

## Lunatic Asylum in Taranaki

Up until the 19<sup>th</sup> Century, insanity was seen as the work of the demons and witches. People suspected of having a mental illness were incarcerated in large institutions and often subjected to brutal physical treatments including chains, irons, collars, darkened cells, solitary confinement and starvation – in order to drive out the passions.

To early New Zealand policy makers, there was little difference between ill health and disability. Both threatened the image of New Zealand as an ideal society, characterised by pioneering vigour, independence and productivity.

The first legislation recognising the need for asylums for the mentally ill was the 'Lunatics Ordinance Act, 1846'. This Act envisaged state provision for the insane, placing the responsibility for health services on provincial governments.

A moral management programme was to be initiated in each asylum consisting of opportunities for manual work, regular church services and recreational programmes. It was believed that this would cure all patients. If only!

Provincial governments failed lamentably to provide suitable care for the mentally ill. Nobody wanted to take responsibility for their care – in their province. They thought it would be ideal if there was one large central asylum in Wellington to care for all mentally ill. This was debated in Parliament where common sense prevailed and the idea abandoned.

Taranaki was the last province to enact this policy. People in Taranaki considered insane were committed to an asylum in Auckland. The insane left by steamer for Auckland – with no-one in charge. Not surprisingly, as the steamer left New Plymouth, some jumped overboard and swam ashore. In the circumstances, a rather sane decision!

Taranaki history was created in 1871, when two rooms were added to the first Provincial Hospital in New Plymouth on Barrett Street hill. These rooms were intended to serve the needs of female patients, but the demand for care of insane patients took precedence and the following notice was issued. "In accordance with the powers to me delegated by His Excellency, the Governor General under the 'Lunatics Act 1868' I hereby proclaim the two rooms abutting the surgery, east end of the Provincial Hospital, to be a Lunatic Asylum for the province of Taranaki."

To meet the growing demand 'The Gables' in New Plymouth was then converted from a general hospital into a place to accommodate the mentally ill. It wasn't until 'Lake Alice' and 'Tokanui' hospitals were built, that Taranaki could access specialised mental health facilities.

Admission criteria were poorly defined. Consequently, the elderly with dementia, people with severe epilepsy, and anyone considered difficult to control or very different could be confined in the new 'Big Bin' institutions – 'out of sight – out of mind'. Overall, a major 'social engineering' process.

Unfortunately, approximately 90% of patients were considered incurable and therefore were considered to be life-long patients. Chronic overcrowding, untrained and insufficient staff and primitive treatments, resulted in asylums becoming little more than great crowded warehouses of despair, fueling significant community fear and apprehension. Some of which, sadly, persists to this day.

When the large "Big Bin" psychiatric institutions such as Lake Alice and Tokanui closed, residents were to be placed in supported accommodation – ideally within their local communities. This concept was referred to as 'community care'.

Taranaki again was slow to embrace this process however has now developed a comprehensive range of services.

Community care and associated support services is now the very much preferred option for residents, family/whanau and mental health professionals. It is made more palatable by the significant advances in pharmaceuticals, range of professional support available and the growth and influence of service users in determining what is needed and how best it is to be delivered.

Gordon Hudson is manager of Like Minds Taranaki.

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