

## An expert by experience

**Hugh Gault** on John Thomas Perceval, a pioneer whose work for the mental health advocacy movement led to lasting improvements in mental health care

John Thomas Perceval was born in February 1803, the fifth son of 12 children. His father Spencer Perceval was killed by John Bellingham in the House of Commons on 11 May 1812. He is the only British Prime Minister to have been assassinated. Bellingham was executed a week later.

John Thomas was aged nine at the time. A year earlier his father had revived the regency after George III's second bout of madness started in October 1810. It is not clear what effect these events may have had on John Thomas's own mental health in later life.

His mother remarried in about 1814 at the age of 45. She became Lady Carr and was to live for another 50 years. When angry with her later on he addressed his letters to 'Lady Carr'.

Little is known about John Thomas's early life, but his eldest brother (also called Spencer) appears to have been a significant factor. Spencer was an MP in three different constituencies between 1818 and 1832, though with a seven-year break between 1820 and 1827. Spencer had begun to show an interest in the religious doctrines of Edward Irving from 1826. These included predicting the imminent second coming of Christ. He was an active Metropolitan Lunacy Commissioner from 1830. He was not reappointed to this post when he ceased to be an MP with the passing of the Reform Act in 1832. By this point his religious speeches in the House of Commons were already regarded as 'odd'.

He became more closely involved with the Irvingite church from 1833.

Spencer followed his father's example, both as a politician and as an evangelical Christian. He may also have been influenced by personal circumstances to become a Lunacy Commissioner.

John Thomas first came to public attention in 1838. In this year he published his 'Narrative', an account of his madness from 1830 and his incarceration in two private asylums from January 1831 to early 1834 (Perceval, 1838). He followed this up by publishing a second version in 1840. Gregory Bateson brought the two parts together and republished them with an introduction in 1961 (Bateson, 1961). Bateson's book was reviewed in the *British Medical Journal* in October 1962 (Hunter & Macalpine, 1962).

John Thomas had resigned his commission in the Grenadier Guards in 1830 as his mental health difficulties increased; 'to prepare himself for his doom', as he described it. He then spent a term at Oxford University, went to Scotland to search out the Irvingites and by Christmas 1830 was insane. Bateson provides more details, but John Thomas found his way to Dublin. He had to be brought back by

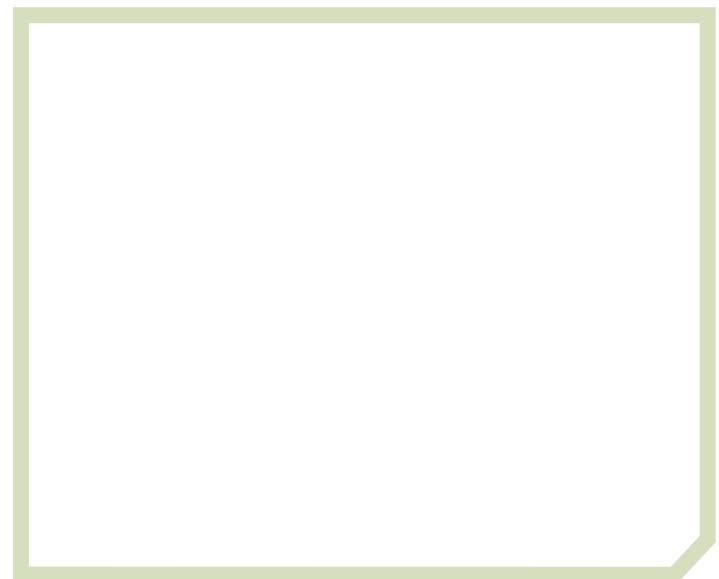
his brother Spencer and was committed to Brislington House in Bristol in January 1831. He was not quite 28.

John Thomas was fortunate in that Brislington House was a private asylum. These were less reliant on restraint than the public asylums such as Bethlem and offered patients and families some anonymity. Standards of care were considerably higher and the approach more enlightened. In some circumstances, according to Porter (1992), servants were even permitted. A private asylum could be afforded because Parliament had settled a £50,000 capital grant on the children after their father's assassination.

In May 1832 John Thomas was transferred to Ticehurst Asylum in Sussex where he remained until he was well enough to be discharged in early 1834.

John Thomas's account of his illness in his 'Narrative' reinforces the importance of a patient helping themselves and being given the time to recover. Self-help and understanding were critical in this case. John Thomas took the view that, as the patient knows most about his mental health, his views should not be discounted nor his behaviour penalised by restraint. Perceval initially felt that the critical and rejecting voices he heard were justified, but given the time and space to develop doubts he came to see them as delusions.

A modern diagnosis might be 'paranoid schizophrenia', but of course his illness was not understood or described in these terms in the 1830s. Bateson adds comments, for example, suggesting that Perceval's description of his illness fits the



**Public asylums, such as Bethlem, were more reliant on restraint than the private asylum that Perceval attended**

### references

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double bind theory of schizophrenia. He also notes that Perceval's recovery was self-generated – schizophrenia can provide its own cure in time. John Thomas was ahead of his time in recognising this.

Bateson also posits treatment similarities between the 1830s and 1961 that reinforce the patient's sense of isolation and lack of control. These reinforced John Thomas' delusions initially. But, as he became more aware of their inappropriateness, so he became angry at them. He was beginning to recover.

John Thomas was married in March 1834 shortly after his discharge. He was to become the father of four daughters. From that point to his death in 1876 he dedicated himself to improving mental health treatment, and 'the care and conditions of the insane'. He described himself as 'the attorney-general of all Her Majesty's madmen'. His legacy as a mental health reformer has lasted to the present day and has been influential throughout Europe.

He helped found the Alleged Lunatics

Friends Society in 1845 and became its secretary the following year. His self-help approach is recalled by David Brandon as

"John Thomas's account of his illness... reinforces the importance of a patient helping themselves"

beginning today's user-survivor and advocacy movements. Brandon's article in *Mental Health Today* celebrates John Thomas co-founding this first mental health advocacy organisation (Brandon, 2007). He campaigned to increase parliamentary

opposition to the 1845 Acts

(Lunacy and Regulation of Lunatic Asylums), petitioning against the first of these. In 1859 he gave evidence to the Select Committee on the operation of asylums. This was to report in 1860, and recognised the significance of increased liberty and the rights of 'lunatics'. John Thomas had campaigned for both, arguing that continuing to see friends and family could be an important step on the road to recovery. This prefigures not only subsequent developments in mental health, such as care in the community, but also some of the entitlements to normal life enshrined in the UN Declaration of Human Rights.

John Thomas had become an expert by experience. He was determined to ensure that this should result in changes for those who would otherwise be shut away in asylums without hope. Anyone could experience mental health problems; their recovery depended on a humane and human environment. He promoted this approach.

It is now 170 years since John Thomas first published his 'Narrative'. 2009 will be the 150th anniversary of his evidence to the Select Committee. On both counts he has made a lasting contribution to improved mental health care.

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Correction: In last month's piece, 'A phoenix rises from the Nazi book burning', a production error left in an erroneous final paragraph from a previous draft. Apologies, and see the website for the correct version.