Sanity and Subjugation: The Patriarchal Pathologization of Moral Insanity in 19th Century America

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Abstract

The concept of ‘moral insanity’ was constructed and institutionalized by the prejudiced society of America during the 19th century. Defying the religious beliefs of husbands, epilepsy, suppressed menstruation or use of birth control were among the ‘unconventional’ symptoms used to justify the labeling of women as ‘morally insane’ during this time. Through medicalized stigma and institutional control, mental asylums became instruments for reinforcing gendered oppression rather than spaces for genuine psychiatric care.

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Introduction

This article explores the pathologization of female autonomy through the psychiatric diagnosis of "moral insanity" in 19th-century America, during which asylums were instruments of patriarchal control rather than therapeutic institutions for mental health care. By analyzing primary sources such as Nellie Bly's *Ten Days in a Madhouse*, the *NYPL Scrapbook on Dr. Alexander E. Macdonald*, James Cowles Prichard's foundational theory of moral insanity and Elizabeth Packard's firsthand accounts of institutionalization, this research article highlights the evolving gendered dynamics of psychiatric oppression. Women who defied societal expectations by resisting domestic subjugation were often institutionalized under the disguise of mental illness.

Through a historical analysis of Blackwell Island Asylum, this article examines the systematic abuse inflicted upon female patients at the hands of medical professionals. Nellie Bly's investigations as a journalist by forging insanity exposed the asylum's oppressive treatments and controversial policies. Similarly, feminist figures like Elizabeth Packard, who was institutionalized for challenging the religious beliefs of her husband, underscored the legal frameworks that enabled men to commit their wives to asylums without solid evidence of mental illness.

An analysis of chronological scholarly debates, featuring Prichard's *A Treatise on Insanity and Other Disorders Affecting the Mind* (1835), and the groundbreaking theory of moral insanity that sought to diagnose emotional and behavioral disturbances without intellectual impairment. The contrast between Prichard's theoretical framework and its practical application in asylums demonstrates how scientific discourse was manipulated to maintain patriarchal pathologization of women. The examination of the legal doctrine of coverture, derived from English common law and codified by Sir William Blackstone, which not only denied married women legal personhood from their husbands but also facilitated their confinement in psychiatric institutions.

The concept of 'moral insanity' was constructed and institutionalized by the prejudiced society of America during the 19th century. Defying the religious beliefs of husbands, epilepsy, suppressed menstruation or use of birth control were among the 'unconventional' symptoms used to justify the labeling of women as 'morally insane' during this time. Through medicalized stigma and institutional control, mental asylums became instruments for reinforcing gendered oppression rather than spaces for genuine psychiatric care. Various aspects of women's lives including their behaviors, emotions and conditions were stigmatized, yet none of these diagnoses served to reinforce the manifestations of patriarchy, as evidenced by the institutions of the 19th-century mental asylums.

This intersection of legal and medical authority illustrates how psychiatry functioned as an extension of patriarchal power rather than an objective medical discipline. By juxtaposing Prichard's moral insanity theory with Blackstone's legal framework and Kirkbride's asylum reforms, this article argues that while psychiatric theory evolved to recognize emotional afflictions as legitimate diagnosis for moral insanity, its application remained deeply gendered. By critically examining the historical interplay between

psychiatry, law and gender, this article contributes to a broader understanding of how medical institutions have historically functioned as tools of patriarchal subjugation.

Historical Analysis

The term merciless may fall short of addressing the torture that the inmates of the Blackwell Asylum encountered at the hands of the caregivers. Cold baths, rotten meat, stale bread and tea tasting like copper water are only a few examples that begin to reflect the standard of living survived by the patients. Nellie Bly is the first female investigative journalist in America and one of her famous investigations was based on the happenings within the Blackwell Island Asylum in 1887, which was later documented into the book 'Ten Days in a Madhouse'. As a journalist from the newspaper 'New York World', Bly forged insanity to get admitted into this asylum and conduct investigations on the happenings within them.

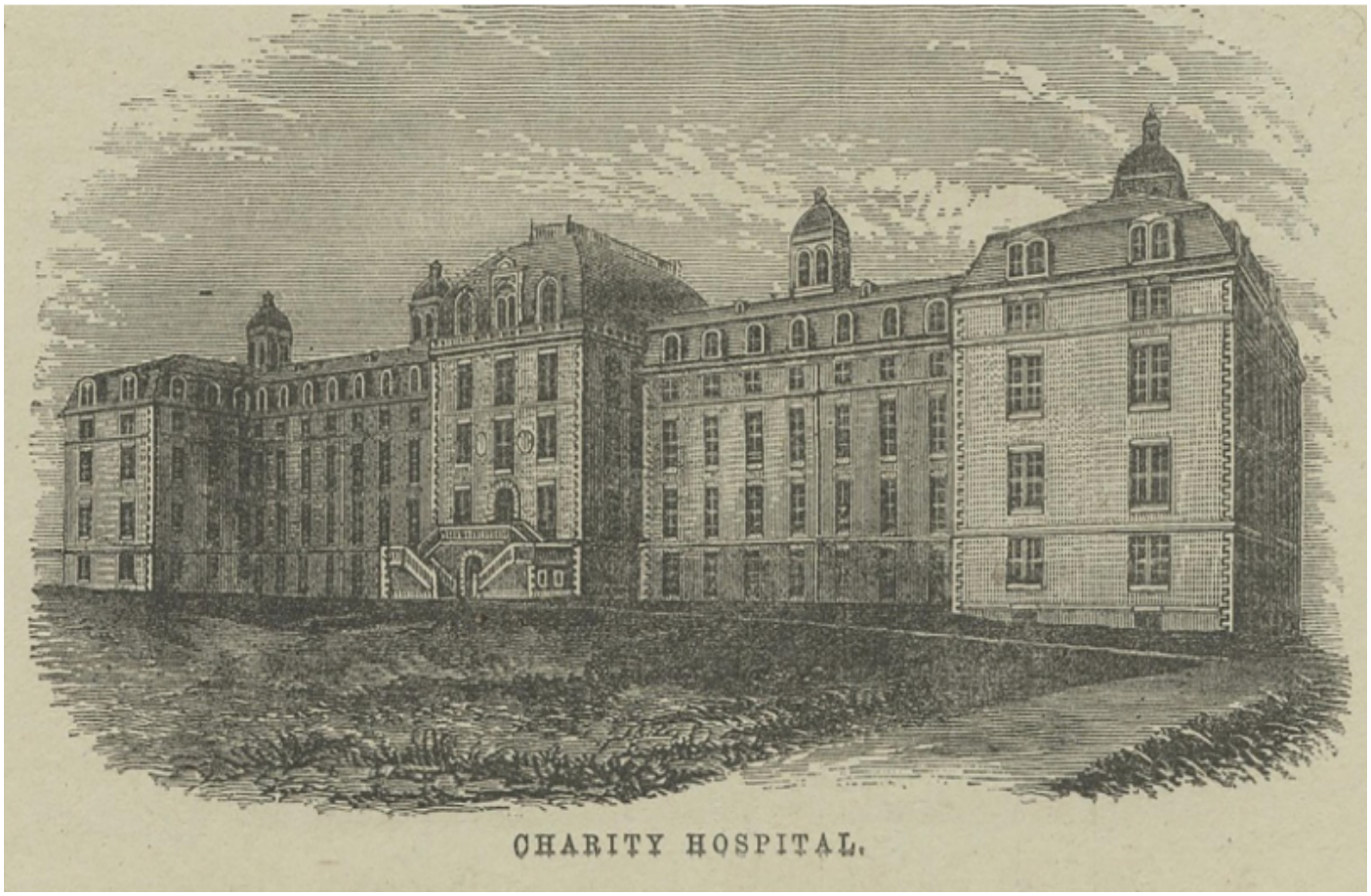


Figure 1: The Blackwell Island Asylum also referred to as the charity hospital in 1887, located in today's Roosevelt Island in New York.[1]

'Rub, rub, rub, went the old woman chattering to herself. My teeth chattered and my limbs were goose-fleshed and blue with cold. Suddenly I got, one after the other, three buckets of water over my head–ice cold water….I think I experienced some of the sensations of a drowning person as they dragged me, gasping, shivering and quaking from the tub'.[2] From the narrations of Nellie Bly's first time getting a cold bath at the asylum, the torment is indicative of that of prisons. These women were imprisoned in the name of insanity to preserve the dignity of the patriarchal society. Especially, at times of winter such cold baths could lead to the demise of many invalids. There were also laws within the institution regarding the use of heater, the patients were not allowed to turn on the heater until October, regardless of how cold it gets.[3]

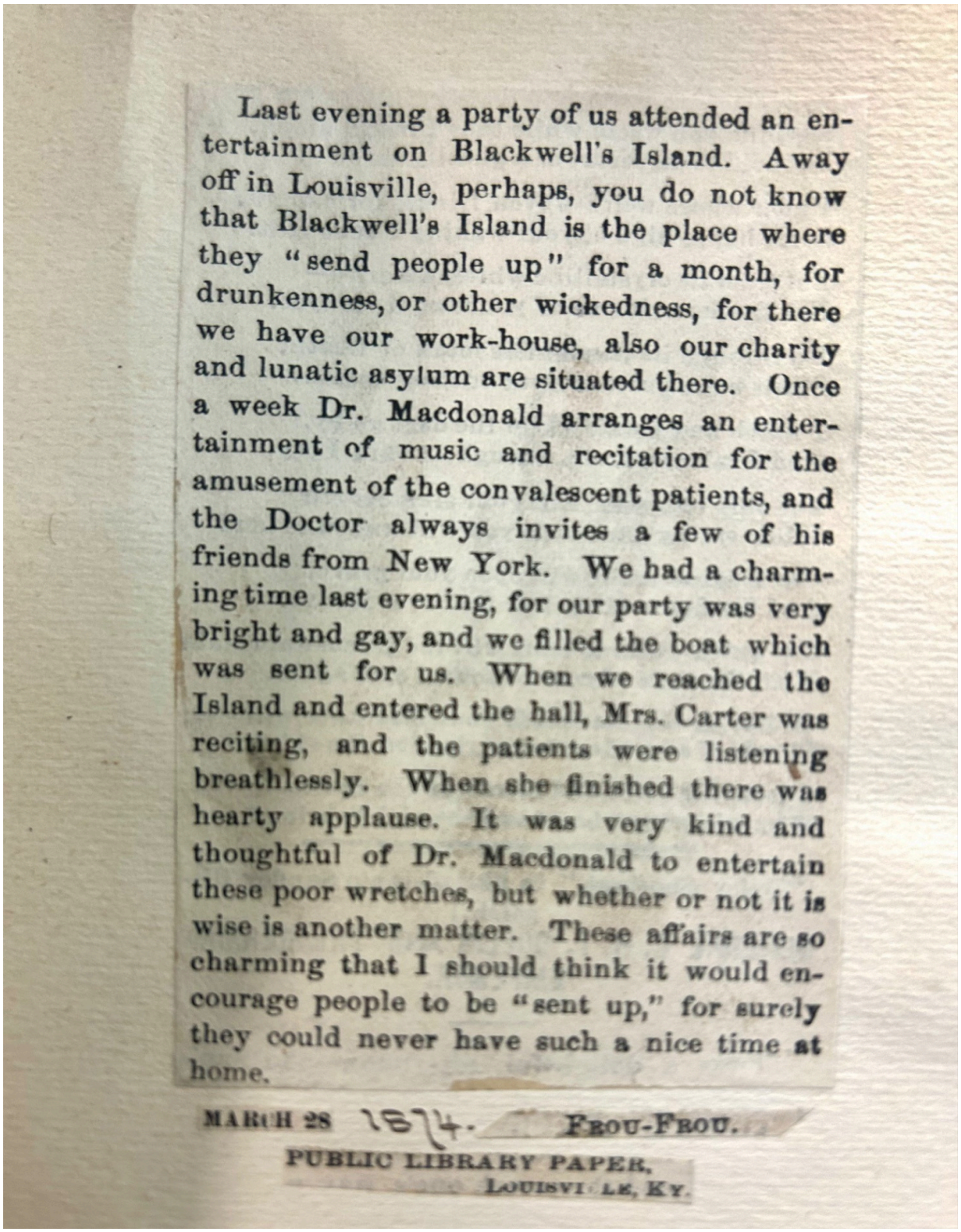


Figure 2: An illustrated depiction of Blackwell Island's weekly entertainments published in Frank Leslie's Illustrated News article.[4]

Dr. Alexander E. Macdonald was the Superintendent of the Island's insane asylum in 1870. During his tenure, Dr. Macdonald is known to have thrown musical concerts and parties at the asylum, where his friends from the city have come as spectators to enjoy the concert almost every weekend.

According to the 'scrapbook from the NYPL archives' that has documented the news article reports of these concerts at the Island's insane asylum, Dr. Macdonald was praised for entertaining the invalids of the charity hospital through these late night parties.[5] An asylum that lacks the professionals and resources to feed, care and cure the patients was praised for having a superintendent that is generous enough to throw parties every weekend for the friends of the institution. This is the bigger picture of corruption behind the happenings of the Blackwell Island Asylum, but there is even more to it. Although there are no direct references about Dr. Macdonald in the book 'Ten Day in a Madhouse' by Nellie Bly, the time period between her investigations at the asylum and his tenure falls in place coincidentally.

'We would all promise, because we knew the doctors would not help us and we would do anything to escape the punishment [....] Among other beating I got there, the nurses jumped on me once and broke two of my ribs'.[6] The reference to 'we' here is symbolic to the shared unity in struggle and pain that Bly deeply resonates with the fellow patients from the asylum. Incidents of physical and mental abuse from the nurses through threatening to 'hold the patients under cold water and leave them to die' were infamous within the silent walls of the institution.[7] The only medical professionals, the doctors paid no heed to the complaints of the patients. Bly herself had tried to raise this issue before the medical practitioner during her examination however, it only brought her two broken ribs. Red marks of fingers were evident in the arms and cheeks of patients who refused the threats told on the nurses to the doctors. As per the accounts of Bly in the book, the demise of several patients had resulted from these torturous treatments that were beyond inhumane and were unjustified by any medication to treat moral insanity in the Asylum.



Last evening a party of us attended an entertainment on Blackwell's Island. Away off in Louisville, perhaps, you do not know that Blackwell's Island is the place where they "send people up" for a month, for drunkenness, or other wickedness, for there we have our work-house, also our charity and lunatic asylum are situated there. Once a week Dr. Macdonald arranges an entertainment of music and recitation for the amusement of the convalescent patients, and the Doctor always invites a few of his friends from New York. We had a charming time last evening, for our party was very bright and gay, and we filled the boat which was sent for us. When we reached the Island and entered the hall, Mrs. Carter was reciting, and the patients were listening breathlessly. When she finished there was hearty applause. It was very kind and thoughtful of Dr. Macdonald to entertain these poor wretches, but whether or not it is wise is another matter. These affairs are so charming that I should think it would encourage people to be "sent up," for surely they could never have such a nice time at home.

MARCH 28 1874. FROU-FROU.

PUBLIC LIBRARY PAPER,
LOUISVILLE, KY.

Figure 3: An article published on March 28, 1874 in The Public Library article describing the entertainments organized by the Superintendent of the Island's insane asylum.[8]

Few states in America had established asylums by the late 1800s to shelter women who were unjustly admitted by their husbands and diagnosed as insane. The New York City Lunatic Asylum, also known as the Blackwell Island Asylum built in 1839, was initially open to both men and women transferred from the Bellevue Hospital, but later in the 1870s, the male inmates were transferred to another branch asylum and Blackwell Asylum became an all-women asylum.

While such injustice treatments were happening within the Blackwell Island Asylum, a similar situation was observed in the state of Illinois. Elizabeth Packard was an iconic figure who advocated against the unjust practice of admitting women into asylums under the pretense of insanity. 'Undoubtedly our insane asylums were originally designed and established, as humane institutions and for a very humane and benevolent purpose; but, on their present basis, they really cover and shield many wrongs, which ought to be exposed and redressed'.[9] Packard herself was admitted to the Jacksonville Insane Asylum in Illinois from 1860-63, under the diagnosis of having contradicting religious beliefs from that of her husband., which ultimately sufficed to proclaim her as insane. After spending three years at the asylum, she was proclaimed as 'incurably insane' and released from the institution. However, following her release from the asylum, Packard was then imprisoned by her husband in their home and she tried to send a letter through her friend appealing to the judge.

While it was legal then for her husband to have Packard admitted to an asylum for the insane, it was illegal for him to confine her to their home. A Habeas Corpus was issued by the judge demanding that Packard must be presented before the court for the trial to determine her mental state. During the 5-day trial of Packard v. Packard, witnesses testified for and against Packard; physicians who had treated her shared that her religious views and unwillingness to submit to that of her husband's is the main reason for her diagnoses. Neighbors and friends of Packard testified on her behalf and a doctor and theologian shared insights on how various intellectuals in Europe had shared the same kind of religious views of that of Packard. At the end of the trials, the jury found Packard as sane and then she was separated from her husband.

Historiography

James Cowles Prichard (1835), who had coined the terminology, "moral insanity," described it as a mental defect that distorted a person's natural instincts and desires, a concept that was first introduced in his book *A Treatise on Insanity and Other Disorders Affecting the Mind* (1835).[10] The first employment of moral insanity defense in American history, based on this framework, was in the Trial of Daniel Sickles (1859), to reduce the culpability for the crime of unlawful homicide. The American Congressman Daniel Sickles was tried for the murder of Philip Barton Key II, for having an affair with Mrs. Sickles.[11] However the defense team argued that the defendant was temporarily insane owing to the emotional turmoil caused by the affair. This argument indirectly attributes to Prichard's proposition that intense emotional disturbance could impair moral judgment of an individual. While Prichard's theory contributed as a framework to invoke insanity defense, by violent men in some cases for reduced culpability, *moral insanity* was selectively applied to justify the institutionalization of women for minor acts of defiance towards the late 19th century in America.

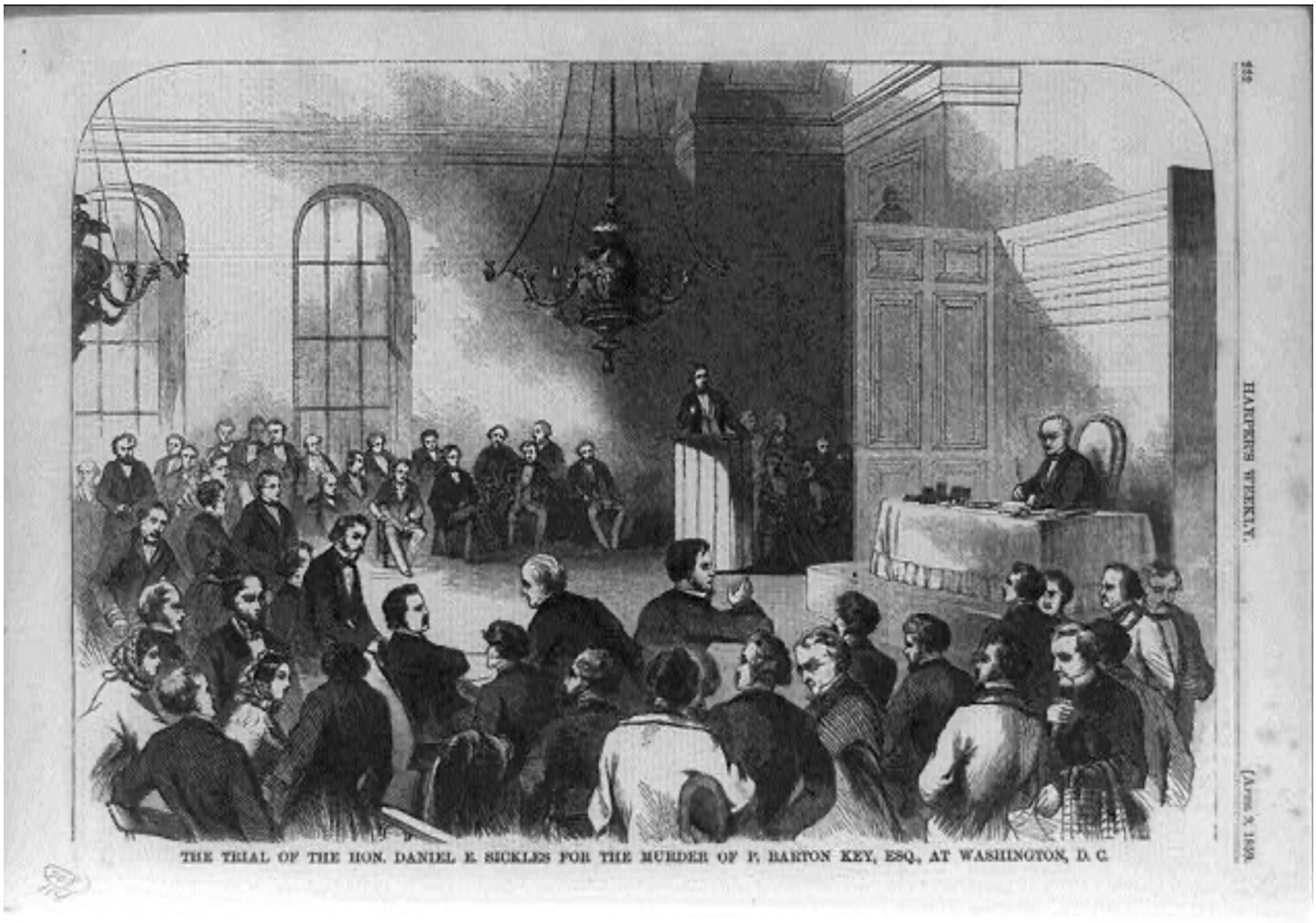


Figure 4: The Trial of the Hon. Daniel E. Sickles for the murder of P. Barton Key, at Washington, D.C. in 1859.[12]

Coverture, a legal doctrine originated in England, was later adopted by America through the English common law during colonial rule. Codified by Sir William Blackstone, an 18th-century English jurist, coverture established that upon marriage, a wife's identity was subsumed under the jurisdiction of her husband, making her incapable of owning property or seeking legal recourse, a concept later referenced in The Encyclopedia of Rape (Merril Smith 2004).[13] Blackstone's legal frameworks prevented the legal system from recognizing marital rape as a crime, reinforcing patriarchal control by granting legal immunity to husbands and depriving wives of any legal protection within the institution of marriage. The denial of women's legal autonomy under coverture extended beyond marriage into the realm of mental health. Women who defied their husband's authority—whether by seeking divorce, asserting bodily autonomy or resisting religious beliefs, were increasingly labeled as 'morally insane' and confined to asylums. As a result, Blackstone's legal interpretations not only justified women's subjugation within marriage but also laid the groundwork for the pathologization of patriarchy in 19th-

century psychiatric institutions. The societal brainchild of mental asylums was still in its infancy during this time period, nevertheless the states of New York, Massachusetts, Pennsylvania, Ohio, Illinois, Michigan, Maryland and Virginia had already built an extensive network for it by the 20th century to fulfill the demands of the patriarchy.

In 1854, Thomas Story Kirkbride, a physician and superintendent of the Pennsylvania Hospital for the Insane, wrote a prominent series of articles for the American Journal of Insanity, about the ‘‘Kirkbride Plan’’ that would govern the design of both public and private asylums well into the twentieth century. ‘The unique feature of a Kirkbride hospital was its staggered wings that allowed light and adequate cross ventilation[...] One of the amenities called for in these articles were libraries, one for male patients and one for female patients’.[14] Features like cross ventilation in asylum would help the patients feel less confined in their own confinement. Enabling access to libraries for both the genders separately could also have them exposed to reading different kinds of genres, but especially fiction which could be a diversion from their sufferings.

The Kirkbride Plan was indeed a visionary initiative to build healthier accommodations within asylums and pay heed to the wellbeing of the residents. Benjamin Rush, an American Physician, is one of the forefathers that laid the groundwork for the moral therapy movement through his book, where he suggests having psychiatric patients involved in ‘‘amusements’’ such as reading.[15]

Discussion & Theory

Prichard's theory of moral insanity denoted a vital departure from the conventional perspective of insanity, solely linked to intellectual deficiencies by emphasizing that an individual could exhibit ‘moral insanity’ through the impairment of emotions and social behaviors despite their cognitive abilities remaining intact. This recognition broadened the understanding of mental illness in the field of psychiatry. In contrast, Blackstone’s legal doctrine of coverture amalgamated disobedience of patriarchal authority with insanity, reinforcing the institutionalization of women under the disguise of legal incapacitation. Prichard’s theory intended to introduce nuance into psychiatric diagnoses was exploited in practice, offering a potential counter to Blackstone’s legal subjugation of patriarchal pathologization.

Although Kirkbride's architectural reforms were largely infrastructural, aiming to humanize the country’s asylum systems, these reforms would have lacked the theoretical foundation to accommodate patients whose afflictions were primarily emotional rather than cognitive, without Prichard’s theory in addressing the conceptual shift. Thus, Prichard provided the necessary diagnostic flexibility that underpinned the evolution of treatment modalities which was later championed by Kirkbride.

While the 19th-century American context weaponized the concept of moral insanity to oppress women, Prichard’s original theory was not inherently gendered, it was a framework designed to diagnose moral insanity in both men and women. This ubiquity is in stark contrast to Blackstone’s coverture, which codified gender-specific subjugation under the law. Kirkbride’s reforms also aimed to address both male and female patients, but Prichard’s theory provided diagnostic coherence to the

therapeutic interventions of Kirkbride's institutions. For instance, access to libraries and ventilated spaces was beneficial, but the identification of patients requiring moral, rather than purely intellectual, treatment was made possible through Prichard's conceptual innovation.

Prichard's theory offered a groundbreaking bridge between psychiatric diagnosis and legal defense. The Sickles case, though highlighting the theory's gendered misuse, also demonstrated its capacity to account for emotional disturbances as legitimate impairments. This complexity was absent in Blackstone's legal codes, which rigidly subordinated women and denied emotional volatility unless it served patriarchal ends.

Although Kirkbride's architectural reforms did not directly engage with the legal-psychiatric nexus, Prichard's work, however, laid the groundwork for recognizing emotional trauma as a mitigating factor in criminal jurisprudence, influencing the moral insanity defense. Kirkbride's structural improvements complemented this by constructing environments where such nuanced diagnoses could be healed. By recognizing the spectrum of mental health, Prichard's work inadvertently exposed the inadequacy of asylums like Blackwell Island, which functioned as patriarchal prisons rather than therapeutic spaces. Kirkbride's vision on the other hand suggested substantive psychiatric reform by transforming asylums into spaces of care. Prichard's conceptual foundation affirmed Kirkbride's infrastructural changes to align with a more patient-centric approach, emphasizing individualized care based on emotional and behavioral afflictions. In conclusion, Prichard's theoretical contributions not only pioneered but also challenged Blackstone's patriarchal legalism, while providing a critical foundation to Kirkbride's architectural humanism within a broader psychiatric evolution.

Conclusion

The 19th century of American history not only represents a dark history of silencing women through the institutionalization of patriarchal pathologization but also some of the groundbreaking theories in the field of psychiatry. It redefined, challenged and reformed the concept of moral insanity. The Blackwell Island Asylum is just one of many asylums that imprisoned women under the diagnoses of moral insanity. It is revolutionaries like Nellie Bly and Elizabeth Packard, who not only documented the stories of these women but also advocated for reformations in the patriarchal society. Although Prichard's contributions were selectively applied in fulfilling the manifestation of the patriarchy and codified under Blackstone's legal framework; They helped to reinforce the need for patient-centered reforms within Kirkbride's architectural vision.

Endnotes

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