sup> The Lunacy Commissioners warned that improved techniques of investigators might well have increased the figures, and Henry Maudsley, the most prominent specialist in insanity in the late-Victorian period admitted that it was difficult to determine the real amount of the increase.<sup>191</sup> Their cautions, however, went unheeded and most members of the professional community readily accepted as a fact that insanity and idiocy was on the increase far in excess of the general population rate, leading them to search for ways to stem this tide of 'degeneration'.

The anxiety over the increasing numbers of 'degenerates' was exacerbated by the growing differential nature of the declining birth rate. The 1890's stood at the midway point of a general birth rate decline from a high of 36.3 births per thousand in 1876 to new level of 14-15 per thousand in the 1930s.<sup>192</sup> The causes of this decline in middle class birth rate have been well discussed in other works. In many cases the increasing knowledge and practice of birth control techniques gave women greater control over their reproductive lives. While this social phenomenon would eventually cut across class lines, the limiting of families between 1870 and 1914 remained almost exclusively a social phenomenon of the middle

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<sup>190</sup> Annual Report of the Commissioners in Lunacy, 1900, vol. xxvii, p.68; *Report*, RCFM, PP, 1908, vol. xxxix, Appendix.

<sup>191</sup> Maudsley, after taking into account the increase in recording techniques, the lessening desire of parents to hide their idiot children still assumed an increase of 1,000 new cases of insanity and idiocy every year. Maudsley, *Physiology and Pathology of the Mind* (London:1868), p.201.

<sup>192</sup> Soloway, *Birth Control and the Population Question in England, 1870-1930* (North Carolina: 1982), p.121.

class.<sup>193</sup> The professional middle class, which was also acutely conscious of the efficacy of statistics as a barometer for the state of the nation, saw these statistics as a sure sign of national decline.

Social inquiries like those conducted by Charles Booth and by Seebohm Rowntree noted an inverse correlation between family size and income.<sup>194</sup> Rowntree confirmed Booth's earlier estimates of poverty and maintained that a residuum of 10% of the city population existed, and that unfit parents "often grow up weak and diseased and so tend to perpetuate the race of the unfit".<sup>195</sup> The belief that 'unfit' were outbreeding the 'fit' began to creep into other professional discourse:

For one of the gloomiest in the whole case is the extraordinary rapidity with which this degraded population multiplies, the birth rate is far higher in these low slums than in the respectable neighbourhoods...were it not for the vast infantile mortality, the numbers of the destitute classes would double or treble every twenty-five years.<sup>196</sup>

Louisa Twining, herself a forty year long observer of the workhouse infirmaries, agreed that the numbers of mental defectives was on the rise and would likely "continue without check or hindrance [until the government] grant[s] further powers of detention."<sup>197</sup>

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<sup>193</sup> See Angus McLaren, *Birth Control in nineteenth century England*, (New York:1978); Richard A. Soloway, *Ibid.*

<sup>194</sup> Charles Booth, *Ibid.*; Seebohm Rowntree, *Poverty: A Study of Town Life* (2nd ed.) (London:1902).

<sup>195</sup> Rowntree, p.46.

<sup>196</sup> Samuel Smith, "The Industrial Training of Children", *Contemporary Review*, vol. xlvii [1885], p.110.

<sup>197</sup> Twining, *Workhouses*, p.218.

Commentators like Arnold White since his publication of *Problems of a Great City*, had been arguing that the 'unfit' were outbreeding the 'fit'.<sup>198</sup> Yet after he repeated his arguments in *Empire and Efficiency* (1901), which coincided with Rowntree's study, the commentary found a much wider audience. White cited Ettie Sayer of the London County Council and Dr. Alfred Tredgold of the Medico-Psychological Association who argued that degenerate families produced an average of 7.3 and 7.6 children respectively for every 5.0 for a normal family.<sup>199</sup> Similar arguments appeared in the Fabian Tracts. Sidney Webb wrote a lengthy article deploring the process of 'adverse selection' which, he argued, was threatening the nation's welfare. He cited Karl Pearson's affirmation that 50% of the next generation was being produced by 25% of the population and exclaimed that "this can hardly result in anything but national deterioration".<sup>200</sup> White's influence was sufficient to establish a government Committee on Physical Deterioration in 1903.<sup>201</sup>

These publications were accompanied by more questionable American studies of degenerate families. J.L. Dugdale published an account of the Juke family from whom New York state had incurred "over a million and a quarter dollars of loss in 75 years, caused by a single family of 1,200 strong."<sup>202</sup> Herbert Henry Goddard followed with a similar study of

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<sup>198</sup> Arnold White, *Problems of a Great City* (London:1886); White, *Efficiency and Empire* (London:1901).

<sup>199</sup> White, *Empire*, p.109.

<sup>200</sup> Fabian Society, "The Decline in the Birth Rate", Fabian Tract # 131, in *Fabian Tracts*, (London:1969), p.37. Webb incorporated his main arguments into a letter to the *Times*, see "Physical Degeneracy or Race Suicide", *Times*, [16 Oct., 1906].

<sup>201</sup> Inter-Departmental Committee on Physical Deterioration, PP, 1904, vol. xxxii, 1. Interestingly enough the Committee concluded that although the health of the poorer sections of the cities required immediate attention, there was an insufficiency of data to confirm any 'national deterioration' let alone national race degeneration.

<sup>202</sup> J.L. Dugdale, *The Jukes: A Study in Crime, Pauperism, Disease and Heredity* (New York:1877), p.70. Dugdale's account of the Juke family was used to buttress many developing ideas about hereditary criminality and feeble-mindedness including Francis Galton's *Inquiry into Human Faculty and its Development* [1883] (London:1911), p.44.

the Kallikak family purported to detail the creation of several generations of crime, pauperism and physical and mental degeneration.<sup>203</sup> Similar stories of huge degenerate families appeared also in the English medical press. "A case is on record in which an imbecile man and woman had over 200 descendants, all of whom were defective in some way or another".<sup>204</sup>

Goddard and Dugdale's works provided elaborate 'scientific' tree-diagrams detailing the transmission and manifestation of a degenerate taint in successive offspring. Each child was represented by a circle or box signifying his or her taint, be it a recognisable medical handicap or a loose social stigma.<sup>205</sup> The tree-diagrams fulfilled the last stage of the general process of reifying immorality. By placing social problems like alcoholism, prostitution, criminality and pauperism on equal footing with more recognised diseases (epilepsy, consumption), socially unacceptable behaviour was legitimised as a medical category, and the tree diagrams implicitly accepted the direct hereditary transmission of social failures.

The more popular fears of increase in idiocy and a rising residuum and the new stress on national efficiency led to one obvious route - control and prevention. If a great many social evils were created by allowing unfit parents to propagate their taint, and if society as a whole had now assumed responsibility through medicine to sustain 'degenerate' members of society, then many argued that it was not unreasonable to also suggest that in

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<sup>203</sup> Herbert H. Goddard, *The Kallikak Family*, 2nd ed. (London:1912).

<sup>204</sup> Anon. "Imbecile and Epileptic Children in the Workhouses", *British Medical Journal*, [6 April, 1895], p.772.

<sup>205</sup> These elaborate tree-diagrams first appear in the medical journals in the late-1890s. See W. Lloyd Andriezen, "The Pathogenesis of Epileptic Idiocy and Epileptic Imbecility", *British Medical Journal*, [1 May 1897], p.1081.

some cases individuals be prevented from propagating. In this frame of mind, Mary Dendy's Lancashire and Cheshire Society for the Permanent Care of the Feeble-minded started the first full fledged colony for the feeble-minded at Sandlebridge in 1902 on land donated by the David Lewis trustees who had founded the David Lewis Colony for Epileptics.<sup>206</sup>

Like its predecessor at Chalfont, Sandlebridge stressed self-sufficiency and 'protection from society'. It comprised six residential houses each with a master and mistress and facilities for cooking and cleaning. The 170 boys and men and 116 girls and women were divided among six homes and supported by an infirmary and a day school. Men worked in the fields and gardens; the girls and women performed laundry-work and cooking duties.<sup>207</sup> Even though individuals were free to come and go after the age of sixteen, it seems clear that residents remained for long periods and some for the remainder of their lives. By 1911, sixty-eight of the two hundred inmates at Sandlebridge were over sixteen.<sup>208</sup> The apparent success of Sandlebridge aided Dendy in persuading others on the National Association to adopt a national system of colonies as a plank of its political lobbying and the representatives to the Royal Commission in their official written brief to the Commissioners proposed a national system under the jurisdiction of the local county councils.<sup>209</sup> These experimental feeble-minded colonies were supported strongly by the medical community and specifically by members of the Medico-Psychological Association for reasons of race betterment. "It is only by some scheme of industrial colonies", wrote one editorialist,

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<sup>206</sup> Kathleen Jones, p.187.

<sup>207</sup> Dendy in Lepage, *Feeble-mindedness*, p.294-5.

<sup>208</sup> Cruikshank, p.27.

<sup>209</sup> *Evidence*, RCFM, p.323, p.329.



where the [mental] defectives will be usefully employed in segregation from the ordinary population, that the maximum of benefit to the community seems likely to be attained, inasmuch as in this way the risks of handing down the infirmity to the next generation will be minimised.<sup>210</sup>

Thus advocates between the mid 1890s and the Royal Commission on the Feeble-minded in 1905 shifted the rationalisation for colonies from one based on humanitarian grounds to one founded increasingly on social control, prevention, and national efficiency. The Central Poor Law Conference advocated industrial colonies for the feeble-minded and vagrants suggesting that although the initial cost might be large, "[the colonies] would ultimately tend to economy inasmuch as they would...lessen the reproduction of the class for whom they were provided."<sup>211</sup>

Ellen Pinsent, who had co-founded the National Association with Dendy, was by 1904 stressing this emphasis on pragmatic intervention:

mental deficiency exists to an alarming extent, and is increasing...We have to deal today with a popular sentiment which would not for one moment allow either the lethal chamber, or sufficient neglect to produce extinction, and to say what either of these alternatives ought to be adopted is merely to postpone any immediate and possible action. It would be more profitable to consider what can be done...<sup>212</sup>

Likewise Mary Dendy warned in the *Lancet* of the 'danger' of allowing the present increase of mental defectives to continue, and with the support of Charles Loch urged the National

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<sup>210</sup> *British Medical Journal*, [1902], p.1283.

<sup>211</sup> *British Medical Journal*, [1901], p.16.

<sup>212</sup> Ellen Pinsent, Birmingham Ladies Literary and Debating Society, Annual Report, 1903-1904, as quoted in R.A. Lowe's "Eugenicists, doctors and the quest for national efficiency: an educational crusade", *History of Education*, vol viii, [Dec. 1979], p.295.

Association for the Feeble-minded to adopt the policy (and name) of her Lancashire and Cheshire Society for the **Permanent** Care of the Feeble-minded.<sup>213</sup>

The medical profession, which had been the first to circulate ideas about the transmission of hereditary idiocy, began to press for a Royal Commission on the subject, and supplemented its arguments for segregation for medical treatment and training, with arguments for the segregation for medical prevention:

It is much regretted that Government has not yet found the time to consider, as has been influentially requested, the whole question of how best to deal with idiots, imbeciles, and feeble-minded persons on a comprehensive basis, having regard not only to the needs of the present, but to the prospects of prevention in the future.<sup>214</sup>

Prevention not only had medical implications but also important economic considerations. Handicapped populations cost local rate payers and national treasury large amounts of money both in special schooling and in care in asylums or Poor Law workhouses. Consequently, the medical journals began to stress the importance of social utility: "it is only by some scheme of industrial colonies, where defectives will be usefully employed in segregation from the ordinary population, that the maximum of benefit to the community seems likely to be attained."<sup>215</sup> The *Lancet* endorsed the activities of Dendy's more strident Lancashire and Cheshire Society for the Permanent Care of the Feeble-minded system of permanent colonies in order that it "may transform children apparently only a burden to

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<sup>213</sup> Kathleen Jones, p.187.

<sup>214</sup> *British Medical Journal*, [1903], p.1481.

<sup>215</sup> *British Medical Journal*, [1902], p.1283.

themselves and the social scheme into more or less useful citizens."<sup>216</sup> At a 1901 conference sponsored by the National Association, W.H. Dickinson, a member of the London County Council and soon to be President of the National Association for Care of the Feeble-minded, "pointed out that the future of the nation depended largely upon the stamping out of feeble-mindedness, which there was reason to believe prevailed to a considerable degree amongst the pauper population."<sup>217</sup>

By the time of the Royal Commission on Care and Control of the Feeble-minded in late 1904, the anxiety over the 'problem' of the feeble-minded had reached such heights that one may well ask whether the term feeble-minded had taken on an additional meaning. Within medical discussions 'feeble-minded' continued to confer the meaning of Ireland's early classification of the least deficient class of those afflicted with idiocy.<sup>218</sup> While some continued to refer to the feeble-minded in this medical or educational sense, the idea of the feeble-minded as a broader social category began to be employed, a grouping which seemed to reconstruct the 'social failures' of Edwardian society as suffering from feeble-mindedness. The degree to which this process had occurred is revealed by an article written by Mary Dendy which appeared in the *Lancet* in 1902:

Hooligans, or corner-lads, criminals, paupers, and drunkards  
- are all these frequently only because they are feeble-minded.  
The lying-in wards of our workhouses, idiot asylums, deaf and  
dumb asylums, special classes, reformatories, and industrial  
schools, to say nothing of the homes which are springing up  
everywhere as the result of private charity - all are fed by

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<sup>216</sup> *Lancet*, [24 May, 1902], p.1477.

<sup>217</sup> *British Medical Journal*, [1901], p.16.

<sup>218</sup> William W. Ireland, *British Medical Journal*, vol. xviii, [1872], p.335.

our feeble-minded population or their offspring ...<sup>219</sup>

Dendy's connection between social failure and mental weakness was also reflected in the official goals of the National Association which in 1905 suffixed their list with the following purpose:

[to] offer such provision for the feeble-minded as may improve them mentally, morally and physically; to fortify and lift them up in order that, so far as possible, they may be rendered self-supporting, and saved from becoming vagrant, pauper, and criminal.<sup>220</sup>

The colonies represented a professional response to the perceived failure of the Poor Law workhouse system. The colonies stressed relief be given only in return for work given back to the state. It centred like the workhouse system on the idea of segregation, but unlike its predecessor, the function of permanent self-supporting residences differed significantly from the earlier poor law practice which professed a temporary and reforming purpose. The proposed national system of colonies was intended to be highly centralised and regulated, contrasting to the highly de-centralised workhouse system. The purpose of work within the colony differed from that of its workhouse predecessor. The workhouse stressed the moral rejuvenation of working; the colonies while incorporating the general ameliorating influence of work also stressed the efficiency of the colonies and the importance of making the most use of 'human material', thus anticipating later ideas of New Liberal economists rather than any connection to old laissez-faire economics.<sup>221</sup>

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<sup>219</sup> Mary Dendy, "The Feeble-minded and Crime", *Lancet*, [24 May, 1902], p.1461.

<sup>220</sup> Appendix to Miss Pauline Townsend's Testimony, *Evidence*, RCFM, p.321.

<sup>221</sup> Harris, p.366. See also John Hobson, *The Problem of the Unemployed* (London:1896), pp.131-148. This new fascination with the colony system also had an indirect effect on the older Idiot Asylums which had been built along the lines of the closed Lunatic Asylums of the 1840s and 1850s. Here administrators reported that they were buying large tracts land adjacent to the asylums to employ the able-bodied idiots and imbeciles making them more 'colony-like', thereby lessening the cost on the local rate-payers. See Report on Royal Albert Asylum, *British Medical Journal*, [30 Jan., 1897], p.282.

The colony system was supported less for immediate gains than as sacrifices needed to make the future of the 'race' more efficient by weeding out undesirable 'stock'. It therefore fulfilled the middle class desire for social progress and preparation for the future. The colonies were, in the minds of their proponents, a balance between the welfare state's humanitarian desire help those less fortunate and a newer and broader collectivist urge for national efficiency which would weed out the undesirable and less efficient members of society.

#### Chapter Four: The Eugenics Education Society and the 'Danger' of the Feeble-minded

"Britain has received a warning to reorganise"<sup>222</sup> exclaimed Arnold White in 1901. The warning to which he referred was the humiliation of the British regular forces in the Boer War and the revelations of physical unfitness of recruits which appeared in the popular presses in 1901 and 1902. Together they seemed to confirm to many anxious observers earlier claims of physical unfitness, if not degeneration, among parts of the working classes in general and the industrial 'residuum' in particular. To further this anxiety, these recruiting revelations came on the heels of Seebohm Rowntree's study of York which seemed to validate Charles Booth's earlier correlation between physical and mental weakness and urban poverty.<sup>223</sup> The combination of these events touched off a debate in the academic press over the health of the British nation.

Within the scientific field of genetics, the 'rediscovery' of Mendel's research into the relationship between heredity and human characteristics re-opened the debate over the relative roles of nature and environment in the determination of human characteristics sparking its own debate between the school of biologists who supported Mendel's theory and those like Francis Galton and Karl Pearson who supported a biometrician hypothesis of hereditary transmission.<sup>224</sup> Francis Galton was not the first to suggest a strong relationship

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<sup>222</sup> Arnold White, *Efficiency and Empire*, Preface.

<sup>223</sup> Seebohm Rowntree, *Poverty: A Study of Town Life*; Charles Booth, *Life and Labour of the People of London*.

<sup>224</sup> Donald MacKenzie, "Sociobiologies in competition: the biometrician-mendelian debate" in Webster (ed.) *Biology*, pp.243-288.

between heredity and ability, but his stature brought the subject to a much wider audience. Galton was concerned with the 'innate moral and intellectual faculties of individuals' which he attributed both to heredity and degeneration.<sup>225</sup> While Galton believed in the transmission of a wide variety of characteristics or 'abilities', he became most well known for his statistical approach to the subject of mental and physical ability. Although he concentrated at first on those possessing 'genius' he increasingly became interested and concerned about the other end of the spectrum. Galton believed that the process of natural selection as outlined by his step-cousin, Charles Darwin, was threatened by the intervention of the state. Galton, like many of his professional contemporaries, was concerned about social progress and believed that by the scientific study of degenerates, trained experts could intervene to arrest what he saw as the progressive degeneration of the aggregate national health.

The emphasis on heredity began to filter into professional discourse, and particularly into the ideas circulating around the national efficiency movement. The 'quest' for national efficiency was a loosely defined political campaign encompassing broad ideas about social organisation and social utility but it was equally concerned with eliminating wasteful, as well as strengthening useful, aspects of society.<sup>226</sup> This concern was not exclusive to social reformers, for the business community began to recognise the benefits of a healthy and educated workforce<sup>227</sup> and the drain of costly asylums on local resources.

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<sup>225</sup> Francis Galton, *Inquiry into Human Faculty and its Development*, p.2.

<sup>226</sup> Geoffrey Russell Searle, *The Quest for National Efficiency*, p.54.

<sup>227</sup> Searle, *Ibid*, p.61-2.

Naturally this new emphasis on efficiency had particular importance for those who were deemed to be socially of little use. While social reformers worked to enact legislation to further the aggregate health of the nation, they simultaneously began to support periodic legislation which would utilize the 'limited' potential of degenerates. However loosely conceived, a movement to enact legislation controlling degenerate elements of population arose which was based upon many of the same efficiency premises as those which supported the feeding of school children and other 'positive' social measures. In the year that an Inter-Departmental Committee on Physical Deterioration had been struck, physical deterioration had become a serious political item, and the 'feeble-minded' became viewed as a subject population ripe for such legislation.

In 1903 a motion was passed at the Annual meeting of the National Association for the Feeble-minded supported by Herbert Henry Asquith and Sir J. Crichton Browne, the Head of the Lunacy Commission. This motion in favour of a national investigation on the problem of the feeble-minded<sup>228</sup> was not taken lightly. It joined an earlier resolution passed by the Council of the C.O.S. which stated that "it was desirable that a Royal Commission be appointed to consider the condition and needs of the mentally defective (excluding lunatics) and the epileptic."<sup>229</sup> By 1904, these organisations were joined by the British Medical Association, the Poor Law Guardians, and the Prison authorities.<sup>230</sup> Balfour obliged in the fall of 1904 and appointed a Royal Commission on the subject.

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<sup>228</sup> *Evidence*, RCFM, 1908, vol xxxv, p.327.

<sup>229</sup> Helen Bosanquet, *Social Work in London*, p.202.

<sup>230</sup> *British Medical Journal*, [1901], p.16.



The Royal Commission represented a practical merging of the several professional fields responsible for the mentally deficient: medicine, education, the Poor Law, the Lunacy Commission, and philanthropy. Charles Loch, Helen (Dendy) Bosanquet, Ellen Pinsent, W.H. Dickinson and J. Crichton Browne comprised five out of the seven commissioners. The National Association of the Feeble-minded was well represented with two Commissioners (Pinsent and Loch) and an official representation by Pauline Townsend and Miss Jeffries. Also testifying before the Commission was F. May Dickinson, the Secretary of the National Association, R. Langdon Down,<sup>231</sup> a consulting physician to the Association, and Mary Dendy, representing the views of both the National Association and her own Lancashire and Cheshire Society.<sup>232</sup> The Commissioners took their investigation seriously: "Of the gravity of the present state of things there is no doubt."<sup>233</sup>

The Royal Commission's report and testimony together span several hundred pages, and while there is little need to survey all eight volumes, several underlying premises should be underscored. First the Royal Commission endorsed the view held by the majority of its medical witnesses that feeble-mindedness was primarily passed down by heredity.<sup>234</sup> Of thirty-five medical witnesses, twenty-five attached 'supreme importance' to heredity; the remainder attached varying degrees of relative importance to heredity. From this it further recommended that permanent care (and implicitly segregation of the sexes) would reduce the

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<sup>231</sup> Not to be confused with his father, John Langdon Down, the first medical superintendent of Earlswood.

<sup>232</sup> *Evidence*, RCFM, pp.90-93, p.321.

<sup>233</sup> *Report*, RCFM, p.3.

<sup>234</sup> *Report*, RCFM, p.365.

numbers of mentally deficient in the future.<sup>235</sup> It embraced the idea that feeble-mindedness was a significant contributing factor in crime, prostitution and the illegitimacy rate. Citing Sir Clifford Allbutt, it concluded that "Feeble-minded persons are prolific; the [taint] can only be bred out".<sup>236</sup>

By means of recommendations, the Royal Commission concerned itself with the problems of unity and continuity of control.<sup>237</sup> Most of the witnesses complained that the largest contributor to the problem of the feeble-minded was a lack of central administration: the responsibility of the state was spread between the education authorities (for special classes), the Lunacy Commission (for maintenance of the Lunatic and Idiot Asylums), the Poor Law (for imbeciles and idiots in the workhouses and workhouse infirmaries) and the Prison authorities (which claimed that 10% of its inmates were mentally deficient).<sup>238</sup> While almost all agreed on the need for a single authority, few could agree on who would constitute that authority. The Board of Education adamantly refused to relinquish jurisdiction over feeble-minded children.<sup>239</sup> The Lunacy Commission was reluctant to cede authority

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<sup>235</sup> "[most informed observers] state that in a very large proportion these persons are the offspring of mentally defective parents or are members of families in which other nearly related members are mentally defective" *Report*, RCFM, p.362-73.

<sup>236</sup> *Evidence*, RCFM, p.365.

<sup>237</sup> Ellen Pinsent, "Care and Control of the Feeble-minded", *Nineteenth Century*, vol. lxviii, [July-Dec. 1910], p.44.

<sup>238</sup> Dr. J. P. Sturrock, "The Mentally Defective Criminal", *Journal of Mental Science*, [April 1913], p.314. A comprehensive study of the numbers of mentally deficient in the prisons lies beyond the scope of this thesis. However a pair of ex-Conscientious Objectors in 1922 while writing on prison reform devoted a chapter to the problem of the mentally deficient in prison. Stephen Hobhouse and A. Fenner Brockway, *Prisons Today: a report of the Prison Reform Committee* (London:1922).

<sup>239</sup> Sutherland, *Ability*, p.42.

over idiots who were in the Asylums for fear that a new Mental Deficiency authority might eventually replace the much maligned Lunacy Commission.<sup>240</sup>

Continuity posed greater difficulties. Here the control aspect of the title of the Commission itself became very important. The majority of witnesses professed the need for permanent detention for humanitarian, economic and preventive reasons. Most looked to Dendy's Sandlebridge colony as the prototype for a future national system supported by the state, but the possible resistance of the family loomed large. The Departmental Committee on Defective and Epileptic Children in 1899 had first raised the problem of segregation of 'defective' children against the wishes of their parents, and educational experts realised that although permanent segregation was desirable, it would run into many practical difficulties.<sup>241</sup>

Detention also hinged on an accurate measurement of intelligence which, in the days before the Simon Binet test became widely used, was simply not available in Edwardian England. The definition which separated feeble-mindedness from imbecility was highly subjective:

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<sup>240</sup> *Ibid.*

<sup>241</sup> As Miss Fry testified, "...parents often object to their feeble-minded children being certified as idiots, and medical men often hesitate to certify them as such", *Evidence*, RCFM, p.30.

persons who may be capable of earning a living under favourable circumstances, but incapable from mental defect existing from birth or from an early age of; (a) competing on equal terms with their normal fellows; (b) of managing themselves and their offspring with ordinary prudence.<sup>242</sup>

The 'test' of being able to earn a living on one's own, which formed a significant part of the definition of feeble-mindedness, was ridiculous when applied to children under the age of sixteen.

The conspiratorial analysis which lay at the heart of this drive for 'permanent care' permeated a great deal of testimony. Rather than neglected members of society unable (as by the definition) to compete on equal terms with their counterparts, witnesses alluded to a degenerate army lurking in the East End slums, plotting to overthrow civilised society. The particular danger of the feeble-minded was that they could pass themselves off as 'normal'. As Dendy admitted in her Testimony, "Everybody knows a drivelling idiot when he sees him".<sup>243</sup> One Inspector argued that the partial training of the feeble-minded was possibly worse than no training at all.

I am strongly against feeble-minded children and adults being sent to Homes and Asylums for a few years only, and then being sent out into the world. Better have no 'special training' and the child and adult be left unmistakeably 'feeble-minded' than educated sufficiently to pass off as...normal-minded, when not so.<sup>244</sup>

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<sup>242</sup> *Report.*, RCFM, p.17.

<sup>243</sup> *Ibid.*, p.190.

<sup>244</sup> *Ibid.*, p.146.

The hereditarian emphasis led naturally to a preoccupation with feeble-minded girls and women. This is particularly striking considering the relatively small amount of attention afforded to the subject during testimony to the Departmental Committee in 1899. One could ascribe comments for control over the reproductive rights of women to the crank views of 'reactionary' male physicians if it were not for the fact that these concerns were most vehemently expressed by the female witnesses many of whom had founded homes for this population in order to provide 'moral guidance'.<sup>245</sup>

In addition to airing moral outrage over the illegitimacy rate, the Royal Commission had substantial influence. It received considerable attention in non-specialised journals,<sup>246</sup> thus bringing the subject to a much wider audience than otherwise might have been the case. It brought together two hundred and forty-eight individuals from across Britain on the subject of mental deficiency. It conducted the first national investigation into the numbers of the mentally deficient and the causes of mental deficiency, and also recommended what it considered practical lines for future legislation. Above all, historians will note that the Royal Commission gave very strong support for the primacy of heredity in the determination of a wide range of human characteristics. While there was disagreement as to the actual degree of importance, the majority of expert medical witnesses agreed that heredity played by far the most important role in creating mental deficiency, and thus the only way to stop the increase in idiocy (and insanity) was to control propagation.

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<sup>245</sup> *Ibid.*, p.110.

<sup>246</sup> Ellen Pinsent, "Care and Control of the Feeble-minded," *Nineteenth Century*, vol. xviii, [1910]; G.H. Savage, "The Control of the Feeble-minded: Report of the Royal Commission on the Care and Control of the Feeble-minded," *Quarterly Review*, vol. ccx [Jan. 1909], pp.171-192; Evelyn Phillips, "The Treatment of Feeble-minded Children," *Nineteenth Century*, vol. lxi [May 1912], pp.930-44.

One historian has interpreted the report of the Royal Commission as a "sane and sensible course between the Scylla of 'liberty of the subject' agitation, and the Charybdis of eugenic theory".<sup>247</sup> However there is little evidence of such a middle ground. The Royal Commission endorsed all three basic eugenic assumptions of feeble-mindedness: It endorsed heredity. It attributed a significant factor in pauperism, prostitution, crime and illegitimacy to feebleness of mind. Thirdly, from these two hypotheses, it concluded that control of propagation and of movement would reduce the numbers of feeble-minded in the future and prevent the perpetration of crimes in the present. While the Commissioners professed to argue that aid to the mental deficient should derive from their sickness and not from their falling upon the state because of crime or pauperism,<sup>248</sup> they nonetheless recommended an unprecedented degree of state control.

The Eugenics Education Society was formed soon after the recommendations of the Royal Commission in the winter of 1907-08 largely because of the efforts of Mrs. A.C. Gotto of the Moral Reform League and a large number of members of the Royal Commission. While the Society was not founded with the purpose of solving the problem of the feeble-minded, the composition of its membership, its timing, and stress on practical reform made a preoccupation with the feeble-minded almost inevitable.

Spearheading the Eugenics Education Society's drive for legislation on the 'problem' of the feeble-minded was Dr. Alfred Tredgold, who had received publicity for his role as medical expert assigned to the Royal Commission and for his much acclaimed textbook

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<sup>247</sup> Kathleen Jones, *A History of the Mental Health Services*, p.191.

<sup>248</sup> *Report*, RCFM, pp.1-7.

*Mental Deficiency*, published in 1908, which was so popular it was reprinted in eleven editions.<sup>249</sup> Joining Tredgold were other prominent members of the Royal Commission, among them: Anne Kirby, Dr. J.W. Slaughter, Dr. Caleb Saleeby, Dr. R. Langdon Down, Dr. James Parr, Havelock Ellis, and Sir James Crichton-Browne, the head of the Lunacy Commission.

The purpose of the Society was "[to] study agencies...under social control that may improve or impair the racial qualities of future generations either physically or mentally",<sup>250</sup> a goal taken from Galton's original definition of eugenics in 1883.<sup>251</sup> Adherents to the eugenic creed believed in the primacy of hereditary transmission of diseases and the determination of behaviour, and the use of state as vehicle for manipulating the 'stock' of race by controlled breeding.

The ideological framework of eugenics was deeply immersed in the lexicon of Darwinism. Society, eugenisists argued, may roughly be divided into the 'fit' and the 'unfit' whose changing proportions determined the degree of social advancement or regression. The history of mankind saw progress occurring where 'natural selection' weeded out the unfit and left the fit. The period since the mid-nineteenth century, marked by the advent of the welfare society, upset this natural equilibrium, protecting the 'unfit' by the intervention of a wide variety of social and medical services. Coupled with the declining birth rate this actually meant that Edwardian society, in the minds of eugenists, was in a dangerous transition of

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<sup>249</sup> Alfred F. Tredgold. *Mental Deficiency: Amnesia* (London:1908).

<sup>250</sup> *Eugenics Review*, vol. i, [1909-10], p.1.

<sup>251</sup> Francis Galton, *Inquiry into Human Faculty and its Development* (London:1883).

temporary decline before the 'fit' awoke to the responsibility of no longer fighting the emergence of the social service state, but rather co-opting it and using it to rationalise the process of selection. Thus the Edwardian eugenicists perceived themselves as having a moral obligation to instill the 'eugenic ethic' lest the moment be lost, and the unfit overtake the fit. This transition was variously described as the move from 'natural selection' through 'reverse selection' to 'rational selection' or from what Saleeby often described as the evolution from natural selection to race hygiene.<sup>252</sup>

Eugenic thought thus rested on hereditarianism<sup>253</sup> as the key to unlocking the social laws which governed the progress of society. Secondly it embraced the idea of a corporate nation whose fitness was measurable and related to its ability to compete economically and militarily with other countries. While there were some attempts to create an International Eugenics movement,<sup>254</sup> in reality the movement carried with it strong nationalist overtones, and implicit in the discourse on eugenic solutions to social problems was the anxiety of allowing other countries to organise more efficiently. Within this mindset, the 'degenerates' played a prominent role. On the one hand they were manifestations of 'unfit' beings who, in a 'natural' order would not have survived. But in a more sinister vein, by their propagation they were planting the seeds of future social disorder, disease, and racial decline. In a society increasingly worried about its capacity to compete in economic and military terms with other countries, such degenerates threatened the progress of the nation.

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<sup>252</sup> Caleb W. Saleeby, *Womanhood and Race Culture* (London:1912); Tredgold referred to the transition period between these two epochs as the attempt to balance medical science with social science, the later implicitly carrying with it eugenic principles.

<sup>253</sup> It should be emphasized that even the most extreme eugenicists did not argue to the exclusion of environmental factors. Rather, they suggested that spending vast amounts of money on 'tainted' fruit was a misapplication of national resources.

<sup>254</sup> Two international eugenics conferences were held in 1909 and 1912, but were discontinued because of the war.



The Eugenic creed had an appeal for many middle class professionals.<sup>255</sup> Implicitly it centred on the importance of educated professionals administering disinterested science and furthering the progress of society. It correlated fitness with the middle class ethic of social achievement, education and morality. It also had several particular strands which appealed to specific professional organisations. For the medico-psychologists it endorsed the principle of the primacy of heredity in determining mental ability. For the educational reformers it stressed the importance of education for the fit. For political organisations like the Fabian Society it offered pieces of social policy which could be considered congruent with positive social measures.

Somewhat more subtly, the eugenic creed also provided a new and scientific rationale for conservative critics who previously had rested their arguments on the moral failings of the individual. Thus many like Charles Loch and Helen Bosanquet found it easy to drop the Victorian garb of moral failure and don the modern 'scientific' cloak of biological failure. Both rationales absolved the middle class of moral responsibility for the advent of social distress and justified intrusion into the working class not only on class grounds but in the interests of the nation. Furthermore it implied that since science was exclusive to scientists, it was responsibility of middle class to extend control over degenerates for their own protection.

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<sup>255</sup> For two clear and opposing views on the role of the middle class in the Eugenics movement see Donald Mackenzie's "Karl Pearson and the Professional Middle Classes" *Annals of Science*, vol. xxvi, [1979], pp.125-43; and MacKenzie *Statistics*, and G.R. Searle's "Eugenics and Class" in Charles Webster (ed.) *Biology, Medicine and Society*, pp.217-242. See also comments in my conclusion, pp. 97-99.

As stated earlier, the feeble-minded became the central preoccupation for the new Eugenics Education Society,<sup>256</sup> for, before the *Eugenics Review* started publishing, the Society issued a pamphlet entitled *The Problem of the Feeble-minded* to supplement the report of the Royal Commission.<sup>257</sup> There were several reasons why the feeble-minded became so important to the new Society. It quickly became clear that there was no easy solution to the problem of defining 'fit'ness or of encouraging the reversal of the declining middle class birth rate.<sup>258</sup> On the other hand many found it considerably easier to define 'unfit'ness. The feeble-minded moreover had recently had a Royal Commission whose recommendations were very close to eugenic principles. Thus the political lobbying on a practical subject of 'national interest' presented a perfect means by which the Society could claim legitimacy in the eyes of the public, something that was very important to many of its members.<sup>259</sup>

The first issues of the *Eugenics Review* contained articles on the 'Danger' of the Feeble-minded.<sup>260</sup> Tredgold began his first of many articles by stressing the national threat:

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<sup>256</sup> Kelves, *In the Name of Eugenics*, p.98.

<sup>257</sup> R. Lowe, "Eugenicists, doctors and the quest for national efficiency: an educational crusade", *History of Education*, vol. viii, [Dec. 1979], p.297.

<sup>258</sup> The birth rate of the upper class was also declining but few eugenicists saw this as a negative social phenomenon.

<sup>259</sup> G.R. Searle, *Eugenics and Politics in Britain*, p.87.

<sup>260</sup> Alfred F. Tredgold, "The Feeble-minded: A Social Danger", *Eugenics Review*, vol i, [June 1909- Jan 1910], pp.98-102; Anne Kirby, "The Feeble-minded and Voluntary Effort", *Ibid*, p.94; "Eugenic Principle and the Treatment of the Feeble-minded, *Ibid*., vol. ii [April 1910- Jan. 1911]; Herbert Henry Goddard "Heredity of Feeble-mindedness", *Ibid*., vol. iii, [1912], p.46-60.

In the past, more nations have been sunk to a position of utter insignificance or have been entirely blotted out of existence as the result of the moral, intellectual, and physical degeneracy of their citizens, than of wars, famine or any other conditions.<sup>261</sup>

The idea of the feeble-minded being the breeders of social misfits and degenerates was advocated fervently by Dr. Tredgold. Echoing the earlier words of Mary Dendy, he wrote "The feeble-minded and their relatives form a very considerable proportion, if not of the whole, of our social failures - the degenerates of the nation."<sup>262</sup> Ellis concurred by stating that "in large measure they form the reservoir from which the predatory classes are recruited."<sup>263</sup>

Restricting the propagation of the feeble-minded obviously could take several forms: segregation, sterilization or state execution.<sup>264</sup> The last was never seriously considered on a philosophical basis and the Society was very sensitive to accusations to the contrary. "The whole theory of eugenics rest[s] on its distinction between the right to live (which we questioned in no case) and the right to become a parent." <sup>265</sup>

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<sup>261</sup> Tredgold, *Ibid.*, p.100.

<sup>262</sup> Tredgold, *Mental Deficiency*, p.100.

<sup>263</sup> Havelock Ellis, *The Task of Social Hygiene* (London:1912), p.38.

<sup>264</sup> The Regulation of Marriages was also raised periodically, Tredgold, *Mental Deficiency*, p.457. This idea had been circulated for a long time by Arnold White as a solution to the rise of the urban degenerates (*Problems*, Chapter V) but few Eugenists were naive enough to assume that the control of marriage would result in the control of propagation.

<sup>265</sup> C. W. Saleeby, *Sociological Review*, vol iii, [1912], p.281. Ideas about 'state euthanasia' appeared periodically (See Carenth Read, *Natural and Social Morals*, (London:1909), p.159, and in medical journals, see H. Campbell, "Eugenics From the Physician's Standpoint", *British Medical Journal*, [2 Aug., 1913], p.226. who suggested that degenerates not be saved if terminally ill. Neither formed the basis of any proposal sanctioned by the Eugenic Education Society. Important members of the movement like Saleeby often repeated the "sanctity of human life from its beginning, which is the moment of conception", *Ibid.* When George Bernard Shaw made a crack about the efficacy of the lethal chamber, the E.E.S. was not amused. Searle, *Eugenics and Politics*, p.14.

Sterilization was discussed periodically.<sup>266</sup> Havelock Ellis, for one, believed that the advancement of scientific knowledge allowed for the control of procreation either voluntarily or involuntarily among degenerate parents, thus separating sexual activity from procreation. The former Ellis saw as being a right, the latter, a privilege restricted to the fit.<sup>267</sup> Many were horrified at the thought that sterilisation could allow the feeble-minded to exercise their sexual peculiarities. "It is futile," wrote Tredgold, "to think that these persons can be turned loose upon society merely because they have been sterilized".<sup>268</sup> This concern was especially pronounced in the commentary of the women reformers. Most of these individuals concerned about social danger of the feeble-minded were resigned to let the subject of sterilization lie unresolved due partially to the repeatedly cited 'public temperament'.<sup>269</sup>

Although in North America the sterilization of mental defectives occurred in many areas, in Britain it was practically negligible. Most eugenists seemed averse to the idea, which leads one to speculate whether it was the 'threat to the race' or the immorality of illegitimate birth and 'promiscuous' behaviour which really offended these middle class Edwardians. In fact the subject of sterilization is very misleading - permanent segregation which also implied permanent segregation of the sexes, functioned as forced chastity, an option more acceptable than involuntary sterilization. The segregation of the sexes was

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<sup>266</sup> For arguments on the subject of sterilization, see Havelock Ellis, "The Sterilization of the Unfit", *Eugenics Review*, vol. i, [June 1909 - Jan 1910], p.205.; Tredgold's remarks on 'asexualisation' in *Mental Deficiency*, p.457 and in *Quarterly Review*, [July 1912], pp.43-67; C. Paget Lepage, *Feeble-mindedness in Children of School Age*, (London:1912), pp.236-8.

<sup>267</sup> Kelves, p.87-88.

<sup>268</sup> Tredgold, *Mental Deficiency*, p.458.

<sup>269</sup> See Conclusion. As an exception to this rule, Saleeby had no problem with freedom contingent upon sterilization, see Saleeby, *Ibid.*, p.282.

hardly a novel idea of Edwardian eugenis: segregation was a cardinal principle of Victorian asylum policy.<sup>270</sup>

The campaign for legislation along the lines recommended by the Royal Commission saw the merging of five main groups: the National Association for the Feeble-minded (and the Lancashire and Cheshire Society), the Eugenics Education Society, the Charity Organisation Society, the Fabian Society and the Medico-Psychological Association (with the support of the larger British Medical Association). Members of the National Association seemed to drift inexorably to the EES, increasingly employing eugenic arguments in journals, speaking before the EES sponsored meetings, and writing in the *Eugenics Review*. In 1912 Pinsent and Kirby both became members of Council. The blending went both ways as prominent members of the EES and sympathetic members of the MPA joined the Council of the National Association or became provincial members. Sir William Chance, a long time eugenics advocate and member of the Council of the EES, became Chairman of the Executive Committee of the National Association, and was joined by other EES council members such as Miss Evelyn Fox, Leonard Guthrie and H.F. Pooley. Provincial members included Sir Clifford Allbutt and Drs. Fletcher Beach and Tredgold.<sup>271</sup>

In 1910 the National Association and the Eugenics Education Society officially joined forces using doubled-headed stationary and a joint administrative network to coordinate the campaign. The year 1910 proved auspicious in that the upcoming election gave the new

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<sup>270</sup> Parry-Jones, *Trade in Lunacy*, p.246.

<sup>271</sup> *Journal of Mental Science*, [1912], p.16.

organisation an opportunity to lobby potential candidates on their position on the matter.<sup>272</sup> Among them Anne Kirby, Mary Dendy and Ellen Pinsent showed the same determination which had earned them the admiration of local school board officials. In the years after the Royal Commission these commentators became less circumspect in their tactics and increasingly employed eugenic arguments. Kirby, who had joined the Society at its inception, wrote of: "the process of selective degeneration carried out on a somewhat extensive scale by State and private philanthropy".<sup>273</sup> By 1910 both Mary Dendy and Ellen Pinsent had joined her as members of the EES<sup>274</sup> a particularly surprising fact considering the anti-feminist views of a large number of the male E.E.S. members.<sup>275</sup>

The active participation of members of the National Association influenced the Charity Organisation Society, originally the first philanthropic agency to take up the problem of the feeble-minded in a comprehensive manner, to campaign simultaneously with the National Association and the E.E.S. In 1911 the C.O.S. congratulated itself on the effect of its lobbying: "The Council feel it to be a matter of considerable satisfaction that the Society has been able to assist materially in promoting this very necessary reform."<sup>276</sup>

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<sup>272</sup> Kathleen Jones, p.197.

<sup>273</sup> *Eugenics Review*, vol. i [1909-10], p.94.

<sup>274</sup> Kathleen Jones, p.196.

<sup>275</sup> See also discussion in Conclusion.

<sup>276</sup> *Charity Organisation Report* as quoted in Bosanquet, *Social Work in London*, p.203.

The Fabian Socialists shared with the E.E.S. a strong following in the professional middle class.<sup>277</sup> The Fabians, who supported a loose structure of trained experts, had always shown a strong interest in strengthening the 'national physique', a tendency which made them flirt with eugenics.<sup>278</sup> H.G. Wells, who had attended several eugenic lectures of Galton, advocated the 'sterilization of failures'.<sup>279</sup> George Bernard Shaw, who lectured part time for the Eugenics Education Society,<sup>280</sup> was reported in the *Daily Express* as stating that "A great many people would have to be put out of existence simply because it wastes other people's time to look after them".<sup>281</sup> Beatrice Webb, who was ambivalent about labour colonies for the unemployed able-bodied,<sup>282</sup> was less so about permanent colonies for the feeble-minded. Sidney Webb, while attacking the eugenics platform on positive social reform, agreed that local employment authorities should keep track of feeble-minded vagrants with a view to segregation:

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<sup>277</sup> The degree of support has been subject to historical debate. See Donald MacKenzie, "Eugenics in Britain", *Social Studies of Science*, vol. vi, [1976], pp. 449-532, and G.R. Searle "Eugenics and Class", in Charles Webster (ed.) *Biology*, pp.229-34.

<sup>278</sup> A.M. McBriar, *Fabian Socialism and English Politics, 1884-1918* (Cambridge:1966), p.62; See also Kelves, p.86-87; Searle, *Quest*, pp.61-3.

<sup>279</sup> Sociological Society, *Sociological Papers*, pp. 58-60, as quoted in Bernard Semmel, "Karl Pearson: Socialist and Darwinist", *British Journal of Sociology*, vol. ix., [1958], pp.122.

<sup>280</sup> Diane Paul, "Eugenics and the Left", *Journal of the History of Ideas*, vol. xlv, [1984], p.568.

<sup>281</sup> As quoted in Searle, *Eugenics and Politics*, p.92. Kelves stresses that Shaw's periodic flirtation with eugenics tended to stress positive rather than negative eugenics. Kelves, *Ibid*, p.86.

<sup>282</sup> Harris, *Unemployment and Politics*, p.198; pp.257-60.

Unless we have a Local Health Authority responsible for seeing that every sick person is under medical treatment, and an Unemployment Authority, through its registers, cognisant of all men and women unable to get employment - and thus in a position to report all apparently feeble-minded cases for further inquiry with a view to segregation - the feeble-minded mother of illegitimate children, the feeble-minded vagrant wandering along the roads, and the feeble-minded parasite of urban soup kitchens and free shelters, will, to our undoing as a nation, continue to perpetuate their deficiency.<sup>283</sup>

Sidney Webb, somewhat ironically, had come around to a view put forward by the Charity Organisation Society two decades earlier - that segregation of the feeble-minded would reduce the level of pauperism and prevent destitution.<sup>284</sup>

The Fabian Society officially sponsored debate on the 'problem' of the feeble-minded. In its publication *Crusade Against Destitution* it included two articles on the subject by Dr. Caleb Saleeby and Ms Anne Kirby.<sup>285</sup> During the E.E.S.'s campaign for legislation after 1909, the two Societies held joint meetings on the subject<sup>286</sup> passing resolutions urging immediate legislation along the lines suggested by the Royal Commission. A similar measure was supported by Charles Loch and the supporters of the Majority Report of the Royal Commission on the Poor Law, in their recommendations.<sup>287</sup> Further, the Poor Law

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<sup>283</sup> Sidney Webb, *Prevention of Destitution* (London:1911), p.59.

<sup>284</sup> *Ibid.*, pp.53-4. See also Sidney Webb's similar reasoning in Brian Simon's chapter entitled "Sidney Webb and National Efficiency in Education", in Simon, *Education and the Labour Movement*, pp.203-7.

<sup>285</sup> Caleb Saleeby, "The Feeble-minded: A Problem in Eugenics" in Fabian Society, *Crusade Against Destitution*, vol ii (London:1911), pp.27-29; A.H.P. Kirby, "What has been and is being done for the feeble-minded", *Ibid.*, pp.30-32.

<sup>286</sup> *Eugenics Review*, vol ii [April 1910 - Jan. 1911], p.251; *Ibid.*, p.330.

<sup>287</sup> Mowat, p. 157.



Minority Report, written to a great extent by Beatrice Webb, endorsed the need for permanent colonies for the feeble-minded.<sup>288</sup>

New Liberal economists like John Hobson and Leonard Hobhouse echoed similar sentiments as to the importance of maximizing the efficiency of the workforce. While L. T. Hobhouse spoke generally about maximizing the utility of social wastage,<sup>289</sup> J.A. Hobson was far more specific:

when it is once plainly recognised that the production of defective children is the worst crime which anyone can commit against society, the necessary penalties will be attached, and will [prove] as effective as other coercive [measures]<sup>290</sup>

Within the political ranks vocal support was given from the highest level. Arthur Balfour who, as Prime Minister and leader of the Conservative Party, had created the Royal Commission in the first place, was described by Beatrice Webb as being "honestly concerned about the alleged degeneracy of the race."<sup>291</sup> However Balfour's own writings on the subject are often contradictory and sceptical of the more radical agenda of the movement. Still he did assent to becoming Honorary Vice-President of the Eugenics Education Society in 1912,<sup>292</sup> and delivered the inaugural address at the International Eugenics Congress in

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<sup>288</sup> Harris, pp.258-60. See also "Sidney Webb & National Efficiency in Brian Simon *Education and the Labour Movement*", 1870-1920 (London:1965), p.203-7.

<sup>289</sup> L.T. Hobhouse, *Social Evolution and Political Theory* (New York:1911), pp.43-46.; see also "Race Progress and Race Degeneracy", *Sociological Review*, vol ii, p.140.

<sup>290</sup> J.A. Hobson, *The Social Problem* (London:1901), p.153.

<sup>291</sup> Donald Read, *Edwardian England 1901-15: Society and Politics* (London:1972), p.94.

<sup>292</sup> *Eugenics Review*, vol. iii, [1912] Index.

London,<sup>293</sup> facts which imply that he at least supported the broader beliefs underlying the Society.

Winston Churchill, who held the position of Home Secretary in 1910 to 1911, was less equivocal. W.S. Blunt's claim that "Winston is also a strong eugenis<sup>294</sup>" seems to be partially borne out by the favourable replies of Churchill to the lobbying of the E.E.S. and by a 1910 speech recorded on the subject of the feeble-minded:

I feel that there is no aspect more important than the prevention of the multiplication and perpetuation of this great evil...There are these 120,000 or 130,00 feeble-minded persons at large in our midst...<sup>295</sup>

The figure comes directly from a paper presented to Churchill by Alfred Tredgold which also appeared in the first volume of the *Eugenics Review*, an article which Churchill circulated among his Cabinet Colleagues.<sup>296</sup>

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<sup>293</sup> J.A. Lindsay, "The Case for and Against Eugenics", *Nineteenth Century*, [Sept. 1912], p.546.

<sup>294</sup> W.S. Blunt's *Diaries*, Oct. 1912, as quoted in Searle, *Eugenics and Politics*, p.108.

<sup>295</sup> Winston Churchill, "Care of the Mentally Retarded, July 15 1910", in *Speeches of Winston Churchill*, vol ii, p.1588.; see also the *Times*, [15 July 1910].

<sup>296</sup> Sutherland, *Ability*, p.41. See also A.F. Tredgold, "The Feeble-minded - A Social Danger", *Eugenics Review*, vol. i, [1909-1910], pp.98-102.

If by any arrangement, as the knowledge of the world and the security of society increases, we are able to segregate these people under proper conditions, so that their curse dies with them and is not transmitted to future generations, we shall have taken upon our shoulders in our lifetime a work which those who come after us will owe us a debt of gratitude.<sup>297</sup>

There were however some individuals who did not get caught up in the crusade against the feeble-minded. One such individual was Dr. George Savage, the President of the Medico-Psychological Association. While he recognised the "far reaching influence" of heredity and the great number of things which must be transmitted from parent to child, he balanced it with this cautionary note:

Several of you attended the Congress of Eugenics, and there was no doubt about the earnestness with which the subject was considered....some of the congress would include almost everything which was eccentric, and genius and folly, therefore, would both be isolated by them....We have to look upon the defectives as being human and being very near most of us; there is no specific difference, only variation.<sup>298</sup>

The pressure for legislation, however, was becoming so great that Parliament was forced to deal with the situation. Under the guidance of the Eugenics Education Society, the National Association for Promoting the Welfare of the Feeble-minded co-ordinated the support of guardians, prison authorities and educational authorities and inspired over 800 petitions for legislation.<sup>299</sup> It received support, interestingly enough, from the Unionist

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<sup>297</sup> Churchill, *Speeches*, p.1588.

<sup>298</sup> Dr. George Savage, "Presidential Address to the Psychiatric Section of the Royal Society of Medicine", *Journal of Mental Science*, [Jan. 1912], p.16.

<sup>299</sup> Searle, *Eugenics and Politics*, pp.109-110.

Reform Association.<sup>300</sup> The National Association urged other interested parties to pressure for legislation, writing to organisations for support in its campaign, in response to which the Council of the M.P.A. passed the following resolution: "That this Association is strongly impressed with the great danger to the State which results from the absence of any power to control the feeble-minded, and heartily supports the principle of granting powers of care and control."<sup>301</sup> In order to prompt the government into introducing a bill, the National Association and the EES co-sponsored a bill, the Feeble-minded Persons (Control) Bill put forward with the help of Gershom Stewart, a sympathetic Unionist M.P.<sup>302</sup> However the Medico-Psychological Association needed little prodding in getting involved in the drafting of legislation. Immediately it struck a sub-committee of its Standing Parliamentary Committee to monitor the passage of the Bill including Dr. Theo Hyslop, and Drs. Shuttleworth, Langdon Down, and the newest consulting physician to the National Association, Dr. Harry Corner.<sup>303</sup>

While it is difficult to gage the impact of the campaign on 'popular opinion', an interesting statement by Saleeby in 1912 may reveal a great deal about the shift in attitudes:

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<sup>300</sup> *Journal of Mental Science*, [Jan. 1913], p.147; *Ibid.*, [Oct. 1913], p.146.

<sup>301</sup> *Journal of Mental Science*, [Jan. 1912], p.181.

<sup>302</sup> *British Medical Journal*, [25 May, 1912], p.1198.

<sup>303</sup> *Journal of Mental Science*, [Oct 1912], p.715.

Only five years ago, if one said to a popular audience that defective-minded people should be segregated, so that the future should be protected from the consequences of their parenthood, the doctrine was received with a stony silence. If you say it now, they applaud before your sentence is finished.<sup>304</sup>

Mary Dendy also perceived a significant shift in support of 'permanent care' colonies "The idea at first met with much opposition; no other Society was willing to entertain it. Happily it is now universally regarded as the proper method of dealing with the weak in intellect."<sup>305</sup>

The first Mental Deficiency Bill included a central authority entitled, revealingly, the Board of Control responsible for the "supervision, protection, and control of persons who are mentally defective".<sup>306</sup> It discriminated between mental defectives and lunatics: the latter were not subject to its provisions. The Board of Control was a mixed body. The *Journal of Mental Science* referred to it as a 'mongrel' Board of Control, a mixture of physicians, lawyers and others.<sup>307</sup> The local authority would be the county council which would carry out the provisions of the Act through local committees. Among many duties they would be responsible for ascertaining the numbers of defectives over the age of sixteen (the education authorities would still be responsible for mentally defective children) and ensuring that the adult defective was under proper supervision. In the absence of this 'supervision', suitable accommodation in an appropriate institution should be provided. Interestingly, clause fifteen of the first Bill would have made it a misdemeanour for any person to intermarry or attempt

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<sup>304</sup> Caleb Saleeby, "The Method of Eugenics", *Sociological Review*, vol iii, p.298.

<sup>305</sup> Kathleen Jones, p.187.

<sup>306</sup> Mental Deficiency Bill, PP, 1912-13, vol. iii, p.993.

<sup>307</sup> *Journal of Mental Science*, [Oct. 1912], p.715.

to intermarry with a person known to be defective within the meaning of the Act.<sup>308</sup> The Feeble-Minded Persons Control Bill received a quick response from the B.M.A. and the M.P.A. Both were quick to attack the proposal for a new Board of Control without specific reference as to its contents. The B.M.A. agreed with the M.P.A. that the new central authority, if its duties were transferred from the Lunacy Commission, should be dominated by the old Lunacy Commissioners who would have dual authority over both the lunatics and the idiots.<sup>309</sup>

The first Mental Deficiency Bill was dropped, due less to lack of support, than to a House partly pre-occupied with a backlog of other issues in the wake of the constitutional crisis and the Marconi scandal. The dropping of the bill was greeted by a storm of letters protesting the government's not following up on a bipartisan piece of legislation "the importance of which cannot be exaggerated".<sup>310</sup> Under pressure from interested citizens who had become taken up by the 'urgency' of the issue, the Home Office guaranteed the reintroduction of the Bill.

Although it is difficult to gauge the depth of Parliamentary opinion on the question of the feeble-minded there does seem to have been a great deal of opposition to the Mental Deficiency Bill as introduced on June 10, 1913, by the Home Secretary, Reginald McKenna with the words:

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<sup>308</sup> *British Medical Journal*, [25 May, 1912], p.1199.

<sup>309</sup> *Ibid*; *Journal of Mental Science*, [July 1912], p.530.

<sup>310</sup> *Times* [4 Nov. 1912]. See also [6 Nov. 1912], [8 Nov. 1912], [8 Nov. 1912], [12 Nov. 1912], [14 Nov. 1912].

"The question of mental deficiency is essentially a national question and not a local question...It is in the interest of the nation as a whole that the race should be maintained and not become degenerate."<sup>311</sup>

The most notable aspect of the Parliamentary Debates on the detention of the feeble-minded was lack of opposition on principle.<sup>312</sup> Only two Liberal backbenchers actively opposed the bill, Josiah Wedgwood and Sir F. Banbury, and apart from an angry exchange of letters between Dendy and Wedgwood in the *Times*,<sup>313</sup> most letters urged the passing of legislation on the matter.<sup>314</sup> The Mental Deficiency Bill passed through the House on 19 July, 1913.

The Mental Deficiency Act of 1913 followed many of the guidelines outlined by the Royal Commission. It created a Board of Control, analogous to the old Lunacy Commission, responsible for 'supervision, protection and control' of all mental defectives. The Board was entrusted with supervising and regulating the local authorities which were the local county councils. Within this local responsibility each council was responsible for striking 'mental defective committees' responsible for carrying out recommendations of Board of Control and co-ordinating the investigation and classification of children suspected of mental

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<sup>311</sup> *House of Commons Debates* [10 June 1912], p.641.

<sup>312</sup> Jayne Woodhouse, "Eugenics and the Feeble-minded: The Parliamentary Debates", *History of Education*, vol. xi, [June 1982], p.136. In a similar vein, Brown challenges Searle's suggestion that politicians shied away from Eugenics movement by countering that while few politicians joined the Society, no one denounced it. Brown, p.305.

<sup>313</sup> Josiah Wedgwood, *House of Commons Debates*, [1 June, 1913]; "A Reply to Wedgwood", *Times* [3 June 1913]; "Wedgwood's Reply", *Times* [12 June, 1913].

<sup>314</sup> "An Appeal to the Government", *Times* [10 June 1913]; "A Plea for Scientific Research", *Times*, [12 June 12, 1913].

deficiency.<sup>315</sup> In part the Act made the 1899 Elementary Education Act compulsory by obliging all local education authorities to create special classes for mental defectives.<sup>316</sup>

Each interest group succeeded in achieving something valuable to its organisation. The Parliamentary Committee of the MPA congratulated itself for persuading the government to accept almost all of its recommendations, though it still grumbled about the number of non-medical commissioners. The new central authority, the Board of Control, was, in most respects, the old Lunacy Commission under a new guise.<sup>317</sup> The National Association had succeeded in achieving legislation, though not a national system of colonies. Mary Dendy became one of the new Commissioners of the Board of Control. The Charity Organisation Society took the opportunity to bash critics who claimed that the Society was only concerned with restricting the rise of the state.<sup>318</sup>

The *Eugenics Review* declared the law a qualified victory, claiming that it was "perhaps the only piece of English social law extant, in which the influence of heredity has been treated as a practical factor in determining its provisions."<sup>319</sup> Soon afterwards, two other Bills, the Inebriates Bill and the Elementary Education (Defective and Epileptic Children's) Education Bill of 1914, showed that the Act was not an isolated incident, but rather indicative of a new restrictionist direction in 'social reform' based largely on the ideas promoted by the hereditarians.

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<sup>315</sup> Herbert Davey, *The Law Relating to the Mentally Defective: the Mental Deficiency Act, 1913* [1914] (New York:1981), p.7-22.

<sup>316</sup> Sutherland, *Ability*, p.25.

<sup>317</sup> Kathleen Jones, p.207.

<sup>318</sup> Bosanquet, *Social Work in London*, p.190.

<sup>319</sup> *Eugenics Review*, vol. vi, [April 1914- Jan 1915], p.52.



## Conclusion

How lasting was the eugenics-led campaign against the proliferation of the unfit? Some historians have concluded that the eugenics movement lost momentum after the outbreak of the first World War. Jay Winter, who supports this interpretation, argues that, since Britain won the war, individuals were less likely to believe in national degeneration than they were after the Boer War. Further, he contends that the levelling which occurred during the war heightened knowledge of the working class, making middle class individuals less likely to believe in the existence of a rapidly multiplying feeble-minded class plotting to overthrow civilised society.<sup>320</sup>

At first glance, this argument seems valid. In Germany, the loss in the Great War heightened anxieties about 'alien' elements inside the country and facilitated the adoption of eugenics by National Socialism under whose government the most extreme extensions of eugenic thought were carried out. By contrast, in Britain, it seems logical to assume that intellectuals could not support the idea of race degeneration after they had won the war against their greatest imperial rival. However several facts challenge this interpretation. In the United States and Canada, two countries which were also on the winning side of World War I, negative eugenics reached its apex in the inter-war years.<sup>321</sup> In England the

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<sup>320</sup> Jay M. Winter, *The Great War and the British People* (London:1986), p.19.

<sup>321</sup> Mark Haller, *Eugenics: Hereditarian Attitudes in American Thought*, (New Brunswick:1963), pp.144-59; McLaren, *Our Own Master Race*, p.10

membership of the Eugenics Education Society peaked again in 1932<sup>322</sup> holding steady through the depression years until the late thirties when eugenic thought became closely associated with Nazi practices. Finally the idea that a professional's fear over a rising residuum would decrease after the war is contradicted by the 1927 Departmental Committee on Defectives report which anxiously reported that the numbers of the mental defectives had doubled since the 1908 Royal Commission.<sup>323</sup> There is, however, a middle ground. While the Eugenics Education Society maintained a stable membership count into the 1930s, the movement had lost its momentum, failing to influence the academic or popular press the way it had in the years between 1908 and 1914.

Each professional organisation had its particular reasons for joining the eugenic-led campaign on the feeble-minded while remaining ambivalent or even outright hostile to other aspects of the eugenics platform. Despite Searle's assertion that there was 'consistent hostility'<sup>324</sup> from the British Medical Association to the Eugenics Education Society, this research found little evidence of any opposition on the part of the medical community to eugenic-led legislation on the feeble-minded. While the B.M.A. might have disagreed with certain eugenic arguments which seemed to blame modern medicine for the decline in Britain's pre-eminence, it nonetheless simultaneously supported colonies for the purpose of lessening the numbers of feeble-minded. Similarly, the Fabian Society, which remained firmly in support of positive measures of national efficiency (which many in the E.E.S. would have

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<sup>322</sup> Ian Brown, "Who Were the Eugenists?" *History of Education*, vol. xvii, [1988], p.300.

<sup>323</sup> R. Lowe, "Eugenicists, doctors and national efficiency", p.302.

<sup>324</sup> Searle, "Eugenics and Class", in Webster (ed.), p.226.

seen as merely increasing the 'unfit') also found it quite easy to endorse the colony system and segregation of the feeble-minded.<sup>325</sup>

The eugenics-led crusade for 'permanent care' of the feeble-minded might appear as a strange hybrid between the progressive impulse of the national efficiency movement and a conservative reaction to the apparent immorality of working class culture. Its unifying belief, however, was the belief in hereditarianism, which provided proposals which could appeal at once to New Liberal economists interested in economic efficiency, social darwinists worried about racial decline, conservative social critics worried about sexual immorality, and middle class intellectuals concerned about the organisation of society.

Drawing from Mark Haller's work on the eugenics movement in America, Searle suggests that conservative social commentators were looking for an argument to discount what they saw as the failure of environmental reforms carried out in the last two decades of the nineteenth century.<sup>326</sup> This seems to be borne out by the active role played by the C.O.S. For many of these individuals, the eugenics creed offered a logical scheme which absolved the middle class of moral responsibility for the continuance of social evils. Instead of a mid-Victorian rationale of moral failure, they substituted a scientific rationale which mixed moral failure with biological deficiencies.<sup>327</sup> As Loch wrote earlier - "It is desirable that it should be distinctly understood that it is the chief aim of the Society to deal with the

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<sup>325</sup> For a revealing passage on the ambivalence of Fabian socialists to eugenics, see Sidney Webb's chapter on Eugenics in the *Prevention of Destitution*, pp.45-59.

<sup>326</sup> Searle, *Eugenics and Politics*, p.121-5.

<sup>327</sup> The C.O.S. was joined by such advocates as the National Council of Public Morals. Hynes, p.285-7. It should also be noted that many members of the by then defunct Moral Reform League had been instrumental in organising the Eugenics movement in the pre-war years.

causes of pauperism rather than its effects."<sup>328</sup> In a 1893 pamphlet sponsored by the C.O.S. the Society urged initiatives for colonies: "If this were not done, the charity of prevention would be ignored."<sup>329</sup> In a strange way the obsession many in the C.O.S. had with the organisation of poverty and the fight against the anarchy of 'indiscriminate welfare'<sup>330</sup> made them susceptible to arguments about the 'rational' control of fertility. The intellectual jump from an attack on the indiscriminate nature of universal social welfare to an attack on the indiscriminate nature of population supply was not that great. The former was moral, the latter biological. The new hereditarian claims also were more acceptable to members than ideas about the failure of their system. The hereditarian explanation still blamed the individual for his failings, albeit in an ambiguous manner.<sup>331</sup>

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With all the publicity which the 'problem of the feeble-minded' seemed to generate, the historian must be very careful not to overestimate the effect of the campaign on the actual social conditions of the mentally retarded themselves. Regardless of the proposals for statutory detention of all mental defectives, the rate at which they were institutionalized did not increase between 1890 and 1914. The national system of permanent detention in feeble-minded colonies simply never materialised. Furthermore, the vast majority of the mentally

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<sup>328</sup> Fifth Annual Report of the Charity Organisation Society, pp.5-6, as quoted in Mowat, p.26.

<sup>329</sup> Charity Organisation Society, *The Epileptic and Crippled Child and Adult*, p.8.

<sup>330</sup> Owen, *English Philanthropy*, p.243.

<sup>331</sup> MacKenzie, *Statistics*, p.34.

retarded remained outside the authority of the Poor Law guardians, prison officials, or Lunacy Commissioners. About this population we know, as yet, practically nothing.

The general process which culminated in the Mental Deficiency Act, proved to be extremely difficult to judge within a moral framework. It brought the problem of mental handicap to the attention of a great number of authorities and initiated a slow period of moving those with a mental handicap out of the prison and lunatic asylum systems.<sup>332</sup> Similarly, although some eugenists proposed schemes of voluntary and involuntary sterilization for the betterment of the race, none was actually carried out. Possible proponents frequently noted that the English public would not support a widespread movement to sterilize the unfit.<sup>333</sup> Most members reconciled themselves to permanent care in which segregation of the sexes rendered sterilization redundant, and guarded against the 'immoral' and anti-social acts.

Why then was sterilisation of the feeble-minded actively carried out in the United States and Canada at the same time? No one has satisfactorily answered this question. It may well have to do with a broad and hard to define 'political culture' which separates Britain from North America and the Continent. It may also have to do with the specific powers of state and provincial governments, for, of the sterilizations done in the United States, two states (California and Indiana) account for almost all.<sup>334</sup> Similarly, in Canada,

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<sup>332</sup> Brockway and Hobhouse, *English Prisons Today*, pp.285-286.

<sup>333</sup> In the 1930's, the Eugenics Society's president persuaded the Society to support a campaign for voluntary sterilization of mental defectives. The campaign proved unsuccessful. Searle, "Eugenics and Class", p.226., Searle, "Eugenics & Politics in Britain in the 1930s", p. 159-169.

<sup>334</sup> For similar statistics on the mentally ill in the United States, see Gerald N. Grob, "Mental Retardation and Public Policy in America: A Research Agenda", *History of Education Quarterly*, vol. xxvi, [1986], p.313.

sterilization was carried out primarily, though not exclusively, in the provinces of Alberta and British Columbia.<sup>335</sup>

The more important question concerns why educated members of the professional middle class were susceptible to such reductionist, and often tautological, explanations as to the origins of certain social problems. Certainly isolating those social misfits or 'degenerates' was fuelled by their anxieties about social disorder. In this respect the aspect of social control is an import part of the line of negative eugenics, although only part. But beneath this, the attempt to enforce social and cultural norms through a medium of colonies and cottage homes again appealed to these people, especially to the female reformers, eager to stem what they saw as the rise of sexual impropriety.

All things considered, the eugenicists were surprisingly restrained. Here it is very important to discriminate between Edwardian eugenicists and their counterparts in Nazi Germany. In England, although the feeble-minded represented to some a 'national danger', the Eugenics Education Society and supporters never supported involuntary sterilization or more radical measures. Rather they warmly embraced the colony system as a 'humane' solution which balanced in the minds of its advocates, the responsibility of the modern state to care for its neglected members and the responsibility of professionals to use science to further social progress. To quote Dr. Rhodes of Manchester, "permanent sequestration was the most efficient and humane manner of reducing the number of the feeble-minded."<sup>336</sup> A contemporary manual on training feeble-minded children, written by a supporter of

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<sup>335</sup> McLaren, *Master Race*, p.90-100.

<sup>336</sup> *British Medical Journal*, [1 Oct., 1898], p.996.

permanent colonies displayed a surprisingly balanced view of the possible abuses of sterilization:

The operation for asexualisation is in itself not necessarily dangerous, but opinion against any such surgical measures is very strong and rightly so, one difficulty being that such an operation, if once adopted, might be unjustifiably extended or abused.<sup>337</sup>

The strength of a hereditarian definition of mental deficiency was that it was based, however loosely, on medical ideas still held to be reasonable. Heredity, after all, is still widely assumed to play a significant role in the determination of 'intelligence'. Medico-psychologists were not incorrect in their belief that certain types of mental retardation do transmit a degree of hereditary predisposition in offspring.<sup>338</sup>

Thus interpreting this eugenics-led movement in Britain as either an expression of 'social control' or the agenda of radical physicians bent on race purification is misleading. Certainly there were strong elements of social-control within the platform. The Royal Commission reflected this cross purpose in its title, the "care and control" of the feeble-minded. The advocates of a permanent system of state colonies, it must be remembered, were long time activists in the field of disabilities, having established special educational schools for the blind and deaf, thereby supporting Beatrice Webb's comment that: "Many of

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<sup>337</sup> Lepage, *Feeble-mindedness in Children of School Age*, p.237.

<sup>338</sup> For instance, there is a 50% chance of Down Syndrome in the offspring of parents who have Down Syndrome.

the keenest supporters of Eugenics, are, at the same time, the most zealous workers for [other] social reform".<sup>339</sup>

It is doubtful that the feeble-minded 'blessed' the arrival of the women reformers in the manner described by Hollis in her otherwise insightful book on the women in local government.<sup>340</sup> Women saw the fields of local school boards, philanthropic agencies, and eventually the eugenics movement, as quasi-professional associations which gave them political power and social self-confidence in the years before national female suffrage. Thus women like Dendy, Pinsent, Pease, and Townsend, were bent on making inroads into professional life. They were torn in several directions by often conflicting sentiments. On the one hand they entered into the field of educational reform because they felt like many of their male counterparts, that charity (and especially work with children) was the 'natural' domain of women; on the other hand they were equally concerned with placing their new professions on scientific bases, a predisposition which led them to support eugenics-inspired diatribes against the proliferation of the unfit. Thus it is strange that neither of the two main studies on the infiltration of women into middle class professions discusses the participation of these very same women in the eugenics movement.<sup>341</sup> According to Brown's statistics, 48.7 per cent of the E.E.S. membership in 1914 were women many who were actively

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<sup>339</sup> Sidney Webb, *The Prevention of Destitution* (London:1911), p.45.

<sup>340</sup> Hollis, *Ladies Elect*, p.276.

<sup>341</sup> Hollis, *Ibid.*; Prochaska, *Women and Philanthropy in nineteenth century England* (Oxford:1880); McLaren, *Master Race*, pp.19-22; Kelves, p.88-89.



seeking non-traditional careers,<sup>342</sup> a fact which undermines the prevailing attitude that the eugenics movement was wholly anti-feminist.

These women were members of the middle class and their acceptance of a colony system may be seen in part at least as a psychological reaction to what they saw as an assault against middle class morality. Often it seemed as if the colony system was a surrogate middle class home in which the middle class women could 'protect' the residents against the abuses and immorality of working class culture. Dendy and other women showed careless disregard for parents of the children who objected or might object to permanent detention, calling them "scarcely better than the children themselves".<sup>343</sup> In contrast to institutions, the colony system, with its cottage homes and middle class routine, represented an almost mystical recreation of the ideal middle class home for those perceived to have suffered the indignity of not growing up in one. Once the children were put in the cottage homes, "they behaved themselves quite like little gentlemen and ladies".<sup>344</sup>

This historical interpretation does not imply that it was the professions who were solely behind the move for institutionalisation, an idea which may easily be seen in earlier works on mental illness by Thomas Szasz and Michel Foucault.<sup>345</sup> While this thesis concentrates on the professions themselves, it does not seek to argue that there was not

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<sup>342</sup> Ian Brown, p.306.

<sup>343</sup> *Evidence*, RCFM, p.41.

<sup>344</sup> *Ibid.*, p.139.

<sup>345</sup> Michel Foucault, *Madness and Civilization: a history of madness in the age of reason*; Thomas Szasz, *The Myth of Mental Illness*, (London:1973).

ongoing pressure from families to institutionalise dependent members. In 1861, three years after founding of the National Asylum at Earlswood, the board of governors of the institution bowed to "the wishes of a large number of subscribers determined...to admit some of the cases for life"<sup>346</sup> and worked subsequently to increase its number of industrial occupations for long term inmates.<sup>347</sup> On the other side there is reason to believe from testimony that working class parents with mildly defective children needed their son's or daughter's wages to supplement the family income and were consequently hostile to the idea of institutionalisation.<sup>348</sup>

Institutionalisation, while it has had many failures, produced many indirect effects which have led naturally to the current 'community living' movement. For the first time government recognised, for good or evil, its responsibility for the mentally handicapped population of society. Research focusing on the mentally defective actually led to a greater understanding regarding the training and education of the mentally retarded. Innovations, such as the IQ test, although not perfectly objective, were considerably less subjective than those used by the Late-Victorians. Medical research did reveal eventually the chromosomal disorder of Mongolism and the thyroid abnormalities associated with Cretinism. Institutional research while showing at times shocking disrespect for the subject populations, also made constructive breakthroughs in research in the genetics and the treatment of severe behavioral disorders.

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<sup>346</sup> *Journal of Mental Science*, [1861], p.54.

<sup>347</sup> *Ibid.*, p.565.

<sup>348</sup> *Evidence*, CDEC, vol.xxvi, p.209.

An examination of the study of the mentally retarded by professionals raises far more questions than it answers. What were the actual social conditions of the mentally retarded during this period? Who actually pressured local authorities to create asylums for the mentally retarded? Did family members feel that it was the state's responsibility to shelter and support handicapped members? To what extent did family members resist the move to institutionalise dependent members? Was institutionalisation primarily an economic decision and, if so, why did institutionalisation continue after the standard of living began to rise dramatically?<sup>349</sup> While historical work has concentrated on the abuses of incarceration, there is insufficient evidence to suggest that the lot of the mentally retarded actually declined during the late nineteenth and early twentieth centuries. Like the historical debate over the lot of the labouring poor during industrialisation, the historian is faced with a paucity of information on the crucial pre-industrial period.

The research of these middle class professionals was not controlled by their social circumstances, but it was largely influenced by it. In the years leading up to the first World War, many looked for convenient explanations of social problems. Hereditarianism offered something for everybody, and the rapidity which the idea of hereditary feeble-mindedness took hold reveals a great deal about the anxieties suffered by these middle class observers during the Edwardian period. Few seemed to take the time to question the objectivity of the scientific process itself, or heed the warnings so prophetically raised by Dr. George Savage:

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<sup>349</sup> See "The Decision to Institutionalize for Families with Exceptional Children", *Journal of Family History*, [Winter 1981], pp.397-409.

Our special experience must make us alive to the danger of taking facts and feelings for constant realities. Statistics we must have, but their value depends chiefly on the collectors...Let us be collectors and recorders, but at the same time let us recognise that what seems to us to be fixed and established today may in the future prove to have been only partially true.<sup>350</sup>

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350 Dr. H Savage, *Journal of Mental Science*, vol. lix, [Jan. 1913], p.16.

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