

Brookwood Hospital, Woking Mind and Surrey History Centre

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Title Slide 1

Earlier this year, Surrey History Centre (the county record office and local studies library for Surrey) was delighted to receive The Archives Landmark Award, given by the London Metropolitan Archives and Archives for London in recognition of an 'innovative and original project which makes creative use of archive material and which makes a real contribution to the community'. **Slide 2** The award was given for our work with members of the Woking branch of Mind, a national association seeking to create a better life for everyone with experience of mental distress. When we collected our award I was very keen to stress that our work with Mind could not have taken place without *their* help, encouragement and enthusiasm-and I'd like to reinforce that message today. Working with groups like Mind is a crucially important task for archives and a key mechanism for making our collections accessible and relevant for all sections of the community – but relies on cooperation and openness on both sides. It is also very much a symbiotic relationship, with both parties enriching the other in different ways.

Like so many fascinating projects it all began with an argument. Early in 2006, we were approached by Michael Andrews and Janey Cottle, who between them run Woking MIND, for help in settling a dispute that had arisen when someone had taken an early plan of Brookwood mental hospital to their weekly meeting. Though many of their members had either been patients at Brookwood, or had worked there, none of them could agree on the location or names of buildings and departments shown on this plan. Mike and Janey therefore came to see whether any records of the hospital survived that might help settle the matter.

Fortunately, a very great number of records of Brookwood Hospital do survive. Surrey seems to be particularly rich in mental hospitals. Sarah Rutherford, in her recently published Shire Guide to the *Victorian Asylum* remarks that Surrey had more mental hospitals than any other county. **slide 3** Brookwood was the second county asylum, built in 1867 on land near Woking in order to relieve pressure on the first county asylum, Springfield, in Wandsworth, which had opened in 1841. Established by the quarter sessions and later administered by Surrey County Council, we were fortunate that most of its records had been steadily transferred to the record office throughout the late twentieth century. **Slide 4** When the hospital closed, in 1994, we succeeded in rescuing many further records that were discovered in derelict wards and forgotten cupboards as the site was transformed into flats and a supermarket. **Slide 5** The various deposits were amalgamated and catalogued in 2002-3 with the aid of a grant from the Wellcome Trust's Research Resources in Medical History grant scheme

Mike and Janey had both worked at Brookwood Hospital before it closed and are passionately concerned that the voices of the patients are not heard in the records and need to be recorded before it's too late. They were amazed by the extent of the surviving archive and by its diversity. It is not just administrative and clinical

records, it contains maps, plans **slide 6**, chaplains' reports, early photographs, **slide 7** operations registers, insulin treatment records, rules and regulations **slide 8** and hundreds of more recent photos of hospital events such as the annual summer fete, **slide 9** the carnival, concerts, talent shows etc There are also pictures of life on the hospital farm, **slide 10** the chapel, the laundry etc. The world that they knew was not quite as lost as they had feared.

They invited us to their next meeting, to meet their members and show them copies of some of the material we hold. Janet Nixon, our Archives Education Officer and I duly turned up the following Monday to find a tiny room in a house in Woking filled with an assortment of former patients, carers and people suffering from a very wide range of mental health problems. They were not so much interested in the history behind the records but in what the records could tell us about their own experiences and past. The photographs had been selected in discussion with the MIND specialists as they were aware of what the responses were likely to be and at the first session we all wanted as positive a response as possible. We recognised that our expertise lay in the documents and not in running this kind of a session. As the copies were handed round and the conversation took off in all directions, we could only watch and admire the way a diverse group with very different emotional responses was handled by the experts. The result was an extraordinary and quite moving outpouring of all too often hidden memories.

At a review of this session a seminar was suggested at which a number of speakers, chosen from those who had worked at the hospital and who would be familiar to the ex-patients, would be invited to give short talks about the hospital and their time there. It was felt that Surrey History Centre, as repository for the Brookwood archive, would be a good host for the occasion. We also have good facilities for this kind of event with a meeting room that can hold up to 80 and a small kitchen. The foyer at the Centre is bright and can comfortably accommodate archive displays. **Slide 11**

Woking MIND contacted the speakers, organised catering, distributed most of the publicity and took care of registration and clearing up. All we had to do was set up our conference room and put up a display of photographic material from the archive, maps of the hospital and liaise with the local museum, The Lightbox, for the loan of one of their panels on Brookwood Hospital. **Slide 12** They were very happy to join us in this event because it helped them to forge links with Mind and to publicise their forthcoming display about Brookwood Hospital using artefacts from the hospital's medical museum. They also allowed us to show an amazing short film about Brookwood made by an artist called Eric Fong for display in the new gallery. It uses both the artefacts and the hospital records to paint an evocative picture of life at the hospital during its early years.

From the start, we knew that this event was not just about the talks, it was an opportunity for people to meet old friends and new, to reminisce and to air views. The timetable allowed for a lot of chatting time. **Slide 13** Talks were more interactive than we usually see at the History Centre but all the speakers were experienced at handling a lively crowd. It was difficult to count the number of people who came along as there was a lot of movement in the audience, but it must have been around 90. Some visitors came in to Surrey History Centre, looked at the displays and film, had a cup of tea and talked to MIND members but then would not go any further. For

some, there seems to have been a fear of stirring old emotions which were obviously in conflict with a desire to be associated in some way. For many who had been connected to it, Brookwood Hospital was much more than a provider of medical care or a place of work: it was a home, a centre of stability and friendship and, for some, a refuge from a world they find hard to live in. Some former members of staff brought their own photographs to show (we were able to copy some for the archive) **slide 14** and one ex-nurse donated to The Lightbox the key to the Men's ward that he had kept when the hospital closed. He wouldn't part with his whistle (a safety device) as his emotional attachment to that was too strong.

We knew of the academic interest in the old hospitals and asylums, and we had been told of the interest in the local community, but it was not until we hosted this seminar that we understood just how strong and how important that interest is to the people who had lived and worked in the hospitals. There was much discussion on the rights and wrongs of the hospital closure and perceived weaknesses of 'Care in the Community'. Much of the day was filled with stories of personal experience and anecdotes of the effects of the closures on particular people. What struck me particularly was the fact that we had brought so many people together who would not normally have had much reason (or even desire) to talk to each other: doctors and nurse, yes, and of course former patients from the hospital; but the meeting was also attended by younger people suffering from mental illness today who may not have experienced the institutional life of the asylum but who recognised the symptoms discussed at the meeting and found the 'old fashioned' terminology of madness – idiocy, mania, melancholy etc – very refreshing in a world often confined in its own straitjacket of political correctness. Into this world stepped several people with no link to the hospital other than the fact that they had grown up and lived in the area and wanted to learn more about this part of Woking's history. The seminar gave all of these people the chance to meet and chat and learn from each other in a bright, friendly building over a cup of tea.

The success of the Brookwood seminar has led us to build on our partnership with Woking Mind, to explore different ways in which the documentary records can be used to help understand how the care and treatment of people with a range of mental health problems has changed and is changing. The emphasis is on understanding, recording and making heard the memories, feelings and responses of those most closely involved - the medical staff, the patients and their families and friends. It's all very informal – it has to be. Last summer we had a series of talks and events looking at different aspects of Surrey's historic landscapes. Dr Sarah Rutherford, who had used our hospital records for her PhD research into the therapeutic use of hospital gardens gave a tremendous talk on 'Landscapes of the Mind, using Brookwood and its first gardeners as one of her examples. I made sure that Mind were invited and in the discussion afterwards we all learnt at first hand of what it was like to work on the land or in the vegetable plot or to walk day in day out around the flower beds. It wasn't long since we'd held the study day – they'd been to the History Centre before; they felt comfortable.

In December we joined Mind at Woking Football Club to share in their Christmas Party. It doesn't sound much, but the simple fact that we had responded to the invitation and turned up on the day meant an awful lot and went a long way towards breaking down any remaining barriers. Their latest project, we heard, was health and

fitness (hence the football venue). They'd been looking at diet and exercise – important matters for people in sheltered accommodation who, after an institutionalised life might find it hard to eat well and play sport. We were able to suggest coming back to the History Centre to see how the first patients at Brookwood had fared. The superintendent's annual reports and house steward's reports list the weekly food allowances for staff and patients and describe every meal throughout the week. They list the numbers of patients working at the hospital, **slide 15** on the farm, in the piggery, in the laundry or vegetable garden and provide a vivid insight into daily life at the asylum and menus that Mind's members might try recreating today.

On 7 May we were delighted to be able to host Woking Mind's Annual General meeting which turned out in fact to be much more like an end of year party attended by people throughout Woking's diverse communities with whom they had worked over past year or were planning to work with during the coming year. By wonderful coincidence, Sarah Rutherford had developed her research into a Shire Guide on the Victorian Asylum and it had just been published. She was only too happy to help us make the AGM into an event by launching her book, signing copies and giving a short talk before the formal proceedings got underway. **Slide 16** Local radio came along to interview us all, a minibus collected Mind's regulars from their secure hostels around the town and the party went on (wine provided by Shire books) late into the evening.

Since then we have taken this partnership a stage further by using the MLA's 'Revisiting Archive Collections' toolkit to explore ways in which our catalogue of the Brookwood archive might be enhanced by what MLA term 'user generated content'. As archivists who catalogue the records or make them accessible to scholars in our searchroom we manage to pick up something about their content and importance, but people who had experience of the hospital can tell us so much more about the background the records. They can tell us what it was like to be admitted, to stay there, to live and work there, to go to dances, concerts and summer fetes. 'Revisiting Archive Collections' has repeated much of our previous work with Mind but in a structured way, which has allowed us to dig deeper and uncover information that we can add to our list that will make it more easily accessible to a wider range of users.

We have so far held two sessions with Mind when former patients and staff have looked at original photographs of hospital places and events. Hitherto, the photographs had not been listed in any detail, largely because we could not say very much about them. **Slide 17** The Revisiting Archive Collections project gave us the opportunity to sub number and package each photograph and capture information about it from the experts. **Slide 18** We did this by arranging them in themes – events, buildings, staff, work, restraint, church **slide 19** and then allowing Mind's members to look at them and discuss them while we recorded their comments. We found it informative, moving and exhausting.

Much of the information we have obtained at these sessions would appear to be more suitable for use in a document called 'Reminiscences of Brookwood' which would serve as an appendix to the main list. There can be cross references from the list to this document, but the information we have gathered could easily be arranged here under themes of 'Christmas', 'Events', 'Church' 'People', 'Hospital Life' etc.

There are a few problems with this 'free text' data. Some of it is quite sensitive and will need to be anonymised, other details may be unreliable for all sorts of reasons and we will try to corroborate it. I'm sure this is a general problem with oral testimony but perhaps even more so when we are dealing with people whose memories may be impaired, perhaps through long periods of being institutionalised or through the medical treatment they may have received while in care. **Slide 20** There is also a risk that people may be 'remembering' events that seem real to them, but were only part of their troubled consciousness and may never even have happened. I think we should be very careful how we present uncorroborated memories of treatment, restraint and drugs.

Having said that, we have all found this to be a very important and moving experience. Although we have worked with Mind for over a year and know some of their members quite well, we had not ventured so far into their personal experiences. Hitherto, we had used the photographs in the archive to trigger conversation and help people to feel welcome at such a large and, for some, intimidating a place as Surrey History Centre. Revisiting Archive Collections enabled us to take this so much further:

- It highlighted weaknesses in our catalogue of the Brookwood archive that we are now able to address.
- It provided the perfect opportunity for us all to learn more about Brookwood's recent history.
- By working with original documents, we have been able to engender a sense of ownership of the records in the very people who created them, or feature in them. Hitherto we had only used digital copies; now everyone could handle, share, discuss - and feel that they were helping us and users of the archive to learn more about their lives and experiences. This applied equally to patients and former staff.

The Revisiting Archive Collections toolkit comes with a model questionnaire to use during the sessions. I'm afraid that we did rather simplify these questions. Even our limited experience of working with Mind suggested that we needed to keep things at a very simple level. The questions that we came up with were more for our prompting than for our respondents to read and consider. There are important issues of literacy and attention span that need to be considered with a group of this kind. At both sessions we found that working one to one - even two to one - was really the only way to proceed. A photograph would often stimulate memories and conversations that swiftly departed from the image before us. It was all we could do to scribble down the information we were given. Though a recording was made by Rib Davis, an oral history specialist from The Lightbox, at our first session, this really did not work and we did not repeat it at the follow up session in May. On that occasion we were able to dig deeper and ask more sensitive questions about treatments, restraints, drugs. **Slide 21 and 22** I found I needed Michael Andrews from Mind to ask these questions and the two respondents found that they needed to nip out for a fag every few minutes - suggesting that they found it as intense as we did.

So, to sum up, here are a few of the lessons we have learned through working with Woking Mind:

- You should never be too busy to chat to people who just turn up in the searchroom on a busy day when you have a thousand other things to deal with. Mind turned up at a hectic moment and we could so easily have lost them if we had appeared not to take them seriously.
- Always take the experienced mental health worker's advice and work with them. They are the experts. Build up your own relationship with them as this establishes trust between you that patients will pick up on.
- Expect that there will be a lot of both positive and negative emotion attached to memories of mental hospitals from both patients and staff. Many patients loved their hospitals - they were home - but there may be areas you'd be interested in but the mental health worker will decide is a 'no go' area because of the emotion and painful memories.
- You should always have an experienced mental health worker with you and let them take the lead. It can be a fine line between oral history and a therapy session and as I'm not a trained therapist, dealing with the emotion that can easily come out of oral history is something that makes me slightly anxious!
- Accept that any session will be a negotiation and that you won't be able to dictate what happens. If a patient gets up and walks out without notice because they need a cigarette, don't take it personally, they just need a cigarette!
- Many patients will be uninhibited. Don't be surprised - Go with the flow!
- And be prepared to carry on the association after the project.

Having saved lorryloads of records from the hospitals as they were closing and then spent several years cataloguing them, I was already passionate about their importance as an historical record providing a vivid insight into the lives of so many tens of thousands of people. I have given talks to family historians about how to use them and I have worked with PhD students in exploring their value for the study of early attitudes to illness, but I had never before used them to trigger conversation with people who had actually been there. Our work with MIND last year shows how important the historical record can be for a very wide range of current mental and emotional needs and we will continue to explore ways in which it can help people on many different levels.