



Monitoring the correspondence of the mentally ill in Spanish psychiatric institutions: from care to censorship, 1852-1987

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Abstract

This article examines the legislation allowing confiscation of the correspondence of the mentally ill in psychiatric hospitals. Arguing a duty of care, patients' letters were read by physicians and administrators. A study was performed of the regulations governing this practice in different Spanish institutions from the nineteenth century on; the measure was implemented by staff members under orders from their superiors. This arbitrary decision meant that a great deal of correspondence remains in the archives of psychiatric establishments in different locations; nowadays, these letters can be used as valuable clinical documents that help us to understand daily life in those institutions and, obviously, mental health patients' subjective experience of their confinement.

Keywords: psychiatric care; correspondence; mentally ill; Spain; written culture.



Ever since Roy Porter (1985) published “The patients’ view: doing medical history from below,” researchers have been examining material written by patients in a variety of different geographical locations. After pioneering work was done on letters archived in the clinical records at the Royal Edinburgh Asylum (Barfoot, Beveridge, 1990), a great deal of correspondence has been retrieved in psychiatric institutions; but also, as part of written culture, the autobiographies of criminals (Artières, 1998, 2000) or texts written in prisons and reformatories in various countries (Castillo, Sierra, 2005) have likewise been recovered. Along similar lines, Ricardo Campos (2012) takes an interesting approach to crime, based on the voice of the criminal, using the threatening letters of Dr Manuel Morillo to his fiancée and her parents.

In Spain, Rafael Huertas (2001, 2012, 2013) has insisted on the value of patients’ writings, and many studies of case histories have come up with letters from mental patients archived along with clinical records (Tierno, 2008; Candela, Villasante, 2011; Vázquez de la Torre, 2012; Consegnieri, 2013a; Candela, 2017).¹ In fact, from 2005 on, a series of studies called the “Leganés Program” has used a common historiographical methodology to analyze the nature of psychiatric care in the Santa Isabel de Leganés asylum (Manicomio de Santa Isabel de Leganés) in Madrid, Spain. These studies have collected numerous letters that were either read or simply ignored by staff at the asylum and were never mailed, so they remained in the patients’ medical records for the first hundred years of the asylum’s existence. These valuable documents describe features of the institution, how it worked, what daily life on the inside was like, and the perceptions and experiences of those who were held there (Villasante et al., 2016).

This article will give a brief analysis of the legislation and regulations permitting confiscation of these letters, which reflect both everyday issues in the asylum and the emotions and sensations of the patients. It evaluates the reasons why this correspondence never reached its intended recipients and why physicians and staff allowed such interference in patients’ private life (Huertas, 2016). It does not cover the content of the letters, which has been analyzed in the works cited.

While this research focuses on the historical archive of the José Germain Psychiatric Institute (Instituto Psiquiátrico SSM José Germain), where clinical records for the Leganés asylum have been kept ever since it was founded, this is not an isolated case. Numerous psychiatric establishments around the world have similar correspondence that was somewhat arbitrarily confiscated (Beveridge, 1998; Lavin, 2003; Ríos, 2004; Reaume, 2009; Golcman, 2015). In most cases, the protagonists of these epistolary narratives are unknown people; however, the publication of the *Correspondence* of Camille Claudel (1864-1943), the French sculptor who was confined first to the Ville-Evrard asylum in Paris and then until her death in a public asylum in Montdevergues in the south of France (Wahba, 1996), provides exceptional material for comparison with the letters in Leganés (Claudel, 2010).² Therefore, based on a comparative historiographical study of secondary bibliography and sources from different geographic locations, I wish to provide some data on the monitoring of correspondence in other institutions, both in Europe and Latin America.

Writing as a psychopathological and therapeutic tool in Spanish psychiatric institutions

It is well known that physicians like A.J.F. Brierre de Boismont (1828-1864) (Brierre de Boismont, 1864) or Louis Victor Marcé (1797-1881), who referred to writing as the “*vivante image de l'esprit*” (Marcé, 1864, p.379), encouraged writing in mental patients for diagnostic and therapeutic purposes (Rigoli, 2001). Furthermore, autobiographic narratives were often part of a “pact” between the writer and the reader, in other words between the patient and the doctor; Augusta Molinari shows this was the case for women institutionalized in the Quarto di Mare psychiatric hospital in Genoa. Molinari argues that the therapeutic importance of writing in anamnesis favored a process of acculturation, allowing barely literate people to create written material (Molinari, 2005, p.380).

In Spain, there are not many known instances of psychiatric institutions attempting to promote autobiographical writing, but I can add some details about the clinical use of writing, an issue that has already been documented for the nineteenth century. One of the first examples is the School for Reading, Writing and Drawing in the Valladolid asylum (Manicomio de Valladolid), whose good results were outlined by Lázaro Rodríguez González in a report presented to the Provincial Charity Board (Junta Provincial de Beneficencia) in 1866 (García Cantalapiedra, 1992). In fact, in that document he asked for the school to be enlarged to 80 patients, since very good results had been seen in the 18 people who had participated in it. Meanwhile, in the Nueva Belén asylum in Barcelona (Manicomio de Nueva Belén), which offered crafts, sewing or piano for patients, letters were referred to as a “moral” resource. This facility, founded in 1857 by Juan Giné y Partagás (1836-1903), the pioneer editor of the *Revista Frenopática Barcelonesa* who held the First Spanish Frenopathy Contest (Primer Certamen Frenopático Español) (Villasante, 1997), had rules regarding letter-writing. The regulations issued in 1874 for this private institution contain the following statement:

When the mental state of the inmates allows, they are permitted to maintain written correspondence with their relatives and friends. On certain occasions the letters of interested parties constitute a valuable moral resource that the medical board can use by agreement of the aforementioned parties, so it is generally advisable that they consult the medical director about the spirit in which such correspondence should be written (Bernardo, Casas, 1983, p.116).

Article 41 of the regulations at Nueva Belén thus clearly states that patients' correspondence was subject to rules and that inmates needed authorization to communicate with the outside. Thus, it was up to the physician to judge whether the person's mental state allowed him or her to send letters, suggesting the possibility that messages from inmates could be silenced.

In the far northeast corner of the Spanish peninsula, Juan Barcia Caballero (1852-1926), a professor at the University of Santiago de Compostela and vice-director of the Conxo asylum (Manicomio de Conxo), also took an interest in patients' writing. In 1904, in “Writings by the insane” (“Los escritos de los locos”), an article published in the *Revista de Especialidades Médicas*, he stated that “we have a huge stack of writings by our patients stored in this Establishment” (Barcia Caballero, 1904, p.150). I do not know whether there were letters

among the documents Barcia referred to, or whether he used personal correspondence to analyze patients' symptoms. Meanwhile, Joaquín Gimeno Riera (1877-1945) transcribed some texts written by patients to illustrate psychopathology in his treatise on madness, *La locura* (Gimeno Riera, 1911, p.232-237). Gimeno Riera was in charge of the men's section at the Zaragoza asylum (Manicomio de Zaragoza), the "madhouse" portrayed by Goya.

In the Leganés asylum, the only person known to have been interested in patients' writing was José Salas y Vaca (1877-1926), a physician from Córdoba who was medical director from 1911-1929 (Villasante, Candela, 2014). Many letters have been found, some on writing paper with the letterhead "Santa Isabel asylum in Leganés," mostly dating from his time as director, since he insisted on this practice (Candela, 2017, p.257-259). In fact, some of those writings were reproduced in the book *Los degenerados en sociedad* (Salas y Vaca, 1920), since, like M.H. Joseph P. Rogues de Fursac (1872-1942) in *Les écrits et les dessins dans les maladies nerveuses et mentales* (1905), Salas y Vaca (1920, p.44) believed that:

A complete diagnosis can rarely be made from an interview, no matter how well conducted; however, studying the writings of these patients, which are lengthy and usually bombastic, one can find the false interpretation of their delirious concepts ..., give paper and pen to any of these individuals, and the isolation from their homes or the silence of their cell will make them transfer onto paper some delirious idea or clue, to a greater or lesser extent.³

This physician also requested biographies of the inmates from their families or loved ones and indeed, besides the letters, 62 texts by relatives have been found from the time Salas y Vaca was working at the asylum. Some of these recount the life history and symptoms of patients who were confined in the asylum for a certain period (Candela, 2017, p.287; Candela, Villasante, 2018).

Mental patients' correspondence

The messages that patients tried to send to their families, friends, or even doctors, judges or other authorities were very different from texts written for diagnostic or therapeutic purposes, although these types of writing could co-exist, like those of Pierina, the child murderer whose case was rediscovered by Yonissa M. Wadi (2005, 2010).⁴ Most of the research studies using case histories as sources have unearthed letters from patients that were never mailed. One of the most important studies of this type was done by Allan Beveridge on the Royal Edinburgh Asylum. Beveridge analyzes numerous letters written by John Home, confined from 1886-1887 (Barfoot, Beveridge, 1990). He was an inmate at the asylum while it was run by Thomas Clouston (1873-1908), a physician whose *Clinical lectures on mental diseases* (Clouston, 1892, p.161) documented psychopathological changes in a manic patient using a letter the inmate had written. In subsequent studies, Beveridge used 1,151 letters stored in patient records to examine aspects of this important Scottish institution, its doctors and the rest of its staff (Beveridge, 1997, 1998), a line of approach also taken by Geoffrey Reaume (2009) in *Remembrance of patients past*, on patients from the Toronto Hospital.

While the Scottish Lunacy Act of 1866 authorized doctors to open patients' letters and not to mail them if they felt the content was inappropriate, I have not found any legislation in Spain that grants this right to Spanish physicians. However, during the last decade, many studies of clinical records at the Leganés asylum in Madrid (Conseglieri, 2013a; Vázquez de la Torre, 2012; Vázquez de la Torre, Villasante, 2016; Candela, 2017) have uncovered letters from patients filed in their case histories, so I began to wonder if there was any administrative rule at this particular asylum, and, if not, who made that arbitrary decision, and why. Initially named the Santa Isabel Madhouse (Casa de Dementes de Santa Isabel), the Leganés asylum was opened in December 1851, thanks to reforms enacted under Queen Isabel II. It was bound by the 1849 Charity Law (*Ley de Beneficencia*), although its official regulations were not published until 1873, with the edict entitled *Fundamental Internal Regulations for the Asylum of Santa Isabel (Reglamento Orgánico e Interior del Manicomio de Santa Isabel)* (Manicomio de Santa Isabel, 1873; Villasante, 2003, 2008). This describes the functions of the doctors, medical assistants, nurses and guards, but it does not mention correspondence; nor do the first Hygiene Rules (*Reglas Higiénicas*) of 1855, nor the later set published in 1885 (Espinosa, Balbo, Peset, 1994), although letters were confiscated, as we shall see, from the time the asylum first opened.

The first mental patients, 24 women, entered the Santa Isabel Madhouse on April 24, 1852, having been transferred from the gloomy and overcrowded wards for the insane in the Madrid Provincial Hospital (Villasante, 2005). The next day, a man named Ramón,⁵ who was a doctor by profession, was admitted, along with 21 other males. A few months' later, Ramón's wife wrote to ask the "governor of the Santa Isabel Home for the Insane" not to release her husband, alleging that "he had been discharged from the General Hospital on other occasions and had again committed excesses that caused him to be readmitted."⁶ On August 23, 1852, she requested that Ramón be kept "under observation until it is certain he is completely cured,"⁷ a request that was honored, since the patient was still in the institution two years later. Meanwhile, Ramón argued in a letter to the president of the Board of Governors for Charity in the Kingdom (*Junta General de Beneficencia del Reino*) that he believed himself to be "in a state of complete possession of his intellectual faculties."⁸ In this case, it is unknown whether the patient was aware of the letter his wife had written to the director, but he claimed he was healthy and wished to return to normal life in the following text, signed January 12, 1854:

Being physically, morally and legally competent to return to his profession; being thus useful, not only, perhaps, to humanity ... but especially to his beloved children, whose education can scarcely be completed without his assistance and immediate care. ... Therefore, the petitioner's release having been delayed in an unusual manner and for reasons beyond the scope of this letter, thus causing him severe hardships.⁹

On February 5, 1854, just a few weeks after this letter asserting his competency and usefulness, Ramón was released.

Thus, although in Leganés no official rules have been found regarding the monitoring of correspondence, it is clear that this was an unwritten norm ever since the institution was founded. In fact, Ramiro Llera y Téllez, manager of the asylum during the first

third of the twentieth century, mentioned the need to supervise patients' mail: "The staff usually scrutinize the letters inmates write to see whether or not it is a good idea to send them; at times, some of them are no more than a load of crazy nonsense, and, in that case, naturally, they do not reach their destination" (Montero, 29 abr. 1929, p.8). It is clear that patients knew about this censorship; in 1917, an engineer writing to his parents added a note at the top of his letter: "Letter that I deliver to Mr Salas begging him to mail after reading it."¹⁰

However, the number of letters found in the case histories is not very large, probably because a large fraction of the inmates was illiterate, especially on the charity wards, which required a certificate of "poverty." In fact, the letters found frequently belong to private or "distinguished" patients like Pascual Salazar de la Riva, an attorney and mayor of Havana, who was admitted to the Santa Isabel Home at Leganés in 1858. During his eleven years in the asylum, he wrote various letters, including some in French, which are stored in his clinical records. They have been analyzed by Eduardo Balbo (1998).

Nevertheless, some institutions, unlike Leganés, did include the monitoring of letters in their regulations almost from the beginning. One of these was La Castañeda asylum in Mexico (Manicomio de La Castañeda), founded in September 1910 (Sacristán, 2010). The first set of rules for this emblematic institution were drawn up three years after its inauguration, and they strictly prohibit not only the sending of letters, writings or requests without prior consent "from the doctor on the ward to which they have been admitted and with the approval of the management" (Manicomio General..., 1913),¹¹ but also receiving correspondence that has not been examined first.

Families and the monitoring of letters

The influence of families on patient admissions has been studied by various authors (Prestwich, 1994), and nursing staff were not exempt, as shown in a letter dated February 17, 1925, from an inmate called Magdalena to none other than the civil governor of Madrid. She explains that "the doctors are not carrying out their duty to observe who is cured and release them; they leave it up to the whims of families, who, if they want to keep a person locked up, will leave them in there for years and years even if they're not crazy."¹² The power of family members in decision-making about correspondence is also mentioned by Camille Claudel, who complains of it in a letter to a Dr Michaux in 1917. The French sculptor's mother and sister never visited her in the 30 years she was institutionalized, and they clearly contributed to keeping her locked up until her death.

Mama and my sister have ordered I be kept in the strictest captivity; none of my letters leaves here, no visitors enter ... taking advantage of this situation, my sister has seized my inheritance and has every interest in keeping me imprisoned forever. So I ask you not to write here and not to say that I wrote to you, since I'm writing in secret, breaking the asylum rules, and if I'm found out, I'll be in such trouble! (Claudel, 2010, p.254).

Neither the patient's requests nor even her doctors' recommendation that she be transferred from the Montdevergues asylum in Montfavet, near Avignon, to one near

her home, were granted by her family, who furthermore requested that her letters not be mailed (Claudel, 2010, p.12).¹³

Clearly, administrators and doctors at psychiatric institutions were vetting correspondence, leaving it to nurses and guards to confiscate letters. This is shown in the fourth edition of the *Manuel technique de l'infirmier des établissements psychiatriques*, which specifies that both writings and letters by mental patients, as well as any incoming mail to them, should be turned in to the doctor (Marchand, Mignot, 1949, p.260).¹⁴ It thus became a complicated enterprise for mental patients to communicate their experiences, emotions, feelings or frustrations to their loved ones. It was even hard for them to get writing paper, as described by Juan: "I have no materials here to be able to write easily, even if I ask for them ... could you send me stamps and paper so I can write easily" (Candela, Villasante, 2013, p.350).¹⁵ Once they had managed to get hold of paper, their letters still had to make it out of the asylum, and the ones that were intercepted and deemed inappropriate remained in the archives of many institutions, like the one that Camille Claudel wrote to her brother, explaining that she had to write in secret and wondering whether she would be able to send the letter (Fabre-Pellerin, 1988, p.237).¹⁶ Often, patients guessed that discovery would be bad for them, as expressed by María in 1935, at the beginning of a letter to her "beloved Federico," a priest with whom she was in love: "I'm going to write to you again, even though I believe it will be my undoing" (Tierno, 2008, p.127). In fact, many of the unmailed letters were addressed to close relatives (parents, siblings, partners...) and the writers called for their own release, complaining they were unjustly imprisoned (Huertas, 2016). Besides begging their families to come and take them away, or to bring food, clothing or presents, inmates criticized conditions at the institution and expressed suffering at their confinement, which frequently lasted for the rest of their lives.

In Scotland, where, as we have seen, letters were also confiscated, the Scottish Lunacy Act mandated an exception for correspondence addressed to the General Board of Commissioners for Lunacy in Scotland.¹⁷ Mental patients were allowed to write to and receive letters from the Board, which was charged with protecting their rights, and privacy was guaranteed in correspondence in both directions (Barfoot, Beveridge, 1990, p.270), a protective measure that was never enacted in Spain. In fact, in the Historical Archive of the José German Psychiatric Institute (the repository for documents from the Leganés asylum), there are letters addressed to judges and administrative officials that were filed in the patients' case histories (Villasante et al., 2016).

In the correspondence we can see examples of family influence in committing patients or prolonging their confinement, as in a case at the Málaga Provincial Asylum (Manicomio Provincial de Málaga). At this institution, Celia García and Isabel Jiménez have identified a complex conjunction of three subjectivities – the patient, the psychiatrist and the brother – in which the patient counts the least (García Díaz, Jiménez Lucena, 2010, p.140). It is clear that patients knew one of the main conditions for leaving an institution was promising to behave well and meet "their obligations," including values like religiosity and the family. Lili, hospitalized in 1944 in the Leganés asylum, when she was 32 years old, writes the following to her husband: "Antonio my dearest. Let me begin by telling you that yesterday, on the virgin's day, I went to confession and took communion and you

know what that means for me since I never did either..." (Conseglieri, 2013b). In the years Lili was institutionalized, the Franco dictatorship (Campos, González de Pablo, 2016) that followed the Civil War had imposed Catholicism, and this is perceptible in the patient's words as a sign of national identity. In South America, Olga, an inmate at the José A. Esteves Hospital in Lomas de Zamora (Argentina), wrote to her uncle about her intention to "behave well with the family": "I promise to behave as well as possible ... I already told Grandma I would obey here and not go out the door ... I want to help you all and take care of Grandma" (Golcman, 2015, p.145-146).

Surveillance by the nursing staff: between care and censorship

As I have described, during the institution's first one hundred years, no administrative rules about the correspondence of mental patients have been found in the National Asylum at Leganés, known as a "model" facility (Peset, 1995). However, even though there was no legislation on this issue at the national level, some institutions, such as the psychiatric establishment in Jaén, did authorize the withholding of letters in their regulations. In the 1930s, during a period of reforms (Gutiérrez Aguilera, 1978; Hernández Padilla, 2009), the regulations of the Jaén Provincial Asylum (Manicomio Provincial de Jaén) were published. Article 26 explicitly grants the doctors control over letters written by patients: "The correspondence between patients and their families shall be dispatched diligently and shall not be intercepted by anyone, except the doctor..." (Manicomio Provincial..., 1936, p.18). This surveillance lasted at least until the 1980s, according to González Duro (1987, p.30), who describes patients' inability to communicate with the outside: "they could not talk freely on the telephone and their letters were censored". Some years before, this isolation and the monitoring of letters by the nursing staff was pointed out by the Basaglias in *Morire di clase* (Basaglia, Basaglia, 1969).¹⁸ In this short book, which was published in 1969, the director of Gorizia presents photographs by Carla Cerati and Gianni Berengo documenting the situation of mental patients in Italy, images that were published around the world.

Since doctors were absent much of the time in nineteenth-century institutions, scrutiny and confiscation of correspondence was left to the staff, who generally had barely any professional training and were rough, as seen in the famous photographic exposé in the newspaper *España* (Rodríguez Lafora, 12 oct. 1916).¹⁹ It was during the Second Republic in Spain, when big advances were made in psychiatric care (Huertas, 1998), that the first timid steps were taken towards the professionalization of psychiatric nursing. A diploma in psychiatric nursing was approved by the legislature (Villasante, 2013). In *La asistencia al enfermo mental* (Caring for the mentally ill) by Luis Valenciano Gayá (1905-1985), the most influential book at the time for psychiatric nursing (Duro Sánchez, Villasante, 2016), the following functions are described: "Under no circumstances, no matter what is offered, shall letters from patients be sent out of the asylum, nor vice versa. The nursing staff are not authorized to open these letters; but if letters come into their possession, they should hand them over to the doctor so that he can examine them" (Valenciano Gayá, 1933, p.76-77). Valenciano Gayá was a psychiatrist from Murcia who worked at the Carabanchel

Sanatorium run by Gonzalo Rodríguez Lafora (1886-1971). He devoted a specific section of his book to “monitoring correspondence,” arguing that there were three reasons for confiscating letters:

- 1) The doctor can obtain useful data from them that can help shed light on the disease.
- 2) They can be harmful to the patient who, because of his illness, may write things that could be damaging to him. Letters from the outside, meanwhile, can sometimes have a very unfavorable effect on the patient’s condition.
- 3) They can be harmful to other people because of the falsehoods the patient writes, under the influence of his abnormal ideas (Valenciano Gayá, 1933, p.76-77).

This rather paternalistic attitude allowed nurses “to write letters that the patient dictates, specifying who is writing,” but obliged them to monitor the communication. This was meant to prevent the patients from attempting to evade the confiscation of letters by “throwing them over the wall or out the window, smuggling them out wrapped up in dirty laundry, packages, etc..., or surreptitiously handing them to visitors” (Valenciano Gayá, 1933, p.76-77).

From the 1930s on, different Spanish nursing textbooks explicitly described what was to be done with correspondence, as seen in the *Prontuario del enfermero psiquiátrico* (Handbook of psychiatric nursing) (Domingo Simó, 1936). Francisco Domingo Simó (1891-1962), who was from Valencia and was deputy director of the Valencia Asylum, which is believed to be the first asylum in Europe, indicated that letters should be handed in to the doctor so he would know both what the patient was writing about and also what information the patient was receiving from the outside. In the section on behavior and general activities for nurses with regard to patients, besides listing qualities like honesty or kindness, Domingo Simó says:

Letters: Correct procedure for the psychiatric nurse consists of handing these over to the doctor, both letters from family members and letters written by patients; because apart from the need for discretion, the letters might contain phrases whose medical-psychiatric importance the nurse might miss. Also, the staff will thus facilitate the sending and timely answering of letters (Domingo Simó, 1936, p.6-7).

The flow of information in both directions could thus be controlled, thereby forestalling any damage to the asylum’s reputation. On February 2, 1927, Camille Claudel (2010, p.259) described the cold as so severe that she could not hold a pen; it had caused the death of another woman inmate. Similar complaints about the cold, the food, living conditions in the facility, or treatment at the hands of the nuns, male nurses or doctors at the Leganés asylum in Madrid can be found in a recent anthology of patient letters, *Cartas desde el manicomio: experiencias de internamiento en la Casa de Santa Isabel de Leganés* (Letters from the asylum: experiences of confinement in the Santa Isabel asylum at Leganés) (Villasante et al., 2018).²⁰ It is easy to imagine that the staff were trying to avoid certain complaints about living conditions or treatment of the patients from reaching family members or, indeed, the general public. In fact, some of these missives were addressed to the editors of newspapers like *El País*, to whom a patient named Elena wrote a long letter in the first days of the twentieth century, criticizing her sister for committing her to the National Asylum,

and also the deeds of the governor and his sister: “So that justice may be done and I may be rescued as soon as possible from the terrible situation in which I find myself, since the governor and his sister [a friend of the asylum’s Mother Superior] were influenced by what the nuns said, so that he has not fulfilled nor is he fulfilling his duty to protect the unfortunate and defenseless.”²¹

This censorship, which was clearly designed to prevent damage to the asylum’s reputation, is very clear in the *Manual de la enfermera general y psiquiátrica* (Manual of general and psychiatric nursing) (Salas Martínez, 1935), which states: “All letters written by the patients to their relatives or from the relatives to the patients must be examined by the nurse or the doctors. Letters from patients that contain falsehoods that might be damaging to the establishment must not be sent” (p.274). This text was written by José Salas Martínez (1905-1962), deputy director of the Women’s Asylum at Ciempozuelos (Manicomio de Mujeres de Ciempozuelos), who was subject to “internal exile” after the Spanish Civil War (Villasante, 2016). Staff at the psychiatric institutions in the town of Ciempozuelos, south of Madrid, which were run by the Order of Saint John of God (for men) and the Sisters Hospitaller of the Sacred Heart of Jesus (for women), had begun reforms during the first third of the twentieth century. During these overhauls, which included training for the friars and nuns caring for the mentally ill, the asylums could not afford a reduction in income from inmates stemming from criticisms expressed in correspondence. However, sometimes the religious staff’s censorship system failed, and patients’ narratives reached the press. One such account, by a 27-year-old male patient who ran away from the Sant Boi asylum in Barcelona, appeared in the paper *El diluvio*. It contains a brutal description of conditions in the facility, which was also run by the Order of Saint John of God:

In the Asylum they beat me, put me in leg-irons, chains and manacles as if I were a despicable criminal, and all because I was too smart, because I could see the full horror of it all. Men and women are raped there by force, beaten with a rod... [this is] what goes on in the Asylum at Baudilio de Llobregat, which is currently in the inquisitorial hands of the friars of Saint John of God (Antón Fructuoso, 1982, p.133).²²

No doubt, this anticlerical newspaper spared no partisan details in the account of this patient, who had been diagnosed with “instinctive phrenasthenia, moral insanity.” He was returned to the asylum after his escape and was discharged as cured in January 1902.

I believe that behind the paternalistic argument about caring for or protecting the mentally ill, there was censorship of the content of letters and an attempt to silence the patients’ voices, not only because of delirious outbursts they might contain, but because they denounced conditions in psychiatric establishments that were often far from being “model” institutions.

Final considerations

This approach allows us to state that the monitoring of correspondence by the mentally ill in psychiatric institutions was widespread, and has been documented in a variety of different geographic locations. While in Spain I have found no evidence of any

legislation permitting such interference in private life, in some institutions it was included in the regulations, whilst in the rest it was practiced by all asylum staff, doctors, carers and administrators. Starting in the 1930s, psychiatric nursing textbooks included letter surveillance as just another area in patient care that staff needed to oversee.

It is clear that staff members who were authorized to read correspondence in these institutions were exercising censorship. It was against the directors' and doctors' interests for information about the poor living conditions, food or treatment by staff to be leaked to the outside world, and these were common complaints in the letters. This arbitrary decision meant that a great many letters remained in the archives of psychiatric establishments around the world, and can thus be used nowadays as valuable clinical documents for understanding daily life in those institutions and the subjective experiences of the mentally ill.

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NOTES

¹ The medical records where these letters were found are held in the historical archive of the José Germain Psychiatric Institute at Leganés (Archivo Histórico del IPSSM José Germain).

² Part of this article was presented at a conference, the "I Jornadas de Psicopatología e Cultura: o caso Camille Claudel," held in Lugo, Spain on April 23, 2015. Claudel, a French sculptor who was ignored for years but has been studied extensively since the 1980s, describes her desperation on being committed. She begged to be transferred to Sainte Anne to be closer to home. The case of this famous sculptor, who was hospitalized until her death and whose letters have been published, allows us to trace similarities in both the content of letters found in Leganés and other issues, such the difficulty of sending correspondence.

³ The sources clearly confirm that doctors like José Salas y Vaca gave the asylum's own letter paper to patients when they were asked to collaborate by writing. It is not known whether there was any "pact" encouraging this writing, which was used more for diagnostic purposes than truly therapeutic ones. However, when patients wrote letters spontaneously, it seems they did not always have adequate material to do so, since their correspondence mentions difficulties in obtaining it.

⁴ Pierina Cechini was a 28-year-old Brazilian woman who killed her own 2-year-old daughter, after threatening to do so for months. The letters she wrote in the Hospicio de San Pedro, some spontaneously and others at the request of her doctors, were analyzed in detail by Yonissa M. Wadi.

⁵ When names are used for patients, such as Ramón, they are fictitious.

⁶ This quote comes from an excerpt of a letter from the patient's wife, archived in *Historias...* (1852).

⁷ This quote comes from an excerpt of a letter from the patient's wife, archived in *Historias...* (1852).

⁸ This quote comes from an excerpt of a letter from the patient, archived in *Historias...* (1852).

⁹ This quote comes from an excerpt of a letter from the patient, archived in *Historias...* (1852).

¹⁰ Excerpt from a letter archived in *Historias...* (1916).

¹¹ I am especially grateful to Dr Sacristán for giving me access to the regulations at the General Asylum (Manicomio General), which are kept in the Historical Archive of the Secretariat of Health (Archivo Histórico de la Secretaría de Salud) in Mexico.

¹² Excerpt from a letter archived in in the clinical record (*Historias ...*, 1924).

¹³ Anne Rivière and Bruno Gaudichon make this argument in the prologue to Camille Claudel's *Correspondence*.

¹⁴ "Letters, and in general all writings by patients, should be handed over to the doctor. Never, for any reason whatsoever, should a nurse mail a patient's letter without prior authorization from the doctor. Letters mailed to patients must not be delivered to them until they are examined by the doctor. In some establishments, the doctors themselves hand them out during their visits" (Marchand, Mignot, 1949, p.260).

¹⁵ While some letters are written on sheets of paper or school notebooks, patients sometimes used cigarette papers or newspaper. There is a curious case of a telegraph official and engineer of 25 who was admitted in January 1916 and who wrote in the margins of *Electrician and Mechanic*, an American journal published from 1890-January 1914, when it was combined with *Modern Electrics* to become *Modern Electrics & Mechanics* (see Villasante et al., 2016, p.113).

¹⁶ Camille Claudel wrote to her brother, the poet and diplomat Paul Louis Charles Claudel (1868-1955): "I have to hide to write to you and I don't know how I'm going to mail this letter" (Fabre-Pellerin, 1988, p237).

¹⁷ "Every letter written by a patient in any Asylum or House and addressed to the Board ... shall, unless especial Instructions on the contrary have been given ... be forwarded to its Address unopened and every Letter from the Board ... to any such patient when marked 'Private' on the cover, shall be delivered to him unopened" (Barfoot, Beveridge, 1990, p.270).

¹⁸ "Nurses must not have any dealings with patients' relatives, or give them news, or convey letters, objects or greetings: nor may they bring the patients any news from the outside, or objects, or writings" (Basaglia, Basaglia, 1969, p.44).

¹⁹ The original text of Gonzalo Rodríguez Lafora, published in 1916, can be found in Villasante (2011).

²⁰ In the accounts there are expressions like "poorly fed and poorly dressed"; "I can't manage on the meals they give me... I am often hungry;" "the doctors pay me no heed and don't give me any medicine at all;" "the housekeeping staff look down on me." Also, many of the writings attest to a sense of not belonging in the asylum (Huertas, 2013, 2016): "this isn't my place;" "you said I'd get out of here;" "get me out of here quickly;" "I can't stay here another day;" "can you come and get me because I can't stay here."

²¹ Excerpt from a letter filed in the clinical record (Historias..., 1901).

²² This text was reproduced in Antón Fructuoso (1982, p.133-134) and comes from a Barcelona newspaper (El Diluvio, 20 mar. 1901, p.17-19).

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