Physicians believed that insanity could be brought on by “moral” causes. Physicians believed that insanity could be brought on by “moral” causes—disorganizing psycho-social factors that disturbed proper brain functioning. One could go mad from a blow to the head, from inhaling poisonous vapors, from indigestion, from masturbation, from hereditary predisposition, or from another disease, although insane asylum reports and the writings of asylum superintendents of the time also included such causes as excessive study, religious enthusiasm, anxieties over work—and even “Blowing Fife all night,” “Reading vile books,” and “Extatic [sic] admiration of works of art."

Accordingly, the treatment regime at most asylums combined considerable drug therapy with what we would today call occupational and recreational therapy. This included a range of cultural activities: formal schools, dancing parties, lecture series, debating societies, theatrical amusements, borrowing privileges at libraries, and chapel worship. The goal of these activities was to model rational modes of thought and appropriate behaviors (defined, of course, by the asylum physicians who oversaw them). By diverting the mind from its morbid or fantastical associations, which were both caused by and causes of imbalances in the “faculties” of the brain, such cultural pursuits could restore harmony to mental functioning.

A Patients’ Journal
At the center of the moral treatment movement was the New York State Lunatic Asylum in Utica. Founded in 1843 under the charismatic leadership of Amariah Brigham, the asylum quickly became one of the leading state-financed institutions. With its grand, pillared façade, a working farm, an annual fair, theatrical productions, and occupational workshops, it was also a tourist attraction for those who wanted to see how this utopian experiment brought light to benighted minds.

Asylums were often surprising centers of literary
activity, and one of the most intriguing productions at Utica was The Opal, a quarterly journal of patients’ writing that was published from 1851 to 1860. Containing fiction, poetry, dramatic sketches, essays, political commentary, religious writings, memoirs, open letters, occasional pieces, “healing” narratives, and cultural critiques, the journal is a thorough record of the lives and struggles of mental patients. It is not, however, a transparent record, for one can feel the patient-writers pressing up against the dictates and expectations of their physicians and wardens, just as they pressed up against the constraints of the institution.

**Reasons to Write**

For many, literary activity was a solace in their lonely and frequently humiliating condition. The poem “My Child” (see sidebar on page 28) was written by a mother whose young son had died, a trauma considered a frequent cause of insanity for women. Her grief is made all the more poignant by what she doesn’t write about: her enforced separation from her friends and family in a time of deep sorrow, her stigmatization as an insane person. Yet these tribulations seem to be balanced by the opportunity to compose her thoughts, to order them in conventional terms, and to see them in print. This patient used writing as a prescribed means of healing; as Brigham put it, the chief goal of moral treatment was “withdrawing patients from accustomed trains of thought, and awakening new ideas.”

Some patients tested the limits of expression, with a few implying or even stating outright that they were falsely imprisoned. The more explicit of these pieces were apparently only printed when they contained self-contradictory evidence, and seemed to serve two functions: to convince readers that the journal was not censored, and that any charges made against the asylum would ultimately be proven false. Whereas most of The Opal’s contents reveal literary activity as an instrument of cure, these documents use writing as an obvious symptom of illness.

For instance, one patient’s impassioned plea that “the great object I have is...my liberation from this place” and that “those who brought me here should be responsible” is couched in an article in which he recounts wild conspiracies directed against him by agents of the state, including the governor. He also admits that his “intellect has been...impaired by excessive drinking.” The article is addressed as an open letter to President-elect James Buchanan, whom he hopes will personally intervene in his case.

**A Certain Demographic**

Who were the patients who wrote these pieces? Most contributions were anonymous, with a few initialed bylines and some pseudonyms. But in 2001, using Utica’s patient case books, scholar Maryrose Eannace unearthed the identities of a number of The Opal’s contributors. She also found that, compared to the overall patient population, most Opal patients were well-educated, came from comfortable backgrounds, and lived in the “first ward” of the asylum, which was reserved...
for non-violent residents and convalescents and was disproportionately occupied by paying patients. In these early days of state-sponsored asylums, managers promoted the idea that their institutions were not simply glorified poorhouses, and they allowed patients of means to occupy a better class of accommodations than others.

Although participation in The Opal was not classed as “labor” in asylum reports, it is clear that most of its contributors did little work around the asylum, whereas other patients were strongly urged—and sometimes forced—to work. The Opal may have also therefore functioned as an advertisement for families considering whether to commit their afflicted kin to Utica or to a private establishment. The journal’s existence implicitly announced that at Utica, one could pursue genteel activities appropriate to one’s class background.

In his seminal book Asylums, sociologist Erving Goffman describes in harrowing terms the social and cultural lives of inmates of “total institutions…place[s] of residence and work where a large number of like-situated individuals, cut off from the wider society for an appreciable period of time, together lead an enclosed, formally administered round of life.” He outlines two types of responses to such enforced tenure that also illuminate some of the strategies of Opal writers. One is “conversion,” in which the patient takes up the institution’s vision of him or herself with apparent enthusiasm, posing as the “perfect inmate” by lavishly praising the authorities. A number of Opal articles that recount patients’ progress and the efficacy of their medical and moral regimens reflect this strategy. One essay, called “Insanity—Its Causes and Cure,” narrates the progress of a patient’s own delusions and the means by which his doctors cure him. He concludes that “at present all that can be done for the comfort and restoration of the lunatic, with the means allowed, seems to have already been accomplished in our own noble institution.” Not surprisingly, this patient was released shortly after composing the essay, and his doctors reprinted it in their own publication, the American Journal of Insanity.

“The Editor”

A second response described by Goffman is “colonization.” Such patients attempt to build up a “stable, relatively contented existence” inside the institution and appear to dismiss the desirability of life in the outside world. They might occasionally act or speak out against the institutional authorities, but they strategically “mess up” only enough to ensure that they will have “an apparently involuntary basis for continued incarceration.” Some of the stable literary personae cultivated in The Opal are striking counterpoints to these patients’ near-absolute dispossession from their former lives.

Colonization might help explain the on-again, off-again literary career of the editor of The Opal, a doctor from Columbia County, New York who had been admitted in the asylum’s first year, 1843, and who stayed until his death twenty years later. He was clearly a man of accomplishment, learning, and considerable literary skill. In addition to his editorship, he was a frequent participant in asylum theatricals, debates, and exhibitions, even writing and delivering a formal address to President Millard Fillmore on the latter’s visit to the asylum in 1851. Given the editor’s high degree of functionality in an environment that was geared toward returning patients to the outside world as quickly as possible, it is remarkable that he stayed as long as he did. But perhaps he made use of the colonizer’s strategic “messing up”: according to the patient case books he periodically tore his clothes, ranted, stole liquor, and on one occasion ate his own feces. At these times he was removed from his editorial duties until he could comport himself in a more “gentlemanly” way.

Goffman’s claim that all pathological behavior by patients is a response to their treatment by authorities is perhaps too sweeping to be warranted; such extreme behavior as the editor’s, for example, was unlikely to have had a simple cause. But even if he was not intentionally acting out, this man’s literary career at The Opal indicated his strong desire to stay put. His writings often suggested that “normal” life was irrational, frightening, and oppressive, while the pre-
MY CHILD
Tiny hands and tiny feet
Made my boy a being sweet,
Tiny love-locks, tiny chin
Tiny smiles, enwreathed within,
Made my boy a being fair
A paradise beyond compare,
Jesus! Vigils o'er him keeps,
A lullaby in Christ he sleeps.

Published in The Opal, this poem was written by a mother whose young son had died. The loss of a child as a spur to spiritual reflection is perhaps the most common theme in the period's sentimental literature.

Because of the sensitive nature of these documents, patient case books from the New York State Lunatic Asylum in Utica held at the New York State Archives are, even after 150 years, not available to the public. In order to access them, one must apply in writing to the New York State Office of Mental Health. In addition to these records, the asylum's annual reports offer a wealth of information about the changing diagnostic and treatment modalities of the institution, the cultural and social lives of patients, and the doctors' strategies for advertising their successes to the public and the state legislature.

The American Journal of Insanity (also published in Utica) provides a fascinating counterpoint to The Opal. Together these journals outline an urgent—and sometimes desperate—conversation between doctors, patients, and the public about the stakes of the new institutions for those most affected and for society as a whole.

he simply offers the hope that “a Pinel” (the founder of moral treatment in France) or “a Brigham” might “alleviate woe” for blacks as they have for the insane. When his master leaves him for his trips, Bob does not try to escape, but contents himself with perusing the great house’s grand library and entering into imaginary conversations with philosophers.

Writing as Its Own Reward
The parallels to the editor’s own situation are clear, although his point is ambiguous. He seems to see his own situation in terms of the colonizer: he is a slave but does not want to leave; he takes subtle jabs at his doctors (they are foolish slave owners) but endorses the philanthropy of their mission; he is given opportunities to leave but would rather stay in his comfortable surroundings with the fine library and opportunities for self-improvement. Just as the slave delights in outwitting and perplexing his powerful overseers but does not use his intellect to argue his way out of bondage, so the editor delights in a kind of doubletalk that gets him nowhere other than exactly where he is.

In the end, one gets the feeling that this piece of writing is, tragically, its own reward. If his doctors ever read it, one can only imagine their perplexity as they considered whether or not the editor was ready—or willing—to be sent back to the outside world.