

# Dr Samuel Gaskell at Lancaster Asylum: a medical and literary legacy? A.J. Larner

## INTRODUCTION

It is well known that two figures renowned in the history of science emerged from Lancaster in the nineteenth century: William Whewell (1794-1866) and Richard Owen (1804-1892).<sup>1,2</sup> Significant contributions were also made by Dr Samuel Gaskell. This brief article makes the case for Dr Samuel Gaskell, in terms of both a medical and, possibly, literary legacy.

## BRIEF BIOGRAPHY

Samuel Gaskell's biography has been documented on occasion.<sup>3-6</sup> He was born in Warrington on 10th January 1807. His desire to study medicine was initially thwarted on account of poor eye sight, apparently caused by an attack of measles. For some years he was apprenticed to a publisher and bookseller in Liverpool, but this was eventually remitted allowing Samuel to pursue his medical education in Manchester and Edinburgh. In 1834 he was appointed as house apothecary at the Manchester Royal Infirmary and Lunatic Asylum and it was presumably during this time that his interest in the treatment of the insane developed.

In 1840 he was appointed medical superintendent of the Lancaster County Asylum, following election by the county magistrates. Lancaster Asylum had opened in 1816, part of a wave of new asylum building throughout England following the 1808 County Asylums Act. During his years in Lancaster, Gaskell instituted changes in the administrative regime, as documented in his annual asylum reports, and he became an active member of the Association of Medical Officers of Asylums and Hospitals for the Insane, founded in 1841. He gained Fellowship of the Royal College of Surgeons by election in 1844.

In early 1849 Gaskell was appointed as one of the Commissioners in Lunacy, an influential position which required him to move to London. The Lunacy Commission was founded by the Lunacy Acts of 1845 to provide a permanent inspectorate able to visit any asylum or madhouse, public or private, in England and Wales with the power to order changes to patient care if provision was deemed inadequate. The thoroughness of Gaskell's inspections was noted, and did not always endear him to proprietors and superintendents of madhouses. He has been described as "possibly the most influential commissioner in the commission's history".<sup>7</sup> A road accident in 1865 forced his early retirement from his post of Commissioner in 1866 due to "mental infirmity".

## MEDICAL LEGACY

Samuel Gaskell is credited with ending the system of physical restraint of patients in Lancaster Asylum. This approach was common at the time, not only in Lancaster but also in many of the asylums of the day, although there were notable exceptions, particularly the pioneering approach of the Tuke family at the Retreat near York.<sup>8</sup>

Along with the Visiting Physician, Dr Edward De Vitre (1806-1878), simultaneously elected to Lancaster

Asylum, Gaskell was a proponent of the system of "moral treatment" which had been developed in England by Dr John Conolly (1794-1866) at Middlesex County Lunatic Asylum at Hanwell. This was part of a revolution in the care of mental illness during this period, which sought not only to abolish restraint but also to encourage recovery through the provision of adequate care, diet, and employment, in a therapeutic (i.e. clean) environment with access to exercise and recreation.

A detailed study of the Lancaster Asylum records covering the period of Gaskell's superintendency was undertaken by John Walton,<sup>9</sup> from which he concluded that "[t]he overall impression is of a genuine attempt by the medical officers [Gaskell and De Vitre] to introduce a system of "moral treatment" in the fullest sense, and to change the whole spirit in which the asylum was conducted. There is sufficient evidence to suggest that, up to a point, they succeeded". In addition to the removal of locks, chains and restraining devices, iron bars and gates were dispensed with, and a building programme sought to increase space, remove walls, and improve light and ventilation (for example by lowering and enlarging windows).

Gaskell is also said to have allocated orphan children to the care of female patients "to develop in the women the great principle of maternal love", an innovation which was noted on a visit by the Earl of Shaftesbury, the chairman of the Lunacy Commission from its establishment in 1845 until his death in 1885. Shaftesbury's approbation for Gaskell's work undoubtedly prompted his appointment as one of the Commissioners in Lunacy in 1849.

Lancaster Asylum was later renamed Lancaster County Mental Hospital and then Lancaster Moor Hospital, finally closing in 2000. Gaskell's role in the development of mental health services in Lancaster is still remembered to this day.<sup>10</sup>

## LITERARY LEGACY?

Samuel Gaskell was the younger brother of the Reverend William Gaskell (1805-1884), Unitarian minister at Cross Street Chapel in Manchester, and the husband of the novelist Elizabeth Gaskell (1810-1865). Samuel was the best man at the Gaskell's wedding in 1832. He makes occasional appearances in Mrs Gaskell's extant correspondence, as an occasional advisor on the health of the Gaskell's first child, Marianne, and as a holiday companion for William on his walking trips. (William Whewell was also an occasional correspondent of Mrs Gaskell.)

It seems that Elizabeth grew close to her brother-in-law, feeling that she could be more open with him than with her husband. Naturally then, one might wonder whether knowledge of Samuel's profession had any influence on Elizabeth's creative life. A number of characters with mental infirmity may be discovered in her works,<sup>5</sup> but the most suggestive possibility of a link with Samuel occurs in the short story *Half a life-time ago* (1855),<sup>11</sup> in which Lancaster Asylum is specifically named.

The heroine of the story, Susan Dixon, promises her dying mother that she will be as a mother to her brother

Willie, a boy named after his father. (These names and relationships were full of personal significance for Elizabeth Gaskell, as her own son Willie had died as an infant in 1845, an event which apparently prompted her husband to suggest she start writing to assuage her grief.) In the story, a feverish illness robs Willie of the “little wit ... he ever possessed”, his verbal skills regress to consist largely of vocalisations, and “he had to have the same care taken of him that a little child of four years old requires”. Michael Hurst, Susan’s intended husband, takes Willie, unbeknown to Susan, to see a Dr Preston in Kendal, “the first doctor in the county”, who is reported by Michael to think that Willie “will get badder from year to year” and advises sending him off to Lancaster Asylum. Susan, aware of “stories of the brutal treatment offered to the insane; stories that were, in fact, but too well founded”, and of “horrible stories ... about madhouses”, will not agree, pledging herself to look after her brother, and so losing her chance of marriage to Michael Hurst.

This passing reference to Lancaster Asylum in *Half a life-time ago* may, of course, be entirely incidental to Elizabeth’s family relationship to its erstwhile superintendent. As the county asylum, the building would probably have been a familiar name, even to residents of Manchester. Moreover, the Gaskell family regularly spent holidays in Silverdale near Lancaster (the Gaskell Memorial Hall in the centre of the village is named after her); Elizabeth’s correspondence suggests visits in 1850, 1852, and 1855, as well as 1858 and 1861. However, other textual evidence may be relevant here: *Half a life-time ago* is set “fifty or fifty-one years ago” which would place it in the first decade of the nineteenth century, well before Samuel’s medical career and the movement to reform the running of madhouses and the care of the insane. There is anachronism here, in that Lancaster Asylum was only opened in 1816, although there is no doubt that in the period 1816-1840 conditions there were grim,<sup>9</sup> and hence all too possibly a subject of “stories of the brutal treatment offered to the insane”.

## CONCLUSION

In addition to his contributions to the care of patients with mental illness, at both a local and a national level, it is possible that Samuel Gaskell may have influenced some of the writings of his more eminent sister-in-law, the author Elizabeth Gaskell.

## ACKNOWLEDGEMENT

Thanks to Dr Quenton Wessels of Lancaster Medical School, Faculty of Health and Medicine, Lancaster University, for helpful comments on this manuscript.

## REFERENCES

1. Wilson DB. William Whewell, Galileo, and reconceptualising the history of science and religion. *Notes Rec R Soc Lond* 2011; **65**: 343-58.
2. Wessels Q, Taylor AM. Anecdotes to the life and times of Sir Richard Owen (1804-1892) in Lancaster. *J Med Biogr* 2015 Oct 28. pii: 0967772015608053. [Epub ahead of print]

3. Freeman HL. Samuel Gaskell. In: Elwood WJ, Tuxford AF (eds.). *Some Manchester doctors. A biographical collection to mark the 150th anniversary of the Manchester Medical Society 1834-1984*. Manchester: Manchester University Press, 1984: 89-92.
4. Scull A, Mackenzie C, Hervey N. *Masters of Bedlam. The transformation of the mad-doctoring trade*. Princeton: Princeton University Press, 1996: 161-86.
5. Shaw H, Wessels Q, Taylor AM, Chin-Quee E. The asylums and pioneers of psychiatric care. In: Wessels Q (ed.). *The medical pioneers of nineteenth century Lancaster*. Berlin: epubli GmbH, 2016: 99-121.
6. Lerner AJ. Dr Samuel Gaskell (1807-1886): a brief biography, and thoughts on his possible influence on Elizabeth Gaskell’s writings. *Gaskell Society Newsletter* 2016; **62**: in press.
7. Anonymous. Biographies of Medical Lunacy Commissioners 1828-1912. <http://studymore.org.uk/6biom.htm#M11> (last accessed 08/03/2016).
8. Kibria AA, Metcalfe NH. A biography of William Tuke (1732-1822): founder of the modern mental asylum. *J Med Biogr* 2014 Jun 18. pii: 0967772014533059. [Epub ahead of print]
9. Walton J. The treatment of pauper lunatics in Victorian England: the case of Lancaster Asylum, 1816-1870. In: Scull A (ed.). *Madhouses, mad-doctors, and madmen. The social history of psychiatry in the Victorian era*. Philadelphia: University of Pennsylvania Press, 1981: 166-97.
10. Fearnley E. Care and confinement: A reflective overview of mental health service development in Lancaster and the UK. *Cumbria Partnership Journal of Research Practice and Learning*, 2014; **4/1**: 56-8; [http://www.cumbriapartnership.nhs.uk/assets/uploads/cpft-journal/CPFT\\_Journal\\_4\\_-\\_1\\_-Fearnley\\_p56.pdf](http://www.cumbriapartnership.nhs.uk/assets/uploads/cpft-journal/CPFT_Journal_4_-_1_-Fearnley_p56.pdf) (last accessed 08/03/2016).
11. Gaskell E. *Cousin Phillis and other stories* (ed. H. Glen). Oxford: Oxford World’s Classics, 2010: 89-129.

**Correspondence to:**  
Andrew Severn  
Consultant Anesthetist, RLI