

Coercive confinement in the Republic of Ireland

The waning of a culture of control

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Abstract

In Ireland until recently, a range of institutions other than prisons was utilized to confine those deemed to be deviant. It seems clear that rather than becoming more punitive (if this is estimated by the number of individuals coercively confined) the country has become considerably less so over the past 50 years. In 1951, despite high emigration providing a safety valve, more than 1 percent of the population was behind closed doors in prisons, borstal, reformatory and industrial schools, psychiatric institutions (as involuntary patients) and homes for unmarried mothers. This was eight times higher than in 2002.

Key Words

Imprisonment • Ireland • coercive confinement • decarceration • social control

INTRODUCTION

Mid-way through the first decade of the 21st century, prison populations in advanced industrial nations were expanding. While the rate and pace of expansion varied considerably, the overall trend was emphatically upward. This is broadly in line with what would be expected if the 'culture of control' thesis outlined by Garland (2001) held true outside the jurisdictions he selected as case studies (England and Wales and the USA). One key component of the new arrangements is the reinvention of the prison as a 'massive and seemingly indispensable pillar of contemporary social order' (ibid., p. 14). But the thesis outlined by Garland is more complex and subtle than simply detailing the increase in prison populations. He provides a compelling account of the interlocking social, economic and cultural changes since the 1970s that have allowed the prison, particularly in the USA, to function 'as a kind of reservation, a quarantine zone

in which purportedly dangerous individuals are segregated in the name of public safety' (ibid., p. 178).

In his earlier work, particularly *Punishment and welfare: A history of penal strategies*, Garland (1985) examined the emergence of penal-welfarism, that particular fusion of legal regulation and diagnostic techniques oriented towards the rehabilitation of the offender, and, significantly for this article, the range of institutions in which this rehabilitation was supposed to take place. These included reformatories for juveniles and inebriates, borstals and specialized institutions for the 'feeble-minded'. It was the abandonment of penal-welfarism that facilitated the emergence of the culture of control. Despite the multifaceted nature of the 'new punitiveness' that Garland and others (e.g. Pratt et al., 2005) have identified, Matthews (2005: 180) argued that there is a tendency for it to be conceptualized narrowly:

In many versions of the 'punitiveness thesis' the use of custody is seen to be a critical indicator. It is the strategy of punitive segregation, particularly when linked to rising prison populations and increases in the lengths of prison sentences that the case for punitiveness is seen to have its most solid foundation.

Since Garland's latest book was published, especially sharp increases in prison populations have been recorded, lending further credence to his account. Never in living memory have democratic societies resorted to locking away so many of their fellow citizens and at the same time been so indifferent to the consequences. (For an insightful review of Garland's thesis and its pessimistic implications, see Zedner (2002). On the problems associated with the measurement of penal change more generally, see O'Donnell (2004a)).

However, if we move away from using imprisonment rates as a proxy for punitiveness and locate the prison in a wider context, as but one of a range of institutions that has been utilized to reform, quarantine or reject those who did not conform to societal norms over the past half-century, then a different, and indeed less catastrophic, reading of the present becomes possible. The focus on current levels of incarceration in prisons may blind us to other changes in the custodial landscape.

Penal-welfarism, broadly conceived, incorporated a range of institutions that confined men, women and children in the name of treatment, care, rehabilitation and repentance. If, as seems to be the case, prison has become the primary site for the containment of errant individuals in the late 20th and early 21st centuries, this is a relatively novel development. As Rose (2000: 187) argued, 'in many ways, the criminal justice system itself plays a minor role in control practices – a role that is historically variable and should itself be subject to analysis'. In this article we do not attempt a cross-national study, but rather focus on one country, the Republic of Ireland, and by so doing hope to describe how the growing centrality of the prison has been accompanied by an unrecognized (or at least seldom remarked upon) downsizing in overall levels of coercive confinement.

Following this line we take a 'historical turn', endorsing Pierson's (2004: 6–7) view that greater attention to the past may 'open exciting possibilities for extending existing theoretical work in new directions'. By providing a detailed case study with a longitudinal dimension we hope to overcome the 'small N' problem of focusing on a single

jurisdiction. As Rueschemeyer (2003: 310) put it, 'single cases can indeed do more than inspire new hypotheses and insights. They can serve the purpose of theory testing as well'. In her study of penal politics in three states in the USA, Barker (2006) has demonstrated how following Rueschemeyer's approach can generate a rich understanding of processes that can be elided when analyses proceed at a more general level. In a similar spirit, our aim is twofold: to explore the novelty of present penal arrangements in light of a broader understanding of 'coercive confinement' and to provide a new slant on the meaning of punishment and exclusion.

Of course, there is nothing particularly original about this argument. Foucault's (1977) concept of the 'carceral archipelago' alerts us to the reality that the prison was but one of a range of institutions established to regulate human conduct. This range was wide. For example, Jones and Williamson (1979: 60) explored the origins of monitorial schools in England 'as a means of securing public morality and preventing crime' and documented the emergence of compulsory education *via* reformatory and industrial schools from the mid-1850s. In Ireland, it was not until the School Attendance Act, 1926 introduced the possibility of industrial school for truants that 'an effective coercive mechanism' (Fahey, 1992: 393) was devised to secure the compulsory attendance of children aged 6 to 14 in formal educational institutions.

But the scholarship on the development of these differentiated institutions (e.g. Wiener, 1990; Zedner, 1994) seems somehow to have 'got lost' in the rush to capture the essence of the present. While there is an understandable desire to make sense of current arrangements, and for some social scientists to explain them as emblematic of an epoch-defining strategy to manage social order, much recent work on imprisonment rather than confinement is insufficiently historical. (Zedner (2006) made a similar point in regard to the development of policing.)

Liska (1997) argued strongly for the necessity of drawing together the disparate literatures that have emerged, usually in isolation from each other, to address the inter-relationships between criminal justice, mental health and social welfare systems. What he describes as the 'balkanization' of macro social control research has impeded the development of good theory. As he expressed it (*ibid.*, p. 57):

Researchers studying prison admissions are criminologists interested in prisons; researchers studying mental hospital admissions tend to be psychiatrists and psychologists interested in mental health . . . Hence, issues that cut across diverse forms of control are blurred, if not obscured.

In a later article, Liska et al. (1999: 1745) noted that researchers of macro social control 'do not build on each other or even cite each other'.

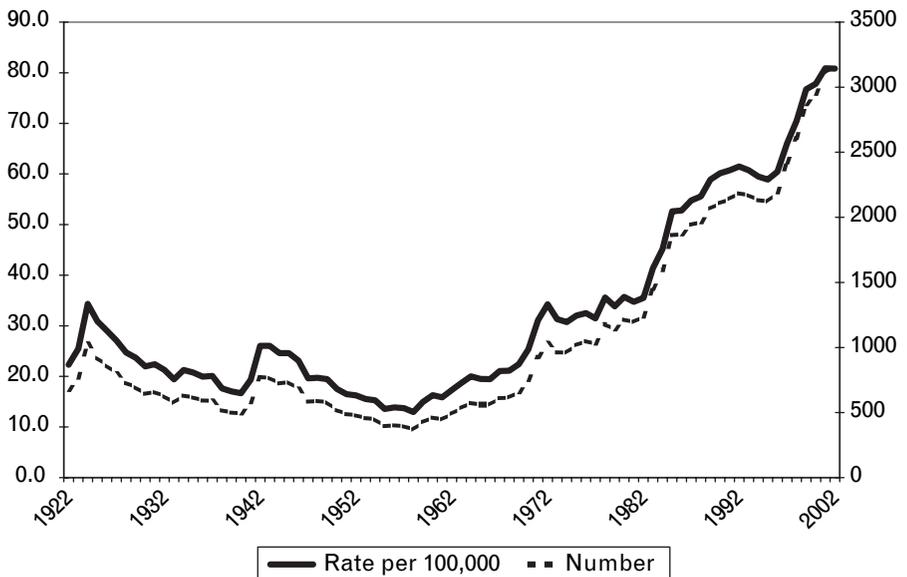
We attempt to engage with Liska's agenda in a modest way by emphasizing the relevance of prisons, reformatory and industrial schools, Magdalen homes, county homes (formerly workhouses) and mental hospitals. In doing so, we aim to highlight that current levels of coercive confinement are not unprecedented. At least in the Irish case there has been a significant downsizing of the 'captive' population. As a first attempt to chart these issues, our focus in this article is on providing a detailed description of Ireland's carceral archipelago at two distinct points in its recent history. We hope this will provide a basis for comparative and theoretical work in the future.

CONTEXT

A cursory glance at the upward trajectory in the level of imprisonment in Ireland over the closing decade of the 20th century would suggest a country that had begun to take a very definite punitive turn. Figure 1 shows the daily average number of prisoners each year since the foundation of the state in 1922, and the imprisonment rate per 100,000 population. The former was less than 1000 virtually every year until the early 1970s, since when it has trebled. Although the number of prisoners had reached an unprecedented high at the beginning of the 21st century the imprisonment rate remained lower than in many other European countries (81 prisoners per 100,000 population in 2002 compared with 96 in Germany and 139 in England and Wales).

The prison population was at a historic low in the 1950s and prisoners had generally committed minor offences. The statistics for 1951 show that 11 per cent of males received into prison, and 35 per cent of females, had been convicted of vagrancy, begging or drunkenness. At this time, Ireland had a predominantly rural population numbering less than three million, a low rate of recorded crime, and all of its convicted prisoners could have been accommodated in a single institution of modest size. The country was stable politically, having been declared a republic in 1949 and admitted to the United Nations in 1955 (for perspectives on Ireland in the 1950s, see Keogh et al., 2004).

Periodic attempts by the Irish Republican Army (IRA) to end the partition of the island generated repressive, and supposedly emergency, responses that came to have a wider application when crime rates rose (see Kilcommins et al., 2004: 153–60). Roman Catholicism was in the ascendant and formal religious observance was almost universal. University education was the preserve of the privileged few and most people had a close connection with the land.



•Figure 1 Daily average prison population, 1922 to 2002

Economic growth had stagnated, unemployment was high and the country was haemorrhaging its citizens at an alarming rate through emigration. The average annual number of emigrants was 39,350 between 1951 and 1956 (a rate of 13.4 per 1000 population) and 42,400 between 1956 and 1961 (14.8 per 1000) (Central Statistics Office, 2002: 11). The national population fell for more than a century after the devastating famine of the 1840s. In 1951, suicide was still a crime and 22 cases of attempted suicide were recorded in the Garda [national police force] annual report, along with 23 cases of concealment of birth, 7 cases of killing or maiming cattle and 75 cases of sacrilege (including larceny from donation boxes).

In the 1950s, the Garda carried out a great variety of administrative duties, ranging from the collection of agricultural statistics and census returns to the delivery of old-age pension books. It was estimated that 40 per cent of a police officer's time was devoted to such duties. An interdepartmental committee, established in 1950 to decide upon a more economical deployment of personnel, argued that the shedding of some ancillary duties was essential. The *Garda Review* magazine disagreed, contending that 'extraneous duties broaden rather than hamper [contacts] between the public and our members . . . for this reason we feel there is a point beyond which the rigid adherence to the police function proper must impair efficiency' (cited in Allen, 1999: 142; more generally, see Kilcommins et al., 2004: ch. 6).

Against this background, the courts used prison infrequently and other sanctions even less. In 1950 there were eight probation officers employed for the entire country, all of whom were based in the capital city, Dublin. They were supported by volunteer workers from two Catholic charities (the Legion of Mary and the Society of St. Vincent de Paul). As the Minister for Justice, Seán MacÉoin, put it in October 1950:

In countries where religious influences are weak, there is undoubtedly a great need for the services of probation officers and psychiatrists. In this country, where the influence of religion is very strong, our need for the services of these people is not great (cited in Kilcommins et al., 2004: 51).

As late as 1968 there were still no full-time probation officers employed outside the capital (Geiran, 2005). Indeed in 2005 the Probation and Welfare Service continued to operate within the framework set out by the Probation of Offenders Act, 1907. This legislation came into existence before independence from Britain was achieved in 1922 and the fact that it continued in force almost a century later serves as a reminder of the country's colonial heritage and the inertia that has characterized criminal justice policy-making (Healy and O'Donnell, 2005).

Contrast this picture with the heterogeneous country that was Ireland at the end of the 20th century. A rapid rise in prosperity, growing secularization and net inward migration (at an annual average of 25,500 between 1996 and 2002) created an increasingly self-confident society in flux. The old certainties and the deeply rooted deference for traditional forms of authority came under profound and sustained attack. By the end of the century, the venerable institutions of church (particularly the Roman Catholic church) and State were severely bruised and had lost much of the control and obedience that had for so long characterized their operations. The reasons for this dramatic change are complex and beyond the scope of this article, but the 'Celtic Tiger', the shorthand term utilized to describe the remarkable economic prosperity enjoyed in

TABLE 1 Ireland then and now

	1951 CENSUS	2002 CENSUS
National population	2,960,593	3,917,203
Per cent born outside Ireland (1946; 2002)	3.3	10.3
Births per 1000 population	21.2	15.5
Marriages per 1000 population	5.4	5.1
Deaths per 1000 population	14.3	7.5
Per cent births outside marriage	2.5	31.1
Estimated net annual migration (annual average 1951–56; 2002)	(39,350)	41,300
Migration per 1000 population (annual average 1951–56; 2002)	(13.4)	10.5
Asylum applications	n/a	11,634
Farmers	512,510	92,879
University students	7900	131,182
Per cent Roman Catholic (1946; 2002)	94.2	88.4
Catholic priests, nuns and religious brothers	18,364	3977
Recorded indictable crimes	14,127	106,415
Homicides	8	59
Garda strength	6955	11,417
Average daily number of prisoners	488	3165
Prison warders (excl. senior grades)	246	2474
Judges, solicitors and barristers	1909	8159

Sources: Central Statistics Office (1952, 2002).

Ireland since the mid-1990s, was accompanied by profound social and cultural dislocation. By the beginning of the 21st century, Ireland was being described as the most globalized country in the world (Kearney, 2004).

Table 1 provides a snapshot of Ireland in 1951 and 2002. These years have been chosen for comparative purposes for several reasons:

- (1) They mark low and high points in the use of imprisonment.
- (2) They were census years, so reliable demographic information is available.
- (3) It is possible to obtain population counts for all of the sites of institutional confinement that are the focus of this article. For many other years this information was not collated and made public.

COERCIVE CONFINEMENT

By 'coercive confinement', we mean not only the formal sites of incarceration that are normally associated with the criminal justice system (e.g. prisons, borstals, reformatories), but also psychiatric hospitals, homes for unmarried mothers and various residential institutions for children placed by the courts. These latter sites are not usually

counted when discussing contemporary levels of incarceration. However, there can be little doubt that they served as repositories for the difficult, the deviant and the disengaged. In many cases, individuals were compulsorily confined under mental health legislation. In others there was no legal basis for the confinement, but nonetheless restrictions were placed on the freedom to leave. Families which for a range of economic, social and moral reasons wished to divest themselves of a problematic member regularly utilized such institutions. Although indisputably unpleasant places these institutions sometimes offered strategic resources to the poor and the marginal. This point has been made by Wright (1997: 154) who observed that:

Much of what is written on the history of the asylum is still skewed to an analysis of the history of psychiatry, and does little to help our understanding of the process of confinement and how and why families used the asylum for a variety of ends. Families were carers prior to and in lieu of confinement. They were active agents in the process of certification, and decided whether or not to confine or seek discharge. By understanding confinement from the perspective of the family, and through regional studies which look at modes of caring and treatment both within and outside the formal medical institution, researchers will be able to get a balanced view of the historical importance of the asylum itself.

Similarly, Brown (1987) cautions against accepting the view that asylums were constructed by the powerful in order to control those that threatened them. This is based on her analysis of the manner in which families and individuals made use of the asylums in late Imperial Russia to ensure economic survival. For farming families, in the context of a peasant economy and in the absence of a landlord class, as was the case in 20th-century Ireland, these institutions were crucial for economic survival. With limited alternatives for those who did not emigrate or were not financed to enter a limited range of professions, such institutions were an integral element in the maintenance of social order in 1950s Ireland.

Tables 2 and 3 give a snapshot of the numbers confined in 1951 and 2002. Four observations are noteworthy:

- (1) The massive downsizing of the population in coercive confinement: from over 31,000 (1069 per 100,000) to just under 5000 (126 per 100,000).
- (2) The narrowing in the range of sites: the number of institutions, which coercively held unmarried mothers and their children, has been reduced to zero.
- (3) The changing gender balance of those held in coercive confinement: from a majority of women to a minority.
- (4) The increasingly dominant role of the State: voluntary religious or non-profit agencies have virtually disappeared as providers of coercive confinement.

Despite the relatively small number of prisoners, the proportion of the population in coercive confinement in 1951 was more than 1 per cent. This was eight times greater than in 2002 and is significantly higher than the imprisonment rate in the USA in the early years of the 21st century (0.7 per cent, or 724 per 100,000 as it is more usually expressed, at 31 December 2004 according to Harrison and Beck (2005: 2)). The places where Irish men, women and children were coercively confined are described briefly next.

TABLE 2 Sites of coercive confinement, daily average populations 2002

	TOTAL	MALE	FEMALE
Prisons	2986	2882	104
St. Patrick's institution	179	179	0
Children			
Special schools	101	93	8
Other residential care	467	n/a	n/a
Special care units	102	n/a	n/a
Psychiatric hospitals			
Central mental hospital	83	76	7
Public psychiatric hospitals	772	421	351
Public hospitals – intellectual disability	217	n/a	n/a
Private psychiatric hospitals	32	14	18
Total	4939		
Rate per 100,000 population	126		

Sources: Department of Education and Science (2004: 113); Department of Health and Children (2005); Health Research Board, personal communication; Inspector of Mental Hospitals (2003: 46, 327–8); Irish Prison Service (2003: 19); O'Donnell et al. (2005: 155).

Note: Figures for public psychiatric hospitals exclude 2612 voluntary patients. For private psychiatric hospitals, the numbers are based on the first inspection carried out in each hospital during 2002 by the Inspector of Mental Hospitals. Again, voluntary patients are excluded. Most recent data on children in residential and special care relate to 2001.

PLACES OF DETENTION

In 1951 there were five *prisons* (located in Limerick, Cork, Portlaoise, Sligo and Dublin) and one *borstal* (later St Patrick's Institution) all managed directly by the State. By 1958 two of the prisons (Cork and Sligo) had closed due to the lack of committals from the courts and in this year the number of prisoners reached its lowest ebb: a daily average of 22 women and 292 men were in adult prisons with another 55 young men in St Patrick's; giving a combined total of 369. A flavour of the composition of the largest prison, Mountjoy in Dublin, is provided by Peadar Cowan (1960: 5), a member of parliament who had himself been an inmate in the mid-1950s.

The prisoners in Mountjoy male prison may be classified as first offenders, frequent offenders, habitual offenders, moochers or those decrepit beggars one sees from time to time all over the country, winers or chronic alcoholics, knackers or those tough types of tinkers who disturb the peace of towns and villages on fair days, sodomists and sexual offenders. These again may be divided into youthful offenders and adult offenders, and those who have or have not graduated through industrial schools, reformatories and Borstal. The moochers and winers have formidable arm-length records of sentences of a few days.

From the early 1970s, the daily average number of prisoners began to rise, exceeding 1000 in 1975. By 1983 the pressure on accommodation was such that the Prison Rules were revised to allow more than one person per cell. Substantial additional prison accommodation was provided during the 1990s and when the Department of Justice,

TABLE 3 Sites of coercive confinement, daily average populations 1951

	TOTAL	MALE	FEMALE
Prisons	443	400	43
Borstal	45	45	0
Reformatory schools	214	178	36
Children			
Industrial schools	5844	2724	3120
County homes	783	n/a	n/a
Extern homes/special homes	911	n/a	n/a
Unmarried mothers			
County homes	450	0	450
Extern homes/special homes	533	0	533
Magdalen homes	1020	0	1020
Psychiatric hospitals			
District and auxiliary mental hospitals	18,375	9409	8966
Private mental hospitals	482	190	292
Central mental hospital	93	81	12
Public assistance institutions (county homes)			
Mental disorder	274	82	192
Mental defectives	567	253	314
Sane epileptics	177	79	98
Private institutions			
Mental defectives	1263	635	628
Sane epileptics	177	92	85
Total	31,651		
Rate per 100,000 population	1069		

Sources: Central Statistics Office (1952: 185); Department of Education (1952: 135); Department of Health (1951: 9); Department of Health (1952a: 61, 90); Department of Health (1952b: 54); O'Donnell et al. (2005: 149); Walsh and Daly (2004).

Note: The figure for industrial schools only includes those children committed by the courts. A further 428 children in industrial schools had been placed by local authorities or were there on a voluntary basis. For the District and Auxiliary Mental Hospitals, the figure does not include 422 voluntary patients, and for Private Mental Hospitals 399 voluntary patients are excluded. The figure for Magdalen Homes is an estimate based on the information in the *Irish Catholic Directory*.

Equality and Law Reform relinquished day-to-day responsibility for the management of prisons to the Irish Prison Service in 1999, there were 15 prisons and an average daily population of nearly 3000. In 2002 the average daily prison population (including the young offenders in St Patrick's Institution) stood at 3165, the highest number behind bars in the history of the State.

Table 4 summarizes some of the key characteristics of prisoners in Ireland in 1951 and 2002. Apart from the big increase in the numbers sentenced to imprisonment, the key changes are the growth in long sentences and the drop in older prisoners.

Reformatory Schools were established by statute in 1858 for young offenders over the age of 12. The first one opened in early 1859, and by 1870 ten had been certified

TABLE 4 Irish prisoners, past and present

	1951	2002
Committals under sentence (number)		
Male	1578	4735
Female	285	301
Total	1863	5036
Committals aged under 21 (per cent)		
Male	20.3	16.7
Female	10.2	10.0
Total	18.7	16.3
Committals aged over 50 (per cent)		
Male	10.6	6.6
Female	23.2	7.6
Total	12.5	6.6
Sentences of 2 years and over (per cent)		
Male	2.3	13.6
Female	0.0	5.6
Total	2.0	13.1

Source: O'Donnell et al. (2005: tables 3.3, 3.5 and 5.6).

throughout the country, five each for girls and boys. The end of year number of children contained in reformatory schools following conviction by the courts rose from 140 in 1859 to 740 ten years later. After 1870, only one new institution was certified and the number of reformatory schools declined, with many surrendering their certificates and reclassifying themselves as industrial schools. The number of young offenders in reformatories decreased almost continuously from the 1880s, and remained at less than 200 for most of the 20th century. The length of sentence varied depending on the nature of the offence and the age of the young person at the time of conviction, but, generally speaking, inmates could not be held beyond their 17th birthday. A commission of enquiry established in 1967 (Committee on Reformatory and Industrial School Systems [Kennedy Committee], 1970: 42) described the reformatory school for boys at Daingean, Co. Offaly as:

... housed in a 200 year old former military barracks ... on inspection, the toilets were dirty and insanitary. The showers were corroded through lack of use and the hot water system was so inadequate that the boys seldom if ever washed in hot water. When it was first inspected the boys were ill-dressed and dirty and there was a general air of neglect about the place.

The objective of *Industrial Schools* was to inculcate children with habits of 'industry, regularity, self-denial, self-reliance and self-control'. They were legislated for in 1868. Although the schools contained a small number of children who had committed minor acts of delinquency, the majority of placements were made due to parental poverty. In the public mind, there was little or no difference between industrial schools and reformatories, as in both cases the usual route to admission was *via* court. Indeed, their internal regimes were remarkably similar, as was their architecture. They were

foreboding in appearance and austere in operation. Many of these schools were described as orphanages, but this was not the case. Although a large number of orphanages did exist, they were entirely separate from the industrial schools and generally catered for middle-class children only.

Thus, although industrial schools were overtly operating a quasi child welfare function, the experiences of those who spent time within them suggest a punitive and regimented ethos (see Raftery and O'Sullivan (2001) for detailed case studies). Indeed, in the statistical reports published by the Department of Education, those committed to industrial schools by the courts were described as 'in detention'. As one individual who had been through the system put it in a debate about whether children raised in this kind of care were best described as 'residents' or 'inmates' (Pallas, 2005):

I was brought before the Dublin Children's Court at the age of three and (a) charged with being destitute (b) found guilty and (c) sentenced to be detained in industrial schools until my sixteenth birthday . . . I was 'released' from Artane 'on licence' six weeks prior to my sixteenth birthday. When I queried why 'on licence', I was told that, had I transgressed the law in any way during those six weeks I would have been returned to Artane. Inmates or residents? I think the records speak for themselves.

The first industrial school was certified in 1869 and by 1871 there were 51, growing to 70 by 1900 with a capacity for nearly 8000 children. From the early 1950s the number so detained began to decrease gradually. Children were placed in industrial schools from infancy to their early teens and were usually held until their 16th birthday. Industrial schools in Ireland generally contained more girls than boys. This contrasted with the situation in England and Wales, Scotland and Northern Ireland, where boys were in the majority. More significantly, by the mid-1920s there were more children contained within the industrial school system in the 26 counties of the Irish Free State than in all of Northern Ireland, Scotland, England and Wales combined. This is despite the fact that, as noted above, Ireland was largely an agrarian society with a very limited industrial base. Industrial schools varied in size. The largest, at Artane in Dublin, held 749 boys in 1951. Most of the schools for girls had fewer than 100 inmates.

Although funded and regulated by the State, all reformatory and industrial schools were managed by voluntary agencies, and after independence in 1922, with one or two exceptions, by Roman Catholic religious congregations. The publication of the Kennedy Committee's report gradually brought about the demise of the system and the Children Act 2001 formally abolished the terms Reformatory School and Industrial School. These institutions show a remarkable decrease in the number of children coercively confined from around 6000 in 1951 to under 700 in 2002 (between special schools for young offenders, special care units and other residential care for children whose welfare was deemed to be at risk).

Magdalen Homes were established in Ireland from the middle of the 18th century and acquired a particularly coercive reputation in the mid-20th century (Luddy, 2002; Finnegan, 2004). Managed and funded in the main by female Catholic religious congregations, with little or no regulation by the State, approximately 1000 women (variously described as 'inmates' or 'penitents') were held within them in the 1950s. Some found guilty of infanticide were committed by the Central Criminal Court (Smith, 2004); others were placed there as a condition of a Probation Order, but the majority were

placed by families as a result of sexual transgressions. From the early 1970s onwards an ever-dwindling number of women were sent to these institutions and by the mid-1990s, they had all closed. These 'asylums' were described by Luddy (2002: 736) as:

. . . places of confinement and the women who entered these dwellings were expected to spend at least enough time there to allow for their reformation. Life within these institutions was restricted and restrictive. Responsibility for their actions was placed firmly at the feet of the women who entered them. A strict regime was followed, which stripped the women of their former identity and attempted to mould a new one for them . . . their daily life was made up of prayer, labour, recreation and silence.

The debate around the Criminal Justice Bill, 1960 gives an insight into how these facilities were viewed at the time. Under Section 9 of the proposed legislation, which later came into force, the courts were allowed to utilize institutions outside of the formal criminal justice system, including convents, instead of prisons as places to remand young female offenders. The Archbishop of Dublin had agreed to make such premises (St. Mary Magdalen's Asylum in Sean MacDermott Street) available to the Minister for Justice. When this provision was debated in the Oireachtas [houses of parliament], Senator Connolly O'Brien, one of the few female politicians of the day, argued that:

If I were asked to advise girl delinquents, no matter what offences they were charged with, whether to go to prison on remand, or to go to St. Mary Magdalen's Asylum on remand, I would advise them wholeheartedly to choose prison, because I think having a record of having been in prison as a juvenile delinquent would not be so detrimental to the after life of the girl as to have it legally recorded that she was an inmate of St. Mary Magdalen's Asylum. (Seanad Debates, Vol. 52, Col. 2006, 13 July 1960)

County Homes were originally built as workhouses in the 1840s. They accommodated the aged and infirm, the chronically sick, children, unmarried mothers, mental defectives and epileptics. These residual catch-all institutions continued to operate until the late 1960s and were funded and managed by the State with some additional assistance from female religious congregations. They gradually evolved into nursing homes for the aged, and thus the aged population have been excluded from Tables 2 and 3. The nature of these institutions was well captured by the Inter-Departmental Committee on County Homes (1949: 8) when it remarked that:

Homes take the tone and appearance of the inmates. The ambulant men, dressed in suits of almost uniformly drab grey, are most in evidence. The majority look apathetic and listless. The women are poorly clothed but the sense of drab uniformity is less evident in their attire. They also seem to lack interest in their surroundings. They sit in the day room motionless and often silent waiting for the next meal or for bedtime. The unmarried mothers generally look rather slatternly; they, of course do a large part of the hard domestic work of the institution. The children are often bright and cheerful, in poignant contrast with their environment. The chronic sick need no special comment.

In respect of unmarried mothers in the county homes, the Committee noted (1949: 24) that:

The usual practice is to keep the mother and her child in the County Home for about two years at least. After that period the child is boarded out and the mother may be permitted to

leave the home. This, however, is not the invariable rule. The mother may be retained much longer and the child may be boarded out much earlier.

The Committee recommended (1949: 24) that the period of detention be reduced from two years to six months, but it seemed to take some time before this recommendation had any impact as, in 1956, the Department of Health noted that the two-year period of detention appeared still to be in force (Commission on Emigration and Other Population Problems 1948–54, 1956: 263–5). In addition to unmarried mothers, a number of other residual categories remained in the county homes, including those described as having ‘mental disorders’ and those labelled as ‘mentally defective’. From the 1930s onwards a number of religious congregations began to develop specialist institutions for those with such afflictions and this enabled many of them to be moved out of the county homes.

The development of more calibrated services for those labelled ‘mentally defective’ was paralleled by the development of institutional services for different categories of unmarried mothers, and a number of *Mother and Baby Homes* were established for those known as ‘first offenders’ (i.e. women who had given birth outside of marriage for the first time). With this development, the unmarried mothers who remained in the county homes were largely those who had given birth outside of marriage on more than one occasion. These institutions were all managed by female religious congregations. Although difficult to quantify, many women spent considerable periods of time in these homes after giving birth on the basis that they were ‘weak willed’ and required protection against a ‘second lapse’ (Luddy, 2001: 804). By 2002 custodial facilities for unmarried mothers had ceased to exist.

Public Psychiatric Hospitals (formerly district and auxiliary mental hospitals) held over 18,000 involuntary patients in 1951, a figure that had been rising since the foundation of the state and reached a peak in 1956. Such hospitals were established in the early 19th century and were entirely managed and funded by the State (Finnane, 1981; Robins, 1986). The Commission of Inquiry on Mental Illness (1966: 24–5) commented on the very high number of patients detained involuntarily in such hospitals in the following terms:

Statistics in respect of different countries may not be directly comparable, but, even if allowance is made for this, the number of in-patients in Ireland seems to be extremely high – *it appears to be the highest in the world*. It is hard to explain this. (Emphasis added)

The Commission further noted that while some of the public psychiatric hospitals were ‘new, or comparatively new . . . most were erected between 1820 and 1900 and are clearly a legacy of the days when the emphasis was on security measures and custodial care’ (p. 21). This point was reinforced by investigative journalist Michael Viney (1964: 23), who argued that national mental health policy ‘was one of hospitalization, of gathering all the mentally ill into custodial care’.

In 1958, the peak year for total psychiatric institutionalization (public and private provision, including voluntary patients), a classification of mental illness was provided by the Inspector of Mental Hospitals for the first time. According to this classification, just over half (50.6 per cent) of those in public institutions were diagnosed as having ‘schizophrenic disorders’, followed by ‘manic-depressive reaction’ (13.2 per cent) and ‘mental deficiency’ (10.6 per cent). In successive censuses ‘schizophrenia’ was

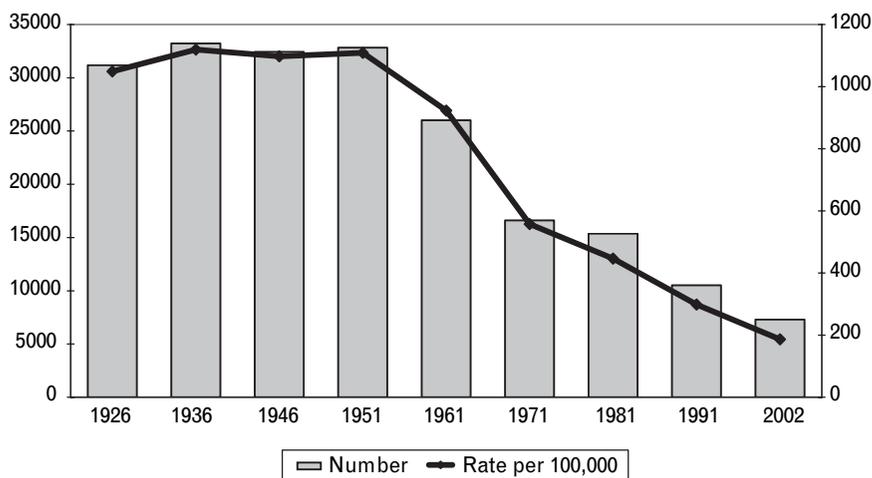
consistently the largest single diagnostic category accounting for nearly 40 per cent in 2001 (Walsh and Daly, 2004: 75). The vast majority of the inmates, until the early 1950s, were committed involuntarily to the hospitals as 'Persons of Unsound Mind (PUM)'. By the early 1960s, some 83 per cent of inmates were PUMs, with no gender difference evident. In terms of social class, agricultural workers were disproportionately represented with a rate of 3465 per 100,000 population in 1963 compared to 123 per 100,000 for employers and managers. Until 1991, agricultural workers remained at highest risk of psychiatric hospitalization. They were overtaken in this regard in 2001 by unskilled manual workers who had a rate of 314 per 100,000 compared to 253 for the agricultural workers (Walsh and Daly, 2004: 73).

Although the inpatient population of public psychiatric hospitals had been falling continuously for almost 50 years (Walsh and Daly, 2004), demonstrating that the use of institutional confinement bears as little relationship to rates of mental illness as imprisonment rates bear to levels of crime, the public psychiatric hospital population, *including voluntary patients*, as of 2002 was still higher than the prison population (3384 vs. 3165). This situation will not persist for much longer. According to the Inspector of Mental Hospitals (2003: 5), most patients in hospital at the end of 2002 (55 per cent) were long-stay, with more than one in three having been continuously hospitalized for over five years. Most of these long-stay patients were aged over 65 and it was estimated that, assuming no discharges, two-thirds would be dead by 2011.

Indeed it is likely that some of the patients enumerated in the 1951 census were still in hospital in 2002. During its visit to Ireland in 1998, the Committee for the Prevention of Torture and Inhuman or Degrading Treatment or Punishment (CPT) (1999: para. 116) highlighted the striking case of an 85-year-old man who, having been found unfit to plead at his trial in October 1937, was sent to the Central Mental Hospital and was still there when the CPT visited 61 years later. When it visited in 2002 the CPT inspected a number of psychiatric institutions that held mentally disabled persons. It noted that many had been in institutional care for several decades and gave as an example one institution where seven residents had spent over 50 years (CPT, 2003: para. 93). The reports of the CPT contain a great deal of valuable information about persons in detention and they would repay closer scrutiny by academics. It is noteworthy that those committed to psychiatric hospitals and special schools for young offenders (formerly reformatory and industrial schools) in 2002 were legally committed under the same legislation as those in 1951, respectively the Mental Treatment Act, 1945 and the Children Act, 1908.

TREND

Figure 2 shows the estimated numbers in coercive confinement for one census year in each decade between 1922 and 2002, and the rate per 100,000 population. Complete information is available for very few of the intervening years, so a complete time series cannot be constructed. The data deficit is particularly pronounced from the 1960s onwards. For example, between 1963 and 1977, no report from the Inspector of Mental Hospitals was published, despite a statutory obligation under the Mental Treatment Act, 1945 to do so. In 1980, a report covering the years 1977 to 1979 was published. No report was published again until 1988 and the reports have been published on an annual



•Figure 2 Coercive confinement, selected census years

basis ever since. The reason outlined by the Minister for Health for the considerable gap from the early 1960s to late 1970s was that 'there is not the same need for such reports now as there was when the mental hospitals were closed institutions [and] . . . the practice of compiling such reports had fallen into disuse' (Dáil Debates, Vol. 316, Col. 388–389, 23 October 1979). Similarly, for very few years is it possible to exclude voluntary committals from the total figures for industrial schools and psychiatric hospitals. This is why the bars for 1951 and 2002 are higher in Figure 2 than the numbers in Tables 2 and 3 would suggest. Despite these difficulties, the trend is clear, with real and substantial reductions in the total number coercively confined.

The fact that the rate of emigration was so high in the 1950s makes the number in coercive confinement even more startling. Many of those at risk of punitive sanctions (e.g. pregnant single women, young men with a propensity for violence) left the country. A key reason that large numbers of unmarried mothers migrated to England to have their children was 'their fear of a type of incarceration in Ireland's Mother and Baby Homes', although some were 'repatriated' to be confined (Garrett, 2000: 342). The impact of emigration is also to be seen on prison populations in England and Wales in particular. In 1960, nearly 3000 Irish born males were committed to prisons in England and Wales, compared with 1700 in Ireland (Kilcommins et al., 2004: 63). The emigrant boat, therefore, was a powerful supplementary mechanism of social control. A formal child migration scheme was never adopted in Ireland as in Great Britain, where large numbers of children were compulsorily sent to Canada and Australia, thus reducing the numbers in institutions (Eekelaar, 1994), although an informal system operated for a relatively small number of children (Milotte, 1997).

DISCUSSION

We have shown that little use was made of prisons for most of Ireland's 80-year history since independence (Figure 1). Broadening the analysis to incorporate a range of carceral

institutions highlights the fact that Ireland, rather than becoming more punitive (as measured by the number of individuals coercively confined), became considerably less so (Figure 2). The magnitude of this change is made clear by contrasting the years 1951 and 2002 (Tables 2 and 3). There is an interesting irony here: the high control societies identified by Garland are modern, but as Ireland became more modern it experienced a decline in control.

One might view this as evidence of a process of 'decarceration', the reduction of both prison and asylum populations due to a fiscal crisis faced by Western governments from the 1960s onwards. This argument, perhaps most closely associated with Scull (1977, 1983) drew on Marxist inspired accounts of the capitalist state to claim that (1983: 156):

State hospital populations stabilized and began to decline in the 1950s and, as welfare programmes markedly expanded during the 1960s and 1970s, the movement to empty the asylums accelerated. More devices were developed to divert potential inmates away from institutions, and existing ones were applied with greater urgency and effect. With the intensified effort to control soaring costs came the extension of deinstitutionalization to the criminal justice sector, at first in the form of tentative, small-scale, experimental programmes, but soon on a much wider scale. The growing fascination of criminal justice planners and policy makers with diversionary programmes coincided with a declining concern for imprisonment as a means of retribution and deterrence.

Scull later (1984) modified his account of decarceration, noting that while the asylum population continued to decline during the 1970s the prison population increased, contrary to his thesis. He remarked on the increasing supervision of offenders in community-based projects. This, he concluded, was evidence of new strategies of controlling offenders. Rather than seeing a reduction in social control, the State, as famously articulated by Cohen (1985), was expanding its net, capturing individuals who in many cases would previously have been ignored by the system. Thus, the development of 'community'-based sanctions did not bring about a decrease in the prison population, but enlarged and diversified the role of the State in managing and regulating deviants. Certainly in a number of countries this appears to be the case. For example, in 2004 the USA, although having the highest number of prisoners in the world (2,135,901) had nearly twice that number (4,151,125) on probation and a further 765,355 on parole (Glaze and Palla, 2005: 1). In England and Wales, 138,386 offenders were undergoing probation service supervision in the community in 2002 (Home Office, 2004: 43) compared to 70,860 in custody (Counsell, 2003). In Germany, 81,866 persons were imprisoned at the end of 2003, but 161,211 persons were serving probation orders (Jehle, 2005).

However, in Ireland, while the Probation and Welfare Service grew substantially from the early 1970s it remains the case that more offenders are committed to prison each year than are given community sanctions (Healy and O'Donnell, 2005; O'Donnell, 2004b). In the Republic of Ireland, the decline of the asylum population and the growth of the prison population were not accompanied, in any meaningful manner, by a growth in community-based options. Significantly, this occurred during a period when the rate of emigration was slowing down and then became transformed into a situation of net-inward migration.

Nor can the decline in the usage of mother and baby homes, Magdalen asylums or industrial schools be attributed to either a fiscal crisis or a shift in regulatory tactics. In most cases the financial contribution of the State to the running of these institutions was relatively miserly. If anything, in the case of lone mothers, following the report of the Commission on the Status of Women (1972), additional expenditure was incurred following the introduction of an Unmarried Mother's Allowance in 1973. In the case of industrial schools, despite attempts by their managers to maintain relatively high numbers, the supply of cases dwindled, particularly because of the growing reluctance on the part of the judiciary to place children in such institutions. The most plausible explanation for the decline in the population coercively confined in Ireland is the drying up of the supply of potential entrants rather their dispersal to other sites of regulation.

Garland (2001: vii) threw down the gauntlet to other scholars to respond to his critique with 'more focused case studies that add empirical specificity and local detail'. We have responded to this challenge by probing in detail the changing use of coercive confinement in a country that usually escapes the criminological gaze. We broadly argue that 1950s Ireland was an era of low formal crime, but high perceived-deviance in the sense that contravention of social norms was regularly met with an institutional response. It was not uncommon for these individuals to internalize the public view of their 'wrong-doing' and their sinfulness (somewhat akin to a process of 'secondary deviance') and to accept the stigma and their need to repent. Together with families' connivance and rejection, this was enough to keep them out of sight even when the legal basis for their continued detention was ambiguous or non-existent. If the doors had been left open, it is likely that many of them would have stayed put. At the beginning of the 21st century the paramountcy of prison in Ireland – which in the 1950s was a minor part of the apparatus of control – seemed beyond challenge. Its growth stood in marked contrast to the decline in other forms of coercive confinement. It could be argued that decarceration is the central story from which imprisonment has recently been an exception.

The trend in Ireland contrasts, for example, with what happened in the USA, where in the 1950s the mental hospital population was more than double the prison population, but by the late 1970s the situation had reversed (Liska, 1997: 42). Another factor to be borne in mind in the Irish case is that the increase in imprisonment at the end of the 20th century, as far as can be ascertained from the available data, only partly resulted from more people being sent to prison. It seems that it is a consequence of a build-up of long-sentence prisoners, an expansion of the remand population, a growing number of deportees and a reduction in the use of early release to ease overcrowding (O'Donnell, 2004b). In other words, it is difficult to map the rising number of prisoners onto a measure of increasing sanction severity, let alone any change in the crime rate.

Nor is it the case that prison absorbs all of those who would formerly have been catered for in other types of institution. For example single mothers have not been placed in prison custody since the closure of the network of institutions that formerly dealt with them. Apart from anything else the vast decrease in numbers makes this infeasible. At least where women and children are concerned, therefore, Ireland is not a case study in transcarceration, whereby for 'delinquents, deviants and dependants, this means that their careers are likely to be characterised by institutional mobility, as they are pushed from one section of the help-control complex to another' (Lowman et al., 1987: 9). Rather there has been a real, and enduring, shift in the extent to which

institutional confinement is seen as an acceptable response to poverty or sexual transgression. (It is difficult to draw a clear line between poverty and crime. For example in 2002 criminal proceedings were brought in 505 cases of begging under the Vagrancy Act, 1847 (compared with 358 in 1951). There is no doubt that to a large extent the destitute filled the beds in the institutions described above.)

It would seem that Ireland was a much less tolerant place in 1951 than in 2002, especially for women and children who contravened social norms. Perhaps, in a Durkheimian sense, when the criminal law was rarely broken a harsh response to other forms of social misconduct served as an important means of norm enforcement. More generally, the shifts shown in Tables 2 and 3 illustrate a transformation in what was considered to be deviance. Referring back to the comments in the introduction, at a time when Ireland was not obsessed with crime (Adler, 1983) it was clearly preoccupied with rule breakers of another kind. While it may have been a 'policeman's paradise' (Brady, 1974: 240) the boundaries of acceptable conduct were vigorously patrolled by family members in the context of economic marginality, who drew on a wide range of available institutions to incarcerate their kin. As McCullagh (1991: 208–9) argued:

It is certainly part of Irish 'folklore' that the use of mental hospitals to dispose of 'surplus' children was an important resource in the preservation of the inheritance system in rural Ireland. A son, inheriting from the father and bringing a wife into a farm which could only offer a subsistence income, may not have been pleased with the presence of his unmarried and ageing brothers and sisters in the household. Commitment to a mental hospital may have seemed an attractive solution in these circumstances.

While the formal institutions of the criminal justice system (with the exception of reformatory schools), the poor law institutions and the public psychiatric hospitals were both funded and managed by the State, the remaining institutions were managed primarily by congregations and orders of the Roman Catholic Church. Over time, there was a decline in the role of non-state actors in the apparatus of confinement with control being taken over by state institutions and personnel. Again, in this case rather than seeing the boundaries between the public and private provision of crime control (Garland, 2001: 17–18) becoming blurred in late modernity, the State now has virtually exclusive control over the management and funding of institutions of coercive confinement.

While the expressed aim was to reform or to treat rather than to punish, the regime in some of the industrial or reformatory schools, district mental hospitals, county homes and Magdalen homes in the middle of the 20th century was more austere than many prisons of the 21st century. Not only were more people confined in 1951, they may have suffered more than prisoners in 2002. In addition to a focus on discipline and labour, the religious ethos of the day meant that the need to atone, or simply toe the line, weighed heavily. The experience was deliberately stigmatizing. While some form of reintegration at a spiritual level may have been possible, the removal from society was total. The reintroduction of chain gangs and other stigmatizing punishments in the USA in recent years have aroused interest because they are explicitly designed to shame. This was the quotidian experience for Irish deviants in the 1950s. To further reduce their life chances no route was charted back into the mainstream.

This article has highlighted the limitations of utilizing prison populations as the exclusive measure of a society's level of punitiveness. In the case of Ireland, by thinking

instead of 'coercive confinement', the carceral landscape looks fundamentally different and suggests a waning in the culture of control.

Magdalen homes existed across Europe and North America (e.g. Mahood (1990) on Scotland; Ruggles (1983) on the USA; Barton (2005) on England and Wales). So too did mother and baby homes (e.g. Spensky (1992) on England and Wales). Reformatory and industrial schools existed in most European countries and in North America (e.g. Brenzel, 1983; Dekker, 1990; Hoy, 1997) and an extensive literature on psychiatric hospitalization exists (e.g. Porter and Wright, 2003). Given the international reach of these various institutions, the analytical framework outlined above might provide a useful heuristic device for scholars in other jurisdictions.

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