Research Article

Early psychiatric services in Hong Kong from 1841 to 1947

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ABSTRACT

Goal: To introduce the early psychiatric services in Hong Kong from 1841 to 1947.

Background: Before 1875, there was no government institution existed in Hong Kong for the lunatics.

Methods: Some literatures were attained by using Pubmed, Bing and http://lib.hku.hk/, the official website of the University of Hong Kong Libraries.

Results: It is not easy for Hong Kong to establish its first lunatic asylum in 1875. In 1885, European Lunatic Asylum, which only admitted European lunatics, opened. In 1891, Chinese Lunatic Asylum, the first lunatic asylum admitting Chinese lunatics, opened. The primary responsibility of early psychiatric services in Hong Kong was custodial care for lunatic patients in order to settle them down instead of treatment before Chinese patients were transferred to Canton Refuge for the Insane or non-Chinese patients were repatriated to their own countries. In 1895, European Lunatic Asylum and Chinese Lunatic Asylum merged into one. In 1925, the merged Chinese and European lunatic asylum was renamed as the Victoria Mental Hospital. Treatment in the Victoria Mental

Hospital was still limited to physical restraint and temporary custodial care for disturbed patients until Dr Yap Pao Meng was appointed Medical Superintendent of the mental hospital in 1948, when psychiatry in Hong Kong entered a psychiatric treatment era.

Conclusion: Although just providing custodial care for lunatic patients, it is not easy for Hong Kong to establish its first lunatic asylum in 1875, giving it was until February 1898 that the first lunatic asylum in Chinese mainland was established. 1841-1924, antipsychotics drug hasn't been invented yet, there were still no psychiatric hospitals where psychiatric treatment predominated, So, Hong Kong was not an exception. After 1925, The Victorian mental hospitals have lagged behind Britain and the United States, maybe because a gap of economic, cultural, medical level in Hong Kong compared with Britain and the United States still existed in additional to the colonial government's limited financial investment in medical services.

2. MeSh Headings/ Keywords: Psychiatric service, Hong Kong, Custodial care

Introduction

During 1841-1875, Hong Kong, as a Crown colony, was still a small fishing port where British, American, and other expatriates engaged in commercial and trade activities, its population was small and social facilities were under-developed. In old Hong Kong Chinese society, mental patients were considered a disgrace to the family. Relatives would tolerate the burden of looking after a mentally disturbed member and would try to keep the patient inside the family [1]. Under these conditions, the Hong Kong Government had no intention of building any asylum for mental patients [2]. So, before 1875, there was no government institution existed in Hong Kong for the lunatics. In 1873, the European lunatics were sent to Central Police Station Victoria Gaol (Figure 1) in Old Baily Street until they were repatriated to their own countries while the Chinese lunatics were sent to Tung Wah Hospital (Figure 2), the first charity hospital for Chinese in Hong Kong, opened in 1872. Tung Wah hospital had special insanity ward with special restraining clothes, where they were "confined in dark and dreary cell under Chinese native doctor's supervision and those who were violent were chained like wild beasts "[3,4].

The article introduced the early psychiatric services in Hong Kong from 1841 to 1947, when the primary responsibility of early psychiatric services in Hong Kong was custodial care for lunatic patients.



Figure 1: Central Police Station Victoria Gaol.



Figure 2: Tung Wah Hospital.

Methods

Some literatures were attained by using Pubmed, Bing and http://lib.hku.hk/, the official website of the University of Hong Kong Libraries.

Results

In 1875, a temporary lunatic asylum (Figure 3) located in the present site of Hollywood Road Police Married Quarters was opened and was the first lunatic asylum in Hong Kong, but the hospital only admitted non-Chinese psychiatric patients, Chinese patients continued to be sent to Tung Wah Hospital. Then, around 1880, the building where the temporary asylum was located had to be pulled down and the temporary asylum was relocated to half of a deserted old Chinese school house in Hospital Road, on the site which later became the new wing of the Government Civil Hospital. This asylum remained in use until 1885 [5].

In 1885, European Lunatic Asylum (Figure 4A) with 8 beds (4 for men and 4 for women), which only admitted European lunatics, opened at present site of the David Trench Rehabilitation Centre in Bonham Road. In 1891, just being located on the lower site of European Lunatic Asylum, Chinese Lunatic Asylum (Figure 4B) with 8 beds for males and females respectively in High Street, the first lunatic asylum admitting Chinese lunatics, opened. After that, Tung Wah Hospital stopped admitting violent 'lunatics'. Now Chinese Lunatic Asylum is used as the Eastern Street Methadone Clinic [6-8].

There was consistent overcrowding of the asylum and, in 1894, the Hong Kong Government arranged with the authorities in Canton to accept transfers of Chinese patients to the John Kerr Refuge for the Insane in Fong Tsuen, Canton, which was opened by John G. Kerr, an American medical missionary, as the first mental hospital in China in 1898. Non-Chinese patients were repatriated to their own countries.

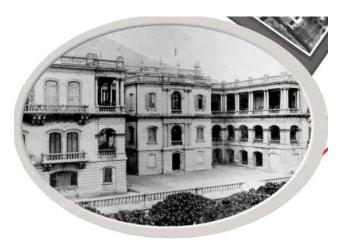


Figure 3: The first lunatic asylum in Hong Kong.

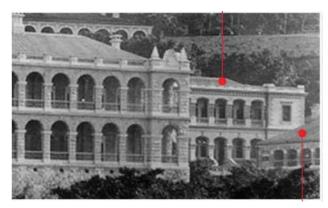


Figure 4A&B: 4(A)European Lunatic Asylum. 4(B): Chinese Lunatic Asylum.

In 1895, European Lunatic Asylum and Chinese Lunatic Asylum merged into one. A small wing of Government Civil Hospital was designated as a lunatic asylum for the management of mental patients in Hong Kong. In terms of medical cover, the asylum was treated as an annex to the Government Civil Hospital [9,10].

In 1906, the Asylum Ordinance, Hong Kong's first ordinance to provide the establishment of lunatic asylums for the detention, custody and care of persons of unsound mind, was passed by the Legislative Council of Hong Kong. In 1923, 309 lunatic were admitted by the lunatic asylum and 131 were transferred to Canton. The asylum era ended in 1925 when the term 'lunatic asylum' was substituted with 'mental hospital'. In 1925, the merged Chinese and European lunatic asylum was renamed as the Victoria Mental Hospital, which had 23 beds. The discharge of recovered patients was a great problem at that time because their families were reluctant to bring them home for fear of social stigma. The number of patients in the mental hospital rose from 308 in 1925 to 679 in 1940. In 1938, the mental hospital had a bed complement of 23 but had to house more than 100 patients.

Therefore, the Government sanctioned the conversion of part of Medical Staff Quarters of the former Government Civil Hospital at the corner of High Street and Eastern Street to



Figure 5: Dr Yap Pao Meng.

"wards for quiet type of patients", which were later designated as the Female Block (Block C) of the mental hospital. So the bed complements in the mental hospital increased to 84 including 26 for males, 26 for females and 32 for the mixed. Services in the Victoria Mental Hospital at that time were provided by a part-time European Medical Officer in-charge, a part-time Chinese Medical Officer in-charge, one Head Male Attendant, one Assistant Male Attendant, three Mental Nurses, three dressers and a group of 23 Amahs, ward-boys, laborers and Coolies [8,11].

Treatment in the Victoria Mental Hospital was still limited to physical restraint and temporary custodial care for disturbed patients. Because of the arising of the patients and the treatment was very limited, once patients had settled down, they were still transferred to the John Kerr Refuge for the Insane in Fong Tsuen. Then the Hong Kong Government paid the patients' expenditure every year to Fong Chuen Hospital. The transfer came to a halt after 1949. In 1947, the Victoria Mental Hospital was still the only Mental Hospital in Hong Kong when the population in Hong Kong was one and a half million [1,12].

In 1948, Dr Yap Pao Meng (Figure 5) was appointed Medical Superintendent of the mental hospital. Dr Yap achieved an honours degree in psychology at Cambridge, then graduated in medicine and later underwent training in psychiatry at the Maudsley Hospital in London. With his appointment, Dr Yap started planning the development of psychiatric facilities and training of medical and nursing personnel and began to use therapies such as electroconvulsive therapy to treat mental patients. Psychiatry in Hong Kong entered a psychiatric treatment era [9].

Discussion

In the late 19th century, prejudice and discrimination on mental patients still existed in Hong Kong without any lunatic asylum for mental patients, although just providing custodial care for lunatic patients, it is not easy for Hong Kong to establish its first lunatic asylum in 1875, giving it was until February 1898 that the first lunatic asylum in Chinese mainland, Canton Refuge for the Insane, was established by John G. Kerr, a American medical missionary [10]. 1841-1924, antipsychotics drug hasn't been invented yet, there were still no psychiatric hospitals where psychiatric treatment predominated, even lunatic asylums in the United Kingdom and United States also took custodial care for their main purpose. So, Hong Kong was not an exception [13]. Of course, colonial government's financial investment and efforts were limited at that time. The primary task of the Victoria Mental Hospital established in 1925 was still the custody of lunatic patients while deinstitutionalization and community care movement in contemporary mental hospitals in the United Kingdom and the United States were booming. Apparently, the Victorian mental hospitals have lagged behind Britain and the United States, maybe because a gap of economic, cultural, medical level in Hong Kong compared with Britain and the United States still existed in additional to the colonial government's limited financial investment in medical services [14].

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