BY THE BY:
Jobs in Bygone Days

The evening is closing in. There are only two of us in the dining-room and the meal is over. The man sitting across from me, sober-suited, half his face in shadow, smiles but says little. Strange. He’s well-known in learning disability circles, and beyond, yet is self-effacing to the point of vanishing. I lean forward to make sure he’s still there. Waving my arms about and stroking my sideburns which are so long they look like a badly made chinstrap, I talk hokum. “That is interesting”, he says, his voice precise. Encouraged, I pile on the claptrap.

This was in the 1960s. The quiet man was Dr. H. C. Gunzburg, the place Monyhull Hospital. It was the only time I ever met him, the only time I ever talked to or, rather, at him. In later years we did see each other at the odd conference, but I kept my distance, too embarrassed to close the gap. Then we started corresponding. He was always courteous, kind and helpful in so many ways. I owe him much.

The flashback was prompted while I was reading Deborah Hutchings’ (1998) book about Monyhull (A History of Caring, 1908-1998). My feeling, for what it’s worth, is that she didn’t give Gunzburg enough prominence. After all, his name was up there in lights, along with the names of Jack Tizard and Neil O’Connor in England, and of Al Baumeister in the USA, among others. He was a prolific writer, yet she mentions only two or three of his publications.

So why my belated interest in Monyhull? Well, management at the hospital I used to work in, Muckamore Abbey in County Antrim, commissioned Ian Montgomery, an archivist in the Public Records Office of Northern Ireland, to write its history. And a very good fist he made of it, too. The book is due to be published next year. Muckamore opened its doors late in 1949 and all the early admissions were females, most of them functioning at the mild level of learning disability.

One striking similarity in outlook between Gunzburg and his colleagues in Birmingham, and early management under Dr. T. W. H. Weir at Muckamore Abbey, was their dislike of the notion of long-term or permanent residence in the big institution. They wanted residents, especially the more able, to return to the community to lead useful and contented lives. The hospital was a training ground, not just a retreat or backwater. And, as we all know, Gunzburg was a pioneer in the assessment and training of living skills. However, Weir did not advocate normalisation as defined by Wolfensberger. In his view, the hospital was essential, a view I also quietly hold.

While Ian Montgomery got on with his formal history of Muckamore Abbey, I glanced through records of early admissions. What happened to those ladies who were admitted all those years ago? What employment opportunities were there? The opportunities were, in the main, as follows: domestic, live-in, private houses; domestic, hotels and hostels; factories and mills; restaurants and cafes; and laundries. To help bridge the gap between
hospital and community we had a full-time employment officer as well as social workers and other professionals.

I’ll give examples from each of the main employment categories. (All individuals have been given false names.)

Domestic, Live-in, Private Houses: It is often forgotten that, until the 1950s, domestic service was one of the largest sources of employment north and south of the border.

Alison was born in the 1930s, was abandoned very early in life by her mother and spent most of her life in institutions, including the workhouse in Belfast. She was admitted to Muckamore in 1950 and spent some years mastering domestic tasks. Eventually she went to work as a nanny in a large, upper-class home. Her employers spoke well of her performance in the kitchen, cleaning, polishing and so on. But there were two problems.

The first occurred at mealtimes, when Alison was expected to join the family in the dining-room. She would say she wasn’t hungry, she felt off colour, she was trying to lose weight, all excuses to stay away from the table. The second was that she wouldn’t make or take phone calls. These problems were traced back directly to institutional practices. Take the hospital, for example. Staff didn’t eat with residents. The only ward telephone was in the nursing office, then out of bounds to residents. Hospital staff had trained Alison efficiently in some areas, but it hadn’t occurred to them that she was sadly lacking in others. Day Centre staff made good these and other deficiencies and Alison went on to have an excellent employment record.

Domestic Work, Hotels and Hostels: Sally and her two sisters were born in the early 1940s and were abandoned by their mother. She was therefore another girl who spent her early life in various homes. She was in Muckamore for over ten years and left it in 1969 to live in a hostel. In 1974 she obtained a post in the ill-fated La Mon House Hotel and was very fortunate to have a sympathetic employer familiar with the problems of individuals who have a learning disability. Her work record was quite good. She was in the building when it was destroyed by a bomb in 1978. Fortunately, she was in an area well away from the blast.

Factories and Mills: Sylvia was born into a large family in the early 1940s. During her teenage years her behaviour became so erratic and aggressive she had to be admitted to Muckamore. Her work in the hospital was quite good and in 1962 she returned home. Our employment officer got her a job in a canning factory at £3-16-0 for a 40 hour week. She was laid off when work slackened but soon obtained a job as a doffer in a large linen mill, where she did well.

Restaurants and Cafes: Lily was born in the early 1930s and because in her teenage years was judged to be in “moral danger” was admitted to a psychiatric hospital. She returned home some years later and obtained a job as a waitress in a Woolworths store. She worked there for over 20 years, rarely took sick leave, and received consistently good reports. However, she resigned to look after her mother who was in failing health. Lily was one of the best products of Muckamore. She now lives quietly in retirement and keeps an excellent house.

Needless to say, a few of the early admissions went on to have appalling work records. But, in the main, this was due to personality factors, not on-the-task ability.

I started with a flashback and will finish with the same one which, even after all these years, makes me cringe. Gunzburg was, still is, a big name. But there he sat, patient as Job, as I explained the importance of a short term memory experiment I was about to carry out. I still have the notes. Looking back, the sheer triviality of the experiment is, oh, so obvious. During my career I supervised, or helped to supervise, some fifty theses at under- and post-graduate level. Some were as appallingly trivial,
as blatantly nonsensical, as the one I was describing that long-ago evening at Monyhall. But Gunzburg gave nothing away. In fact, he wished me luck.

I am, as ever, grateful to Mary Drain for the help she so freely gives me in her spare time.

D. N. MacKay

Office 019, Enkalon Business Park, 25 Randalstown Road, Antrim BT41 4LJ, Northern Ireland

References


Montgomery, Ian. ‘Special Care’: A History of Muckamore Abbey Hospital. To be published.