

## Barbara Robb, Amy Gibbs and the ‘Diary of a Nobody’

‘Mrs Robb has always been a terrible danger to [the government]... I knew we had to defuse this bomb’, wrote Richard Crossman in November 1969 (1977, p. 727), a fine compliment from a Cabinet Minister to a woman who emerged from the shadows to fight for improvements in the care of older people. How did she build such a fearsome reputation? What was her background? How did she acquire her skills? What made her take on the cause? What gave her the ‘uncrushable belief in the need to expose what was going on’?<sup>1</sup> How did she cope with Hospital Management Committees (HMCs), Regional Hospital Boards (RHBs) and officialdom’s tendency to reject critics and criticism and to maintain the status quo? The biographical element of this book seeks to illuminate the aspects of Barbara’s background and personality that motivated her and sustained her in her campaign, and to introduce Amy Gibbs. Their life stories lead into the ‘Diary of a Nobody’, the visit-by-visit record that Barbara felt compelled to start writing on the first day she visited Amy in Friern Hospital, the events of which inspired the founding of AEGIS (Aid for the Elderly in Government Institutions). The Diary ensured that Barbara had an accurate description of happenings that she observed directly or was told about by patients and visitors on the ward in order to achieve her objective of making improvements.<sup>2</sup> It was not written for publication. She used Amy’s real name, only later giving her the pseudonym ‘Miss Wills’. Barbara did not explain the title.<sup>3</sup> Amy, an ordinary

patient, could have been the Nobody, or Barbara, accorded the low status of a visitor or non-NHS professional in the hospital hierarchy, especially when criticising it. Both interpretations fit with Cohen's analysis (1964, p. 7), which she italicised for emphasis, that even where treatment of the illness was good, '*patients do not count*'.

Building on Amy's story, and linking to Townsend's (1965, p. 229) observation that many older people in psychiatric hospitals did not need long-term admission, we explore evidence about Amy's mental health and consider whether a twenty-month admission was in accordance with recognised good practice at the time. This chapter also covers the events of Barbara's campaign, based on the Diary, until November 1965 when she 'went public'. It includes the outcome of Lord Strabolgi sending a copy of the Diary to Kenneth Robinson (Member of Parliament for St Pancras North, where Amy lived; Minister of Health 1964–1968), Barbara's meeting with Dr Tooth at the Ministry, and Strabolgi's speech in the House of Lords, prompted by lack of constructive response from the Ministry.

### BARBARA: AN ANNE OF BURGHWALLIS

In the absence of a personal archive, clues to researching Barbara's background initially came from the dust jacket of *Sans Everything*. It states that she was convent-educated, trained as a psychotherapist during the Second World War and was married to artist Brian Robb, although scanty biographical material about him fails to mention Barbara. Three other clues in the AEGIS archive were the lynchpins to uncovering her life story: a police statement on which she was obliged to give her maiden name, Anne<sup>4</sup>; a biographical note for a conference programme that stated her place of birth as Thorner, Yorkshire<sup>5</sup>; and a cutting from the *Sunday Times* in 1972 which stated that she had been married for thirty-five years.<sup>6</sup>

Barbara Robb (née Anne) was born on 15 April 1912,<sup>7</sup> the second child of Major George Charlton Anne (1886–1960) and Amy Violet Anne (née Montagu 1885–1935). The Annes were an affluent Yorkshire recusant Roman Catholic family. They intermarried with other Catholic families, fairly openly adhered to the Catholic faith and harboured Catholic priests (Kingsley 2016). A plaque at the entrance of St Helen's chapel in the family home, Burghwallis Hall (Fig. 3.1), near Doncaster, records the ancestral martyrs who died 'for the faith': George Anne, Elizabeth Anne, Richard Fenton, and John Anne who was hanged, drawn and quartered at York, about 1588. Barbara was very proud of



**Fig. 3.1** Burghwallis Hall, c.1941. Photograph by George Anne, reproduced courtesy of Elizabeth Ellison-Anne.

these ancestors. On one occasion in the 1960s, she was exasperated with the brother-in-law of a Catholic patient she was trying to assist. He felt strongly that the patient should be helped by the Catholic community. Barbara infamously replied: ‘Set your heart at rest on that point . . . I myself am a member of one of England’s oldest Catholic families and have the blood of six martyrs in my veins, all awaiting canonisation.’<sup>8</sup>

Barbara knew her Anne grandparents well as she spent school holidays with them at Burghwallis. She described her grandfather Ernest Charlton Anne (Fig. 3.2) as ‘a man of endless kindness who believed children should be listened to’, and she recalled his words many years later:

‘when you see somebody needing help—help him.’ Then once, when I was a little girl, I got stung by nettles. He told me that wherever there were nettles there were sure to be dock leaves to cure the sting. And then he said: ‘Remember that everything in life is like the nettles, there are always dock leaves if only you look hard enough’ (Allen 1967).

Several formidable women in Barbara’s family gave her strong female role models. Great-grandmother Barbara Charlton, Ernest’s mother, was an



**Fig. 3.2** Barbara and her grandfather, Ernest Charlton Anne, c.1922. Reproduced courtesy of Elizabeth Ellison-Anne.

acute observer and commentator on people around her and wrote her memoirs (Charlton 1949). Grandmother Edith Charlton Anne, Ernest's wife, was a professional opera singer early in life and later published novels for adults (under a nom de plume) and stories for children (Allan 1897, c.1897; Anne 1898). Another relative who inspired Barbara was her aunt Ernestine ('Missie') Anne (1887–1985). A handful of letters in the AEGIS archive reveal Barbara's lifelong, lively and affectionate relationship with her. Lacking a formal education or career, Missie had a varied life including trying to live as a Benedictine nun. Missie also 'suffered bad mental health, being liable to deep depressions',<sup>9</sup> sometimes requiring psychiatric treatment. Her family supported her in the face of cultural taboos towards mental illness, thus exposing Barbara at a relatively young age to a close family member suffering mental illness.<sup>10</sup>

Barbara had three brothers, Michael (1911–1980), Frederick John (1914–2010) and Robert (1919–1941, died on active service). Her parents had a 'ropey' marriage. They separated and moved to London, into two different houses in Kensington, but in 1935 when her mother was terminally ill with cancer,<sup>11</sup> they drew closer again.<sup>12</sup> Barbara's cousin William Charlton thought that Barbara and her siblings had a fragile relationship with their father, and Barbara's niece Elizabeth Ellison-Anne said that they did not talk to each other for years.<sup>13</sup> Nevertheless, Barbara paid attention to her father's health in his old age. She observed less-than-ideal care in a hospital near to his home in Brighton, which might explain why he was moved to the relatively sophisticated facilities of a teaching hospital during his last illness.<sup>14</sup> Personal experiences with her father may have added to Barbara's desire to improve provision for older people.

In her teens, Barbara attended the Convent of the Assumption boarding school followed by St Catherine's finishing school, both in Kensington. Her course of study included the Catholic Social Guild syllabus, which contributed to her understanding of ethics and personal responsibility. The Guild examination which she sat in 1927 included questions on the 'Manchester School' of economics, obligations of Catholics to do 'social work' and the pope's teaching on the 'Living Wage' (Catholic Social Guild 1928).<sup>15</sup> Barbara wanted to be a ballet dancer and danced in Verdi's *Aida*<sup>16</sup> with the Vic-Wells Company (Anon. 1976), the forerunner of the Royal Ballet. An ankle injury ended her dancing career, so she went to the Chelsea School of Art to study

theatre stage design. At Chelsea she met Brian Fletcher Robb (1913–1979), also from Yorkshire. Barbara and Brian married in 1937 in St Helen's chapel at Burghwallis Hall. Barbara's brother Frederick was best man. Her brother Robert (Fig. 3.3) and their friend from the Chelsea School of Art, David Kenworthy, were ushers (Anon. 1937). Kenworthy became a Labour peer when he inherited the title Baron Strabolgi, and later strongly supported the AEGIS campaign.

Barbara and Brian bought a tiny cottage in Hampstead Grove, north-west London, where they would entertain family, friends, politicians and artists. She later ran AEGIS from there. The cottage was 'cabin-cruiser' size, according to one visitor: 'absolutely tiny, and spotless, and neat and rather arty'.<sup>17</sup> Brian, a cartoonist, illustrator and painter, had an art studio a short walk down the hill.<sup>18</sup>

During the Second World War, Brian was an army camouflage officer in North Africa (Robb 1944) and Barbara had various jobs. One was at St



**Fig. 3.3** Barbara and her brother Robert, winter 1940–1941. Reproduced courtesy of Elizabeth Ellison-Anne.

Christopher's Hostel, which nurtured and supported adolescent boys, in Hatton Garden, central London (Anon. 1939).<sup>19</sup> Many boys told extraordinary and distressing stories: one recounted cycling from Coventry to London after his closest pal died in a bombing raid. Others were homeless or living in poverty.<sup>20</sup> Barbara's experiences at St Christopher's whetted her appetite for training as a psychotherapist.<sup>21</sup> Despite the struggles of war time, Barbara also had time for fun. On one occasion she was a guest at Hesleyside Hall, the home of her Charlton relatives, but she did not realise they dressed for dinner and she did not have a formal outfit with her. With audacious imagination and creativity, she wore her posh silk Chinese pyjamas: the mistress of the house was not impressed, but the story lingered and the family recounted it in 2016.<sup>22</sup>

The Robbs had many left-wing friends, frowned on by some of Barbara's wealthy relatives. Mamie Charlton, her sister-in-law, described their friends as 'violently left wing'<sup>23</sup> and Barbara teased her brother Michael with favourable comments about communists. The same comments endeared her to other family members.<sup>24</sup> In a cartoon book (Robb 1944), Brian wrote the foreword about his future grandchildren, naming them Catherine and Nicholas, and drew himself, elderly, on the front cover with them. Barbara and Brian wanted children but Barbara had a miscarriage,<sup>25</sup> and parenthood was not to be.

### CARL JUNG, VICTOR WHITE AND BARBARA

We know a significant amount about Barbara's personality from her interactions with Father Victor White (1902–1960) and through his long-term correspondence with Carl Jung (1875–1961), founder of analytical psychology. Victor White, son of an Anglican minister, converted to Catholicism, became a Dominican priest, a theologian and Jungian psychoanalyst. We do not know how White and Barbara met, but in early 1941 White visited his parents who were then residing at Burghwallis. Barbara was probably there at the time.<sup>26</sup> Barbara 'trained' in Jungian analysis under White's guidance.<sup>27</sup> Training at that time was often informal, a few chats with a practitioner, and without theoretical courses or personal analysis.<sup>28</sup> White admired Barbara's autodidactic training, including her 'remarkable self-analysis'.<sup>29</sup> Barbara began counselling people referred primarily through local church networks.<sup>30</sup> In 1943, White introduced Amy to Barbara, for psychological help (Robb 1967, p. 69). From the War until 1965, Barbara worked as a psychotherapist.<sup>31</sup> Practicing

psychotherapy would have enhanced her insight into emotions and relationships and honed her listening and reflecting skills, all relevant to her later work.

White and Barbara had a close friendship. White recorded, in his dream diary, dreaming about her<sup>32</sup> and a few letters from her survive in his archive. One, in 1951, about the *I Ching*, the ancient Chinese text on divination that she was studying, indicates the breadth and depth of her interests and knowledge. The letter was also rather affectionate, opening with 'Darling V', and ending 'lovingly, B.'<sup>33</sup> This probably reflected her naturally demonstrative warmth to her friends. Many letters in the AEGIS archive end 'love', but those to Brian show an effervescent affection, one beginning 'Darling, Darling B' and ending 'I am so very, very, very lucky to have you.'<sup>34</sup>

White's correspondence with Jung began in 1945 and continued for fifteen years. Their letters explored the interface between analytical psychology and theology.<sup>35</sup> White first brought Barbara to Jung's attention in 1947, quoting her recent musings and dreams about Jung, for whom she prayed regularly 'that he may be all he can be'.<sup>36</sup> Jung answered White with interest and amusement, calling her White's 'soror mystica'—a 'mystical sister', the alchemist's female assistant,<sup>37</sup> a guiding collaborative partner. White replied, 'She seems to be very much more YOUR "soror mystica"!'<sup>38</sup> Barbara wrote out some of her dreams and her interpretations of them and sent them to White, who typed them out for Jung (Lammers and Cunningham 2007, p. 74). Jung's and White's letters about Barbara and her dreams give insights into her forceful personality and what inspired her in life, hence their inclusion here.

In one dream Barbara described having a tug-of-war with Jung but she pulled him off balance with remarkable ease, reflecting a determination to succeed even in the face of an opponent who was bigger, stronger and more famous than her. She described having bare feet, meaning having contact with the ground, the earth: 'Loving the God who had walked on the earth, I became interested in the earth itself.' For Barbara, bare feet, like ballet, implied a relationship with the ground, and signified freedom, pilgrimage and humility.<sup>39</sup> She wrote to White in 1947: 'I live for the Lord God who is Himself "at the service" of mankind, and it is only in so far that I am "orientated" to Him that I myself am able to serve mankind. My life is dedicated to mankind because it has first been dedicated to Him.'<sup>40</sup> White wrote: 'Her quite remarkable knowledge is balanced by a



deeply humble and simple faith—as well as by a very earthy common-sense and gaiety—all of which I greatly envy.<sup>41</sup>

Barbara met Jung in Zurich in 1951. Jung was seventy-six, Barbara was thirty-nine. They discussed older people, a subject that interested Barbara years before her campaign.<sup>42</sup> Barbara asked Jung what message he would give to older people: ‘Tell them to live each day as if they’ll be here for another 100 years. Then they really will *live* to the end’ (Robb 1973). They also discussed some of Barbara’s dreams, including the one the night before the 1949 Epsom Derby when she predicted the three winning horses in the correct order and instructed Brian to back them on his way to work that morning (whether he did is not recounted).<sup>43</sup> After meeting Barbara, Jung wrote enthusiastically to White:

I have seen Mrs. Barbara Robb, and I assure you, she is quite an eyeful and beyond! . . . she is quite remarkable. If ever there was an anima,<sup>44</sup> it is she, and there is no doubt about it.

In such cases one better crosses oneself, because the anima, particularly when she is quintessential as in this case, casts a metaphysical shadow which is long like a Hotel-bill and contains no end of items that sum up in a marvellous way. One cannot label her and put her into a drawer. She decidedly leaves you guessing. I hadn’t expected anything like that. At least I understand now why she dreams of Derby winners: it just belongs to her! . . .

It is just as well that she got all her psychology from books, as she would have busted every decent and competent analyst. I sincerely hope she is going on dreaming of winners, because such people need winners to keep them afloat.<sup>45</sup>

Jung’s comment about needing winners to keep afloat is eerie when we find out later that Barbara used much of her personal savings to fund the AEGIS campaign, causing her supporters substantial concern.<sup>46</sup> White replied to Jung:

I loved your letter—how right you are! . . . Barbara certainly is quite a corker, isn’t she? For weal or woe I cannot see her very often these days; but it occurs to me that IF you can be moved to offer any hints about how to deal with her when I do, I’d be very grateful.<sup>47</sup>

Coming from two experts in psychology, Jung’s and White’s remarks about how to ‘deal with’ Barbara are extraordinary. If they floundered, then other men with less psychological understanding of people and interpersonal relationships, may well misinterpret and misunderstand her in the course of

her work. The challenges of understanding Barbara fitted with Jung classifying her as an extraordinary and forceful 'intuitive introvert',<sup>48</sup> defined as a

mystical dreamer and seer on the one hand, the crank and artist on the other... frequently a misunderstood genius... The moral problem arises when he (*sic*) tries to relate himself to his vision, when he is no longer satisfied with mere perception and its æsthetic configuration and evaluation, when he confronts the questions: What does this mean for me or the world? What emerges from this vision in the way of a duty or a task, for me or the world? (Jung (1923) 1971, pp. 401–402).

Jung's characterisation of Barbara was almost prophetic. Later, she did not just ponder over her vision, but acted on it. Ann Lammers (2007, p. 258) commented that Barbara's 'verbal outpourings' in the letters created an 'atmosphere of mystical participation, tinged by Eros and hilarity, raising the temperature of the conversation and melting its formality'. These ways of interacting—in meetings, letters, interviews and phone calls—helped create her campaign style.

Jung's analysis aligned with Barbara's life story, her role models and the ethos instilled into her as a child, the uncompromising ancestral martyrs, the determined womenfolk, her wise and kindly grandfather and her education about social responsibility. A deep faith, humility, a 'grounded' security, a sense of pilgrimage and valuing her freedom all contributed to Barbara's immense drive, persistence and ability to overcome obstacles in her quest for justice.

### AMY GIBBS

Amy Gibbs (1891–1967) was born and brought up in north London. In 1911 she lived in middle-class Wood Green with her parents, four sisters, a servant and her ninety-five-year-old grandmother (UK Census 1911). She did not marry. She became a clerk in the Civil Service, but left because of mental illness. She was unwell for two years before admission to Napsbury Hospital, Hertfordshire, in 1929.<sup>49</sup> In 1934 the authorities transferred her to the brand new Shenley Hospital, from where she was discharged eighteen months later.<sup>50</sup> According to Barbara:

Her troubles arose from religious scruples. A simple soul, half-French and rather sexy, she had been taught that the devil would get her if she permitted herself any sexual sensations at all... She responded well to my kind of

therapy, and in a few weeks was able to take a job as a seamstress with a celebrated theatrical costumier. She pursued this career until she qualified for her retirement pension. . . . Her religious anxieties were not too difficult to keep in check.<sup>51</sup>

After discharge, apart from an admission to Friern for a few months in 1941–1942, Amy remained well until 1963 (Ministry of Health (MoH) 1968, p. 28). She lived alone in a rented flat in Kentish Town, northwest London.<sup>52</sup> She had many talents, including writing poetry<sup>53</sup> and reciting and translating French verse (Robb 1967, p. 91). After Amy retired, Brian encouraged her to take up art. She created collages from foil sweet and chocolate wrappers, tinsel and milk bottle tops (Figs. 3.4 and 3.5). She sold these at art exhibitions in Hampstead and in avant-garde West End galleries.<sup>54</sup> Art collectors,



**Fig. 3.4** Amy Gibbs creating a foil collage, 1961.

*Source:* author's collection.



**Fig. 3.5** Foil collage by Amy Gibbs.

*Source:* AEGIS/4/3, Library, London School of Economics. Orphan work: attempts have been made to identify copyright owner.

including professional artists, bought her work.<sup>55</sup> A review of one exhibition commented on her ‘gift for seeing the beauty that most of us miss in the familiar things and sights of every day’ (Conlay 1961). Amy gave a television interview on her work, about which Barbara commented: ‘This talented, modest, sociable lady—simple minded in a way that reminded me of Sir Stanley Spencer—carried it all off admirably, and kept her head throughout’.<sup>56</sup> Amy’s art earnings significantly subsidised her old age pension,<sup>57</sup> enabling her to take holidays and to pay the membership fee of the Hampstead Artists Council (HAC), ‘things I can’t do without’.<sup>58</sup> In the light of her artistic successes, her family, who shunned her after she was admitted to Napsbury, made contact again (Robb 1967, p. 86).

In 1963, Amy began to experience anxiety and other symptoms, such as spontaneous sexual sensations, which distressed her. Her GP prescribed a ‘tranquilliser’ which made her feel so ‘muzzy’ that she feared

falling in the street.<sup>59</sup> She saw a consultant psychiatrist in an outpatients clinic who prescribed occupational therapy, and because of medication side effects, suggested an admission to Friern. Amy agreed, expecting that the admission would sort out her medication, allow her to continue with occupational therapy, and would be of short duration (Robb 1967, p. 69).

At the end of 1964, a mutual friend, Eric Buss, passed to Barbara Amy's request that she visit her in Friern. Buss was distressed by his inability to improve Amy's situation on the ward or arrange discharge. He informed Barbara that the ward doctor said Amy was 'not a mental case', even though she was in a psychiatric hospital (Robb 1967, p. 70). Because Amy was one of Barbara's psychotherapy patients, Barbara considered the ethics of visiting. She decided that because Amy was 'not a mental patient and as she kept asking to see me, it was not improper for me to visit her'.<sup>60</sup>

#### 'DIARY OF A NOBODY': FRIERN, AMY AND FRIENDS

Barbara was shocked when she saw Amy in ward E3 in January 1965 (Robb 1967, p. 93). In the fourteen months since they last met, Amy had changed from being plump, upright and active to being thin, stooped, frail and inactive. Her hair was cut in the uniform 'pudding bowl' style of the other patients. She wore hospital clothes, and had neither dentures nor spectacles. Most patients on the ward lacked these necessities, and hearing aids and other personal possessions, and most were apathetic 'sat as if sunk in torpor' (p. 72). Visitors were rare and staff were unfriendly and unhelpful.

Barbara usually visited Amy and attended meetings about her accompanied by Brian or a friend who would read and sign the Diary entry to confirm its accuracy. Friends included Buss and Lord and Lady Strabolgi, who knew Amy through the HAC (Cochrane 1990, pp. 29, 31) and Barbara's neighbours Audrey and Ronald Harvey. Audrey Harvey was a valuable ally. She worked with deprived people in London's East End and was an ardent citizens' rights campaigner alongside Abel-Smith and Townsend. She wrote about demeaning practices encountered by people who needed to seek welfare assistance. This helped shift the authorities' attitudes to social problems away from the culture of blaming the individual for their misfortunes, towards a more sympathetic approach, that people could fall on hard times due to an unfortunate set of circumstances (Harvey 1960, pp. 16–23; Harvey 1965b; Toynebee 1971). Harvey (1960, pp. 14–15) also

understood the effects of overcrowding: 'it causes real and protracted agony, all the more painful to witness because it is so often borne with stoical patience', an observation relevant to private dwellings and to psychiatric hospital wards where resigned acceptance by patients and staff did not encourage NHS authorities to make improvements.

Barbara's twice-weekly<sup>61</sup> visits to the ward could not pass unnoticed. She took brandy, sweets and chocolates for the patients, offering them with the ward sister's permission (Robb 1967, p. 82).<sup>62</sup> Sometimes her handbag concealed a state-of-the-art pocket cassette recorder, a device available only since 1963, useful for recording meetings if she was unaccompanied<sup>63</sup> or to record patients' reminiscences (Harvey 1976). Amy was sometimes tearful, and Barbara was determined to find out why. Typical of psychiatric practice with older people at the time, the nurses labelled Amy as 'confused' (Robb 1967, p. 74). The label implied that Amy's comments were unreliable and should not be believed, that she could not make decisions for herself, would not get better and required passive care rather than rehabilitation. Barbara did not think Amy was confused, but Amy was nervous about complaining because she feared she would be punished for doing so (pp. 73–74). On one occasion Amy mentioned that staff threatened to put her 'out into the street' because she had complained about them (pp. 82–83). Barbara and Amy devised a code in case their conversations were overheard, such as referring to patients having a bang rather than being hit. Allegedly, the nurses slapped patients for being incontinent. Protective towards Amy, Barbara was cautious about how much she spoke to the nurses to avoid antagonising them, but noted how they responded, including their pejorative and infantilising comments towards Amy's incontinence: 'She's sometimes very dirty. She won't get out and sit on the pot' (pp. 87–90). Staff showed poor understanding of patients' emotional needs, such as telling Amy that she must not believe her friends about ever leaving Friern. Patients were generally in bed by 7 P.M. When Barbara visited one evening she found five still up, in less than dignified circumstances: 'one of the five sat on a commode; another, minus most of her clothes, was receiving treatment [personal care] nearby. No attempt was made to use screens' (p. 74).

Barbara had difficulty finding a doctor to talk to, and when she did, she received inconsistent information about Amy's diagnosis, prognosis and the possibility of discharge (Robb 1967, pp. 70, 88). Social workers also gave Barbara disconcertingly inconsistent information. The

community social worker correctly informed Barbara that since Amy was not detained under the Mental Health Act, she was free to leave Friern without reference to her relatives or anyone else (p. 89). Miss Cloake, the hospital social worker, told Barbara, incorrectly (MoH 1965, pp. 3, 5) that because Amy was incontinent there was 'absolutely no possibility' of her leaving Friern (Robb 1967, p. 78), and that Amy's relatives could decide where she should live (p. 83). Amy's psychiatrist, Dr Aix, wrote to Barbara concurring with Miss Cloake that: 'Any move would have to be done with approval of her family'.<sup>64</sup> It was certainly important to find out where would be convenient for the family, to enable them to visit, but legally their views would not override that of a sound-minded patient. Dr Aix seemed unaware of the patient's degree of lucidity or of the legal position. Both gaps in knowledge were unacceptable and could affect care and the education of other staff, possibly influencing Miss Cloake's advice. Given the typical staff hierarchies, it is unlikely that a hospital social worker would question a consultant's opinion about discharge.

Barbara alleged that Miss Cloake was involved in dubious practices concerning clearing Amy's flat in conjunction with Miss Lovat, Amy's niece. Miss Cloake told Barbara that Amy signed the requisite form, although whether Amy had her spectacles so that she could read it, or how Miss Cloake explained it to her, is not known, and that Amy's belongings had to be disposed of as either they 'just crumbled' or were 'musty and horrible' (Robb 1967, p. 79). Those conditions were possible, because the flat was unoccupied and unheated for a year. However, neither Miss Cloake nor Miss Lovat had recently visited the flat, so it was unlikely that they knew the real condition of the property, and no evidence is given that neighbours or the landlord voiced concern. That did not prevent Miss Cloake from booking a clearance company before they visited. On the day they cleared her flat, Miss Lovat took some of the art work with her. It was neither 'musty and horrible' nor 'crumbling', which throws doubt on Miss Cloake's assessment and decision making. Later, Barbara met Miss Lovat, adding to her suspicions that Miss Cloake masterminded the sale of Amy's possessions, with Miss Lovat dutifully cooperating with, rather than challenging, her professional authority (p. 99).

Barbara was horrified by the sale of Amy's possessions. Buss wanted to buy them back for Amy, but his plan was thwarted: two weeks after the clearance, Miss Cloake said she had forgotten the name of the company and had no record or receipt (Robb 1967, pp. 84, 94), hardly a professional

way to deal with a patient's property. These events coincided with Barbara hearing about antiques racketeers across the country telling relatives or officials looking after older people that their house contents were worth nothing, and then removing them (p. 100). Barbara informed the police of her suspicions. Two years later the press reported that the scam continued and that the police had difficulty tracking down the criminals (Smith 1968).

During the summer Barbara and Buss visited Amy on Sunday afternoons and took her out into the grounds where they met other patients and visitors and listened to their worries about the care provided at Friern. Some relatives complained of the long journey to visit their loved ones and others had difficulty finding the fares. About two thirds of patients on ward E3 never had visitors (Robb 1967, p. 93). Barbara and Buss also heard about staff overlooking patients' physical ailments, shouting at them and taunting them, such as a nurse offering a patient a chocolate biscuit then taking it away and eating it in front of them (pp. 99, 101).

Attempts by the hospital to arrange a care home for Amy were ineffective, so her friends took steps to find one themselves. Barbara visited St Peter's, near Vauxhall, a convent care home with 200 residents run by the Little Sisters of the Poor. The ground floor was made up of mixed communal rooms. The sleeping quarters, as at Friern, were Nightingale-type dormitories. The home had a chapel (Fig. 3.6), visits from clergy, a farmyard with chickens and turkeys (Fig. 3.7), and provided facilities for handicrafts and other activities (Fig. 3.8).<sup>65</sup> Barbara was impressed and they had a vacancy. To complete the necessary discharge formalities, Barbara needed to discuss Amy with Dr Giddie, the ward doctor at Friern. Buss arranged their appointment for seven o'clock that evening. Dr Giddie did not turn up. The ward Sister phoned Dr Giddie who said that she would not meet Barbara and Buss as she could not help, but Barbara should write to the medical superintendent. Dr Giddie refused to speak to Barbara on the phone. Walking through the hospital and wondering how best to find a doctor in order to expedite Amy's discharge, Barbara asked two people she thought were canteen staff. She explained the predicament, and the glance one cast at her companion inspired Barbara to ask if she was Dr Giddie. Barbara was right. The companion, another doctor, offered constructive advice, with the ambiguous remark: 'The hospital would be delighted to see your friend go' (Robb 1967, pp. 102–104).





Fig. 3.6 Service in the chapel, St Peter’s, 1960s. Reproduced courtesy of Sr Deirdre McCormack, Mother Superior, St Peter’s.

Barbara did not trust Miss Cloake to book the ambulance to take Amy to St Peter’s, so Audrey and Ronald Harvey and Barbara and Brian, took her in the Harveys’ car. Amy was ready to leave when they arrived at Friern. Her outfit was hardly dignified. She was

wearing a hideous skirt and cardigan and heavy shoes—all replacements for her own, which, we were told had worn out. At least she still had her own, decent coat . . . and her perky little hat. Her undies, such as they were, were on loan, and had to be returned (Robb 1967, p. 106).

At St Peter’s, Amy particularly liked the food, smiling faces and having her own possessions, including a locker. She called her locker ‘Vishnu’<sup>66</sup>—the giver and provider—more evidence of the breadth of Amy’s knowledge, and her good cognitive function when she arrived there. She got stronger and more content, apart from her devastation at hearing about the



**Fig. 3.7** Nun feeding turkeys in the grounds, St Peter's, 1966. Reproduced courtesy of Sr Deirdre McCormack, Mother Superior, St Peter's.



**Fig. 3.8** Party on the women's ward, St Peter's, late 1960s. Reproduced courtesy of Sr Deirdre McCormack, Mother Superior, St Peter's.

disposal of her belongings (Robb 1967, p. 109). She began to write letters again. Strabolgi<sup>67</sup> and Missie, among others, visited her. According to Missie, Amy was in 'wonderful good health and normality' when she spent an afternoon with her.<sup>68</sup> Amy wrote to Barbara: 'I get kindness and sympathy here and the sisters call me pet and darling and haven't slapped my face ever, or slapped me hard on the hand which [the staff at Friern] loved to do'.<sup>69</sup> Despite Miss Cloake's assertion that Amy would never leave Friern, Amy lived for two years at St Peter's until her death in 1967.

Despite poor-quality care, some staff at Friern showed compassion, kindness and understanding (Robb 1967, pp. 78–79). Most poor care was not deliberately malicious but related to understaffing, overcrowding (about sixty patients on Amy's ward (p. 93)), primitive facilities, inadequate leadership, ineffective communication and staff ignorance about best practice. The stark difference between the way personal difficulties such as incontinence of urine was managed as humanely as possible in

other institutions, such as Crichton Royal, Severalls or St Peter's, and the practice at Friern, where staff took few steps to minimise it and blamed patients for it, illustrates lack of knowledge or willingness to adopt practices that could improve patients' quality of life. Failure to implement best practice was also reinforced to Barbara when, on one visit to Friern, the patients and the ward looked engaging and lively, with books and sweets available, with all patients dressed and wearing their dentures. Barbara found out later that the staff were expecting an inspection (p. 89). Disturbingly, staff knew the conditions they should provide, implementing them for official visits but otherwise ignoring them. Barbara's observations also reflected her and Strabolgi's concerns about the effectiveness of planned, official inspections.

### WAS AMY MENTALLY ILL?

Retrospective diagnosis of any illness is problematic. Psychiatric conditions are especially tricky. They lack obvious physical pathology, symptoms intertwine with social and cultural understanding and expectations, and diagnostic criteria are influenced by social factors, medical knowledge and the law. In the early 1960s, many psychiatrists regarded hospital admission as integral to treating mental illness, a practice gradually challenged by research findings (Carse et al. 1958). In Amy's circumstances, a brief admission for assessment and to review medication was a reasonable option. For Amy, the main question is whether she required a *prolonged* admission. Her clinical notes do not survive.

The nature of Amy's mental illness when she was admitted in 1929<sup>70</sup> is unclear. However, a severe chronic disabling 'psychotic' illness such as schizophrenia was unlikely because, after discharge, she remained living independently, in employment, and with good social interactions in the years before antipsychotic medication was available. At the time of her admission in 1963, her psychiatric symptoms included anxiety and disturbing sexual sensations,<sup>71</sup> and an acquaintance commented that she was 'possessed of an evil spirit'.<sup>72</sup> These details do not permit diagnosis.

Common psychiatric diagnoses in older people include depression and dementia. Did Amy have dementia? Some episodes in the Diary suggest that she had some intermittent muddled thoughts. She might have been a little forgetful because she did not, or did not want to, remember what she had eaten at mealtimes (Robb 1967, p. 88). However, Amy's account of

her fears and responses when asked questions to test her memory was compatible with anxiety more than dementia. In Barbara's words:

when this man started asking her questions, she had thought that he might be trying to make out that she was mad, to stop her from leaving the hospital. She had been frightened and her memory had gone.

He had asked her for her address. She told him she was in the old Colney Hatch. He asked for its proper name, and she hadn't been able to recall it, but had said that it might be in Middlesex. As soon as he had gone, she had remembered that it was now called Friern.

Finally he had asked if she felt depressed. She had said yes, and he had asked if it was because she was 'in this place'? She had told him that it was partly that: 'Of course, it's nothing but that, really, Mrs Robb, but I didn't want to be impolite' (Robb 1967, p. 103).

Amy's recollections of the interview suggest that her memory was functioning adequately. Her improvement after discharge indicates that she did not have a progressive degenerative disorder, 'senility' or dementia, to an extent that required long-term psychiatric hospital care.

Did Amy suffer from a depressive illness? Amy did not appear to be depressed at the time of admission. She looked forward to visiting friends in Ireland who had invited her for Christmas. She was pleased with her new 'darling' home help<sup>73</sup> and intended to be present when her collage *The Pink Front Door* was exhibited at Kenwood in Hampstead.<sup>74</sup> She was optimistic that her problems would be sorted out. Her optimism changed to despair after a few weeks. She ended a letter to Barbara: 'Yours frightened'. She had no occupational therapy at Friern. She felt no better despite medication, 'a sleeping draught last thing that makes me sleep half the night and I'm awake the other half with these ghastly sensations that I can't escape'. She received a course of electroconvulsive therapy (ECT).<sup>75</sup> Barbara referred to ECT several times in the Diary, indicating that she was broadly disparaging about it (Robb 1967, pp. 69, 81, 99).<sup>76</sup> It is unlikely that she knew about the research indicating that it could be highly effective in older people with severe depression (Post 1962). More likely, she drew her knowledge from controversial, negative accounts in novels such as *One Flew over the Cuckoo's Nest* (Kesey 1962) or *The Bell Jar* (Plath 1963). Amy's symptoms did not suggest severe depression, the main indication for prescribing ECT. It is not surprising that ECT did not help, supporting the notion that assessments of her mental state were inaccurate.