

Conservation and Management Plan

Reilig Ospidéal Naomh Lomáin

St Loman's Cemetery

Mullingar Co. Westmeath



Date:

Client:

Midlands Louth Meath Community

Health Organisation (CHO)

Report By:

John Tierney



Conservation and Management Plan Reilig Ospidéal Naomh Lomáin St. Loman's Cemetery

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1 Executive Summary

- St Loman's cemetery is an institutional burial ground for the St. Loman's Hospital in Mullingar
- The Hospital opened in 1855 and until 1906 burials of patients who died were either undertaken by family of the patients or in local adjacent burial grounds organized by the hospital.
- In 1906, following the opening of the larger District Mental Hospital and associated cemetery in Portrane, Co. Dublin, a dedicated cemetery was opened in the NW corner of the hospital demesne. This cemetery was designed as sacred space for the burial of patients and staff. Only two former staff members were buried in the cemetery, a former matron in the hospital and her husband a former Medical Superintendent for the District Mental Hospital.
- The cemetery was the final part of the institutional religious structures which included a RC church, a room used for COI services (followed by the dedication of a later COI chapel), a mortuary within the hospital grounds and a smaller mortuary built within the cemetery in 1906.
- Every patient's funeral was officiated by clergy and attended by patients and staff.
- Burials were registered and marked. All burials were in coffins and most, if not all, burials were in individual graves. The most common from of a grave marker was a cast iron cross, numbered to match with the sequential burial register. Access to the burial register was limited to hospital staff only. Privacy for patients and families was maintained by use of this system of anonymity while also allowing families to trace their relative's graves.
- Individual graves were dug within 11 of the 12 burial plots delineated in the cemetery.
- Two of the 12 burial plots, 5 & 7 were designated for 'Non-Catholics' and a total of 48 burials, apparently oriented N-S, took place in these plots.
- Burials continued from 1906 to 1970 and a total of 1256 burial numbers are recorded in the register.
- From the time of final burials in 1970 the management focus of the cemetery changed from burial, remembrance and maintenance to remembrance and maintenance.
- From 1970 onwards the NW peripheral location of the sacred space of the cemetery proved it's greatest threat. Vandalism became a significant factor in the maintenance of the cemetery and it appears the individual grave markers were being disturbed and relocated on a regular basis thereafter.
- Staff and former staff who oversaw the maintenance of the cemetery, predominantly on a voluntary basis, struggled to counter the effects of vandal-

- ism that culminated in a period of significant damage from the mid 1990s to the mid 2000s.
- By 2011, only approximately one third of the individual grave markers
 were still standing, and the remainder had fallen and often become buried.
 Of those that still stood many appear to have been disturbed. In 2011 the
 standing crosses were removed to safe-keeping to a store within the hospital
 grounds.
- This report proposes to reaffirm the sacred space of the cemetery, to clarify systems for relatives of patients buried in the cemetery, and to protect the historical archive of documents related to the cemetery and the hospital.



Plate 1: Aerial view of St Loman's cemetry.

2 Introduction

HSE Dublin (Mid Leinster) appointed Eachtra Archaeological Projects Ltd. to undertake a conservation management plan for St Loman's cemetery, St Loman's Hospital, Mullingar, Co. Westmeath. The plan is to form a basis for the long-term maintenance and management of the cemetery, to build community engagement with the cemetery, to support future funding applications and to secure the conservation and use of the site.

St Loman's Hospital has had a formative influence on Mullingar's development and further afield in the three counties of Westmeath, Longford and Meath which it served. With a clientele from these three counties as well as staff from all over Ireland the heritage of the site has a broad geographical significance. The District Lunatic Asylum (DLA) opened in 1855 and facilities on the site still provide mental health services to this day. The DLA developed as a working farm and grew considerably over the years. Patients were involved in many aspects of the running of the hospital/asylum and of the farm. The DLA cemetery was opened in 1907, a total of 1256 grave numbers were issued before the final burials in 1970. The cemetery had a clear system for registering and marking burial while also respecting the privacy of the individual and families concerned.

The management of care and maintenance of the cemetery has been the subject of scrutiny and criticism in recent years due to damage caused to the cemetery. It is intended that this conservation and management plan will serve as a toolset for the site stewards, families of previous clients, staff and retired staff, and aims to combine their knowledge and experience to build a sustainable management plan for the cemetery.

The cemetery was run to a high standard throughout its lifetime and the sacred space was maintained until burials ceased. Once burials ceased staff and former staff were deeply involved in maintaining the sacred space and remembrance of those buried in the cemetery. The coincidence of the closure of the cemetery with the arrival of adjacent housing estates resulted in a 25 year period of vandalism and damage to the sacred space.

Institutionally and personally, staff and former staff tried constantly to care for and maintain the cemetery. The problems being faced in St. Loman's were not solely local but have been encountered in graveyards and cemeteries in every county in Ireland over the last 30 years and only since 2010 has the accumulated best practice of knowledge developed within the heritage profession been published for burial grounds (GCCRHG 2010).

This report was written by John Tierney of Eachtra Archaeological Projects Ltd., with contributions by Dr. Ciara Breathnach of the University of Limerick and Heather Gimson of Earthsound Archaeological Geophysics. A number of group and individual public consultations were held in the preparation of the conservation & management plan. The author wishes to thank Brendan Mulligan, Pat McDermott and Jennifer Nolan for ongoing assistance.

In the course of preparing this report St. Loman's cemetery has been identified as a site of international heritage significance.

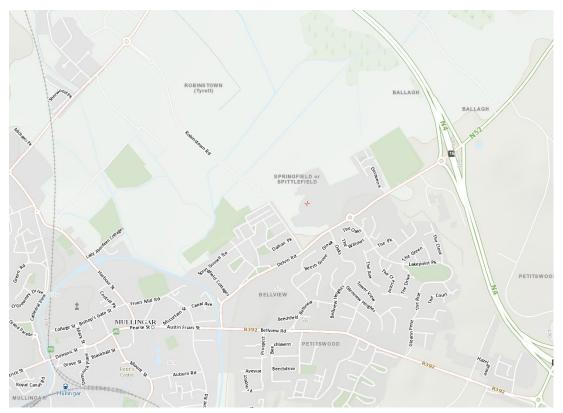


Plate 2: Portion of an OSI map of Mullingar showing the location of St. Loman's Hospital (red cross)

2.1 Location

St Loman's cemetery is situated in the grounds of St Loman's Hospital, Mullingar. The hospital was the former District Mental Hospital for the three counties of Longford, Meath & Westmeath. The DMH grew to encompass a substantial acreage around Mullingar although the core property was enclosed with a boundary wall in the 19th century. The cemetery was opened in 1907 and was located in the NW corner of the then curtilage.

The hospital and cemetery are located in the townland of Spittlefield, later also called Springfield, in the parish of Mullingar, the barony of Moyashel and Magheradernon in Co Westmeath. In Gaelic the townland is called Påírc an Spidéil which means 'hospital field' indicating medieval origins for a hospital on the site; although there are no recorded archaeological monuments in Spittlefields townland.

St. Loman's hospital is bounded on the S by the Delvin Road and on the W by the Robinstown road. The Robinstown road was built 2005-7 and it runs directly outside the W boundary wall of the cemetery. This road now separates the cemetery from the Dalton Park housing estate. Prior to the construction of the Dalton Park estate the cemetery was situated over 500 m away from the nearest housing. The coincidence of the closure of the cemetery after 1970 and the arrival of the adjacent housing estate meant that the cemetery now faced a considerable challenge to its role as a sacred space.



Plate 3: Main features of St. Loman's Hospital in 2017 (source © Google Earth)

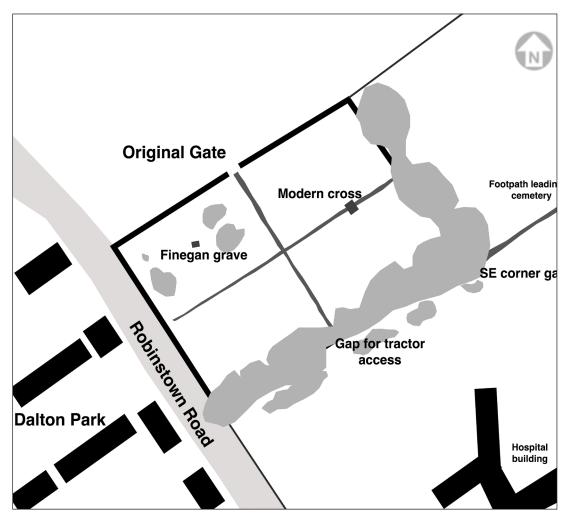


Plate 4: Plan of St. Loman's cemetery in 2017 and main adjacent features

2.2 Architecture and Built Heritage

Protection of architectural or built heritage is provided for through a range of legal mechanisms that include the Heritage Act, 1995, the Architectural Heritage (National Inventory) and National Monuments Act 1999 and the Local Government (Planning and Development) Act 2000. In general a policy of Conservation Best Practice should be employed in working on all features on the site - the basis for conservation is the belief that the original materials that are intrinsic to the cemetery site are important and thus worth the effort of conservation. This is borne from values that we attach to the place; to us this means we should 'do no harm', a concept that is underlined in practice and regulation by the principles of the 1966 Venice Charter of ICOMOS (International Council on Monuments and Sites) and enshrined in both National and European laws (1991 Valletta Convention on the Protection of the Archaeological Heritage) (Davenport 2007).

Before any works start a period of planning and consultation is necessary. During this time the advice and guidance of the various offices of the HSE Dublin (MiDMHnds), Westmeath County Council, including the local authority dealing with heritage matters, as well as state bodies such as the Department of Arts, Heritage, Regional, Rural and Gaeltacht Affairs should be sought.

2.3 The Heritage Act

The Heritage Council is an independent statutory body, which was established under the Heritage Act 1995 in order to carry out a variety of functions pertaining to the national heritage. The main purpose of the Heritage Council is to propose policies and procedures for the 'identification, protection and enhancement of the national heritage (DAHGI 1999.18).' The 1995 Heritage Act protects all heritage buildings owned by a local authority from damage and destruction. The booklet Guidance for the Care, Conservation and Recording of Historic Graveyards (GCCRHG) published by the Heritage Council is a very comprehensive handbook for all works in a graveyard. The booklet defines lawn cemetery as; 'a term used to describe a modern cemetery that may be only 100-200 years old. These are usually well maintained and have well-manicured flat lawn-style grass with sanitary services, car parking, and regular burial plots accessed by a rectilinear system of modern leading to all sectors of the *graveyard*.'

By the definition of the GCCRHG St. Loman's can be classified as a 20th century institutional lawn cemetery. Lawn cemeteries managed by municipal authorities can have both a sacred and a secular status (combining funerary & burial purposes with the role of a public park) (Rugg 2000, 259). St Loman's cemetery was originally designed as a private sacred space for the burial of patients and staff of the DMH. Therefore, the cemetery was never intended to serve secular functions. This interpretation has implications for the future management of the cemetery.

Institutional cemeteries are little studied (Mytum 2004, 131, Rutherford, 2003, 193) and where they have been investigated the focus has been on technical issues rather than burial practices or ethical matters (Gaffney et al 2015).

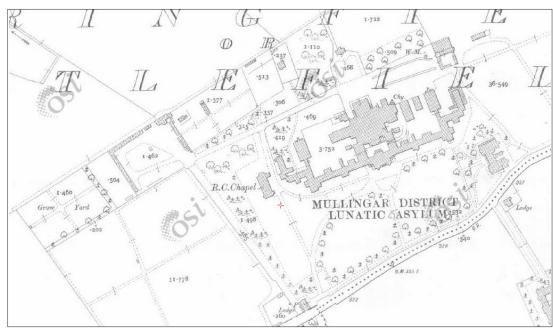


Plate 5: Extract of the 1900s 25 inch map of St. Loman's showing the cemetery within the broader hospital grounds.

2.4 Architectural Heritage Act

This Act was established in 1999 and requires the Minister to establish a survey to identify, record and evaluate the architectural heritage of the country. This is being carried out county by county under the National Inventory of Architectural Heritage (NIAH). The purpose of the NIAH is to record all built heritage structures within the Republic of Ireland. Architectural heritage is defined as follows; 'all structures, buildings, traditional and designed, and groups of buildings including streetscapes and urban vistas, which are of historical, archaeological, artistic, engineering, scientific social or technical interest, together with their setting, attendant grounds, fixtures, fittings and contents and, without prejudice to the generality of the foregoing, includes railways and related buildings and structures and any place comprising the remains or traces of any such railway, building or structure (Heritage Act 1995 Section 2.1).

Inclusion in an NIAH inventory does not automatically provide statuary protection, however the document is used to advise local authorities on the compilation of a Record of Protected Structures (RPS) as required by the Local Government (Planning and Development) Act, 2000. There is an NIAH produced for all of County Westmeath.

While seven elements of the St. Loman's site are listed in the NIAH register the cemetery is not included! As an internationally significant site the cemetery should be added to the NIAH register. The later adaptation of the original mortuary building into a COI chapel should also be added to the NIAH register.

2.5 Planning and Development Act

Under the Local Government (Planning and Development) Act, 2000 all Planning Authorities are obliged to keep a 'Record of Protected Structures' of special architectural, historical, archaeological, artistic, cultural, scientific social or technical interest. As of the 1st of January 2000 all structures listed for protection in current Development Plans have become 'Protected Structures'.

Since the introduction of this legislation planning permission is required for any works to a protected structure that would affect its character. If a protected structure is endangered planning authorities may issue a notice to the owner or occupier requiring works to be carried out. The Act contains comprehensive powers for local authorities to require the owners and occupiers to do works on a protected structure if it is endangered or a protected structure or a townscape of special character that ought to be restored.

The Westmeath Development Plan 2014-2020 sets out a strategy to protect and enhance the architectural and built heritage of the county. This includes the designation of structures as protected structures and their inclusion on the Record of Protected Structures (RPS). The purpose of the RPS is to record and maintain details of all protected structures within the county. St. Loman's Hospital is represented in the RPS by 7 structures but the cemetery is not included. Presumably this was an oversight and must be rectified as the cemetery is of international significance.

Once included in the RPS Westmeath County Council will have a potential role in the future management of St Loman's cemetery, as it does already for the other structures included in the RPS.

2.6 Methodology

A key part of the Conservation Plan brief was to develop an understanding of the site. We followed a threefold approach to understanding the site.

Firstly we made a number of site visits and interviewed current and former staff members as well as speaking to a number of people who have family members buried in the cemetery. We analysed the burial register data to examine the rates at which people were buried and also to determine what burial system was followed.

Secondly, we reviewed the historical archive for the DMH, conducted by Dr. Ciara Breathnach, with a view to understanding the history and function of the cemetery within the broader system.

Thirdly we conducted a detailed series of geophysical surveys, by Earthsound Archaeological Geophysics, to better understand the physical layout of the site and how it changed over the last century. As part of the vegetation clean up in advance of the geophysical survey we were able to record the surviving grave memorials in plots 1, 2 and 12.

3 Understanding the Site

3.1 Community engagement with the cemetery

There are two main constituents of people currently engaged with the cemetery.

- 1. Families of people buried in the cemetery
- 2. Staff & former staff of the hospital

There are currently two annual commemoration events held in St. Loman's for all buried in the cemetery, one organized by the St. Loman's staff and the other by the families of a number of patients who were buried in St. Loman's.

As an institution older than the state, St Loman's has developed a complex series of relationships between clients, patients, families of patients and staff; current and retired. To many patients of St. Loman's the staff became their families. For many staff and retired staff in St. Loman's they also felt that they became surrogate family for patients. Because staff and former staff were onsite more often than the families of former patients it fell to them to deal with the vandalism affecting the site. The institution appears to have struggled with the impacts of the vandalism as it affected the key elements of the sacred space, mainly the boundary walls that excluded secular activities and the individual grave markers.

Societal attitudes affected burial systems and practices in Irish DMHs but less so in St Loman's from 1907 onwards. From that date each person who died in St. Loman's was given a registered and marked burial, apparently all with a formal funeral. The marked burials (predominantly cast iron crosses) were numbered corresponding with the burial register. The burial system apparently established by Dr. Arthur Finegan and the board of management for the district hospital in 1906/7 is a yardstick for measuring the systems in other institutions.

Families of former patients who wish to find their relative's graves now have to follow a simple system when visiting St. Loman's. Firstly, they telephone, email or write to the hospital administration in St. Loman's Hospital. Hospital staff are based onsite and they have access to the burial register and cemetery plan. If a family member is identified, and the family relationship satisfactorily established, then the visitors are given a copy of the burial register plan and the grave number. When the burial plots were intact, and a large number of iron crosses marked the individual graves, families were able to trace exact burial locations for many of the burials. However, despite the implementation of a well thought-out burial system it would appear that errors in burial location and associated grave markers may have occurred throughout the functioning life of the cemetery. Although, the steps involved in finding a relatives burial records are simple there are a multiplicity of complicating factors that should be itemised and communicated with the general public highlighting the most common problems encountered in such searches eg. some graves were marked with wooden crosses which have not survived. The HSE need to identify a clear policy for dealing with such historic queries.

Privacy is paramount in this process and care is taken not to give out information incorrectly.

With over 1200 people buried in St. Loman's there are many families from the three counties of Westmeath, Meath & Longford with links to St Loman's. Privacy for individuals and families must be respected especially when we have widely varying attitudes to mental health. As modern advances in dealing with mental health affect society we will see these attitudes change but it is still relatively early days in process. Some families of former patients are clear in their openness to remembering their loved ones buried in St Loman's.

Some families may wish to exhume their loved ones from St Loman's and re-inter them in a family plot. In recent times, one exhumation application has been made. The system for exhumations is open to all but strict rules adhere and this report has considered the factors affecting families considering exhumation. In no way can St. Loman's cemetery be considered a common plot as the majority of burials were in individual graves and were marked with unique identifying numbers. The loss of the locational information attached to the *in situ* iron crosses makes the graves difficult to identify but they cannot be classified as common graves or plots.

Ostensibly, the St Loman's burial system with individually registered and buried graves allows for the exhumation of individuals and at least 2 exhumations have already taken place in St. Loman's over the years. However, clear doubt now hangs over the route to exhumation because of the long slow disturbance of iron cross grave markers, which appears to have commenced before 1970.

Examination of historic photographs of the grave markers also raises the issue that while most burials in St. Loman's are E facing (as is the Christian tradition in Ireland) some are S facing (those running along the N wall) and some may be N facing (Plot 12 S boundary plot). Others, at the E end of Plot 3 may be on buried on the W side of the cross, matching the orientation of the iron crosses previously photographed there. This latter points means that the coffins may, in some few cases, have been interred on different sides of the cross, a complication which must be borne in mind if we attempt to reconstruct burial patterns across the site.

By 2010 it seems fully three quarters of all grave markers were disturbed, fallen and/ or relocated. In 2011 the remaining quarter of iron crosses were removed after further vandalism.

However, we still do not have enough information to determine if exhumation and individual grave identification is no longer possible in St. Loman's. As the geophysical survey identified approximately. 700 iron objects, probable crosses, distributed across the site it is proposed that all of these crosses be identified, recorded, accurately located and recovered so that it can be determined how many are likely to be in or near their primary location. This process is likely to recover coffin ornaments such as handles and perhaps coffin plates, potentially with names or grave numbers, which could also be in the subsoil, and this could help us also to determine if individual grave identification is possible.



Plate 6: The original N gate entrance to the cemetery. Gate piers are mass concrete built.

3.2 Site Inspection St. Loman's Cemetery

St. Loman's Cemetery was opened in 1906 (Committee 2014) and received its first burial in 1907 although arrangements for opening a cemetery were considered to be at an advanced stage in 1891. The 1.5 acre site was divided into 4 quadrants with 12 burial plots (Plots 1-12) (Plate 15) with plots 5 & 7 to be used for non-Catholic burials while plot 11 was never used for burials.

The cemetery is rectangular in plan, measuring 97.3 m ENE-WSW x 62 m, and is bordered by a stone wall on the N & W sides with a high earthen bank on the S & E. The ground level in the interior of the cemetery slopes gently to the E. Access was originally intended to be through a gate in the centre of the N wall but access is now by foot through a later gateway in the SE corner and another larger gap in the centre of the S bank, used for tractor-mower access to the site. The nearest vehicular parking is 60 m to the E of the cemetery.

3.3 Boundary Walls, Gates & Pathways

The extents of the cemetery are defined on the N & W by a well-built limestone wall which follow the line of the property shown on the 1850s Griffiths valuation map, and on the S & E by a hedged earthen bank. The site is physically well defined but it is peripheral to the hospital grounds and it's peripherality became an issue in the care and conservation



Plate 7: Photograph taken in 2017 of the cemetery west wall & Plot 12. The top courses of the wall were added in 2005/6 when the wall was largely rebuilt following severe damage caused by vandalism. Plot 12 was strimmed and raked in 2016

of the site after burials stopped in 1970. In interviews some retired staff said that many people did not know the cemetery was behind 'those trees'.

The S & E banks preceded the cemetery construction and bounded a pre-existing field. They do not match with the W & N boundary walls in terms of materials. The W & N boundary stone walls are of a different height to one another and appear to be the original DMH boundary walls, with later repairs. A pre-existing N-S orientated field bank that is shown on the mid 1840s 6 inch OS (and was traced during geophysical survey) had run across what became the E half of the cemetery. This field boundary appears to have been superceded and replaced by a new property boundary that coincides with the first Griffiths Valuation (mid-1850s) property plot that was sold for the construction of the DLA (Plate 8).

Thus a line drawn on Griffiths Valuation map became the DLA boundary to the W, N & E and cut through the preceding field system. The S & E cemetery boundaries are the surviving remnants of this preceding field system. They consist of wide earthen banks with an original bank augmented by added material perhaps from the clearance of adjacent field boundaries when the DLA bounds were being built. Mature deciduous

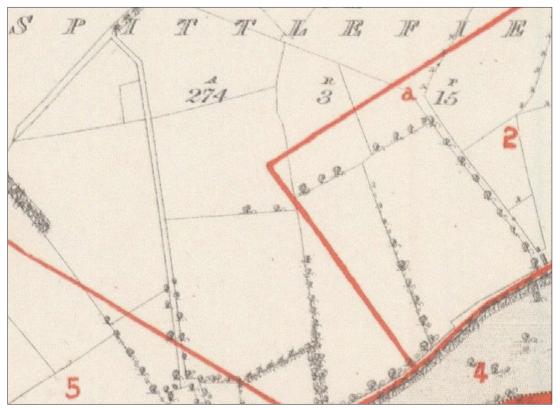


Plate 8: Extract from 1850s Griffiths Valuation 6 inch map of Spittlefield townland. Property 2a was purchased as the site for the DMH and the NW corner of the property became the site of the cemetery in 1906.

trees grow on the earthen banks but they are not dense enough to make the cemetery boundary stock-proof.

Legislation for the enclosure of burial grounds commenced in the 1840s² and required all burial grounds to be fully enclosed as a matter of public health. It would appear that St Loman's cemetery was enclosed but not necessarily stock proof for all of its usage period. As a cemetery is by definition enclosed to provide a clear boundary for the sacred space and a means to exclude animals a fully enclosed space should be created which confirms the sacred space.

Access to the cemetery was originally from the N, through the original gate that appears to have been connected to the DLA via an extra-mural path to the mortuary building and the RC chapel from where bodies would have been transported by cart (Plate 17).

An informal hospital museum has a rubber wheeled cart of the type that may have been used for transporting coffins (Plate 18).

The use of the external, north-facing, gate (**Plate 6**) cut the cemetery off from the DMH from the very beginning. The sense of separation may originally have been designed for privacy and for creation of a sacred space but it resulted ultimately in the partial abandonment and institutional neglect of the burial ground. The problem is commonly encountered throughout Ireland – registered cemeteries still in use require regular man-



Plate 9: Wrought iron gate from the later SE corner entrance. Possibly made within St. Loman's Hospital. Should be repaired and re-erected

agement and investment – when they are closed they can become neglected, abandoned and suffer damage to memorials and burial plots.

The W boundary wall is built of rough coursed limestone blocks of 8-12 courses in height. The N boundary wall is only four courses high with a crenellated top. Both walls have been considerably repaired in the last 20 years having previously suffered considerable collapse in places (Plate 7).

The N boundary wall requires further repair works with a length of approx. 33m in need of immediate repairs.

A later gateway in the SE corner (**Plate 13**) of the cemetery was added and this is the current main access way as it is closest to the car park. A wrought iron gate originally closed the gap but was removed and is kept in an informal hospital museum/store. This gate should be repaired and re-erected.

A security fence has been erected outside the N boundary wall. The original N gate consists of two monumental mass concrete piers and the original iron gate is missing. The gateway is blocked by a low limestone rubble wall (**Plate 6**). An inner face recess in the piers shows where an iron gate was originally hanging and opening inwards. If the external security fence remains in place there no need to reinstate an iron gate in this gateway. The rubble wall filling the gateway should be repaired along with the partly-collapsed section of the N wall.

The W wall is in a good condition and has been extended upwards probably in 2005/6 when the Robinstown road was constructed. The 2005/6 works also involved significant repair of the W wall. A photographic survey from the mid 1990s shows the W wall in very poor condition with multiple breaches, some to ground level. There are a number of



Plate 10: View of Plot 4 from NE - ranging rods show the edges of the burial plots and two of the original internal paths, now grown over.

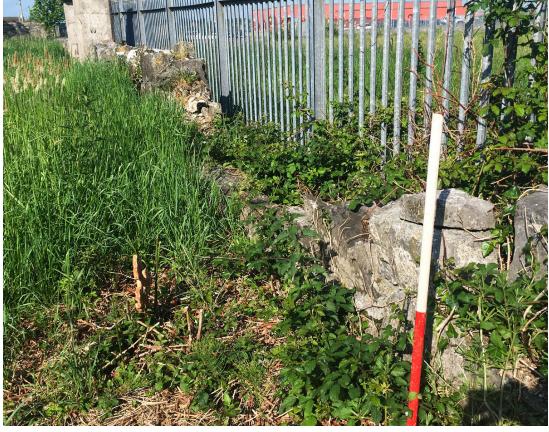


Plate 11: View of damaged section of N wall W of Gate



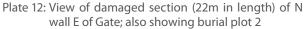




Plate 13: Photograph of the current SE entrance to the cemetery with concrete block built gate piers and overhanging branches.

places in the W wall where lime mortar is missing and needs to be replaced. The N wall is presently in poor condition in a number of places and needs to be repaired with topmost courses and crenellated top replaced (a length of 33 m of wall requires repair) (Plates 11 & 12).

3.4 Vegetation

Until recently the cemetery vegetation has been managed using a tractor mower cutting the large grassy surface present onsite. The side plots to W and N had become overgrown by brambles and other non-grass species and these were given a heavy cut in late 2016 as part of the works involved in the current report. The tractor enters the site through a wide gap in the S boundary and cuts the grass on a monthly schedule. Dock leaves are strongly present within the grassland.

There are four main elements to the vegetation in the cemetery;

3.5 Grass cover on the burial plots 3-10.

Originally designed with a network of footpaths delineating the burial plots the cemetery interior has been converted into a single grass covered surface. Grass is cut on a monthly basis during the summer months.



Plate 14: Plot 4 the Austrian Pines believed to have been planted approx 1910. The Finegan monument is visible between the cleft in the tree

Gravel paths should be laid using locally sourced gravel within a wooden edge of the type used elsewhere in the hospital grounds (except for the use of tarmacadam). Tarmacadam is not appropriate for the cemetery. The gravel paths should be raked after each cutting event and grass cuttings removed.

- Four main grass areas will be defined when the central paths are reinstated. The edges of these areas should be gently sloped for ease of cutting.
- No weed killers should be used within the cemetery. Weed killers are not appropriate for sacred burial space nor does their use fit within established best practice.
- In the long term, the stewards of the site and families of people buried here should consider the establishment of a wildflower meadow in the cemetery.

3.6 Mixed vegetation on border burial plots 1, 2, 11, 12.

The boundary burial plots along the S, W and N side of the cemetery were originally defined by footpaths but are now difficult to discern. The S boundary plots are most difficult to detect and are now merged with the other interior burial plots.

The burial plots against the W and N walls are still visible but due to the unevenness of the ground, the presence of stone debris from collapsed walls, these plots were over-

grown by brambles until late 2016 when they were cut, strimmed and cleaned-up revealing some original grave memorials. As part of this process the original N gateway piers had become overgrown by ivy.

3.7 Ornamental Austrian pines in Plot 4.

It is hypothesized that these pines (**Plate 14**) were planted by Dr. Arthur Finegan as ornaments in Plot 4 when he buried his wife Eleanor Finegan (née Hobson). There were originally four pines but there are now three. The E-most pine appears to have been deliberately forked for decorative purposes. These pines are mature and may serve as a rookery.

3.8 Tree cover on the S & E boundaries.

The E and S boundaries appear to have originated as a late 18th or 19th century field system. The field banks were added to after the enclosure of St. Loman's by a demesne wall. Some of the vegetation on the S & E boundaries will predate the cemetery. The trees at the SE corner have a crowding effect at the current entrance and some branches should be cut back to create a more agreeable affect (**Plate 13**)

One section of the S boundary is being used as an informal memorial garden by the family of a young man who committed suicide nearby and care should be taken not to disturb this area during any potential future works in this area.

3.9 Cemetery Layout

The area of the cemetery is laid out into four quadrants and each quadrant is subdivided by footpaths into three burial plots. The original cemetery plan that accompanies the burial register shows the burial plots and associated pathways (**Plate 15**). These formed the basis for all future paths used on the site. There appears to have been considerable changes to pathway layout particularly in the latter days of the cemetery use following the final burials in 1970. Unfortunately the original burial register plan was drawn without a N sign and it is possible that families visiting graves may have misread the burial plan. Especially after the closing of the N gate which is shown on the plan.

All paths were removed in the last 20 years in an attempt to maintain the cemetery. Traces of the original network of pathways can be seen with the naked eye and the geophysical survey conducted as part of this conservation plan has clearly identified their location also. It would appear these pathways were created by digging into the ground rather than by raising the ground level of the burial plots. The general ground level across 65-75% of the cemetery was raised, by bringing in topsoil from elsewhere in the hospital farm, as part of maintenance works in the last 20 years. The effect of raising so much of the ground level since 1970 is that the original pathways are more difficult to discern, individual graves have been masked and also fallen iron crosses have been covered.

The absence of definite pathways today has two negative affects.

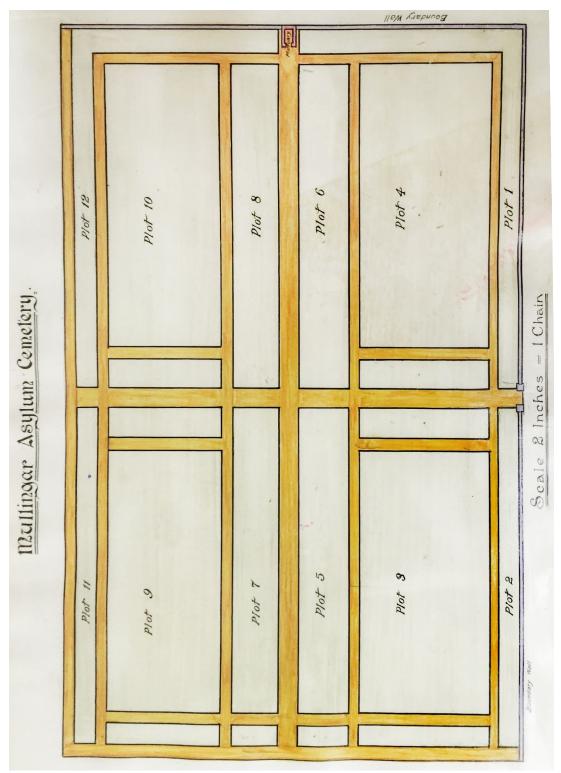


Plate 15: A copy of the original burial register plan with annotations showing key features and N sign.

- 1. Access is poor especially for older visitors. A solid path is required rather than grass.
- 2. The layout of the original plots is difficult to discern making it more difficult for visitors trying to identify individual graves or the broader burial plots.

Type 1 - simple narrow cross

Type 2 - simple wide cross with plaque



Type 4 - shorter armed finialed cross with lower perforation

Type 3 - finialed cross with central perforation

Plate 16: Four cross types identified from historic photographs of St. Loman's. This photograph is from the 1970s or 80s and is of Plot 10 from the W end ie. showing the back of the crosses

The burial plots are numbered from the NW corner, W to E in first two plots and then E-W thereafter and N to S (Plate 15). The cemetery plan shows a small mortuary building against the W boundary wall at the end of the central E-W path. This mortuary building measures approx. 2.5 m x 2.5 m and was still standing in the 1990s but was ultimately removed following extensive damage from vandalism. Slight traces of the foundations of the mortuary are visible today and photographs from the mid 1990s indicate it was a mass concrete building. Mass concrete construction was used from the mid- 19th century onwards in Ireland so this was a relatively early example of a mass concrete structure and a rare example of a mortuary.

All burials within these plots appear to have been numbered consecutively. Plots 5 & 7 were used for 'Non-Catholic' burials and these were numbered separately 1-48 which has the potentially confusing element of the first 48 numbers being used twice in different plots (plots 1, 5 & 7).

Where legible memorial crosses are visible in historic photographs the numbering sequence always seems to have run left to right ie. whether the memorials were E, N or W facing. This allows us to hypothesize that burial was to be done sequentially and in an ordered manner, which is different to a private cemetery where individual burial plots can be purchased at different locations in the burial ground. In this institutional cemetery burials could be more organized.

We have two sources for the order of burial within each plot. Firstly, the burial register lists all burials in consecutive order and in differently numbered graves, ie. no shared graves are recorded in the burial register. This is an important point worth stressing – there were no common graves in this cemetery. Common graves were sometimes used in

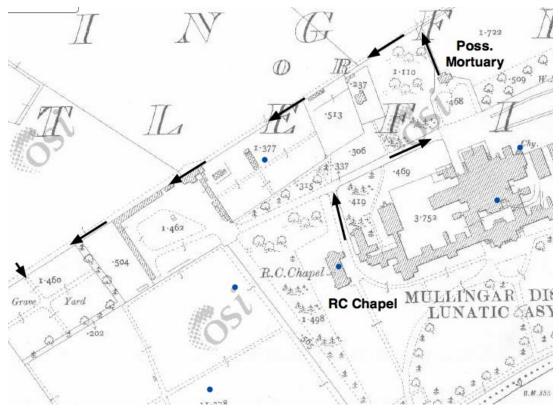


Plate 17: Plate 16 Extract of 6 inch OS map showing original connection between the hospital and the cemetery. Access to the cemetery was originally from the N, through the original gate that appears to have been connected to the DMH via an extra-mural path to the mortuary building and the RC chapel from where the coffin would be transported following a funeral service.

pauper's sections of a cemetery, being opened and containing more than one coffin before being closed. The use of common graves has not been studied in Ireland.

Secondly, historic photographs from the 1980s, 90s and 2000s of the cemetery show us the order and sequence of burials in a number of the plots. An examination of these historic photographs allows us to make a number of interpretative statements about the burial practices followed at St. Loman's (**Appendix 2**).

3.10 Cross Types

Four types of crosses are visible in the photographs of the cemetery plots.

- Type I simple narrow crosses (probably wooden)
- \bullet Type 2 simple wide cross with plaque at intersection (rounded or square) (probably wooden)
 - Type 3 finialed cross with intersection perforation (cast iron).
 - Type 4 shorter armed finialed cross with lower perforation (cast iron)

We believe the simple crosses were probably wooden, as none have survived in the cemetery today. If some of these simple crosses were made of metal they may have become buried over the years and should be recovered.



Plate 18: Wooden cart with rubber wheels of the type probably used to carry coffins around the hospital grounds. This cart is kept in a store in the hospital



Plate 19: View of Plot 4 from NE - ranging rods show the edges of the burial plots and two of the original internal paths, now overgrown.

3.11 St. Loman's Cemetery Burial System

Interviews with current and former staff reveal some information on the procedures followed when a death occurred within the DMH & hospital. A 'Dead Nurse' was assigned to deal with the death. Clergy were called immediately a death occurred or was considered imminent. Callouts happened at all times of day and night and the clergy were very prompt in answering each callout.

Bodies were removed to the mortuary for medical examination and once medical records were completed the body was prepared for burial. This often involved a mass in the RC chapel. As the COI services were held in the boardroom until 1961 it seems unlikely the COI bodies would have been moved back into public spaces again.

Following a religious service the coffin would be taken by carriage to the cemetery. Clergy attended all funerals and patients attended many if now all. A funeral seems to have been part of the standard social events attended by staff and patients in the hospital.

The 'Dead Nurse' supervised the patients who were tasked with grave-digging duties and one man recounted how graves were not always dug deep enough and how the priest had to request the deepening of the grave much to the consternation of the gravediggers. Graves were generally dug in pairs – while the exact process involved has not been clarified it seems this was a procedure followed to ensure the careful and orderly separation of burials.

Historic photographs of the cemetery indicate that burials within the narrow plots 5, 6, 7, 8 were oriented N-S rather E-W. Plot 1 has E & S facing burials, depending on which boundary wall they lay against. Plot 12 was also oriented in two directions and burials are likely to have been N and E facing in Plot 12. It is possible for burials in a N oriented burial plot to face E ie. to be dug perpendicular to the plot orientation but this is unlikely to be the case in St. Loman's due to the N-S orientation of grave mounds visible in photographs of plots 5-8 (Appendix 2).

Plot	Grave No's.	No. of burials	Dates of use	Sequence of use
Plot 1 – 1900s	1-63	63	May 1907 – Nov 1909	1
Plot 2 – 1920s	380-424	45	Jun 1920 – Oct 1922	5
Plot $3 - 20s$, $30s$	425-766	344	Oct 1922 – Jan 1940	6
Plot 4 – 1910s	131-379 (plus Dr Finegan)	251	Apr 1912 – May1920 (AF 1952)	4
Plot 5 – 00s, 10s, 20s, 30s	1-35 (Non-Catholic)	34 (#29 not used)	Oct 1908 – Aug 1939	2
Plot 6 – 1910s	64-130	67	Dec 1909 – Apr 1912	3
Plot 7 – 40s, 50s	36-48 (Non-Catholic)	13	Aug 1939 – Sep 1966	7

Plot 8 – 1 yr 40-41	767-800	34	Jan 1940 – Jun 1941	8
Plot 9 – 15yrs	1052-1248	197	Sep 1953 – Nov 1968	11
Plot 10 – 40s, 60s	801-1013, 1249-1256	223	Jun 1941 – Jul 1951. Dec 1968 – Oct 1970	9 12
Plot 11 –	-	-	-	-
Plot 12 – 2yrs	1014-1051	37	Aug 1951– Aug 1953	10

Table 1 Detail of different grave plots derived from the burial register

Plot	Grave No's.	Comments	
Plot 1 – 1900s	1-63	E & S facing crosses. The plot is 2 paces wide 63 paces in length and contains 63 burials. Some crosses are <i>in situ</i> and approx. 1m apart. Strong evidence from this, the first plot used, that individual graves were used and marked.	
Plot 2 – 1920s	380-424	Contains 45 burials and is approx. 45 paces in length x 2 paces wide. Some iron crosses are <i>in situ</i> and indicate burials are approx. 1m apart and individually marked.	
Plot 3 – 20s, 30s	425-766	This plot measures approx. 660m ² which is enough to contain approx. 330 individual graves – records indicate 341 burials in this plot. Some Plot 3 crosses have been identified in historical photos of Plot 9 but this is likely to be due to later cross disturbance.	
Plot 4 – 1910s	131-379 (plus Eleanor & Dr Arthur Finegan)	251 burials in the register. The plot measures approx. 660m² and can accommodate the 251 burials recorded. Eleanor Finegan (nee Hobson), former Matron to the DMH, was buried here in 1908, albeit not recorded in the register, and it is hypothesized her husband, Dr. Finegan planted the 4 Austrian Pines to compliment the grave monument. Burials are E facing and in tidy rows. The Austrian pines did not overly disrupt the burial rows. Crosses represent between 9-11 burials per row.	
Plot 5 – 00s, 10s, 20s, 30s	1-35 (Non-Catholic)	S facing crosses and also probable S facing burials. Low burial mounds evident in photographs as well as a longer ridge of soil covering other graves. The plot could easily accommodate the 34 burials recorded in the register.	
Plot 6 – 1910s	64-130	S facing crosses and S facing burials indicated by low N–S oriented grave mounds.	
Plot 7 – 40s, 50s	36-48 (Non-Catholic)	S facing crosses and S facing graves.	
Plot 8 – 1 yr 40-41	767-800	S facing crosses and S facing burials. Plot 8 is unusual in that it was used for one year only and contains 34 burials, all apparently in individual graves. March & June 1941 had 6 & 5 burials each which were higher burial rates than the other months in 1940/41.	
Plot 9 – 15yrs -1953-68	1052-1248	Along with Plots 3, 4 & 10 this is one of the main 4 burial plots. Crosses were present in S-N oriented rows and were mostly E facing. At the E end of the plot a number of W facing crosses were present and might indicate the use of W facing burials. The presence of crosses here which were registered for Plot 3 indicates there was some disturbance of the crosses after erection. Disturbance could also explain why some of the Plot 9 crosses were W facing. Spacing of the crosses in the rows was not as regular as at the W end of Plot 10.	

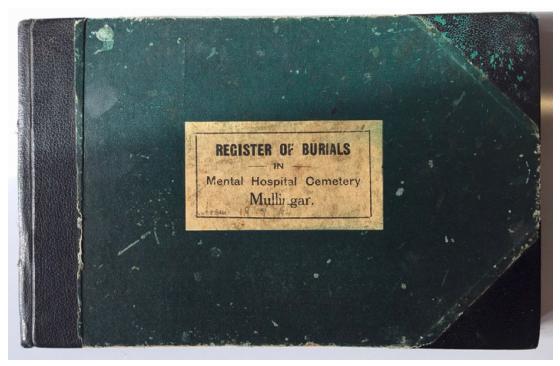


Plate 20: Cover of book 1 of the burial register from St. Loman's cemetery.

Plot	Grave No's.	Comments
Plot 10 – 40s, 60s	801-1013, 1249-1256	Used in two phases from 1941-1951 and then again from 1968-70. The W end had very regular spacing of iron crosses. Four crosses registered to Plot 9 were photographed located in Plot 10. This means either the crosses were partly disturbed or burials were occasionally dug in the wrong place. The former hypothesis seems most likely.
Plot 11 –	-	Not used.
Plot 12 – 2yrs	1014-1051	37. Some iron crosses survive in this burial plot and they run sequentially from S-N along the W boundary wall. This indicates burials in Plot 12 started along the S boundary. We have no evidence for the orientation of the crosses or the burials along the S portion of Plot 12. There are two options for grave orientation along this S portion. Coffins may have been interred with the head at the S facing the path (commonly occurring in post 1830 cemeteries) or they may have been buried facing S. The plot was filled in 2 years and is similar to Plot 8 in its rapid use.

Table 2 Detail of burial plots from site inspection and examination of historic photographs from the 1970s/1900s/2000s.

Burials took place in St. Loman's cemetery across 7 decades (1907-1970). The two decades with the highest number of burials were the 1920s (310 burials) and the 1940s (228 burials). In order to assess the reliability of the reports that each person received a single grave it is worthwhile to examine the stress the burial system would have been under. The burial register shows an overall average of 21 burials per year in St. Loman's across the seven decades. The DMH was required by law to maintain a register of all burials in the cemetery and no instances of mass death are recorded in the burial register, nor were any records of mass death found in our brief review of the wider documentation for the DMH prior to the establishment of the cemetery in 1907.

The period with most burials across the seven decades are the four years of 1916, 1917, 1918, 1919 when an average of 38 deaths occurred each year. So, even in the period of most burials the burial rate averaged little more than one burial per week. In no way was the burial system stressed at these rates.

The first four years of the 1940s also had a relatively higher death rate and averaged 26 burials per year ie. averaging one burial every two weeks. The worst individual year for burials in that decade was 1947 with 30 burials. One former member of staff told us that 1953 also had a higher than usual number of deaths due to a local fuel shortage.

It would appear from the documentary research and the examination of the historic photographs of the cemetery that all, or almost all, burials were individually marked with a numbered cross. Most of the crosses were of cast iron (which could not have been made in St. Loman's and must have been purchased) and some of the crosses appear to have been wooden. No wooden crosses remain in the cemetery

It seems the burial practices and burial records from St. Loman's were initially designed and overseen by Dr. Arthur Finegan. A highly logical system was implemented with individual grave pits and grave markers for each coffin and this seems typical of the man. The character of Dr. Finegan may also explain the different arrangement of Plot 4 in the cemetery with the addition of ornamental pines to complement his wife's grave monument.

Plot 4 is the only burial plot with ornamental trees. Four Austrian pines were planted here marking the corners of the rectangular plot but apparently centred on Eleanor Finegans grave monument. This two grave, kerbed and railed plot with an angel & cross monument in white marble is of an early 20th century type and was definitely erected to commemorate Eleanor, long before Dr Finegan himself died. Not only did Dr Finegan plant the four trees to ornament the plot but he also designed one tree, that due E of the monument, to have a fork that would frame a view of his wife's memorial. So although the cemetery is strongly designed as a sacred space for the patients of the DMH and hospital it also has a strong commemorative element for the two former staff (Mrs & Dr Finegan) buried here.

As all families had the option to bury their family members who died in St. Loman's in their preferred graveyards (and bear the associated costs) it must be presumed that the number of burials in St. Loman's cemetery will not always tally with the number of deaths each year. We do not however have this figure and such an analysis would be worthwhile in future.

3.12 Mortuaries

Institutions such as DMHs and Workhouses often had an attached mortuary (a house for storing dead bodies before burial) usually sited at either an extreme location within the property (particularly the case in Workhouses) or adjacent to the institutional burial ground (eg. Carlow DMH) or at a convenient internal roadside location for removal of the body for burial (eg. Killarney DMH). Portrane DMH in Co. Dublin was built just



Plate 21: Photograph, taken from S, of the original hospital mortuary which was converted to a COI chapel in the 1960s.

before the cemetery in St. Loman's was developed and it had it's own cemetery with small mortuary. Portrane may have influenced the design of St. Loman's cemetery as a small mortuary, apparently mass concrete built, was located at the W end of the central pathway in St. Loman's.

St. Loman's had a dedicated mortuary or 'Dead House' behind the main hospital building from 1877 until 1961 (after which it appears to have been converted and consecrated as a Church of Ireland chapel (Committee 2014)). Therefore the structure shown in the St. Loman's Burial Register cemetery plan was an ancillary mortuary. It is possible this building served as a mortuary chapel ie. it may have been a consecrated building.

The burial register plan shows a small mortuary within the cemetery which mirrors that in Portrane

DMH and which was built slightly before St. Loman's cemetery. St. Loman's cemetery mortuary survived until the 1990s but was demolished in the late 1990s due to vandalism.

3.13 Grave Monuments & Memorials

A small number of grave monuments (designed for permanence) and memorials are currently standing in the cemetery. Originally, it would appear that all, or almost all, people buried in the cemetery had their own grave memorials, primarily a cast iron cross, which identified the grave in which they were buried. An examination of historic photographs



Plate 22: Coffin handle in St. Loman's carpentry workshop

of the cemetery indicates there were once over 1000 individually numbered iron crosses in the cemetery (Appendix 2). This is the only Irish DMH cemetery for which we have evidence that the burial system involved individual grave markers for all.

A series of numbered iron crosses still stand in burial plots 1, 2 & 12 (the numbers correspond with the grave numbers in the burial register), against the W and N boundary walls. Following decades of vandalism in the isolated cemetery during which the iron crosses were often knocked, removed or relocated, approximately only 300 iron crosses were still standing in 2011 at which point all standing iron crosses were taken down and put into storage.

Removing the remaining iron crosses was an unfortunate error. We cannot know how many of them were *in situ* in their original location. We know from interviews with former staff and from an examination of historic photographs of the cemetery that some had been disturbed and relocated over the years. Disturbance and removal of the grave crosses broke the link between the burial register and the individual graves that had been so carefully designed and managed for over 70 years. The spread of suburban Mullingar as far as St. Loman's exposed the isolated cemetery to the dangers of trespass, and the sometimes related vandalism. The institution had policies in place for managing the **working** cemetery but responsibility for care and maintenance of the **closed** cemetery fell to staff and retired staff, mostly on a voluntary basis. The institution did respond repeatedly to the impacts of vandalism but considerable damage was done to the site by vandalism throughout the 1980s and 1990s.



Plate 23: Unused coffin plate found in St Loman's. These were designed to have a name and date etched on (essentially handwritten) and affixed to coffin lid.

An examination of historic photographs shows the integrity of the grave numbering system was challenged form an early stage. It is possible numbered crosses were fallen and relocated in incorrect locations during the working life of the cemetery. It is definite this also happened after the closure of the cemetery in 1970. A number of burials also appear to have been marked with wooden crosses and these did not survive as well as the iron crosses.

St Loman's Hospital had a strong tradition of self-sufficiency (Committee 2014, 177). The hospital and the farm were used to therapeutic treatment for patients that manifested in the cemetery in the following ways.

- 1. The cast iron crosses were 'bought in' but the numbering (welding individual numbers onto the iron crosses) was done in St. Loman's to varying standards. Numbers are often askew or upside down on the crosses.
- 2. Patients attended most funerals and for much of the 20th century we are told the graves were dug by patients assigned that task. One retired nurse told us that in his memory the graves he saw were not always dug very deep and the attending priest had to request more digging be done, much to the consternation of the gravediggers.
- 3. Coffins may have been made and decorated onsite some coffin handles (**Plate 22**) are still to be found in the hospital carpenter's shop. In the 1960s staff & patients made a type of lake boat still in use in Westmeath today so coffins would not have been beyond some of their skillsets. One coffin from the 1960s still survives in St. Loman's. It

was recently discovered in store adjacent to the carpentry workshop. Made of ¾ inch side and end planks, it is shouldered (an effect created by grooving and bending the inside of the plank). The base consists of multiple small lateral boards rather than a single piece while the coffin lid is a single piece. No metal ornaments elements were identified on the coffin although the side and base of the coffin were painted with pitch for waterproofing.

3.14 Coffin Plates

One blank coffin plate (**Plate 23**) has been found in St. Loman's Hospital. Retired staff had found the plate and some coffin handles and kept them in a hospital store. No coffin plates have been found to date in the cemetery. Coffin plates are important elements of coffin ornaments as the name of the deceased can be etched on them.

3.15 Iron Crosses Plots 1, 2 & 12

The remains of 12 numbered iron crosses are present in Plot 1 in the following sequence 2, 8, 10, 12, 14, ?, 24, 33, 44, 49. These run from left to right (S to N) in Plot 1 indicating burial started at the S tip of Plot 1 and continued left to right. This is a logical progression and indicates the cemetery management was aware that a careful burial arrangement was required. No. 1 was not buried in Plot 1 but in Plot 5 (plots 5 & 7 were used for Protestant patients).

In Plot 2 iron crosses were found in the following sequence, ?, 397, 398, 401, 403, 402. Again this shows a left to right burial order.

Plot 12 contains six iron crosses, 1020, 1021, 1026, 1027, 1028, 1029 and are numbered left to right or S to N.

All numbers tally with the sequence of numbers recorded in the burial register. These iron crosses remain intact because they were hidden in briars growing against the boundary walls. Approx half of these iron crosses appear to be in their original positions. The remainder appears to have been disturbed, removed and re-positioned in the burial plot.

Plot I is interesting because iron crosses 8,10,12,14 are all side-by-side (approx. 0.75 m apart) and may indicate that a single iron cross was used to mark a pair of graves, for example, 8 might represent graves 7 & 8. However, paired graves appear not to have been the norm as most graves appear to have been marked by an individual numbered cross.

It cannot be certain how many of these iron crosses are *in situ* ie. have not been moved since erection to mark a grave. As the boundary wall plots were overgrown by brambles these were the most protected crosses over the years.

Another series of crosses were observed lying under the sod in Plot 4 and although roughly ordered by number they also included iron crosses that originated in other plots. Interviews with former staff indicate that the iron crosses were much disturbed by vandalism. Crosses were regularly removed and thrown over the boundary walls and staff

relocated the crosses when this occurred. However, the removals were so persistent that confidence in the locational information diminished throughout the 1990s.

In 2011 a significant clean-up of the cemetery was made and during this clean-up 367 iron crosses standing or visible on the ground were removed from the cemetery, catalogued and stored in a shed in the nearby walled garden. As just under 1260 grave numbers are recorded in the burial register then approx. 8-900 memorial crosses are missing. The geophysical survey of the cemetery (Gimson 2017) has identified over 700 ferrous objects under the sod which we hypothesize are the missing iron crosses. Many of these objects are arranged in an orderly manner and they appear to indicate that they are close to the graves they originally marked.

Thus it appears that vandalism caused more than 75% of the memorial crosses to be mis-placed before the remaining 25% were removed and we cannot be certain how many of the remaining 25% were *in situ* and marking their associated graves.

There is an opportunity in the fact that many of the iron crosses may be close to their original location and we may be able to help families of people buried in St. Loman's to more closely identify the grave of their family members. This cannot be done on an individual basis however. Rather than just finding single crosses or coffin plates we need to recover all such iron objects and record their pattern of deposition in order to be able to view each individual item within a wider, more meaningful, context. If, for example, cross 339 is found alongside crosses 337 & 338 then it strengthens the case for the burial being in that location.

It would appear the iron crosses were bought in bulk from an iron foundry, possibly from within the Three Counties although no identifying marks were found in any of the examined crosses; nor were any invoices identified in the DMHs archive. The privacy of the patients buried in St. Loman's was maintained by not putting biographical details on their grave memorials. Each cross simply bore a grave number that appear to have been welded onto the cast iron crosses as required. Many of the numbers are affixed untidily indicating a homemade element to them.

Interviews with former staff tells us that the DMH aimed to be self-sufficient in many ways and that the graves were dug by the patients as one of their regular tasks within the hospital, farm and gardens.

3.16 Monuments

Grave markers in St. Loman's come in two main types 1. Memorial 2. Monument, with a monument intended to be as permanent as humanly possible. Two grave markers with biographical details are present within the cemetery as well as a monument erected in 2005 as a general memorial to all those buried in the cemetery.

The first grave memorial with biographical details is for Eleanor Finegan (neé Hobson) and Arthur Finegan, both of whom had been staff in the DMH. Located in Plot 4 the memorial consists of an E facing, kerbed and originally railed (now missing) double grave plot with a cross and angel mounted on a pedestal and plinth.

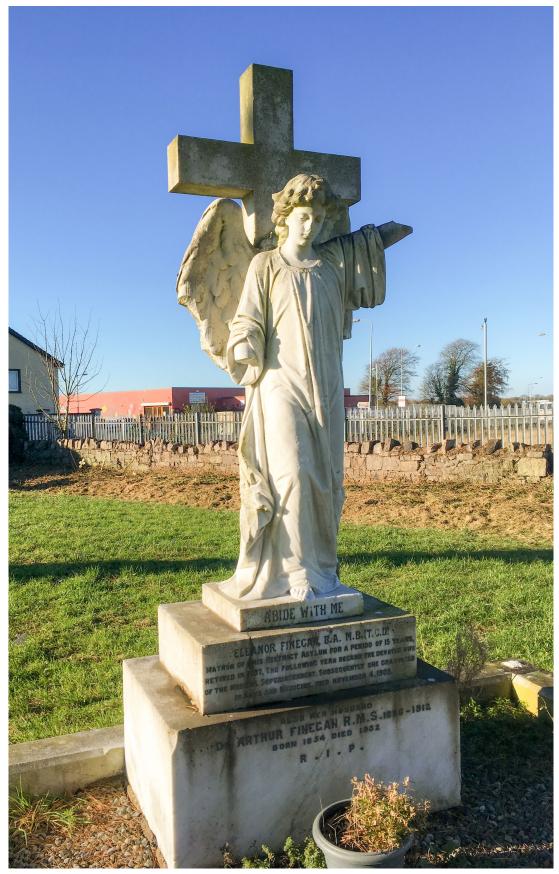


Plate 24: The Finegan Monument in Plot 4 of St. Loman's cemetery.

The epitaph reads;
Abide with Me
Eleanor Finegan, BA. MB (TCD)
Matron of this District Asylum for a Period of 15 Years
Retired in 1897, The Following Year became the Devoted Wife
Of The Medical Superintendent. Subsequently She Graduated
In Arts and Medicine. Died November 4, 1908.
ALSO HER HUSBAND
Dr. Arthur Finegan R.M.S. 1886–1912
Born 1854 Died 1952.
R.I.P.

This double kerbed grave plot is aligned differently to the iron crosses that had surrounded it. The iron crosses faced ENE, following the alignment of the long axis of the cemetery while the Finegan grave is aligned due E. At first glance the Finegan grave seems intrusive but as Eleanor died in 1908 she appears to have been one of the first people (37 burials had taken place by time Eleanor died in Nov 1908) buried in the cemetery and was almost certainly the first person buried in Plot 4. Eleanor is not however listed in the burial register. This leaves open the possibility that Eleanor is buried elsewhere. However, the wording of the epitaph and the alignment of the grave indicate to the author that both Eleanor and Arthur are indeed buried side by side within this kerbed monument. We also have the evidence of Arthur's last will and testament which states "I desire that my body shall be interred in the grave of my wife, Eleanor, in the enclosed plot in the private cemetery of the Mullingar District Mental Hospital, Co. Westmeath" (Committee 2014, 27). Dr. Finegan's choice of wording here is revealing. By saying 'private cemetery' he is intimating that the burial register may not include Eleanor's name as private cemeteries were not governed by the same rules as public cemeteries and that there was discretion allowed in the types of information recorded in the burial register.

The white marble angel was beautifully carved but it has suffered the effects of vandalism and perhaps storm damage with the angel's wingtips and hands all being damaged as well as the angel's nose. The quality and style of the monument indicate that it was erected in the early 20th century rather than in the 1950s or 60s after Dr. Finegan died.

The second memorial with biographical detail is a simple wooden cross currently located in Plot 9. It is W facing and it's epitaph reads;

In Loving Memory Of
Julia Leonard Nee Caffrey
Born 15th June 1893, Died 10th February 1919
Missed by her Children, Grandchildren
And Great Grandchildren.

This Julia Leonard was buried in Plot 4 on 13/2/1919 in a service officiated by Rev. Fr. Carpenter. Three people were buried in Plot 4 in February 1919 out of a total of 35 people buried in that year (including one person buried in Plot 5 in which 'Non-Catholic' patients were buried).

The monument erected in 2005 for all buried in the cemetery was erected along with a seating area and herbaceous planting at the centre of the E end of the cemetery. The monument is in the form of a Celtic Cross and the 'die' is inscribed

Erected To
The Memory Of
All Who Are Interred
In The Cemetery
1907-1971

This monument is similar to a wall plaque found in the Catholic church in St. Loman's which is inscribed.

In memory of the people
Buried in
St. Loman's Hospital Cemetery
August 1907-October 1970

The Celtic Cross & associated planting and seating should be relocated to the site of Plot 11 in the SE corner of the cemetery.

3.17 Comparanda for St. Loman's Cemetery

For the purposes of this report an examination has been made of all Irish & Northern Irish DLAs shown on the early 1900s 25 inch OS map series and whether they have institutional cemeteries or not. Of 25 DMHs examined 9 had attached burial grounds. The latest Irish DLA with an attached cemetery was Portrane in Dublin and this had the largest burial ground, measuring 0.70 ha. St. Loman's cemetery measured 0.30 ha which was similar in size to Clonmel, Co. Tipperary.

The DLAs with attached burial grounds in Carlow, Portlaoise, Enniscorthy and Castlebar were all considerably smaller than St. Loman's and Portrane. This suggests that the latter two cemeteries were probably intended for a larger proportion of the DLAs patients ie. the presumption was that families would not be able to bear the cost of burying their dead and that the institutions would find it more cost effective to run their own cemeteries rather than have external undertaker and grave costs.



Plate 25: Institutional section of Currykippane graveyard, Cork where patients of the Eglinton Asylum are believed to be buried.

3.17.1 Eglinton Asylum, Cork (1850s-1970s)

The Eglinton Asylum in Cork was located on a very prominent and visible site on the western fringes of Cork city. There were both an RC Chapel and a COI church on the property as well as a mortuary. However, there was no cemetery despite the large population of patients who lived. It appears those people unclaimed for burial by their families were buried in the rural/suburban Currykippane graveyard 2km to the west (**Plate 25**), in what appears to be the institutional section of the graveyard. Most urban-related cemeteries had a public or 'paupers' space where publicly funded burials took place or where families could pay for a grave to be open and closed but not for the ownership of the grave.

The DMH section of the graveyard measures approx. 30 m x 15m, which is very small compared to St. Loman's (measuring approx. 90m x 60 m) but similar in size to Castlebar, Enniscorthy and Portlaoise DMHs. It is marked by a large cross on a die and an adjacent simple altar with the plot perimeter being marked by concrete posts and metal pipe railing and it is situated in the public end of the burial ground which served a large portion of the N side of Cork city.

A series of iron crosses with memorial plates are found around the perimeter of the DMH burial section. Most of the crosses date to the 1950s. Names, dates and a memorial number are stamped into the metal plates. The numbers on the plates are low and whatever they refer to it is not some unique identifier used throughout the lifespan of the Eglinton Asylum. Religion is indicated by RC & RIP for Catholics as well CI for Church of Ireland.

Occasionally memorial plates have multiple names and dates stamped on them perhaps referring to the use of a common grave. A common grave is a public authority funded grave which contains multiple coffins interred in a short time span. In the UK there are records of some common graves containing between 7-18 coffins although we have no such data for Ireland⁴.

3.17.2 Portrane, Dublin (1890s)

Portrane DMH was built at the end of the 19th century. In its day it was the largest building project in Ireland and it was designed for a patient population of under 2000. The DMH was built with a very large (0.7 ha) walled cemetery located in the NE corner of the estate facing onto the coast road. A burial register was maintained and cemetery map was used but this is reported to have been lost to fire! There are no individual burial memorials known today. The building of Portrane coincided with the development of St. Loman's cemetery and it is possible they reflect a late 19th/early 20th century agreement that internal burial, within the institution, was more effective or pragmatic than external burials.

3.17.3 St. Senan's, Enniscorthy (1860s)

A small rectangular walled cemetery was built for this DMH6. The burial ground was situated at the W end of the estate and was oriented E-W.

3.17.4 West Riding Asylum/High Royds, Menston, Lancashire, England (1880s-1990s)

This English DMH is included as its' cemetery was subject to a geophysical survey similar to that undertaken at St. Loman's cemetery.

A mortuary chapel & burial ground are present in High Royds. Some iron markers were found during geophysical survey but the burials were previously thought to have unmarked graves. The burial ground was located in the NE corner of the hospital property and although separated by a cross-road junction it was effectively part of the same property. A private electric railway line and road junction separated the burial ground from the hospital grounds.

There was a burial register & plan and the burial ground was a highly organized space. The burial register indicates over 3,000 people were buried here, mostly patients but some staff also, in a space with approx. 1,000 individual grave pits. This indicates some of the grave plots were reused or some bodies were buried in common graves.

The High Royd burial plan (**Plate 26**) is more detailed than St. Loman's. The individual grave system is pre-defined in High Royds with a simple row number and grave number system (restarting with each new row) used – equivalent to the column and rows found in a spreadsheet. Thirty-four rows were marked and a maximum of 40 graves per row, numbered left to right (S to N), for each row. The total number of graves per row was affected by the width of the plot, the presence of pathways and of boundaries.

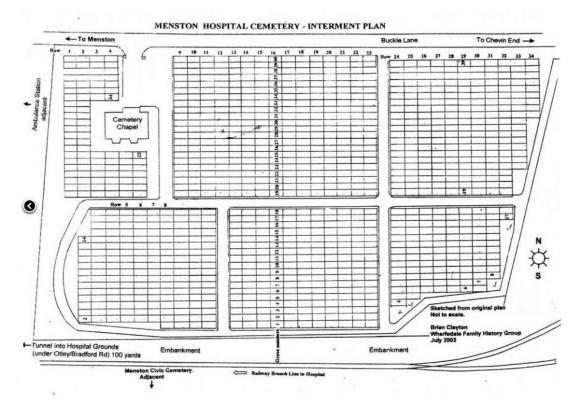


Plate 26: Copy of the High Royds cemetery burial plan - showing row & grave numbers to identify individal grave pits. Burials were sequenced left to right in each row. (Source © http://www.highroyd-shospital.com/memorial-garden-menston/interesting-articles-high-royds-memorial-garden/)

It seems apparent from the numbering sequence for the graves that people would be buried in a sequence starting in the SE corner and working northwards thereafter until a row was complete. Burial would resume then at the S end of the next row. Gaffney et al (2015, 567) have demonstrated from their geophysical survey that individual grave pits are difficult to identify by such geophysical survey methods but that in High Royds each grave may originally have been given an individual iron grave marker, smaller than those used in St. Loman's. The small iron grave markers noted in High Royds are similar to those encountered in large Irish cemeteries of the late 19th and early 20th centuries, cast iron, numbered and approx. 250 mm in height.

The long term maintenance of High Royds cemetery proved difficult and the asylum archive records instances whereby the gardening staff expressed difficulties being experienced and presumably these difficulties involved cutting grass around the ferrous grave markers causing their ultimate or gradual removal. In 1948 over £180 were spent on a lawn mower and over £200 were spent on grass seed and shrubs. The planting & cutting was to be done by the hospital gardening staff.

There is a common tension in historic burial grounds between the need to conserve the original grave memorials and the longer-term maintenance of the site. In time, as the sacredness of the space decreases (sacredness seems to be attached to memory of the

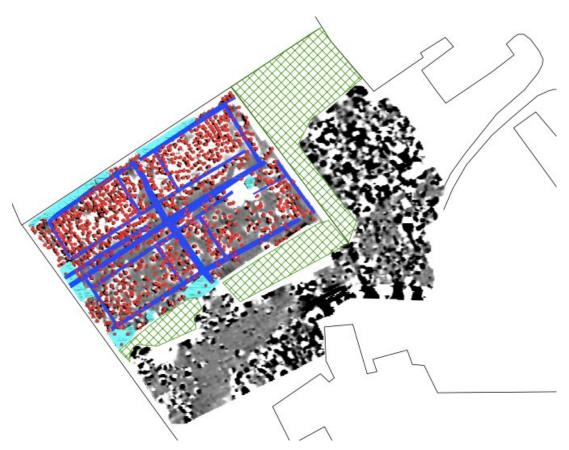


Plate 27: Composite image of geophysical survey of St. Loman's cemetery by Earthsound. Blue lines show pathways & red dots probable iron crosses within sod layer.

people buried), secular concerns gain dominance and the lawnmower becomes more important than the memorial. As we will see a similar situation developed in St. Loman's.

Interestingly the High Royds archive includes detailed specifications for funerals in the burial ground. A 1967 funeral contract for the "High Royds Hospital Cemetery' was to include the opening and re-filling of each grave, a Minister's fee and motor hearse with two bearers to accompany the hearse from mortuary to grave. The coffins were specified in detail and were to be made of chestnut with 4 nickel-plated handles, an inscription plate (coffin plate) and each coffin was to be pitched inside 'rendered thoroughly waterproof'.

The authorities in High Royds Hospital were not scrimping on the quality of the coffins. The presence of metal handles and inscription plates is of interest to us in St Loman's cemetery as we consider the possibility that coffin plates may have been used in St. Loman's and may have been identified through the geophysical survey (where over 700 metal objects were identified).

The High Royds 'Regulations as to the Care of the Dead' detail that deaths were to be recorded in detail and bodies were to be moved to an appropriate room and then to the institutional mortuary either before the patients rose from bed in the morning or after they had gone to bed in the evening. Respectful treatment was paramount and providing



Plate 28: The geophysical survey of St. Loman's cemetery, interior and immediate exterior, in action. Photograph of Earthsound staff.

access for notified family members was also key. It also seems to have been important not to upset patients by moving bodies when they were out and about.

High Royds burial ground is now a memorial garden dedicated to those buried there. It runs a regular series of memorial events each year

3.18 Discussion of Comparanda

Comparing St. Loman's cemetery with the other DLAs in Ireland highlights the international significance of St. Loman's. It is the second largest DLA related cemetery in Ireland but the **best preserved**, even taking into consideration the impacts of vandalism.

Examination of the burial register, historic photographs and the results of the geophysical survey indicate that each of the deceased was given an individual grave and each grave was registered and marked.

3.19 Geophysical Survey

Four methods of geophysical survey were used in St. Loman's cemetery.

1. Magnetometer Survey

This method identified buried ferrous objects, likely to be buried iron crosses, in clear rows. Also detected some of the internal pathways (noted by absence of metal objects). This survey outside the boundary walls found no evidence of burials.

- 2. Apparent Magnetic Susceptibility (EMI) Survey Paths clearly identified and also some traces of iron crosses detected.
- 3. Apparent Electrical Resistivity (EMI) Survey

Pathways and smaller paths clearly detected as well as soil disturbance associated with graves.

4. Earth Resistance Survey

This method gave the most coherent view of the internal pathways. The central axis pathways are identified as approx. 2-3 m width.

Also detected is a pre-cemetery field boundary, probably 18/19th century in origin.

The geophysical surveys undertaken for this report provide a detailed picture of the layout and composition of St. Loman's cemetery. The cemetery has a systematic formation with a central axis of pathways. Further subdivisions are present leading from these pathways to form a series of quadrants surrounded by an outer pathway.

Numerous gravemarker crosses, or potentially coffin plates, were revealed. These had been placed in identifiable rows. The resistivity and earth resistance surveys also revealed the presence of a number of zones of disturbed soil, which are likely to represent the grave cuts.

Outside the cemetery the results were more confused. The landscape appears to have been severally impacted by construction debris, imported soil or 'made' ground which is highly magnetic in nature. While zones of magnetic interference and high or low resistivity/resistance were detected, these are most likely a product of the construction debris, imported soil or 'made' ground.

4 Historical Research

4.1 Burial Practices at Mullingar District Asylum 1855-1906

The Mullingar (St Loman's) asylum was one of 22 District Lunatic Asylums (DLA) established in nineteenth-century Ireland. Constructed as part of the 'second wave' of asylum building that aimed to decentralise psychiatric hospital services, the building project began in late 1847 and Mullingar DMH opened in 1855. With accommodation for 300 patients it catered for the counties of Westmeath, Meath and Longford and a general population of almost 350,000 in 1861. Psychiatry had by the beginning of the nineteenth century adopted the principles of 'moral management', which developed simultaneously in England and France. These principles were embodied in the architectural design of Irish asylums, which, although designed individually, used a combination of radial and panoptic plans. Mullingar was designed by John Skipton Mulvanny and, like Killarney DMH (designed by Thomas Deane and constructed simultaneously), it adopted a corridor plan in a classical gothic style. Both were located on large green sites located near market towns but burial grounds were not included in the original landscape design.

april 9th (891 my Lords and Gentlemen.

Senitary works still continue unfinished,
but so far no special inconvenience has resulted. The general health of the inmates continues fairly good. The negotiations relative to the proposed asylum cemetery are now far advanced, and I would urge upon you the disirability the plot of ground selected. During the fast month some expense has been incurred, as it has been found necessary avail of the new Union Bernetery the interment of two patients belonging to the Church of Ineland in order to admit of the Chaplain attending at their Surial service, Rathconnell being situated outside his parish.

Plate 29: Copy of an 1891 letter optimistic about negotiations for the Asylum cemetery

Scholars of the history of Irish psychiatry have all explored the wider social reasons for committal and all concur that the asylum came to serve a multiplicity of socio-medical functions in their respective areas. A brief analysis of the Mullingar DLA archival material shows that after 20 years of operation the demographic pressures of long-term patients began to present problems.

Over-crowding and an ageing demographic beleaguered the entire system within a very short timeframe: the 1873 *Report on District, Local and Private Lunatic Asylums in Ireland* noted that 'when a patient dies it was common practice for the resident medical Superintendent to contact any known next-of-kin. If the body was unclaimed then the

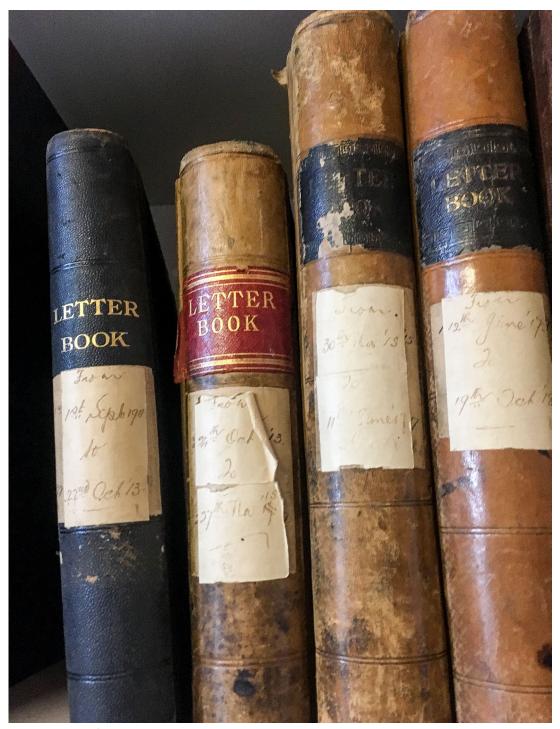


Plate 30: Some of the St. Loman's Hospital archive

asylum bore the expenses associated with burial in the nearest burial ground'. At that stage the only asylums to have a cemetery on their grounds were Omagh and Ballinasloe, which catered for much larger jurisdictions, for instance, the latter catered for the province of Connaught. Individual burial costs are not itemized in the Mullingar DMH minute books and according to an1873 report deceased patients were buried at the nearest burial ground at the asylum's expense. It is also possible that they were charged to the

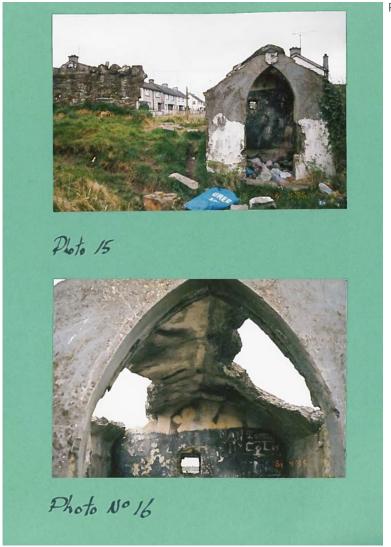


Plate 31: Mid-1990s photograph showing damage to W boundary wall and to the original mortuary within the cemetery

Poor Law Union (PLU) of origin. Further research using PLU records could provide a clear impression of how and where the bodies of poor patients were interred.

Asylums were not exempt from wider public health problems, and Mullingar dealt regularly and efficiently with outbreaks of cholera, typhoid and other contagious disease, however tuberculosis and pulmonary diseases were pervasive. Reflecting ratios in the general population of 56 deaths in Mullingar Asylum in 1900, 17 were from consumption. Although negotiations for the purchase of additional land for burial purposes at Mullingar were by 9 April 1891 'far advanced' the cemetery did not open until 1906. The addition of the cemetery was an important and prudent decision that managed financial implications, relationships with the PLU, matters of denominationalism and, what is perhaps often overlooked, the degree to which long-term patients were in a sense belonging to the institution. It would be possible from the extant records to conduct a de-identified prosopographical (individual biography) study of patients buried on site to ascertain reasons for admission, average length of stay, cause of death and care received. Typically those buried on site were long-term patients whose familial ties were frayed, often through the death of parents and closest next-of-kin or because of mental illness. In

1927 a government commission reported that the number of patients in Mullingar was in excess of 1,000 some 200 more than it had facility for.

4.2 The Historical Records

The collections at Mullingar/St Loman's date back to 1855, they are extensive and rich and serve to show the degree of care and compassion with which staff treated their patients. They comprise a few different data types that can be crudely divided into administration, personnel and patient files (1855-present). Key among these are the admission records which detail date of admission and discharge. The resident medical superintendent's monthly reports combined with the minute and letter books provide an overview of the daily running of the asylum and its position in the local economy. The genealogical and local history value of these records cannot be overstated. Since 2003 several DMH collections have been transferred to local authority (Clare and Killarney) and the National Archives (Ballinasloe, Sligo and Grangegorman). St Loman's is an exceptional case as it continues to function as a psychiatric hospital. The efforts of administrative staff to safeguard the historical materials should be highly commended, but the current storage and access policies should receive proper support. The historical records are unique and irreplaceable.

4.3 Recommendations:

Phase I

- That immediate action be taken to catalogue all historical materials by a professionally-qualified archivist working with the National Archives to meet national metadata standards
- 2. That a subcommittee of staff, historians and archivists be established to devise a conservation, preservation and data access plan.
 - 3. That clear distinction be made between historical and active records.

Phase II

- 4. Conservation assessment and preservation plan be conducted by a qualified conservator.
 - 5. Decisions be taken about moving these records to a proper archival home.
 - 6. A professional historical study be undertaken of Mullingar/St Loman's.

5 Conservation Practices

5.1 General

St. Loman's cemetery is of significant architectural, historical and cultural interest and an increased awareness and understanding of the various attributes that make up these resources is fundamental to the overall success of their preservation. As the cemetery is almost filled and closed for burial the conservation and future management of the site becomes ever more important. The implementation of, and adherence to, a carefully planned conservation and management plan is crucial to the protection of these irreplaceable resources throughout all future works. The initial plan should span a minimum of five years and be under constant review as new conservation practices are realised. The best possible advice from relevant craftsmen and professional practitioners and relevant authorities must be sought from the outset and throughout all proposed works.

The core aim of carrying out conservation works to any structure are to restrain the process of decay without damaging the character of a structure or altering the fabric and features which make the structure of special interest to the overall cultural heritage resource. Any works should be carried out using traditional methods and materials appropriate to the structure, its history and condition. Where it is necessary to replace part of a structure an exact match should be sought on a like-for-like basis.

There are natural and man-made factors that cause the erosion and decay of graveyard features. The natural causes include climate, flora and fauna. The man-made causes include acid rain, vandalism, lack of conservation methods and poor conservation methods.

5.2 Summary of Cemetery Resources in St. Loman's

- St. Loman's is one of the best-preserved institutional cemeteries in Ireland. Even despite the fact that from 1970 onwards, vandalism had a severely negative impact on the site.
- Vandalism knocked substantial sections of the boundary walls, demolished the mortuary, and undermined the integrity of the numbered grave marker system by repeatedly disturbing the memorial crosses.
- By 2010 less than 25% of the iron cross grave markers were still standing and some of these were not in their primary location. In 2011 the remaining iron crosses (363) were removed and put into storage. Geophysical survey for this project has revealed that approximately 700 iron crosses are present under the sod, possibly adjacent to their last standing location, in identifiable rows.
- A small number of standing iron crosses are present in plots 1, 2 and 12.
- · The foundations of the mass concrete mortuary are visible against the W boundary.
- The ornamental Austrian pines planted in association with the Finegan grave in Plot 4 are still in good condition.



Plate 32: Type 4 -short-armed finialed cross in storage in a walled-garden shed in St. Loman's

- The original N gateway has been closed-off and superceded by a SE entrance.
- A separate central S entrance has been opened to allow grass cutting access to the cemetery.

5.3 Vandalism & St. Loman's Cemetery

The cemetery was run to a high standard throughout its lifetime and the sacred space was maintained until burials ceased. The coincidence of the closure of the cemetery with the

arrival of adjacent housing estates resulted in a 25 year period of vandalism and damage to the sacred space.

Institutionally and personally, staff and former staff tried constantly to care for and maintain the cemetery. The problems being faced in St. Loman's were not solely local but have been encountered in graveyards and cemeteries in every county in Ireland over the last 30 years. By the early 1990s sufficient experience had been built up to allow the better care and management of cemeteries and graveyards but it wasn't until 2010 with the publication of the GCCRHG that it can be stated that there was a nationally established system of best practice for care and conservation of burial grounds.

Unfortunately decisions made in St. Loman's, mirroring those made elsewhere in Ireland, to remove the last standing grave memorials did potentially damage the crucial links between less than 25% of grave markers (the other 75% had been dislodged before this) and those commemorated, as well as damaging the conservation value of the institutional cemetery.

Grave markers and headstones, public & private, individual and institutional have been disturbed, removed and broken in burial grounds all over Ireland in the last 40 years and such disturbances are still occurring today, although less frequently and to a lesser extent than before.

No complete record has been made of these disturbances but they occur in most Irish cities, towns and counties in burial grounds of all types. The issues experienced in St. Loman's were part of a nationwide phenomenon whereby the status of sacred space in some burial grounds has being challenged by societal changes, population growth and economic development.

As St. Loman's has been a high profile burial ground in terms of the negative impacts of vandalism and institutional response to vandalism it is proposed that St. Loman's adopt an innovative response to vandalism in the future.

- 1. Make a detailed record of the site today. Particularly record the exact location of the remaining erect iron crosses.
 - 2. Use this record to identify future instances of vandalism
 - 3. Clearly record any future incidences.
- 4. Clearly publicise any vandalism but not in a sensationalist manner. Vandalism is moderately common in burial grounds due to their often remote locations, especially in evenings/at night. Vandalism especially happens in locations where the vandals believe there is little oversight.
 - 5. Erect signs saying all vandalism will be recorded, quantified and recorded.
- 6. Use a **vandalism record sheet** that is filled on a monthly basis and filed by the appropriate section of the HSE. The record sheet should identify the status of the different elements of the cemetery eg. gates, boundary walls, memorials, paths and then record condition, nature of vandalism and action required.

6 Objectives and Actions

6.1 Introduction

The Conservation and Management Plan for St. Loman's cemetery includes the following objectives and recommends a series of related actions;

- Objective I Reaffirm the sacred space of the cemetery.
- Objective 2 Make it as simple as possible for people to trace their relative's burial location while respecting the privacy of all involved.
- Objective 3 Archive the historical documents of St. Loman's Hospital.

The objectives and key actions are presented below in a numbered and phase list. Each numbered action is a separate item and they are individually and consecutively numbered.

6.2 Statutory Recognition

- 1. Register St. Loman's cemetery on the NIAH database
- 2. Add the cemetery to the Westmeath County Council list of protected sites in the County Development Plan.

6.3 Objective 1 – Reaffirm the sacred space of the cemetery.

Objective 1 Phase 1

Objective	Resources	Priority	Year 1	Year 2	Year 3	Year 4	Year 5
1. Find, identify, recover and record a representative sample of the iron crosses/coffin plates that lie immediately within or beneath the sod layer across the site (Iron Cross Recovery Works).	External	1					
2. Depending on the results of the iron cross recovery works, aim to reinstate the iron crosses in the cemetery.		1					
3. Depending on the results of the iron cross recovery works, aim to reconstruct the 1906 mass concrete mortuary , with lockable gate, in its original location and use this as a store for some or all of the iron crosses.		2					
 a. An explanatory sign should be designed for the mortuary. 							
4. Replace the iron gate at the SE entrance.	External ironsmith	1					
5. Erect a gate to close the gap in the centre of the S bank. This gate should be appropriately designed – a 5 bar wooden gate with wooden gate piers should fill the gap.	External purchase. Internal resources for erection.	1					
6. Fix the infill wall in the original N entrance gateway with lime mortar.	External stonemason services	2					
7. Repair the N & W walls where needed- lime mortar to be replaced in spot locations on W wall, and courses to be repaired in N wall.	External stonemason services	2					
8. Plant a continuous hawthorn hedge on the S and E boundary fences.	External landscaping services	2					
9. Reinstate the original burial quadrants within the cemetery by re-laying the two main pathways.	External landscaping services	1					
9. Erect signage ;	Internal design and external printing	1					
 a. indicating no dog walking in the cemetery. 							
b. indicating no trespass and that van- dalism reporting systems are in place.							
10. Maintain the vegetation cover of the site so that all burial sections are equally accessible.	External landscaping services	1					
11. Establish an appropriate, regular, grasscutting regime	External landscaping services	1					
a. once a month during Summer months							
b. new pathways to be raked clean and edged after each cutting.							
c. Plots 1, 2 & 12 (due to location alongside boundary walls & inaccessibility to mowers) to be strimmed & raked every two months during the summer months.							
12. Establish an appropriate, regular tree maintenance regime	External tree surgeon services	1					

Objective	Resources	Priority	Year 1	Year 2	Year 3	Year 4	Year 5
13. Commission a tree surgeon to visit the site and make recommendations for the care and maintenance of the boundary trees and the ornamental trees in Plot 4.	External tree surgeon services	1					
 a. Clear some of the branches over- hanging the SE corner entrance area to make it more welcoming. 		1					

Objective 1 Phase 2

Objective	Resources	Priority	Year 1	Year 2	Year 3	Year 4	Year 5
14. Move the modern commemorative cross & associated shrub planting to the unused site of Burial Plot 11.	External monumental sculptor services	2					
15. In the mid -term the stewards of the site and families of people buried here should consider the establishment of a wildflower meadow in the cemetery.		3					

6.4 Objective 2 – Simplify and clarify the system for people to trace their relative's burial location while respecting the privacy of all involved.

Objective 2 Phase 1

Objective	Resources	Priority	Year 1	Year 2	Year 3	Year 4	Year 5
16. Write a brief, clear, brochure for staff and visitors explaining how to trace a relative and how to find their approximate burial location.	Internal staff	1					
17. Put this manual on a HSE website for the cemetery	Internal staff	1					
18. Print the brochure for all visitors explaining the cemetery layout and showing burial plot sections & corresponding grave numbers. Make available in an information box placed at the cemetery entrance.	Internal staff	1					
19. Have hard copies and digital copies for dissemination	Internal staff	1					
20. Put the brochure on a HSE Midlands webpage for St. Loman's cemetery.	Internal staff	1					
21. The original burial plots should be identified with a cast iron plaque (plots 1-12)	External plaque design & purchase	2					
22. Install a map board at the cemetery entrance	External design, production & erection	2					
 a. Include a brief history of the cemetery 							
b. Explain the spatial organization of the cemetery							
c. The map board should correlate the burial register number with appropri- ate grave plot and also maintain the principle of anonymity.							
d. List the burial register numbers for each burial plot/section (eg. Plot 4=131-379).							
23. <i>In situ</i> iron crosses in plots 1, 2, 12 to be given concrete bases below ground level to prevent their disturbance.	Internal resources	1					

6.5 Objective 3 – Protect the St. Loman's historical archive.

Objective 3 Phase 1

Objective	Resources	Priority	Year 1	Year 2	Year 3	Year 4	Year 5
24. That immediate action be taken to catalogue all historical materials by a professionally-qualified archivist working with the National Archives to meet national metadata standards.	External archiving services	1					
25. That a subcommittee of staff, historians and archivists be established to devise a conservation, preservation and data access plan for the archive.	Internal staff & external services	1					
26. That clear distinction be made between historical and active records.	External archiving services	2					
27. That key artefacts be offered to the National Museum of Ireland for long term conservation & storage.	Internal services	2					

Objective 3 Phase 1

Objective	Resources	Priority	Year 1	Year 2	Year 3	Year 4	Year 5
28. Conservation assessment and preservation plan be conducted by a qualified conservator.	External conservation services	2					
29. Decisions be taken about moving these records to a proper archival home .	Internal staff & external archiving services	2					
30. A professional historical study be undertaken of St Loman's.	External historical research services	2					

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Appendix 1 Buildings of Ireland Records

County Westmeath - Fri May 12 12:32:09 IST 2017

Main Record - County Westmeath

St. Loman's Hospital, Delvin Road, Mullingar, County Westmeath

15311012



 Reg. No.
 15311012

 Date
 1930 - 1950

 Previous Name
 N/A

Townland SPRINGFIELD OR SPITTLEFIELD

County County Westmeath
Coordinates 244873, 253722

Categories of Special Interest ARCHITECTURAL SOCIAL

Rating Local

Original Use hospital/infirmary
In Use As hospital/infirmary

Description

Detached nine-bay two-storey former tuberculosis hospital building on V-shaped-plan, built c.1940, having multiple-bay single-storey wings to either side (east and west) terminated by single-storey blocks. Single-bay curved entrance porch to the centre of the main building having three grouped narrow window openings over at first floor level. Hipped tiled roofs with overhanging eaves to the main central block and continuous glass canopies to the front faces of single-storey wings (south). Roughcast rendered walls with square-headed openings having replacement windows. Smooth rendered string course at first floor level to main block with rusticated quoins to the corners. Square-headed doorway to front face of porch having timber double doors. Set back from road in shared grounds with St. Loman's Hospital (15311017). Located to the southwest of the main hospital building and to the northeast of Mullingar.

Appraisal

This is a typical layout for tuberculosis treatment with the individual wards laid out in separate wings so that patients could be wheeled out into the sun under the sheltered glass canopies, which are south-facing. The building has been substantially upgraded/altered and is more notable for its function and plan rather than its architectural quality. It forms part of interesting collection of buildings in the St. Loman's Hospital complex, which together illustrate changing theories and practice in hospital design over a 100 year period. Probably built to designs by Boyd Barrett Architects who carried out building works here c.1940, mainly funded through the Irish Hospital Sweepstakes.

County Westmeath - Fri May 12 12:33:21 IST 2017

Main Record - County Westmeath

St. Loman's Hospital, Delvin Road, Mullingar, County Westmeath

15311014



 Reg. No.
 15311014

 Date
 1930 - 1950

 Previous Name
 N/A

Townland SPRINGFIELD OR SPITTLEFIELD

County County Westmeath
Coordinates 244895, 253811

Categories of Special Interest ARCHITECTURAL SOCIAL

Rating Regional
Original Use nurses' home
In Use As nurses' home

Description

Detached eighteen bay three-storey nurses' home, built c.1940, having a projecting single-bay full-height projection (containing the stairs) to the centre of the main elevation (east). Roof hidden behind a raised rendered parapet with a moulded eaves comice. Roughcast rendered walls over smooth rendered plinth with rusticated quoins to the corners of the main block and to the projecting bay. Continuous plain sill course at second floor level. Square-headed window openings to the first and second floors having plain rendered reveals and replacement windows. Six-over-six pane timber sliding sash windows survive to the north end of the main facade at second floor level. Mainly inset round-headed window openings to the ground floor with a number of timber of sliding sash windows surviving to the south elevation and to the south end of the main elevation, replacement windows elsewhere. Full-height staggered round-headed openings to the projecting bay having inset square and round-headed window openings. Set back from road in extensive shared hospital grounds within the St. Loman's Hospital Complex. Located to the west of the main hospital building (15311017) and to the northeast of Mullingar.

Appraisa

An interesting and imposing large-scale nurses' home, built in a robust if repetitive classical idiom, which retains its early institutional form and character. The projecting bay to the centre of the main elevation (east), having inset windows, is an interesting feature that helps to alleviate the severity of the main body of the building. The rusticated quoins to the corners of the building are very similar in form to those found on the tuberculosis hospital to the south, suggesting that these buildings were built as part of the same building project. This building forms part of interesting collection of buildings in the St.

County Westmeath - Fri May 12 12:37:25 IST 2017

Main Record - County Westmeath

St. Loman's Hospital, Delvin Road, Mullingar, County Westmeath

15311015



 Reg. No.
 15311015

 Date
 1850 - 1860

 Previous Name
 N/A

Townland SPRINGFIELD OR SPITTLEFIELD

County County Westmeath
Coordinates 244920, 253922

Categories of Special Interest ARCHITECTURAL SOCIAL

Rating Regional
Original Use walled garden
In Use As walled garden

Description

Walled hospital garden on sub-rectangular plan, built c.1855, having an advanced castellated entrance gate to the centre of the southeast facing elevation and with two-storey castellated towers/turrets on octagonal plan to either end of south facing elevation. Coursed rubble stone walls to the south-facing wall, roughcast/pebbledashed rendered walls elsewhere. Gateway constructed of snecked limestone having a central Tudor/Segmental-headed gateway with dressed limestone voussoirs over and with a wrought-iron flat bar gate. Central entrance flanked by advanced bays on square-plan to either side, each having a loop hole opening. Cut stone plaque to parapet over gateway. Towers/turrets constructed of snecked limestone having a loop hole opening to each face at second storey level. Advanced parapets to gateway and towers/turrets, supported on cut stone corbels creating machicolated effect. single-storey outbuildings abut the inner wall to the southwest side. Single-storey glasshouse to the centre of the enclosure. Set within the grounds of St. Loman's Hospital, to the northwest of the main hospital building (15311017) and to the northeast of Mullingar.

Appraisal

An extensive walled garden associated with St. Loman's Hospital (15311017), which retains its early character and forms part of an important collection of buildings within the hospital complex. This building probably dates to the original hospital building, c.1855, and was presumably built to provide work and food for the patients of the original asylum building. The well-detailed gateway and the corner towers/turrets lend a picturesque element to what is a functional structure and adds a certain historical aura to this impressive complex.

County Westmeath - Fri May 12 12:34:26 IST 2017

Main Record - County Westmeath

St. Loman's Hospital, Delvin Road, Mullingar, County Westmeath

15311016



 Reg. No.
 15311016

 Date
 1880 - 1890

 Previous Name
 N/A

Townland SPRINGFIELD OR SPITTLEFIELD

County County Westmeath
Coordinates 244985, 253829

Categories of Special ARCHITECTURAL ARTISTIC

Interest SOCIAL
Rating Regional
Original Use church/chapel
In Use As church/chapel
Additional Use church/chapel

Description

Freestanding hospital church/chapel located within the grounds of St. Loman's Hospital (15311017), built c.1886, comprising a seven bay nave, an apsidal chancel to the north and with a two-stage tower on square-plan, having a spire (copper) on octagonal-plan over, attached to the west end of the nave gable. Steeply pitched natural slate roof with red clay ridge tiles, cast-iron rainwater goods and with raised cut stone verges to either gable end (north and south). Wrought-iron Celtic cross finials over apex of entrance gable (south) and over spire. Constructed of coursed limestone rubble over chamfered plinth with extensive cut stone trim including dressings to openings, flush quoins to the corners, clasping buttresses between bays to nave and clasping corner buttresses to the corners of the attached tower. Lancet openings to nave with diamond-pane windows. Three-graded lancet openings to the nave gable, having cast-iron multi-pane windows, with tripartite/trefoil-type opening over to gable apex. Pointed-arched doorway to the south face of tower have dressed surrounds and a timber door. Interesting interior with open kingpost roof. Set within the grounds of St. Loman's Hospital, to the west of the main hospital building (15311017) and to the northeast of Mullingar.

Appraisa

A well-composed and well-detailed late nineteenth-century hospital chapel, which retains its early form, character and fabric. This building is built in a

County Westmeath - Fri May 12 12:35:56 IST 2017

Main Record - County Westmeath

St. Loman's Hospital, Delvin Road, Mullingar, County Westmeath

15311017



 Reg. No.
 15311017

 Date
 1850 - 1860

 Previous Name
 N/A

Townland SPRINGFIELD OR SPITTLEFIELD

County County Westmeath Coordinates 245122, 253886

Categories of Special ARCHITECTURAL ARTISTIC

Interest SOCIAL
Rating National
Original Use hospital/infirmary
In Use As hospital/infirmary

Description

Freestanding forty-one-bay three-storey psychiatric hospital on complex symmetrical plan, built c.1855 and extended c.1895, having an advanced central five-bay three-storey block (with a central single-bay gable-fronted section and advanced single-bay gable-fronted sections to either end), advanced full-height gable-fronted blocks to either end of the building (east and west) and with projecting and shallow projecting gable-fronted bays at intervals along the length of the principal façade (south). Various single-storey, two-storey and three-storey returns and later extensions to the rear (north). Pitched natural slate roofs with cast-iron rainwater goods, diagonal Tudor ashlar limestone chimneystacks on raised plinths and with cut stone coping and kneeler stones to gable ends and to projecting and shallow gable-fronted sections. Built of snecked and coursed limestone with extensive cut stone trim, including clasping buttresses and corner buttress, dressings to the openings, string courses and sill courses and with hoodmouldings over a number of the window openings to the gable-fronted sections. Two-storey canted bay projections to a number of the advanced gable-fronted sections to either side of the central block. Single-storey canted bays to either end of central block. Paired square-headed window openings with central cut stone mullions to main body of building with single, paired and multi-light square-headed window openings to advanced sections. Most window openings now with replacement fittings. Cast-iron balconies to a number of the window openings to the central block. Two-storey wing to the east end of the rear elevation (north) having continuous glazed galleries on both floors. Recessed Tudor-arched doorway to the centre of the main advanced block, set in a cut limestone Tudor-arched doorcase, having timber double doors and glazed surrounds with margin glazing bars. Set back from road in extensive mature grounds to the northeast of Mullingar and

Appendix 2 -Historic photographs of the St. Loman's cemetery

- An evening or late afternoon photograph presumably taken soon after the final burials in 1970. These photographs are of the cemetery in its peak condition.
- Taken from SW corner of Plot 10
- Straight rows of crosses in all plots and very well maintained ground vegetation.
- Plot I S facing crosses are visible in approx. Im intervals.
- Plot 2 S facing crosses are visible in approx. 1m intervals.
- Plot 4 contains the central Finegan double grave plot with kerbing & railed corners. Four Austrian pines (Pinus nigra) are present close to the corners of Plot 4 burial plot. The SE pine has two trunks indicating it was cut soon after planting.
- Plots 5, 6, 7, 8 S facing crosses are visible, spaced at regular intervals. The surface of plot 8 is
- undulating and individual grave mounds are discernible.
- Plots 5, 7 and the E end of Plot 6 appear to have been raised with soil to an approximate height of
- 6-700 mm above the other plots.
- Plot 10 E facing crosses with approx. 1m intervals. Nine crosses are present in row 12, 12 crosses
- in row 3, and 11 crosses in row 4, indicating some variability in the width allowed for each grave.



Plate 33: Photograph from 1970s in SW corner



Plate 34: Photograph from 1970s in SE corner

- Photograph taken in late afternoon.
- Location taken from midway SE end of Plot 9.
- Plot 3 crosses are in N-S rows and appear to be E facing.
- Plot 4 Four corner pines visible and the photographer is perpendicular to the cleft in the SE pine. The Finegan monument is visible through that cleft. Plot 4 crosses are in N-S rows and appear to be E facing.
- Plots 5 & 7 crosses are in single rows and S facing. Plot 5 has a high soil ridge covering graves. Burial mounds are N-S indicating burials were N-S.
- Pathway edges are straight and approx. 300mm lower than Plot 7..

- Plot 9 iron crosses are in clear N-S orientated rows. Where visible, numbers are on the E face of the crosses indicating E facing burials. The spacing of the iron crosses is not as regular as evident in Plot 10.
- Four numbers are clearly visible in Plot 9 684, 727, 1203 and 800.
- Iron cross no. 727 is part of a row but 800 seems to be *ex situ* indicating perhaps that the cross locations may have been partly disturbed from an early stage.
- Only Iron Cross 1203 belongs in Plot 9.
- · Cross No. 684 dates from 1935 and is supposed to be in Plot 3.
- Cross No. 727 dates from 1937 and is supposed to be in Plot 3.
- As plot 9 was used for burials in the 1960s it is unlikely that graves 684 & 727
 were accidentally dug here in the 1930s. It is more likely that the crosses have been
 misplaced.
- Cross No. 800, which is ex situ, should be in Plot 8.
- This photograph indicates that even though tidily kept, the iron crosses may not all mark the correct grave location.
- As crosses 684 & 727 may be in their primary location they may also indicate that burials were not dug in the correct intended plot ie. the burial register says they are in Plot 3 but they were incorrectly dug into Plot 9. Therefore, this photograph raises two hypotheses to be tested;
- That graves were dug in the wrong burial plots.
- That graves were dug in correct grave plots but that the individual grave markers (iron crosses) were sometimes disturbed and re-erected in the wrong location.

- Photograph taken in late afternoon from NW corner of Plot 4.
- Three of the Austrian Pines in Plot 4 are visible and the rear of the Finegan monument.
- Crosses are tidily arranged in Plots 4, 6, 8 and 10. Further to the E they also seem to be tidily arranged in Plot 9.
- Plot 6 crosses are S facing and a high soil ridge seems to run the length of the plot.
- Plot 4 is tidily arranged with crosses in approx 1m intervals. Eleven crosses are visible in the Wmost row while 10 crosses are standing in row 2.
- Six crosses are standing in row 3, which is disrupted by two of the Austrian pines.
- The Finegan monument is visible from behind and there is a view of what appears to be a pillar \$74 and chain railing. The pillars are relatively high. This monument appears to be of a type commonly erected in the early 20th century indicating it was erected soon after Eleanor Finegan died in 1908.

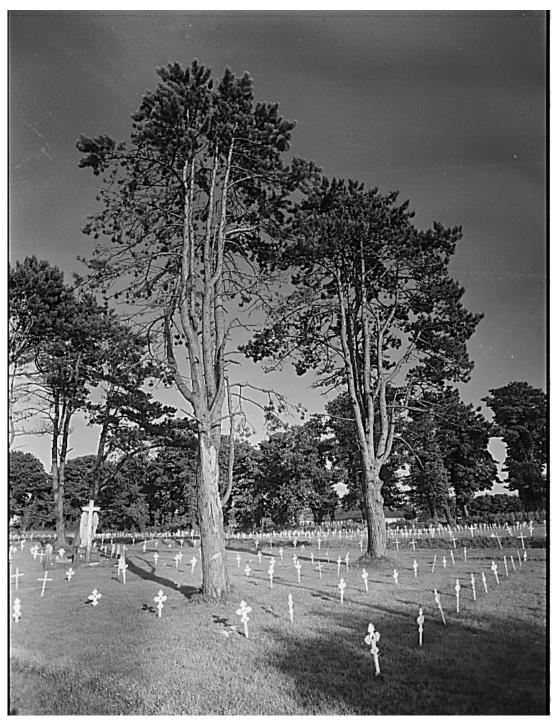


Plate 35: Photograph from 1970s in NW corner

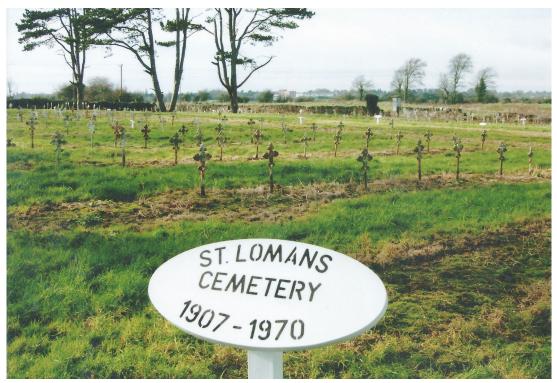


Plate 36: Photograph from 1990s in SE corner

- Photograph taken in daytime in the 1990s at a similar location to one of the 1970s photographs midway along the E end of Plot 9.
- A large elliptical wooden sign is visible and approx. 6 others are visible in the background marking the burial plots in St. Loman's. These plot signs were part of the continuous efforts by staff and former staff to maintain the cemetery.
- Iron crosses are visible in Plots 1, 2, 3, 4 & 6 but it seems that the crosses in Plots 5 and 7 are not
- · now standing.
- The soil ridges which had previously covered much of plots 5 & 6 also now seem to have been removed, perhaps filling the adjacent path to make one continuous grass surface.
- One of the Plot 4 Austrian pines cannot be seen and has presumably fallen or been felled.
- Clear and tidy rows of crosses are present in Plot 9. The crosses have not been painted white for some time. The ground vegetation is being managed by a mixture of mowing and weed killer is being sprayed along the rows of iron crosses.
- No numbers can be seen on any of the iron crosses.



Plate 37: Photograph of mortuary in 1990s

- Photographs taken in an April 1995 health and safety review of the hospital. The photographs are of the original mortuary against the W wall of the cemetery.
- Extensive damage is evident to the boundary wall and to the mortuary.
- The mortuary appears to have been made from mass concrete. No evidence for a door or gate can
- be seen although it seems likely that a door would have been required.

Photograph 6

- Appears to be a photograph of E facing crosses at W end of cemetery, postdating 2005 when Robinstown road was built.
- The perspective on this photograph is a little less easy to read than the previous photographs.
- Approx ten rows of iron crosses can be discerned and four numbers can be clearly read.
- Crosses no. 1068, 1113, 1139 & 1189 can be read. All 4 of these grave numbers belong to Plot 9. **However, this photograph seems to be in Plot 10**. These 4 crosses were erected between 1954 & 1963. This raises two possibilities;
- Graves were accidentally dug in the wrong plots.
- The iron crosses were being disturbed by vandalism and re-sat in incorrect location.

- Photograph facing E at E end of Plot 9.
- A number of crosses are legible and they appear to be no.s 1202, 1203, 1228, 1229, 1230 & 1231. All of these numbers belong to Plot 9 in the burial register. These burials happened in the 1960s.
- All legible iron crosses are W facing. This may indicate the burials are W facing (ie. head to W and feet to E). This photograph is the first that indicates W facing burials. All numbers are running left to right, or N to S this indicates they are in their primary positions and that burials in this portion of Plot 9 went N to S rather than S to N which is indicated in Plots 1, 2, 4, 10, 12.
- Another photograph we have seen from Plot 9 shows a mixture of crosses further
 W in the plot facing W and E. One photograph from Plot 3 which we do not have
 permission to print also has one iron cross facing W.
- We cannot tell if these crosses face W because that is where the nearest pathway is or if they represent a change in burial practice for some other reason.



Plate 38: Photograph of crosses in Plot 10.



Plate 39: Photograph of crosses in Plot 9



Plate 40: Photograph of crosses in Plot 3

- This photograph was taken by professional photographer Barry Cronin in the 2000s.
 Dotted lines A, B & C indicate the location of memorial rows.
- It shows Plot 4 with a tidy, linear and row-based arrangement of iron crosses. The foreground crosses are less than 1m apart while those in the background appear to be further apart in some instances.
- Numbers are visible on the front four crosses although only three are legible, 313, 315 and 316 are side by side and running S–N or left to right indicating burials started on the left hand side (S) for this row.
- The Finegan monument is central to the plot but the kerb and rail pillars have been vandalized. The Angel's arms have been damaged although whether by vandalism or storm damage from falling branches is not discernible. Blue and white paint on the base of the statue may indicate the whole statue was originally painted.
- Approximately eight separate burial rows can be identified in this photograph with a row being defined as a 6ft wide space, enough to fit a coffin, mostly with E-facing iron cross memorials at the W end of the grave.
- Rows form in organized burial grounds primarily when private graves are bought
 and ownership allows reuse. In institutional cemeteries rows form as part of the organized system to allow for tidy, individual burial and to maximize the amount of
 individual burials which can be achieved in a finite piece of land.
- Type 1 and Type 2 crosses are missing from these later photographs, which indicates they were made from wood and were not as long lasting as the cast iron crosses.