

Portraits of Madwomen: Another Look at Dr. Hugh Welch Diamond's Photographs of the Insane Female in Victorian England

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The history of the madwoman conjures up from the past a succession of images suggesting an irresistible mixture of science, sexuality, and sensationalism. Some of these dramatic images include the wandering womb of classical Greece, the witch of Renaissance Europe, and the salon lady of eighteenth-century Paris swooning with the vapors.¹ The madwoman was portrayed in scientific texts by means of the various traditional graphic media. We should not be surprised, then, to find photography joining other methods for depicting the female lunatic in the middle of the nineteenth century.

This paper examines photographs and photo-based lithographs of the madwoman produced by British psychiatrist Dr. Hugh Welch Diamond, superintendent of the Surrey County Lunatic Asylum in the 1850s. Between 1848 and 1858 Diamond systematically photographed the female lunatics under his supervision. According to Diamond, these pictures of the insane benefited patient, doctor, and the asylum in three ways. First, photographic portraits could be used diagnostically, to record the external phenomena of each form of insanity as they were manifested by the diseased brain on the facial features. Second, they could be used as a treatment to counteract this diseased brain, for, when shown to the patient, the portraits allegedly produced a reaction of pleasure and interest facilitating recovery and often leading to a cure. Finally, portraits of the insane were valuable to administrators of the asylum for identification purposes in cases of readmission.²

A discussion of photographic medical illustration during this period brings up issues of realism and the very nature of representation. How reality is represented has been a concern for art historians for many years, although it has taken on heightened significance in the last decades in the writings of feminist and cultural studies theorists. Moreover, an important concern for feminism has been the representation of women in visual culture as it functioned under patriarchy; similarly, this paper will demonstrate how the juncture of art, science, and repre-

sentation of women plays itself out in nineteenth-century psychiatric practice.

Diamond's pioneering photographs were assembled and published by psychiatric historian Sander Gilman, who sees insanity as a culturally specific entity. Gilman's writings have focused to a large extent on racial and sexual stereotypical representation. In his 1976 book on Diamond's photographs, titled *The Face of Madness*, he discusses the doctor's medical practice and theories.³ While Gilman identifies Diamond's conviction that photographs represented scientific truth, he does not specifically deal with the role of photography in the hierarchy of gender or in the larger culture. More broadly, feminist writers have worked specifically with issues surrounding the female mental patient, including literary depictions of the hysteric. Notable is Elaine Showalter, whose 1985 book *The Female Malady* is often cited in studies of the gender-specific roles of doctors and their patients in both the nineteenth and twentieth centuries.⁴ A vast amount of work has also been done on the photographic practices of the famous Jean-Martin Charcot, the nineteenth-century psychiatrist at Salpêtrière, whose photographs of female hysterics had a dramatic impact on the Surrealists, particularly Andre Breton and Max Ernst.⁵

Since both Gilman's and Showalter's books offer valuable insights into the psychiatric portrait, I rely heavily on both authors in this investigation. However, Allan Sekula's work in "The Body as Archive," which explores the body as it is articulated in the photograph, provides further insight into the method by which Diamond, as a pioneer photographer in the middle of the century, presented the portrait photograph as empirical evidence of insanity. According to Sekula, every portrait produced during this period took its place within the social and moral hierarchy of the culture. He argued that the photographic portrait had a dual function that both celebrated the status and individuality of the sitters and recorded them as members of a class vulnerable to measures of social control. The first aspect

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¹ Mark S. Micale, *Approaching Hysteria: Disease and Its Interpretations* (Princeton, New Jersey: Princeton UP, 1995) 3.

² Hugh W. Diamond, "On the Application of Photography to the Physiognomic and Mental Phenomena of Insanity," read before the Royal Photographic Society, May 22, 1856. Reprinted in Sander L. Gilman, ed.,

The Face of Madness: Hugh W. Diamond and the Origin of Psychiatric Photography (New York: Brunner/Mazel Publishers, 1976) 20-23.

³ Gilman, *The Face of Madness* 3-13.

⁴ Elaine Showalter, *The Female Malady: Women, Madness, and English Culture, 1830-1980* (New York: Pantheon, 1985).

⁵ For a recent publication on this topic, see Sander L. Gilman, "The Image of the Hysteric," in *Hysteria Beyond Freud* (Berkeley: U of California P, 1993).

of this duality he termed “honorific,” the second “repressive.”⁶ The British public mental hospital, where the doctors were drawn from the middle and upper classes and most of the inmates came from the lower and working classes, is an apt example of a moral and hierarchical structure within the larger culture. Adding gender to Sekula’s model, I have applied his theory to the residents of the Surrey County Lunatic Asylum to examine how photographs functioned in psychiatric texts and practices. Sekula’s approach allows the Surrey Asylum portraits and Diamond’s three-fold theory of the photographs’ effectiveness to be understood in relation to each other. His honorific function is most evident in the female patients’ positive response to their portraits which indicate a recognition of established representations of both madness and normality. His repressive function is played out as the psychiatric portraits reaffirmed the traditional hierarchies imposed by class and gender, both of which informed the authority of the doctor and the legitimacy of the asylum system.

In this heyday of phrenology and physiognomy, which presumed the exteriorization of mental and behavioral processes, Diamond, like his contemporaries, believed photography to be the ultimate means by which to record an “objective,” and therefore scientific “reality.” A founding member and early officer of the Royal Photographic Society, in 1856 Diamond presented his findings in a paper titled “On the Application of Photography to the Physiognomic and Mental Phenomena of Insanity,” concluding:

Photography gives permanence to these remarkable cases, which are types of classes, and makes them observable not only now but for ever, and it presents also a perfect and faithful record, free altogether from the painful caricaturing which so disfigures almost all the published portraits of the Insane as to render them nearly valueless either for purposes of art or of science.⁷

However, by working within the existing visual code, Diamond’s portraits weld science and art together in a common pursuit. His subjects exhibit a passivity or a habitual facial expression supposedly enabling the medical expert to detect the dominance of a single passion (Figure 1). But in their frontal or three-quarter poses, often sitting or standing before drapery, they reflect early nineteenth-century portraiture as much as the “science” of physiognomy. To wit, Diamond’s portraits recall those painted by Théodore Géricault between 1821 and 1824.

Furthermore, Diamond frequently overtly intervened in the photographic process. His subjects are often shown posed with props evoking literary and visual models of femininity. In one photograph from the Surrey Asylum group, the patient was wrapped in a black mantle and posed as Ophelia, the Shakespearian madwoman so often depicted in Victorian art and literature (Figure 2). Diamond went so far as to place a garland on the head of his lunatic in this photograph.

Showalter points out that Ophelia was indeed a prototype for the madwoman in the asylum. Victorian psychiatrists were often enthusiasts of Shakespeare and turned to his plays for models of mental aberration that could be applied to their clinical practices. As British doctor J. C. Bucknill remarked in 1859, “Every mental physician of moderately extensive experience must have seen many Ophelias. It is a copy from nature, after the fashion of the Pre-Raphaelite school.”⁸

The English Pre-Raphaelites, in fact, returned often to the theme of the drowning Ophelia. Renditions by Arthur Hughes (Figure 3) and John Everett Millais (Figure 4) were both exhibited in the Royal Academy show of 1852, where Hughes’s juxtaposition of childlike femininity and Christian martyrdom, also published in *Art Journal* the same year, was overpowered by Millais’s treatment of Ophelia as an actual drowning victim, as well as a sensuous siren.⁹

In Britain during the 1840s, the use of physical restraint was losing ground in favor of “moral management.” Eventually widely-practiced in newly built asylums, the term was used by reformers to indicate humane treatment of mental patients who were exhorted to exercise willpower and moderation in their personal habits to cure their insanity.¹⁰ One of these asylum reformers was John Connolly, a Professor of Medicine at the University of London. In 1858, Diamond’s photographic portraits became the basis for a major series of essays by Connolly extolling the virtues of moral management.¹¹

Lithographic reproduction of photography, of course, engenders another level of mediation away from “reality.” Indeed, lithographs were used by nineteenth-century authors to privilege or confirm both photography and text. Contemporaries of Diamond and Connolly were aware of the lithograph’s potential for distortion, especially in the rendering of detail. But, while the lithograph of the photograph altered the value of the illustration for medical purposes, it did not destroy it, and, in any case, both doctors considered the photo-based lithograph to be a more accurate portrayal of insanity than any interpretive sketch or drawing. As if to attest to the verisimilitude of both media, Diamond and Connolly used original photographs

⁶ Allan Sekula, “The Body and the Archive,” in Richard Bolton, ed., *The Contest of Meaning: Critical Histories of Photography* (Cambridge, Mass.: MIT Press, 1992) 345.

⁷ Diamond in Gilman, *The Face of Madness* 24.

⁸ J. C. Bucknill, *The Psychology of Shakespeare* (1859). Reprint. (New York: AMS Press, 1970) 110.

⁹ Showalter 90.

¹⁰ Showalter 30-31.

¹¹ Gilman, *The Face of Madness* 11.

as well as lithographic reproductions in their practices, believing their theories to have more empirical worth because they were based on photographs.

Other forms of mediation on the part of the photographer are evident in the portraits of the Surrey County Asylum patients. One of these depicts a young woman as she was posed by the photographer, seated while leaning her arm on top of a table (Figure 5). The patient has been diagnosed as suffering from religious melancholia, a disease considered to be more prevalent in women than men. Indeed, her position recalls the classic pose of the melancholic depicted throughout much of art history. As Connolly explained to his readers, the patient, a young Irish girl who had left the Protestant faith to become a Roman Catholic, had insufficient education to argue effectively for either religion.¹²

Connolly noted her "high and wide forehead," indicating "intelligence and imagination." The well-formed lips and ears, and the rather large jaw, all demonstrate her "force of character." Her deeply set eyes and long eyebrows are all characteristic of her present mood, as well as her general temperament, he theorized. Furthermore, since the patient's conflict was mostly intellectual, her large brain had been engaged in meditations that were too powerful for it to overcome.¹³

However, to postmodern eyes the image presented in the portrait exhibits obvious signifiers that would readily convey "religious mania" to a nineteenth century educated viewer. If the pose alone were not enough to signify such a characterization, the prominent cross dangling from the young woman's neck and her high, bare, "intellectual" forehead visually serve both to confirm Diamond's diagnosis and to communicate it to British subjects well aware of the religious conflicts plaguing the Empire for generations.

Thus, we see this portrait of the young female melancholic function repressively in Diamond's and Connolly's hands, as it served to uphold the religious and psychiatric wisdom of the period. As Showalter explains, despite any awareness of possible environmental factors influencing insanity on the part of nineteenth century medical men, the prevailing view was that the statistics proved what they had suspected all along: women were more vulnerable to mental illness than men because their reproductive systems were unstable and thus disturbed their emotional and rational control. Indeed, it is Showalter's opinion that the rise of the psychiatric profession may well have been linked to the rise of the Victorian madwoman, complete

with medicine's attitudes toward women and its monopoly by men.¹⁴

The accomplishment of a cure was the salient feature of a collection of four of Diamond's psychiatric portraits (Figure 6). Diamond described these images as representing stages which mark the progress and the eventual "perfect cure" of one of his young female patients.¹⁵

Connolly diagnosed the patient as a victim of puerperal mania. He related how the patient had become a mother shortly before the onset of her disease. Her husband, in the meantime, fearful that he would not be able to provide adequately for his new family, had left them to find work in Australia. Apparently discounting the effect the departure of the family breadwinner may have had on a new mother in such uncertain economic circumstances, Connolly described the household as it was suddenly interrupted by her behavior. She began to speak sharply to those around her, losing both her cheerfulness and her interest in her infant, "adopting a levity of manner and a fantastic arrangement of her head-dress and apparel," as he wrote in one of his essays.¹⁶

He went on to describe each of the portraits. In the first (at upper left) a short initial stage of dullness and apathy is represented. The patient spent nearly all day in one posture, sitting with her hands crossed on her knees, refusing conversation and even food.¹⁷

However, he continued, by the sitting for the second portrait eight days later (upper right), Diamond's patient exhibited the lively, even mirthful, expression typical of this affliction. While the patient sits in a posture nearly identical to that in the first sitting, in the second she looks as if she might be persuaded to get up and dance, he wrote. She now spent her days singing, tearing her clothes and voraciously consuming her food.¹⁸

Six weeks after the onset of her disease, a great change took place in both the patient's countenance and behavior, indicating the beginning of recovery. In the third portrait (lower left), she is shown standing neatly attired in a dress and a shawl. She had begun to spend her time at her needlework and had indicated her desire to leave the asylum. However, Connolly warned, due to the tension still visible in her facial muscles, the experienced physician is able to determine that she is not yet completely cured.¹⁹

However, following a month or two of observation, the patient was allowed to leave the asylum. The fourth portrait

¹² John Connolly, "Case Studies from the Physiognomy of Insanity," *The Medical Times and Gazette* (1858). Reprinted in Gilman, *The Face of Madness* 27-31.

¹³ Connolly in Gilman, *The Face of Madness* 27-31.

¹⁴ Showalter 55.

¹⁵ Diamond in Gilman, *The Face of Madness* 21.

¹⁶ Connolly in Gilman, *The Face of Madness* 59-62.

¹⁷ Connolly in Gilman, *The Face of Madness* 59-62.

¹⁸ Connolly in Gilman, *The Face of Madness* 59-62.

¹⁹ Connolly in Gilman, *The Face of Madness* 59-62.

²⁰ Connolly in Gilman, *The Face of Madness* 59-62.

(bottom right) commemorated this event. Connolly concluded his essay by noting that her features were composed in an animated, yet not excited, expression, indicating the restoration of her health and sufficient strength to resume her role as wife and mother in Australia.²⁰

Diamond wrote that the “poor maniac” herself could scarcely believe that this final portrait was preceded by the others. She was given copies of the photographic portraits to take with her, presumably to remind herself of her previous “fearful” condition. In Diamond’s opinion, with these “faithful monitors in her hand,” she would never cease to be extremely grateful for her marked and unexpected recovery at his hands. In fact, he speculated that the chaplain of the asylum would support him if he were to draw a moral truth from these portraits attesting to the validity of his psychiatric approach.²¹

Thus, what Sekula terms the honorific function of the portrait is fulfilled in this instance as the mental patient accepted a new vision of herself as a cured woman. At the same time, the depictions of herself in a deranged condition acted repressively as prophylactic admonitions, warning, “See what will happen to you again if you fail to play your proper role in life.”

Moreover, Victorian psychiatrists had strong convictions about their female patients’ physical appearance. Madwomen were expected to care more about the way they looked than madmen, and, in many instances, their sanity was predicated on their compliance with middle class standards of fashion. Connolly, especially, worried about bareheaded female patients, believing it unnatural for a woman to neglect her headdress. Her tendency to be concerned with the external condition of her head could be encouraged or restored by presenting her with a neat cap for Sunday wear, he noted. Indeed, as Showalter points out, inmates who wished to impress the asylum staff with their progress could do so by conforming to prevailing ideas of a proper feminine *toilette*. Connolly wrote, in fact, “Dress is women’s weakness, and in the treatment of lunacy it should be an instrument of control, and therefore recovery.”²²

Diamond’s third application of psychiatric photography, that of identification of the recidivist madwoman, is more completely repressive (Figure 7). The madwoman in this lithograph represents two states of mental disease: the one on the left termed religious melancholia, the other on the right labeled convalescence. However, the fortuitous consequence of a cure is not indicated here. These portraits depict one of the many unfortunate creatures who will never be cured, one whose illness consists of a series of alterations between these two states lasting a lifetime. We do not know if this woman was released and later readmitted, in which case Diamond’s photographs presumably would have been available to identify her. However, in his assessment of the patient, Diamond confided that he often found

a portrait of more value in recalling one of his relapsed cases than any notes he may have made when she was previously in his care.²³

It should be noted that Diamond also took photographs of male lunatics (Figure 8). However, perhaps in part because he was in charge of the asylum’s female ward, his depictions of men are vastly outnumbered by his portraits of woman. Both psychiatrists seemed to prefer to concentrate on their female patients, especially on aspects of their physical appearance and demeanor.

Thus, Diamond’s illustrations of the madwomen at Surrey County Lunatic Asylum can be seen to weld the honorific and repressive functions of portrait photography together, as Sekula’s binary model proposed. At the Surrey County Lunatic Asylum, both the honorific and repressive functions of Diamond’s photographs rest on a shared belief, by the madwoman and her doctor, that the body as depicted in the portrait was incontrovertible evidence of the inner condition of the mind.

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Figure 1. Hugh W. Diamond, Patient posed before drapery, photograph, 1848-58. Photograph courtesy the Royal Society of Medicine, London.

²¹ Diamond in Gilman, *The Face of Madness* 21.

²² Showalter 84. Connolly, *The Construction and Government of Lunatic Asylums and Hospitals for the Insane* (1847). Reprint. (London: Dawsons, 1968) 61.

²³ Diamond in Gilman, *The Face of Madness* 24.



Figure 2. Hugh W. Diamond, Patient posed as Ophelia, photograph, 1848-58. Photograph courtesy of the Royal Society of Medicine, London.

[below] Figure 3. Arthur Hughes, *Ophelia*, oil on canvas, 1852. Photograph courtesy the Folger Shakespeare Library, Washington, D.C





Figure 4. John Everett Millais, *Ophelia*, oil on canvas, 30 x 44 inches, 1852. Photograph courtesy of the Folger Shakespeare Library, Washington, D.C



Figure 5. Hugh W. Diamond, Patient diagnosed with religious mania, photograph, 1848-58. Photograph courtesy the Royal Society of Medicine, London.



Figure 6. Anonymous, "Puerperal Mania in Four Stages," lithograph after Diamond photograph, 1848-58. Photograph courtesy of Sander L. Gilman, Cornell University.



Figure 7. Anonymous, "Religious Melancholia and Convalescence," lithograph after Diamond photograph, 1848-58. Photograph courtesy of Sander L. Gilman, Cornell University.

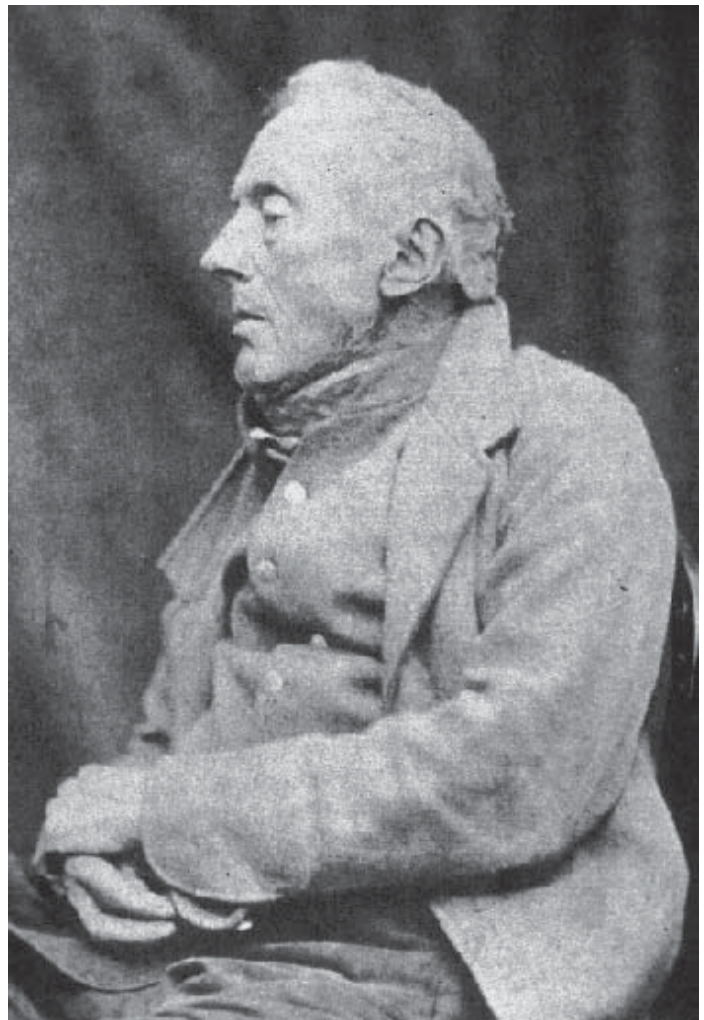


Figure 8. Hugh W. Diamond, Male patient, photograph, 1848-58. Photograph courtesy of the Royal Society of Medicine, London.