Nutritional decline in post-Famine Ireland, c. 1851–1922

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Abstract

Irish dietary practice changed dramatically after the Famine. Families began to consume a more varied diet instead of relying on the potato. Prior to the Famine, this change would have been greeted positively. Most political economists advocated ending Ireland's monocrop culture as they associated the potato diet with a lack of socio-economic development. This paper explores the meanings attached to dietary change and argues that concerns were raised after the Famine about the failure of the Irish poor to obtain a diet as nutritious as the potato diet had previously been. By the turn of the twentieth century, many commentators agreed that the national dietary adjustment, which had followed the Famine, had not been an improvement. On the contrary, the Irish poor seemed undernourished and underfed as they now subsisted upon nutritionally insufficient diets dominated by tea and white bread. In addition, this chapter explores the new ways in which food was thought about after the Famine with particular emphasis on how the new sciences of food impacted on the discussion of the Irish diet. It investigates state and voluntary interventions in Irish dietary health and maintains that these were relatively ineffective. In summary, this chapter problematises the post-Famine Irish diet by emphasising a sense of decline in nutritional well-being debated in contemporary commentary on the national diet set against a backdrop of shifting expert ideas on food.

Post-Famine dietary change

In his evidence to the Inter-Departmental Committee of Physical Deterioration of 1904, the bishop of Ross, Denis Kelly, recalled:

When I was a boy, looking back to the period of the late fifties and early sixties the food of the peasantry consisted of potatoes for one meal, Indian meal and oatmeal for two other meals, as a rule, and there was very little bread used. Now in some sense the food has been improved, and hence I am going to propound the paradox that while the food used

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is a better class of food, yet the people are worse fed. Wheaten bread has become of very common use in Ireland, and has almost entirely superseded the use of both Indian meal and oatmeal, and to a very large extent the use of the potato.¹

At the Committee, Irish physicians echoed the thrust of Bishop Kelly’s remarks by warning of the deleterious effects of excessive tea-drinking habits among the poor. They blamed tea for the rising incidence of neuroses and for making Irish housewives, who on average consumed at least twelve cups of strong black tea per day, chronically dyspeptic.² Further medical evidence drew attention to an additional problem: there was a remarkably limited knowledge of cookery across Ireland. Speaking of the situation in Dublin, the physician, chemist and food analyst Charles Cameron asserted: ‘cookery amongst the working classes is at an extremely low ebb; you can hardly call it cookery at all’. Cameron lamented that:

They [the poor] have nothing except cabbage and Swedish turnips, and they hardly ever use peas or beans or celery, or any of those things. It is always cabbage. In fact, for the Sunday dinner, very often, the meal consists of bacon and cabbage. I do not know any country in the world where so much bacon and cabbage is eaten.³

These statements raise important questions about post-Famine food cultures. Why did contemporaries perceive Irish dietary change so negatively? To what extent did they view the potato as a significant cultural loss? And why did food continue to feature as a troubling, controversial element of Irish society long after debates on the predominantly potato diet had subsided?

Irish dietary practice changed dramatically following the Famine. The less affluent gradually replaced a potato diet with one containing more variety. This change in dietary customs was rapid and inherently complex.⁴ The new diet shielded the poor from a further major famine, although localised minor famines occurred sporadically.⁵ Nonetheless, the Irish diet remained controversial well into the twentieth century despite this positive development. Leslie A. Clarkson and E. M. Crawford have argued that diminishing reliance on the nutritious potato resulted in an observable decline in nutritional health; a fact

¹ Minutes of evidence taken before the Inter-Departmental Committee on Physical Deterioration Volume II, Reports of Commissioners, Commons, 1904 [Cd.2201], vol. xxxii.45, 412.
² Minutes of evidence, 452.
³ Minutes of evidence, 402.
⁴ For a full discussion, see Ian Miller, Reforming food in post-Famine Ireland: medicine, science and improvement, 1845–1922 (Manchester, 2014).
recognised by contemporaries such as the bishop of Ross. This unwelcome consequence of dietary change formed the basis of a new set of food-related anxieties.

Post-Famine dietary adjustment coincided with significant changes in the understanding and knowledge of food. The Irish public came to appreciate food differently after the Famine. From the mid-nineteenth century experts in nutrition and public health rigorously subjected food to scientific investigation. New exploratory techniques emerged that encouraged food to be considered for the first time with reference to factors such as nutritional value, as well as hygiene and purity. It was no longer acceptable to view food solely as a means of subsistence, as had often been the case prior to the Famine. Instead, food was seen as consisting of particular chemical components, and as potentially contaminated with harmful germs in certain circumstances. Scientists also gradated diet on a new scale of ‘healthy’ and ‘unhealthy’. In many ways, understandings of food were revolutionised in the period between the Great Famine and Irish independence. In light of this, shifting expert knowledge of food intake fuelled greater public understandings of diet. An emerging attention to the content of food and the health consequences of subsisting on a nutritionally insufficient diet ensured that conditions such as under-nutrition took centre stage in a new set of food-based anxieties. Arising out of this, this essay will address the dietary concerns that arose in relation to the poor as it was on this social grouping that anxieties typically coalesced. It also explores the effectiveness of the educational strategies that emerged in response to mounting anxiety post-Famine about the Irish diet.

In the 1840s, critics of the potato diet often emphasised its apparent excessiveness. This concern was vividly and forcefully articulated in their depictions of the engorged, enlarged and gluttonous Irish stomach. Thomas Campbell Foster, a travel writer and contributor to the *Times*, asserted in 1846 that by subsisting on excessive quantities of food, the Irish peasant’s stomach had become overindulged, craving quantity constantly. Foster even claimed that pathological investigation had revealed the potato-fed Irish peasant’s stomach to be double the size of the average human stomach. The historian Helen O’Connell has also identified contemporary apprehension about the reckless, hedonistic and excessive consumption of tea by the poor. These sources indicate that until the Famine, Irish dietary intake was considered primarily in terms of excess. It was the quantity of food being consumed that caused

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concern. In this context, excessive food consumption appeared indicative of a lack of self-restraint and moderation inherent in the Irish character itself.  

This emphasis on excess became increasingly redundant as new scientific imperatives encouraged a more nuanced discussion of diet. Between 1845 and 1922 ideas on food changed dramatically. A new vocabulary featuring protein, fats, starch and carbohydrates and, later vitamins and calories, increasingly informed public understandings of food. Importantly, this new language stressed the importance of food quality. How much the Irish ate now seemed of less importance than what they ate. By the mid-twentieth-century, nutritional scientists had identified various ways of assessing the chemical consistency of meats, vegetables and other foodstuffs empirically. They were able to classify food into its constituent chemical parts to determine which diets possessed the most nutritional value.

Food quality and nutrition were seriously debated for the first time in Ireland during the Famine. At the same time that political economists were suggesting that the catastrophe was an opportunity to change Ireland’s monocrop culture, scientists investigating the blight were confirming the nutritional value of the potato. In the 1840s political economists identified the potato as emblematic of all that seemed wrong with Ireland; the potato was synonymous with national idleness and economic underachievement. In their view, bringing Ireland’s monocrop culture to an end could not fail to generate economic prosperity and social development. At the same time, this was a period when nutritional science was developing a new framework for understanding food intake; and food chemistry had evolved into a recognisably distinct scientific sub-discipline. The German chemist Justus von Liebig and his supporters significantly raised the public profile of nutritional science from the 1830s by promoting the value of analysing the chemistry of food to identify healthy and unhealthy diets.

The onset of blight encouraged chemists to investigate its cause (normally hypothesised as chemical rather than mycological) and the chemical consistency of the potato. In 1845 the British chemist George Phillips published a detailed account of the biochemistry of the potato. In The potato

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10 For an overview of scientific developments in nutrition, see Harmke Kamminga and Andrew Cunningham (eds), *The science and culture of nutrition, 1840–1940* (Amsterdam, 1995).
disease: its origin, nature and development, he broke the potato down into its constituent parts: water, starch, sugar, potateine, gum, albumen and so on. Researchers such as Phillips specified that human health depended upon ingesting correct mixtures of chemical elements such as protein and fat, which the potato contained in sufficient quantity to provide the basis for a healthy diet. The physician William Wilde announced in 1854:

[during the Famine] the fact became evident to the chemists, which had long ago been practically demonstrated by the people, that the potato, bad as it was, contained more life-sustaining elements, added to more palatable qualities, and less deleterious constituents, when taken for any length of time into the system, than any other vegetable that could be procured.

As an alternative to the potato, individuals such as Wilde promoted a diet consisting primarily of oatmeal, Indian meal, vegetables and meats.

In the decades that followed the Famine, various other considerations informed new public understandings of food, with the result that by the end of the century, social investigators had forged more precise definitions of nutritional health and under-nutrition. Individuals, social groups—even nations—could now be diagnosed as nutritionally vulnerable. In the early twentieth century social researchers worldwide developed a refined understanding of calories and vitamins that radically altered expert and public conceptions of food. Public health also played an important role. From the 1850s public health officials began to make greater use of microscopical analysis to expose, and warn of, the potential presence of germs in impure, contaminated foodstuffs. Combined, these developments helped to reshape how the Irish thought about what they ate (or, perhaps more precisely, what critics and physicians thought about the dietary habits of the poor). At the same time, new notions of a nutritionally ‘ideal’ diet and the ‘pure’ food product—sterilised and free from germs—generated alarm about the extent to which post-Famine diets deviated from these new norms. The laying out of new food standards in itself created apprehension about how far the dietary customs that

18 For instance, an important nutritional survey was published in A.M. MacSweeney, Poverty in Cork (Cork, 1917).
20 Bee Wilson, Swindled: from poison sweets to counterfeit coffee—the dark history of the food cheats (London, 2009), 1–45.
evolved after the Famine diverged from the ideals outlined in contemporary nutritional science. For reasons such as these, food remained remarkably central to post-Famine discussion on Irish health.

Post-Famine optimism about the potential for a new Irish diet was short-lived. The potato certainly figured less prominently in the Irish diet after the Famine. However, new concerns were soon raised about the foodstuffs being consumed by the poor in its stead. Scientists had established the high nutritional value of the potato, but the desirability of banishing the potato diet encouraged physicians to demand that the population obtain nutrition from an array of other healthy foodstuffs. Institutions were important sites in which physicians could intervene directly in inmates’ diets and suggest changes. Physicians investigating institutional conditions played an important role in shaping ideas on nutrition after the Famine as many of them examined links between nutritionally insufficient diets and the onset of various physical and mental conditions.21 In the late 1840s Arthur Jacob, the editor of the *Dublin Medical Press*, established that feeding workhouse children with a nutritionally inadequate diet for sustained periods caused high incidences of ophthalmia (or conjunctivitis).22 John Lentaigne, physician and inspector of the Irish reformatory and industrial school system, took steps in the 1850s to address childhood problems such as scrofula (or tuberculosis of the neck) in the institutions under his inspectorate by promoting healthy, nutritious feeding.23 In 1859, the lord mayor of Cork, John Arnott, sparked a heated public debate on the quality of food supplied in the city’s workhouses. The workhouse diet of watery soups containing few vegetables and sparse amounts of meat was, he maintained, the source of an alarmingly high scrofula incidence among the young inmates. With the backing of local physicians, Arnott argued that workhouse diets wasted the blood, reduced vigour and rendered the institutionalised susceptible to disease.24

During the late nineteenth century institutional managers gradually improved institutional diets. Fewer possibilities existed, however, for regulating dietary behaviour in the general community. An additional debate on nutrition emerged that focused on the relationship between nervousness and diet. According to political economists and socio-economic reformers, the abandonment of the potato diet was to usher in a new era of socio-economic advancement in Ireland. They foresaw a post-Famine population producing

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21 The issue of institutional diets is discussed in Miller, *Reforming food in post-Famine Ireland*, 65–84.
and consuming combinations of meats and vegetables, generating a self-sustaining community no longer exposed to the potentially devastating effects of blight and famine.\textsuperscript{25} The consumption of a varied diet was also commonly understood as a step towards civilising the Irish and raising them into more sophisticated beings. As the German travel writer and geographer Johan George Kohl asserted in 1841:

Many Irishmen have but one day on which they eat flesh, namely, on Christmas day. Every other day they feed on potatoes and nothing but potatoes. Now this is inhuman; for the appetite and stomach of man claim variety in food, and nowhere else do we find human beings gnawing from year’s end to year’s end, at the same root, berry or weed. There are animals who do so, but human beings, nowhere except in Ireland.\textsuperscript{26}

Embedded in Kohl’s powerful statement was a sense that dietary change was part of a civilising process; that the adoption of a diverse, sophisticated diet would signal personal and social advancement in Ireland.\textsuperscript{27} In Kohl’s view, the potato diet was unrefined and uncivilised; a remnant of a less sophisticated, primitive inheritance. Initially, the Irish diet seemed to develop in a more positive direction. In 1863 the prominent British physician and nutritional expert Edward Smith investigated the diets of the labouring classes across the British Isles, including Ireland. Using nutritional analysis, he concluded that the rural Irish were never so healthy, as they complemented the potato with oatmeal, vegetables and meat.\textsuperscript{28} Smith concluded that ‘throughout the country I found them [the Irish] a fine, well-built, and often athletic race, with children sufficiently fleshy and rosy and bearing all the marks of health’; even ‘the wife, however, was usually more robust and healthy looking than is observed in England’.\textsuperscript{29}

Smith failed to anticipate the role that an advancing consumerism in the late nineteenth century would play in determining national dietary customs. From the 1870s Ireland suffered from an economic depression that impacted on the ability of families to procure nutritious food.\textsuperscript{30} In the same period a national network of urban and rural retailing was established that encouraged the less

\textsuperscript{25} See, for instance, Robert Kane’s discussion of how Ireland’s food resources could be maximised in R. Kane, \textit{The industrial resources of Ireland} (Dublin, 1844), 236–327.
\textsuperscript{26} Johan George Kohl, \textit{Ireland} (New York, 1844), 24.
\textsuperscript{27} Norbert Elias has persuasively outlined links between consumption habits and middle-class civility in N. Elias, \textit{The civilising process}, trans. E. Jephcott (Oxford, 1978–82).
\textsuperscript{28} For more on Smith’s dietary surveys, see T.C. Barker, Derek J. Oddy and John Yudkin, \textit{The dietary surveys of Dr Edward Smith 1862–3} (London, 1970).
\textsuperscript{29} Barker, Oddy and Yudkin, \textit{Dietary surveys of Dr Edward Smith}, 283.
\textsuperscript{30} For the relationship between economic cycles, and agrarian and urban economies, see Mary E. Daly, \textit{Dublin, the deposed capital: a social and economic history, 1860–1914} (Cork, 1984), 53–64.
affluent to rely increasingly upon food purchased from shopkeepers and, in many instances, to accumulate considerable debt. By the 1890s the Irish poor once again appeared worryingly underfed. When members of the Congested Districts Board investigated the day-to-day life of the rural poor in the 1890s, they discovered that the poor were consuming high levels of bread and tea while purchasing less frequently nutritious foodstuffs such as Indian meal, bacon, potatoes, milk, fish, eggs, oatmeal, butter, sugar, cabbage and meat. The food items which the poor used to barter with shopkeepers tended to be more nutritious than the items that they received in their place. Many mothers exchanged their home-produced eggs for tea. In addition, late-century technological developments, which made certain foodstuffs cheaper, contributed to a general downturn in nutritional health. White bread became particularly popular from the 1880s onward as gradual-reduction roller milling steadily replaced traditional flour-milling practices; the bread produced using these modern techniques was less nutritious despite its cheaper cost.

In many ways, excessive tea drinking exemplified all that seemed to have gone wrong with the Irish diet in the decades after the Famine. Tea was an imported product containing relatively little nutrition. Physicians dismissed it as a stimulant that was used by the lower classes for the purposes of exhilaration and hedonism. They mostly refused to consider that over-reliance on tea and white bread was a consequence of social conditions such as poverty, not individual recklessness. In the 1890s concerned members of the Congested Districts Board warned that families were purchasing as much as a pound of tea per week in some regions of Connacht. Clarkson and Crawford also point to a startling rise in tea drinking per family which, in 1904, averaged nine ounces a week in rural communities and close to twelve ounces in urban centres.

33 Ciara Breathnach, The Congested Districts Board of Ireland, 1891–1923: poverty and development in the west of Ireland (Dublin and Portland, OR, 2005), 38–9.
35 For comparison between different regions of the United Kingdom and Ireland, see Ian Miller, “‘A dangerous revolutionary force amongst us’: conceptualising working-class tea drinking in the British Isles, c. 1860–1900’, Cultural and Social History 10:3 (2013), 419–38.
36 Breathnach, Congested Districts Board, 40.
37 Clarkson and Crawford, Feast and famine, 103.
The problem of tea drinking prompted a new moral panic about Irish dietary customs that was as alarmist in nature as condemnations of the potato diet once had been. In 1893 the *Freeman's Journal* asserted that:

Evidence is overwhelming that the food now partaken of by the people, though of more refined quality and more in accordance with modern ideas, is not nearly so strengthening and in consequence the actual physical capacity of the people is now deteriorating. White bread and tea have now taken the place of the humble but more strengthening oatmeal, stirabout and milk. The tea drinking is especially condemned by the doctors as injurious to health. Dyspepsia and its allied diseases, and also mental diseases, are said to be traceable to it. The people seem to take tea at all their meals, not only because they use a great deal of it, but because they let it stand so long before the fire.  

Three years later, the newspaper warned that:

Tea is slowly conquering the world. It is an insidious beverage, and the desire for it grows by what it feeds on. Its popularity has created a new repast in modern society—afternoon tea—to with, which has two distinct and deteriorating tendencies: the one towards dyspepsia and the other towards the abominable form of mental indigestion, scandal-mongering.

These alarmist sentiments were echoed by physicians and psychiatrists. In the 1890s physicians noticed a startling rise in asylum admissions by comparison with the levels reached in the 1880s. Some believed that the Irish were particularly prone to developing insanity because their constitutions predisposed them to nervous and psychiatric conditions. In 1894 Thomas Drapes, the leading Irish psychiatrist and resident medical superintendent at Enniscorthy District Asylum, published an article in the *Journal of Mental Science* on the subject of this apparent national increase of insanity. Drapes identified the poor quality of the post-Famine diet as a driving force behind this regrettable trend. He also expressed concern that excessive tea drinking was overstimulating the nervous systems of the Irish, rendering them susceptible to mental and physical illnesses. Drapes asserted that ‘we see its [tea’s] effects in the number of pale-faced children who are brought up on it instead of the old time-honoured, but now nearly abandoned, porridge and milk’.

The issue of excessive tea drinking was not confined to sensationalistic newspaper editorials or limited to the alarmist writings of a small but vocal number of doctors. On the contrary, the adverse effects of tea drinking were

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addressed in a range of forums. The theme featured particularly prominently in the Inter-Departmental Committee of Physical Deterioration of 1904, considered above. Diet—tea in particular—also occupied a pivotal place in an official investigation made in the 1890s by the Irish Inspectors of Lunatics, George Plunkett O’Farrell and E. Maziere Courtenay, into the national increase in insanity. O’Farrell and Courtenay agreed that tea was as a key contributory factor. Diet, they suggested, had unquestionably contributed to increasing insanity levels as large numbers of the insane bore the scars of ‘scant, improper food’—‘the insanity of malnutrition’. The inspectors concluded that poor diets had resulted in alarmingly high levels of anaemia, constitutional weakness, scrofula and neurotic disease. Excessive tea drinking, in particular, was identified as the cause of a national outbreak of dyspepsia with severe symptoms of neurotic disturbance, mental depression and psychological decline. The debate on the relationship between tea drinking and nerves facilitated the entry of terms such as ‘tea drunkards’ and ‘tea mania’ into the Irish vocabulary. The latter condition was characterised by symptoms, including headache, vertigo, insomnia, palpitation of the heart, mental confusion, nightmare, nausea, hallucinations, morbid depression of the spirit and even suicidal impulses.

Evidently, nutrition provided a key framework for understanding diet and its potential relationship to bodily complaints after the Famine. The nineteenth century saw a shift in priorities in the discussion of food in Ireland. Pre-Famine critiques of the Irish diet had emphasised excess and monotony; post-Famine critiques focused on food chemistry and nutritional content. Although this formed part of an international trend, the issue of nutrition seemed particularly pertinent in Ireland given that a decline in nutrition was traceable back to the Great Famine. It could be seen as having directly resulted from the dramatic shift in dietary patterns that had followed the catastrophe. The scientific establishment of the potato as a nutritional food allowed late-century commentators to refer to the pre-Famine era as one when the population had enjoyed a nutritional diet, even if they had been exposed to the fatal implications of relying upon a single dietary staple.

In addition, from the 1860s public health officials amplified the discussion of food by drawing attention to the potential of working-class diets to be adulterated and contaminated. They encouraged consumers to consider food in terms of purity and hygiene, highlighting a further way in which science impacted on public perceptions of food. Prior to the late nineteenth-century common sense—coupled with humoral understanding of diet and constitution—dictated that it was unwise to eat food that smelled putrid, tasted unsavoury or appeared rotten. The development of microscopical techniques of examining foodstuffs, the commencement of a concerted drive to end

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41 Alleged increasing prevalence of insanity in Ireland: special report from the Inspectors of Lunatics to the Chief Secretary, H.C. 1894 [C.7331] xliii 647, 4.
42 Alleged increasing prevalence of insanity, 4–5.
43 Alleged increasing prevalence of insanity, 16.
adulteration practices in the 1860s and the realisation that ingesting germs caused illness combined to emphasise purity and hygiene in food. From the 1860s medical scientists began, first, to hypothesise and then, to prove that diseases such as tuberculosis could pass from animals to humans through meat consumption.\(^{44}\) However, the ability to inspect meat for contamination remained limited.\(^{45}\) A sustained assault on traditional butchering practices emerged in urban centres such as Dublin, which saw urban butchers demonised for their allegedly unsanitary and unscrupulous business practices that threatened the health of unsuspecting working-class consumers.\(^{46}\)

Various controversies sustained this increasingly critical attitude, which was encouraged by legislation enacted in 1860 to tackle food adulteration. Public health officials in 1863 discovered that workhouse sugar supplies in South Dublin Union were contaminated with thousands of seemingly harmful sugar mites.\(^{47}\) The selling of poisoned sweets to children also incited public anger. In 1873 James Dunne of the Royal College of Surgeons wrote to the *Freeman’s Journal* on the matter arguing that:

> No wonder that the children of trades people and the poor are sickly, and frequently of immature development, when, besides all the other evils of a crowded city, they are beset on all sides of the street by unripe or rotten fruit, unwholesomely prepared sweets, and advocates of plaster of Paris as a juvenile luxury.\(^{48}\)

Further concerns about hygiene were raised once medical scientists began in the 1870s to suspect that diseases such as typhoid were transmitted through the consumption of milk and water.\(^{49}\) In 1879 Charles Cameron sought firmly to establish the connection between fever and the consumption of infected milk, although his ideas that Dublin’s dairy yards needed to be hygienically managed took time to be fully accepted.\(^{50}\) Debates on the poor hygienic quality of Irish-produced food raised the appeal of food produced by (particularly Denmark); a concern depicted by the *Irish Homestead* in 1896 (see Fig. 1). This discussion of hygiene added important new perspectives on the Irish working-class diet. The poor not only needed to secure nutritionally sufficient diets but had to be aware

\(^{44}\) For discussion of this development, see Michael Worboys, ‘Germ theories of disease and British veterinary medicine, 1860–1890’, *Medical History* 35 (1991), 308–27.


\(^{50}\) C.A. Cameron, ‘On an epidemic of fever caused by infected milk’, *Dublin Journal of Medical Science* 91 (1879), 1–23.
that foods could be contaminated or impure and had to be cooked in accordance with hygienic practices.

**Tackling nutritional decline**

State bodies made serious efforts to tackle nutritional decline from around 1900, but their interventions were inadequate. One key strategy was the extension of national school cookery instruction provision through the reform of the national education system. In the closing decades of the nineteenth century demand for domestic instruction rose dramatically in Ireland. However, most national schools were small and lacked the space required to instruct children on cooking.\(^{51}\) In 1892 the Unionist MP for South Tyrone Thomas Wallace Russell declared in the House of Commons that the Irish education system ‘wants to be taken to pieces and re-modelled’, and lamented the inherent limitations of pre-existing arrangements given that, in his view, ‘in Dublin,

\(^{51}\) See, for instance, the discussion between a headmistress and the Commissioners in National Education in the Public Records Office of Northern Ireland, ED/8/1/212, communication relating to the erection of a cookery room at Newry Model School, 1898–1900.
Limerick and Cork the people are not fed, and they are not fed because their wives and daughters do not know anything of cookery'. In the absence of appropriate facilities, cookery tended to be taught theoretically using scientifically informed but impractical and dry text-books such as Fannie M. Gallaher’s *Short lessons in domestic science*. The moral panic about excessive tea drinking and poor nutrition across much of Ireland lent urgency to the discussion of domestic instruction. In 1900 domestic education was made into a compulsory subject for girls throughout Ireland. From 1900 a large number of teachers were trained by the department of agriculture and technical instruction. Municipal Technical Schools also offered training, as photographed in Plate I. Yet these teachers returned to encounter a lack of equipment and the space necessary for cookery instruction. If space was unavailable in schools, then it had to be sought elsewhere. In Kilkenny, teachers delivered cookery classes in rented rooms and poorly ventilated abandoned houses. In County Wexford, they taught cookery in unoccupied homes, courthouses, a security room attached to a church,

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52 ‘Motion for leave’, *House of Commons Debates* (22 February 1892), vol. 1, cc968–99.
53 Fannie M. Gallaher, *Short lessons in domestic science* (Dublin, 1894).
54 See the criticism recorded in *Appendix to sixty-seventh report of Commissioners of National Education*, H.C. 1902 [Cd.954] xxx.1, 89–91.
a stockroom, a spare room in a disused mill, a joiner’s workshop and even in
barns and coach houses. More positively, new text-books (such as Kathleen
Ferguson’s *Advanced lessons in cookery* and Josephine Redington’s *Economic
cookery book*) distributed to national schools discussed cookery, nutrition and
hygiene in a clearer, more pragmatic style than earlier text-books. Even if
teachers struggled to secure practical and financial resources, the new text-
books contributed to increasing knowledge of the importance of a nutritionally
balanced diet, hygienic cookery and cautious purchasing.

The reluctance of state bodies to feed schoolchildren also encouraged
public debate. The Irish Education Act of 1892 made school attendance
compulsory but failed to take into consideration how the young were to be fed
during the school day. The implementation of school meals provision in
England and Wales in 1906 raised questions about why the policy was not
extended to Ireland. A fear that state help would diminish parental responsi-
bility for feeding their children was a consideration but it did not inhibit the
sustained campaign led by Maud Gonne through her Ladies School Dinners
Committee in 1910. As part of her public campaign for school meals
provision, Gonne penned emotive statements such as ‘hundreds of child lives
are being sacrificed; thousands of Irish boys and girls are being condemned to
life-long physical suffering and mental inefficiency by school-day starvation’.
She also attracted physicians such as John O’Conor Donelan, assistant medical
officer of Richmond Asylum, Dublin, to her scheme. These physicians
confirmed that numerous incidences of mental breakdown among the Irish
young were due to the excessive strain and long hours of schooling without
feeding. Oliver St John Gogarty added to the debate by warning that:

> Lunacy is increasing in this country. The unfit are being propagated and
> preserved. There is neither law to protect the children nor law to save
> the future generation from unfit parents. Soon there will be no one
> healthy. But we must not deliberately hasten this morbid millennium. It
> may be in some way delayed, and the most important way of delaying it
> is to protect the rising generation. Feed the school children. The school
> children must be fed.

The activities of Maud Gonne’s committee focused on distributing 450 meals
per day to two Dublin schools: St Audoen’s and John’s Lane, two of the poorest

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55 National Archives of Ireland, Department of Agriculture, 92/1/26, Building Grants
for Technical Instruction, 1906.
56 Kathleen Ferguson, *Advanced lessons in cookery* (Athlone, 1903); Josephine
57 Lindsey Earner-Byrne, *Mother and child: maternity and child welfare in Dublin,
1920s–1960s* (Manchester, 2007), 12.
59 Gonne, ‘Responsibility’, 484.
60 Oliver St John Gogarty, ‘The need of medical inspection of school children in
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schools in Dublin, though Dublin Corporation refused to provide a grant to aid this work. The issue was finally resolved when the Education (Provision of Meals) (Ireland) Act of 1914 allowed local authorities to provide school meals and purchase cooking equipment. The implementation of this measure was encouraged by the visibility of starving, underfed children during the Dublin Lockout of 1913.

The most efficient interventions in dietary concerns were made in the voluntary sector. The Women’s National Health Association (WNHA) adopted a particularly pro-active role in tackling tuberculosis, high infant mortality levels and the relative lack of knowledge among working-class mothers on infant feeding. Founded in 1907 by Lady Aberdeen, wife of the Lord Lieutenant John Campbell Hamilton-Gordon, 7th earl of Aberdeen, the association established 150 branches nationwide. Through their public lectures and publications such as Sláinte, the association promoted the need to feed children with milk, not tea, to ensure their healthy growth. In addition, it encouraged the consumption of pasteurised milk. Milk depots were intended to play an important role in popularising milk consumption. Milk supplies dispatched from these depots were guaranteed to be pasteurised and to have originated from healthy cows. Mothers received education on nutrition, hygiene and infant feeding when they collected their milk. Yet the association reached a barrier when its members campaigned for the initiation of a systematic state-supported scheme at the Vice-Regal Commission on the Irish Milk Supply of 1911.

It was only in the early twentieth-century that post-Famine concerns about under-nutrition and a general lack of knowledge of hygiene and cookery were tackled in a sustained manner in Ireland, although with limited efficacy. This development stemmed in part from an international rise in sensitivity to the health of infants and children, diet and nutrition-related concerns. Yet this issue seemed particularly pronounced and emotive in Ireland given that the country had proportionately higher infant mortality than most other European countries and that under-nutrition seemed to have resulted, in part, from changes stemming from a momentous national catastrophe: the Great Famine. The early twentieth century saw the development of new ways of investigating food, digestion and diet. In the opening decades of the century, laboratory

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63 Padraig Yeates, Lockout: Dublin 1913 (Dublin, 2000), 366.
66 ‘The result of six months’ experience of Dublin pasteurised milk depot’, Sláinte 1:3 (March 1909), 41–8.
scientists isolated vitamins for the first time and drew connections between vitamin deficiency and the onset of conditions such as rickets, although it was only after independence that vitamins were widely discussed in Ireland. Prior to independence, calories and the idea that food intake was related to physical energy impacted more forcefully on expert thought on diet in Ireland. Studies such as William Henry Thomas’s *Food problems: supplies and demand in Ireland* (1916) sought to determine the levels of energy that Dublin’s labourers obtained from their diets as part of an effort to prove that wartime food shortages were impacting adversely on the ability of the Irish labour force to sustain productivity in the workplace. In particular, Thompson lamented the fact that Irish producers exported large amounts of nutritious foodstuffs, such as beef, while the Irish poor tended to derive energy from potatoes and bread in addition to imported goods such as tea. The introduction of further ways of measuring dietary health did little to alleviate problems in the Irish diet. In the decades after the Famine physicians seemed to have found new ways of investigating and diagnosing nutritional problems. Yet state action remained limited, which was exploited to effect during Sinn Féin’s wartime propaganda campaign, which claimed that Britain was pursuing a policy once again of starving Ireland by refusing to stop nutritious foodstuffs, such as meat, being exported out of Ireland to feed England.

**Conclusion**

In the period after the Famine food was thought about in new ways. An increasingly sophisticated science of food and diet gradually informed food choices. A new vocabulary of nutrition, hygiene, nervousness and calories steadily impacted on attitudes towards food intake. This development allowed physicians and other critics to problematise dietary customs that failed to conform to the new dietary ideals outlined by medical scientists. A moral panic about post-Famine customs such as heavy tea drinking replaced the negative preoccupation with the large quantities of potatoes consumed in pre-Famine Ireland. Concern also arose about the institutionalised young as physicians established firm links between nutritionally inadequate feeding regimes and the onset of conditions such as scrofula. This development also reflected a palpable shift in the debate on food that emphasised the importance of obtaining nutritional quality instead of condemning the large quantity of food seemingly consumed by the Irish. This expert language on food increasingly informed how the dietary and nutritional problems shared by the Irish poor were understood, interpreted and discussed.

How best to resolve the dietary problems shared by the less affluent remained a thorny issue. State bodies introduced measures such as domestic education. However, these proved relatively ineffectual due to a lack of financial

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and practical resources. The issue of ‘school-day starvation’ proved particularly emotive and it encouraged individuals such as Maud Gonne to campaign against the large numbers of hungry schoolchildren that she encountered in Irish schools. Yet children were also underfed at home. Groups such as the WNHA believed that mothers failed to feed their children due to ignorance, not neglect. Accordingly, they sought to educate working-class mothers on matters such as infant feeding. Despite these activities, a profound sense existed in post-Famine Ireland that the Irish had been healthier and stronger when fed on the nutritious potato. Diet may have been revolutionised after the Famine, as political economists and critics of Ireland’s monocrop culture had long advocated. Yet the consumption of a more varied diet failed to bolster nutritional well-being. On the contrary, it seemed to some that the Irish had never been so poorly fed since the Famine.