
Donnelly sets himself the task of explaining how a new view of lunacy and novel methods for its treatment gradually emerged in the first half of the nineteenth century. Initially, the author contends, no single perception of madness dominated English thought. Rather, the historian discovers a diverse series of often contradictory discourses, each contributing to a cultural collage which medical psychology would eventually inherit and codify as a form of specialized expertise. It is a methodological approach which, like the work of Michel Foucault by which it is inspired, is sprinkled with perceptive insights but fails to provide a completely satisfying or coherent analysis of a crucial period in the history of psychiatry.

The first half of the book considers aspects of social policy towards lunacy and covers much familiar ground. Until recognized by the Lunacy Acts of 1845 as a distinct category of social deviancy, the insane were indiscriminately confined, often in workhouses, with other aberrant individuals such as the elderly, the poor or the criminal. Symbolic of the eventual recognition of the insane were asylums, constructed in carefully chosen settings on principles calculated to place the individual patient under constant surveillance and discipline. This new architecture of confinement, facilitating both the replacement
of mechanical restraint with the constraints of assigned labour, and
the minute, orderly classification of patients, was itself considered
a powerful moral force in the rehabilitation of the mad. Even more
central to the process was the medical gaze of the superintendent,
whose humane authority was calculated to restore reason to the disorderly
mind. Together physicians, buildings and institutional routines conspired
to detain, define and salvage that deviance known as lunacy. Neither
the pressure of increasing numbers of insane nor benign charity explains
this elaborate process. Rather, Donnelly concludes, it must be seen
as the result of a diffuse series of influences in which an ideologically
charged philanthropy bequeathed to an increasingly autonomous medical
psychology the social duty of defining and confining the mad.

Having described the results, the second half of the book steps
back to reconstitute some of the discourses on lunacy which informed
the perceptions of both lay philanthropists and medical men in the
early decades of the century. Madness to the eighteenth century had
been the exemplar of irrationality, as defined in Locke's terms, and
many treatments were designed to shock or jolt the disturbed patient
back to reason. A lack of reason was considered the distinguishing
trait of the savage, a label all too easily applied to the lunatic
as well, in an early form of degeneracy theory. By the early nineteenth
century, insanity was considered a disease associated with higher and
more stressful forms of civilization quite different from primitive
societies in which, it was said, few suffered from mental disorders.
Yet among inhabitants of advanced societies it was those least prepared
by education to resist the impact of civilization — the very poor
— who were potential recruits to the ranks of lunacy. If social thought
had abandoned the classical notion of lunacy as simply irrationality,
emerging medical theory was premised not on the notion of the universality
of reason but on the importance of individual variation and difference.
Craniology, physiognomy and phrenology were deployed by physicians

to explain the symptoms manifested by individual patients. In this sense, it was the patient's own susceptibility rather than a disease which was to be defined and classified, all in the hope of penetrating from external signs to the content of the mind itself. This task and methodology created and defined the discipline of medical psychology that emerged autonomous in the second half of the nineteenth century.

Donnelly's book is an often insightful work, certain to inspire interest among specialists in the field, specially those wishing to follow the emerging debate between Roy Porter and Andrew Scull concerning the degree to which early nineteenth-century psychiatry represented a departure from traditional practices. For the general reader, however, the work may seem rather like a recipe in which all the ingredients are listed but no indication given as to the procedures or proportions necessary for their appropriate assembly.

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