Insanity and Immigration Control in New Zealand and Australia, 1860-1930.
Reviewed by Ruth Balint

Roughly fifteen percent of the world’s total population is believed to live with some form of disability. The proportion in refugee and migrant populations is undoubtedly higher, exacerbated by their exposure to high risk, violence and uncertainty. People who have disabilities are also among those most prone to poverty, social marginalisation, prejudice and discrimination. Yet despite various mechanisms introduced by the international community to protect people with disabilities, including the UN Convention on the Rights of Persons with Disabilities (2007), the stigma and barriers refugee and migrants face in gaining entry or asylum prevails. These barriers are practical as well as political: legislation introduced in Australia, for example, has fortified the ability of government to deport people who are non-citizens, under a policy of removal that has done away with legal processes. The policy gained some negative attention in the media in the early years of this century, when controversies surrounded the deportation of mentally ill Australian citizens Cornelia Rau and Vivian Alvarez Solon by mistake. But despite these brief moments of outrage, the government has continued to deport families and individuals it considers will impose “excessive cost” on the public purse in the long run.

Jennifer Kain’s comparative study of the attempts by Australia and New Zealand to control the entry of those commonly referred to as “lunatics” and “idiots” in the decades leading up to and following 1900 shows just how longstanding this approach to border control is. Her book is published under the imprint of Palgrave Mental Health in Historical Perspective series, one of the objectives of which is to explore how mental illness has been treated, understood and contested. Kain’s book is unusual in this sense, in that it removes the analysis from the asylum and the hospital, and instead explores these themes at the border. Here, as Kain notes, the detection and removal of “lunatic immigrants” was the job of immigration and customs officers and shipping agents with very little to no experience in how to diagnose such afflictions. This challenge, common to both countries’ border officials, frequently butted up against the political desire to attract increasing numbers of healthy, fit and white migrants to Britain’s imperial outskirts. As Kain explains, in the late nineteenth century, migrant recruiters in Britain and Ireland were expected to weed out those presumed to have “innate pauper tendencies”, at a time when pauperism was linked to traits of mental and moral instability, as well as those non-paupers that were mad, diseased or morally suspect. Some, it appears, slipped through, or became mad on the voyage, or manifested signs of madness only after arrival, thus confronting bureaucrats and politicians with the vexing problem of how to get rid of them again. But it also made them suspicious. Was Brittan in fact “shoveling out the paupers” and the ne’er do wells and dumping them on to the colonies as a way of solving their own problems?

After an introductory chapter that explores themes common to both countries, the book is roughly divided into two parts. The first three chapters examines New Zealand between 1860 and 1930, and the next three chapters focuses on Australia between the date of Federation in 1901, to 1930. This chronological approach is also marked out by shifts in legislation, and Kain pays particular attention to the politicians and public health advocates who were instrumental in attempts to exclude undesirable immigrants. Julius Vogel, colonial treasurer and NZ premier (1873-1875, 1876) is one important figure in this history. His efforts exemplified the complexity of the problem for British settler colonies attempting to build up their labour force.
and attract “good” British stock to their shores while at the same time ensuring that only those likely to become indigent were kept out. In 1873 the Imbecile Passengers Act was one of his early pieces of legislation providing the legal means for the NZ provinces to reject unwanted immigrants, but in reality it was applied unevenly and haphazardly. Migrant recruiters overseas and shipping agents were supposed to vet their passengers for any signs of illness, but as Kain shows, there were far more cases attributed to “episodic” and “temporary” states of insanity brought on by the voyage, such as women having “hysteric fits” and men displaying “frolicsome mischief”, that appeared to subside after arrival, according to port officials who hurried them through the disembarkation process. Agents – General overseas continued to assure their NZ counterparts that those who arrived mentally unfit were “perfectly sane” when they left. “The need for labour”, writes Kain, “was more pressing than standards”. At the turn of the twentieth century, a new phase was introduced in NZ’s protectionist policy, intended to close legal loopholes. The 1899 Restricted Immigration Act, later revised in 1908, made deportation central to border control, but overlapping earlier legislation and the recalcitrance of shipping agents meant that despite being strongly worded, the new policies were less effective in practice.

The situation was similar in Australia, however Kain makes the point that Australian policy makers were more concerned than their NZ counterparts with ensuring the purity of the white race, making the exclusion of the insane a secondary consideration to prohibiting non-white immigrants. Like the situation in New Zealand, it was up to ill-equipped port officials to detect mentally unfit passengers, and shipping operators still bore the financial cost of repatriating them. The insanity clause of the White Australia Policy, as the 1901 Immigration Restriction Act became better known, had little practical impact and the numbers of those it excluded were negligible. One man who was increasingly at the centre of Australian efforts to tighten immigration control was Commonwealth Medical Officer William Perrin Norris, who, Kain argues, was the man most responsible for introducing eugenics to Australian immigration policy. His “Notes and Instructions for the Guidance of Medical Referees”, based on his research into similar instructions given to American and Canadian port medical officers, was the most explicit example of his vision for combining policy with practice. He introduced a standardised method of testing for those who were “of weak or feeble constitution”, and those who were “likely to go to the wall, to become one of the unemployable owing to his or her natural weakness or defect.” Despite Norris’s detailed instructions however, such diagnoses were ultimately subject to the whim of individual port officials, and the problem of migrants “going to the wall” after arrival continued to be a problem. Norris’s attempt to inject Australian border policy with a more vigorous set of eugenic principles, such as his focus on “inherent and transmissible defects”, and his aim to impose a more stringent border policy across the whole continent, was ultimately stymied by Australia’s entry into World War One, and the delaying tactics of politicians less enamoured of Norris’s ideas. After the war these efforts were rejuvenated and by the end of the 1920s, Australia had developed a machinery of border control centred around strict selection procedures and the legal ability to deport someone up to three years after arrival. This was later increased to five years in 1932.

As with many of these kinds of histories, Kain is constrained by the archive. She gives us some snippets of individual lives that intersected with these wider forces of border control, which appear in the official record. Kain alerts us to colonial concerns in this period that the colonies were attracting “the mentally and morally substandard”, increasingly seen as a problem of older men, but it seemed to me that, on balance, young women were more regularly targeted by officials for “hysterical” behaviour and symptoms of madness. I would have liked to see more
gendered analysis from Kain on the policing of migrant and passenger madness, and whether her reading of the archive confirms this suspicion. This book adds considerable depth to other histories examining what was a defining era in the creation of Australia’s and NZ’s immigration restrictions. I am less familiar with NZ than Australia, but was struck by the fact that Australia has remained wedded to these earlier ideas and policies while NZ appears to have eradicated some of the more exclusionary aspects of its immigration policies. Kain’s forensic analysis of the ways in which ideas, ideology, ethics, policy and practice intersected in this period is a critical contribution to the history of immigration in both countries, and a welcome addition to the public conversation today on issues of mental health, tolerance towards immigrants and refugees, and the trauma of seeking asylum or settlement elsewhere.