



Catharine Coleborne, Dolly MacKinnon, eds. *Exhibiting Madness in Museums: Remembering Psychiatry Through Collection and Display*. New York: Routledge, 2011. 218 pp. \$140.00 (cloth), ISBN 978-0-415-88092-3; ISBN 978-0-203-80710-1.

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Published on H-Disability (January, 2015)

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Professional Accounts, Peep Shows, and Other Possibilities

This is a welcome addition to a growing literature which examines museum practice in relation to collections assembled for a medical purpose. In many parts of the world, the last two decades have seen a reassessment of such practice in order to take into account approaches and ideas arising from disability studies, and from the increased rights of people with disabilities to access the collections, not only as audiences or readers, but also as curators and exhibitors. This is exemplified by the work at Goodna, Australia, the subject of a paper by Mark Besley and Mark Finnane in this collection. Peter Beresford has gone further and called for museums which are controlled by survivors, in all their aspects, as an alternative to professional accounts or ... another peep show.^[1] The focus of this book, subtitled *Remembering Psychiatry through Collections and Display*, seems somewhat out of step with the times and firmly locates this volume in the expert world of psychiatrists rather than the multiple worlds of patients, nurses, family, other healthcare professionals, ancillary staff, or those living in the locale of the asylum. Such worlds are not ignored, but are estranged from the main narrative. There are advantages to this focus, such as providing a space to discuss the ethics of museum practice relating to collections of psychiatrists and their institutions, but the resulting lacunae call for a companion volume with a focus on the users and potential users of the collections. Similarly, the authors bring experience from the United Kingdom and the Commonwealth and show that the history of psychiatric

practice varies widely. This diversity suggest a need for a companion volume which might include experiences from the rest of the world.

Where this volume departs from the usual approaches to public interpretation of the history of madness is in its shift from the repository to the museum, and from archive to object collection. It is an area that complements the work of geographers on the relationship between the buildings of psychiatric practice now converted to new uses, demolished, or awaiting demolition. It would have been appropriate if the scope had been widened a little to include oral history and collections of textual and visual histories through social media alongside the collecting of objects. This is a lost opportunity as, argued by Nathan Fils and David Wright, perhaps more than in any other historical field, patient narratives (or patients' past experiences) have held a symbolic place in the history of madness, an important part of mental health interventions developed over the twentieth century (p. 103). The power of social media history in interpretation of the tangible is revealed in papers such as those by Bronwyn Labrum, and Joanna Besley and Mark Finnane, who conclude that personal stories and memories could deter any potential voyeuristic intent (p. 131).

Two publics for sites and exhibitions of the history of mental health are noted by many of the authors: those who visit to explore a personal heritage along with a

small number drawn from the general public on the one hand, and the far larger number who take the voyeuristic opportunities of spectacles.

Other than the suggestion that personal testimonies might be useful, and presuming that voyeurism is not an inescapable response to madness, a question not asked is what can be done to reduce the potential for collections to become peep-shows. Or, what can be done to increase the attractiveness of gaining a clearer understanding of the experience of patients and practitioners in psychiatric institutions (to use the collections as vehicles for programs/organizations which aim to end mental health stigma, or in the promotion of mental well-being (p. 8). It is unfortunate that Nurin Veis's chapter is one of the shortest chapters as it excellently covers its topic, the ethics of exhibiting psychiatric materials. However, the opportunity to consider other aspects of exhibiting are lost. The section on why we display medical collections is far too short and Catharine Colborne's observation that "medicine" is, in fact, intrinsically interesting is not explored further (p. 16). However, Veis's persuasive conclusion that there is both an emotional and intellectual connection as a result of the exhibition is an important contribution to the collection.

In their introduction, the editors note the opposing schools of thought on mental health. One approach strives for the erasure of the things which occasion the memory of madness and its treatments, but there are those who wish to include psychiatric issues in their histories, and thus ensure that the things which occasion memory are preserved. (This is not restricted to the heritage of psychiatry, or even to "dark" heritage in general, but to heritage as a whole—see, for example, Jane Grenville on the built heritage.[2] However, it fails to highlight the potential for the extreme reaction, engendered by the heritage of mental health, to better understand, and perhaps manage, the less violent reactions encountered everyday with other experiences of the past.

Several papers focus on specific aspects of museum collections. Colborne charts motivation for collecting, and observes that those who curate them are largely "enthusiastic amateurs" although some have had access to training and museum development advice (p. 20). Typically for this volume, she notes that her research "has not extended to audience and visitor perceptions of museum exhibitions, this is one direction such research should take" (p. 24). Typically, also, for this volume, there is a failure to distinguish temporary from permanent, exclusive (i.e., only madness) and inclusive (madness among

other issues) in the display and interpretation. Also missing is mention of the impact of the widespread closure of psychiatric institutions in the second half of the twentieth century which has presented particular challenges to those charged with the curation of psychiatric collections and local studies collections where the locality included a psychiatric institution—as exemplified by Julian Pooley's work in rescuing the archives left in situ in abandoned mental health hospitals, a task rarely undertaken as it is so overwhelming.[3]

The difficulty of collecting large, sound-producing objects, such as pianos and cinema projectors, is discussed. The psychiatric institution is also examined as place of production with clothing production specifically covered by Labrum. There is, however, no mention of production as therapy, which in the United Kingdom saw a transfer from therapeutic craftwork training as factory fodder as charted by Vicky Long.[4]

Fiona R. Parrott's contribution on ethnographic research in a medium-secure psychiatric institution is presented as a counterpoint to the historical collections that are the focus of many of the other chapters. It is not, however, about contemporary collection by a museum. The paper provides a rich source of thought-provoking descriptions of patients' use of material culture which could be used to explore archaeological sites or earlier collections, in reminiscence work, as well as in the work of the secure institution itself. At several points, Parrott refers to the use of material culture in contexts without a mental health aspect, suggesting that her work could be used in conversations between institutions and the general public.

The inclusion of Nathan Flis and David Wright's paper is rather strange, as it does not concern itself either with collections, or the wider questions they engender. They observe that the recognition and exhibiting of the graveyards associated with psychiatric institutions appears to be "a part of a larger trend of historicizing the mental hospital," which uses methods distinctly different to other forms of remembrance (p. 102). Helen MacDonald's paper on the collection of corpses from asylums for medical research similarly seems oddly placed in this volume. No parallels or contrasts are drawn with the purposes, styles, or uses of collecting noted elsewhere in the volume, and the practices seem to be isolated from contemporary concerns about collecting, curating, or exhibiting. No mention is made, for example, as to whether any specimens in contemporary museums were collected from asylums.

D. Gareth Jones also considers the collection of bodies of mentally ill people for medical research, summarizing Helen MacDonald's paper in two paragraphs, which are sufficient to provide the context. Jones notes that, in New Zealand, anatomy museum displays were not recorded before 1964. The collection of bodies, potentially of tortured prisoners from China, for exhibit in blockbuster commercial anatomical experiences provides a disturbing parallel to the earlier collection of bodies from asylums, but the connection to the display of psychiatry is not clear. D. Gareth Jones argues that human tissue banks have proven worth, such as in l-dopa treatment for Parkinson's disease, and concludes that they function ethically as research museums.

In conclusion, this collection demonstrates that this field of study offers great potential, not only for further research, but for addressing questions with practical application of great significance.

Notes

- [1]. Peter Beresford, "Past tense," 2013, Na-

tional Empowerment Center website, <http://www.power2u.org/articles/history-project/museum.html>, accessed December 4, 2014.

[2]. Jane Grenville, "Conservation as Psychology: Ontological Security and the Built Environment," *International Journal of Heritage Studies* 13, no. 6 (2007): 447-461.

[3]. Julian Pooley, "Private Minds, Public Histories," podcast, June 10, 2011, Backdoor Broadcasting Company, <http://backdoorbroadcasting.net/2011/06/julian-pooley-private-minds-public-histories/>, accessed December 21, 2014.

[4]. Vicky Long, "Rethinking Post-War Mental Health Care: Industrial Therapy and the Chronic Mental Patient in Britain," *Social History of Medicine* 26, no. 4 (2013): 738-758.

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Citation: Pat Reynolds. Review of Coleborne, Catharine; MacKinnon, Dolly, eds., *Exhibiting Madness in Museums: Remembering Psychiatry Through Collection and Display*. H-Disability, H-Net Reviews. January, 2015.

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