QUAKER CONTRIBUTION TO PSYCHIATRIC THOUGHT AND PRACTICE.*

By GWENDOLINE D. KNIGHT, M.R.C.S., L.R.C.P., D.P.M.,
Assistant Medical Officer, The Retreat, York.

THE Retreat is now 150 years old. Some of you, perhaps, come from hospitals older still. Bethlem, looking back over 5½ centuries, might well wonder, "Why such a fuss about a mere 150?" But it is quite a respectable age, and all old people are fond of reminiscing, so will you indulgently allow this elderly gentleman, through me, to talk for a few minutes about his past life and his old friends, and will you forgive him if he seems to emphasize the triumphs, and gloss over the difficulties and failures? It has all been said before, we know, but we hope you will find something of interest in it.

If you had paid a visit to The Retreat say 145 years ago, what would you have found? The same square central building and front door, with a wing on either side, looking, except for the rows of small-paned windows, like the country house of a private individual not fond of pomp and luxury. At one end were low farm buildings; in front was a flower and vegetable garden, divided by shrubberies into secluded walks, and "defended from the road by a neat common hedge." Just inside the hedge was a row of beech saplings planted by William Tuke himself, and now as you can see to-day, grown to fine trees, which give us pleasure all the year round.

Within you would have found an air of cleanliness and simplicity, almost of severity, for though the building was planned to avoid any appearance of gloom, there were no carpets on the stone floors and stairs, and no unnecessary furniture, and, in accordance with Quaker custom, colours were subdued, and there were no pictures on the walls.

Very likely William Tuke, the founder, would be there to meet you; for it was his habit to spend part of each day at The Retreat. At this time he was about 70 years old, rather under middle height, erect and portly, his countenance and bearing that of a man accustomed to act as well as to plan, and not easily daunted by opposition or the doubts of others. He would be wearing the plain sober clothes and broad hat favoured by Quakers of those days—a great contrast to you, his visitors, in your bright blue or green cut-away coats with brass buttons, gleaming top boots, elaborately folded neck cloths, and curled hair. You would perhaps be a little taken aback at first to be addressed in the "thee and thou" style of speech, and to notice that he did not remove his hat to greet you, but you would remember that these were the usual manners of the Quakers at that time.

William Tuke would introduce you to the Superintendents, George Jepson and Katharine Allen, and perhaps to Dr. Thomas Fowler, the visiting physician. Dr. Fowler gave his name to the preparation "Fowler's solution," and the managers of The Retreat were fortunate to obtain his services in those early years. He was a remarkable man, and worked in the true scientific spirit,

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ready to give a fair trial to remedies recommended to him, and recording the results, failures and successes alike, without bias. We still have the book in which the earliest case-notes were made, starting in 6th month, 1796, with the first admission. The records are rather sketchy, we should think nowadays. They give only a brief descriptive admission note and a word or two of the history. Subsequent entries were apparently only made when the patient was discharged, or readmitted, or died. There are a few phrases which convey very familiar pictures—one patient, readmitted after a relapse, is described as "very high and flighty," and another as "haughty and censorious." It is interesting to notice references to "nurses" even as early as 1796, especially when we remember that "keeper" was the word in common use until a much later date.

I have not been able to find out who wrote the case-records—very likely William Tuke at first, and later George Jepson.

George Jepson would express great willingness to show you all over the building, for it was the policy of the managers to welcome professional men and others interested in the work. They believed that "the interests of humanity and science alike call upon us to communicate freely the discoveries we make or the failures which happen to us, in a pursuit so intimately connected with the happiness of our species." Sometimes arrangements were made for medical men to reside in the house for a time to study more closely the methods used and the results obtained. Thus, at an early date, The Retreat could claim to be a teaching hospital, and during its first few years it was visited by distinguished men from all parts of the British Isles, from Switzerland, France, Russia, Italy, and America. They came prepared to scoff, remained to be convinced, and went home to report on what they had seen, and thus to build up a new attitude towards the treatment of the insane.

It would not take long to walk all round the building, for there were still only 40 patients, but no doubt there would be plenty to arouse your interested comment and question. You would be accustomed to see, in other hospitals, many patients in chains, manacled, or locked by the leg to their wooden bedsteads, sometimes having remained in the same chains for years—sometimes lying on filthy straw, naked, or covered by one blanket, in evil-smelling cells or long gloomy galleries. At The Retreat you would be surprised, and perhaps horrified, to find no dungeons or chains of any kind, and instead of dirty, half-naked creatures shrieking imprecations at you or begging to be freed from their miserable surroundings, you would have found a comparatively orderly scene. Those who were violent were separated from the more tranquil, and methods of mechanical restraint were only very seldom used. Nearly all were fully clothed, and many were occupied writing or sewing, or reading books and newspapers. As one visitor about this time wrote: "A person coming in without being apprised beforehand would believe himself at first among persons of sound mind, so complete is the decorum and tranquillity which the Matron knows how to preserve. Everything in the house breathes the same simplicity, cordiality, order, and quietness which reigns in private families." You would notice that the attendants spoke to the patients in gentle, rather quiet tones. You might have suggested that they were taking grave risks in mixing so

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freely with the patients when so much freedom was allowed, and questioned whether order could be sufficiently maintained where corporal punishment was not allowed and threats could have no meaning. We have been taught, you would say, that only by a show of power can patients be subdued; and some are so furious and so malevolently disposed that it is absolutely necessary, for the sake of safety, to confine them most rigorously.

William Tuke would explain that he and other Friends first planned The Retreat in the firm conviction that cruel and harsh methods were always wrong and contrary to Christian teaching. He would express himself something like this: "Though the principle of fear, when moderately and judiciously excited by the operation of just and equal laws, has a salutary effect upon society, when it becomes the chief motive of action it certainly tends to contract the understanding, to weaken the benevolent affections and to debase the mind. In our opinion the general treatment of the insane has been too frequently calculated to depress and degrade rather than to awaken the slumbering reason or correct its wild hallucination. Wise kindliness, on the other hand, has a far stronger influence on all sorts and conditions of men than has been usually recognized, and we believed we should find many insane persons capable of rational and honourable inducements. We therefore determined to make every endeavour to win the respect and, if possible, the affection and gratitude of the patients, convinced that their desire to retain our esteem would prove a more powerful motive for self restraint than fear of punishment. These principles, faithfully carried out, have been followed by none of the disasters prophesied, but by results so encouraging that we can now speak with the authority of experience as well as the voice of faith, and echo the words of Dr. Haslam of Bethlem, 'I can truly declare that by gentleness of manner and kindness of treatment I have seldom failed to obtain the confidence and conciliate the esteem of insane persons; and have succeeded by those means in procuring from them respect and obedience."

Nowadays "occupation therapy" and "rehabilitation" are well worn phrases in our ears and everyone recognizes their importance, but George Jepson was making discoveries when he encouraged his patients in all kinds of innocent recreations and pastimes, because he had found that "of all the modes by which the patients might be induced to restrain themselves, regular employment was perhaps the most efficacious," and we can see the beginnings of rehabilitation in his attempts to find, whenever possible, a useful occupation for his patients, so that each could feel he had to some extent earned his place in the family. His wife, too, used to hold tea parties attended by patients and by visitors from York, and was gratified to find that as a general rule the patients behaved with politeness and propriety.

Some of the patients were allowed to go into the city and the neighbouring countryside. In order to compensate the less orderly patients for their narrower confinement, the airing courts were each supplied with a number of animals, such as rabbits, seagulls, hawks and poultry, and Samuel Tuke says, "These creatures are generally very familiar with the patients; and it is believed that they are not only the means of innocent pleasure, but that the intercourse with them sometimes tends to awaken the social and benevolent feelings."

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At this date, about 1801, you probably would not meet Samuel Tuke because he was still a very young man and was engaged in the family tea business in York. A pity to miss him, because he was the most interesting of all the family. He was a grandson of William Tuke and was closely associated with The Retreat all his life, but it was not his only interest. He worked hard, too, for education and public health, and the abolition of slavery. He will, however, certainly be remembered as the author of the famous *Description of The Retreat*, which he wrote when he was 28. This book is a straightforward account of the origin of The Retreat and the first few years of its history, but it is packed with shrewd observations and comments. It is beautifully written, and a joy and inspiration to read to-day. It reveals Samuel Tuke as a widely read man with great natural insight; generous, far seeing, and extremely practical. We know from other sources that he was energetic, resourceful and bold. It was said of him that "in his bearing towards patients there was a union of tenderness and power well calculated to restrain the actions of the excited as well as to cheer the melancholy."

From his *Description* and from the reports which were published every year from 1797 onwards, we see that those old Quakers were not just idealists whose benevolent project accidentally turned out well. They were exceedingly business-like and efficient. They were not blind to the frailties of human nature, and as a precaution against possible abuses they drew up detailed rules for the management of the establishment. Regular visitors were provided for, all accounts and records were meticulously kept and inspected, and the numbers of admissions, discharges and deaths were published each year.

The choice of suitable persons to serve the establishment, and particularly of male and female superintendents, was recognized as being a matter of the greatest importance.

It was realized that "Whate'er is best administered, is best," and that however perfect a plan, its excellence depends on those who put it into practice. William Tuke and his friends planned to build a family, a "retired habitation," where each patient could feel secure; they knew that the only firm foundations were warm personal relationships. I think it was this conception which was their greatest contribution to psychiatry. The harsh usages would in any case soon have given place to milder methods —but the fundamental importance of personal relationships is only now beginning to be understood. Modern psychology expresses itself in more complicated terms, but the aim is really the same—to enable the patient to feel at one with the world and at home in it—to help him to become an accepted, esteemed member, first of his own little family circle, finally of the Family of the whole creation. The recognition that, with such an end in view, responsibility is shared by all members of the staff perhaps accounts for the "atmosphere of The Retreat," which, though it ebbs and flows, is still frequently commented upon and which we think is worth cherishing.

Samuel Tuke emphasized the need for teaching and training the nurses as to the methods they should employ, and for reminding them that their patients are really under the influence of a disease, and cannot be blamed for their actions, however unpleasant and vindictive they may be. He wisely says,

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"There is much analogy between the judicious treatment of children and of insane persons. Locke has observed that 'The great secret of education lies in finding the way to keep the child's spirit easy, active and free; and yet, at the same time, to restrain him from many things he has a mind to, and to draw him to things which are uneasy to him.' It is highly desirable that attendants on the insane should possess this influence over their minds; but it will never be obtained by austerity and rigour; nor will assumed consequence and airs of importance be generally more successful. . . . I have observed that the most successful managers of the insane have been those who were the most humble and unselfish."

And again: "The attendant on the insane ought sedulously to endeavour to gain their confidence and esteem; to arrest their attention, and to fix it on objects opposite to their illusions; and to call into action, as much as possible, every remaining power and principle of the mind; and to remember that, in the wreck of the intellect, the affections not infrequently survive."

Samuel Tuke had a high standard, and knew he was asking a great deal. No doubt they had their difficulties with staff, even a hundred and fifty years ago, and thinking of some of the letters of resignation received from nurses from time to time, one feels a pang of sympathy with William Tuke when he records the minute in 4th month, 1797: "Jane King the housekeeper finding her spirits often unequal to the situation, and being desirous of leaving the House, it was agreed to leave her at her liberty."

The appearance of the *Description of The Retreat* in 1813 was followed by an acrimonious correspondence in York newspapers concerning the conditions at the York Lunatic Asylum. Doubts and surmises arose in the public mind, and eventually the reform of this asylum, long overdue, was achieved. By this time the general concern reached Parliament itself, and in 1815 a Royal Commission heard detailed evidence as to conditions in hospitals and private houses for the care of the insane. It was clearly shown that in many ways things were very bad indeed. Legislation was urgently needed, but, as you know, nothing very substantial was achieved until the passing of the Acts of 1845, which have been called the Magna Charta of the liberties of the insane. Many names must be honourably remembered in connection with this long struggle, but I think the Retreat Quakers earned the right to be regarded as among the pioneers.

In later years much of the work of The Retreat has been done by people outside the Society of Friends, and the percentage of Friends among new patients is small; but the Quaker Committee continues to stand behind all, guiding, serving, striving to preserve the pioneering outlook and the family spirit which were the essential features of the earliest days.

And here I must mention one of these more recent names, that of Dr. Bedford Pierce, perhaps the most greatly loved of all the Retreat servants. He was another who knew the value of good nursing, and worked constantly to raise the standard both at The Retreat and at other mental hospitals.

Let us glance back again for a brief moment at those early days. Why should it have been a Quaker institution which so powerfully influenced this branch of social medicine? Many people were uneasy about the harsh methods

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in general use, but it was left to Quakers to "demonstrate beyond contradiction" the great advantage of milder modes of treatment.

I can make one or two suggestions:

Firstly, Quakers by their religious scruples were cut off from many of the occupations and pastimes of the day. They did not own large estates whose management took up all their time; they did not try to accumulate vast fortunes; they were for many years excluded from public office and from the Universities. They did not dance, drink or gamble. So they had time to read and think, and to observe the world about them. Their interest in the natural sciences was strong and their pursuit of truth single-minded. It is significant that there were many Quaker physicians and scientists.

Quakerism began about 1650, and for the first 40 or 50 years it was a persecuted religion. William Tuke's great grandfather, like so many of his generation, suffered imprisonment for conscience' sake—such a heredity must have encouraged the independent and undaunted spirit that need not wait for popular support, and does not regard safety as the first essential.

Most important of all, their religious revelation was recent and vivid; their spiritual experience personal, and a powerfully urgent spur to a new way of life. They had a burning sense of the value of each and every individual soul, so they concerned themselves with people, with those usually considered unimportant or worthless—children, slaves, prisoners, and lunatics. They esteemed it a religious duty to seek and to cherish all that was good, useful and rational in their fellows—to "walk cheerfully over the world, answering that of God in every man."

I should like to quote some sentences from the first printed announcement about The Retreat, believing that the spirit that prompted them is still alive to-day:

"Those who have embarked in this undertaking have not been influenced by interested views, nor are they requesting or desiring any favours for themselves. A malady, in many instances the most deplorable that human nature is subject to, hath excited their sympathy and attention; and they invite such Friends as approve of their design, to co-operate with them in an Establishment which hath for its object, the mitigation of misery, and the restoration of those, who are lost to civil and religious society: in the prosecution whereof, they humbly rely on the favour of Him whose tender mercies are over all his works."

And to end, here are some appropriate words of Samuel Tuke:

"I am, however, far from imagining that this Asylum is a perfect model for others either in regard to construction or management. If several improvements have been successfully introduced, it is probable that many others remain unattempted. The managers will not, I trust, allow the approbation they have received, to induce a relaxation of their future endeavours, to combine, in a still greater degree, the comfort with the security of the insane; but on the contrary they will be stimulated by it to further exertions, and proceed, in some degree upon the maxim, that nothing has been done whilst anything remains to be done."

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