Introduction: Gender and Class in the Historiography of British and Irish Psychiatry

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This volume had its origin in a stimulating seminar series devoted to historical perspectives on gender and class in the history of psychiatry. The papers presented outlined a number of important perspectives on the place of gender and class within the history of psychiatry and, more broadly, medicine and society. There were also considerable inter-relationships between the various thematic strands developed in the papers – so much so, that organisers, speakers and participants alike were keen to see a published outcome.

Although gender and class studies of medicine have attracted a wide range of scholarship in recent decades, and have selectively explored gendered and class aspects of mental illness and psychiatry, very few have addressed both themes in tandem. Widening provision at university level for the study of the history of medicine has not been adequately met by specific texts granting an easy, readable access to the types of questions being raised by historians concerned with how medicine or psychiatry has been mediated by, and has itself constructed, visions of gender and class. Not only students, but many scholars themselves have found it difficult to engage with the disparate literature on such themes. It is envisaged that this edited collection will bring together in one volume a group of inter-related perspectives to offer the reader an excellent overview of the essential constituents of gender and class-based approaches to the history of psychiatry.

Rather than adopting an exclusively class-oriented or gender-studies based approach to (psychiatric) history, most contributions have the distinctive strength of combining, comparing and contrasting these twin perspectives. Unlike some previously rather Anglo-centric and chronologically confined collections on British
psychiatry, the book has the additional advantage of giving coverage to the (Dis)United Kingdom as a whole, from the mid-eighteenth to the late-twentieth centuries. Indeed, to extend the thematic, chronological and geographical scope of the book, contributions from Houston, Melling and Michael in this volume were specially commissioned.

In the first part of this short introduction we will selectively draw out historiographical issues and themes which seem particularly relevant both for work in general in this field and for the essays collected here. We will also seek to suggest some key lines and directions for future research. We make no claim to offer a complete or entirely new schematic model for work in this field, but showcase a relatively representative sample. Finally, in the second part of the introduction we will provide the reader with a summary of the innovative and important elements in the collection’s chapters, as well as draw out some of the significant links and differences in their themes.

**Contexts**

Gender perspectives on the history of British and Irish psychiatry and asylums were once dominated by a somewhat exclusive focus on women; on distorted, if not misogynistic, psychiatric constructions of femininity, and of specific, female-directed forms of treatment; on the creation of mental illness as a predominantly feminine disorder, and on male-orchestrated abuse of women and chauvinism within psychiatry and psychiatric institutions. Crudely conceived in some studies, psychiatry – analogously to the medical dismissal of witches as deluded crones, and the ousting of cunning women, female healers and midwives by male doctors, man-midwives and obstetricians – was a tool in the subjugation of women and a denial of their avenues to knowledge or to the occupational roles held by men. As Nancy Tomes pointed out in a recent historiographical survey, some of these early feminist histories were more manifesto than a measured historical evaluation of the gendered aspects of psychiatry. Yet they were nevertheless path-breaking in many ways, and not least because psychiatric history prior to the 1960s had been a virtually woman-free zone.4

More recent studies have to some degree built upon these earlier approaches. Their models whether of ‘feminisation’ of cultural representations,5 or of the medicalisation of the female sex, are more thoroughly contextualised and better founded on empirical evidence. Yet, in a number of specific and more general contexts, recent surveys