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'Mapping Madness: HGIS and the granular analysis of Irish patient records'

The Connaught District Lunatic Asylum (CDLA) opened at Ballinasloe, Co. Galway in 1833 as one of the first of a nationwide network of Irish District Asylums. Intended to serve only the curable pauper lunatics of the counties of Mayo, Sligo, Leitrim, Galway, and Roscommon, the institution found itself at the heart of significant social, economic, and political change in the West of Ireland. From its opening, the asylum maintained a full and complex series of records that provide an exceptional level of detail on a cohort – the very poor and illiterate population of Connaught – who otherwise often lived and died unrecorded on the margins of Irish society. The CDLA admission records include information on age, sex, occupation, education, religion, marital status, places of origin and residence, migration, and family structures as well as the medical information, both mental and physical, required for treatment in the asylum. As Irish society came increasingly to accept and exploit such institutions, admissions to the asylum were often driven by considerations that had little to do with mental ill-health.

This paper will examine the potential benefits of implementing spatial epidemiological methods into historical studies of mental illness. Spatial Epidemiology is the analysis and description of geographically linked data relating to health. Its purpose is to examine behavioural, genetic, and socioeconomic risk factors. Using a database of patient records this paper will conduct a demographic analysis of a select patient cohort of the population of the CDLA. The paper will outline the process of transforming the data extracted from these records into visual maps using Historical GIS (HGIS). Two of the primary factors which will be examined are the patient's place of origin and their residence. Using the geographic coordinates of these two locations the unique patterns of movement of those that entered the asylum can be mapped using GIS software. These maps enable the examination of the sociospatial processes which affected the marginalised population of the asylum. A particular focus of this paper will be the examination of rural and urban admissions. Geographic marginality is often exemplified by sharp qualitive and quantitative breaks, these breaks are clearly visible when utilising GIS maps. When analysing cases of mental illness, it is important to have an understanding of the manner in which it is affected by spatial considerations. This paper aims to examine the consistency of spatial patterns over the course of the period of study and analyse particular areas which had high admission rates to CDLA.