MSc Occupational Therapy

OT6054: Occupational Therapy Research Project 4

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"The impact of the decline in moral treatment on leisure occupations in the Criminal Lunatic Asylum from 1890-1910".

Background: The views of Moral therapy were introduced into lunatic asylums in the 19th century. In 1850, The Central Criminal Lunatic Asylum (CCLA) opened in Dublin as the first forensic psychiatric hospital in Europe (Now called ‘The Central Mental Hospital’). The foundations of the profession of occupational therapy and moral treatment have been well established (Peloquin 1989). Towards the last quarter of the 19th century, the concept of moral treatment declined and this impacted on the availability of leisure occupations in asylums.

Objectives: To explore the Inspectors in Lunacy Reports on the CCLA from 1890-1910. To identify how the decline in moral treatment during this period affected the opportunity for patients to engage in leisure occupations. To identify what leisure occupations patients continued to participate in.

Methods: Historical documentary research methods were used to gather data from the Inspectorate in Lunacy Reports from 1890-1910. The documents were analysed thematically (Braun and Clarke 2006) and explored how the decline in moral treatment impacted on patients’ leisure occupations.

Results: The decline in moral treatment in the latter part of the 19th Century resulted in diminished opportunity for patients to engage in leisure occupations. Despite this, the reports revealed patients continued to enjoy a variety of leisure occupations including sports, reading, religion, concerts and music.

Conclusions: The therapeutic use of occupation remained important in promoting positive health and well-being at the CCLA despite the demise in moral therapy. The benefits of engaging individuals in meaningful and purposeful occupations remain core beliefs in Occupational Therapy today.
Introduction

Throughout the 18th and 19th centuries, the provision of mental healthcare was inconsistent and unreliable (Stone 1998). A new approach in the eighteenth century known as ‘moral treatment’ was initiated by a French Doctor, Pinel. In 1850 the Central Criminal Lunatic Asylum (CCLA) was opened in Dundrum, Dublin. Although the ideas of moral treatment were apparent at the CCLA, the turn of the century brought many difficulties. Central challenges included the provision of effective care based on limited resources and overcrowding. Leisure occupations decreased steadily from 1900’s on, and the lack of engagement in occupations may have contributed to poor recovery in the asylum (Peloquin 1989).

By examining the Inspectors in Lunacy reports one can identify how the decline of moral treatment in the CCLA impacted on patients’ leisure occupations. This research forms part of a larger study on the history of occupational therapy in Ireland and the findings from this study will seek to fill this gap in history.

Research Question

How did the decline in moral treatment impact on leisure occupations of patients in the Central Criminal Lunatic Asylum from 1890-1910?

Research Objectives

- To explore the Inspectors in Lunacy Reports on the Central Criminal Lunatic Asylum from 1890-1910.

- To determine how the decline in moral treatment affected patients engagement in leisure occupations.

- To identify what leisure occupations remained as a form of patient therapy in the asylum regime from 1890-1910.

- Determine how some of the core principles of the profession of occupational therapy were influenced through historical reinforcements.
Literature Review

Moral Treatment

At the turn of the 19th century the traditional medical approach of treating mental illness was replaced by programmes that centred around wellbeing and humane care (Glover cited in Edginton) giving rise to the period of enlightenment (Bing 1981). Philippe Pinel, a French physician and William Tuke, founder of the York Retreat, approached the problems of mental illness similarly with this new philosophy of “moral treatment” (Shorter 1997). Tuke called for more natural remedies to be utilised and encouraged inmates to participate in ordinary activities of daily life such as gardening, sewing, knitting and help with work on the institutional farm. By engaging the mentally disturbed in occupations, better self-control and habit training had a normalizing affect for inmates (Laws 2011). Previous treatments of restraint and coercion were replaced by respect and empathy.

Irish Context

Towards the end of the 18th century the overall standard of psychiatric care in Ireland remained inconsistent. Many of Ireland’s mentally ill were either incarcerated in prisons, living in remote huts, or wandering the roads (Kelly 2008). The development of a mental health care system was further disrupted during the 19th century by the Great Famine. The misuse of the ‘dangerous lunacy’ policy meant that large numbers of ordinary lunatics were placed in gaols throughout the country (Finnane, 1981: Prior, 2003). In 1894, Tuke noted that between 1875 and 1893 the number of ‘certified lunatics’ in Ireland increased by 60 per cent, compared to an increase of less than 22 per cent in England and Wales (Kelly 2008).

The relationship between the Environment, Occupations and Asylum upkeep

The natural landscape that surrounded many of the asylums was valued for its therapeutic effect as it allowed patients to witness the changing of the seasons (Cherry & Munting, 2005). Sports and games had numerous therapeutic benefits, but also provided a means of coping with the overcrowding on the wards that prevailed in many of the asylums around this time. Sport was shown to ease severe symptoms of depression and in treating rebellious and violent patients (Cherry & Munting, 2005). Indoor activities included billiards, reading,
religion, drama and music (Cherry & Munting 2005, Pettigrew et al 1998 Prior 2004 and Edginton 1997). Sport, drama, and music were seen to control ‘staff and patients as effectively as the asylum rules’ (Nolan, 1993 p.155). Female patients were noted as being restless and excited, thus they had fewer opportunities than men for ‘outdoor activity’ and ‘active recreation’ (Showalter 1980, p.168, Cherry & Munting 2005).

Work was considered a valuable occupation in 19th Century asylums due to its therapeutic properties which absorbed the patients’ time and energies, and provided a route to recovery and self-reliance in the wider world (Cherry & Munting, 2010). This also suited the asylum authorities and coincided with the poor laws at this time, as savings could be made on staffing and maintenance costs (Smith, 1999). Much of the work consisted of indoor domestic work around this time due to shortages in agricultural land and insufficient opportunities for outdoor work or exercise (Halliday, 1828).

History reflects a positive relationship between the therapeutic benefits of occupation in treating patients with mental illness, however little research has focused on how the decline in moral treatment impacted on leisure occupations in Dundrum (Laws 2011). The aim of this research is to build upon previous literature and establish how the decline in moral treatment during the latter half of the 19th century influenced occupations afforded to patients in the CCLA. Through researching the Inspectors in Lunacy Reports the foundations of our profession can be better understood, and provides a basis for planning future professional direction. Investigating the decline in moral therapy in the CCLA contributes to a larger research project exploring the history of occupational therapy in Ireland.

**Methodology**

A historical documentary research method was used to analyze the documents used in this study. The Inspectors in Lunacy reports are electronically stored at the nationally library in Dublin and documents were saved and stored on an external hard drive for the duration of the research. The researcher analyzed a total of twenty reports published from 1890-1910. The Inspectors in Lunacy were a statutory corporation that was founded following the Lunacy Act of 1845 and consisted of six full time inspectors, three lawyers and three doctors (Murphy 2002). Pettigrew et al (1998 p.38) describe the Inspectors of Lunacy as prominent people in the community who were involved in the care of the mentally ill. Their primary responsibilities related to the confinement, care and discharge of all patients in both private
and public institutions (Murphy 2002). The Inspectors raised concerns about neglect or abuse to patients, thus not everyone agreed with their views, especially those whose work was being questioned by them (Prior 2004).

Thematic analysis was used to identify, analyse and report patterns (themes) within the data. Braun and Clarke (2006) six stage phases of analysis was used to guide this process. The initial stages involved analysis of the data collected. From this the researcher generated a list of codes which were collated into potential themes. Applying this method enabled the researcher to isolate themes from which six categories emerged.

In the context of historical research, each source of information must be carefully evaluated to determine its authenticity, credibility, representativeness and meaning (Grbich 1999 and Scott 1991). The researcher adhered to the four criteria listed above in order to ensure documents were evaluated reliably and accurately (Grbich 1999). To establish the genuineness and authenticity of the document, the researcher questioned the context, source and possible intentions of the writer in originally producing the document (Hallett 1997, 1998). Thus, the researcher had to obtain information on the Inspectors in Lunacy and their intent for writing the reports on the asylums in Ireland.

Credibility examines the reliability and authority of the document, how the document was produced and appraises the views of the author (Scott 1991). In order to assess credibility it was necessary for the researcher to consider any prejudices of the Inspectors in Lunacy, which may have influenced their presentation of matters and also their proximity to the events in question. A document can only be considered credible if the author has the correct material and relays the information accurately excluding any personal biases (Brent and Lewis 2013). It was apparent that the Inspectors in Lunacy did not always present an impartial account of the asylum and patients, frequently portraying the more undesirable aspects of the asylums. According to Prior (2004) certain archival reports like the Inspectors in Lunacy reports may have been “misleading in order to present a picture of law and order in the central government” (p. 191). Therefore, each record was scrutinised, recorded, classified and interpreted with a degree of scepticism.

According to Mogalakwe (2009) representativeness is an important requirement for document analysis. Representativeness takes into account if the material is accurately dated and establishes whether the author was actually present at the events described and whether
the information can be considered true (Christy 1975). The Inspector in Lunacy reports are primary sources from Irish asylums which were published annually and contain similar content throughout. The reports are available to be viewed electronically at the National Library in Dublin. The researcher had to become proficient in interpreting the meaning of the documents considering the period in which they were written. Thematic analysis (Braun & Clarke 1991) was used to establish the literal meaning of the text which was then used to appreciate the broader social and cultural implications during this time (Scott 1991). This involved initially deciphering the text, then translating the language used in past context into existing language. Interpreting the documents was a difficult process as the meaning of the words in the 19th century were very different from today. The researcher appraised literature from secondary sources in order to understand the way in which the language and meanings may have changed over time, thereby limiting the risk of bias (Christy 1975).

Ethical Considerations
As the Inspectors in Lunacy reports are publicly available documents, it was not necessary to obtain consent for the use of names of people in positions of authority; doctors, nurses and staff which may have been identified in the reports. However, due to the period from which the data was collected (1890-1910), it is likely that person’s that may be identified in the data would have living relatives. Therefore, it is important to treat all information and discussion around the data with respect and confidentiality. The researcher is aware that the Inspectors reported subjectively about the asylums, therefore the information extracted was interpreted objectively and critically to ensure findings were presented in an un-biased and fair manner.

Findings
The implications of the decline in moral therapy in the latter half of the 19th century impacted on the availability of leisure occupations afforded to patients. In 1903, over 80% of the patients were reported to participate in 40 associated entertainments, but by 1908 reports indicate the number of entertainments had decreased to 24 entertainments despite their popularity (p.53). The reports identify leisure occupations at this time included cricket and football matches, billiards, bagatelle, reading, and concerts and dances were held on occasion. This research focused on the themes of moral therapy, leisure and team games, reading, religion and entertainments.
Moral Therapy

Peloquin (1989) stated that during the last quarter of the 19th century moral treatment disappeared, primarily as a result of overcrowding. Reports indicate overcrowding in the male side of the asylum resulted in patients having to share dorms (1878/79, p.15). Due to this patients were not grouped according to their needs which impacted on their recovery. Later reports indicated the severity of the situation; ‘the refractory ward contains 40 patients with only 2 single rooms’ (1917/18, p.40). In 1914, reports stated ‘the female side was in chaos with seven patients in seclusion, one for two and half years and another for a year’. By 1917/18 Inspectors reported the rates of seclusion were enormous when compared to previous years. The Resident Medical Superintendent (RMS) lobbied for ‘the opening of a second female ward and the provision of two additional nurses”, expressing that “new buildings are absolutely necessary’ (1914, p.53). Thus highlighting the problems of overcrowding during this time. The RMS oversaw the management and regulation within the asylum, and was also responsible for the moral and general medical treatments of its inmates (Prior 2012).

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<tr>
<th>Year</th>
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<tr>
<td>1901</td>
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<td>1913</td>
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Table 1.

Insufficient and exhausted land was another factor that led to restrictions on patient occupations. Earlier reports show how “the quantity of land attached to the asylum has not been increased since its opening” (1872, p.28). In 1917, Inspectors reported the land being ‘utterly exhausted by 70 years of practically continuous tillage and requires a prolonged rest’ (p.68). In 1918 the football field was ploughed to provide additional land, thereby limiting opportunities for outdoor exercise (p.40).

The changing environment during the end of the 19th century was also evident when the boundary walls around the asylum were raised for added security. Dr Ashe (RMS) voiced his
concerns maintaining discipline within ‘buildings that are designed for the safe-keeping of the insane only’ and highlighted the urgent need to make ‘structural provisions for their safe keeping’ (1886 p. 681). This was in stark contrast to earlier reports which stated it would not be beneficial to the asylum if the walls were raised as it was believed “the less the restraint and the less the prison appearance, the less the disposition among lunatics to do gratuitous injury or to attempt escapes” (1870, p.31), further emphasizing the demise in moral treatment.

Principles of Moral Treatment remain

In 1893, Dr Revington became the new RMS in the CCLA and brought many reforms with him. These included the introduction of new pay and conditions for attendants, new systems of administration and record keeping, and the appointment of 66 new staff. Dr Revington proposed some new ideas on payment for work formerly regarded as therapeutic in itself, and on after-care (Prior 2004). He believed that by paying patients for the work they completed could assist patients recovery by making a fresh start in life and ‘abolish beliefs that they were beyond sympathy’ (1893, p.439). Through promoting after-care he aimed to alleviate the amount of patient relapses.

As identified in the literature review, reports showed that patients were employed or engaged in useful occupation as it was beneficial for their health, but also for the economic effect of the asylum. In 1893, Inspectors reported ‘the inmates assist in useful work, and their lives are made happier and feelings of self-respect and control are enucleated’ (p.74). They believed that engaging patients in occupation had a progressive effect on recovery and was favourable to health and well-being. Patients that were ‘orderly and industrious’ were less likely to ‘wander about in idleness, seeking some mischief to do’ (1893, p.74). Literature suggests that the occupations were influenced by gender (Paterson 1997 and Peloquin 1989). Evidence of this was seen in the 48th annual report when the Inspector reported ‘115 men and only 15 women able to be present’ (p.87) at an evening of associated entertainment’s.

Value of Leisure & Team Games

Even the earliest of asylums provided patients with exercise yards, courts or gardens. The 1899 Inspectors’ reported ‘107 men and 10 women walk round the grounds daily, while 41 men and 11 women are constantly confined to the airing courts’(p. 87). Airing courts were small exercise yards located on the asylum grounds used for recreation and exercise. The
reports from 1890-1910 clearly identify the value of sport in the asylum. Cricket and football were considered popular, and frequently matches were held between the asylum patients and medical attendants as reported in 1901 a ‘cricket match was played against the Kings Dragon’s Guards’ and the officers of that regiment had their band play throughout the afternoon, nothing ever gave the asylum patients more thorough enjoyment than did this kind act of the officers’ (p.72). Patients also participated in indoor recreation such as billiards and bagatelle (1905 p.51), and the 1898 Inspectors’ reported ‘two billard handicaps created much excitement for some weeks’ (p.89) after the addition of a small billard table.

**Reading, Religion and Entertainments**

Reading was another form of leisure occupation inmates enjoyed and there was several references about additions to library material throughout the reports. The 1899 Inspectors reported ‘A liberal supply of books has also been obtained for the patients use’ (p. 100). By 1910 ‘the library had been improved by good quality wholesome literature’ (p.51). The literacy of inmates varied considerably, and there is scant references about patients engaging in reading during this time. In 1897, it was recorded there was 14 illiterate patients and 32 literate patients in the asylum, and by 1903 there was 22 illiterate patients and 23 literate patients.

Evidence from Inspectors in Lunacy reports showed that the occupation of religion remained a prominent feature in the CCLA. In 1903, 59 % of patients attended weekly services of the creed to which they belong (p.51). Throughout the reports the importance of chaplains and religious worships at asylums was highlighted as means of occupation and benefit to patients. Earlier reports indicated engaging in this occupation was a source of “solace to many” inmates and tended “to generate a general spirit of order and obedience” (1870, p.31).

Music was another popular leisure occupation in the CCLA. In 1897 a ‘good piano’ (p.85) was bought and placed in female ward number four. Patients also benefited from occasional concerts and dances, and over 100 patients attended such entertainments and were a ‘source of much enjoyment’ (1898, p.76). The Inspectors reported on Jubilee day following a cricket match in the afternoon, a dance was held for attendants in the evening (1898, p.76). According to the Inspectors these amusements were vital to patients health and well-being as it provided a break from their ‘necessarily monotonous lives’ and the benefits were ‘simply incalculable’ (1905, p.53).
Discussion

*The decline in Moral treatment in the Central Criminal Lunatic Asylum.*

In answer to the research question the findings support the view that the decline in moral therapy in the CCLA during the latter half of the 19th Century posed many barriers to patient’s engagement in leisure occupations. This was evident by the increased rates of seclusion, the elevation of the boundary walls for security purposes, the ploughing of the football pitch for additional land and the decreases in funding for amusements. Peloquin (1989) stated “Moral treatments decline relates closely to a lack of inspired and committed leadership willing to articulate and redefine the efficacy of occupation in the face of medical and societal challenges” (p.542). Asylums became associated with positive places of refuge and people were willingly admitted to them, which ultimately led to their demise. Overcrowding ensued with more clients being accommodated for, and resources were unable to cope with the increasing admissions. According to Kelly (2008) there was an excess of 200 admissions over discharge annually between 1850 and 1880. The CCLA was grossly understaffed as well as being far from secure and could not, therefore, deliver the kind of treatment lauded in the early years of its establishment (Prior 2004).

*The Benefits of Leisure Occupation Remain Evident*

The findings reveal a distinct decrease in the leisure occupations afforded to patients over the period examined, and due to overcrowding it may have been difficult for staff to prioritise the time to provide the occupations that were required of moral treatment. Despite this, the association between engagement in occupations and health and well-being remained core concepts in maintaining the mental and physical well-being of the patients. According to Paterson (1997) the use of occupations was fundamental to moral treatment in 19th century asylums as they helped improve people’s mental state. This was evident throughout the reports with patients enjoying a range of activities.
The Type of Leisure Activities Available

Sport and Team Games

John Conolly, a publicist at Hanwell hospital was one of the first who identified the benefits of team games and felt that a bowling green and a cricket ground would be suitable asylum amenities, thereby encouraging patients to try ball-playing, hoop or battledore, trap-ball or ninepins as a form of leisure therapy (Laws 2011). The benefits of incorporating sport into asylums were multi-faceted. As well as breaking down barriers between patients and staff team games were considered extremely therapeutic and enjoyable. Cricket was seen as a healthy, orderly game which urged self-respect and control by patients. It involved low intensity placid outdoor exercise and required considerable numbers of players over a wide age range for lengthy periods (Cherry & Munting, 2005).

As outlined earlier, the reports clearly reflect occupations were influenced by gender. Outdoor recreations for female patients were limited to the airing courts, gardens and walks. Team games were male dominated with female patients permitted only as spectators. However, towards the latter half of the 19th century women and men were permitted to mix on the cricket fields as indicated in the 1901 annual report when the Kings Dragons Guards band provided much amusement to patients following a cricket match between the guards, patients and attendants (p.87). Indoor exercises for women were usually based on movement to music (Cherry and Munting 2005).

Reading, Religion and Entertainments

The Inspectors in Lunacy reports indicate reading was a valued occupation in the asylum. It was difficult to determine from the reports how many patients did in fact engage in reading considering the illiteracy levels, but the continual supply of material indicates that it was of therapeutic benefit to some patients. Mee and Summison (2001) propose that by engaging people in meaningful occupations they can prevail over the effects of disability.

Kelly (2008) outlines the significant impact of religion in gaining an understandings of mental illness and institutional responses to the mentally ill throughout the eighteenth,
nineteenth and twentieth centuries. As disease was often attributed to sin, people needed to engage in “morally right” occupations according to the Christian creed (Porter 1997/1999 cited in Hinojosa & Kramer 1997). The documents indeed reflect religion remained an important source of occupation for patients in the asylum.

Despite the benefits of a variety of amusements and entertainments in relieving boredom for patients in the asylum, it was apparent that economic constraints during this period impacted on the availability of entertainments and amusements declined significantly. In 1896, 102 men and 16 women took part in associated entertainments (1896, p.67), however by 1906 reports indicated a lack of funding prevented “engaging any professionals for dramatic or variety performances” (1906, p.53).

The Therapeutic Benefits of Work

These findings support the view that work delivered a therapeutic effect for patients, and great emphasis was placed on the importance of patients being employed throughout Asylums nationwide. In 1908, 54% of the total number of inmates were engaged in useful employment. Patient’s days were balanced with work, rest and worship (Laws 2011 p.68).

According to (Paterson 1997 and Peloquin 1989) occupations were gender biased. Men worked on the land and women were confined to the laundry and kitchen (Kelly 2009, Kelly 2008, Pettigrew et al 1998 and Edginton 1997). However, by the last quarter of the 19th century, the emphasis was more on the economic benefits of occupations within the asylum rather than the therapeutic value to the patients. As illustrated in the findings when the football field was ploughed to provide additional land. This research correlates with previous studies (Cherry and Munting 2005; Smith 1999; Halliday 1828) which exemplified that patient labour was central to assisting with the day-to-day running of asylums.

The Therapeutic use of Occupation and The Importance of Creating a Moral Environment

Findings show how the environment was essential in enabling occupations so as to gain beneficial effects. What was surprising was the therapeutic benefit of team games and sport in the asylum regime. A study by Cherry and Munting (2005) looked at Sport and the asylum c.1850-1950 in mental asylums in Britain. However, the impact of exercise and sport in Irish asylums has received little coverage to date. From analysing the Inspectors in Lunacy reports
it is clear that team games, in particular football and cricket were pivotal in maintaining order and discipline within the CCLA. This was evident by the numerous matches between the asylum patients and medical attendants. Sport and team games were seen as valuable for both mental and physical well-being, ‘proper’ conduct and the development of team spirit (Cherry and Munting 2005). Joint sports improved relations between patients and attendants as patients were motivated to advance their sports skills enabling the staff members to coach them. As well as relieving boredom, sport allowed for effective mental and physical recreation, enhanced patients self-esteem and sense of achievement (Nolan, 1993). It also provided an opportunity for male and female patients to mix, showing a progressive move from the strict sexual segregation that prevailed in earlier years. The natural surroundings of the asylum was also believed to alleviate the insanity caused by chaotic social progress, and outdoor work was believed to be as favourable as exercise and occupation, providing a means of ‘moral self-restraint’ (Doerner, 1981). Both the occupation and environment played important roles in the recovery of patients in the CCLA.

**Implications for Occupational Therapy**

Newton (1965) stated the search for a profession’s identity is bound up with the social and historical roots that lead to its creation. Barton (1920, p.307) outlined ‘occupations strengthens the body, clarifies the mind and offers ‘a new life upon recovery’. The decline in moral treatment in the latter half of the 19th Century was heavily influenced by societal and medical changes. This is similar to what occupational therapists face in today’s healthcare system. Regardless of limited resources, restrictions on the recruitment of personnel and substantial caseloads, our profession strives to maintain delivery of effective care based on individual client-needs. In line with contemporary national efforts to ‘keep-fit’ and reduce the incidence of obesity and health related issues, it is vital that occupational therapists incorporate leisure occupations that promote both physical and mental health. We can learn from our predecessors who showed the practical benefits of exercise and team games in promoting patients health and well-being. This concept was evident throughout all the reports with continuous references to the pleasure the games afforded both patients and staff. However, Yerxa (1967) urged therapists to collaborate with patients in choosing occupations that have purpose and meaning. By drawing from the roots of our profession, occupational therapists today have the power to exert positive influence with our clients by facilitating informed lifestyle choices through education, support and encouragement. Our ability to
think and act creatively will enable us to negotiate the many challenges that confronts today’s profession and continue providing therapeutic and meaningful treatments that empower patients. By focusing on the interaction between the client, the occupation and the environment, occupational therapists can provide therapeutic interventions (Law et al 1996).

Limitations of the Study

A major limitation of the study was that the archives in the Central Mental Hospital were not catalogued. Therefore it was very difficult to find significant data on the time period examined following a visit to the Central Mental Hospital in 2013. Material on individual patient case notes, daily reports and expenditure books would have added important information to the study, thus the researcher had to rely solely on the Inspectors in Lunacy Reports. Another limitation of the study and a limitation of the recordings at that time was that only the Inspectors words were recorded, few if any words from attendants or doctors and no patients’ words were recorded. Gaining the perspective of the patients’ experiences of engaging in occupations would have contributed valuable information to this research. According to Prior (2004) it is uncertain if the writings of the inspectors are sincere in these reports and depict the daily routine of the asylum in reality. Prior stated that the reports may have been “misleading in order to present a picture of law and order in central government” (Prior 2004, p.191 cited in Dunne 2013). Thus, this research would benefit from additional archival material to present the patient’s view of how the decline in moral therapy impacted on the occupations afforded to them and their overall health and well-being.

Conclusion

This study researched the Inspectors in Lunacy reports from 1890-1910. These reports were published annually therefore a total number of twenty reports were examined. The reports were analysed using Braun and Clarke’s (2006) six stage phases of analysis. The purpose of this research was to establish how the decline in moral therapy impacted on the leisure occupations afforded to patients, and what activities remained prominent in the CCLA in the latter half of the 19th century. The findings of this research revealed that the central challenges at the CCLA included overcrowding and increasing admissions, gross understaffing, changes to the environment, insufficient space and exhausted land. According
to Peloquin (1989) the absence of management in promoting humane treatment during medical and societal changes also attributed to the demise in moral treatment. Despite these challenges, the findings describe the benefits of engaging patients in occupations and its impact on health and well-being. Engaging in occupations is seen as an essential aspect of everyday life (Law et al 1998).

Findings showed how the environment was essential to enable occupations to gain beneficial effects. Both the occupation and environment played important roles in the recovery of patients in the CCLA, as identified by the range of outdoor activities in the asylum. Main leisure occupations during the timeframe examined included cricket and football matches, billiards, bagatelle, reading, religion and concerts and dances were held on occasion. According to Digby (1985) ‘moral treatment worked upon the patients ‘desire for esteem’ and ‘self-restraint’ which involved supervision, role models and encouragement. An encouraging finding was the significant value placed on exercise and team games in promoting both the mental and physical well-being of patients, as well as breaking down barriers between the attendants and patients, echoing findings from Cherry and Munting (2005).

These findings provide further evidence that the profession of occupational therapy developed from the beliefs of moral treatment (Bell 1980 & Grob 1973 (cited in Peloquin 1989). Through analysing the history of occupational therapy the development of the profession can be better appreciated and help inform future professional direction.
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