

'A Captive Audience:' Musical Concerts in Queensland Mental Institutions c.1870–c.1930*

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In Queensland mental institutions between 1870 and 1930, small numbers of patients were taken several times a year, under staff escort, either to a ward or to one of the three recreation halls to form the 'captive audience'¹ for musical concerts performed for their benefit. The practice of music making within these asylums raises a number of questions regarding music's audience. What was the medical rationale for the use of music with the mentally ill? What was the influence of British medical practices in Australia? How are the broader cultural beliefs surrounding women, men, and music reflected in these practices in Queensland? What types of music and musical activity did these select patients experience and participate in? Who provided and performed these musical recreations? How did new technologies such as film and radio influence this practice? The insane were kept out of the public eye, yet the social and cultural values and practices of the times provided the filter through which appropriate musical recreation and employment were determined. At the core of medical practices were issues of gender and class, which in turn determined the types of music and recreation deemed suitable for these captive audiences.

Issues of Gender and Class in Moral Therapy

In Queensland in 1901 Lena, aged twenty-one, a young servant whose temporary insanity was attributed to 'domestic worry,' summed up her first four weeks' experience of asylum life in a letter to her friend stating that 'people are sent here from all parts of Queensland. There is singing and dancing here and all sorts of happiness and misery too.'² Lena's mental illness was considered a type of moral insanity, and was to be treated under the medical principles of moral and physical therapy, which included recreation activities. Lena's experience in one of

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¹ Milton Greenblatt, Richard H. York, Esther Lucile Brown, Robert W. Hyde, *From Custodial to Therapeutic Patient Care in Mental Hospitals Exploration in Social Treatment* (New York: Russell Sage Foundation, 1955) 109.

² Queensland State Archives [hereafter QSA] A/45635, folio 145, letter, 16 May 1901.

the three Queensland State Asylums was governed by European medical practices brought to the colonies by predominantly British medical superintendents appointed Inspectors of the Insane between 1880 and 1937.³ The medical practice of moral therapy was particularly influenced by contemporary views of gender and class.

This period of mental health care in Queensland predated the introduction of Freudian analysis, which was not adopted until the 1940s. The complete transition from moral therapy to therapeutic care was to be introduced by Dr Basil Stafford, Director of Mental Hygiene during the late 1940s and early 1950s, and included the formal introduction of occupational therapy and music therapy. Moral therapy was the medical practice in use from the 1860s until the early 1940s.⁴ There was a clear distinction between these two approaches. Freud's theory, known as the 'functional model,' was based on the premise that most, if not all mental illness resulted from a childhood trauma, which challenged the dominant nineteenth-century causal ideas of insanity, centered on genetics—the idea of the body and mind as a faulty machine—and/or moral failings.⁵ Medical practitioners believed that the only possible cure for insanity lay in the segregation of the insane in the sanctuary of the asylum, which took them away from the many possible triggers for their illness.⁶ Moral therapy in conjunction with medical treatment was part of a 'system of kindness, confidence, social intercourse, labor, religious teaching and freedom from restraint,' which was heralded during the nineteenth and early twentieth century.⁷

One mid-nineteenth-century writer summed up the underlying principles of moral therapy:

Moral therapy consists of the wholesome discipline of the well-regulated household, regular hours for food and for sleep, manual employment, reading, lectures, and other various recreations and amusements, both within and without ... The great object of this treatment is to procure a healthful exercise of the body, to abstract the mind from its delusions, to win back the patient to the regular and useful habits and practices of his [or her] former life.⁸

³ All three asylums were in the southeast of the state: Woogaroo (later Goodna, and now known as Wolston Park) opened in the early 1860s; Sandy Gallop (later Ipswich) opened in c.1878; and Willowburn (later called Toowoomba and then Baillie-Henderson) in 1890. Both Wolston Park and Baillie Henderson Hospitals for Tertiary Psychiatric Care are still in operation.

⁴ *Queensland Parliamentary Papers* [hereafter QPP], Annual Report of the Health and Medical Services of the State of Queensland for the year 1953-54, 923. Occupational therapists had been working in other parts of Australia prior to 1954. See also Barbara Anderson and Janet Bell, *Occupational Therapy: Its Place in Australia's History* (Sydney: NSW Association of Occupational Therapists, 1988) 3. Ken Kirkby, 'History of Psychiatry in Australia, pre 1960,' *History of Psychiatry* 10 (1999): 202, states that the Australian Association of Psychiatrists was formed in 1946, and that 'up until the 1960s psychiatry in Australia was practiced in a predominantly [but not exclusively] institutional setting.'

⁵ Diana Gittins, *Madness in its Place: Narratives of Severalls Hospital 1913-1997* (London: Routledge, 1998) 2.

⁶ Known as the 'alienist' approach. Dr R. Von Krafft-Ebing [*Text-Book of Insanity Based on Clinical Observations for Practitioners and Students of Medicine*, trans. Charles Gilbert Chaddock, (Philadelphia: F.A. Davis, 1904) 252] added that the alienists believed that 'it is only there [in isolation from the world 'the most important means of cure'] that the patient finds effectual protection against the dangers, especially suicide.'

⁷ Samuel B. Woodward, quoted in E. Harris, 'Beginnings of Psychotherapy in America,' *American Journal of Psychotherapy* 18 (1964): 285. While 'freedom from restraints' was the claim, the straitjacket, muffs, as well as chemical restraints such as bromide cocktails remained in constant use in Britain, America and Australia well into the first half of the twentieth century.

⁸ Quoted Harris, 'Beginnings of Psychotherapy in America' 287.

Both gender and class were considered significant factors in the predisposition to madness. H. Maudesley, an influential medical authority in Britain, claimed 'among the lower classes of society it is for the most part a question of sobriety and temperance against intemperance and riotous living,' which formed the cause of mental illness.⁹ Thus as Vieda Skultans states 'the causes of mental disorder are seen as an extreme parody of class norms, involving loss of moderation.'¹⁰ Contemporary medical opinion regarded women as having a predisposition to madness, yet the reality in Queensland annual reports showed a slightly higher proportion of male admissions than female between c.1860 and the 1930s. Reports tabulated patient numbers according to gender, ethnic origins, employment, religion, moral and physical causes of insanity, any hereditary influences, as well as by admission and recovery rates. The moral causes of insanity included gender specific conditions such as 'domestic trouble,' 'mental worry (including religious excitement),' 'love affairs,' while the physical causes included 'prostitution,' 'venereal disease,' 'sexual excess,' 'self-abuse,' 'pregnancy,' 'parturition,' 'lactation,' and 'fevers.'¹¹

Australia's large asylums were all State-run institutions, and catered for all social classes, with only a small number of Private Asylum Houses catering for those who could afford private care.¹² Some Queensland inmates complained bitterly about the lack of class distinction within wards. Furthermore, the medical men appointed Inspectors of the Insane in Australia were all from the middle and upper classes, educated in Britain, and brought with them contemporary notions of gender and class distinctions.

Once classified, patients entered the asylum, which was strictly regulated by means of physical, moral and social control. The gender segregation was built into the bricks and mortar with men housed separately from women, and any interaction being strictly regulated. Asylums mirrored the gendered nature of the Victorian household with regard to furnishings, work and occupations for the sexes: women who were able worked indoors in the laundry and sewing room, while those men who were able to work were employed outside in the fields, gardens, farms and workshops. Sports grounds and games (such as billiard tables and cards) were provided for the men, and sitting rooms with a piano for the women, both patients and nurses (see Figures 1 and 2).

Rationale for Musical Recreation

The nineteenth-century American reformer John S. Butler observed, 'the greatest evil of mental institutional care' was 'monotony.'¹³ To combat this problem, asylums began to provide recreation to select groups of patients. One of the earliest examples of musical amusements as

⁹ Vieda Skultans, 'Moral Order and Mental Derangement,' *Symbols and Sentiments: Cross-Cultural Studies in Symbolism*, ed. Ioan Lewis (London: Academic Press, 1977) 231.

¹⁰ Skultans, 'Moral Order and Mental Derangement' 231.

¹¹ QPP 1910, Annual Report, 8.

¹² Australian asylums differed from their British counterparts in this respect; Vieda Skultans ['Moral Order and Mental Derangement' 231] states that in British asylums all patients were classified by both their medical condition (curable or chronic), and class; Edward Walford [*Old and New London: A Narrative of Its History, Its People and Its Places* (London: Cassell Pether & Galpin, n.d.) 356] states 'those who were able to fund their own recovery were sent to Private Asylums,' while 'all poor lunatics presumed to be curable were eligible for admission...for maintenance and medical treatment' to municipal, county and borough asylums.

¹³ Harris, 'Beginnings of Psychotherapy in America' 287.

Figure 1. The Royal Hospital of Bethlehem, London: The Gallery for Women, *The Illustrated London News* 24 March 1860: 292.



Figure 2. The Royal Hospital of Bethlehem, London: The Gallery for Men, *The Illustrated London News* 31 March 1860: 308; notice the violin and accordion players.



part of the reforms in the treatment of the mentally ill in Britain was published in the *Illustrated London News* on 15 January 1848. The illustration shows the male patients at Hanwell Lunatic Asylum in England celebrating a 'Twelfth Night Entertainment.'¹⁴ Although Britain had made a start, by the mid-nineteenth century the most advanced practices of music in the care of the mentally ill were to be found in Germany.¹⁵

¹⁴ *Illustrated London News*, 15 Jan. 1848. Not all entertainments were segregated, as in an example dating from 1847 of a dance held for female and male patients at the Somerset County Lunatic Asylum. The music for the inmates is provided by a small band of musicians, and the inmates dance under a banner containing the word 'harmony.' These illustrations (Hanwell and Somerset) also appear in Andrew T. Scull, *Museums of Madness: The Social Organization of Insanity in Nineteenth-Century England* (London: Allen Lane, 1979) 144-45.

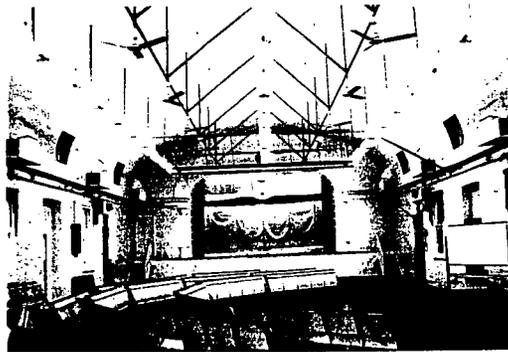
¹⁵ See Cheryce Kramer, 'Soul Music as Exemplified in Nineteenth-Century German Psychiatry,' *Musical Healing in Cultural Contexts*, ed. Penelope Gouk (Aldershot: Ashgate, 2000) 137-48.

Australian recreation practices followed the British model. Dr Henry Byam Ellerton, Inspector for the Insane in Queensland, observed in 1915 that, while Queensland facilities paled in comparison with their British counterparts, all three asylums had purpose-built recreation halls, which could accommodate large musical entertainments.¹⁶ Yet none of these recreation halls could accommodate the entire asylum population (see Figures 3 and 4).

Figure 3. Willowburn Asylum, Toowoomba, Queensland, Recreation Hall, 1913.



Figure 4. Wolston Park Hospital Recreation Hall, Queensland, 1998. Reproduced by permission of Wolston Park Hospital.



Patient access to entertainment was a reward for good behaviour. Furthermore, contemporary cultural beliefs regarded music as especially beneficial for women. In line with moral therapy, edifying moral texts also extolled the value of music for women. One of the most influential tracts of the late nineteenth and early twentieth centuries was *Music and Morals* by the Reverend H. R. Haweis. First published in 1871, it was re-issued in its eighteenth edition by 1898:

¹⁶ Previously, Ellerton had been the Senior Assistant Medical Officer at the Metropolitan Asylum at Leavesden, England and had also been as Assistant Medical Officer at the County Asylum at Radcliffe-on-Trent, Nottingham in England (*British Medical Directory*, 1914, 1610). For a lavish recreation hall see Royal Holloway Private Asylum, London in Jeremy Taylor, *Hospital and Asylum Architecture in England 1840–1914: Building for Health Care* (London: Mansell, 1991), and for an example of a County asylum recreation hall see Claybury Asylum in Harriet Richardson (ed.), *English Hospitals 1660–1948: A Survey of their Architecture and Design* (Swindon: Royal Commission on the Historical Monuments of England, 1998) 175.

Let not one say that the moral effects of music are small or insignificant. That domestic and long-suffering instrument, the cottage piano, has probably done more to sweeten existence and bring peace and happiness to families in general, and to young women in particular, than all the homilies on the domestic virtues ever yet penned.¹⁷

Haweis outlined the significant influence music had on women:

the emotional force in women is usually stronger, and always more delicate, than men. Their constitutions are like those fine violins which vibrate to the lightest touch. Women are the great listeners, not only to eloquence, but also to music ... The woman's temperament is naturally artistic, not in a creative, but a receptive, sense ... Most women reflect with astonishing ease, and it had often been remarked that they have more perception than thought, more passion than judgment, more generosity than justice, and more religious sentiment than moral taste.¹⁸

While society imposed the strict belief that women were to refrain from showing their true feelings, music was considered a suitable emotional outlet for women. As Haweis lamented 'To women—how many thousands are there in our placid modern drawing-rooms!—who feel like this [unable to express their emotions], music comes with a power of relief and a gentle grace of ministration little short of the supernatural.'¹⁹ In Queensland the commonest form of recreation provided for women was weekly hymn singing, and as Haweis noted:

Singing is that natural method by which thoughts are reduced to feeling, more easily, more surely, and more universally than by any other. You are conscious when you go to an earnest meeting, for instance, that, while hymns are being sung and you listen to them, your heart is, as it were, loosened, and there comes out of those hymns to you a realization of the truth such as you never had before ... Singing also has a wonderful effect upon those feelings which we wish to restrain.²⁰

In Queensland asylums *Sacred Songs & Solos: Revised and Enlarged with Standard Hymns 1200 Pieces*, compiled by Ira D. Sankey (London: Morgan & Scott, no date), was one of the books in use. The musical content of hymns coupled steady, regular and harmonically unadventurous progressions with spiritual texts (unlike some music which was charged with fanciful emotional chromaticism and wild modulations). The sacred texts and homophonic texture further reinforced the medical preference for moral order and control in the asylums. While Queensland asylums listed nine categories for 'religious persuasions,' only the Protestants (listed first) and the Roman Catholics were provided with religious services, and the dominant musical tradition provided was Protestant.²¹ No provision was made for those inmates who were of neither denomination.

¹⁷ H.R. Haweis, *Music and Morals* (1871; London: Longman, Green, 1898) 112.

¹⁸ Haweis, *Music and Morals* 109.

¹⁹ Haweis, *Music and Morals* 111.

²⁰ Mr Ward Beecher, quoted in H.R. Haweis, *Music and Morals* 115.

²¹ QPP 1911–12, Annual Report for 1910, 10. Table VIII listed the following: Protestants—Church of England, Presbyterians, Methodists, Baptists, Lutherans, Wesleyans, Congregationalists, Salvation Army, and others; Roman Catholic; Greek Church; Hebrews; Mohammedans; Buddhists; Nil; Pagan; [and] Unknown.

Yet while group entertainment was provided, some felt individualized care should still be the aim:

[I]nstead of this being carried out individually, as of course it ought to be, and adapted to each case, it is carried out in a wholesale way. Instead of being fine-hand painting it is slapdashery. Amusements are provided, and crowds of patients are sent to them. I believe, on the whole, the effects of even this imperfect system are very beneficial; but the treatment is not carried out in true principles.²²

This aim was not realised in Queensland until 1950 with the introduction of music therapy into the State system. Between 1870 and 1930 the entertainment provided was attended by only a very small proportion of the asylum population.

Recreation in Queensland Mental Hospitals

Queensland entertainment included games, concerts, dances, silent and later talking films, letter writing, sports (including cricket and football), and extended walks.²³ Patients could be passive (watching) or they could participate (dancing, singing, playing a musical instrument, or sport). Religious services were considered a recreational activity. Between 1866 and 1869, limited recreational activities (cards, quoits, dominoes) were available for patients in the wards and yards. In 1906 the Medical Superintendent justified the expenditure on a new piano for the female ward at Goodna 'in place of the one which has been in use for about 25 years, and is now useless,' on the grounds that 'piano-playing is a recreation greatly enjoyed by the female patients, and is often of considerable advantage to them.'²⁴ Cultural practice for centuries had prescribed 'appropriate musical activities' for women.²⁵ Billiard tables were placed in the male ward, while pianos were placed in female wards, and by 1918, the Annual Report stated that 'musical instruments either pianos or gramophones, are now supplied to all wards.'²⁶

In 1915, the Medical Superintendent, H.B. Ellerton considered that:

Recreation is most important, and that is where asylums differ from any other kind of institution. There is no kind of institution depends on recreation as mental hospitals

²² Sir James Crichton Browne (1889) quoted in Henry Burdett, *Hospitals and Asylums of the World*, vol. 2, 182. Cheryce Kramer ('Music as Cause and Cure of Illness' in Peregrine Horden (ed.), *Music as Medicine: The History of Music Therapy Since Antiquity* [Aldershot: Ashgate, 2000] 344), states that Peter Lichtenthal in *Der Musikalische Arzt* had concluded that 'musical cures were associated with pleasure. Really hearing the music entailed conscious listening to the music; unconscious hearing, that is to say hearing with one's body alone, was insufficient for the purposes of medical treatment.'

²³ The practices found in Britain were replicated in Queensland and throughout the rest of Australia. See Stephen Garton, 'Palaces for the Unfortunate: Lunatic Asylums in New South Wales 1880-1940,' *Journal of the Royal Australian Historical Society* 76 (1991): 297-312.

²⁴ QSA A/31767 (1902-1917), letter, Medical Superintendent, Goodna to Home Secretary, Mental Hygiene (Insanity), 20 Aug. 1906.

²⁵ Sara Mendelson and Patricia Crawford [*Women in Early Modern England* (Oxford: OUP, 1998) 224] state that from 1500 onwards women 'experienced material objects in a gendered way,' and although the piano was played by men, in a domestic setting from the 19th century onwards it was predominantly the domain of women. They add (224) 'For example, the female sex was associated with certain musical instruments, especially the lute and virginals; but other instruments were forbidden women, such as the cello, which could only be played in an 'immodest' and unfeminine posture.' This gendered notion of instruments is discussed in passing by Philip G. Downs, *Classical Music: The Era of Haydn, Mozart, and Beethoven* (New York: W.W. Norton, 1992) 39.

²⁶ QPP 1918, Annual Report (Goodna), 10.

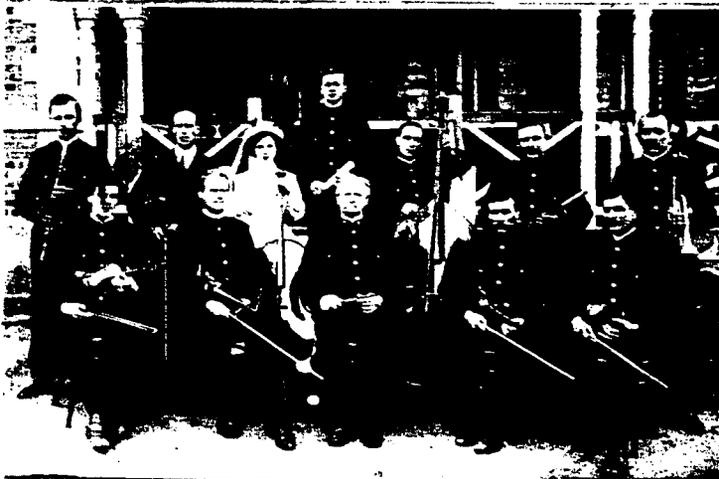
and asylums ... in the matter of asylum management, the provision of recreation is essentially a fundamental element in the treatment of patients, and a matter for which daily and hourly provision must be made, and without which an asylum will fail in its purpose.²⁷

While Ellerton claimed 'daily and hourly' provision of recreation, the reality was nothing like this. Ellerton revived the asylum band on his arrival at Goodna in the early 1910s, because:

I believe in having as good music as I can supply for the patients, just as I believe in letting them see a good game of cricket. Music and recreation are part of the work of the institution, and constitute an important element in the scheme for the beneficial treatment of patients. There are many patients who can appreciate good music, and there are many others who can appreciate good cricket, and who like to see good players.²⁸

The asylum band comprised mainly male attendants, including Ellerton, and met 'twice a week to practice between 2 and four o'clock, and they play at all the dances.'²⁹ Ellerton had 'one [nurse] in the band, but generally the nurses do not play anything outside the piano.'³⁰ Frustratingly, Ellerton makes no reference to the repertoire.

Figure 5. Goodna Asylum Band c.1910, Wolston Park Hospital, Queensland. [Note the nurse playing the cello.] Reproduced by permission Wolston Park Hospital.



²⁷ QPP, Royal Commission (1915), 582-86.

²⁸ QPP, Royal Commission (1915), 582-86; Cheryce Kramer ['Soul Music' 140] noted that 'Every piece of music performed at the [German] asylum had to receive prior medical approval, and compositions deemed aesthetically too demanding for those suffering from an affliction of *Gemüth* ['soul,' 'temperament' or 'state of being'] had to be rewritten by the music instructor ... The asylum published the *Illenauer Liederbuch*, a book of special hymns for mental patients that became the standard text for psychiatric asylums throughout Germany.' In England at the County Lunatic Asylum at Powick, Edward Elgar and his father had initially provided the music for the weekly asylums dances held for patients at the Asylum at Powick, and in 1879 Edward was appointed Musical Director, writing pieces to suit the ability of the asylum band. See Jerrold Northrop Moore, *Edward Elgar: A Creative Life* (Oxford: Oxford University Press, 1984) 83-4.

²⁹ QPP, Royal Commission (1915), 582-86.

³⁰ QPP, Royal Commission (1915), 582-86.

It is possible to reconstruct part if not all of the musical contents of four asylum concert programs: three for Willowburn Asylum in Toowoomba (1891, 1892 and 1901), and one for Goodna Asylum (1919). At Toowoomba, two concerts were given by the Band of the Fourth Regiment, and the programs published in the *Toowoomba Chronicle* (see Tables 1 and 2).

Table 1. Concert program performed at Toowoomba Asylum on the previous Saturday by the Band of the Fourth Regiment, under Bandmaster Kretschmar reported in the *Toowoomba Chronicle*, 27 April 1891.

Item	Program
1	Grand March
2	Selections from <i>Bohemian Girl</i>
3	Valse, 'La Fiance'
4	Phantasia, 'In Switzerland'
5	Polka, 'Tout a la Joie'
6	'Potpouri of National Airs'
7	'Gustavons' Galop
8	'Friedens' march
9	'God Save the Queen'

Table 2. Concert program to be performed at Toowoomba Asylum on the following Saturday by the Band of the Fourth Regiment, reported in the *Toowoomba Chronicle*, 18 May 1892.

Item	Program
1	March, Cragelie
2	Valse, Adolphus
3	Schottische, Jollie Sailors
4	Fantasia, on Scotch Airs
5	March, Killarney's Lakes gallop, Opposium
6	Polka, Queen of the Beauty
7	Fantasia, on National Airs
8	Valse, Love's Dreamland
9	March, Chiming Bells
10	'God Save the Queen'

The contents reflect the band repertoire of the period, and on both occasions included a selection of national airs and the national anthem. The third concert was held in December 1901, performed by Miss Eugenie Boland and friends. Although the program details were not printed in the paper, a concert program for Miss Boland, published in the *Toowoomba Chronicle* in March 1902, gives us an insight into the repertoire she and her friends may have performed at the asylum the previous December [see Table 3]. As there were performers common to both events there may also have been program similarities. The works performed at the benefit included works by Dancla, Rossini, and Sullivan, as well as popular songs by Roeckel, Mattei, and Moore.

Table 3. 'Complementary Benefit Concert performed by the Citizens of Toowoomba ... for Miss Eugenie Boland,' 8pm, 6 March 1902, Toowoomba Town Hall, advertised in the *Toowoomba Chronicle*, 4 March 1902. [This 1902 program may contain items that were performed the previous year by Miss Eugenie Boland, Misses Schmid and O'Byrne, Messrs. Deazley, Godsall, Ray Clark, Moloney, and Master Willie White at Willowburn Asylum, reported in the *Toowoomba Chronicle*, 14 December 1901.]

Item	Program
1	OVERTURE, 'Tancredi' (Rossini) Piano, Mr. NORMAN BENTWITCH; Violin, Mr. C. SCHAFFER; 'Cello, Mr. MAX MULLER
2	HYPNOTIC SÉANCE Rev. H. VIVIAN TYRELL
3	SONG 'The Scent of the Lillies' (Cobb) Miss MARLAY
4	SONG 'Alba Stella Confidenti' (Robardi) Mr. DEASLEY With 'Cello Obligato by Mr. Max Muller.
5	SONG 'Angus Macdonald' (Roedel) Miss BOLAND
6	SONG 'Selected' Mr. C.J. BOTTGER
7	SONG 'Let me Dream Again' (Sir Arthur Sullivan) Mrs. NORMAN BENTWITCH
8	HUMOROUS SONG 'The Golden Dustman' (Chevalier) Mr. E. J. GODSALL
9	OVERTURE - '4th Symphonie' (Dancla) Piano, Mr. NORMAN BENTWITCH; Violin, Mr. C. SCHAEFER; Flute, Mr. MAX MULLER
10	SONG 'Selected' Mr. C.J. BOTTGER
11	SONG 'Tis the Harp in the Air' (Wallace) Mrs. F.C. NORRIS
12	VIOLIN SOLO 'Simple Aves' Miss K. SHINE
13	SONG 'The Last Rose of Summer' (Moore) Miss BOLAND
14	HUMOROUS SONG 'Street Musicians' (Paul Mill) Mr. A. J. MARKS
15	RECITATION 'Selected' Rev. H. VIVIAN TYRELL
16	SONG 'For the Sake of the Past' (Mattei) Miss SCHMID
17	CORNET SOLO 'Always Alone' (Roberts) Herr KRETSCHMAR
18	GOD SAVE THE KING !

In 1919 the 'Troubadours' performed at the Goodna Asylum. They had performed a few days earlier in the Goodna area, and the group contained staff members from the asylum. The earlier concert program dated 4 February 1919 for the 'Troubadours' performance at the Oddfellows' Hall, organized by the Rev. J. Thorn in aid of the Presbyterian Church, comprised the following items: 'What a treat for Father,' 'Dear Delightful Woman,' 'Pat on the Back' and 'Ching-a-ling.'³¹ In his letter to the Medical Superintendent, Thorn indicated that if the staff member could be spared from duty 'our programme will be unaltered.'³² The group also had a small orchestra with men playing cornet and flute, and women playing piano and violins.

The overwhelming musical content appears to have been either popular music written between c1850 and c1890 that was morally upstanding and/or comic and cheerful, or religious. The song texts reinforced moral behaviour, and gender and class stereotypes. The regular providers of concerts at the asylums included the Salvation Army Band, the Caledonian Society Pipe Band, local choirs, and a small number of school choirs. Weekly dances were held during the winter months only, with music provided by either a commercial band or the asylum staff. Yet not all performers for these asylum concerts were enthusiastic; in 1903 the Salvation Army Brass Band rehearsed in front of the patients rather than perform. In the 1903 Annual Report the asylum publicly thanked the band members for their 'disinterested efforts.'³³

Surviving records for Sandy Gallop (Ipswich) provide the most detailed account of actual levels of recreation. For example, the Male Head Attendant's Day and Night Report Books (June 1910 to June 1911), for a total of 239–242 male patients, indicate the lack of regular recreation: on only nine days in the year did between ten and 120 men visit the recreation ground; on only four days in the year was an 'entertainment' held for between eighty and 138 men; there were only seventeen days on which between ten and twenty men went on 'extended walks'; and religious services for between one and forty-one men were held on only twenty-five days throughout the year.³⁴ As there was no Recreation Hall at this time, these activities either took place in the larger wards or in the airing yards. The Male Head Attendant's Day and Night Report Book records the lack of amusement offered to patients. At best the four 'entertainments' held that year involved just over half of all the male patients at the hospital. The numbers of patients actually experiencing recreation in any of its forms remained very low. A survey of all surviving male and female ward books for the years c.1910–1930s confirms this low rate.

Rarely are we able to rediscover a patient's personal response to recreational events held in the hospital for the period 1870 to 1930 that involved the medical practitioners of the day catering for individual musical recreation. Yet in 1879 at Goodna:

on the opening of the new female ward, the Asylum piano was placed in it, with the view of inducing a melancholy patient, who had been a professional pianist, to play. The attempt was successful, and the result was that she not only played every night in the ward to the patients, but also at the entertainments. She ultimately recovered and went home to England, and there is no doubt that the piano in no small degree

³¹ *Queensland Times* 4 Feb. 1919.

³² Wolston Park Hospital, letter from J.B. Thorn to the Medical Superintendent, 28 Jan. 1919.

³³ QPP 1903, Annual Report (Goodna), 13.

³⁴ QPP 1911–12, Annual Report (Ipswich), 20.

contributed to her recovery. One of the nurses, as often as other duties permit, worthily takes her place at the piano, in the evening, in the ward, as well as at entertainments. As far as music is concerned, we are now less dependent on help from without.³⁵

While this case recounts the cure for a middle-class female patient, overall there is no evidence of any systematic attempts to map the efficacy of music in the treatment of the mentally ill.

New technologies such as film and radio provided a wider range of entertainments in the twentieth century. Silent film first appeared in Australia in the last decade of the nineteenth century, and by 1914 'was the most popular entertainment in the world, and nowhere was this more pronounced than in Australia.'³⁶ In Queensland asylums films had been shown to the patients from the early 1910s onwards. The female patient who accompanied the silent films (either from a cue sheet or improvisation) at Ipswich must have enjoyed this activity for she frequently fulfilled this task from the mid-1920s to the early 1930s. The only film we know of that was to be shown at the Goodna Asylum in 1919 was the Fatty Arbuckle comedy called *The Butcher Boy* (1917).³⁷

Volunteer groups, commercial groups or bands, the asylum bands (when in operation) and films provided the main entertainment. After 1930 single radio sets were installed in the wards, controlled from a central radio room playing up-to-date programs from the local broadcast network.

While individual choice took second place to the provision of mass musical entertainment, radio provided patients—and staff—with a consistently better quality of performance than was possible previously (see Table 4).

Comments for America regarding the rationale for the use of radio with the mentally ill are equally applicable for Australia:

Radio programs play so important a part in the life of the average American, both for recreation and information, that to deprive a sick person of the opportunity to enjoy them is all but inhuman. In hospital, moreover, radio seems to be appreciated not only for its entertainment and educational value, but because it provides a stimulus to interaction and a realistic link to the outside world.³⁸

The three surviving recreation buildings and asylum records are the silent witnesses to the noisy and lively recreational activities of past patients. In the asylums gender and class prescribed the types of recreational spaces and activities made available between 1870 and 1930. Furthermore, the musical content of the entertainment provided reflected the principles of moral therapy, which aimed either to instill or restore a sense of physical and mental order, propriety, and morality in this captive audience.

³⁵ QPP 1879, Annual Report (Goodna); Keys were a prominent feature of asylum life, and were used to lock areas, as well as lock pianos, when it was not deemed to be recreation time.

³⁶ Diane Collins, *Hollywood Downunder: Australians at the Movies 1896 to the Present Day* (North Ryde, NSW: Angus & Robertson, 1987) 3.

³⁷ Wolston Park Hospital, letter from Paramount Pictures (Sydney) to the Medical Superintendent, Goodna Asylum, 3 Feb. 1919.

³⁸ Greenblatt et al., *From Custodial to Therapeutic Patient Care* 109.

Table 4. Radio 4QG Brisbane, program for 1 September 1930, published in the *Queensland Times* on 30 August 1930. This program was transmitted through the wireless system to individual wards at Ipswich hospital for the Insane, after the official opening.

Time	Type of program broadcast
7.31am-8.30am	Musical reproductions. Weather Information. Cable and other news.
11.01am-12.30pm	Daily broadcast service. Music reproductions. Social news. The address of the President of the National Council of Women: by Mrs. Cumbrae Stewart. Items of interest.
1.01pm-2.00pm	Market reports, weather. News. British official wireless news. Musical reproduction.
3.01pm-4.30pm	Musical reproductions. Mail train running times.
6.01pm-7.45pm	Railway, mail and shipping information. Musical reproductions. Bedtime stories by 'The Sandman.' Market reports, weather, news, &c. 'A Talk on Books,' by Mr. J. Doyle (McLeods). Sporting notes.
8pm	Gladys Frost (pianist) and Lena Hammond (contralto).
8.30pm	A concert programme by the principal winners of the recent Windsor Eisteddfod. Masters W. Waddell and Alec Harris, violin duet.
8.34pm	Jim Donnan, vocal solo.
8.37pm	Ray Stone and Ron Chester, piano duet.
8.40pm	Nell St. Helier Money, recitation.
8.45pm	Marie Herberg, piano solo.
8.49pm	Miss M. Ingram.
8.53pm	Maisie Junner (elocutionist).
8.56pm	Misses C. Sanderson and M. Martin, piano and violin sonata.
9pm	Misses [metro]opolitan weather forecast.
9.01pm	Misses Ray Stone and F. King, vocal duet.
9.05pm	Iris George (elocutionist) monologue.
9.09pm	Jim Maughan, piano solo.
9.14pm	Miss F. Baines (soprano).
9.18pm	Harold Blunt, 'cello solo.
9.23pm	Jocelyn Thomson Jones (elocutionist).

9.27pm	Winifred Curtis (pianiste).
9.31pm	Masters Garvie Evans and Walter Bird.
9.37pm	Eunice Sanderson (pianiste).
9.43pm	Mercia Benson (elocutionist), monologue.
9.48pm	Miss M. Martin (violiniste).
9.53pm	Norman Braid (baritone).
9.57pm	Misses Warner and Shepherd.
10.01pm	J.G. Robertson (tenor).
10.05pm	H. Perkins and E. Cockburn.
10.10pm	Frank Cameron (elocutionist).
10.14pm	Darley Cooper (pianiste).
10.18pm	H. Perkins (violiniste).
10.22pm	Misses D. and M. Tippling.
10.26pm	Misses Sanderson, Martin and Baird, instrumental trio.
10.30pm	Cable and other news.
10.45pm	Dance music.
