

## IRISH PRISON DOCTORS – MEN IN THE MIDDLE, 1865–90

by

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IN 1839, Dr. Henry Maunsell addressed the Royal College of Surgeons in Ireland on what he termed “political medicine”. He chided “the leading medical men of the day [for] having abandoned the higher and more honourable walks of their professions to pursue, *exclusively*, the less exacted, though more profitable trade of the empirical curing of disease”.<sup>1</sup> If governmental attempts to provide clean water, cure the sick, help the insane, and reform the criminal were to succeed, Maunsell felt that the best of Ireland’s doctors had to be employed in government service. But government service in nineteenth-century Ireland frequently meant involvement in political issues to the detriment of professional reputations. Nowhere was this more true than in Ireland’s prison service.

Continuing protests for land reform, religious equality, franchise extension, and self-government dominated Ireland’s history. To Nationalists, each governmental department bore witness to English injustice, the failure to meet these demands. The Irish prison system was no exception. Indeed, prison administrators had custody of many critics of governmental policy whose protests exceeded legal limits. These critics, deeming their offences political, not criminal, argued for a special status as prisoners. Prison doctors became entangled in the controversies which surrounded these Irish political prisoners, because the doctors could mitigate ordinary regimen or special punishments for reasons of health. Convinced that a prison doctor had been unfair or even cruel towards political prisoners by allowing them to undergo ordinary regimen, Irish leaders and their followers undercut the doctor’s reputation and his practice. For the other side, when the Government saw a doctor exempting political prisoners from regulations, it could arrange for his removal and deny him other posts. Irish prison doctors were truly men in the middle.

Before centralization in 1877/78, Irish prisons were not organized into a system.<sup>2</sup>

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<sup>1</sup> ‘Dr. Maunsell on political medicine’, *Dubl. Univ. Mag.*, 1839: 13: 562. See also, R. M. MacLeod, ‘The anatomy of state medicine: concept and application’, in F. N. L. Poynter (editor), *Medicine and science in the 1860s*, London, Wellcome Institute for the History of Medicine, 1968, pp. 199–228, esp. p. 211; R. M. MacLeod, ‘The frustration of state medicine 1880–1899’, *Med. Hist.*, 1967, 11: 15–40.

<sup>2</sup> Joseph P. Starr, ‘The enforcing of law and order in eighteenth century Ireland: a study of Irish police and prisons from 1665 to 1800’ (Ph.D. Dissertation, Trinity College, Dublin, 1968); R. B. McDowell, *The*

There were state-run convict prisons like Dublin's Mountjoy, whose number of inmates and importance grew with the gradual abolition of transportation. And there were local prisons (gaols) and smaller bridewells, holding prisoners awaiting trial or serving relatively short sentences. Operated and funded by county and city authorities, these gaols were visited after 1822 by two inspectors-general who reported to the Lord Lieutenant. These inspectors-general could not force compliance to prison statutes, but their early reports probably led to the passage of another prisons act in 1826 (7 Geo. 4, ch. 74). Among other points, this statute ordered that each gaol have a physician or surgeon, an apothecary, and at least one chaplain. Not all local authorities readily complied with these requirements. Often, physicians did not visit the local gaols on a regular basis, and when they did, they had to bring their own instruments. Some gaols had no separate infirmaries to house the sick or the insane, who all too frequently were placed in gaols rather than asylums. For the day-to-day care of these lunatics and the ill, the chronically understaffed gaols had to use other prisoners as nurses, "criminals convicted of homicides, burglaries, and brutal assaults, who are bribed by remission of their punishments to take charge of patients frequently unable to complain of any ill-treatment, which they undergo".<sup>3</sup> These criminal nurses had to be given more food than the ordinary diet so that they would not steal from their charges. These were the men and women whom doctors had to rely on, at least in part, to carry out their orders. By the 1860s, medical supervision of the larger gaols had improved, but the smaller bridewells often lacked regular medical attendance.

The state-run convict prisons nominally offered better medical care for two reasons. They had larger, long-term prison populations that both required and allowed for closer medical supervision. Also, the convict prisons were in or near the cities, whose larger populations attracted a number of doctors to choose from. The appointment of Walter Crofton as chairman of the directors of convict prisons brought greater uniformity and an enhanced reputation to the convict prisons. Basing his ideas on earlier non-Irish precedents, the new chairman began the so-called Crofton or Irish system of graduated marks earned towards release, intermediate prisons to train and prepare convicts for the outside, and police supervision after release. The Crofton system became a model for prison reformers in England, on the Continent, and in America, who urged rehabilitation over deterrence.<sup>4</sup> In ill health, Crofton retired in 1862 with a knighthood. He left just before the first large numbers of political offenders entered Irish prisons.

Those offenders were the Fenians, arrested during the unsettled period, 1865–67. At first, both Fenian leaders, such as James Stephens, John O'Leary, and Jeremiah

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*Irish administration, 1801–1914*, London, Routledge & Kegan Paul, 1964, pp. 145–163; James McGowen, 'Nineteenth-century developments in Irish prison administration', *Administration*, 1978, 26: 496–508; Henry Heaney, 'Ireland's penitentiary, 1820–1831: an experiment that failed', *Studia Hibernica*, 1974, 14: 28–39; and Tim Kelly, 'Ennis County Jail', *North Munster Antiquarian Journal*, 1973–74, 16: 66–69.

<sup>3</sup> 'Forty-second Annual Report of the Inspectors-General, 1863', *Sessional Papers*, 1864 [3377] XXXVII, p. 27. Hereinafter *Sessional Papers* are given as *SP*.

<sup>4</sup> Richard S. E. Hinde, 'Sir Walter Crofton and the reform of the Irish convict system, 1854–61', *Irish Jurist*, 1977, 12: 115–141; 295–338; and Elizabeth Eileen Dooley, 'Sir Walter Crofton and the Irish or intermediate system of prison discipline', *New Engl. J. Prison Law*, 1981, 7: 72–96.

O'Donovan Rossa, and their followers were placed in Irish gaols. However, in November 1865, after less than two weeks' incarceration, Stephens escaped from Richmond. Official reaction included an investigation by the inspectors-general whose report censured Richmond's governor and found evidence of Fenian sympathizers among the staff.<sup>5</sup> Richmond Bridewell pointed out another continuing pattern. Irish prisons were often ill-constructed for close supervision, poorly heated and ventilated, and subject to frequent escapes. Information passed freely between prisoners and those on the outside. When a prisoner became ill or died, word reached the Irish people almost immediately. These facts were not unknown to the Government, which decided to move the convicted leaders to English convict prisons. Though not airtight, as evidenced by the Manchester rescue and the Clerkenwell explosion, English prisons were more secure than their Irish counterparts.

Officials consistently argued that the Fenians, or treason-felony prisoners, were not singled out for special treatment, harsh or lenient, and were merely subject to the same regulations as other prisoners. The Fenian prisoners and their spokesmen in amnesty organizations cited association with common felons as particularly odious, claiming that such contact produced an additional psychological hardship. Reacting less to Fenian demands than to continuing fears of escapes and of the contamination of ordinary criminals with a revolutionary fever, officials isolated the treason-felony prisoners from other criminals and often from each other. Within this isolation, any deviation from exact prison rules was more readily apparent and more quickly punished.

This isolation applied to the suspects detained under suspension of habeas corpus who had been left behind in Irish gaols or prisons. In contrast to other untried prisoners, these Fenians were closely restricted. They could not associate with each other in the exercise yard, during school hours, or in the hospital. All spent twenty-two hours a day in solitary confinement, some spending even longer in that introductory phase than convicted felons. While weeks stretched into months, the Government grew more anxious about any trouble. The prisoners' depression deepened over their uncertain status and their colleagues' failure to overthrow British control or rescue them from gaol. Tempers flared and the punishment cells filled.

Prison doctors had the duty of judging a prisoner's fitness for punishment. At Mountjoy Convict Prison, where most suspects were held, Dr. Robert M'Donnell served as the medical officer. His report for 1865 stressed the hazards bread-and-water punishment posed for the prisoners' physical and mental health. According to the doctor, prisoners preferred a birching or handcuffs to the bread-and-water diet. As a protection of the prisoners' health, M'Donnell also had forbidden one form of punishment, the removal of the bed and all bedding except the rug.<sup>6</sup> M'Donnell muted his criticism even less in the next report, and he later claimed that the public version had been censored by his superiors. He urged that all prisoners have knowledge of the

<sup>5</sup> 'Report of the Inspectors General of Prisons in Ireland to the Lord Lieutenant, with regard to the escape of James Stephens', *SP*, 1866 (147) LVII, pp. 480–488.

<sup>6</sup> 'Twelfth Annual Report of the Directors of Convict Prisons in Ireland, 1865', *SP*, 1866 [3745] XXXVIII, pp. 484–485.

infractions for which they were punished: “. . . otherwise the punishment may have a maddening effect”. He acknowledged that all seriously ill prisoners were discharged. “Apart, however, from active disease the health of a good many of these prisoners has deteriorated from their prolonged confinement”. And “the necessity for treating the sick among political prisoners in their cells instead of admitting them to hospital wards for treatment, not only increased the severity of the discipline to which they were submitted . . .”, but also increased the staff’s work load.<sup>7</sup>

On 3 May 1867, J. A. Blake, an Irish M.P., asked the Chief Secretary, Lord Naas (later the Earl of Mayo), about the prisoners detained under the suspension of habeas corpus. The Chief Secretary replied that he had seen M’Donnell’s report and the next day had ordered an inquiry, which resulted in the relaxation of several of the rules. Conditions had improved, as Naas himself had observed on a personal visit. He also quoted a M’Donnell letter of 26 April in which the doctor could “report favourably” on the prisoners’ health.<sup>8</sup> For the moment, these changes settled much of the controversy surrounding the treatment of untried Fenian prisoners. Privately, however, a dispute was building within the prison service.

Dr. M’Donnell had made public his criticisms of other prison officials. After Lord Naas’s announced changes, one of the directors of convict prisons, Patrick J. Murray, used the occasion of the death of the doctor for Mountjoy Female Convict Prison to propose an alteration in the medical staff. To Sir T. A. Larcom, the permanent under-secretary, Murray wrote: “I have long been of opinion that the duty of medical officer could be far more efficiently and satisfactorily performed by a resident . . .”, who would attend both parts of the prison and replace the resident apothecary as well.<sup>9</sup> The dispensing of drugs was forbidden by the Royal College of Surgeons of which M’Donnell was a fellow, and M’Donnell had to refuse the new position. He applied for compensation, arguing that he had been removed through no fault of his own from a position that he had held for about ten years. Meanwhile, Murray in letters to the Chief Secretary was downgrading M’Donnell’s ability and performance.

The medical practitioners who seek appointment in the convict service are young men of ability, and to whom a fixed income with practice is of importance, and until their private practice or their duties as lecturers in medical schools are interfered with by their duty as prison officers, the latter duty is, more or less, carefully attended to; as soon, however, as practice or teaching is interfered with, the duty at the prison is, more or less, irregularly performed; the attendances are made at an hour that may be convenient . . .; in addition, the medical officers appear to consider that the hospital is neither more nor less than an additional school for their pupils, and when the impossibility of admitting strangers to the prisons is pointed out, very great dissatisfaction is expressed.

M’Donnell lived two miles from Mountjoy, which housed more than 700 prisoners, and he did not appear on Sundays or holy-days “unless required to do so by some special case”.<sup>10</sup>

<sup>7</sup> ‘Thirteenth Annual Report of the Directors of Convict Prisons in Ireland, 1866’, *SP*, 1867 [3805] XXXVI, pp. 292–293.

<sup>8</sup> *Hansard’s Parliamentary Debates*, 3rd ser., 186 (3 May 1867): 1933–34. Hereinafter this source is *Debates*.

<sup>9</sup> ‘Correspondence relative to the change in the medical management of the Mountjoy Convict Prison, whereby Dr. M’Donnell was deprived of office’, *SP*, 1867–68 (502) LVII, p. 521.

<sup>10</sup> *Ibid.*, p. 522.

While the Treasury explored the extent of M'Donnell's duties, the doctor grew more anxious about the compensation: "It is now not more to my pecuniary interests than to my feelings and reputation, that the matter should be settled without much further delay". If his application were denied, M'Donnell wrote, he might "take immediate steps to have the causes of disagreement between Mr. Murray and myself, and the reasons of the change made the subject of Parliamentary investigation". Less than a week later, M'Donnell was informed he would receive no retirement allowance, as he had not devoted his whole time to public service.<sup>11</sup>

M'Donnell refused to accept this answer. He continued his campaign with Lord Mayo, whom he believed to be sympathetic. M'Donnell was "convinced that the individual who recommended the change was actuated by feelings hostile to me". His medical care had checked a cholera epidemic in the prison in December 1866. He also held himself to be "the only Government official" who had spoken out against the excessive punishments meted out to the untried suspects. By being a moderating force, he believed he had protected the prisoners, the Government, and himself in a legitimate aspect of his role as surgeon:

... had I not had the courage and humanity to insist on their punishment being done away with, and had an inquest occurred on the body of any prisoner dying from acute disease engendered by this treatment, I should, in fact, have been ruined. While Mr. Murray, who directed the execution of the punishment, and who justified it by informing me, that it was in use in Spike Island [Convict] Prison, would have escaped from the blame, which in truth he merited. It was indeed so irksome to me to be obliged to witness this sort of suffering, that I contemplated resigning my office, and would have done so, had I not conscientiously believed that I was of use, not only in protecting the prisoners, but the warders also from hardship and unfair treatment.

M'Donnell denied that his actions had arisen from anything other than humane, professional concern: "... I entertain no sympathy for the criminality of the convict any more than for the fenianism of political prisoners".<sup>12</sup>

The controversy, having simmered for a year, began to boil. Murray who was ill went on leave, and Captain John Barlow, former senior inspector of convict prisons, took over the directors' duties which included defence of past actions. Barlow, although new to the directorship, must have felt his own reputation at stake. In an official memorandum, Barlow accused M'Donnell of making "visits at irregular and uncertain hours – hurried visits", at times held "to be inconvenient and to interfere much with the proper working of the prisons ...". M'Donnell was inefficient in producing necessary reports, delayed seeing patients and inspecting newly arrived convicts, gave prominence to his private practice, and, most tellingly, allowed the mortality rate to rise during his tenure. To Barlow, "the real enemies of the system are those who, as Dr. M'Donnell I regret to say has done, assail those honestly and conscientiously endeavouring, at a time of peculiar difficulty, to work the system in its integrity ...". When M'Donnell countered with charges that Murray and Barlow did not measure up to Crofton, it was clear the dispute had moved from a rather technical administrative point to charges of professional inadequacy, even neglect, by both sides.<sup>13</sup>

<sup>11</sup> *Ibid.*, p. 529.

<sup>12</sup> *Ibid.*, p. 532.

<sup>13</sup> *Ibid.*, pp. 536, 538.

The dispute grew even more personal before it closed. M'Donnell characterized Barlow as having "some colour of truth", but being "in the main very disingenuous". In punishing Jews and Unitarians for not attending Sunday services, Barlow showed himself "wanting in the common sense which is an all important qualification for a director of convict prisons". In his letter to the under-secretary, Barlow's anger led him to label M'Donnell's previous letter "as hostile and replete with personal animus" never before seen. He deemed the veiled charges of anti-Semitism and religious prejudice "most offensive" and "unworthy of notice in a public document". Finally he resented having his veracity questioned after twenty years in public service.<sup>14</sup>

Chief Secretary Lord Mayo ended the dispute in July 1868, when he relayed to M'Donnell word of the reduced compensation the Treasury had awarded, an amount which M'Donnell only grudgingly accepted. Why had the controversy become so heated and important enough to merit publication in the *Sessional Papers*? The political importance of the Fenians, even the untried lesser figures, brought public attention to any aspect of their care. Feeling the eye of public opinion on them, Murray and Barlow resented any criticism, especially criticism from a subordinate official whose reputation did not rest solely on the performance of penal responsibilities. And, probably above all, M'Donnell lacked the *esprit de corps*. Once considered an integral part of the prisoners' moral and physical reclamation, by the 1860s, prison doctors and chaplains seemed to be interfering amateurs, outside the administrative hierarchy that stretched from the warders, through the governors, to the directors of prisons. The state-run convict system, especially with Crofton's fame, felt itself to be the more advanced, the more professional of the two Irish prison services. But as with any other newly-acquired sense of pride, it was easily damaged.

M'Donnell (1828–1889), though relatively young, had some political and professional leverage. His father, Dr. John M'Donnell, was the medical member of the Poor Law Commission. Robert M'Donnell had obtained the M.B. from Trinity College, Dublin, and the licence of the Royal College of Surgeons in Ireland in 1851. Two years later, he had become a fellow of that college. Besides several teaching and administrative posts, M'Donnell had served with distinction as a volunteer civil surgeon in the Crimea. During the controversy, M'Donnell was studying the glycogenic function of the liver with a Royal Society fellowship and was pioneering blood transfusion. In short, he was building his professional reputation, which would eventually include additional academic posts, presidencies of the Royal College of Surgeons (1877–78) and the Royal Academy of Medicine (1885), and membership on three Royal Commissions, one ironically being the 1884–85 investigation of Irish prisons.<sup>15</sup> M'Donnell's family connexions, war record, professional standing in

<sup>14</sup> *Ibid.*, pp. 545, 547–558.

<sup>15</sup> J. D. H. Widdess, 'Robert M'Donnell – a pioneer of blood transfusion; with a survey of transfusion in Ireland, 1832–1922', *Irish J. med. Sci.*, 1952: 11–20; Cliona McDonald Buckley, 'Robert McDonnell (1828–1889)', *J. Irish Coll. Physns Surg.*, 1973, 3: 66–69; F. O. C. Meehan, 'The Victorian doctors of Dublin: a social and political portrait', *Irish J. med. Sci.*, 1 July 1968: 311–320; Sir Charles Alexander Cameron, *History of the Royal College of Surgeons in Ireland and the Irish Schools of Medicine*, Dublin, Fannin, 1916; and J. D. H. Widdess, *The Royal College of Surgeons in Ireland and its medical school, 1784–1966*, 2nd ed., Edinburgh and London, E. & S. Livingstone, 1967.

Dublin, and the fame of his prisoner patients both brought attention to his claims and held together his career.

In 1870, Gladstone's Liberal Government appointed a Royal Commission chaired by the Duke of Devonshire to investigate the convicted Fenians' treatment in English prisons. Testimony revealed Jeremiah O'Donovan Rossa's long history of unusually severe punishments. In 1868, after he had thrown the contents of his chamber-pot in the governor's face, he had been placed for the next thirty-four or thirty-five days in handcuffs, sometimes fastened behind his back. This produced the famous image of O'Donovan Rossa lapping his food like a dog. The length of punishment apparently came from official oversights rather than actual malice. The Devonshire Commission found that generally Fenians had received no worse treatment than other prisoners, but the revelations did speed the release of a number of Irish political prisoners, including O'Donovan Rossa. Among its recommendations, the Commission's report noted the need for medical officers trained as both physicians and surgeons, more precise medical examinations upon admission, and frequent weighings to determine convicts' fitness for labour.<sup>16</sup> Implementation of these recommendations meant that prison doctors became even more responsible for the care and health of prisoners, including political prisoners.

In 1877, the Conservative Government introduced three bills to create separate, centralized prison systems in England and Wales, Scotland, and Ireland. Both convict and local prisons in Ireland were to be put under the supervision of the new General Prisons Board. In the debate on these bills, the role of prison doctors and the treatment of political prisoners were important issues to the Irish leaders. The astute Charles S. Parnell grasped several political opportunities with an active role in these prison debates. Since his entry into politics three years before, Parnell, like most other Home Rulers, had campaigned on a platform of denominational education, fixity of tenure at fair rents, and amnesty for the remaining Fenian prisoners, Michael Davitt among them. Such a stance won him Fenian support without placing him under their control. Although fulfilment of campaign promises and political manoeuvring for leadership marked his conduct, Parnell had a genuine concern about prison conditions. "His amendments to the prisons and mutiny bills if unwelcome from an Irish member, were quite legitimate, and several English members warmly commended the work which he had done in drawing attention to the barbarian nature of penal legislation".<sup>17</sup> Parnell did not get the Government to accept clauses guaranteeing special, lenient status to treason-felons or those arrested under suspension of habeas corpus, but he did succeed for those convicted of sedition or seditious libel.

Parnell suggested a number of amendments to general prison rules, several of them concerning prison doctors, which the Government also accepted. These rules for local prisons ordered surgeons to visit each prison at least twice a week; to visit daily prisoners confined to punishment cells; to keep a daily journal outlining diseases and

<sup>16</sup> 'Report of the Commissioners appointed to inquire into the treatment of treason-felony convicts in English prisons', *SP*, 1871 [c. 319] XXXII, pp. 8–9.

<sup>17</sup> David Thornley, 'The Irish Home Rule Party and Parliamentary Obstruction, 1874–87', *Irish hist. Stud.*, March 1960, 12: 47.

treatments; to inspect cleanliness, drainage, warmth, ventilation, clothing supplies, and water; and to record the particulars about any prisoners dying in gaol.<sup>18</sup> According to other prison rules not introduced by Home Rulers, prison surgeons could, to insure the prisoners' health, order extra food, bedding, and hours of exercise; allow in supplies of liquor and tobacco; and allow exemptions from shaving, hard labour, and special punishments. In several instances, the surgeons could override governors, and if they considered "a prisoner's life to be in immediate danger by further confinement" they could report that condition directly to the under-secretary and the General Prisons Board.<sup>19</sup> These rules made the prison doctors easy targets for demands and abuse from political prisoners. If the governors on orders from the General Prisons Board and/or the Chief Secretary refused to acknowledge the prisoners' special or political status, the doctors had the power to make the exemptions equal to the status demanded by the prisoners.

In the late 1870s, while these legal and administrative changes were being implemented, Ireland slipped into an agricultural depression. Violence grew as tenants who could not pay their rents were evicted. The National Land League, with Parnell as its president, became a tenant relief agency, which also organized boycotts against evictions. The Liberal Government, believing increased violence and League membership intertwined, arrested the more vocal League leaders, Parnell, John Dillon, Thomas Sexton, and others. When ordinary criminal procedures failed against these men, the Protection of Person and Property Bill was passed in 1881. The P.P.P. Act, as it was known, allowed the Lord Lieutenant to arrest and hold any person suspected of treason or any act of violence or intimidation.

Under the provisions of the P.P.P. Act, the "suspects" were held under special prison rules at least as lenient, if not more so, than those for other prisoner classifications. They could purchase and consume daily not more than one pint of beer, cider, or fermented liquor, or one pint of wine. They retained their own clothing and could purchase more. Only those with ragged or dirty clothing had to accept special prison garb. Unlike convicted criminals, the Leaguers did not have the customary shaves and close-cropped haircuts, unless the prison doctors determined their hair unclean. If possible, they remained totally separate from criminal prisoners. Often they lived in interrogation rooms, infirmaries, and staff rooms, all offering more heat and light and less depressing atmosphere than regular cells. Their exercise periods, rights of association with each other, access to books and newspapers, and letter and visitation privileges far exceeded those of the first-class misdemeanant.<sup>20</sup>

These rules awaited Parnell, Sexton, Dillon, William O'Brien, and others when they entered Dublin's Kilmainham Prison in October 1881. Generally, they spent their days quietly reading, playing games including handball, and conversing in the main hall around linen-covered tables laden with food and gifts. While most criminal prisoners had been removed from Kilmainham, a few were kept to serve as orderlies

<sup>18</sup> *Debates*, 3rd ser., 236 (4 August 1877): 443–445.

<sup>19</sup> 'Rules for local prisons in Ireland, with Orders in Council, settling and approving the same', *SP*, 1878 (119) LXII, pp. 815–816.

<sup>20</sup> 'Regulations made by the Lord Lieutenant under the Protection of Person and Property (Ireland) Act, 1881', *SP*, 1881 (130) LXXXVI, p. 667 *et. seq.*



and cleaners. Parnell wrote to Mrs. O'Shea that his orderly served all his meals and fixed his nightly hot whiskey.<sup>21</sup>

Despite the lenient, even luxurious treatment, confinement began to tell on many who were already in frail health. Sexton, so ill that he had had to be released on a previous occasion, spent only one day out of bed from his Kilmainham reception until his release. Sexton later charged that he had been kept in solitary confinement as punishment, while officials argued that they had merely tried to provide needed quiet. Dillon also had been released on a previous occasion, when Kilmainham's doctor feared for his life and two outside doctors had concurred. He was a dyspeptic with a family history of tuberculosis, but this second time prison officials did not feel he was in actual danger.<sup>22</sup> Parnell himself was not strong, and wanted to be with Mrs. O'Shea to console her on the death of their child. He was also losing control of the movement to more radical elements.

Informed by Kilmainham's doctor and others including one of Parnell's fellow prisoners who was a doctor, officials were quite aware that many suffered from deteriorating health. The Government also realized that agitation had not ended and that only a free Parnell might be able to stop the violence. Hundreds of P.P.P. Act prisoners had pushed the Irish prison system to its limits. By 1882, twelve prisons housed "suspects" whose special privileges had forced remodelling, the hiring of extra warders, and overtime by superior officers and prison doctors. Both sides were ready to agree to the "Kilmainham Treaty", which traded promises of land reform and no coercion for Parnell's attempts to quell the violence and intimidation. Parnell and other leaders were released just before the compromise dissolved with the Phoenix Park murders. Gladstone's ministry responded to the murders with a new coercion act which gaoled political prisoners as ordinary criminals. With political alignments unstable and the Liberals reluctant to use the measure, there were few imprisonments under the new legislation. The Irish prison system had a respite before the next influx of political prisoners.

During the lull, the Government appointed a Royal Commission on Irish Prisons which scrutinized all aspects of the system in 1884–85. Generally, the Commissioners faulted the Board for not having carried out its initial task, namely the elimination of unnecessary, outmoded gaols to achieve a uniform, centralized, and less expensive system. Commission testimony showed the Board members to be inept, entangled in their own bureaucracy, and unco-operative with each other and their subordinates. On the question of medical attendance at prisons, convict and local, the Commission found that "as a rule, they discharge their responsible duties with conscientious care and regularity . . .". The final report went on to note that the recent Prisons Act "had imposed very considerable duties and very grave responsibilities on them, which made

<sup>21</sup> Joseph V. O'Brien, *William O'Brien and the course of Irish politics, 1881–1918*, Berkeley, University of California Press, 1976, pp. 20–22; F. S. L. Lyons, *Charles Stewart Parnell*, New York, Oxford University Press, 1977, pp. 180–204; and Tighe Hopkins, *Kilmainham memories*, 2nd ed., London, Ward, Lock, 1896, pp. 12–27.

<sup>22</sup> *Debates*, 3rd ser., 267 (13 March 1882): 793–794; 'Letter from the Vice-Chairman of the Irish General Prisons Board in reply to statements made in the House of Commons by Mr. Sexton, M.P. . . .', *SP*, 1882 (158) LV, pp. 665–669; F. S. L. Lyons, *John Dillon*, London, Routledge & Kegan Paul, 1968, pp. 61–66.

their post one involving greater time and labour, as well as anxiety, than under the old Acts".<sup>23</sup> Some prison doctors had not measured up to their new duties or had fallen prey to the anxiety.

From the Commission's investigation of Omagh Prison, it is possible to reconstruct the problems a prison doctor faced. Although one of the Board's larger and more important local prisons, Omagh had a history of unfavourable medical reports. The last visit of the inspectors-general found the sewerage faulty and the possible source of the typhoid fever which had afflicted prisoners and officers alike. Dr. Edward C. Thompson, medical officer of Omagh since 1875, used his reports to warn higher authorities; for example, his report for November 1879 read in part: "Bad Sewerage. The prison has been more than once threatened with outbreak of typhoid fever". Involved in the problems of centralization and the P.P.P. Act prisoners, the Board members and their immediate subordinates had neither the time nor the money to devote to repairs until the winter of 1881–82, when the governorship of Omagh changed hands. After new Governor Disney's arrival, Thompson continued to warn: "It would not be safe for anyone to live in the place at present". On this point, Thompson said he could "hardly speak too strongly", especially with the sewers there open for estimates and repairs.<sup>24</sup> Disney's reports and the Board orders frequently crossed in the mails, and Disney was left to believe that it was his duty to sleep in the governor's quarters. He died of typhoid fever in February 1882, just six weeks after assuming office.

Disney may not have felt he could rely on Thompson, whose appointment was a typical example of nineteenth-century patronage. Apparently Thompson's chief qualification was that his father had held the position before him. His early reports and his testimony before the Commission reveal contradictory statements about his medical findings. He did not seem to know precisely how many children of Disney's predecessor had died while under his care, and he variously ascribed their deaths to typhoid and diphtheria. In all fairness, Thompson should not be measured against the standard of present medical knowledge. Many epidemiologists would have agreed as late as the mid-seventies that those diseases were carried in the air, rather than transmitted in contaminated drinking-water or milk. Neither the typhoid nor the diphtheria bacillus was identified until the 1880s. But the two diseases do produce different pathologies.<sup>25</sup>

Supposedly, the General Prisons Board relied on honorary member Sir J. F. O. Lentaigne for medical judgments. Lentaigne, a qualified doctor, was a graduate of Trinity College. Moreover, he had served as a director of convict prisons from 1862 to 1877. A member of the Board since its inception, he served without pay. He had devoted his life to reformatory and industrial schools of which he was an inspector. However, born in 1803, he was an old man when he appeared before the Commission. For his part, Lentaigne testified that he had never practised medicine and that when he

<sup>23</sup> 'First Report of the Royal Commission appointed to inquire into the administration, discipline, and conditions of prisons in Ireland', *SP*, 1884–85 [c. 4233] XXXVIII, p. 20.

<sup>24</sup> *Ibid.*, pp. 146–147.

<sup>25</sup> *Ibid.*, pp. 341–344; Jeanne L. Brand, *Doctors and the State: The British medical profession and government action in public health, 1870–1912*, Baltimore, Md., Johns Hopkins Press, 1965, pp. 54–58.

ventured a medical opinion about prison conditions it was not heeded.<sup>26</sup> Both Thompson and Lentaigne show that the Board selected or retained those persons at hand, whether the best for the job or not.

There was also evidence of friction between the General Prisons Board and the medical officers. Disagreements which began over duties and salaries at the time of centralization deepened when the chairman, the Hon. Charles F. Bourke, circulated a memorandum in May 1879. The memorandum argued that doctors holding joint appointments to the county gaols and infirmaries would have to be reappointed by the Lord Lieutenant to their prison office. Forced to break away from the older Association of County Infirmary and Gaol Surgeons, they formed the new Association of Prison Surgeons. The new association's honorary secretary, Dr. Hercules H. MacDonnell of Dundalk Prison, submitted a memorandum to the Commission on the doctors' anger and frustration, which had only partially lessened with clarification of the Board's circulars on the appointment issue and a new salary schedule to accompany the increased duties.<sup>27</sup>

In their final report, the Commissioners urged the appointment of a superintending medical officer:

... possessing the professional knowledge requisite to judge whether a Prison Surgeon's functions are, or are not, in any particular case, properly fulfilled. We have observed, moreover with regret, that there is considerable friction in the relations of some medical officers with the Board; and we cannot but think that many a misunderstanding and difference might be averted by the appointment of such a Superintending Medical Officer, thoroughly conversant with the professional habits and opinions of medical men.<sup>28</sup>

England had had such an officer since 1879, and his appointment had seemed to regularize prison medical service. In a paper read before the Statistical and Social Inquiry Society of Ireland, Hercules MacDonnell supported the idea: "To his care and knowledge vast improvements will be confided, improvements not the less real because hitherto they have not been brought prominently forward – changes in the present system which fetters and retards the prison medical officers in the due performance of their functions; which will permit them, while not relaxing discipline, to maintain health, and protect those under their charge from undue severity". MacDonnell believed that co-operation from the prison doctors would be forthcoming "if sought for in a friendly spirit . . .".<sup>29</sup> The political atmosphere of the next years made it difficult to sustain that friendly spirit. Indeed, while admitting that the prison system had encountered unusual difficulties with Ireland's "political and social ferment", the Commissioners argued that the system and the Board should be prepared for just such "interruptions in regular administration".<sup>30</sup>

"Interruption" is a mild word to describe what happened in the late 1880s.

<sup>26</sup> 'First Report of the Royal Commission appointed to inquire into the administration, discipline, and conditions of prisons in Ireland', *SP*, 1884–85 [c. 4233] XXXVIII, p. 412.

<sup>27</sup> *Ibid.*, pp. 168–170.

<sup>28</sup> *Ibid.*, p. 20.

<sup>29</sup> Hercules MacDonnell, 'A review of some of the subjects in the Report of the Royal Commission on Prisons in Ireland', *J. Statistical and Social Inquiry Society of Ireland*, July 1885, 8: p. 623.

<sup>30</sup> 'First Report of the Royal Commission appointed to inquire into the administration, discipline, and conditions of prisons in Ireland', *SP*, 1884–85 [c. 4233] XXXVIII, pp. 14, 24.

Intensified Home Rule and land reform agitation, coupled with the Conservative Government's Jubilee Coercion Act of 1887, led to the imprisonment of most important Nationalist leaders, with the major exception of Parnell. Leaders like William O'Brien and John Dillon, plus hundreds of their followers, were subjected at the direction of Chief Secretary Arthur J. Balfour, to the plank bed, prison diet and uniforms, regulation haircuts and shaves, and all other restrictions placed on ordinary prisoners.

Balfour and the Irish Nationalists hotly disputed the Government's refusal to recognize Crimes Act prisoners as political offenders. This political contest had important consequences for the prisons and their officers, no administrators more so than the men who served as medical members of the General Prisons Board. These were men pulled in opposing directions, and their actions, real or supposed, were subject to public criticism. As bureaucrats, they helped set general diet, work, and punishment regulations which as doctors, they had to moderate in individual cases. To countermand a prison surgeon, as insight or duty might require, was to expose both a fellow civil servant and a professional colleague to public disdain. To admit that any prison was unhealthy or that imprisonment had endangered any prisoner was to admit a specific error or general incompetence. At times, the public criticism was severe enough to threaten their professional reputations, on which future private practice or official appointments might rest. Often the medical members found their effectiveness undercut by fellow G.P.B. members and the Chief Secretary's Office as well.

The post of medical member went first to Dr. F. X. MacCabe, licentiate of King's and Queen's College of Physicians, Ireland, and member of the Royal College of Surgeons, England. As former medical superintendent of Dundrum State Asylum, he had supervised among others the most troublesome of ordinary prisoners, the criminally insane. After Dundrum, he had served as the G.P.B.'s medical adviser for two years, fortunately or unfortunately for him, years of relative quiet. Neither position adequately readied him for the flood of political prisoners, which came just months after his promotion to medical member of the Board. To understand MacCabe's problems, one needs only to look at the Tullamore imprisonments of William O'Brien and John Mandeville in 1887–88 and the coroner's inquests on Mandeville and Dr. James Ridley, Tullamore's surgeon, in the summer of 1888.

Sentenced together in the shadow of the Mitchelstown Massacre, O'Brien and John Mandeville, a prosperous tenant farmer and fellow "Campaigner", spent most of their terms in Tullamore. There they refused to wear prison clothing, associate with criminal prisoners, or do minor cleaning chores. One night while O'Brien slept, a warder removed his clothing from the cell. Refusing to wear prison clothing, O'Brien sat on his plank bed wrapped only in his bedclothes. A massive demonstration in Trafalgar Square, in part, protested at his situation, and Nationalists assailed the Government at every opportunity. Finally, after a week, a Blarney tweed suit, soft hat, and green tie were smuggled in for O'Brien. The next day, MacCabe arrived at Tullamore and found O'Brien so frail as to preclude forcible stripping. Balfour was not satisfied with MacCabe's findings and asked that an English prison surgeon come over for verification. Dr. James Barr of England's Kirkdale Prison found O'Brien to be a thin man whose recent weight loss and family's poor health history made forcible

stripping ill-advisable. But Barr thought O'Brien would be able to finish his sentence.<sup>31</sup>

Balfour had little choice, but to allow O'Brien to remain in what became known as his "Tullamore tweed" suit. Perhaps the Chief Secretary felt he could not fully trust the medical men at hand. At different times, under-secretary Sir Joseph West Ridgeway reported that O'Brien had "sheltered himself behind the doctor [Tullamore's Ridley] . . .". At Ridgeway's urging, Bourke kept MacCabe away from Tullamore when the medical member "suggested the possibility of our having to release O'Brien before his time". When Barr had first arrived, Ridgeway had been dismayed: "He is an Irishman! But he *says* he is loyal". And Ridgeway noted that another official had warned that Barr "ought to be well paid else he may play us a trick".<sup>32</sup> Despite this distrust, Barr had become too well known to be removed. To have enlisted another external expert might have further eroded the Board's stature or, more, have made it all too clear that Balfour wanted to hear only a certain kind of medical opinion. Therefore, the Government had to rely on Barr.

John Mandeville had a gaol experience different from that of O'Brien. Leaving Tullamore just before Christmas 1887, Mandeville returned to an active role in the "Plan of Campaign". In the midst of his activities, on 8 July 1888, Mandeville died. At the coroner's inquest, the Nationalist lawyers representing Mandeville's family argued that his gaol treatment had caused his death. Lawyers for the G.P.B. held that Mandeville, dying some six months after leaving Tullamore, had worn himself out speaking at open-air meetings conducted during inclement weather.

Although a number of official and Nationalist witnesses, including O'Brien, appeared, some of the most interesting testimony came from medical men called by both sides. The first of these witnesses was Dr. G. F. Moorhead, a member of King's and Queen's College, Ireland, a licentiate of the Royal College of Surgeons, and a justice of the peace for King's County. As a magistrate, Moorhead had the right to visit Tullamore Gaol and its prisoners, a right he availed himself of thirteen times while Mandeville was there. Moorhead saw the prisoner undergo bread-and-water punishment, which the doctor believed "might not produce a fatal, but it was calculated to produce a pernicious effect on his constitution". Moorhead repeatedly advised that Mandeville should be removed to the hospital, which he was not. When asked whether he had ever passed on his recommendations to Dr. James Ridley, the gaol surgeon who was his professional colleague/rival, Moorhead said he had not.<sup>33</sup>

The three doctors who attended Mandeville in his last days all agreed that the cause of death had been heart failure from diffused septic inflammation of the throat glands. One of the three was Dr. Edward M'Craith, who held a diploma from the Royal College of Surgeons and Physicians, Edinburgh. Like so many other doctors at the inquest, he held official posts, as surgeon to the Mitchelstown dispensary and to the constabulary. M'Craith related Mandeville's death to prison treatment: "I should say

<sup>31</sup> William O'Brien, *Evening memories*, Dublin, Maunsel, 1920, pp. 313–315; Ridgeway to Balfour, 3 December 1887, Balfour Papers, British Library Add. MS. 49808; and Barr to Bourke, 27 November 1887, Balfour Papers, BL uncatalogued material designated 13/11 (7).

<sup>32</sup> Ridgeway to Balfour, 10, 27 November and 1, 6 December 1887, Balfour Papers, BL Add. MS. 49808.

<sup>33</sup> 'Transcript of the shorthand writer's notes of proceedings at the coroner's inquest on the body of Mr. John Mandeville at Mitchelstown', *SP*, 1888 (373) LXXXIII, pp. 106–116.

the first cause was the lowering of his nervous and physical system from the treatment received in prison, by the change of the normal condition of his previous life". Dr. Patrick J. Cremen, a specialist called in from Cork, concurred. Cremen's opinion had behind it the weight of twenty years' experience, a degree from Queen's University, Ireland, and membership of the Royal College of Surgeons. Lawyers for the G.P.B. were unable to shake these doctors' conviction that the fundamental cause of Mandeville's death was his Tullamore treatment.<sup>34</sup>

The Board's lawyers called their own medical witnesses, MacCabe and Barr, whose own reputations were at stake. By the time he testified, MacCabe had left the G.P.B. for a similar position with the Local Government Board. MacCabe argued that when he saw Mandeville on 19 November, he "could find nothing wrong . . .". Despite reports of the prisoner's weight loss, he did not fault the diet which as medical member he had helped develop. MacCabe, however, undercut his own defence against charges of a conspiracy to weaken Mandeville, when he contradicted himself as to whether Chief Secretary Balfour through Chairman Bourke had ordered him specially to Tullamore.<sup>35</sup>

The Government's chief witness was Dr. James Barr, a graduate of Glasgow University and a licentiate of the College of Surgeons, Edinburgh. He recounted that he had found Mandeville "a strong, healthy, rather corpulent man", words which echoed the private report he had made at the time to Bourke. Mandeville was fit for the punishments he received, so it was not Ridley's "right to prevent punishment". Barr spread his own accusations widely: the attending physicians had not given the correct treatment, "I say he did not get a chance for life"; three other doctors and the widow had given false testimony. Under cross-examination, Barr admitted to using words to the effect "that Mandeville was a great scoundrel and deserved what he got". Barr's comments led one of the Nationalist lawyers to ask what he clearly meant as an ironic question: "Are you a medical gentleman?"<sup>36</sup>

The jury, reaching a verdict after only thirty-five minutes of consultation, condemned "the vile aspersions of Dr. Barr". More important, the jury found "that John Mandeville died on the 8th of July of diffuse cellular inflammation of the throat as defined by the Doctor, brought on by the brutal and unjustifiable treatment he received in Tullamore Gaol".<sup>37</sup>

One important medical witness did not testify at the Mandeville inquest. On 20 July 1888, Dr. James Ridley, the Tullamore surgeon, committed suicide in his room at the Royal Hotel, Fermoy. After hearing the opening days of the Mandeville inquest testimony, Ridley slit his throat with his own razor. At the August inquest, Crown and family lawyers argued that the Nationalists had harassed and boycotted him and that professional rivals, especially Nationalist visiting justice Moorhead, had discredited him to take his patients and his official posts. Lawyers representing the Mandeville family and Dr. Moorhead argued the Nationalist viewpoint. Dr. Ridley, a sensitive,

<sup>34</sup> *Ibid.*, pp. 118–135.

<sup>35</sup> *Ibid.*, pp. 151–156.

<sup>36</sup> *Ibid.*, pp. 179–188.

<sup>37</sup> *Ibid.*, p. 216.

nervous man, had been pushed by the Government into acting contrary to his personal conscience and his professional ethics. The Nationalists held that they had centred their criticisms on the prison system and Ridley's superiors, not on the doctor, who was a minor cog in the coercion machinery. Throughout the testimony there were veiled hints and sometimes open charges of dishonesty, unethical practices, suppression of evidence, and opposing conspiracies, which supposedly involved doctors for the Government and for the Nationalist side.

Two members of the Ridley family gave testimony which opened the inquest. His father, George Ridley, reported that his only son had earned a comfortable living of £400–£500 from private practice and several offices: "county infirmary surgeon, prison surgeon, dispensary doctor, Constabulary physician, and whenever it became necessary he officiated as military surgeon". Having seen his son before and during the Mandeville inquest, Ridley remembered his son as both "very low and depressed" and "very much excited". He traced the doctor's tension to the previous November, the beginning of O'Brien's and Mandeville's imprisonments and the onset of unfavourable reports in the Nationalist press. In the closely-knit Tullamore power structure, George Ridley was a visiting justice at the prison, and he believed that his son had "discharged his duty honestly". Hearing that Tullamore residents were shunning the doctor on the streets, Ridley convinced his fellow justices to ask Dublin authorities for an independent doctor to examine the Crimes Act prisoners and allay people's fears unduly aroused by false, misleading newspaper accounts. Ridley and other visiting justices blamed Dr. Moorhead for releasing premature, slanted stories to the *Freeman's Journal*. Nationalist Moorhead had done so to further his practice at the expense of his professional rival Ridley.<sup>38</sup> Much of this testimony was confirmed by George Ridley's nephew, Dr. George P. Ridley, who had practised with his cousin, James. He saw his cousin as "a man of delicate, sensitive nature and a strong sense of duty". Their joint practice had been damaged by people staying away, people who also "groaned at" James in public. Later testimony revealed that Dr. George Ridley had been superseded by Dr. Moorhead as dispensary surgeon.<sup>39</sup> The Ridley family's lawyer, whose questions had brought out much of this testimony, had served the Prisons Board at the earlier Mandeville inquest. Again his questions worked to exonerate prison officials of acting illegally and harmfully toward prisoners or toward one another.

Police officers from Tullamore and Fermoy appeared. One inspector, who had known Ridley for three years, saw two broken panes of glass in the doctor's home during O'Brien's imprisonment. And a sergeant remembered Ridley as saying that people spat on him in the streets. Fermoy officers reported on the death scene and brought letters from Barr to Ridley, which were found in the hotel room, letters which indicated a friendly personal and working relationship between the two.<sup>40</sup> Visiting justices, other than the senior Ridley, believed the doctor "incapable of cruelty", yet the "duties of a prison physician were sometimes very unpleasant" and "to a man of

<sup>38</sup> *The Times*, 1 August 1888.

<sup>39</sup> *Ibid.*, 1, 15 August 1888.

<sup>40</sup> *Ibid.*, 1, 2 August 1888.

Ridley's nature they would be repugnant". The justices chastized Moorhead for simultaneously entering his criticisms in the visitors' book and reporting those same problems to the Nationalist newspapers. Officials should have had time to respond.<sup>41</sup>

Among the officials angered by the charges of cruelty and incompetence were Tullamore's governor and deputy governor. Importantly, both were witnesses to the Ridley death scene. By the time he testified, former Deputy Governor Thomas Andrews had been promoted to the governorship of Downpatrick Prison. His tenure at Tullamore corresponded with O'Brien's stay. In response to jurors' questions, Andrews said he had been sent to Tullamore to alleviate the governor's burden of taking so many visitors through the institution, not for the more sinister purpose of coercing or forcing O'Brien with prison dress against medical orders.<sup>42</sup> But his transfer and promotion were interpreted differently by the two sides – rewards for loyal service or for secret duress. Andrews' superior at Tullamore, Captain H. Fetherstonhaugh, also gave testimony. Fetherstonhaugh had heard Ridley lament: "I am ruined; I will lose all my practice". The governor blamed Nationalist pressure and claimed he had never pushed Ridley to declare prisoners fit for punishment. However, a rather off-hand comment gave some idea of the covert constraints placed on Ridley: "He was most attentive to his duties as prison surgeon and also as surgeon to the county infirmary, of which I am also Governor". Fetherstonhaugh singled out Dr. Moorhead as chief instigator of Ridley's problems: "I cannot say that Dr. Moorhead was a truthful man. He greatly exaggerated reports about the prison". In contrast, Dr. Barr and Dr. MacCabe had acted well and supported the beleaguered prison surgeon.<sup>43</sup>

In their own appearances, the two doctors substantiated Fetherstonhaugh. During a discussion with Ridley and Moorhead, MacCabe had said he was sorry to see a member of his own college act unprofessionally toward a brother professional, Ridley. Questioned as an expert on mental disease, MacCabe described Ridley the evening before his death as a man "certainly suffering under a severe mental strain". As evidence of his expertise, MacCabe referred to his article 'On mental strain and over-work', which had appeared in the *Journal of Mental Science* in 1875. MacCabe, at that time honorary secretary for Ireland to the Medico-Psychological Association, argued that scientific advancements and modern society in general had greatly increased the mental strain and work of public servants and professionals, including doctors who acted in both roles. Nationalist lawyers would have done well to examine MacCabe on the contents of his paper. The former medical member of the G.P.B. outlined the moral/ethical dilemma faced by a conscientious civil servant: "There are few men of any wide experience who will not admit that, when an intricate and delicate duty has to be performed, one of the great difficulties of life is . . . in reconciling that which it is right to do with the course that may from circumstances of expediency, prejudice, or precedent, offer the line of least possible resistance to the attainment of that desired end". This was a basic element of the Nationalist reasoning about Ridley. And

<sup>41</sup> Ibid., 3, 4 August 1888.

<sup>42</sup> Ibid., 17 August 1888.

<sup>43</sup> Ibid., 3, 4, 8, 15 August 1888.



MacCabe's description of a person under strain matched those of Ridley given by prisoners, officials, and family members: "In this class the symptoms that denote mental strain are irritability of temper, and excitability with regard to trifles, symptoms most certainly indicating impending exhaustion of nerve-power".<sup>44</sup>

But that July morning in Fermoy, the medical man who first realized that Ridley might have committed suicide under such stress was Dr. James Barr. It was he who broke down the hotel door and offered the first medical attention. There he was joined by Fetherstonhaugh, MacCabe, and Andrews before the arrival of the police. While no serious accusations of conspiracy in Ridley's death were made, these were the men who might have used Ridley as a scapegoat or might not have wanted the doctor to testify. For his part, Barr admitted to having locked Ridley's bag and carried it to his own room. In this bag were the letters, which showed a relatively friendly relationship between the two men, despite charges that Ridley had been hounded by the more forceful Barr.<sup>45</sup> As no handwriting experts were called, it must be assumed that all sides believed the letters to be genuine. However, the preservation of such letters also seemed a convenient coincidence.

For the most part, Barr defended his performances at Tullamore Prison and at the recently concluded Mandeville inquest. According to his instructions, he was left "perfectly independent", for "I did not allow myself to become the catspaw of the Government or the catspaw of anyone". By contrast, Dr. Moorhead had "most undoubtedly" breached professional ethics by publishing adverse reports and thereby taking over some of Ridley's patients. When asked if he did not consider it a breach of professional etiquette "to try and get Mr. Moorhead removed from the commission of the peace", Barr replied it was his "duty to protect Dr. Ridley from the false accusations made by a medical man or anyone else". He "did not think it would have injured Dr. Moorhead's practice if he had been deprived of it . . .". As to the accusations about four other doctors' inept, even fatal, care of Mandeville, Barr did not retract them. In later testimony, he was forced to admit that he had never treated a similar case alone and that if the symptoms were true Mandeville was doomed from the disease's onset. The lawyer who appeared for Mandeville's next-of-kin openly admitted that this line of questioning was "to throw discredit on this man, who had thrown discredit on a far more eminent man". That statement was greeted by applause from courtroom spectators.<sup>46</sup>

Spectators also cheered the testimony of three Nationalist M.P.s who had been in Tullamore in the winter of 1887–88, William O'Brien, Alderman John Hooper, and W. J. Lane. O'Brien remembered a number of conversations in which Ridley had prophesied "that from the first time he heard we were coming to Tullamore he had a haunting feeling that it would end badly . . .". O'Brien observed that "every official seemed to be under a superstitious terror of the power of the Prisons Board, Mr. Balfour, or somebody in Dublin Castle". This was a terror Ridley felt when he ended

<sup>44</sup> Frederick X. MacCabe, 'On mental strain and overwork', *J. ment. Sci.*, 1875, **21**: 395. See also: Barbara T. Gates, 'Suicide and the Victorian physicians', *J. Hist. behav. Sci.*, 1980, **16**: 164–174.

<sup>45</sup> *The Times*, 11 August 1888.

<sup>46</sup> *Ibid.*, 11, 16 August 1888.

punishments or smuggled in extra food for the prisoners. Once when Ridley smuggled in to O'Brien a poem that some admiring ladies had written, the doctor was more afraid of his superiors than of a death threat in a letter signed an "Irish Maid" which he had received. Ridley passed off the threat, according to O'Brien, with some comment about girls being greatly interested in the famous prisoner. O'Brien summed up his estimation of Ridley thus: "It seemed to me that he was a kind, conscientious, but a weak nervous man".<sup>47</sup>

Hooper believed Ridley had certified Mandeville to be fit for punishment "when he knew it to be extremely dangerous" so as "to save his reputation with the Prisons Board . . .". And Lane reported Ridley feeling "he was closely watched from Dublin and was afraid of having this mysterious doctor sent down again . . .". Barr, in his own testimony, admitted that he had refused to give his name to the gatekeeper or any prisoner in Tullamore. He may have been unknown at first to Ridley as well. When Lane first heard the news of Ridley's death, he had speculated that "he was murdered for the purpose of preventing him from telling them what he knew". Lane had changed his mind, but only to a degree: ". . . Dr. Ridley had committed suicide, rather than face the admission that he had allowed himself to be compelled to ill-treat Mr. Mandeville, and I have not the slightest doubt that that was the reason".<sup>48</sup> Others may have felt doubt, but it was certainly to the Nationalists' advantage to argue that Government officials destroyed even their own.

Local figures were less circumspect in their remarks. The Rev. Father Murphy of Tullamore, vice-president of the Nationalist League there, called Ridley a hypocrite in that he, a Protestant, sprinkled holy water on his Catholic patients and called on them to invoke the names of Mary and Jesus. Rev. Murphy also made one of the most serious charges that can be made against a doctor, that of immorality with a female patient, in this case, a retarded, deformed girl. When pressed for details or additional incidents, Murphy pleaded the confidentiality of what he had heard in his religious capacity.<sup>49</sup> Angered by newspaper reports of this charge, George Ridley asked and was allowed to appear again. He refuted the charges by referring to an inquiry made by Murphy's religious superiors which cleared his son's name. Moreover, one time when Dr. Ridley visited the girl, he met Dr. Moorhead and Father Murphy coming out of her house. George Ridley, when he learned of these circumstances, had urged his son to leave the case.<sup>50</sup>

Represented first by Ambrose Mandeville, John's brother, and then by his own brother, Dr. G. F. Moorhead defended himself against the charges that he had released incorrect information about O'Brien and Mandeville for two unethical reasons. One reason was supposedly to embarrass the Government and thereby further the Nationalism with which he sympathized. Second, he intended to discredit Dr. Ridley so as to garner some of his patients. Moorhead did admit to having joined the Nationalist League in 1885 to further his chances in an election for medical officer

<sup>47</sup> *Ibid.*, 9 August 1888.

<sup>48</sup> *Ibid.*, 10, 16 August 1888.

<sup>49</sup> *Ibid.*, 8 August 1888.

<sup>50</sup> *Ibid.*, 10 August 1888.

to the workhouse: “It was the only way to get it, but my own principles were always National”. As to claims that these Nationalist principles precluded fair, accurate assessments of prisoners’ health, Moorhead alleged: “. . . I was not there as a political partisan, but that I was there in the interests of humanity and justice and the virtue conferred on me by my commission”. Knowing his reports should have no effect in official channels, he delivered them to a reporter for the *Freeman’s Journal*. Contrary to the reports of other witnesses, Moorhead could remember several instances of speaking with Ridley, both inside and outside the prison walls during the crucial time. On the question of rival practices, Moorhead did not think he had acquired any of Ridley’s patients, “but I am sure he got some of mine”. If anything, he believed he had strengthened Ridley’s hands in dealing with his superiors over political prisoners. In short, he felt no responsibility for Ridley’s suicide.<sup>51</sup>

After closing summations, the coroner asked the jury to decide whether Ridley had committed suicide while temporarily insane. The coroner undercut Barr’s testimony by saying: “Eminent men were ever modest and reserved, but Dr. Barr did not display those qualities”. With less than two hours of deliberation they returned a verdict:

We find that Dr. James Ridley died on the 20th of July, 1888, at Fermoy, from wound inflicted by his own hand with a razor while labouring under temporary insanity produced by the apprehensions of disclosures at the Mitchelstown inquest; that he was compelled to act in his official capacity in contravention to his own humane and considerate views. We beg to add our expressions of deep sympathy with Mrs. Ridley and Mrs. Mandeville in their afflictions. We condemn the reckless and unfounded charges made by Dr. Barr against poor Mrs. Mandeville and the medical man. We are of opinion that the charges made against Dr. Moorhead are absolutely unfounded, and that his reports and visits had a beneficial effect.<sup>52</sup>

The jury’s verdict was unanimous. And Nationalists used the verdict to berate the Government and prison officials.

At the time of the inquests, Dr. F. X. MacCabe had already left the Prisons Board for a nominally equal position. The change seems to have been Chief Secretary Balfour’s idea. Noting a “pressing need to appoint a medical member to the Local Government Board”, Balfour wrote to Ridgeway: “. . . that the two best candidates in the field are Dr. MacCabe and Dr. O’Farrell. My idea is to promote MacCabe to Dr. King’s place and to put O’Farrell in MacCabe’s place. If there is any weakness in MacCabe, there will be much less scope for this doing mischief at the L.G.B., than at the Prisons Board; – at least during the present crisis”.<sup>53</sup> MacCabe moved to the L.G.B., and Dr. George P. O’Farrell was promoted from being the L.G.B.’s inspector for the Cork district to the General Prisons Board, despite some last-minute reservations on Ridgeway’s part: “I do not know him, but he has an excellent reputation. The objection to him is that he is a Catholic”. Investigating further, Balfour concluded in a letter to his under-secretary that: “we shall have in him a man subject to none of the sinister influences to which you have alluded”.<sup>54</sup> Unlike his predecessor, O’Farrell had

<sup>51</sup> *Ibid.*, 15 August 1888.

<sup>52</sup> *Ibid.*, 18 August 1888.

<sup>53</sup> Balfour to Ridgeway, 3 March 1888, Balfour Papers, BL Add. MS. 49826.

<sup>54</sup> Ridgeway to Balfour, 5 March 1888, Balfour Papers, BL Add. MS. 49808; this letter bears the incorrect date of 5 May 1888 in the collection. Balfour to Ridgeway, 7 March 1888, Balfour Papers, BL Add. MS. 49826.

only a very few months between his appointment and his first crisis.

The crisis concerned John Dillon's imprisonment at Dundalk. Dillon's sentence began in late June 1888, and almost immediately prison life began to take a toll on the already frail M.P. At Balfour's orders, Dr. Barr went to Dundalk to examine Dillon, but the prison doctor made it difficult for Barr to do so. Barr's supervision of Dillon coincided with his appearances at the Mandeville and Ridley inquests. Publicly and privately, Balfour admired the fiery Dr. Barr, but he noted to Ridgeway that the doctor's evidence which was "exciting the wrath of the Nationalist members to a most amusing degree" might "destroy his usefulness to us on future occasions".<sup>55</sup> Just four days after the Ridley verdict, Balfour turned to O'Farrell. At first the newest member of the Board was reassuring about Dillon's health, but a report of mid-September urged Dillon's immediate release, which occurred four days after the date of O'Farrell's report. Having so persistently discounted Nationalist fears for Dillon's health, Balfour would not allow the publication of O'Farrell's report or the G.P.B.'s explanation of Dillon's release.<sup>56</sup>

The next crisis concerned William O'Brien, who in early 1889 at Clonmel again refused to wear prison clothing. This time officials forcibly stripped and shaved the resisting O'Brien. When warders finally released him, O'Brien removed the uniform and sat in his cell while dressed only in his shirt. O'Farrell appeared at Clonmel quickly and agreed with the prison medical officer that O'Brien "should be allowed to supply his own clothing, as was done in the Tullamore case". O'Farrell found O'Brien's views on prison clothing and associating with prisoners "as fixed and determined as those of a monomaniac". Balfour allowed this O'Farrell report to be published, though somewhat after the event.<sup>57</sup> Critics blamed O'Farrell for not moving more quickly in the O'Brien case, for the leader of "the Plan" was certain to have resisted. Somewhat unfairly, those same critics also blamed O'Farrell for having acted. His reversals of a subordinate's actions were done only at the bidding of his own superior, Balfour.

In August 1889, O'Farrell had to step into another explosive political situation, the investigation of the sanitary conditions of Londonderry Prison. That summer, several of its ex-prisoners had fallen ill with fever, and two had died. Attracting more attention, and more ridicule from Balfour, was the imprisoned C. A. V. Conybeare, a Radical M.P. from Cornwall and "Plan" supporter, who claimed that he had become infested with crab lice while a Derry prisoner. After visiting Londonderry, O'Farrell found the prison to be safe. These reports, funnelled through Balfour, led to Irish M.P.s calling O'Farrell both "a fitting representative" and "a puny imitation" of Barr.<sup>58</sup> Parnell, while not resorting to taunts, found the inherent weakness of the medical member's position:

<sup>55</sup> Balfour to Ridgeway, 28 June, 25 September 1888, Balfour Papers, BL Add. MS. 49827; and Ridgeway to Balfour, 6, 27 June 1888, Balfour Papers, BL Add. MS. 49808.

<sup>56</sup> Balfour to Ridgeway, 25 September 1888, Balfour Papers, BL Add. MS. 49827.

<sup>57</sup> 'Dr. O'Farrell's Report as to [the Health and the Treatment of] Mr. W. O'Brien, M.P. [in Clonmel Prison]', *SP*, 1889 (40) LX, p. 910.

<sup>58</sup> *Debates*, 3rd ser., 340 (23 August 1889): 337–338.

It is Dr. O'Farrell's duty to know all about it without any further visit or inspection. It is a condemnation of Dr. O'Farrell if it turn out that this prison is unfit for the reception of prisoners. Is it likely that Dr. O'Farrell, even if he had the engineering knowledge requisite, which is exceedingly doubtful, would pass upon himself his own condemnation, by admitting that this prison is anything else but in the most perfect sanitary condition.<sup>59</sup>

At this point, Balfour intervened again by calling in the surveyor for the English Prison Commissioners, who found Londonderry and other Irish prisons to be in a generally satisfactory condition. Yet again, a subordinate English prison officer had been brought in to settle questions of health and safety.

Near the close of 1889, O'Farrell made another, and it turned out, final report on the general conditions of Irish prisons. His findings called for wide-sweeping changes including the closing of some prisons and the building of other, new ones with larger, better ventilated cells. O'Farrell's criticisms and the other Board members' spirited defence against them remained confidential.<sup>60</sup> However, it was clear that O'Farrell could no longer work with his colleagues and had attracted so much attention as to be politically expendable. O'Farrell was removed from the General Prisons Board and appointed inspector of lunatic asylums. As the editors of the *Journal of Mental Science* noted, O'Farrell had "unfortunately not had any special experience of insanity and asylum administration", but "his appointment is one that has met with very general approval, and, admitting the peculiar difficulties that hamper the Irish Government in filling vacancies in the public service, is probably the best that could be made".<sup>61</sup> The appointment was probably the best that could be made for O'Farrell as well. As much as Balfour might believe Nationalists to be unbalanced fanatics, these political figures were not numbered among O'Farrell's new charges.

O'Farrell's successor was Dr. Stewart Woodhouse, another former medical inspector for the Local Government Board. Woodhouse's tenure differed from that of his two predecessors. Balfour quieted the prison dress issue by announcing new rules allowing all prisoners permission to wear their own clothing and to enjoy other privileges. These rule changes were confirmed by a Royal Commission.<sup>62</sup> Furthermore, exhaustion of the "Plan of Campaign" and the split in the Home Rule Party occasioned by Parnell's marriage quieted Irish Nationalism. Woodhouse remained on the Board until the first decade of the twentieth century and had to contend with few political prisoners.

Those who chose state service in nineteenth-century Ireland faced uncertain futures. The island was beset by economic troubles, social conflict, and political unrest. This taut atmosphere rendered the tasks of state service, hardly simple in themselves, even more difficult. Some men, like Chief Secretary A. J. Balfour, strengthened their

<sup>59</sup> *Ibid.*, col. 350.

<sup>60</sup> 'Report by George Plunkett O'Farrell, Esq. M.D., medical member of the General Prisons Board, Ireland, to the Right Honourable Chief Secretary to the Lord Lieutenant of Ireland, in reference to Prison Construction, & c. and the Observations of other members of General Prisons Board thereon', Balfour Papers, BL uncatalogued material designated 13/10(25).

<sup>61</sup> 'Notes and News: Changes in the Irish Lunacy Board', *J. ment. Sci.*, April 1890, 36: 309.

<sup>62</sup> 'Report of the Committee of Inquiry as to the Rules concerning the wearing of prison dress, & c.', *SP*, 1889 [c. 5759], LXI, p. 269 *et seq.*

political careers in Ireland; others, like Balfour's predecessor, G. O. Trevelyan, saw their careers severely damaged, if not destroyed. Various offices, boards, commissions, and inspectorates were developed and, all too frequently, run on an *ad hoc* basis. Changes and emergencies were met by inaction, haphazard responses, or inflexible rules and bureaucracies.<sup>63</sup> In the late nineteenth century, Chief Secretaries tried to break down the semi-autonomous nature of these departments and direct the efficient implementation of policies that they had drafted and were called on to defend in Parliament. Increasingly, Chief Secretaries sought to fill government positions with civil servants, rather than political or patronage appointees. Additionally, they attempted to find men and, by the turn of the century, women, whose skills and training matched the demands of their positions. At times, as with the appointment of prison doctors, these two processes were in conflict.

Undoubtedly, doctors alone had the skills and training to safeguard prisoners' health, but they were chosen as much for their political and personal influence as for their professional reputations. They remained divided between their loyalty to the older, more established profession of medicine and that to the newer, less secure profession of state service. What was to govern their treatment of prisoners, when bureaucratic regulation conflicted with medical judgment? The question was even more complicated when the inmates/patients were held to be political prisoners by the Irish public, but ordinary criminals by the Government. Most medical men connected

<sup>63</sup> The development of governmental administration in nineteenth-century Britain has been hotly debated by historians. Some have argued, in the words of Oliver MacDonagh, a "nineteenth-century revolution in government". See: Oliver MacDonagh, 'The nineteenth-century revolution in government: a reappraisal', *Hist. J.*, 1958, 1: 52–67; *idem*, *A pattern of government growth, 1800–1860: the Passenger Acts and their enforcement*, London, MacGibbon & Kee, 1961; David Roberts, 'Jeremy Bentham and the Victorian administrative state', *Victorian Studies*, March 1959, 2: 193–210; *idem*, *Victorian origins of the British Welfare State*, New Haven, Conn., Yale University Press, 1960; George Kitson Clark, "'Statesmen in disguise': reflections on the history of the neutrality of the Civil Service', *Hist. J.*, 1959, 2: 19–30; and Robert M. Gutchen, 'Local improvements and centralization in nineteenth-century England', *ibid.*, 1961, 4: 85–96.

Others point to Bentham as the seminal figure, the inspiration for government reform: Henry Parris, 'The nineteenth-century revolution in government: a reappraisal reappraised', *ibid.*, 1960, 3: 17–37; Jennifer Hart, 'Nineteenth-century social reform: a Tory interpretation of history', *Past and Present*, July 1965, no. 31: 39–61; E. C. Midwinter, 'A Tory interpretation of history: some comments', *ibid.*, 1966, no. 34: 130–133; *idem*, *Social administration in Lancashire, 1830–1860: Poor Law, public health and police*, Manchester University Press, 1969; *idem*, *Victorian social reform*, London, Longmans, 1968; *idem*, 'Victorian social provision: central and local administration', in E. W. Martin (editor), *Comparative development in social welfare*, London, Allen & Unwin, 1972, pp. 191–215; S. E. Finer, *The life and times of Sir Edwin Chadwick*, London, Methuen, (New York, Barnes & Noble), 1952; and *idem*, 'The transmission of Benthamite ideas', in Gillian Sutherland (editor), *Studies in the growth of nineteenth-century government*, Totowa, N.J., Rowman & Littlefield, 1972, pp. 11–32.

Some present a more balanced view, including the concept that not all forces worked for change and governmental growth: Gillian Sutherland, 'Recent trends in administrative history', *Victorian Studies*, June 1970, 13: 408–422; William O. Aydelotte, 'The Conservative and Radical interpretations of early Victorian social legislation', *ibid.*, December 1967, 11: 225–236; Maurice Wright, *Treasury control of the Civil Service, 1854–1874*, Oxford, Clarendon Press, 1969; *idem*, 'Treasury control, 1854–1914', in Sutherland (ed.), *op. cit.* above, pp. 185–226; Reba N. Soffer, 'The revolution in English social thought, 1880–1914', *Amer. hist. Rev.*, December 1970, 75: 1938–1964; and Norman McCord, 'Some limitations of the age of reform', in H. Hearder and H. R. Loyn (editors), *British government and its administration: studies presented to S. B. Chrimes*, Cardiff, University of Wales Press, 1974, pp. 187–201.

with the prison service held other official posts and had private practices among people who saw men like William O'Brien as heroes. Some, like Tullamore's Ridley, were crushed by their public and professional burdens, while others, like Mountjoy's M'Donnell and Dundalk's MacDonnell,<sup>64</sup> resisted pressure from superiors to act contrary to their medical judgment. The reputations of M'Donnell and MacDonnell survived, and in the former case, flourished, because each had standing in the medical profession. Backed by influential allies and academic achievements, M'Donnell had a successful career under way when he criticized prison policies. Moreover, he spoke out before Ireland's prisons were centralized to enforce uniform, deterrent, yet humane standards.

The doctors who were members of the General Prisons Board were more in the public eye and less dependent on private practice. The Government chose MacCabe and O'Farrell, neither experienced in prison work, for their political reliability. When both were caught in a political crisis and deviated on medical grounds from the Government's stand, they were shuffled to other posts. The Government was reluctant to jettison these men under pressure from the Nationalists and unable to find a large pool of experienced, reliable professionals to draw from. The abatement of Ireland's political unrest in the 1890s allowed the prison system a chance to implement more fully its post-centralization plans. Medical members and prison doctors gained administrative experience. In becoming part of the system, they became less men in the middle. And with few political prisoners, they were no longer caught between a politically adept Government and a politically aware public.

#### SUMMARY

During the late nineteenth century, Irish prison doctors served under a centralized General Prisons Board, charged with establishing a single uniform, humane, yet deterrent penal system. That system housed not only ordinary prisoners, but also political prisoners, like Fenians and later Nationalists, who demanded a special status or treatment while imprisoned. The Government, intent on quelling unrest, insisted that the Nationalists be treated as ordinary or criminal prisoners. As a part of their duties, prison doctors could exempt any prisoner from the ordinary regimen. Believing prison doctors to have been unfair or even cruel towards political prisoners by allowing them to undergo ordinary regimen, Nationalists and their followers could attack the doctors' reputations and boycott their practices. If doctors exempted prisoners, the Government could remove them from their prison posts and deny them other positions. These individual prison doctors were, thus, "men in the middle". So too were the medical members of the General Prisons Board. As administrators, the medical members set regulations which as doctors they had to moderate in individual cases. Sometimes professional insight or bureaucratic duty demanded that they countermand prison surgeons, thereby exposing fellow civil servants and professional

<sup>64</sup> In 1888, during the "Plan of Campaign", MacDonnell argued that the Government had to release John Dillon on grounds of ill health and resisted O'Farrell's inspections.

colleagues to an already distrustful public. The first two men who served as medical members found their effectiveness undercut by fellow Board members and the Chief Secretary's Office. Those pressures and adverse public clamour cut their tenures short. The decline of political tensions in the 1890s finally allowed prison doctors and medical members to escape the public spotlight and return to their customary professional and administrative duties.