

Prisoners, Insanity and the Pentonville Model Prison Experiment
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Convicts exercising in Pentonville prison yard (note the Pentonville hoods, to ensure no eye contact)

The relationship between prisoners and mental illness has preoccupied prison administrators, physicians and reformers from the establishment of the modern prison service in the nineteenth century to the current day.

Pentonville Model Prison heralded the launch of a new prison system and approach to punishment in Britain when it opened in 1842. Its advocates lauded the regime of separate confinement, which was intended, through religious exhortation, rigorous discipline, moral training and the imposition of separation in its most extreme form, to produce true and deep repentance and rehabilitation amongst its convict population. Instead, it became emblematic of the high rates of mental illness that would come to typify many nineteenth-century prisons.

The regime of separate confinement, imported from the Eastern State Penitentiary in Philadelphia, was promoted by a number of Pentonville's Commissioners, notably its most vigorous advocates William Crawford and

Reverend Whitworth Russell, who cast aside warnings of the dangers inherent in the regime to the mental state of the prisoners. Pentonville operated *'like a machine'*, with every minute of the convicts' day from the first bell at 5.30am until lights out at 9pm, regimented, directed and observed in meticulous detail. Prisoners were forbidden to communicate with each other, and locked 23 hours a day in their cells, where they ate, worked and slept. They were moved through the prison with their faces covered by hoods, seated in chapel in separate stalls, exercised in separate airing yards.

Not surprisingly, cracks in the system quickly appeared and were recorded in the journals compiled by the prison medical officers and chaplains, the latter staunch advocates of the separate system and 'central actors' in its implementation. Chaplain Kingsmill explained how his cell visitations had produced the self-reflection and repudiation of sin that the reformers had hoped for, as prisoners shared *'their deepest anxiety and guilt... in their isolated cells'*.

However, within weeks of its opening Pentonville was racked by alarming instances of mental breakdown, delusions, hallucinations, panic, depression, anxiety and morbid feelings. Prisoners declared that they were visited by the spirits of the dead, they were being poisoned, there were snakes coiled around the bars of their cells, and that 'things' crawled out of the ventilation system. The chaplains and medical officers were preoccupied on a daily basis with attempts to subdue and calm prisoners intent on violence, suicide or self-harm. Thus in just one journal entry in December 1846, the prison doctor described how

Schwarnenkruze was suffering from mental symptoms... That Convict Riley [who was delusional] continues getting worse... Maddox was nervous and unwell... he complained this day to the Resid. Surgeon that he heard noises of irons in the flue of the cell... Convict J. Williams has been a very tiresome and suspicious prisoner...

On being taken on board ship in readiness for transportation to the colonies, Pentonville's convicts were afflicted with hysteric fits, which the ships surgeons noted were only observed in those prisoners moved from Pentonville who had been 18 to 20 months in separate confinement. Pentonville's officers were quick to accuse the convicts of feigning insanity and to suggest that whatever symptoms they showed of mental breakdown were attributable to previous

instances of insanity or to madness in the family. They denied that the regime itself was responsible for producing mental breakdown.

Ever reluctant to move prisoners to asylums – a sure acknowledgement of the failure of the Pentonville system – small numbers were nonetheless transferred to Bethlem, packed off to other prisons or discharged on ‘mental grounds’. In 1851 the prominent psychiatrist Dr Forbes Winslow declared in the *Lancet* that almost 14% of Pentonville’s prisoners were suffering from mental disorders.

From the commencement of what was often termed the Pentonville ‘experiment’ its critics had lambasted the regime of separation. The *London Times* carried out a sustained attack on Pentonville which dated back to its planning stages, while Charles Dickens condemned the separate system as ‘*cruel and wrong*’, ‘*this slow and daily tampering with the mysteries of the brain*’.

Peter Laurie, President of Bethlem Hospital, complained that 40 prisoners had been sent from Pentonville by 1847: ‘*are the public expected to believe that this fearful increase is not the direct result of the separate system?*’

By the late 1840s even Chaplain Kingsmill was expressing reservations, his ideals concerning the system of separate confinement no doubt undermined by the realities of dealing with severely mentally ill patients on a daily basis.

After the deaths of Crawford and Russell in 1847, the regime was modified, and by 1853 the period of separation reduced to 9 months. Yet, despite this very major and very public setback at Pentonville, the regime of separate confinement endured and remained the mainstay of the prison system for the remainder of the nineteenth century. And so too its association was to continue with the mental breakdown of the large and growing prison population of Britain.

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