

Quaker Architecture as an Agent of Cure at the York Friends' Retreat

Ann-Marie Akehurst

Independent Scholar/Affiliated to RIBA, England

Abstract

Early modern European hospitals evolved from religious foundations—praying and *caring* for sick people—to machines for *cure*, epitomising secularised Enlightenment architecture. The Friends' Retreat complicates that narrative: founded in 1792 near York as a 'lunatic' asylum, it became an international model for psychiatric hospitals, and Tuke's *Description* (1813) an *ürtext* in the History of Psychiatry. Quakers rejected the Cartesian dualist model—where losing one's mind reduced one to a beast. By contrast, Friends understood mental disorder as an alternative, transient and curable psychological mode; patients were temporarily incapable of hearing God's voice. The Retreat fused empirical design and a religiously inspired aesthetic in a *domus familia*, conceptualised as an agent of cure. Quaker buildings' distinctive plain style—familiar from meetinghouse interiors—facilitated meditational worship, clearing the auditory and visual channels, aiding connection with God.

Keywords

Quaker, asylum, architecture, plain, Neoplatonism, retreat, Baroque, hospital, psychiatry, Tuke

Introducing the Ground-breaking York Friends' Retreat

During a discussion in 2009 regarding the power of religion in the public sphere, philosopher Charles Taylor argued for a radical redefinition of secularism (Mendieta 2011: 34–59). Taylor aims to debunk what he calls the 'myth of the Enlightenment', suggesting epistemic distinctions between rational and religious thought are unhelpful. Though modern public institutions necessarily exclude overtly religious language from public discourse, on the grounds that it is based on a set of specific *a priori*s not shared by non-believers, Taylor argues that does



Fig. 1. South front elevation for the Proposed Retreat, consultation drawing (BIA RET 2/1/1/1(b)). Reproduced, with permission, from an original in the Borthwick Institute, University of York.

not necessarily mean that people automatically reject religious thought as lacking insight. Taylor's argument finds support with the early Religious Society of Friends who embraced complementary epistemic economies—that is, categories of knowledge—foregrounded in their innovative hospital design of the Friends' Retreat at York (Fig. 1). This article approaches this hospital from the perspective of religious Art and Architectural History, to demonstrate that while reflecting innovations in hospital planning, it fused them with long traditions of hospital and villa design. While generally attributed to its founder, the York Quaker merchant William Tuke (1732–1822), and the London Quaker builder John Bevans (1743–1809), the historiography has overlooked the contributions of the local architect Peter Atkinson (1735–1805), whose architectural knowledge would also have shaped the project.

Early modern hospitals can be characterised as Enlightenment architecture *par excellence*. During the era, they evolved from spaces offering *care* to those focussing on prevention and *cure* by embodying new understandings of illness in their designs. Moreover, they facilitated the production of medico-scientific knowledge and its dissemination by uniting physicians, surgeons, and apothecaries in one institution, where they might observe and treat patients. This paper argues the Retreat fused religious, architectural, and therapeutic traditions with current

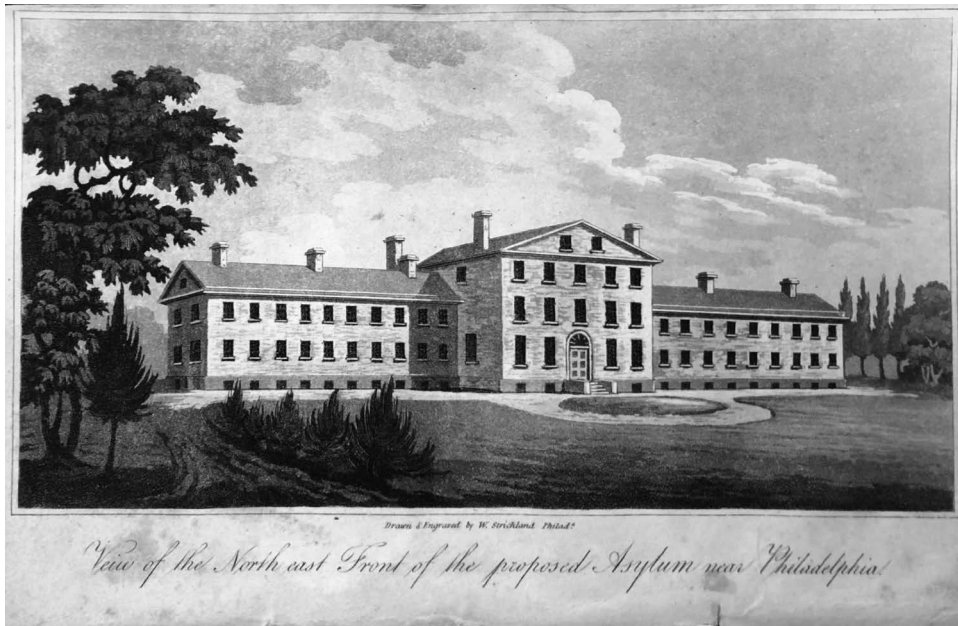


Fig. 2. View of the North East Front of the Proposed Asylum near Philadelphia, W. Strickland (1814). Reproduced courtesy of the Library Company of Philadelphia.

best practice and radical political thinking, to create an aesthetically informed space conceptualised as an agent of cure.

The Retreat's foundation stone bore the Latin inscription *Hoc fecit amicorum caritas in humanitatis argumentum*: The love of Friends made this [building] in the cause of humanity (Jones 1955: 60) suggesting from the outset a wider ambition than its provincial location implies. Much understanding of this 'lunatic asylum'—as it was then called—relies on *Description of the Retreat* (1813) written by Samuel Tuke (1784–1857) two decades after its establishment, that has become a standard text in the History of Psychiatry. Using archival material, Tuke's book addresses institutional history, fundraising, appointment of non-clinical staff, and summarises financial reports. It describes the building's design, the domestic establishment, and therapeutic régime including patient assessment and categorisation, methods of (self) control and coercion, and promotion of patient comfort. It was published in York by family member William Alexander (1768–1841), dedicated to Samuel's grandfather who founded the hospital, and was distributed in the important Quaker cities of London and Bristol. As one of the earliest accounts of the foundation and running of a psychiatric hospital, illustrated with architectural plans and picturesque views, it secured the asylum's international reputation, spawning, among others, America's first purpose-built psychiatric institution the Philadelphia Friends' Hospital at Frankford (Waln 1825: 23) (Fig. 2).

Like the hospital, Tuke's book was superficially parochial, though it pointed to French therapeutic innovation, and was to command international influence. It circulated during debates in the British parliament concerning the provision for treatment of insane persons when there was considerable interest in legislation. The 1807 Select Committee to Enquire into the State of Criminal and Pauper Lunatics in England had informed the County Asylum Act of 1808 (Jones 1955: 72–73). Responding to requests for such a work, Tuke's timely volume aimed 'in the interests of humanity and science', to help others planning similar institutions by throwing light on the Retreat's distinctive method of housing and caring for disordered people (Tuke 1813: viii). The *Description's* humane emphasis differed from medical works appearing at the time, such as Haslam's *Observations on Insanity* (1794) and his *Moral Management of Insane Persons* (1817). Tuke confirmed that despite its modest size, the establishment had 'met the approbation of many judicious persons who have had the opportunity of inspecting its internal economy and management', some reports of which were reproduced in the Appendix (Tuke 1813: 221–27).

In the Preface, Tuke cites the French alienist and father of modern Psychiatry, Philippe Pinel (1745–1826), who had argued 'He who cultivates the science of medicine, as a branch of natural history, pursues a more frank and open system of conduct; nor seeks to conceal the obstacles which he meets with in his course. What he discovers, he feels no reluctance to show; and the difficulties which he cannot master, he leaves with the impression of his hand upon them, for the benefit of his successors in the same route' (Tuke 1813: ix–x). Pinel—an atypical French doctor—supported the French Revolution and adopted a humane approach to treatment of mental disorder, now called 'moral therapy', at Paris' l'Hôpital Bicêtre and the Hospice de la Salpêtrière where he was chief physician from 1795. Pinel's *Memoir on Madness* had been read to the Society for Natural History in Paris on 11 December 1794, soon after the fall of the Jacobin dictatorship and, it has been argued, is a political appeal to the Revolutionary government to build asylums where mentally ill patients could be decently treated (Weiner 1992: 725–32). Pinel's great gesture of the heroic removal of chains from 'insane' men at Bicêtre in 1797, and at la Salpêtrière, three years later, has been demonstrated to be hagiographical overstatement (Woods and Carlson 1961: 24; Weiner 1994: 232–47). Pinel is not mentioned in the Retreat's foundation documents, and I argue the Retreat's distinctive approach emerged independently from Quaker theological culture. Nevertheless, Pinel's combination of empiricist approach, unorthodox anti-authoritarianism, and political campaigning for humane treatment, resonated with contemporary Quaker values. By aligning the charity with Pinel, Samuel positioned the very private Retreat in the wider, European context of humane psychiatric reform, and the *Description* as a campaigning document.

In England, the reporting of medical success by physicians was not replicated in the area of mental health. Like Pinel's work, Samuel's book reflected the scientific method, giving objective descriptions validated through the first-hand witnessing

of third parties, some of whose endorsements were attached in the Appendix. Furthermore, while advertising ‘the discoveries we make, or the failures which happen to us, in a pursuit so intimately connected with the happiness of our species’, he aimed through a comparative method, to elicit general laws and ‘infer the most probable means of rescuing or relieving the unhappy victims of this disease’ (Tuke 1813: viii–ix).

Partly because of Tuke’s *Description*, the Retreat has been regarded as a groundbreaking psychiatric institution because its therapeutic régime represented a new, humane attitude towards psychiatric patients. Most writing about the hospital has been conducted by social and economic historians, especially Anne Digby’s fine-grained archivally based monograph that describes the foundation and construction (Digby 1985); historians of psychiatry dedicated to its régime (Scull 1993); and Quaker historians who stress the theological underpinnings while disregarding the building (Glover 1984). They all generally overlook the ideas behind the material aspects of its Quakerly origins.

Some of the most successful writing has used social theory to address this complex project; it is a useful approach but ultimately fails to set the building in the broader religious and cultural history of architecture. Thomas Markus’ discussion of asylums related to power sets the Retreat in the context of institutional modernisation and engages thoroughly with the evolution of asylum architectural form. However, Markus relies on the plans from Tuke’s *Description* not the archival sources. While observing (Samuel) Tuke had reservations regarding the newly popular radial plan for asylums, ultimately derived in England from Jeremy Bentham’s *Panopticon or The Inspection House* (1791), he fails to recognise that Quakers, whose historical sufferings were recorded and published, would find the extension of Bentham’s carceral plans to hospital settings unacceptable (Markus 1982: 90–97).

The limitation of sociological approaches to this eighteenth-century building is an absence of historiography. Relying on the *Description*—composed twenty years after foundation—is not the only teleological pitfall that catches the Canadian sociologist Barry Edginton whose analysis assumes Tuke and Bevans set out to design a space for moral management despite the lack of concrete evidence for any such intention (Edginton 1997: 89–90). Though Edginton addresses the material environment, he articulates William Tuke’s project with Bourdieu’s social theory of *habitus*, according to which people inculcate a subjective social disposition through the selective deployment of objects that carry associations. While this addressed the creation of a total environment, it fails to consider that it was a recreation of a domestic setting, familiar to the Quaker community. In a later article, while hypothesising that the architecture must have shaped therapy, Edginton overlooks both architecture and history (Edginton 2003: 103–17). This lack of historiographical awareness means nineteenth-century interventions on the interior are considered in the same light as the original design, thereby negating the influence of specific historical context.

By contrast, Leonard Smith's recent attentive history of Georgian asylums, sets both the York Asylum and the Retreat in their national context. Smith's focus on the foundation of these new institutions and their therapeutic approach, usefully relates them to emerging social and political reform in England. While he argues the Retreat's reputation for innovation has been overstated (Smith 2013: 150; 251, n. 101), and rightly that its reputation was largely a product of Samuel Tuke's eye for publicity, he overlooks completely the Quaker culture from which it emerged (Smith 2013: 182). For instance, while arguing that contemporary asylums were alive to the need for the removal of patients from their family to a retired place some way from their home, he overlooks the detail that the Retreat was in the first instance established as a private institution by and for the Religious Society of Friends. Engagement with Quaker culture would redress the balance, with recognition the Retreat was a new but sequestered Quakerly family home (Smith 2013: 151).

This article attempts to synthesise such social and confessional approaches, with Art and Architectural History that illuminate the hospital, its interior, and landscape. It argues that, in keeping with Quaker culture, the Retreat was, like all Friends' buildings, outwardly anonymous and inwardly distinctive. It suggests that the link between the carefully crafted asylum and its approach was spiritual rather than sociological, arguing it was conceptualised as a private place of worship, its spaces intended to aid recuperation by enabling meditative prayer for patients' reconnection with God. However, doing this requires very broad research parameters: first we will need to consider early modern Friends' theology that defined itself as oppositional to much society had to offer. This ambivalence towards contemporary society was reflected in therapy and design poised between the past and the present; its radical reforming agenda drew on long cultural traditions. The Retreat's therapeutic environment, that supported mindfulness as an alternative mode of psychiatric cure, will be seen as an idiosyncratic interpretation of prayer and contemplation in traditional hospitals. The building will be related to contemporary hospital design and located within the complementary architectural traditions of the classical villa retreat, and English puritan restraint and simplicity. The moral dimension of Friends' design choices will be located in the context of an enduring anti-rhetorical style that self-consciously resisted the loquacity of contemporary Counter-Reformation Baroque Art and Architecture. Indeed, for an article on a Quaker 'lunatic' asylum, there will be rather a lot about Art, Architecture, and History that will extend the available literature about this important institution. Only in this way we can fully appreciate the Retreat's architectural singularity and grasp the distinctive praxis and aesthetics conceptualised as agents of healing.

Early Modern Theological Culture

First, it is important to dispel satirically constructed clichés of aesthetically challenged Quakers and their peasant barns that appeared in seventeenth-century anti-puritan prints. They caricatured the Dutch painter Egbert van Heemskerck's lost oil painting 'Quaakers Vergadering' (The Quaker Meeting) and remained popular throughout the eighteenth century (Hull 1938: 17–32; Mount 1993: 209–28). In what has been described as 'the great historic picture of primitive Quakerism', a woman—elevated on a tub—ecstatically preaches to an attentive congregation. She is fronting a large window that illuminates a drab room, arguably the Bull and Mouth Meeting House in London's Aldersgate Street, or a Netherlandish location in Haarlem, Rotterdam, or Amsterdam (Fig. 3). Early Quakers' resistance to being painted has left van Heemskerck's images—and the many prints they inspired such as Jan van Visscher's 'The Quakers' Meeting'—to shape our understanding of early Friends' material culture. These rare depictions—conflated with van Heemskerck's oeuvre that included bawdy, wild, and grotesque subjects—have coloured the historiography. This Puritan sect emerged in the late 1640s. Though largely drawn from the middling sort, they actively encouraged travel and education; and early leaders, who codified the belief-system, were connected with scholars associated with Emmanuel College, Cambridge (Goldie, Oxford Online DNB, 2005). These scholars focussed on Plato's *Republic*, that suggested the form of 'the good' is a kind of Superform, responsible for the others and informing the notion of The One. Subsequently, Plotinus refined the route to salvation as being through assimilating, or uniting, with The One. Those Platonists—sometimes called Neoplatonists—who maintained Emmanuel as a puritan centre influencing Quaker thought, argued knowing is intuitive recognition of archetypal truths that subsist in the divine mind.

Early educated Quakers associated with people who held these ideas that were congruent with Quaker thought. William Penn (1644–1718), the Quaker leader and founder of Pennsylvania, was a friend of Anne Conway, Viscountess Conway (*née* Finch) (1631–79), a Platonist who converted to Quakerism at the end of her life; indeed, recent research argues she should be regarded as an early Quaker theologian (Head 2017: 175). Theologically trained Scots Quaker Robert Barclay spent much time with the theologian George Keith (c.1638–1716), who published the first apology for Quakerism, *Immediate Revelation* (1668). In London, Keith encountered the foundational Quaker figures of Penn, George Whitehead (1637–1724), and George Fox (1624–91), with whom he worked for two decades alongside Cambridge Platonist Henry More. He, like Penn, was part of Conway's intellectual circle at Ragley Hall in Warwickshire. Together, Keith, Fox, Penn, and Barclay travelled to the Netherlands and Germany in 1677 (Hull 1938: 21–23). It seems highly likely, then, that the common ideological links between Platonism and Quaker thought emerged during this time when Quaker leaders were formulating theology and praxis. Furthermore, design



Fig. 3. Egbert van Heemskerck, *A Quaker's Meeting*; after E. Heemskerck, Mezzotint, (1675–1724) BM 1877,0609.77 © The Trustees of the British Museum.

historian David Brett argues for other sophisticated influences in the intellectual origins of this distinctive belief system: the late-medieval *devotio moderna*, a sect from the Low Countries who refused taking vows; and the Family of Love: an Elizabethan secret society, connected with the highest levels of intellectual culture and poetical influence in the court whose pacifist theology shaped Quaker attitudes (Van Engen 2008; Marsh 1994: 248; Brett 2004: 133). Early persecutions produced among Quakers a Quietist and theologically stagnant phase, with an extraordinary degree of congruence between Quakers internationally until the nineteenth-century Evangelisms. Furthermore, at the end of the eighteenth century when the Retreat was founded, educated Quakers, like other political radicals, were aware of current events chiming with the mid-seventeenth-century English civil wars. Consequently, late-eighteenth-century Quakerism channelled its seventeenth-century puritan origins, while its radical therapeutic régime was consciously related to Revolutionary French notions of psychiatric care. The Tuke family, who founded the Retreat, were within this radical tradition; as well as advancing psychiatric care, they established schools, wrote and published, and John Woolman the anti-slavery campaigner was nursed at a family home in York until his death on 7 October 1772.

Christianity is a religion of waiting for the return of the Messiah; seventeenth-century theories of history, of decay, of progress, and the classically influenced cyclical interpretation of the passage of time, were incorporated into a providential conception of time bounded by the Creation and the Last Judgement (Guibbory 1986: Introduction). Initially, Quakers had believed they inhabited the unfolding Endtimes, in which the Second Coming was imminent. As Pink Dandelion puts it, ‘They were living out a realizing eschatology’ (Dandelion 2007: 36–37). The fall of the Cromwellian régime in 1659, and the Endtimes’ non-occurrence, proved a source of cognitive dissonance reconciled by rejection—as worthless—of worldly things. Dandelion argues charismatic founder George Fox’s following theses formed the basis of a complete behavioural code throughout the following century:

Friends keepe the ancient principles of truth:

Att a word, in all your callings and dealings, without oppression (*keep your word and do not make undue profit*).

to the sound language, Thou, to everie one.

your testimony against the worldes fashions.

Against the old mashouses, and their repairinge.

Your testimony against the priests, their tythes and maintenance.

against the world joyning in marriage, and the priestes, and stand upp, for godes joining.

against swearinge, and the worldes manners, and fashions.

And against all lousenes, pleasures and profanes, whatsoever.

and against all the worldes wayes, worshippes, and religions, and to stand up for gode. (Dandelion 2007: 46)

This oppositional stance characterised much early Friends' behaviour; in this context it is expressly the rejection of much society had to offer that helps account for both their innovative position regarding mental illness, and their distinctive aesthetic.

In the second generation, Robert Barclay's *Apology* codified this metaphysics: 'We do distinguish betwixt the certain knowledge of God, and the uncertain; betwixt the spiritual knowledge, and the literal; the saving heart-knowledge, and the soaring airy head-knowledge' (Barclay 1703: 20). In these complementary epistemic economies, knowledge was derived from contrasting sources: 'outward' denoted the conventional, human, and material, while 'inward' denoted a transforming personal relation to Christ. The term 'epistemic economy' here refers to an intellectual system described by the historian William Christie as 'marked by the expansion of knowledge-producing or knowledge-disseminating occupations' (Christie 2013: 115–38). The Religious Society of Friends were enthusiastic in publishing and disseminating records and analysis of their religious experiences, advice, and engaged in the production of scientific knowledge (Cantor [n.d.]: 3). According to the doctrine of Inward Light, scripture was to be interpreted, via an auditory channel through which God spoke to those prepared to listen, so expectant waiting was largely silent. Natural philosophical enquiry was encouraged, producing outward knowledge for education, medicine and recreation; its scepticism and utility resonating with Quaker values. David Brett points up the important relation between these two aspects, arguing it was:

only in a society in which Plain Style had become normative could the aesthetic values of precision technology and science help to form a dominant canon of taste and pass over into buildings, furniture, silverware, clock design and clothing. This more or less unconscious connection, which was *habitual* to the puritan and dissenting traditions of Great Britain and other Protestant societies, was exported and developed further across the Atlantic. (Brett 2004: 170)

The connection between theology, plainness, and science is attested in the early Royal Society of London For the Improving of Natural Knowledge—more commonly the 'Royal Society'. There experimental knowledge was produced and exchanged using plain language advocated from its inception (Sprat 1667: 111–15). This then nuances Taylor's argument that distinctions between rational and religious thought are unhelpful in this case; rather, Enlightened Quakers held two epistemic economies in creative tension: Inward Light balanced the Natural, visual and sensory appreciation of God's work, stimulated the search for Truth and aided recuperation. Put crudely, early Quaker culture meshed radical thinking with entrenched conservatism, and private devotion with public action. As worldly success challenged the doctrine of Inward Light—and alluding to John

17:14–16: ‘I have given them thy word; and the world hath hated them, because they are not of the world, even as I am not of the world. I pray not that thou shouldest take them out of the world, but that thou shouldest keep them from the evil. They are not of the world, even as I am not of the world’—many navigated a path following Fox’s exhortation ‘live in the world but not of it’. The eighteenth-century Irish Quaker William Edmundson identified the tension between the outer and the inner worlds:

Then the great Trading was a Burden, and great Concerns a great Trouble, all needless Things, fine Houses, rich Furniture, and gaudy Apparel was an Eye-sore; our Eye being single to the Lord, and the Inshining of his Light in our Hearts, that gave us the Sight of the Knowledge of the Glory of god, which so affected our Minds, that it stained the Glory of all earthly Things, and they bore no Mastery with us, either in Dwelling, Eating, Drinking, Buying, Selling, Marrying, or giving in Marriage, the LORD was the OBJECT of our Eye. (Edmundson 1774: 360)

Despite Quakers’ apparent worldly rejection, they were nevertheless products of their culture. The distilled collective wisdom and experience of the Society was, and continues to be, published as a reminder of the corporate insights of the community (Religious Society of Friends, 1995–2019: online). This expanding corpus of *Advices*, as they are known, conferred flexibility, permitting adaptation to changing social circumstances, and the late-eighteenth-century people who designed the Retreat channelled architectural and cultural tradition as well as architectural innovation.

Traditional Hospitals, Devotion, and Contemplation

In Christendom hospital history intersects with Christian history, meaning the Protestant Reformation of the sixteenth century shaped subsequent hospital form and function in north-western Europe. Christian-inspired Art and Architecture were central to early hospitals. Mediaeval ideas about the aetiology of disease were partly based on a world view in which sin and fate were equally considered as physical causes. Consequently, cures were as likely to be shaped by the patients’ and doctors’ beliefs as any empirical evidence, and remedies were subordinated to spiritual intervention. Prompted by the Christian injunction to enact corporal works of mercy, bodily and spiritual care was consequently the province of religious orders and was enacted in a variety of spaces for social care in monastic institutions (Akehurst 2017: *passim*). Alms were provided for poor people, and the care for sick patients, lodged in multiple-occupation beds, drew on spirituality. Following the mediaeval episcopal practice of building hospitals near cathedrals, from the thirteenth century in Italy, new hospitals became located in urban as well as monastic settings, and during the seventeenth and eighteenth centuries many towns founded institutions incorporating a cruciform ground plan, a colonnaded court, and a loggia. An altar located in the centre of each cross, sited



Fig. 4. Rogier van der Weyden, *Het Laatste Oordeel* or *The Beaune Altarpiece*, Hôtel-Dieu de Beaune (fifteenth century). Wikimedia Commons.

under a cupola, like the cruciform plan itself, reflected the continued centrality of Christian spirituality to the healing process, while the symmetrical design lent itself to the customary separation of the sexes (Pevsner 1976: 139–50).

With limited capacity or desire to cure patients, and acknowledging that disease was sometimes interpreted as God’s punishment for sin, traditional hospital wards focussed on religious murals and altarpieces prompting patients’ devotion, such as *The Last Judgment* by Rogier van der Weyden (c.1400–64), that was commissioned in 1443 for the Chancellor of the Duchy of Burgundy at the Hôtel-Dieu de Beaune in France and remains *in situ* (Fig. 4). That immense polyptych altarpiece was positioned on the high altar within view of the beds of patients too ill to walk. Its purpose was to remind people of their faith and to focus their dying thoughts towards God. When the altarpiece was closed, healing—represented by Saints Anthony and Sebastian—reassured through intercessory functions with the divine. When the shutters were open, the viewer was exposed to the expansive Last Judgment where Christ sits behind the Archangel Michael who analytically weighs naked souls and advances to judge the viewer. The alternatives were stark: Heaven and salvation, or Hell and damnation. The way to Heaven is denoted by a gilded church with a gate that resembles that outside the Beaune hospital: the hellscape conveys interior torment.

The altarpiece (1512–16) painted by Nikolaus of Haguenau and Matthias Grünewald for the Monastery of St. Anthony in Isenheim, in Alsace, that specialised in caring for sufferers from plague and treated skin diseases, offers a site-specific message. Appropriately, its closed wings displayed the Crucifixion. There, an emaciated Christ, pitted with sores, wracked by pain, is similarly

flanked by Saint Anthony, the patron saint of victims of Saint Anthony's fire, and Saint Sebastian, who was invoked to ward off the plague. The accompanying symbols across the altarpiece reinforced the understanding of suffering as both a punishment and a route to redemption. Significantly for our purposes, in art historian Andrée Hayum's judgement, it 'attempts to dramatise the phenomenon of mystic revelation', a preoccupation of religious art, as we shall see (Hayum 1977: 501–17; 516).

But this was a Catholic model; after the Protestant Reformation, in northern Europe, charitable activities formerly administered by the Catholic Church were replaced by Community-organised voluntary relief for poor people in alternative spaces for social care. New, empirically generated understandings regarding the transmission of disease in confined populations, and the importance of through ventilation, circulated among through the Republic of Letters, internationally informing new designs (Stevenson 2000: 13–14). During the seventeenth century, France led the way with sanitary planned hospitals, balancing Catholic tradition and new thinking regarding the need for separation and segregation aiming to control contagious disease. In particular, the Hôpital St Louis and St Roche developed with two discrete hospitals separating infected from clean patients (Akehurst 2019: 101–02). Responding to such ideas, northern hospitals became temples to Natural Philosophy and Medicine, where the altar was gradually replaced by the anatomy table; the celebrant by the surgeon; and the architectural design reflected faith in science rather than faith in God.

Hospital chapels serve to illustrate this point: in England, during the Protestant Reformation, the 1530s Dissolution of the Monasteries provided for the suppression of religious hospitals. Some were re-endowed by private benefactors, but between the sixteenth and eighteenth centuries only five large 'hospital' institutions remained in the country, having been transferred to the authority of the City of London Corporation: St Bartholomew's, St Thomas'; Bethlem (Bedlam)—an asylum; Christ's Hospital—a school; and Bridewell—a penitentiary (Stevenson 2000: 14). St Bartholomew's and St Thomas' in London were conspicuously established close to the cathedral of St Paul's, and the Augustinian Priory at Southwark respectively, with churches forming part of the hospitals' complex. Since the Church of St Bartholomew the Less remained within the hospital precincts, James Gibbs' eighteenth-century remodelling with four separate pavilions delimiting a court, did not include a chapel (Akehurst 2019: 98).

In describing new, post-Reformation hospital typology we must distinguish between palace institutions and publicly subscribed, scientifically informed voluntary hospitals that became prevalent from the establishment of the Westminster in 1720. Martial alms houses were designed by Christopher Wren (1632–1723) at the Royal Hospital Chelsea (1682–92), and the Royal Hospital for Seamen Greenwich (from 1695). Adapting the European palatial tradition of long single pile ranges delimiting *cours d'honneur*, spectacularly represented by Les Invalides in Paris, Wren placed the chapel centrally (Cruickshank 2004: 20; Bold

2000: 100–02). At Chelsea it occupied the western arm of the north wing that ran across the Main Court. It flanked the vestibule under the Octagon Portico, mirroring the Dining Hall on the eastern arm, and was conceived of as a military temple (Cruikshank 2004: 42). At Greenwich, though originally a freestanding structure, the chapel (1746–47) finally occupied a terminal pavilion, under the east cupola, mirroring the Painted (dining) Hall, and described as appropriate for a national building (Bold 2000: 116; 166; Stevenson 2000: 77, fig. 26). This is unsurprising: Wren was a Royalist, the nephew of a bishop, and the architect chosen to rebuild St Paul's cathedral and fifty London City Churches after the Great Fire of 1666 (Colvin 2008: 1151–65). These hospitals were national statements of Royal beneficence and their chapels magnificent ceremonial spaces for the enactment of patriotic services. This practice continued in martial settings: the naval hospital at Minorca, and at Stonehouse retained a chapel as a centrally placed aesthetic focus (Akehurst 2010: 131; Akehurst 2019: 130).

By contrast, voluntary hospitals sometimes pragmatically adapted former buildings as a villa at St George's, Hyde Park Corner, and in a former brewery in Bristol (Stevenson 2000: 132–41). Though some institutions originated in houses, they quickly relocated to purpose-built structures responding to emerging understandings of the aetiology of disease. Commissioners constructed new buildings as at Bath, and the York County Hospital (1745), reflecting the salubrious U-plan that facilitated cross-ventilation through the buildings. In the latter case, the chapel was designed as a multifunction space that doubled as a ceremonial room. In the Edinburgh Infirmary the operating room served the same purpose: pragmatically equating surgical and entreating interventions. Reflecting the overlapping practical requirements of these spaces, at Gloucester, a projecting canted bay contained a Committee Room, a chapel and an operating theatre stacked vertically (Stevenson 2000: 147). What seems clear is these were not removed, consecrated spaces.

Hospital painting persisted and evolved in Protestant England: at Greenwich, the Dining Hall was sumptuously decorated by James Thornhill (1675/6–1734), celebrating with allegorical, mythological, historical and contemporary figures, loyalty to Britain's maritime and trading successes through scientific, cultural, commercial, and trading achievements. At St Bartholomew's, William Hogarth reinforced the hospital's venerable status as London's longest enduring infirmary and the City's counterpart to Greenwich, through murals of the *Parable of The Good Samaritan* and of *The Pool of Bethesda*. But despite their religious subject matter these were not devotional aids: rather, they adorned the Great Staircase, reminding the Governors of their duties *en route* to the Great Hall.

So, while early modern hospital chapels reflected the broader Christian social context, devotion—when it was observed—was no-longer integral to the therapeutic régime. Indeed, in the later eighteenth century, regarding London hospitals generally, the social reformer John Howard (1726?–90), reflected on his inspections: 'I have never found any clergymen administering consolation and

admonition to the sick; and prayers are usually attended by very few' (Howard 1789b: 36). The London Hospital in Whitechapel Road was an exception: 'Here is a large chapel in which divine service is performed twice every Sunday; and prayers are read three days in the week' Howard recorded. In the Introduction to his volume he recommended that a clergyman be appointed to say offices on Sundays and holydays in London prisons and hospitals generally (Howard 1789b: 18; xi).

'Lunatic' asylums were different again. Robert Hooke (1635–1703) the Curator of Experiments of the Royal Society understood the importance of circulating air to good health; as the architectural historian Christine Stevenson observed: 'Hooke and Wren found out as much about air's significance to animal functions as anyone then alive' (Stevenson 1996: 263). His palatial single pile Bethlem rebuilt in 1676 for the City of London on the edge of the open ground of Moorfields, became a model (Stevenson 1996: 260). Its long wings, galleries, and unglazed windows addressed the need for light and salubrious ventilation, and limited risk through individual 'cells' and the adoption of fire-retardant vaulted ceilings (Stevenson 1996: 256). We know Bethlem was built without a chapel since Howard criticised its lack (Howard 1789b: 33). This was also the case at London's second asylum, St Luke's, Old Street where Howard suggested its inclusion would be beneficial for recovering patients (Howard 1789b: 35). Even the plan for James Lewis' new Bethlem in Southwark of 1815 does not show a chapel (Stevenson 1996: 265). Regional 'lunatic' asylums followed hospital typology regarding safety considerations. For instance, York Asylum (1777) resembled Leeds Infirmary (1768–71), recently designed by John Carr and described by Howard as 'one of the best hospitals in the Kingdom' (Wragg 2000: 172; 231–32). But though Leeds Infirmary included a chapel, York Asylum comprised patients' accommodation, professional offices, and a Committee Room that doubled as a chapel, rather like the multifunction space at York County Hospital (Hargrove 1818: 621). We can see then that the requirement for religious solace, and a space in which to worship, were marginalised in favour of professional spaces, but hospitals were never exclusively secular, as the provision of chapel space suggests. The Retreat too did not have a chapel, but reflecting Quaker belief that all space was equally sacred it was in its entirety a removed space for religious contemplation, as we shall see later.

Establishing the York Friends' Retreat

Situated at the intersection between Christian charity and Natural Philosophical empiricism, and framing encounters between impoverished patients and their benefactors, hospital—and especially asylum—architecture had become an aesthetic battleground. London's notorious Bethlem Hospital was celebrated and satirised as a palace for 'lunatics', and debates regarding luxury and decorum influenced attitudes towards asylum appearance. London's St Luke's, with its blind walls, was resultantly austerely utilitarian (Pevsner 1976: 148–50; Stevenson

2000: 85–105; Stevenson 2013: 219–57). In northern England, York Asylum's resemblance to a country house invited criticism as an ostentatious waste of public money, provoking the founding of the York Friends' Retreat (Akehurst 2009: 196–201).

Prior to systematic approaches to mental disorder, the treatment of mentally ill people was often influenced by a public order imperative to contain and control, so across Europe from the Renaissance, mentally ill people found themselves confined. From the seventeenth century, René Descartes' *Cogito, ergo sum* formulation placed sufferers on the wrong side of the definition of human, validating their treatment as animals. In arguing that architecture embodies knowledge and meaning, architectural historian Alberto Pérez-Gómez emphasised, 'humanity is not a Cartesian Machine' (Pérez-Gómez 1987: 58). This notion would have resonated with early Quakers who also rejected the Cartesian dualist mind/body model in which to lose one's mind reduced one to a beast. The historian of mental illness, Andrew Scull, speculates that the fact that neither Bethlem nor St Luke's possessed a chapel for the patients reflected their ontological status, 'deprived of the divine attribute of reason, the God-given quality which distinguished man from the brutes, the insane were presumably incapable of communion with the Deity' (Scull 1993: 19). Such conventional understanding of mental illness licensed the maltreatment of psychiatric patients in asylums where they might be restrained by chains or other devices and left in their own squalor.

This can be illustrated with the case of the York Asylum that provided the context for Samuel Tuke's publication of the *Description*. A fire in 1813 triggered concerns regarding the closed nature of the Asylum. It resulted in the decision of forty gentlemen—including Samuel—to pay the twenty pounds' subscription qualifying them as asylum governors and granting automatic rights legitimately to inspect the asylum. Their subsequent testimony suggested patients were subjected to whippings, sexual and physical abuse, and neglect. The notionally luxurious asylum was overcrowded, and accommodation was damp, gloomy, and ill-ventilated. Anne Digby succinctly dramatised the events:

In March 1814, Higgins visited the asylum unexpectedly in the early morning and discovered the existence of four hidden cells. In these four 'low grates', only eight feet square, and inches deep in excremental filth, thirteen old women had spent the night. This dramatic discovery following measures already taken to improve conditions at the asylum seemed to suggest that abuses were so intractable that they could only be overcome by a complete overthrow of the institution's *ancien régime*. (Digby 1983: 224)

Events as this reflected an increasingly outdated view of mental illness; they advanced by contrast the Tukes' reforming campaign and reinforced in the increasingly sentimental public mind the abuses some patients were subjected to.

By contrast, in Quaker mystical theology, unmediated thought kindled religious ecstasy; mental disorder was understood as an alternative, transient, and crucially

curable psychological mode where patients were temporarily incapable of hearing God's voice. One French traveller witnessed one participant at a meeting:

After long blowing his breath on my face, spoke for about half an hour; all his expressions were interrupted by new puffing and blowing, with his eyes shut, and his hands in his sleeves; he had the air and tone of man that walks in his sleep. (Grosley 1772: 120)

Another Frenchman described Friends as working 'themselves into a state of giddiness with intense thinking' (Faujas-de-St. Fond 1799: 120). Evoking scripture, Friends endeavoured to recognise God in every person. Sarah Grubb (1756–90), the daughter of Retreat founder William Tuke, writing in November 1781, characterised the human condition and evoked the ancient notion of the holy fool:

To be stripped of ourselves, to be simple, to be fools in our own eyes, and in the eyes of others, are experiences not pointed to by our own dispositions, but are indisputably the way to that kingdom which flesh and blood cannot inherit. (Grubb 1792: 320)

This understanding underpinned a distinctive attitude towards sufferers as not only human, but potentially sanctified. Social withdrawal—or retreat—for patients to reconnect with God, was therefore therapeutic.

The Retreat's building accounts—along with the building itself—remain, and confirm it was established in 1792 and built on an extensive hilltop site overlooking the City of York a mile away. It was funded by a national Friends' subscription and conceived by a trinity of designers: its founder, Quaker tea merchant William Tuke; London Quaker builder John Bevans; and York architect Peter Atkinson. Openness to new ideas was commonplace in Quaker culture, and together the design team distilled best current theory and practice, visiting George Dance's recently completed St Luke's, and examining John Howard's published advice regarding hospital design that they tried to follow. These sources advocated a central administration block facilitating patient surveillance, opposing windows for cross-ventilation across long wings containing airing galleries for patient exercise. Letters and pencil markings on the Retreat design drawings show members of the Quaker community contributed ideas to modify the designs.

Space does not permit a full discussion of the hospital's garden setting here other than to observe that designers repositioned service apartments, avoiding a 'nauseous view', and the large windows in patients' rooms and sitting rooms had garden outlooks (BIHR, RET 2/2/1/1). The gardens—planted before building began—were filled with trees and shrubs affording year-round botanical interest. Natural Philosophy—what might now be called 'Science'—had its origins in the desire better to understand God's creation through close observation. For this reason, many Quakers engaged intellectually with Botany and gardening for medicine and recreation. Clare Hickman's study of Brislington House in Bristol, a private asylum for wealthy patients, attentively demonstrates how elite

nineteenth-century asylum landscapes, informed by John Locke's 1690 *Theory of Association*, and Edmund Burke's *A Philosophical Enquiry into the Origin of Our Ideas of the Sublime and Beautiful* (1757), adopted picturesque gardening styles encouraging patients actively to view and interact with Nature (Hickman 2005: 48; 50; 57). In common with the Retreat, this approach retained patients' social class environments enabling speedy rehabilitation when cured. Hickman persuasively argues the mechanism of therapy was re-education of the imagination and emotions through reprogramming with correct associations, and the stimulation of appropriate emotional responses. While Hickman acknowledges Quaker notions informed some interventions, she is uninterested in pursuing the theological particularity. (Hickman 2005: 53). I have argued elsewhere that the Retreat's fashionable serpentine paths around the gardens, facilitated making a puritan peregrination in which the subject reconnected with God through mediation (Akehurst 2020, forthcoming).

Friends were concerned patients' views should not be impeded since they contributed to the overall therapeutic environment. The Retreat was 'right ordered', that is built according to Quaker social norms of financial transparency and collaboration, thereby transforming attitudes towards the practice of architecture as a vehicle for God's work (Akehurst 2010: 91). This empirically informed, hospital design, created a *domus familia*, a domestic religious space as discussed in the next section.

A Classical Villa and Holy Agriculture

One scholarly lacuna this article attempts to address is of the relationship of the Retreat to wider Architectural History. The collaborative design process guaranteed Quaker norms and ideas would be observed by employing the Quaker builder Bevens. However, these processes were also filtered through the professional practice of the local architect Peter Atkinson, who acted as executant on the ground in York. Atkinson—John Carr's business partner—had professional architectural experience and drew the working plans that remain in the Borthwick Institute for Archives at the University of York, that is adjacent to the Retreat.

Atkinson's architectural knowledge of building types wider than asylums was also important in designing an exterior that sat anonymously in York's pastoral suburbs. Architectural classicism is controlled by notions of decorum, that is, appropriateness to purpose, status and situation. The Quaker preference for vernacular building elevations modestly blending in with local building traditions asserted the privacy of the space, intentionally resisted architectural loquacity, and chimed with notions of decorum. From the late seventeenth century, York had seen the construction of many classical town houses so that by 1792 a subdued brick classicism had become the local urban vernacular.

The Retreat's location was—like many hospitals—suburban, just outside the city. Tuke bought a large site with space to establish gardens and grow provisions.

The composition and rural setting channelled contemporary notions that hospitals were ideologically country villas. Sixteenth-century Italian Humanist villas that embodied personal moderation, withdrawal, and *santa agricultura* (holy agriculture), were known of in the eighteenth century. In the sixteenth century, the Venetian nobleman Alvise Cornaro (c.1467–1566) had extolled the benefits of living long and well with sober moderation. His discourses were widely republished in translation in the eighteenth century; the essayist Joseph Addison (1672–1719) declared them written ‘with such a spirit of cheerfulness, religion and good sense, as are the natural concomitants of temperance and sobriety’ (Cornaro 1770; Addison 1711). Familiarity with the classical tradition is not fanciful in this context: William Tuke retained knowledge of Vergil’s *Georgics* that celebrated rural life well into his old age, and Atkinson’s architectural experience would have acquainted him with Renaissance architectural models. Contrasting with Palladian-inspired grandiloquent English country houses such as those designed by John Carr, and replicated by his York Asylum, were more utilitarian working farmhouses with flanking *barchessa* (barn) wings, housing agricultural services, constructed of brick and plaster, that settled into the countryside. The conservative nature of Italian Renaissance villa life chimed with the backwards-looking aspects of Quaker culture, counterpoising the modern influences of new hospital design. The Retreat, with its central block capped with a pyramidal roof, was rigorously symmetrical, flanked by wings housing an airing galley and patients’ rooms. The proportions were classical, but the only ornament was a simple Doric doorcase; the most utilitarian of the classical orders and appropriate for a charitable institution, as Wren had used at Chelsea. The application of classical models dignified the inhabitants, both the patients and those who cared for them, designated ‘the family’. In this way the asylum fused sanitary building plans and the traditional salubrity of rural family life, underlined by a classicising Latin inscription on its foundation stone (Jones 1955: 60) (Fig. 5).

The Retreat’s classicism decorously articulated Quakerly restraint in the York vernacular, while its location, a mile outside the city walls, meant its domestic farmhouse typology was entirely appropriate. Maintaining the domestic ethos, and in contrast with conventional public hospitals, no offices were appointed for a Physician, Surgeon, or Apothecary. Instead, the arrangement of rooms in the central block resembled farmhouse planning—substituting public offices with a dairy, parlour, and the kitchen, comparable with the plan of a Yorkshire farmhouse (Morris 1750: plate 33; Martins 2002: 70–71). The contemporary farmhouse Ellenthorpe Hall was designed by Atkinson’s partner, John Carr for himself (Wragg 2000: 140). The kitchen—which in contemporary medical institutions occupied the building’s periphery as at the London Hospital—was central (Stevenson 2000: 145; Lidbetter 1979: 65). The doors provided axial views for supervisory purposes as Howard recommended. The closeness of patients to domestic activity manifested belief in hard work and discipline, aiding redemption and cure, while facilitating surveillance.

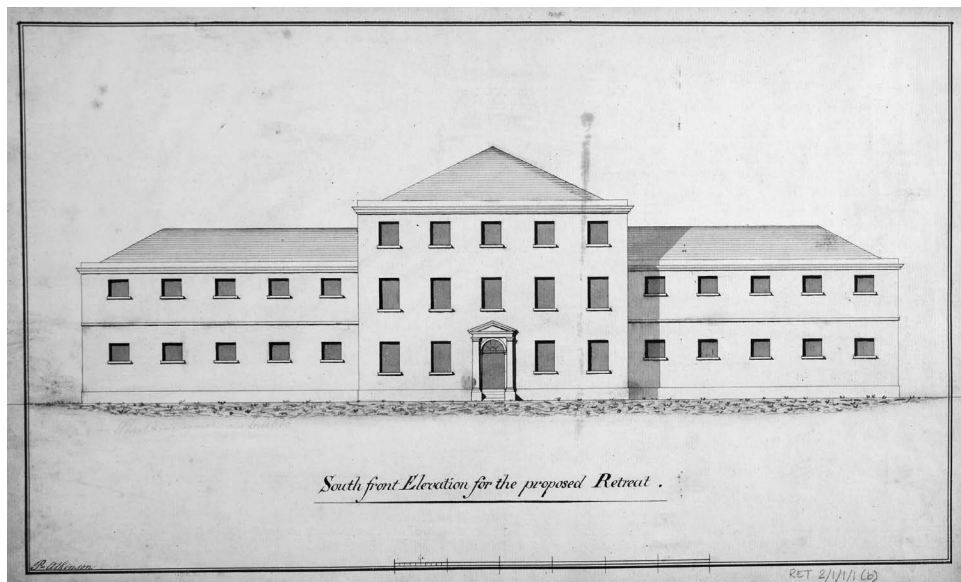


Fig. 5. Perspective View of the North Front of the Retreat near York, Peter Atkinson the Younger, 1812 (BIA RET 2/1/2/1), subsequently published in Samuel Tuke, *Description of the Retreat: An Institution Near York, for Insane Persons of the Society of Friends* (York, 1813). Reproduced, with permission, from an original in the Borthwick Institute, University of York.

The Retreat appeared as a farm not a prison and was interpreted as such at the time. In 1798, soon after opening, the Genevan physician Charles-Gaspard de la Rive (1770–1834) who specialised in the treatment of mental illness, visited the asylum and his comments were recorded:

Cette maison est située à un mille de York au milieu d'une campagne fertile et riante: ce n'est point l'idée d'une prison qu'elle fait naître, mais plutôt celle d'une grande ferme rustique, elle est entourée d'une jardin fermé [This house is situated a mile from York, in the midst of a fertile and cheerful country; it presents not the idea of a prison, but rather a large rural farm. It is surrounded by a garden]. (Tuke 1813: 222–23)

This was the original objective of the founders who, perhaps recalling London's recently constructed cyclopean Newgate Prison (1769–77), articulated the sole aesthetic consideration was the asylum should not resemble a prison because 'if the outside appears heavy and prison-like it has a considerable effect upon the imagination' (BIA RET 2/2/1/1). Contrary to contemporary nomenclature, patients inhabited a 'room' not a 'cell'. Surveillance of patients for the safekeeping of all concerned was agreed to be crucial in asylums, so while reconnecting with God, Retreat patients were protectively overlooked (Howard 1789: 64).

Plain Architectural Style

Friends' desire to be 'in the world but not of it' was reflected in Quaker buildings: though the exteriors were generally indistinguishable from local building style, the interiors responded to the private theological aesthetics of austerity. This section will demonstrate that the plainness does *not* denote lack of sophistication. Though the Retreat's interiors have been substantially changed it is important not to use anachronistic photographic evidence as a proxy. Contemporary prints, such as Egbert van Heemskereck's *Quaker Meetings*, and the survival of many rural meeting houses in an undisturbed form, all suggest the interiors, in common with other Quaker buildings, would have retained plain wainscoting and whitewashed plasterwork (Mount 1993: 209–28). This chimed with contemporary recommendations for whitewashing surfaces to maintain cleanliness in prisons (Howard 1789: viii, and *passim*). In the correspondence between Tuke and Bevans there is concern that the walls should be thick and sturdy (BIHR, RET 2/2/1/1). In the New Year of 1794 Bevans counselled waiting until there was sufficient money to execute a thorough job, rather than a cheap shoddy one (BIHR, RET 2/2/1/1). The deal floors of the patients' rooms and galleries, and the stone stairs, were both features of meeting house aesthetic, and a reflection of Quakerly desire for quality, because it was prudent and secure, and stone was a good precaution against fire.

Additional to the garden views and walks, the plain interiors embodied a theology shared by patients and carers alike. Historian of American Quaker material culture, Susan Garfinkel addresses the ontological difficulties of reconciling Quakerism's outward manifestations of an inward belief system. She argues 'plaining'—as it was called—was a way of being in the world, while keeping the world at a distance, enforcing community cohesion (Garfinkel 2003: 53). Going beyond utility was socially destructive pride: architectural display certainly goes beyond utility and from the Declaration of Indulgence (1688) permitting Friends to build, sophisticated urban Quakers self-consciously rejected it, preferring interiors that mirrored their ecclesiology. As Frederick B. Tolles eloquently expressed it: 'the Quaker stripped his worship life down to the stark simplicity of silent communion with God in a bare meeting house' (Tolles 1959: 492). One example was Gracechurch Street in the City of London that served the thriving Quaker business community, where Friends mingled piety with prosperity and earned reputations as sober, honest tradesmen. It dramatises this paradoxical relation: part of, but not dependent upon, imperfect worldly society.

Quakers did not engage with architectural theorising before the success of the Retreat, so here we must look to Friends' experience in creating their most important meeting house, while not forgetting that to Friends all places were equally places of worship. Early in Quaker history, the leaders Fox, Penn, and Barclay had travelled to the Netherlands and Germany—where they would have encountered reformed churches—but unlike other British and Continental Protestant groups

who modified existing places of worship to their own requirements, Quakers rejected completely ‘mashouses’ and ‘steeplehouses’. I have argued elsewhere that when looking for a model for Jordans Meetinghouse in Buckinghamshire—built in 1688 marking the Declaration of Indulgence, as a place of commemoration and pilgrimage—the builders looked back to Ralph Symonds’ puritan chapel at Emmanuel College Cambridge of 1586 (Akehurst 2020, forthcoming). That chapel, now the Old Library, had rejected church-building conventions in its orientation, simplicity, lack of consecration, and adoption of an educational rather than ecclesiastical architectural style. Its austere, pared down interior, common to such buildings, was not the ‘Puritan Minimalism’ suggested by architectural historians Timothy Mowl and Brian Earnshaw, for whom ‘Puritan’ seems a political rather than theological category (Mowl 1995: 80). Rather, the plain aesthetic represented a counter-rhetorical tradition reaching back to Antiquity (Brett 2005: 12). This Attic style return to restraint and propriety—characterised as Vitruvian decorum—re-emerged periodically, as evidenced in the Cistercian rejection of ‘superfluity’, a word echoed by later Quaker commentators railing against unnecessary decoration. For instance, fringes, valances and curtains were condemned as ‘superfluous’. Joseph Pike insisted on removing such fripperies and replacing them with ‘useful, plain woodwork’ (Tolles 1959: 492). Those Neoplatonists—who through the seventeenth century had maintained Emmanuel College as a puritan centre—argued knowing is intuitive recognition of archetypal truths that subsist in the divine mind. In Platonism, salvation was achieved through rigorous philosophy and moral self-discipline. Followers were to reject the sensible world and look within to achieve higher metaphysical levels where individuals united with The One. These notions chimed with Quaker objectives of achieving unmediated union with God through worldly rejection and profound meditation.

From a formalist architectural perspective, ‘plaining’ is unpromising territory since an aesthetic of unadornment leaves little room for description, and Friends’ reluctance to theorise produces another lacuna. Yet to understand the perspective that embodied that all-important societal rejection we must return briefly to Art History for enlightenment, for it was Architecture, Sculpture, and Painting in particular that Quaker plain style reacted against. Plaining was a reassertion of Protestant values that viewed such interventions as inherently dishonest. It would be easy to imagine the iconoclasm of the sixteenth century Reformation literally de-faced mediaeval religious iconography but, as we have seen at St Bartholomew’s Hospital, religious art did not completely disappear. Between the 1540s and the 1640s, the Roman Catholic Church responded to the Protestant Reformation in a theological and material challenge we now understand as the Counter-Reformation. Simply described, emotional engagement with Catholic doctrine and Biblical narrative was elicited though a sensory assault using painting, sculpture, and architecture as its media. This was epitomised by Bernini’s *Ecstasy of St Teresa* (1647–52) in the Cornaro Chapel in Santa Maria della Vittoria, in

Rome that makes an interesting contrast to van Heemskerck's *Quakers Vergadering* discussed above. Bernini's sculpture also dramatised a young woman embodying religious ecstasy, but in this case it is profoundly and corporeally sensuous. Its intention was for the beholder to witness and sense the moment of contact between the material and spiritual. Though a shared preoccupation between Catholics and Protestants, this was a very different, more somatic approach to worship from that of godly puritans. Brett argued that rather than focussing on them as a spiritual prompt, it was the *disappearance* of images from puritan thought that was necessary for profound religious contemplation. Brett argued that from the Reformation, the progressive removal of pictorial imagery, decoration, and elaborate ritual from worship displaced visual pleasure from the sacred to the secular.

Brett emphasised the rejection of pictorial images also had a political dimension that chimed with early-modern Quaker thought, for plainness also demonstrated rejection of a polity—in the Tudor and later the Stuart Courts—that used iconography to shore-up authority. This applied equally to the Church and to the Crown that, since the Reformation, were united in these islands, in the person of the sovereign. Egregious examples of this political use of Art are the portraits of Queen Elizabeth I, where the viewer had to interpret symbols to understand the idea behind the work. Marcus Gheeraerts the Younger's (attrib.) *Rainbow Portrait* at Hatfield House of 1602 included symbols from popular emblem books, such as a cloak with eyes and ears, the serpent of wisdom, and the celestial armillary sphere. Queen Elizabeth carries a rainbow, the sign of God's covenant with humankind, with a Latin motto asserting *no rainbow without the sun*, equating the sovereign with the sun, asserting the Queen's wisdom ensured peace and prosperity.

More significantly was Whitehall Banqueting House ceiling, designed by the court architect Inigo Jones (1573–1652) and executed in 1636 by one of the most important artists of the Counter-Reformation, the Flemish painter Peter Paul Rubens (1577–1640). The ceiling is divided into sections depicting *The Union of the Crowns*, *The Apotheosis of James I*, and *The Peaceful Reign of James I* (Millar 1956: 258–65). In *The Apotheosis*, Rubens' astonishing *trompe l'oeil* creates the sense that the ceiling has dissolved. The beholder gazes directly up to Heaven from where foreshortened figures look down, as King James is borne heavenward, supported by the allegorical figures of Justice and Religion, crowned by Wisdom. But there *was* no hole in the Banqueting House roof; angels did not fly around Whitehall. It was just this sort of illusion—characteristic of Baroque painting—that was the antithesis of plain style, and its elision of Church and State was anathema to republican puritans. It was consequently not accidental that this was the last place seen by Charles I before his execution in 1649 by the parliamentarians.

More conspicuously for London merchants was St Paul's Cathedral, rebuilt after the Great fire by the Surveyor of the King's Works, Christopher Wren. The inside of the dome was painted by Thornhill with eight scenes from the life of St Paul set in illusionistic architecture that misrepresented the actual engineering of the cupola. Indeed, the dome itself is an astonishing *trompe l'oeil*. Baroque

Art delighted in illusions, playing with space, and using materials as stucco, and techniques as *scagliola*, that feigned inlays in marble and semi-precious stones. From a Quaker perspective, such artifice was inherently dishonest because it deceitfully aimed to elicit an emotional, rather than rational religious response, and represented things that were manifestly false.

By contrast, Brett traces the evolution of an austere abstract aesthetics, opposing such Counter-Reformation Baroque, aimed at ‘plainness and perspicuity’, that is, transparency. He proposes a shift in imagery from pictorial, through symbolic, to abstract—conditioning the concomitant transformation in understanding manifest in puritan places of worship. As he writes:

The brush of whitening passed over every fresco, every painted wall, in an act of cleansing that every household would recognise as spring cleaning. Pictorial imagery was replaced by texts, by heraldry and in time by emblems of hearts, urns, roses and skulls that symbolised rather than pictured the doctrines of the reformed churches. The newly whitened walls of the churches were lit by uncoloured glass, letting in plain daylight, which in the great minsters revealed for the first time the structural logic of their architecture. New kinds of churches, called meeting houses, were being built without any decoration or emblematic ornament at all. And for those like the Ranters and the Quakers who had passed beyond institutional religion, there was naked, unmediated thought alone, which always has something of the ecstatic about it. (Brett 2004: 51)

This shift shaped religiously inspired design where anything might be imbued with sacred significance. Ultimately, Brett argues, ‘the iconic function of the picture was displaced onto workmanship and materials: an architectural aesthetic in which stone, timber and plaster, plain and unadorned, and above all space and light itself, could embody numinous dimensions of life’ (Brett 2004: 73). Quaker building style, initiated in the late seventeenth century, responded to platonic Christianity; enabling progression through meditation, beyond the sensory, through the intellectual to ultimate union with The One through shedding superfluities. This chimes with the observations of one late eighteenth-century traveller who observed:

The places where the Quakers assemble for worship, or rather to meditate ... are calculated to excite respect. This kind of temples [*sic.*] like those of the people of antiquity, admits the *light at the top* of the roof only. The walls are of a *dazzling white*; the wainscoting, unencumbered with sculpture, *shines in the modest lustre* of its native colours, and the exquisite cleanliness with which it is kept; the seats are simple benches, placed in parallel rows. In vain would one look here for paintings, statues, altars, priests, and acolythists. All these accessories are considered by the Quakers to be *superfluities*, devised by human intervention, and as foreign to the Supreme Being. (Faujas-de-St. Fond 1799: 117–18) (Fig. 6)

The substitution of figurative by abstraction facilitated a higher level of self-conscious control over inner life. This ostentatious lack of ostentation, and elevation of the vernacular, was architecturally expressed in meeting house interiors, creating



Fig. 6. Rudolf Ackermann, 'Quakers' Meeting House',
from *Microcosm of London* (1808).

a simple, humble, hospitable *Domus ecclesia*—house of the congregation—as opposed to the *Domus dei*, house of God (Brett 2004: 78–79). The Retreat's name and sequestered location denoted refuge and worldly renunciation. This kind of small-scale domestic monasticism represents what theologian Harold Turner characterises as a third place of worship—the *domus familia*; an ethos reflected in the Retreat's description as 'a retired habitation', 'Friends Lunatic House' and the residents as 'the family' (BIHR, RET 1/1/1/1).

We should remember the Retreat asylum was a devotional aid to mindful contemplation, originally produced by and intended for Friends who shared this distinctive belief system, though many were currently disordered in their thinking and behaviour. Sensory perception and materiality aimed to capture spirituality in simplicity and functionalism. The auditory and visual were crucial in this—channels were to be cleared to hear God's voice. Though jangling keys and locks were muffled, and visitors commented upon the unusual serenity of the Retreat, it was vision that was paramount (Scull 1993: 98).

Sometimes known as 'Children of the Light', Quakers aspired to a personal, unmediated experience with God; that espoused doctrine of Inward Light was a metaphor for Christ's light shining on or in them. Worship comprised silent waiting until experiencing Inward Light and hearing the Holy Spirit's moral

correction and guidance. Light was consequently embodied in Quaker theological culture. Metaphorical Light was made actual, for in a world with little artificial illumination, it carried a powerful symbolic charge (Dillon: 2002). The original Retreat building sat astride a ridge, orientated north/south. The landscape fell away below a dominant sky. Unobstructed south-facing rooms were bathed in light all day, while rooms at the front were afforded north light that is favoured by artists for its constant, ethereal quality. That effect was known from Antiquity and written of in English in the early seventeenth century (Wotton 1624: 8). Large windows with deliberately commissioned concealed bars illuminated luminous interiors of bare boards and white walls, fusing salubrious cross-ventilation with spiritual aesthetics, optimising God's agency.

Conclusion

In this way, then, it is possible to see that the Retreat was conceived as a private Quaker home while observing the fundamental requirements of public hospitals for a safe and healthy environment. This blend of radical and traditional was as characteristic of Friends' building as their distinction between the private and the public. Originally the Retreat housed 30 patients who were removed to the peace of the countryside, sympathetically overlooked, protected from the worst excesses of the behaviour of themselves and others, and encouraged to engage in what we now call occupational therapy, while waiting to reconnect with God through mindful contemplation. Ancient hospitals had adorned their interiors with paintings directing religious contemplation; at the Retreat, views of God's handiwork in the natural world replaced figurative painting, while light and nothingness facilitated a higher level of meditation. Characteristic Quaker aesthetics of plain style was a puritan reframing of that periodic return to simplicity as a reassertion of moral values of transparency. As exemplified by the Retreat, enlightenment hospitals could also be inspired by religious ideas although—just as Quaker places of worship differed from public parish churches—the profound Christian ethos shaping it was a private matter. The Retreat remains a private hospital.

Conversely, the outward sign of this belief system was high-profile humanitarian activity. Within a few years of the publication of Samuel's *Description* he was regarded as a national authority on ethical asylum design. He wrote *Practical Hints on the Construction and Economy of Pauper Lunatic Asylums* in 1815, and in 1819, together with architects Charles Watson and J. P. Pritchett, he published *Plans, Elevations, Sections and Descriptions of the Pauper Lunatic Asylum lately erected at Wakefield*. Charles Watson moved from Wakefield to York to join J. P. Pritchett in his practice, and shortly afterwards they redesigned York Meeting House. This latter building was presented in William Alexander's *Observations on the Construction and Fitting up of Meeting Houses* of 1820. The publishing of several architectural treatises was instrumental in enabling Friends to embrace architectural practice. Having formerly shunned the profession, the nineteenth century saw a flowering

of Quaker architects, most notably in Thomas Rickman (1776–1841), who developed the taxonomy of Gothic architecture still in use, and Alfred Waterhouse (1830–1905), the designer of Manchester Town Hall who rose to become President of the Royal Institute of British Architects (Akehurst 2011: 92–93). This would seem evidence that the Retreat had convinced members that large-scale institutions required professional design and proved the process could be consultative and well-informed. Friends had created a large semi-public space in which their wider humanitarian projects might be furthered; campaigns for improved conditions for patients and the abolition of slavery were conducted from there. It was a space that was thus invested with a moral weight partly because it was ‘right-ordered’ in its design process and its end result, and partly because it made possible the pursuit of a national agenda of social reform. The Retreat came to represent a mode of muscular, campaigning philanthropic architecture with a conscience, demonstrating that in certain cases, charity had a duty to be proactively political. It was a genuinely alternative approach to philanthropy; public buildings, instead of being understood as vehicles for civic pride and regeneration as they were generally, could also be sequestered, undemonstrative, and self-effacing.

By setting the social and religious understandings of this institution in the context of Art and Architectural History we achieve two things. First, we gain a richer appreciation of how the whole Retreat environment was conceptualised as an agent of care. The Retreat was originally designed exclusively for early modern Friends whose fully lived alternative lifestyle embraced not only worship but social behaviour, occupations, apparel, speech and writing conventions, and habits of thought. It is this Edginton was addressing as the establishment of a *habitus* to inculcate patterns of acceptable behaviour in patients. Certainly, by fusing a typical rural Quaker home with best hospital design they provided a safe caring environment where patients, when able, might be restored to their former selves. It conforms to that total environment Bordieu, and therefore Edginton, described as a starting point for reinforcing healthier behaviours in a manner we should now call Cognitive Behavioural Therapy. This is a modern sociological formulation of Locke’s associationism that underpinned much later-eighteenth century thinking (Hickman 1985: 48).

But it is possible to push this discussion a bit further, for concentration on social aspects alone omits the crucial element: the hospital was created by the *Religious Society of Friends* whose non-liturgical, anti-ecclesiastical position can prove fugitive to formalist accounts of spaces. However, by relating their theology and oppositional social stance to the history of religious Art and Architecture, we can both better understand their choices and reposition their buildings from the margins of uninformed vernacular building, to the mainstream of the canon of Architecture. Furthermore, it illustrates Charles Taylor’s argument for the continuity of religious thought throughout the Enlightenment.

To borrow from later aesthetic theory, the Retreat was a type of *Gesamtkunstwerk*—a total artwork. Like those mediaeval cruciform hospitals, often dedicated to

St Cross, where the walls and altar were adorned with religious imagery enabling patients to contemplate their life choices and make their peace with God, so the Retreat's form reflected Quakerly desire to be of but not in worldly society. Its quiet, luminous, plain interiors and botanically interesting landscape aided mindful prayer. From a twenty-first century perspective it is easy to see how this therapeutic strategy has its limitations. Categories of mental illness—then as now—were broad and fluid. Intractable raving patients, initially restrained with manacles, might remain incurable. Nevertheless, it is possible to see how some suffering what we should now describe as anxiety and depression would indeed derive relief from this peaceful environment.

I am writing this in a forest a few miles from Margaret Fell's Swarthmoor Hall. This converted Cumbrian cow barn, like the meetinghouses nearby, has a bare wooden floor, whitewashed walls, and large windows overlooking the garden. While the Retreat was influential in shaping subsequent asylum plans and therapeutic regimes, its subsequent opening up to the wider population diluted the intensity of Quakerly influence in interior fittings. This is why it is important to resist photographic evidence of interiors not reflecting the original purpose and design. Yet Quaker plain style more broadly distilled vernacular and polite, traditional and innovative, to create spaces we still acknowledge as peaceful places to think and listen: the very absence of ornament conveys a timeless, enduring quality recognised by visitors to those early meetinghouses continuing in their removed locations.

References

Archival Sources

Borthwick Institute, University of York

BIA RET 1/1/1/1 Retreat Directors' Minute Book 1792–1841.

BIA RET 1/1/1/1 Retreat foundation instrument.

BIA RET 2/1/2/1 Plans and Drawings for the Retreat made for Samuel Tuke's Description, 1813, Peter Atkinson Jnr, Perspective View of the North Front of the Retreat near York.

BIA RET 2/2/1/1 Building of the Retreat, Correspondence.

BIA RET 1/4/1/1 Visitors' Report Book 1815–67.

Books, Theses, Chapters and Articles

Abbott, M. P., Chijioko, M. E., Dandelion, P. and Oliver, J. (eds), *The Historical Dictionary of Friends (Quakers)*, Lanham, MD: Scarecrow Press, 2003.

Addison, J., *The Spectator* 195 (13 October 1711).

Akehurst, A. M., *Architecture and Philanthropy: building hospitals in eighteenth-century York*, PhD dissertation, University of York, 2009.

—, 'The Hospital de la Isla del Rey, Minorca: Britain's island hospital', *Architectural History* 53 (2010), pp. 123–61.

- , ‘The York Retreat, “a vernacular of equality”’, in Guillery, P. (ed.), *Built from Below: British architecture and the vernacular*, London and New York: Routledge, 2010, pp. 73–98.
- , ‘“The Body Natural as well as the Body Politic stands indebted”: the hospital—foundation, funding and form’, in van Eck, C. and de Jong, S. (eds), *Architectural Theory and Practice, Companion to Architecture in the Age of the Enlightenment*, vol. 2 John Wiley and Sons, 2017, Chapter 11.
- , ‘St Bartholomew’s Hospital and Gibbs’ role in hospital pavilion planning’, *The Georgian Group Journal* 27 (2019), pp. 91–112.
- , ‘“Inward Light”: taking architecture seriously with the early Religious Society of Friends’, in Barnwell, P. and Smith, M. (eds), *Places of Worship in Britain and Ireland, 1689–1840*, Rewley House Studies in the Historic Environment, Stamford: Shaun Tyas, forthcoming, 2020.
- , ‘Therapeutic Environment in Quaker Asylum Design at the York Retreat’, in Gharipour, M. (ed.), *A Matter of Life and Death: designing spaces for healing and caring in the premodern era*, London: Bloomsbury, forthcoming 2020 (or 2021).
- Barclay R., *An Apology for the True Christian Divinity, Being an Explanation and Vindication of the Principles and Doctrines of the People Called Quakers*, London: printed and sold by T. Sowle, in White-Hart-Court in Gracious-street, 5th edn, 1703.
- Brett, D., *The Plain Style*, Cambridge: Lutterworth Press, 2004.
- , *Rethinking Decoration: pleasure and ideology in the visual arts*, Cambridge: Cambridge University Press, 2005.
- Brown, M., ‘Rethinking Early Nineteenth-Century Asylum Reform’, *The Historical Journal* 49 (2006), pp. 425–52.
- Butler, D. M., *Quaker Meeting Houses of the Lake Counties*, London: Friends’ Historical Society, 1978.
- Cantor, G., ‘The Bible, the Creation and Inward Light: tensions within Quaker science’, White Rose online archive at University of Leeds [n.d.], http://fundacionorotava.org/media/web/files/page147__10_ing_Cantor_QuakerScience.pdf [accessed 12/05/20].
- Christie, W., ‘The Modern Athenians: the Edinburgh review in the knowledge economy of the early nineteenth century’, *Studies in Scottish Literature* 39 (2013), pp. 115–38.
- Colvin, H., *A Biographical Dictionary of British Architects 1600–1840*, New Haven, London: Yale University Press, 2008.
- Cornaro, A., *Discorsi della Vita Sobria*, trans. Urie, R., Glasgow: printed for Robert Urie, 1770.
- Cruikshank, D., *The Royal Hospital Chelsea: the place and the people*, London: Third Millennium, 2004.
- Dandelion, P., *Introduction to Quakerism*, Cambridge: Cambridge University Press, 2007.
- Digby, A., ‘Changes in the Asylum: the case of York, 1777–1815’, *The Economic History Review* 36 (1983), pp. 218–39.
- , *Madness, Morality and Medicine: a study of the York retreat, 1796–1914*, Cambridge: Cambridge University Press, 1985.
- Dillon, M., *Artificial Sunshine: a social history of domestic lighting*, London: The National Trust, 2002.
- Donawerth, J., ‘Women’s Reading Practices in Seventeenth-Century England: Margaret Fell’s “Women’s Speaking Justified”’, *The Sixteenth Century Journal* 37 (2006), pp. 985–1005.

- Edgington, B., 'Moral Architecture: the influence of the York retreat on asylum design', *Health and Place* 3 (1997), pp. 91–99.
- , 'The Design of Moral Architecture at the York Retreat', *Journal of Design History* 16 (2003), pp. 103–17.
- , 'The York Retreat', *Victorian Review* 39 (2013), pp. 9–13.
- Edmundson, W., *A Journal of the Life, Travels, Sufferings and Labour of Love in the Work of the Ministry of ... William Edmundson*, London: printed and sold by Mary Hinde, at No 2, in George-Yard, Lombard-Street, 1774.
- Faujas-de-St. Fond, B., *Travels in England, Scotland and the Hebrides*, vol. 1, London: printed for James Ridgway, 1799.
- Garfinkel, S., 'Quakers and High Chests: the plainness problem reconsidered', in Lapsansky, E. J. and Verplank, A. A., *Quaker Aesthetics: reflections on a Quaker ethic in American design and consumption*, Philadelphia: University of Pennsylvania Press, 2003, pp. 50–89.
- Glover, M. R., *The Retreat, York: an early experiment in the treatment of mental illness*, York: William Sessions, 1984.
- Goldie, M., 'Cambridge Platonists (act. 1630s–1680s)', *Oxford Dictionary of National Biography* Online, 2005, <http://www.oxforddnb.com/sheffield.idm.oclc.org/view/10.1093/ref:odnb/9780198614128.001.0001/odnb-9780198614128-e-94274#odnb-9780198614128-e-94274> [accessed 15/04/04].
- Grosley P. J., *A Tour to London: or new observations on England, and its inhabitants*, Dublin: printed for J. Exshaw, E. Lynch, J. Williams, R. Moncrieffe, T. Walker, and C. Jenkin, 1772.
- Grubb, S., *Some Account of the Life and Religious Labours of Sarah Grubb, with an Appendix containing an Account of Ackworth School*, Dublin: printed by Isaac Collins, 1795.
- Guibbory, A., *The Map of Time: seventeenth-century English literature and ideas of pattern in history*, Urbana: University of Illinois Press, 1986.
- Hargrove, W., *History and Description and the Ancient City of York*, York: W. Alexander, 1818.
- Hayum, A., 'The Meaning and Function of the Isenheim Altarpiece: the hospital context revisited', *The Art Bulletin* 59 (1977), pp. 501–17.
- Head, J., 'Anne Conway and George Keith on the Christ Within', *Journal of Quaker Studies* 23 (2018), pp. 161–77.
- Hickman, C., 'The Picturesque at Brislington House, Bristol: the role of landscape in relation to the treatment of mental illness in the early nineteenth-century asylum', *Garden History* 33 (2005), pp. 47–60.
- Howard, J., *An Account of the Present State of the Prisons, Houses of Correction, and Hospitals in London and Westminster*, London: printed by order of the Society lately instituted for giving effect to his Majesty's proclamation against vice and immorality, 1789.
- , *An Account of the Principal Lazarettos in Europe; with various papers relative to the plague*, Warrington: printed by William Eyres; and sold by T. Cadell, J. Johnson, C. Dilly, and J. Taylor, in London, 1789.
- Hull, W. I., 'Egbert van Heemskerck's "Quaker Meeting"', *Bulletin of Friends Historical Association* 27 (1938), pp. 17–32.
- Jones, K., *Lunacy, Law and Conscience 1744–1845: the social history of the care of the insane*, London: Routledge & Kegan Paul, 1955.

- Jones Lapsansky, E. and Verplank, A. A., *Quaker Aesthetics: reflections on a Quaker ethic in American design and consumption*, Philadelphia: University of Pennsylvania Press, 2003.
- Keith, G., *Immediate Revelation*, Aberdeen, 1668.
- Lidbetter, H., *The Friends Meeting House*, York: William Sessions, 1979.
- Markus, T. (ed.), *Order in Space and Society: architectural form and its context in the Scottish Enlightenment*, Edinburgh: Mainstream Publishing, 1982.
- Marsh, C. W., *The Family of Love in English Society, 1550–1630*, Cambridge: Cambridge University Press, 1994.
- Martins, S. W., *The English Model Farm: building the agricultural ideal, 1700–1914*, Macclesfield: Windgather Press, 2002.
- Mendieta, E. and Vanantwerpen, J. (eds), *The Power of Religion in the Public Sphere*, New York: Columbia University Press, 2011.
- Millar, O., ‘The Whitehall Ceiling’, *The Burlington Magazine* 98 (1956), pp. 258–65, 267.
- Mount, H., ‘Egbert van Heemskerek’s Quaker Meetings Revisited’, *Journal of the Warburg and Courtauld Institutes* 56 (1993), pp. 209–28.
- Morris, R., *Rural Architecture: consisting of regular designs of plans and elevations for buildings in the country*, London: printed for the author, 1750.
- Mowl, T. and Earnshaw, B., *Architecture without Kings: the rise of Puritan classicism under Cromwell*, Manchester: Manchester University Press, 1995.
- Penn, W., *Some Fruits of Solitude*, London: printed for Thomas Northcott, in George-Yard in Lombard-Street, 2nd edn, 1693.
- Pérez-Gómez, A., ‘Architecture as Embodied Knowledge’, *The Journal of Architectural Education* 40 (1987), pp. 57–58.
- Pevsner, N., *A History of Building Types*, Princeton: Princeton University Press, 1976.
- Pike, J., *Some Account of the Life of Joseph Pike*, London: Darton and Harvey, Gracechurch Street, 1837.
- The Religious Society of Friends, *Extracts from the Minutes and Advices of the Yearly Meetings of Friends held in London from Its First Institution*, London: 1802.
- , *Quaker Faith & Practice* (fifth edn), 1995–2019, <https://qfp.quaker.org.uk/chapter/1/>.
- Scull, A., *The Most Solitary of Afflictions: madness and society in Britain 1700–1900*, New Haven, London: Yale University Press, 1993.
- Smith, L., *Lunatic Hospitals in Georgian England, 1750–1830*, Abingdon: Routledge, 2013.
- Sprat, T., *The History of the Royal Society*, London: printed by T. R. for J. Martyn ..., and J. Allestry ..., 1667.
- Stevenson, C., *The City and the King: architecture and politics in restoration London*, New Haven, London: Yale University Press, 2013.
- , *Medicine and Magnificence: hospital and asylum architecture 1660–1820*, New Haven, London: Yale University Press, 2000.
- , ‘Robert Hooke’s Bethlem’, *The Journal of the Society of Architectural Historians* 55 (1996), pp. 254–75.
- Tolles, F. B., ‘“of the Best Sort but Plain”: the Quaker esthetic’, in *The American Quarterly* 11 (1959), pp. 484–502.
- Tuke, S., *Description of the Retreat: an institution near York, for insane persons of the society of Friends*, York: William Alexander, 1813.
- Van Engen, J., *Sisters and Brothers of the Common Life: the Devotio Moderna and the world of the later Middle Ages*, Philadelphia: University of Pennsylvania Press, 2008.

- Waln Jr., R., *An Account of the Asylum for the Insane Established by the Society of Friends Near Frankford, in the Vicinity of Philadelphia*, Philadelphia: Benjamin and Thomas Kite, 1825.
- Weiner, D. B., 'Philippe Pinel's "Memoir on Madness" of December 11, 1794: a fundamental text of modern psychiatry', *The American Journal of Psychiatry* 149 (1992), pp. 725–32.
- , "'Le Geste de Pinel': the history of a psychiatric myth', in Micale, M., *Discovering the History of Psychiatry*, Oxford: Oxford University Press, 1994, Chapter 12, pp. 232–47.
- Woods, E. A. and Carlson, E. T., 'The Psychiatry of Philippe Pinel', *Bulletin of the History of Medicine* 35 (1961), pp. 14–25.
- Wotton, H., *Elements of Architecture*, London: printed by John Bill.
- Wragg, B. and Worsley, G., *The Life and Works of John Carr*, York: Oblong Press, 2000.

Author Details

Ann-Marie Akehurst is an independent urban and architectural historian, a Trustee of the Society of Architectural Historians of Great Britain, and of the York Georgian Society. She researches architecture related to place, identity and philanthropy. She has spoken extensively in Britain, Europe and the United States, and has published on British and European early modern sacred space and landscapes, medical buildings and urban identity.

Mailing address: 2 The Avenue, York, YO30 6AS, England

Email: annmarieakehurst@me.com

Twitter: [@Annmarieinyork](https://twitter.com/Annmarieinyork)