Suicide and insanity in nineteenth-century prisons: The effect of the separate system of discipline on convict mental health

‘A deeper investigation into prison life brings to light the fact that nothing is done to prevent or counteract the desire for suicide in prisoners, the evil is only met by artificial prevention of its consequences when the mutilation of all spontaneous wishes, human instincts and reasonable paths of self-interest have engendered the passionate longing to cease existing.’¹

In this essay I will examine the prevalence of insanity and suicide in nineteenth-century prisons. In particular, I will look at the rates between 1830 and 1870, in the first truly national prisons, Millbank and Pentonville Penitentiaries. This was an interesting time in the history of English prisons, as it saw the beginnings of government control, the construction of purpose built national institutions, and the introduction of a controversial regimen of discipline: the ‘separate system’.

Using a quantitative approach, I will extract the data on suicides and insanity contained in contemporary prison reports, from both prisons, and track changes over this forty year period. In doing this I hope to gain further understanding of the separate system’s impact on prisoners’ mental health.

I have chosen to look at data from both Millbank and Pentonville as they were at the centre of the debates regarding discipline during this period. Pentonville was purpose-built, the flagship for the new type of penitentiary and the separate system; including Millbank in my analysis means female as well as male prisoners can be examined. It also allows for comparison between the

two, which enables discussion regarding confounding factors outside the system of discipline. A more complete and robust analysis would have included rates from other prisons, those that followed the separate system and those that did not, this could be consider in the future.

Prior to the nineteenth century, ‘gaols had been open-plan dens of disorder, drunkenness, corruption and disease.’ In 1777, John Howard published the State of Prisons, exposing the inequality and squalor of such places. The use of capital punishment and transportation, in the eighteenth century meant that few were incarcerated for any length of time. However, a decrease in the use of the death penalty, the cessation of transportation to America and increasing crime rates at the end of the century, led to a rapid increase in prison populations. Reform was piecemeal until after the Napoleonic wars, but changing social structures, increasing concern over riots and the rise of movements, such as Chartism, raised the stakes for the government. As with the asylum and education reform movements, a small group of Quakers and Puritans led the way. The Utilitarian, Jeremy Bentham, may have wanted to deter recidivism and ‘create industrious citizens’, but the evangelicals wished to ‘convert sinners’. The Chaplain was therefore a primary

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figure in the running of the new prison system, for example, Whitworth Russell, the Chaplain at Millbank, became one of the Home Office Inspectors of prisons.6

Initially, simple classification of prisoners was tried to prevent contamination between hardened criminals and young impressionable first offenders. But this was deemed not to go far enough and cellular isolation, along with complete silence, was advocated. This culminated in the ‘separate system’.7 As Ogborn explains:

This idea, translated into practice, reached its fullest expression in the social relations and spatial structures of the model prison at Pentonville (opened in 1842) where each prisoner was incarcerated in a separate cell for up to eighteen months, visited only by the Chaplain and other prison officers. Religious services and exercise were taken in chapels and yards designed to prevent any contact between inmates, and the prisoners’ isolation was preserved in their passage through the prison by masks which hid their faces. These conditions, it was argued, would lead to a reformation of each prisoner’s character and conduct.8

This was essentially solitary confinement, the damaging psychological effects of which have been explored at length by modern researchers.9 Contemporary Medical Officers were also quick to question the regimen’s impact on convict health. This led to a reduction in the time spent in solitude, from eighteen, to

7 The rise of the ‘separate system’ over its rival the ‘silent system’ has been explored and documented at length by academics. Please see Ogborn and Henriques for more detail.
twelve and eventually nine months; the masks and separate stalls in chapel were also abandoned.\textsuperscript{10}

Millbank (III.1) opened in 1816; its unique design was based on Bentham’s \textit{Panopticon}.\textsuperscript{11} The separate system was introduced in 1837, by the Reverend Daniel Nihil, who served as both Chaplain and Governor. Millbank appears to have been deemed a failure by many and when Pentonville was opened in 1842, it became a ‘holding and classification centre for those prisoners awaiting transportation to Australia.’\textsuperscript{12}

\begin{figure}[h]
    \centering
    \includegraphics[width=\textwidth]{millbank_prison.png}
    \caption{Millbank Prison. Andrew Orange, ‘Tradescant Road and South Lambeth, a hyperlocal blog’, \url{http://tradescant.blog.co.uk/2011/01/photograph-of-millbank-prison.html} [accessed 02 November 2013].}
\end{figure}

The data for this essay was collected from the House of Commons Parliamentary Papers (HCPP). The HCPP can be viewed electronically via their website and contains over 200,000 House of Commons sessional papers from 1715 onwards. Annual reports from both Millbank and Pentonville

\begin{thebibliography}{99}
\bibitem{11} Henriques, ‘The Rise and Decline’, pp. 68-70.
\end{thebibliography}
Penitentiaries are available from this resource. They are contained within the nineteenth century ‘House of Commons Sessional Papers’, and can be accessed via the ‘Law and order’, ‘Crime and punishment’ and ‘Penal Institutions- Prisons (Gaols, Jails, Penitentiaries)’ sub-headings. The reports are typed and although at times the text is slightly smudged, generally they are easily readable and easy to interpret.

The reports from Millbank were initially only a few pages long and contained minimal information on the prisoners; however, by the 1840s they become more detailed. Reports from Pentonville start in 1843. By 1850, there were combined yearly reports from ‘the directors of convict prisons on the discipline and management of Pentonville, Parkhurst, and Millbank Prisons, and of Portland Prison and the hulks’. The evidence given by the Medical Officers began to include more detail on the mental disorders suffered by other prisoners, not just those sent to the asylums. However, the structure and content of the reports changed almost year to year and particularly when there was a change of Medical Officer; it also differs between the two penal institutions. This means that although the number of suicides and of those sent to the asylum was recorded and easily tracked over time, attempted suicides and other mental disorders were not.

My initial intention on embarking on this project had been to look at self-harm (also called ‘self-injury’ or ‘self-mutilation’) as well as suicide rates.

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13 Website URL<http://0-parlippets.chadwyck.co.uk.pugwash.lib.warwick.ac.uk/subjectCatalogue.do?expand=02998#1851-027505> [accessed 30th September – 18th January 2014]

14 I reviewed reports concerning Millbank Prison from 1830-71 and from Pentonville Prison from 1850-71, the full references are contained in the Bibliography: Parliamentary Papers.
This has not been possible, as it was simply not recorded. The possible proxy measure of ‘attempted suicide’ was noted in the Pentonville reports, but only in the Millbank editions from 1860. From the 1870s, the increasing number of convict prisons included in the reports, once again reduced the length of individual entries. I therefore looked at figures from Millbank from 1830-70 and Pentonville from 1843-70, this covers the period at Millbank when the separate system was introduced and at the peak of its influence in both prisons. By the 1860s, society was becoming generally less liberal in its outlook and the separate system was seen more as punishment and less as a means of salvation.  

The Governor and the Medical Officer often reported separately on the number of prisoners who died by suicide or were transferred to lunatic asylums. I have chosen to use the Medical Officer’s figures on these occasions as he was best placed to be accurate. The quantitative method used was simple: I read through the reports from each prison in yearly order and entered the data obtained on prisoner numbers, suicides and insane prisoners on to Excel spreadsheet. This quickly enabled me to see where data was inconsistent or missing; for example, the 1852 report, despite its title only contained information from Pentonville. I then performed simple calculations on the data to view the results as percentages, and rates per 100,000 prisoner population, this method was used to aid interpretation, as percentages were small, making variations

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16 Directors of Convict Prisons: Reports on Discipline and Management of Pentonville, Parkhurst, Millbank, Portland, Portsmouth and Dartmoor Prisons, and Hulks; Parliamentary Papers, 1852 (1656) v LI.385.
difficult to visualise in this format. It is also consistent with how modern rates are presented, thus enabling comparison with current trends. For example, in 1999, the rate of self-inflicted deaths in prison custody in England and Wales was 141 per 100,000 prisoners, decreasing to 68 per 100,000 in 2010.\textsuperscript{17} The numbers for females are much lower than males, in 1999; only 5 of the 91 deaths were women. At Millbank (Pentonville was a male only prison) between 1831 and 1870 only two women were recorded as having taken their own lives.

The rates for suicide discussed below therefore only include male prisoners; they have been based upon the total number of male prisoners in the institution over the year. As male and female prisoners were completely separate, and managed differently, I have continued this throughout. All rates for Millbank penitentiary were worked out in this way. So the numbers of insane female prisoners are per 100,000 female prisoners and so on.

If we first look at Millbank, 1831-49, the actual number of suicides and prisoners sent to the asylum ‘insane’ are given in Table 1 and the rates of insanity per 100,000 prisoners in Graph 1. The data recorded for the year 1848, was given for a fifteenth month period, including part of 1849, though I found separate information for the year 1849. In 1841 the Medical Officer, Dr Baly, drew attention in the report to the increasing numbers of insane prisoners, and felt that this was related to the changes in discipline. He believed that long periods of separation were unsafe.

We have long been convinced that the General Penitentiary presents many obstacles, from locality, construction, and internal arrangements, to the safe working of the separate system in all its integrity...to recommend that a degree of caution should be exercised in carrying into effect, the regulations which relate to the discipline of the prisoners; and that the condition and health of the prisoners, and the effects of separate confinement in the penitentiary, should be narrowly watched by a competent medical man...18

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<th>Year</th>
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<th>Total No. female prisoners</th>
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19Report of the Committee of the General Penitentiary at Millbank; Parliamentary Papers, for 1830-42 and Inspectors of Millbank Prison, Report; Parliamentary Papers, for 1843-49.

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As we can see in graph 2, the numbers did reach a peak in 1841, dropping somewhat during the following seven years, especially amongst male prisoners. This may have been in response to the changes instigated by the superintending committee, which meant that ‘those of unsound mind’ were allowed to ‘converse promiscuously’, and, if necessary, ‘two or more prisoners under treatment for insanity may be placed together in a common room in the infirmary apart from other prisoners, and shall there have privilege of conversation.’

The suicide rates reflect a very different picture; there were no suicides between 1833 and 1842, the incidence then increased from 1843, following the changes described above. Another aspect, which may be relevant, is that Pentonville opened in 1842 and from 1843 onwards Millbank became a depot.

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Graph 1

**Millbank: Insane per 100k population**

![Graph showing the number of insane male and female prisoners at Millbank from 1831 to 1849. The x-axis represents the years 1831 to 1849, and the y-axis represents the rate per 100,000 prisoners.](image)

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20 Ibid.
for convicts awaiting transportation. Following this, there was a marked rise in the total number of prisoners held by the penitentiary over the year; more convicts staying for shorter periods may have contributed to this increase, rather than alterations in discipline. In real terms, however, this only amounted to one or two prisoners taking their own lives, indicating that individual convict characteristics may have been the most important factor.

Graph 2

Suicides per 100,000 prisoner population

At Pentonville the physical layout enabled the separate system to be fully realised; this had been difficult at Millbank. Comparing rates between the two prisons, then, could help us more fully understand the impact of the system. Graph 2 shows the suicide rates per 100,000 male prisoners at both prisons, the rate in both prisons fluctuates, with no general trend discernable. Interestingly, at Pentonville, no prisoners took their own lives during its first few

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22 Wilson, ‘Millbank’, p.370.
23 Parliamentary Papers, 1843-1870.
24 Report of Committee of General Penitentiary at Millbank; Parliamentary Papers, 1834 (31) v XLV.221.
years in operation; equally there were no suicides at Millbank between 1855 and 1863. Rates at both institutions peaked from 1864 to 1866; once again, however, the actual number of suicides was few, varying between two and none. It is difficult to make generalisations with such low numbers; the change in rates owes more to the variation in total convict numbers, than to any real changes in suicides. As suicide is essentially a rare event, it is difficult to determine causal factors and by looking at just two prisons over this period, the impact of the separate system is hard to judge.

Graph 3

Suicides and Attempted suicides at Pentonville

I was also able to look at the rates of attempted suicide at Pentonville over the same twenty year period; the data is shown in Graph 3. As expected, the number of attempts was higher than the number of completed suicides. They followed a similar pattern to the suicide rates, although not exactly; attempts were highest in 1853 and 1854. In the reports the Medical Officers often drew a distinction between serious attempts and ‘frivolous’ or ‘feigned’

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25 Parliamentary Papers, 1843-70.
ones. I have included all attempts, as such views are subjective and the motivation behind such acts is complex. Even attempts perceived as less serious or life threatening can be viewed as an expression of mental distress. Although, attempted suicide was not recorded at Millbank until 1860, they did occur, and if Arthur Griffiths is to be believed with surprising frequency, at least in 1824.

I next looked at rates of insanity to see if these were affected by the more rigid discipline at Pentonville. By 1852, like Dr Baly before them, the Pentonville report indicated that the Directors became concerned about the number of prisoners (five) ‘attacked’ with ‘mental affections’ by March of that year. They wondered if ‘separate confinement, rigidly enforced as it was at Pentonville, had a tendency to produce or to develop mental disease among prisoners of that class...’ They went on to look at the numbers in other prisons that followed similar discipline regimens and those where it was not so strictly enforced. They concluded ‘that there was an absolute relation between the amount of mental disease and the rigour with which the separate system was carried out.’ Such findings led to changes in the system such as the abandoning of separate stalls at chapel, solitary exercise, the wearing of masks and ultimately to the reduction in time spent in solitary from eighteen to twelve and, eventually, nine months. In addition, discipline was either relaxed for

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26 Directors of Convict Prisons: Reports on Discipline and Management of Pentonville, Parkhurst, Millbank, Portland, Portsmouth, Dartmoor, and Brixton Prisons, and Hulks; Parliamentary Papers, 1855 (2126) v XXXV.1; Directors of Convict Prisons: Reports on Discipline and Management of Pentonville, Parkhurst, Millbank, Portland, Portsmouth, Dartmoor, and Brixton Prisons; Parliamentary Papers, 1863 (3388) v XXVI.209.

27 Arthur Griffiths, *Memorials of Millbank and Chapters in Prison History* (London, 1884), pp. 95-

certain prisoners on mental health grounds, or they were removed from the prison altogether to another penal institution.\textsuperscript{29}

**Graph 4\textsuperscript{30}**

My findings are shown in Graph 4; I had expected the rates at Pentonville to be higher than at Millbank, however, this is clearly not the case. This may be due to the numbers of the convicts removed from Pentonville on mental health grounds, in fact, many of them were transferred to Millbank.\textsuperscript{31} The increasing numbers of insane (male) prisoners at Millbank, compared with the relatively low rates at Pentonville, could be explained by this influx of mentally disordered offenders. This argument is supported by the evidence from the rates of insanity in the female prisoner population, which were not swelled by transfers from Pentonville, and did not increase in the same way over time. Insanity amongst the female convicts was once again a rare event, as shown in Table 1;

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\textsuperscript{29} Ignatieff, *A just measure of pain: the penitentiary in the industrial revolution, 1750-1850*, pp. 199-200.

\textsuperscript{30} Parliamentary Papers, 1843-70

\textsuperscript{31} P.P, 1850-70.
it is hard to draw any real conclusions from the information available. Women often express mental distress in different ways to men, and may have drawn less attention and been less likely to merit transfer to an asylum. As the recording of other types of mental disorder in the Millbank reports was sporadic and piecemeal, a full understanding of the differences between male and female prisoners is not possible. This holds true for all the convicts, it is likely that a great deal of what we would now classify as mental illness went unrecognised, and unrecorded, in both penitentiaries. This is a shame, as it would have provided a fuller understanding of the overall effect of separation on mental health. Another avenue of further inquiry would be to compare more prisons, those that used the separate system and those that did not. Studying rare events over larger populations can make any trends more obvious and make any conclusions drawn more valid.  

Space has meant I have only been able to discuss some of the information contained in these reports, which have proved a rich source of information on prisoners’ mental health and on the prison establishments’ responsiveness to this. Not only have they shown that rates of suicide in the nineteenth century were little different than now, but also that the prison managers were concerned and quickly responsive to perceived increases in mental disorder amongst convicts. Further study of this resource can only improve our knowledge of this interesting time in the history of the Penal system.

32 Space precludes a lengthy discussion of other sources of error in a study such as this. Human error is one; both the original authors and I may be culpable of this. Deliberate ‘fudging’ of results by the managers of the prisons is unlikely in cases of suicide or transfers to asylums, as they involved outside agencies.
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