

Colonialism, reluctance and psychiatry: the establishment of Hong Kong's Castle Peak Hospital in 1961

If a "healthy" individual blames an "unhealthy" individual for being "unhealthy", is the "healthy" individual "healthy" at all?



Background

- Patients being sent to "Tsing Shan" (the Castle Peak Hospital) is a synonym for people with unusual behavior in Hong Kong.
- Only a handful of people are familiar with the history of "Tsing Shan" in Hong Kong.
- The establishment of the Castle Peak Hospital demonstrates a history of reluctance regarding psychiatric services and, more broadly, social welfare in Hong Kong.
- This essay is a pioneering attempt to assess the history of Hong Kong psychiatry.

Mental health services in Hong Kong

The history of psychiatry in Hong Kong is a history of reluctance and passive responses.

- Mental health services for the local Chinese were often neglected by the Hong Kong government.
- By 1891 the first Chinese Lunatic Asylum at what is currently the Eastern Street Methadone Clinic was opened to treat Chinese lunatics. In the early twentieth century, some patients were transferred to the Government Civil Hospital or to Canton (Guangzhou). Confinement was the theme of the legislative perfection concerning psychiatric patients although the Hong Kong government was unenthusiastic about constructing asylums. However, there was a minor change since 1928, the term "Mental Hospital" replaced "lunatic asylum" in governmental reports.
- From the late 1930s, the expansion of public mental health services received increasing attention. The government was unable to transfer Chinese patients to the Fongtsuen Hospital after the Japanese Army invaded in Canton in 1938-39. By mid-1938, although the Hong Kong government aspired to create a new modern mental hospital to satisfy growing demands. Downing Street also approved Governor Geoffrey Northcote's proposal to build a new Mental Hospital in Hong Kong with reluctance. The British government was not very "generous," and only \$50,000, one-sixth of the total expenditure for construction, was allocated to the Hong Kong government in the financial year 1939.
- After the Second World War, there was an expansion of modern psychiatric services regarding the discovery of psycho-therapeutic drugs and advocacy of the establishment of a modern psychiatric hospital from some Legislative Councillors, such as Ronald Dare Gillespie and Chau Sik-nin. Due to the improving financial condition, the Hong Kong government reluctantly fulfilled its promises with reluctance from the late 1950s. The 1000-bed Castle Peak Hospital was opened by Governor Robert Black on 27 March 1961.

Reasons for establishment

1. Outdated and overcrowded conditions in the Mental Hospital
2. Advocacy of the Legislative Councillors
 - Strategy 1: Recalling the unfulfilled promises
 - Strategy 2: Moral obligations
 - Strategy 3: Escalation
3. Developmental trends in British psychiatry

Limitations of the factors

1. "Outdated" and "backwardness" had been the synonyms of the Mental Hospital for decades
2. "Silence is golden": reluctance among the majority of Councillors
3. Developmental trends of psychiatry in the world
 - Hong Kong government could introduce "modern" therapies to the existing Mental Hospital without relocating and renovating it. Thus, the Hong Kong government, even the Director of Medical Services, was not "truly" concerned with the international trends. The Government's decision was selective. Although Isaac Newton put a strong emphasis on the Government's efforts in introducing "modern" therapies to the ageing Mental Hospital, he ignored the necessity of constructing a "modern" psychiatric hospital to catch up with the international trends.
4. Resistance/Obstacles: The Hong Kong Government's reluctance
 - Upon Selwyn-Clarke's retirement in 1947, the Hong Kong government turned back to reluctance. On 31 August 1949, after the reporters visited the Mental Hospital, the South China Morning Post summarizes, "unless Government acts as a fairy godmother, and advances the necessary cash, the Hong Kong Mental Hospital will still remain an out-of-date institution in spite of the efforts to introduce the latest forms of treatment."

Fulfilling the prerequisites

1. Financial improvements
2. Governor's attitudes
 - There is no direct evidence reflecting Grantham's attitude towards an expansion in modern psychiatric services. The Hong Kong government concentrated on political and economic reconstruction after the War so that an expansion in the psychiatric services was not a priority.

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Sources

Legislative Council Hansard
South China Morning Post
CO129 files
Academic books

A "belated" modernity: after the Castle Peak Hospital

- It was a vicious cycle. The cycle begins with the Hong Kong government's reluctance, which encouraged Hong Kong people's reluctance, as mentioned. It introduced "modern" treatment for the psychiatric patients, and it also raised public attention about Hong Kong psychiatry. Unfortunately, the creation of the Hospital was a "belated" modernity because the Hospital was not up to the "modern" standard in the 1960s. The Hospital was also consistently overcrowded.
- Modernity on the surface
 - Modern treatments
 - Raised public awareness
- Limitations: Outdated and overcrowded
 - Outdated by the time it was established
 - Overcrowded remained the synonym

A "nexus of reluctance": the "power" of Hong Kong government's reluctance on the public impressions towards psychiatry

- "Practical" mentalities
The Hong Kong government empowered the reluctance among people in Hong Kong. In the nineteenth century, such "practical" mentality among the Governor and the officials was "contagious." The Hong Kong Government "infected" people in Hong Kong with a "practical" mentality. In other words, people in Hong Kong, same as the Hong Kong government at that time, supported the "practical" mentality. They were concerned with economic developments, but they often neglected the needs of the disadvantaged groups.

Concerning "practicality" and material benefits, people in Hong Kong should advocate an expansion of psychiatry. However, Hong Kong citizens was not quite aware of this. The "nexus of reluctance" among people in Hong Kong and the Hong Kong government remained unchanged by the 1970s so that mental health education programs were not so effective.

- Ineffective mental health education
Despite the Hong Kong government's reluctance, from the 1950s to the 1970s, groups of psychiatrists and celebrities played a part in promoting mental health education. However, the Association did not bring significant impacts to the people in Hong Kong because of the "nexus of reluctance." Hence, the reluctance among people in Hong Kong remained so strong that misconceptions on psychiatric patients took place. People in Hong Kong should also be blamed for being reluctant to help psychiatric patients.

The "reluctance cycle": relationship between public impression and Hong Kong government's reluctance

The history of reluctance in Hong Kong psychiatry is two-directional and dynamical in nature. It is not only a history of reluctance of the Hong Kong government because reluctance among people in Hong Kong often bolstered the government's reluctance in expanding psychiatric services.

- The first impression of "Tsing Shan" is always about madness and unusual behaviors of the patients there. *Nanhai shisanlang* was a representative example to show that people in Hong Kong often regarded psychiatric patients as either "unusually talented" or "unusually mischievous." Isolating them from the community is the best way to deal with these "unusual" patients, from the perceptive of the so-called "healthy" individuals. Hence, "unusual" bolstered the Hong Kong government's reluctance in expanding psychiatric services.
- The second impression of "Tsing Shan" is about violence. "Violence" and "psychiatric patients" were often linked together because of newspaper's reports on these cases with an eye-catching title. The confinement was one of the aims of creating the new hospital.

Hence, confinement was one of the aims of creating the new hospital. Because of the false impressions, the concept of "confinement" rooted in the minds of people in Hong Kong by the late 1960s. It had nothing wrong for people in Hong Kong criticizing about the lack of sufficient accommodation in the hospital by the 1960s, but it was awkward to me because people in Hong Kong did not re-consider the necessity of confining the patients in the hospital.

Conclusion

- The hospital's establishment is no doubt a milestone in Hong Kong psychiatry.
- From a historical perspective, isolation cannot significantly increase the chances for recovery. Community care, including peer, family and societal supports, is more important to help the mentally-ill patients. Imagination cannot help, but public acceptance helps. That is what the senior specialist in the hospital, Yap reminded us in 1964.
- Although the Hong Kong government was responsible for the reluctance among people in Hong Kong towards psychiatry, Hong Kong citizens should be blamed as well, in the meantime.
- It is common that psychiatric patients in Hong Kong were often reluctant to express themselves to the others. I am not to put any blame on psychiatric patients because they are the victims of reluctance.
- The "germs of reluctance" among the "healthy" individuals in Hong Kong is more unhealthy or destructive, than the psychiatric disorders to the patients. People love imagination. Imagine, if a "healthy" individual blames an "unhealthy" individual for being "unhealthy", is the "healthy" individual "healthy" at all?