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Notes and Comments

Mental Illness in the Spanish Colonial Period: 1865-1898

REGINO P. PAULAR

There is a dearth of psychological studies about Philippine psychopathology during the Spanish regime, not because data and documents are non-existent, but because of the fact that the documents are generally inaccessible and unclassified in the National Archives, and that in order to evaluate them the researcher has to contend with the nuances of nineteenth century Spanish, written in unfamiliar if legible calligraphy.

The present note reviews the psychological data on Philippine psychopathology from Spanish archival documents, outlines the admission procedures of mental patients, compiles the relevant Spanish psychological categories used to classify or diagnose mental patients or conditions, and examines the insanity records and other related available documents and reports and the description of the context of the diagnostic endorsement. The note concentrates mainly on the Spanish manuscripts *Dementes* or Reports on Insanity in the Philippine National Archives. It aims to classify, analyze, and deal statistically with data on Philippine psychopathology, particularly in the period, 1865-98. Attention is focused on the socio-cultural practices and psychological idiosyncracies affecting Filipino life during the latter part of the Spanish regime.

In this archival study, the researcher made use of such archival documents as *Dementes* and other historical manuscripts, books and

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reports, mostly written in Spanish which had relevance to the topic under investigation. The data was classified as to the client's sex, the year the client succumbed to or was reported to have manifested the maldaptive behaviors, the client's ethnic place of origin, and ethnic classification as *indio*, *español peninsular*, *español filipino*, *mestizo español*, *chino* or *sangley*, etc. The sources of referrals were listed as well as the types of descriptions of mental disorders, and the Spanish psychological terminology used in the description and diagnoses of mentally-disturbed subjects and their conditions.

STATISTICAL FINDINGS

The Hospicio de San Jose admitted around 741 subjects in the period under study, 522 of whom were males and 219 females. All these subjects were described and diagnosed by Filipino and Spanish authorities as *dementes* (mentally-disturbed or insane) or *alienados*, and were recommended for admission and confinement in the Hospicio de San Jose. The period involved in this study was from 1865 to 1898, a period of about thirty-four years. It can be noted that the years 1876, 1881, 1886, 1892, 1895, 1897, and 1898 reported admissions of more than thirty subjects each, with the year 1897 having the highest number of admitted mental patients. It is interesting to note that the increase of mental patients at the Hospicio de San Jose occurred at a time when the Philippines was beset by political unrest, particularly the local revolutionary activities against Spain in the 1890s. The reasons, however, for this coincidence could be explained either psychologically or sociopolitically.

This search could have limited the sample to one period alone. But it was decided to group the 741 subjects as one entity for study, regardless of years of admittance, for two reasons. Firstly because this is an exploratory study, and needs all the psychological data available, second, since the subjects were distributed over a thirty-four-year period varied information could therefore be elicited. However, the final results showed that from 1865 to 1898, the admission and diagnostic procedures did not change significantly.

Of the thirty-six provinces represented in the study, the top ten sources of referrals of mental patients to the Hospicio de San Jose were Manila (212), Bulacan (48), Iloilo (28), Batangas (23), Pangasinan (17), Laguna (13), Pampanga (12), Bataan (11), Tarlac (10), and Ilocos Norte (10). Spanish subjects could have ranked under three in the referrals, but they were excluded since the ranking was only concerned with ethnic or indigenous Filipinos. The province of Manila should have a total number of 380 cases. However, the rank-

ing included only the confirmed cases (212) who were residents of such Manila suburbs as Malabon, Pasig, Pateros, Marikina, Malate, Santa Ana, San Pedro de Makati (now Makati). The unconfirmed group (168) could only be presumed to be residents or nonresidents of Manila, in the absence of documents or information that could attest to their provincial residence or place of origin. Although, the Hospicio's written communications on these unconfirmed subjects were initiated in Manila, they were classified as unconfirmed Manila subjects since there was no clear-cut information about their ethnic or provincial origin. Likewise, the cases on the "Not Indicated" category did not have specific or antecedent documents to establish their locality of origin or residence.

Table 1.

Nationality (Male and Female)		Number of Cases
A. Indios or "Filipinos"		667
B. Españoles or Spaniards		43 ¹
1. español peninsular	23	
2. español filipino	7	
3. español europeo	4	
4. mestizo español	5	
5. español	4	
	43	
C. Chinos (Sangleyes) or Chinese		29
D. Persa or Persian (Iranian)		1
E. Juda or Jew		1
Grand Total		741

The majority of the mental patients admitted at the Hospicio de San Jose were *indios* or native "Filipinos." As indicated in Table 1, the Spaniards or *Españoles* ranked second while the *Chinos* or *Sangleyes* (Chinese) ranked third. There were only two cases of "foreigners"—Persian (Iranian) and Jewish nationals. Since the main objec-

1. Although subjects under this category totalled around 43, only 31 were considered as "real" or full-blooded Spaniards, since only those born in Europe or Spain were considered as real Spaniards. The rest of the Spaniards were either half-breed or Philippine-born.

tive of the study was to collate and evaluate all available data on Philippine psychopathology, it therefore considered all the 741 subjects whether or not they were *indios*. Philippine culture, particularly during the 19th century, was predominantly hispanic, hence the *indios* (native Filipinos) and the Spaniards had similar customs, traditions, and aspirations. The Chinos or *Sangleyes* were also included since most of these mental patients came from Manila, and were exposed to the Filipino-Spanish culture. In fact in the 1840s, most of these Chinese were Catholics and, therefore, followed more or less the same Filipino Catholic religious practices, which were mainly Spanish.

In committing mentally-disturbed subjects to the mental asylum of the Hospicio de San Jose, the following general procedures were observed. For mental patients coming from Manila and nearby towns the reports, complaints, or requests to send a mentally-disturbed person to the mental asylum, initiated by either relatives or neighbors, were coursed to the town's *gobernadorcillo* who, in turn, submitted a report and recommendation to the Civil Governor of Manila for his judgment and endorsement. If the physician found the subject mentally ill, he certified the insanity and recommended admission in the Hospicio de San Jose for proper care and treatment. If the physician found otherwise, the subject was returned to the source of referral with the certification that the patient was sane and was to be entrusted to his family or custodian.

For mental patients coming from the provinces (Mindanao, Visayas, and Luzon) there were two types of demente entrusted to the *Gobernador Civil de Manila* for his appropriate action or recommendation. The first type was called *demente procesado* and the second was simply labelled as *demente, loco* or *que padece de enagenación mental*. The *demente procesado* was one who had committed and been convicted of a crime, for example parricide, homicide or infanticide and who, in the judgment and observations of the province's *Juzgado de la Primera Instancia*, Provincial Governor, and Provincial physician, was insane or had lost his proper mental faculties. He was, therefore, recommended for observation and/or admission at the Hospicio de San Jose. The second type was simply a mentally-disturbed subject who had not committed or been convicted of any crime.

In both types of insanity, the Provincial Governor sent the necessary reports or papers to the *Gobernador Civil de Manila* for proper action and recommendation for admission to the Hospicio de San Jose. The subjects were either put on board ship or escorted through the *cordillera* or provincial highways to Manila. The maritime ar-

rangement was resorted to when the subjects came from the far-away provinces/islands of Mindanao, Visayas and the coastal provinces of Luzon. The inland escort method was only employed if the province or source of referral was near Manila, like Bulacan, Nueva Ecija, Pampanga, etc. Upon arrival from the sea voyage or inland travel, the *Guardia Civil* or *Guardia Civil Veterana* took custody of the mentally-disturbed subject and entrusted him to the Hospicio de San Jose for proper care and treatment. The receiving center, the Hospicio, imposed strict observance of the rules and regulations governing the admission of provincial subjects.

TYPES OF DEMENTE

There were five categories of *demente* admitted at the Hospicio de San Jose, from 1865 to 1808. They were classified as follows: *demente*, *demente procesado*, *demente preso*, *demente fugado*, and *demente curado*.

The first category refers to mentally-disturbed subjects who had no criminal records or convictions and were admitted in the Hospicio de San Jose after the presentation of a *certificación facultativa* (official medical certificate) either from a provincial *médico titular* or from the Hospicio director that the subject *padecen de enagenación mental* (suffered from mental alienation) and, therefore, ought to be admitted and treated in the Hospicio.

Dementes presos were those who succumbed to insanity after serving prison terms in the Manila or provincial *presidios* (penitentiaries) or *Cárcel Pública de Bilibid* of Manila. These were entrusted to the Hospicio by the prison authorities since the latter had no facilities to treat them, and, also, to safeguard the normal prison inmates from possible harm, since most of these *dementes presos* were aggressive and riotous.

The third type, *dementes procesados*, were those convicted of serious crimes such as parricide, infanticide, etc. and who were diagnosed to be mentally-disturbed. These usually came from the far-away provinces of Mindanao, the Visayas, and the coastal provinces of Luzon. They were referred to the Hospicio de San Jose by the Provincial Governor for psycho-medical observations and were recommended for confinement if found mentally ill. Cases of this nature were usually coursed to the Provincial Governor by province's *Juzgado de la Primera Instancia* (Court of First Instance), after its investigation and final decision that a particular subject had committed a specific crime and had manifested insanity during the commission of the crime.

Demente fugado refers to a run-away patient who, upon petition of the Hospicio de San Jose, was then the subject of search and capture by the police authorities (e.g. *guardia civil*, *cuadrillero*, etc.). When located and captured, the subject was entrusted to the Hospicio for confinement, further observation, and treatment.

The last type of mental patient was called *demente curado*. Subjects under this category were certified by the Hospicio de San Jose authorities to have regained their sanity and were, therefore, allowed to return to their respective families or entrusted to their custodians.

The majority of the mental cases were *demente* or patients without criminal records. They were followed, in less significant numbers by the *demente procesado*, *demente preso*, *demente fugado*, and *demente curado*.

The descriptions or diagnoses given to the mentally-disturbed subjects before or upon admission to the Hospicio de San Jose, are sum in Table 2.

Diagnosis	No. of Cases
A. General ²	716
1. Demente (N=716)	25
B. Specific ³	
1. piromania	7
2. embriaguez y demencia	3
3. epilepsia y demencia	3
4. idiota; idiotismo	2
5. demencia y excitación cerebral	1
6. demencia, por propalar falsas doctrinas	1
7. lepra tuberculosa y demencia	1
8. locura idiopática por perversión general	1
9. monomania de persecución	1
10. histerismo	1
11. prostitución y demencia	1
12. tendencia de suicidio	3
Grand Total	741

2. General descriptive diagnosis. The subject was only referred to as *demente* or mentally-disturbed.

3. Specific psychological diagnosis given to a mentally-disturbed subject.

Most of these diagnoses came from the *médicos titulares* of Philippine provinces, including Manila. Some medical authorities of the Hospital de San Juan de Dios or Hospital Militar were also sources of these diagnostic statements which the Hospicio de San Jose referred to as *certificación facultativa*. The latter requirement served as the main basis for the official admission of the mentally-disturbed subjects to the Hospicio. As indicated earlier, a majority of the mental patients were officially diagnosed as *demente* or insane, which was a general descriptive diagnosis. Other synonymous terminologies such as *que padecen enagenación mental* (who suffered from mental derangement), *alienado* (alienated), *se halla sujeta a una perturbación mental* (is affected by mental agitation), *atacado por demencia* (attacked or affected by insanity), *aparece no estar sus facultades intelectuales en estado normal* (his mental faculties appear to be in abnormal condition) *por padecer la enfermedad de demencia* (for having suffered insanity) and a variety of other terms which were also utilized to describe or diagnose the mental condition of the subject. Usually, the initial reports described the external actuations or intentions of the subjects observed to be abnormal, for example, in such phrases as "incomprehensible conversation with oneself, wandering from one street to another, stripping oneself of clothes in the street and attempting to drown oneself, attacking and cursing people on the street, burning his and other houses, etc." There was no attempt however to explain, the behavior "psychoanalytically." Rather, the medical authorities focused their descriptions on the subjects' outward behavioral manifestations, and then labelled them generally as *dementes*. There were a few cases, however, when the abnormal actuations of the patients were labelled *piromania* (pyromania) *idiot* (idiot), *prostituta demente* (mentally-disturbed prostitute), *monomania de persecución* (persecution monomania), *alienado alcohólico* (mentally-affected alcoholic), *locura idiopática* (idiopathic insanity), etc.

Psychological terminology did exist and was utilized either generally or specifically by the sources of referral, the *médico titular* and the Hospital de San Juan de Dios or the Hospicio de San Jose and other agencies. Some of this terminology is still commonly used today by Filipinos, such as *ataque* (epiléptica), *delirio*, *estado* (normal/anormal), *nerviosa* (excitación nerviosa), *idiot*/idiotismo, *imbécil* (imbecilidad), *juicio*, *loco* (a), *mania*, *neurosis* (neurosis epiléptica), *síntomas*, etc.

The effort to discover from these *demente* reports cases of subjects being admitted in the Hospicio de San Jose for socio-political reasons was substantially productive. Preliminary scrutiny of these insanity reports revealed five cases whose suspicious diagnoses and

erroneous admittance to the Hospicio were confirmed by the asylum administrators and/or through logical analyses, archival and library documentation and research. The personal, social, and political circumstances that surround the admittance of these subjects to the insane asylum briefly are as follows:

1. A male who was a victim of a family quarrel or conspiracy;
2. A male (errand boy) who was sent to the Hospicio de San Jose for insanity but was rediagnosed as mentally sane;
3. An old male (110 years old) diagnosed supposedly as *demente* for mendicancy or *por implorando la caridad pública*
4. A female "Dios-Dios" cult member from Tacloban, Leyte diagnosed by the Provincial Governor and the provincial physician as insane;
5. A male law student who was reported and diagnosed by the *Teniente de Guardia*, with the collaboration of the neighbors, and a government physician as *demente* or *insane*.

CONCLUSION

Certain conclusions emerge from a study of documents from 1865 to 1898. Most importantly, it is clear that during the Spanish regime, particularly by the nineteenth century, the Philippines had already established an insane asylum which admitted and took care of mentally-disturbed subjects. The Hospicio de San Jose facilitated their lodging and medical services. The Spanish government had already implemented its policy of helping and treating the *demente* or the mentally-disturbed, not only in the Manila area but also, more particularly, those coming from the remote regions of Mindanao, the Visayas, and Luzon.

It seems also clear that the Hospicio de San Jose's mental asylum was non-sectarian and non-discriminatory. It admitted native Filipinos (the largest population), Spanish, Chinese, and other foreigners (Jew and Iranian) regardless of sex, age, color, belief and nationality. The Hospicio's insane asylum was reasonably modern, in the sense that it subjected a mentally-disturbed subject to a standard medical observation or examination by a *médico titular* before admitting him.

The documents make it evident that during the later part of the nineteenth century, the psycho-medical practice of observing, analyzing, and treating mentally-disturbed subjects in the Philippines had traceable aspects of European schools of thought (e.g. Psychoanaly-

sis), particularly in the use of psychopathological terminology and in the rudimentary application of the Catharsis method. The psychopathological label "demente" or mentally-disturbed person, referred not only to the outward maladaptive behavior manifested but also to disturbed mental thinking or perception. During the nineteenth century—in the Philippines and in Spain—the topic on psychopathology or abnormal psychology, particularly mental aberration, was treated more as a medical phenomenon than as a separate field of study.

With regard to the diagnosis of mental illness, the provincial or city physicians (*médicos titulares*) acted as the sole authority in diagnosing whether or not a subject was mentally-disturbed, and their findings or recommendations (usually by referring to a subject as a *demente*) were sufficient grounds for admission to the Hospicio de San Jose. The psycho-medical reports, therefore, of these physicians, including those of Spanish-Filipino civil authorities and Hospicio administrators, as regards the physical, medical and mental conditions of Filipino mental patients, are rich sources of Philippine psychopathological and psycholinguistic data.

There was a government plan in 1888 to set up a separate *Casa de Dementes* (Center for the Mentally-Disturbed Persons) or the *Manicomio Central de Filipinas* (Philippine Central Insane Asylum) in the Malabon area, in order to accomodate the increasing number of mental patients, but the project was postponed in 1894 and the Hospicio de San Jose continued its psycho-medical assistance to the mentally-disturbed subjects.