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“Comforts in Her Calamity”: Shopping and Consumption in the Late Eighteenth-Century Private Madhouse

Anna Jamieson

In a four-month period between June and October 1794, Dorothea Fellowes, a middle-aged, upper-class woman, purchased stockings, gloves, handkerchiefs, aprons, and ribbons, as well as pieces of silk, gauze, and lace. A summary of her accounts from the previous year included regular payments to a linen draper, a shoemaker, and a milliner. She also purchased other non-essential goods such as wine, seltzer water, oranges, figs, and French plums; simultaneously, she paid for the maintenance and upkeep of her property on Twickenham Common, including repairs and carpentry work, poor relief, and window tax. Dorothea might sound like a typical upper-class woman living in England in the latter decades of the eighteenth century, but she was in fact “a bird in a Cage,” as her sister lamented in a letter in 1792: incarcerated in Fisher House in Islington, a “private madhouse” on the fringes of London. Throughout her confinement, she kept up a lively spending habit, ordering items and engaging in proxy shopping from her unconventional place of residence.

Private madhouses, as they were referred to at the time, were one of three types of institutional provision for the mentally ill in the late eighteenth and early nineteenth centuries. Voluntary institutions such as Bethlem Hospital or St Luke’s...
Hospital in London, funded by sponsors, benefactors, and governors, were one option. Another were the state-funded county asylums that sprung up following the County Asylums Act of 1808. Unlike their voluntary and later state-funded counterparts, private madhouses catered to a predominantly middle- and upper-class clientele due to the fees involved. As Charlotte Mackenzie has stated, madhouse fees "represented a relatively expensive option, particularly for long-term care."

To date, scholarship on the private madhouse has proved relatively limited. Ida Macalpine and Richard Hunter devoted a chapter to the private madhouse trade in *George III and the Mad-Business* (1969). Until recently, William Parry-Jones's *The Trade in Lunacy*, published in 1972 and providing detailed analysis of the financial, legal, and administrative systems in place, remained the only comprehensive text dedicated to the subject. Critically, and as its title suggests, Parry-Jones's book situated the madhouse system within a wider context of trade, part of a national commercialism that burgeoned in the late eighteenth century, as Neil McKendrick and others have claimed. Building on Parry-Jones's work, Roy Porter's *Mind-Forg'd Manacles* (1987) gave greater nuance to the spectrum of experiences that private madhouses offered their patients, drawing important connections between madhouses and growing patterns of consumption in eighteenth-century England.

Over the past thirty years, several institutional specific studies have been published, including Charlotte Newman's work on Brooke House in Hackney and Charlotte Mackenzie's on Ticehurst Private Asylum in Sussex. Leonard Smith's recently published *Private Madhouses in England 1640–1815: Commercialised Care for the Insane* (2020), which reevaluates the development of private madhouse provision during this period is a welcome addition to this scholarship. Key to Smith's text is the attitudes and practices of male and female proprietors, and the system's wider preoccupation with issues of rank and social class. His work supports the scholarly conceptualization of the private madhouse as a commodified space, galvanized by the entrepreneurial nature of a number of England's leading medical men.

A combination of this entrepreneurial spirit and increasing need for the provisioning of England's mentally ill middle and upper classes meant that, by 1807, there were twenty-eight registered provincial private madhouses in England, mostly located in the South. By 1819, forty private madhouses had been licensed. As Newman reports, "the aspiring genteel classes, primarily including the clergy, landowners and professionals in an era of increasing consumerism, fueled the development of private madhouses." Prior to 1774 anyone could open a private madhouse, but—responding to growing concerns—the Act for Regulating Madhouses of that year ensured that madhouses needed to be licensed and inspected by five Commissioners of Lunacy in and around London, and Justices of the Peace in the provinces. The Act was also intended to safeguard the sane from illegal confinement, though its successes were mixed. From 1774 onwards, family members needed to seek professional confirmation of an individual's insanity prior to incarceration, obtaining a medical certificate from a physician, surgeon, or apothecary.

While the Act for Regulating Madhouses provided new regulations, it did not regulate madhouse conditions or fees. With madhouses often spilling into the households of their proprietors, these sites were typically ad-hoc by nature and haphazardly run. Fees varied widely from madhouse to madhouse, depending
on the nature of the accommodation, medical care, and additional facilities available. For a private madhouse to command high fees and attract a certain type of patient, it had to uphold high standards of comfort and care. Access to outdoor space, pleasant grounds, genteel furnishings, and an esteemed physician were all important factors in building a madhouse’s reputation, which in turn impacted how much it was able to charge.

These factors would have been influential for those deciding where to send relatives deemed insane. Reading madhouse prospectuses or advertisements in periodicals, discussing recommendations with physicians, or relying on word of mouth from friends, potential clients engaged in consumer behavior, “shopping” around for the right option for their budget and needs. As Roy Porter argued, the commercial character of the private madhouse meant that a patient could “exercise considerable sway in the medical market space” simply by “possessing choice and the power of the purse.” At the same time, residents had the opportunity to engage in consumer-driven activity once incarcerated, giving them the opportunity to make choices, spend money, and connect with the outside world. Patients commonly assumed weak and powerless might become consuming agents, imbued with a sense of financial power and authority. With the private madhouse typically catering to a middling to upper-class clientele, its patients often had money to spend, whether out of boredom, habit, and/or necessity. This could take the form of expanding one’s rooms to a series of apartments, choosing more expensive medicines or paying for additional care from a nurse. It could also result in the purchasing of new goods from within the madhouse’s walls.

This article analyzes archival material that demonstrates the spending habits of Dorothea Fellowes during her incarceration at Fisher House between 1791 and 1817. Letters, receipts, and bills reveal a wealth of information about Dorothea’s financial, material, and emotional worlds. With Fisher House not yet the subject of sustained historical research, this discussion extends our knowledge of a reputable London-based madhouse. At the same time, it highlights the consumer processes available for those elite or upper-class individuals perusing the madhouse “trade,” searching for the right option for a family member or loved one. Its focus on female consumerism within the late eighteenth-century madhouse sets it apart from other work within the history of psychiatry, reflecting the ways that consumption, women, and mental illness coalesced within this unique space. Engaging with debates about eighteenth-century material culture and emotions, as well as existing scholarship within the medical humanities, it asks: how do Dorothea’s experiences complicate or subvert widely held beliefs about the private madhouse and the women’s experience within? What was she buying and what meaning, if any, can we attribute to the practices of shopping and the ownership, display, and use of these resulting purchases within such a space of confinement?

The article is divided into four sections. The first considers the negative stereotypes that pervaded public understanding of private madhouses in general, alongside details about Fisher House in particular. The second looks at the form that Dorothea’s madness took, the road towards her incarceration, and the options available to the Fellowes family as they “shopped around” for the right madhouse for their sister. The third section examines Dorothea’s spending through the lens of eighteenth-century shopping. The fourth analyzes the identity-defining opportunities
that shopping from the private madhouse enabled. In opposition to contemporary sources explored in this article that frame madhouses as terrifying spaces of coercion, I argue that Dorothea’s spending and the continuation of habits of dress reframe the madhouse as a permeable space of consumption and commodity, in which one’s former habits and behavior might continue. Crucially, I argue that Dorothea, who believed herself wrongfully confined, may have maintained a sense of identity, or even agency, through the buying, wearing, and collecting of new items.

THE PRIVATE MADHOUSE AND THE PUBLIC IMAGINATION

As Newman has noted, “accused of being driven by commercialism and greed, private madhouses often suffered an appalling reputation.”21 Throughout the eighteenth century, private madhouses had come under fire from cultural commentators and concerned reformers, resulting in the 1774 Act for Regulating Madhouses. Complaints typically fell into two broad categories: shocking conditions and wrongful confinement. Published in 1825, John Mitford’s visceral text on the London network of notorious private institutions such as Whitmore House in Hoxton and Bethnal Green’s White House described these madhouses as dungeon-like hellholes, where indifferent staff left naked, starving patients chained for months on end.22 During an era which prized the freedom of the human body through legislation such as the Habeas Corpus Act (1816), the issue of wrongful confinement also permeated depictions of the private madhouse.23 To be sure, grievances surrounding public and private institutions were discussed in tandem. In 1815, the published findings of a Select Committee investigation on “the state of madhouses” reinforced the more troubling aspects of life within both types of institution. Likewise, hard-hitting exposés by incarcerated men and women such as Urbane Metcalf, John Perceval, and the lesser known case of Sarah Newell, shared the horrific realities of perceived wrongful imprisonment within both privately- and publicly-run spaces.24 The previously unregulated nature of the private madhouse, however, in addition to its status as a secretive and singular site, meant that its reputation often suffered. As Jonathan Andrews and Andrew Scull have argued, the private madhouse’s innately closeted nature inevitably invited a host of gothic and sensational fantasies of abuses taking place behind its walls.25

Worrying accounts were bolstered by cultural representations. Across Gothic literature, the dramatic possibilities of the Hanoverian madhouse made it a perfectly-situated setting of terror and cruelty, an ideal backdrop for tales of evil husbands, terrifying doctors, and desperate women.26 While fictional characters shared the terrifying injustices of the cruel captivity of both sexes, it was the trope of the male relative and doctor conspiring to incarcerate a helpless woman that loomed largest in the popular imagination.27 Going to four editions between its first publication in 1726 and 1790, Eliza Haywood’s novel, The Distress’d Orphan, or Love in a Madhouse, was a vivid tale of female confinement, with its innocent heroine Annilia wrongfully incarcerated by her uncle after inheriting a large fortune and refusing to marry her cousin.28 Published posthumously, Mary Wollstonecraft’s The Wrongs of Woman; or, Maria (1798) was also driven by the theme of female entrapment. With its titular character incarcerated by an abusive husband, the novella detailed the “crushing hand of power,” the “exercise of injustice,” and the
“systemized oppression” of the madhouse system.29 By the 1850s, Wilkie Collins’s *The Woman in White* told the story of “poor little Anne,” a mysterious figure who was cruelly confined in a private madhouse by the evil Percival Glade.10 Part of a wider “female Gothic genre” that perpetuated the physical containment of their heroines within “mysteriously intricate or uncomfortably stifling” spaces, images of female enclosure, entrapment, and escape proved all-pervasive during these years.31 Fun or titillating to read for some, these representations undoubtedly fueled the negative public image of the dark, dank, and coercive private madhouse.

In reality, private madhouses were often far more comfortable and accommodating spaces than contemporary cultural sources allowed. True, some scholars have admitted that various establishments exceeded their most terrifying cultural representations.32 But some madhouses provided their residents with humane care, pleasant lodgings, and even close relationships between staff and patients. Historians now acknowledge that a number of provincial madhouses—including Laverstock House near Salisbury, Ticehurst Asylum in Sussex, and Brislington House near Bristol—were sites of therapeutic innovation and experimentation.33 Inspired by the work of Samuel Tuke at The Retreat at York, which opened in 1796 and promoted a mode of care known as “moral management,” many of these establishments prioritized home-like spaces, mild and gentle methods of care, and therapeutic daily routines geared towards their patient’s speedy recovery.34

Described by one of its residents as a “select establishment,” Fisher House was one of London’s more reputable and genteel private facilities.35 As such, it was able to charge some of the highest fees in the country. By the end of the eighteenth century, patients typically paid around £200 per year for accommodation, medical care and board: in modern terms, this equates to £15,352.36 This fee would vary from patient to patient, depending on medical care, the type of rooms inhabited and any additional medicines required. When the writer Mary Lamb (1764–1847) was sent to Fisher House following her infamous act of matricide in 1796, it seems that her brother, Charles Lamb, was able to negotiate a comparatively modest fee. Charles does not provide concrete figures for how much Mary’s accommodation and care cost, but a letter sent from him to William Coleridge in October 1796 boasts that Mary was “likely to be as comfortably situated in all respects as those who pay twice or thrice the sum.”37 His comment suggests that cheaper accommodation was available at Fisher House, at the same time that Dorothea was a resident. Towards the end of her time in the “Islington Mad House,” and once her disbursements, superior lodgings, and additional health care fees had been added to her annual bill, Dorothea Fellowes was paying over £400 per year—around double the average annual fee.

Fisher House’s physician was Dr Samuel Foart Simmons (1750–1813). Simmons was also physician at St Luke’s Hospital for Lunaticks, the largest subscription asylum in the country, known for comparatively humane methods of care and treatment. An entrepreneurial figure who later treated one of George III’s bouts of insanity in 1803, Simmons was one of London’s leading insanity specialists, with a good reputation as well as a sizable fortune.38 This combination of wealth and prestige meant that he and Fisher House were well placed to care for the genteel classes, but this reputation was dependent on a carefully maintained image of respectability, for both madhouse and physician.39 Simmons would have
been keen to avoid stereotypes of the lascivious and greedy quack, in line with criticisms that physicians who dabbled in private care for the mentally ill used the “trade” purely for financial advantage. In an attempt to mitigate any accusations of this type, he used another individual’s name on the madhouse’s license—a common practice across the trade.40

Fisher House was situated on what is now Essex Road, Islington, a leafy, green area away from the city’s main hubbub. Built at the beginning of the seventeenth century, the building had been an academy for teaching “young ladies Latin and Greek” before becoming a madhouse in approximately 1780.41 Following its closure in 1845, the Illustrated London News featured the house in its nostalgic “Nooks and Corners of Old England” segment. Portraying the house as a “spacious mansion” with “beautifully laid out” lawns, shrubbery, and flower gardens, an accompanying image revealed an unlatched gate, tall poplar trees, and large windows, with open curtains and visible interiors.42 The positive aesthetic attributes of Fisher House illustrated here, coupled with Simmons’s reputation, may well have influenced the decision of the Fellowes family to send Dorothea to this particular establishment. As Dorothea’s sister Urania stated in the year following her incarceration: “I feel great inclination towards her having Comforts in her Calamity, as her income will allow to have them in decent Bounds.”43 These comforts, discussed below, included spacious rooms and access to the outdoors. They also included the continuance of certain elements of her former lifestyle and habits through the purchasing and possessing of familiar objects, especially luxuries.

INTO THE MADHOUSE: THE “UNFORTUNATE DOROTHEA FELLOWES”

One of five children, Dorothea was the daughter of Coulson Fellowes (1699–1769), MP and later sheriff of Devon. Coulson had owned property in Hampstead and St James’s in London, Huntingdon in Cambridgeshire, and the Eggesford estate in Devon. In 1763, Dorothea’s older sister Urania (1743–1812) had married John Wallop, 2nd Earl of Portsmouth. The couple resided at the majestic Hurstbourne Park, Hampshire which, according to Elizabeth Foyster, “opened the door to the exclusive world of the aristocracy.”44 The Fellowes family were no strangers to drama, and some of their more spectacular struggles are vividly told in Foyster’s The Trials of the King of Hampshire. The book sheds light on the tale of Dorothea’s nephew, the 3rd Earl of Portsmouth, John Charles Wallop (1767–1853), the subject of a Commission of Lunacy to establish whether he was of “unsound mind.” Foyster dedicates just a few pages to the fate of Dorothea in this lively domestic drama, a tale full of sexual depravity and violent behavior.45

Unlike the rapidly executed incarceration of innocent heroines in contemporary Gothic novels, the confinement of Dorothea did not happen overnight. Family correspondence reveals a laborious process, as her family agonized over what to do about their sister’s “unfortunate situation.” Dorothea’s erratic moods began in the mid 1780s. Over a four-year period her health worsened, and her immediate circle—consisting of her two older brothers, Henry and William, Urania and her cousin, Robert—debated how to care for her. A document from 1791, titled “Reasons for Confinement,” details how Dorothea had become increasingly
frightened and paranoid about those around her, making public scenes and “giving & taking offence any where, when the provocation seemed totally imaginary, in the street or in any public places.”46 No longer trusted to live alone or go out without a chaperone, “no servant who could be depended upon would live with her.” Without a servant, she failed to take her medicine or conform “to any Regimen prescribed.” By August 1791, and evidently at his wit’s end, Henry wrote to William, explaining how Dorothea’s mind was “certainly very much distemper’d & she is totally unfit to take care of herself.” Becoming insistent, Henry stated that they must find a “place of security,” where she could be housed safely.47

A few weeks later, Henry wrote another letter describing an upcoming visit from Dr. Robert Darling Willis (1760–1821). In exchange for a small fee, Willis had been summoned to examine Dorothea.48 Willis believed her to be “perfectly rational on all common topics,” merely taking up “some peculiar ideas” which made her behave “much unlike herself.”49 He concluded that “there is a probability of the symptoms wearing off by time alone,” recommending that Dorothea should “visit her relations or friends” to provide distraction from her negative thoughts.50 Not satisfied with this diagnosis, the family quickly sought a second opinion and began “simply shopping around for another doctor.”51 Samuel Simmons was soon consulted. After meeting the patient on 11 September 1791, Simmons immediately certified that “Mrs. Dorothea Fellowes of Fleet Street, spinster, is in my opinion insane.”52 Dorothea spent the remainder of her life, until her death in 1817, confined at Fisher House.

Was Dorothea really insane? This article resists concrete diagnosis of Dorothea’s mental health, in line with ongoing discussion within the medical humanities that outlines the pitfalls of attempting to determine the illness of an historical actor.53 Rather than searching for a monolithic diagnosis for the historical patient, and guided by suggestions put forward by Axel Karenberg, it instead builds a “window of opportunity” through which to better understand medicalized perceptions of the past via careful use of primary sources and historic context.54 Given the muddled and sometimes contradictory behavior of Dorothea’s family, it seems fair to assume that their motivations towards her incarceration were mixed. The speedy search for a second opinion suggests that embarrassment, shame, and impatience were decisive factors. Adding a more sinister air to proceedings, so too does the transactional quality of ascertaining Dorothea’s diagnosis, as money was exchanged to ensure she was locked away. A list made by William in the months following Dorothea’s incarceration, discussing the payment of taxes, dismissal of servants, and the packing of Dorothea’s possessions, includes the instruction: “say that that Mrs D. Fellowes is gone into the country to visit.”55 These examples prove suspicious, suggesting some sort of family cover-up and the suppression of Dorothea’s voice. This sense is reinforced further by the vague pseudonyms and euphemistic labelling used to describe Dorothea in the family’s letters, in which she is often dubbed “the patient” or “that Certain person.”56

Yet other evidence suggests the Fellowes’s genuine worry, concern, and love for Dorothea. Ample correspondence between the foursome evinces an ongoing moral struggle, as they made copious lists of tasks to complete and questions to ask. Urania regularly expressed concern over her sister’s comfort following Dorothea’s move into the madhouse, writing to Robert in June 1792, “I confess,
I do wish [for Dorothea] to have two Rooms. In the first Place, she has been used to more than one, & it must be shocking and uncomfortable to . . . to be so like a bird in a Cage!” Doing her homework, Urania looked into sending Dorothea to the more spacious West Malling Asylum in Kent, run by Dr William Perfect (1737–1809). Accommodating the mentally ill in his home since the 1760s, Perfect had published *Methods of Cure, in some Particular Cases of Insanity* in 1778. Urania’s letter reveals she had read this text, finding it “favorable” and adding it to a list of reasons why West Malling might be a good move for Dorothea, along with its access to countryside and roomier apartments. The letter ends with Urania’s insistence that Dorothea should have access to “more Range of Garden ground,” so that she “has not 50 steps to go, from the Garden door.”

Dorothea never did move to another madhouse, and it is not clear whether additional rooms were ever made available for her in Islington. Regardless, Urania’s letters demonstrate the different issues that preoccupied relatives of the incarcerated during this period, evincing anxieties surrounding comfort, care, and living quarters. Among other things, they serve as a counterpoint to prevalent notions of cruel and heartless family members, so earnestly peddled in contemporary texts. Though natural to view the decisions of Dorothea’s siblings as carefully plotted machinations designed to ensure the secret incarceration of their troublesome sister—with the efficacious move to find a new doctor functioning akin to a speedy consumer transaction—the spectrum of emotion evident in the family correspondence, from shame and guilt to concern and sadness, suggests a far less straightforward situation.

Regardless of the motives of her family, Dorothea believed herself to be falsely confined, claiming in a letter from September 1799 that her case serves as “the greatest act of violence and oppression that was ever offer’d to an innocent woman. If there has been greater injustice, it has not come within my knowledge.” Complicating arguments surrounding her “innocence,” however, her writings provide many instances of exaggeration, elevated false claims, and delusional thinking. In another letter, she discusses imaginary plans to be “let out, in two or three days, if the beatings did not come.” She continues, “Dr Simmons will set me at liberty this evening, or, tomorrow morning, by ten o’clock” and “Miss Macdonall, I will pay five hundred pounds, as soon as I can get the money from the Bank.” These outbursts were clearly made during bouts of delusion: there were no plans to release her from the madhouse, and the proposed payment was a significant sum and a grandiose claim. Yet, despite the irrationality of their author at the time, they serve to illustrate a number of common fears and preoccupations of the female madhouse patient surrounding freedom and violence. Indeed, it seems that Dorothea endured spells of insanity rather than continuously suffering from mental illness. This view is supported by the contemporary diagnosis of her doctors, one of whom believed her delusions to be fleeting, the other who deemed them serious enough to incarcerate her for life. This more fluid diagnosis endows Dorothea with a certain amount of psychic awareness, suggesting that she was able to build positive psychological associations with certain consumer rituals and the objects that populated her lodgings at Fisher House.

Shopping around for a more favorable madhouse for her sister, Urania’s letters also reveal a competitive madhouse market, as medical men promoted their ad-hoc institutions to potential customers and clients. Her selection was clearly
influenced by a myriad of factors: personal preferences surrounding appearance, prestige, and exclusivity; cost and value; the reputation of both doctor and institution; and concern over what was best for both her sister and the family as a whole. Painting a picture of how the madhouse might function as a consumer-driven site, Urania’s letters expose the interplay of consumer choices available for the family of the eighteenth-century madhouse patient when selecting a madhouse—particularly for an upper-class family with spending power who had recently moved into aristocratic circles. The final two sections of this article move onto another key area of consumer activity in which the wealthy madhouse patient was able to engage: shopping. This spending, and the possession of objects, subverts stereotypes that characterize the madwoman as a helpless victim of male constraint. Instead, Dorothea’s ability to engage in such consumer behavior suggests a certain, albeit limited, financial power and agency, linked to her former life as mistress of her own home and to her current existence as an incarcerated, upper-class patient. Dorothea’s commercial activity was clearly linked to self-fashioning and the maintenance of her private and public identity. Studying Dorothea’s material life also gives a greater sense of her emotional world, yielding further insights into how the possession of goods allowed various types of agency, self-expression, and psychological comfort.

**MINDLESS MATERIALISM?**

With a sizable “Fortune” of her own, as described to Robert Fellowes in July 1779, Dorothea was able to bear the costs of her own confinement. Having inherited £10,000 from her father in 1769, she also received a steady income of around £75 per year from the rental of her four-bedroom house on Twickenham Common. Spending substantially throughout her incarceration, racking up large bills from increased medicines, care from a nurse, and perhaps better rooms, Dorothea’s fees rose over time. By 1800, her yearly spend of around £200 in 1791 had increased by another hundred pounds. Over the next few years, the costs of her annual care, accommodation and maintenance continued to grow. By June 1805, it was £327,12s; the larger total bill that year, which included medicine, additional goods, and gratuities, came to £393,18s. Four years later, her annual bill had risen by another £13, amounting to a substantial £406,13s. No small sum, this amount equals nearly £19,000 in modern currency.

Dorothea’s letters may paint a picture of abusive staff and oppressive violence, but her spending at Fisher House suggests otherwise. As well as necessary expenditures, Dorothea spent considerably on additional goods, listed as “disbursements” in her receipts. Alongside consumable items that supplemented meals provided by the madhouse, luxury objects associated with physical appearance, self-fashioning, and display were routinely purchased. As noted in the beginning of this article, Dorothea frequently ordered gloves and stockings, lace and ribbons, and made payments to milliners, shoemakers, and dressmakers. Handkerchiefs, capes, and aprons were also ordered, and alterations frequently undertaken.

Described by Claire Walsh as a “complex of procedures,” shopping in the eighteenth century was a very different business than today. During this period, “the person who selected the goods, the person who went to the shop to collect them, the person who met the shopkeeper to settle the account, and the person
who handed over the cash in settlement were often different people.” Among Dorothea’s class, it was standard for shopping to be done remotely and by proxy, with family, friends, or staff making purchases on one’s behalf. Archival material sheds light on how Dorothea’s shopping and spending worked, revealing a complex pathway that actually conformed with standard ways to shop during these years. It seems that Dorothea chose additional items not included in her annual board, perhaps placing some orders directly with tradespeople or with the help of Mrs. Holmes, the matron. Roughly every six months, Dr Simmons would forward a bill to William Fellowes, which included a breakdown of costs incurred for medical care, medicines, “gratuities to the nurse”, and Dorothea’s “disbursements.” William then contacted his bank, asking them to pay Dr. Simmons, and Dorothea’s bank, asking them to reimburse him for those payments.

Looking at some of Dorothea’s bills more closely, it is fair to surmise that her spending bordered on the excessive, based on the amount of items she was buying and the rate at which she was buying them. A typical disbursement bill, from September 1799 to September 1800 and totalling £22,11s, provides a good example. This bill included goods linked to physical comfort and gratification, such as fruit and wine (£8,0s,6d), as well as material items linked to her appearance. Sums were owed to the haberdasher (£1,13s), mantua maker (£16,4s), milliner (£16,4s), and shoemaker (£1,8s). By the end of the year, Dorothea had racked up another bill; alongside around £5 on fruit and £11 on wine, she had spent £2,18s on hosiery, £3,13s at the haberdasher, 16 shillings and 6 pence at the mantua maker, £6,14s on the milliner, and £2,3s on the shoemaker. By the end of the year, Dorothea had racked up another bill; alongside around £5 on fruit and £11 on wine, she had spent £2,18s on hosiery, £3,13s at the haberdasher, 16 shillings and 6 pence at the mantua maker, £6,14s on the milliner, and £2,3s on the shoemaker. Having already spent £22 a few months prior, Dorothea then spent an additional £26 on luxury items—making her total over sixteen months the equivalent of over £2000 in modern currency. A few months later, on 11 March 1801, more money was spent at the milliner, haberdasher, and shoemaker, alongside an order for oranges, figs, tape, pins, and wine. Only a small segment of Dorothea’s outgoings during her twenty-six-year incarceration, these examples reveal her spending habits in fascinating detail; habits which carried on, year on year, until her death in 1817.

At first glance, this shopping might seem to have propelled Dorothea into the role of a greedy, compulsive shopper—an image potentially reinforced by the delirious, hyperbolic tone of some of her letters. Indeed, stereotypes of the voracious and impulsive female shopper have proved persistent across both cultural and scholarly sources. Elizabeth Kowaleski-Wallace stresses how late eighteenth-century sources often presented female consumption as a “kind of depletion that “eats up” everything in its path.” Walsh too emphasizes how eighteenth-century commentators viewed unrestrained female spending as dangerous, potentially resulting in personal, familial, and even national ruin.

The same can be said of past scholarship. As John Styles and Amanda Vickery retort, a range of scholarship has “had it in for the female consumer,” who was typically derided for her desire to “shop till she dropped.” Various scholars subscribed to stereotypes that present the female shopper as a frenzied individual; a flashy, extravagant, and avaricious figure caught up in an insatiable “orgy of spending.” The ways in which both contemporaries and earlier scholars described this type of spending—as mindless, frenzied and manic—invite easy parallels between
this behavior and the behavior of the mentally ill. Dorothea’s spending, therefore, can be conceptualised as part of this over-zealous feminised ritual.

Of course, there was more at play in female shopping, by proxy or otherwise, than unrestrained spending, and arguments that present Dorothea’s spending as excessive run the risk of subscribing to stereotypes that align her conduct with mindless materialism. Relying less on stereotype and more on material evidence and personal accounts, recent analysis of the history of shopping favors a more nuanced approach. Attempts to reframe this problematic narrative have come from scholars who argue that the late eighteenth century saw shopping emerge as a “sophisticated, multi skilled activity,” involving “complex decision making” and “the application of thrift and good judgement.” Conceptualizing Dorothea’s commercial activity within this framework allows us to reconsider her spending as identity-defining processes linked to wealth, agency, style, choice, and comfort, as the final section of this article will show.

“COMFORTS IN HER CALAMITY”: DOROTHEA’S MATERIAL WORLD

Dorothea’s shopping habits can be linked to positive feelings about her wealth. That her money was a source of pride before her move to Fisher House is seen in a letter to Robert from July 1779, in which she talks enthusiastically about the distribution of finances in her will. Giving firm instructions, the letter concludes, “I hope you will find the principal part of my Fortune a recompense for your trouble.” This same authority is felt when discussing the distribution of her finances from within the madhouse. In one letter, she writes, “I will satisfy Mrs Holmes, according to the sum she mention’d this morning. One hundred pounds. Anne Pocock the same.” In another missive, dated 9 December 1799, Dorothea sets out detailed instructions about renumeration for the executors of her will, claiming that she has allotted “a thousand pounds to those who had [sic] the trouble of doing the business.” With one thousand pounds totalling over £70,000 in modern currency, Dorothea’s statements about releasing significant sums of money from her bank reinforce arguments that she was suffering from delusional thinking. Yet her discussion of paying bills, even if fictitious or exaggerated, indicates that she saw herself as, and took a certain pleasure in being, a cog within a wider economic machine. Her authoritative tone suggests that she believed herself in charge of the purse strings, exercising financial control over external matters from the madhouse. Clearly, her existing finances and rolling income were a source of psychological security and pride during these challenging years; her savings a conduit through which to connect to the outside world.

Rituals of making, receiving and altering orders would have related to everyday household tasks that Dorothea would have performed when still mistress of her own house. Small financial transactions such as tipping the nurse at Christmas, alongside the selecting and ordering of specific goods, would have been familiar and presumably reassuring. Dorothea’s room was a space that saw the movement of many boxes and bundles, arriving or leaving, and linking back to her previous role as a genteel woman. Making an order to a milliner or mantua maker, even if the order was made via Mrs Holmes, show that the confines of the madhouse were
not going to curb Dorothea’s former habits of consumption or dress. She may have been a “bird in a Cage,” but she still sought the luxuries, clothing, and comforts to which she was accustomed, during a period in which shopping was becoming “less commodious, more indulgent and habitual.”

Processes linked to Walsh’s characterization of eighteenth-century shopping as a multi-skilled activity were definitely at play within Dorothea’s lodgings. The selection of items was not just about familiarity but functioned as a manifestation of agency, involving taste and consumer knowledge. Liaising with Mrs Holmes, trying a new fabric, sending a worn item for alteration, or inspecting a new hat from her preferred milliner were all part of a range of consumer activity that contributed to Dorothea’s self-image. These rituals surrounding choice, patronage, and selection enabled the development of ties with tradespeople, as choosing certain milliners or patronizing a favorite wine-merchant allowed Dorothea to exercise sway within a consumer marketplace, and to express her own style and taste.

What is more, these rituals would have provided her with a greater sense of control and agency. As Rachel Bowlby has argued, “women’s consumption could be advocated unequivocally as a means towards the easing of their domestic lot and a token of growing emancipation.” This is not to argue that Dorothea serves as a symbol of unfettered female freedom from within her confined space. Rather, her conduct lends itself to a more complex understanding of the psychological repercussions of consumption at Fisher House. Dorothea could not control much in her life. She was, however, able to control the objects she purchased, the food she ate, and the clothes she wore.

It was not just Dorothea’s engagement with familiar practices of consumption that proved meaningful. Historians of material culture have agreed that objects function as complex markers of identity in the modern period, and that personal accoutrements and material objects enable the outward display of social position and aspirations. With a person’s possessions contributing to a tableau of manners, dress, and overall appearance, consumerism in the latter eighteenth and early nineteenth centuries was not just about appropriating objects offered for sale, but was also about the creation of “the self as a social subject,” relating to a certain “lifestyle.” The individual objects that Dorothea purchased, then, contributed to both her public and private sense of self. From figs or French plums, to new clothes, hats, or aprons, the objects Dorothea coveted served as social signifiers of what kind of woman she was prior to and during incarceration. Dorothea continued a material lifestyle that those around her would have recognized as upper class, the objects which she procured, purchased, and possessed consolidating her former identity and signifying her status.

All this self-fashioning begs the question: who was this display actually for? Was anyone seeing Dorothea’s clothes? The letters between her family rarely mention visits to the madhouse, yet Robert did occasionally visit his cousin. When describing her stay at Fisher House, Mary Lamb suggests a close-knit internal community of women made up of staff and patients—with their stays overlapping, the same community would have been present during Dorothea’s extended incarceration. Dorothea’s letters also reference the female patients around her: they may not always be positive, but they allude to a community much like one might expect to find in a care home today. Considered together, these points suggest that Dorothea did
have a small audience of visitors, staff, and patients to witness her self-fashioned appearance, despite the fact that that self was hidden from “public” view in the traditional sense. Even if this audience was not actively engaged with looking at her projected display, their existence meant that Dorothea was not completely invisible. Additionally, Dorothea had her own gaze to consider. Much of her purchasing may have been for her own benefit, as she built up a familiar and aesthetically pleasing assemblage that aligned with her own self-image, and perhaps vanity, as a figure of elegance and femininity. Even if her public persona was limited, the procurement of objects linked to appearance suggest that the projection of an elegant persona facilitated a sense of confidence and self-worth, however muted.

Alongside arguments around choice, agency, and self-fashioning, work has been done on the emotional baggage of the object. Recent texts such as Stephanie Downes, Sally Holloway, and Sarah Randles’s *Feeling Things: Objects and Emotions through History* consider the way in which humans have “been bound affectively to the material world,” and how objects can “facilitate their emotional lives.”86 Interacting with the flourishing discipline of the history of emotions, historians stress how personal items can “store and possess, take in and breathe out emotions with which they have been associated.”87 Various methodologies have been used to ascertain the emotional value of objects, with historians such as Jules David Prown and Karen Harvey validating approaches that view acts of purchase and ownership, evidenced by lists and inventories, as legitimate sources for this enterprise. These methods employ a little “creative imagining” to understand how an object “provokes the way it provokes.”88 With plenty of historians prioritizing arguments that look towards the complex emotional role of the object during the eighteenth-century, these arguments and methodologies can be applied to Dorothea’s material world, allowing us to infer that procuring and possessing luxurious objects meant something very personal to Dorothea.89

While some items provided physical comfort, others such as her favorite foods, a new hat, or a dress in a preferred color or style may have felt psychologically consolatory and comforting. Having familiar and favorite objects around would no doubt have been soothing, recalling Urania’s statement from 1792 that her sister should have “Comforts in her Calamity.”90 Many of these items would have come with their own private, positive associations for Dorothea, unknowable to us but relating to her own life before incarceration.91 Perhaps possessing talismanic properties, they likely proved associative of experiences encountered beyond the madhouse’s walls, prompting memories and reminding their owner of happier times.

Susan Stewart’s analysis of the function of miniature objects as souvenirs, and their place as identity-definers for the people who buy, collect, and carry them, supports these arguments. Reducing public experiences to representations which can be reflected on in private, Stewart positions the souvenir as an object that traces authentic experience, collapsing distance into proximity.92 By viewing the objects that Dorothea coveted, bought, and surrounded herself with in this way, we can further uncover the emotional attachments that Dorothea may have had with, and experienced through, her material world. Classifying her objects as miniature souvenirs of her memories, experiences, and past life, they become conduits through
which a variety of feelings and emotions could be relived virtually, reflected upon inside her room at Fisher House.

Arguments about emotions and memory require Dorothea to have possessed the ability to find delight, pleasure, joy, or happiness in certain things, and to have been able to attach meaning to the world around her. Dorothea’s letters may reveal instances of delusional thinking, yet they clearly demonstrate that people, food, and things held positive or negative associations for her. She may not have always been thinking rationally, but this article has demonstrated the array of emotional investment that Dorothea placed in various practices and objects during her confinement at Fisher House. Deluded thinking may have impacted the meaning of the objects themselves, giving them additional, fabricated resonance, in line with Stewart’s suggestion that objects encapsulated imagined experiences.93 Whether suggestive of confidence or control, agency or status, happy memories or delusional fantasies, ultimately the things with which Dorothea chose to surround herself provided her with an additional way to negotiate, and survive, life at Fisher House.

CONCLUSION

This discussion of Dorothea’s consumer behaviour and the maintenance of her financial, fashionable, and emotional worlds is not to diminish the challenges she faced at Fisher House, or to whitewash the more troubling aspects of her confinement. Nor is it designed to apply misplaced claims of female and consumer empowerment to her dismal situation. Historians have critiqued scholarship that presents easy routes to self-fashioning and agency via the simple act of spending money on specific goods, and arguments that frame marginalized individuals as “savvy consumers” have been characterized as misleading and dangerous.94 Dorothea’s letters evince a perpetual struggle that proxy shopping could not magically solve. Furthermore, her experience was not entirely commonplace. Women of her class and status had access to finances and could engage in consumer behavior, but many others would not have had such access to financial means—especially those incarcerated in institutions that housed pauper lunatics. Both private and public institutions offer endless examples of women who were not able to eat figs, purchase brightly colored ribbons, enjoy privacy, or engage in the imaginative behavior that this article posits that Dorothea experienced. Having an allowance to spend on oneself was a rarity and a privilege—a luxury that most incarcerated women during this era would have been denied.

Yet the “broad spectrum” of madhouse provision that was available on the late eighteenth-century market—“some good, some bad, some indifferent”—meant that some of these spaces could facilitate a more unique and unusual patient experience.95 Contemporary novels or hard-hitting exposés that documented madhouse life had little room for patients with spending power or financial influence, but the receipts and bills that litter the Fellowes’s archival boxes tell a different story.

This story began with the actions of Dorothea’s family, particularly Urainia, who took full advantage of the medical marketplace and exercised their sway in choosing a madhouse for their sister, which spoke to their status and familial self-fashioning. Once the right establishment had been selected, and in line with
historian Nancy Tomes’s statement that in certain asylums, “women patients exercised choices, despite the constraints imposed by their mental condition and their inferior status in society,” further consumer processes unfolded. Rather than a closed site of deprivation, Fisher House was a permeable space within which the female patient functioned as part of a wider economic machine: making consumer choices, liaising with staff and tradespeople, and connecting with her outside—and interior—world through shopping and spending practices. Ultimately, Dorothea’s shopping illustrates that more nuanced experiences of consumerism, choice, and agency were available for patients of a certain class within certain English private madhouses. Indeed, an audit of the Fellowes’s archival material and financial spending provides greater insight into the financial, material, and emotional worlds of an eighteenth-century female patient: no longer penniless, starved or naked, Dorothea emerges from the archive ordered, clothed, and perhaps with a greater sense of self than we may have first assumed.

NOTES


2. This article employs terms and phrases such as “private madhouse,” “insane,” and “pauper lunatic” that were used in the late eighteenth and nineteenth centuries. This is not to reinforce past stigmas and stereotypes associated with these terms, but rather to reflect their contemporary usage throughout this period.


10. Smith, Private Madhouses, 6.


13. For more on this legislation, see Parry-Jones, Trade in Lunacy, 6–28 and Macalpine and Hunter, George III, 322–28.

14. Andrew Scull has described this legislation as a “token gesture,” partly because the licensing authority had no power to reject applications from madhouses applying for a license, and partly because the inspectors were unable to bring sanctions against madhouses that were found guilty of maltreatment. See Andrew Scull, The Most Solitary of Afflictions: Madness and Society in Britain, 1700–1900 (New Haven; London: Yale Univ. Press, 1993), 24–25.

15. Parry-Jones, Trade in Lunacy, 9–11.

16. Porter, Mind For’g’d Manacles, 140.

17. Parry-Jones, Trade in Lunacy, 124.

18. For examples of how private madhouses were marketed, see Parry-Jones, Trade in Lunacy, 102–12; Smith, Private Madhouses, 240.


20. Though discussed at numerous points in Smith’s recent publication, Fisher House is only mentioned fleetingly by Parry-Jones, described as the “Islington Madhouse.” Smith, Private Madhouses, 95, 160, 180; Parry-Jones, Trade in Lunacy, 124.


39. Newman’s work on John Monro and the private madhouse of Brooke House in Hackney makes a similar case about the relationship between a madhouse’s respectability and the reputation of its resident physician. See Newman, *Mansion for the Mad*, 159. This point is also made by Smith in his article on the madhouse practice of Joseph Mason: see Smith, “God grant it may do good two all,” 216. See also Porter, *Mind Forg’d Manacles*, 139–40.

40. The exact date of Fisher House opening is unclear: licensing records tell us that its first recorded proprietor was a Mr Robert Holmes. His license began in 1795; four years later it was taken over by his widow, Mrs Ann Holmes. Until Robert’s death, the couple ran Fisher House together, with Ann acting as matron and described by Charles Lamb as “the good lady of the Mad house.” See Charles Lamb to William Coleridge, 3 October 1796, in Edwin W. Marrs Jr., ed, *The Letters of Charles and Mary Anne Lamb*, 3 vols (Ithaca: Cornell Univ. Press, 1975–78), 1: 49–50. In 1807, Simmons officially took over the license. The following year it was taken over by his successor at St Luke’s, Dr Alexander Sutherland. “Mental Health Asylum Inspection Accounts: Treasurers’ account book,” 1774–1829, MS2104, Royal College of Physicians, London.


43. Urania Portsmouth to Robert Fellowes, 9 September 1792, 557/1, FEL 557, 553X8, “Letters from Lord and Lady Portsmouth and others re. illness of Henry Arthur Fellowes and later troubles over
his will and family matters, 1792–1793,” NRO (hereafter cited as Urania Portsmouth, 9 September 1792, 557/1).


47. Henry Arthur Fellowes to William Fellowes, 21 August 1791, KR/R35/7, Fellowes Collection, HA.

48. Henry Arthur Fellowes to William Fellowes, 31 August 1791, KR/R35/7, Fellowes Collection, HA. Willis was the son of Francis Willis (1718–1807) who had treated George III in 1788. In 1810, Willis and his brother John attended the King during his final illness. For more information, see Parry-Jones, *Trade in Lunacy*, 76.


50. “Dr Willis’s Opinion,” 29 August 1791, KR/R32/7, Fellowes Collection, HA.

51. Foyster, *King of Hampshire*, 82.

52. “Report from Dr. Simmons,” 10 September 1791, KR/R32/7, Fellowes Collection, HA.


57. Urania Portsmouth, 22 June 1792, 557/2/20.


60. Dorothea Fellowes to William Fellowes, 27 September 1799, FEL 656, 554X4, “Letters and Accounts regarded stay in “Islington Madhouse,”” NRO.


63. Information about Coulson Fellowes’s will is detailed in “Household and Estate Bills for House at Twickenham Common,” KR/35/7/2, Fellowes Collection, HA. The rental of Twickenham Common
is discussed in a missive from 13 July 1799, KR/R32/7, “Bundles, Letters and Account of Dorothea Fellowes,” Fellowes Collection, HA.


65. This calculation was made using the National Archives Currency converter: 1270–2017, accessed 2 September 2020 <https://www.nationalarchives.gov.uk/currency-converter>.


68. This calculation was made using the National Archives Currency converter: 1270–2017, accessed 2 September 2020 <https://www.nationalarchives.gov.uk/currency-converter>.


73. McKendrick et al., Birth of a Consumer Society, 10; Kowaleski-Wallace, Consuming Subjects, 6.


75. Dorothea Fellowes to Robert Fellowes, July 1779, FEL 652, 554X3, “Household and Estate Bills for House at Twickenham Common,” NRO.

76. “Note written by Dorothea Fellowes,” 7 August 1800, FEL 656, 554X4, “Letters and Accounts regarding staying in “Islington Madhouse,”,” NRO.

77. Letter from Dorothea Fellowes, 9 December 1799, FEL 656, 554X4, “Letters and Accounts regarding stay in “Islington Madhouse,”” NRO.

78. Dorothea’s mention of “satisfying” Mrs. Holmes and Ann Pocock’s demands for funds suggests an additional interpretation of her spending habits: that Dorothea was motivated by external pressures in addition to her own desires. Perhaps some items were bought as gifts for caregivers or other patients, with Dorothea aware that the value of them might boost her status within the madhouse. It is worth noting that a form of financial abuse might have also been at work within the madhouse. Aware of her wealth, staff may have pressured Dorothea to purchase certain items—an extra order of wine or French plums, for example, or an additional piece of lace—for their own consumption. The meticulously kept lists found within the archives of disbursements purchased, along with the madhouse’s reputation as a genteel and humane establishment, complicates this idea that staff at Fisher House could have taken
advantage of patients, but it is worth noting that other factors may have motivated Dorothea’s excessive spending. This possibility once more exposes the late eighteenth-century private madhouse as a permeable site of consumption and commerce.


80. Dorothea’s preferred milliner seems to be “Mrs. Ashley,” with new items purchased from her every few months. “Bill to Mrs. Holmes from Mrs. Ashley,” 1797–1798, FEL 709, 554X9, “Bundle of Household, Estate and Tax Accounts,” NRO.


84. In a letter to Robert from September 1792, Urania mentions his “Recent Visit” and thanks him for proposing a further “Visit at Islington.” Urania Portsmouth, 9 September 1792, 557/1.


90. Urania Portsmouth, 9 September 1792, 557/1.

91. Building on Sara Ahmed’s work on the “stickiness” of “things,” Sally Holloway has argued that objects gather “positive value as they are exchanged.” See Holloway, *Game of Love*, 16; Sara Ahmed, “Happy Objects,” in *The Affect Theory Reader*, ed. Melissa Gregg and Gregory J. Seigworth (Durham, N.C.: Duke Univ. Press, 2010), 29–51. Rob Boddice has likewise discussed how objects come to be associated with emotional and affective dispositions and responses: “There is nothing intrinsically meaningful in any object, but the way in which an object is constructed in a space, placed into a narrative, associated with something beyond itself, and with past experiences, all endow said object with meaning.” See Rob Boddice, *History of Emotions* (Manchester: Manchester Univ. Press, 2018), 179.


