

Dumfriesshire and Galloway Natural History and Antiquarian Society

Crichton Conference, September 2018

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A CELEBRATION OF THE CRICHTON: Past, Present and Future

Sunday, 16 September 2018

The Duncan Room, Easterbrook Hall, The Crichton, Dumfries

Reports on the conference organised by the Dumfriesshire and Galloway Natural History and Antiquarian Society, in collaboration with The Crichton Trust

**The Early Years and Art Therapy at the Crichton
Morag Williams (former D&G Health Board Archivist)**



Statue of Elizabeth Crichton unveiled by HRH Prince Charles for the Landale Foundation in 2000. Photo by John Williams.

We met in the Duncan Room at Easterbrook Hall, which was where I was based from 1988 to 2004. On 6 April 1989, the year of the 150th anniversary of Scotland's seventh and youngest royal asylum, HRH Prince Charles, arrived to launch Crichton Royal Museum, later to win an award. Undoubtedly our good fortune in being offered Prince Charles stemmed from the fact that the late Sir David Landale was for seven years secretary to the Duchy of Cornwall.

Mrs Elizabeth Crichton is highly regarded today as foundress of Crichton Royal Hospital and a great benefactress to psychiatry, so much so that she is featured in *The Biographical Dictionary of Scottish Women*. Early announcement of her plan to erect a psychiatric hospital — or to be more precise in the prevailing language of her time, a 'lunatic asylum' — on 40

acres of rising ground on the southern outskirts of Dumfries brought severe censure of the scheme in the local press. It was labelled 'Crichton Foolery'. The fact that there were to be 100 beds seemed insupportable to local people.

Contrary to prediction, the hospital continued to grow until the late 1950s because of the relaxed atmosphere that prevailed in a location far from where patients were known and the quality of care on offer.

In the latter 20th century the tables turned and there was profound objection to plans to dismantle the hospital. Attitudes to Mrs Crichton had changed completely.

Enlightened though she was, the hospital reflected 19th-century attitudes. There were seven classes of patient, in the absence of which wealthy families would not have used the facilities on offer. There were two principal houses, Crichton Royal Institution (CRI), based on what is now Crichton Hall, for the private patients and which opened on 3rd June 1839 for all seven classes of patient in single rooms; and the Southern Counties Asylum (SCA) for 'pauper patients', which opened in 1849 and was demolished in the early 20th Century.

In the 19th century mental health care was based largely on fresh-air pursuits and activity. Recoveries took place. The most-applauded aspect of that early care has in recent times been Art Therapy — 'Outsider Art' or 'Art Brut', which are the modern terms — as promoted by the first physician superintendent, Dr W.A.F. Browne, who employed an art teacher to develop the artistic skill of patients with a talent in that direction. There are approximately 140 items collected by him. Accompanying the illustrated talk will be excerpts from case notes of the people studied. Crichton House, the home of the superintendent, stood behind CRI and was drawn by one of the patients looking out from CRI. All in all, it is an absorbing subject.

Early occupational therapy at the Crichton Institution **Mary Smith (Author and Crichton Graduate)**

At a time when those patients referred to as lunatics were still often being kept in appalling conditions, often under restraint, Dr Browne was given the opportunity to put his belief in a new form of treatment into practice at the Crichton Institution. One of the key features in his lectures, subsequently published, on *What Asylums Were, Are, and Ought To Be* was the need for 'moral treatment'. He summed this up with two words: kindness and occupation. What he meant was treating patients on rational and enlightened principles, which included keeping them occupied and busy, which would prevent 'morbid thoughts'.

Physical exercise and fresh air were considered essential for all patients but the types of occupation varied according to social class divisions. Paupers worked on the Crichton's farm and grounds, or in the kitchens and laundry. Walking, gardening, carriage driving, picnics, sewing, dances, draughts, cards and sewing were all part of the treatment and recorded by Dr Browne in his detailed annual reports.

Even more innovative occupations were introduced. The idea of theatrical performances, produced and acted in by patients, being held in a mental institution raised more than a few eyebrows. The project went ahead and proved to be a great success, as did the first magazine to be compiled and published by the patients in an asylum. Sold on subscription, The New

Moon magazine proved so successful the Crichton was able to use the profits to purchase its own printing press as well as purchasing books for the patients' library (another innovation in an asylum).

Despite the many occupations and amusements available to patients a level of monotony existed in the day to day life in the asylum. To minimise the risk of bored patients seriously disrupting the smooth running of the asylum special celebrations of the major calendar occasions such as Halloween, Harvest Festival and Valentine's Day were introduced — and Christmas at Crichton was celebrated in grand style.

Development of Psychiatry at the Crichton Dr David Hall (Consultant Psychiatrist)

Although it might be assumed that the opening of the new psychiatric hospital at Midpark in 2012 meant the end of psychiatry at Crichton Royal Hospital, it could be argued that this signified ongoing innovation and commitment to improving mental health services within the Crichton site.

Midpark Hospital is built on a site adjacent to the Bungalow where insulin coma treatment, an innovative treatment at the time, was delivered in the 1930s, and the office building behind the new hospital was historically part of the Crichton Royal Estate.

The contribution of psychiatrists at Crichton Royal Hospital to the development of their specialty and improving mental health care is significant and goes back to the appointment of the young, dynamic and forward thinking Physician Superintendent, Dr W.A.F. Browne. Dr Browne came from Montrose where at the age of 31 he had already led the development of an innovative service. His contribution was to ensuring moral treatment of the insane and he developed an innovative classification of mental disorder. His commitment to moral treatment included identifying that restraint could be avoided through ensuring 'that attendants were well trained and supported', an issue which we continue to struggle with in psychiatric facilities now.

Dr Browne was succeeded by a number of notable consultants, many worthy of mention, including Dr Easterbrook who saw the expansion of the hospital facilities and Dr P.K. McCowan, who led the service over a period when specific treatments were being developed including ECT, insulin coma treatment and psycho-surgery. Notably however, one of his greatest contributions was his willingness to accept psychiatrists fleeing the Nazis in the 1930s, including the former Professor at the University of Heidelberg, Dr Willi Mayer-Gross. Dr Mayer-Gross was appointed Director of Clinical Research from June 1939 until 1954 and among the eminent psychiatrists attracted to work here at that time included Professor Sir Martin Roth who went on to Chairs in Newcastle and Cambridge and became the First President of The Royal College of Psychiatrists.

Thereafter psychiatric treatment moved significantly with Chlorpromazine identified as one of the first real treatments for schizophrenia. Dr George Stirling, who was the longest serving psychiatrist at the Crichton, was involved in its first use in the 1950s and went on to lead services for a number of years until his retirement.

Clinical Research within the Crichton continued to have an international impact laterally lead by Professor Robin McCreadie whose *Nithsdale Schizophrenia Surveys* significantly contributed to the greater understanding of major mental illness.

The decline in the population at Crichton Royal Hospital coincided with more effective treatments and the service went on to develop appropriate rehabilitation and community facilities. It was at the forefront of developing old age psychiatry and Dr Stirling had been one of the first psychiatrists to work within prisons.

The opening of Midpark Hospital was therefore a further example of innovation and commitment to improved services on the Crichton site, and beyond.

Distinctive and Innovative: a Brief History of Psychology at the Crichton **Ana Sim (Consultant Clinical Psychologist)**

The Directors of the Crichton approved of forming a Department of Psychological Research in 1943 and John Carlyle Raven was appointed as its first Director. The permanent staffing of the department was agreed in 1946, whereupon three Psychologists and their assorted associates pursued ongoing research into the nature of intellectual ability and its measurement, the outcomes from which underpin our understanding of 'IQ' and measurement methods to the present day.

With the advent of the NHS in 1948, Raven was compelled to progress the clinical applicability of his research and the first psychology hospital, out-patient and 'Child Guidance' clinics ran in 1949. The clinical referral rate has accrued significantly in the last seventy years, as has the development of services in response.

John Raven published and spoke widely about his research into intellectual ability and its variation, as did the second Director, Jim Drewery, about his specialist area of work with people with addictions which turned assumptions about the treatment of people with alcoholism on their heads.

The third Director, Dr Miller Mair, was attracted to Dumfries from the traditional home of UK behaviourism at the Maudsley in London to pursue what was later termed a 'rearguard action' against hard scientific 'dogma' in Clinical Psychology from his attic office in Johnston House. Miller in turn connected the Crichton with leading thinkers in the humanities from across the globe and contributed significantly to the maturing of the discipline while also overseeing a significant expansion in the size and scope of the Psychology department at the Crichton.

Recent directors have continued to nurture advances in the clinical service in response to ever-growing clinical demand. They now operate along with a complement of around fifty staff across a range of specialisms and trainees from university training courses. Modern technology and multi-media have facilitated ongoing links with the centres of research and higher education as well as enabling daily collaboration with distant colleagues and roles on steering groups which shape the nature of Clinical Psychology across the country.

Nursing at the Crichton

Dr Shirley Turberville (Senior Lecturer in Nursing and Midwifery, UWS)

A brief examination of the history of nurse education and nurse regulation related to Dumfries and Galloway and the Crichton.

Dr W.A.F. Browne, the very first physician at the Crichton Institution in 1839, stated that 'moral treatment' should be provided and this was described as 'kindness and occupation'. These ideas were very different and forward thinking at this time and indeed still have great resonance with the care that is advocated today. Dr Browne, at the new Crichton Institution, found that the creation of the ideal asylum needed suitable staff. Browne recognised that staff in closest contact with patients needed to be better informed about patient care in order to be able to offer the best support possible. In 1854, some six years before Florence Nightingale set up a Nursing School, he began a course of 30 weekly lectures about mental illness and treatment to officers and male and female attendants at the Crichton (Williams 1996).

Reviewing the names given to those who provided care for patients with mental illness is in itself telling in relation to history and attitudes. Here are some of the titles: Keeper, Attendant, Officers, Mental Nurse, Psychiatric Nurse and, today, Mental Health Nurse. The 1919 Nurses Act established the first professional register for nurses and the General Nursing and Midwifery Councils (GNC) were formed. Schools of nursing and midwifery were still attached to local hospitals and respective Boards of Management but training did become more standardised. Scotland had a separate GNC that was in place until 1983 when the Councils were centralised for the UK. In 1923 the General Nursing Council recognised the title of Mental Nurse as a supplementary nurse registration. The Crichton Royal Hospital provided a School of Nursing until 1971 when it was joined with the School of Nursing at the Dumfries and Galloway Royal Infirmary and from 1948 they would both have been under the newly formed NHS.

Today nurse education takes place within higher education and at UWS Mental Health and Adult nurses are educated to degree level on the Crichton Campus. Fittingly this takes place predominantly within Browne House building, named after Dr W.A.F. Browne. The three-year education programme consists of 50% of time in practice working with nurse mentors and 50% in theory. Partnership working with NHS and other placement providers is key. The student nurses do appreciate and have a sense of the history of the buildings they are taught in and have spoken of valuing the fact that care has been provided within the same walls over time.

Reference

Williams M (1996) *History of Crichton Royal Hospital 1839-1989*, Dumfries and Galloway Health Board, Solway Offset.

The Crichton and the NHS

Michael Cook (former General Manager, D&G Health Board)

The Crichton Royal was the most prestigious mental hospital in the UK which attracted the most outstanding psychiatrists from this country and abroad. It treated patients, too, from all

over the UK and its private wing, famous for its sumptuous furnishings and facilities, also attracted the rich and famous.

The NHS, as is well known, started seventy years ago and was very unpopular with most of the medical profession here as elsewhere.

Despite that unpopularity with the NHS, Dumfries has always had a very good reputation for its medical services, dating back to the early 1800s, and the Crichton Royal was pre-eminent as a centre of excellence, being mentioned in the British Medical Journal in an article about Dumfries and Galloway called *Where the NHS Works Well*.

One of the biggest changes to the delivery of health services since the beginning of the NHS in 1948 was the setting-up of local health boards in 1974. From that date the national NHS resources were allocated to each health board according to its local population and all planning and delivery was delegated to local management. They had to make the best use of local resources for local services.

That caused a problem for the Crichton Royal because, due to advances in drug treatment, its patients had fallen from more than 1000 to 200 with the consequent fall in staffing requirements. The era of the big asylums was over.

The Dumfries and Galloway Health Board wanted to find a use for this wonderful asset. It approached universities. It tried to develop a science park, all to no avail.

Then it produced a business plan to develop the best head injury centre in the world, in conjunction with Edinburgh University, based on the Crichton campus. It got the guarantee of patient numbers from every health board in Scotland and the north of England. It raised £11 million and it got the support of the then Health Minister. It was, however, the first and biggest project of its type in the UK and the Chief Executive of the NHS in Scotland was concerned and killed the project. What a lost opportunity for Dumfries!

Finally this conference is taking place in Easterbrook Hall, magnificently refurbished series of halls on the Crichton site. The opulence of this building is due to the work of the staff of Crichton Royal and the money of the Crown Office.

As a result of the tragedy of the Lockerbie disaster in December 1988 it was decided to hold the Fatal Accident Enquiry in South West Scotland and the best venue for the lawyers, security services, witnesses, world's press, families and the public was this building which was completely renovated by our local staff. What an asset they created!

The Architecture of the Crichton **Martin Robertson (National Chairman, The Architectural Heritage Society of Scotland)**

The Crichton, formerly Crichton Royal Hospital, is one of Scotland's best preserved large hospitals and asylums. Built on an extremely fine site over a hundred-year period from the 1840s it has a consistent character and quality to its buildings which it is difficult to match elsewhere. The site and its buildings divide fairly neatly into three periods of construction,

each driven forward by a different important medical director and each using a significant main architect to achieve their vision.

The first period of building followed the purchase by Elizabeth Crichton in 1834 of the small Mountainhall estate to the south-east of Dumfries. William Burn, having recently built the Asylum in Perth (1822–7) and made additions and alterations to the Dundee Asylum (1830), was commissioned to design an asylum with a budget of £100,000. As with many of Burn's designs it proved to be far beyond what the budget could stand and only half of the projected building was opened in 1839. This was to be a private charitable asylum as they mostly were before the Lunacy (Scotland) Act 1857, which required all districts to provide an Asylum for pauper patients. Surprisingly the Crichton already had the Southern Counties Asylum built in 1848–9. Meanwhile the first building, Crichton Hall, was extended in 1867 by W.B. Moffat, Burn having retired from practice. These works were overseen by the Medical Director Dr William Browne.

The second period of development, overseen by the Physician Superintendent Dr James Rutherford, with buildings designed mainly by the Edinburgh architect Sydney Mitchell, was brought about both by a need to house a greater number of patients and by new ideas for treatments being developed in Europe. Rutherford and Mitchell's first collaboration, however, was the Crichton Memorial Church (1890–7) which was meant to commemorate the fiftieth anniversary of the opening of the Institution, the conspicuous expenditure for this demonstrating a clear priority of purpose. Rutherford and Mitchell toured Germany together in 1897, resulting in the series of detached 'Colony' blocks, each for a specific group of patients, which were built on another extension of parkland to the south-east, and it is these buildings that chiefly characterise the part of the site now used by the Business Park and the Universities.

The third period of development, which infilled empty sites within the estate, but did not involve any extension of the Crichton site, was in the 1920s and 30s and was overseen by the Medical Superintendent, Dr Easterbrook, who mainly used the architect James Flett as well as contributing to the designs himself. By 1938 the Crichton Royal had become a largely self-sufficient community with its own farm, power station, water supply, gardens, sports facilities and an entertainment and hydrotherapy complex. This was handed over to the NHS in 1948 and survives almost intact today with some buildings having been altered for new uses but only two noteworthy demolitions, the Southern Counties Asylum which stood where the Hospice now is until 1924 and the main boiler house which was on the site of the green hotel.

The Crichton Digital Archive

Graham Roberts (Archivist, Dumfries and Galloway Council)

The Crichton digitisation project had its genesis in the pickle in which the Archive service in Dumfries and Galloway found itself in 2008. Without an archivist or adequate storage, and with the imminent arrival of the extensive Dumfries and Galloway Health Board Archive, action was needed to avoid a crisis in archival management. This paper seeks to show why, as part of a response to these pressures on the service, the digitisation project was undertaken, how it was carried out, and to what extent it has been a success.

A brief summary of the content and significance of the Crichton Archive will preface a description of the project's inception and funding. The Wellcome Trust funded both the digitisation project and the preceding cataloguing project. The application process and the role of the funder in influencing the shape and direction of the project will be discussed, as will the logistical and practical issues inherent in such activities. The management of a comparatively large project by a small service, and the indexing work carried out by volunteers are elements of this. Specifically, and as part of the agreement with the Wellcome, the Archive service worked in partnership with Glasgow University and all digitisation work was out-sourced to their Photographic Unit.

The 4-year digitisation project was completed late in 2017, and the Crichton Digital Archive was launched in November of that year. A guide to the use of the Archive will be given including a sample search. An overview of researchers' use of the Digital Archive and the impact on the usage of physical records will follow, and the paper will conclude with an assessment of the strengths and shortcomings of the end result and of possibilities for the future.

The Crichton Farm

Prof. David Roberts (Professor of Dairy Farming Systems, SRUC)

Introduction

The Crichton Royal Farm was formed between 1867 and 1895 by the purchasing of land adjoining the Crichton Royal Hospital.

Before Crichton Royal Hospital

Rosehall

There is a memorial stone at Crichton to Sarah Lowthian. Richard Lowthian, a merchant and Jacobite sympathiser who in addition to owing Rosehall owned a large two story townhouse on the High Street, later the Commercial Hotel, then the County Hotel, now Waterstones.

Brownhall

The Knights of St John owned this land which was known as Spitalfield. In 1549 John McBriar, Provost of Dumfries, obtained an accession of land. This land was subsequently bought by Mr John Brown, Merchant of Liverpool, who changed the name to Brownhall.

Waterloo Merse

This land is below sea level with the River Nith behind an embankment. The course of the river was changed in 1811 to improve navigation to Kingholm and Dumfries.

Netherwood

The first reference to Netherwood is in 1345 when they are granted to Fergus, son of Mathew, in a charter from David II. In 1453 they are granted to Robert McBriar and stayed in the McBriar family until the 18th Century. In 1807 Netherwood was for sale at public rroup in the Royal Exchange Coffee House, Edinburgh.

Hannahfield

The name derives from the Hannah family. There is a large gravestone in St Michaels erected by John Hannah of Hannahfield.

Crichton Royal Hospital Farm

The farm steading was completed in 1893 to provide food for the hospital and work for patients. The farm was at the forefront of many new farming developments. From 1900 the dairy herd was TB (bovine tuberculosis) tested with any reactors 'eliminated', and by 1932 the herd was declared TB Free. Compulsory testing for TB was not introduced until 1950s.

The meteorological station was established in 1859 and weather data is still recorded at Crichton. A milking machine was purchased in 1907, this equipment being purchased from J&R Wallace, Castle Douglas, the first company in the world to produce a successful pulsating milking machine.

Tractors were first used on the farm in 1918, by which time there was 209 acres of cereals. In 1925 silage was being made whilst most farms continued to have hay as the main winter feed up until the 1960s.

The farm undertook a number of interesting experiments including work on:

- Ventilation
- Concentrate feeds
- Crossbreeding cattle
- Potato breeding

Dairy Research Centre

Since 1976 the tenancy of the farm has been held by Scotland's Rural College (SRUC).

Experimental work has included:

- Systems based on clover
- Dairy cow nutrition
- Growing of forage crops.

In 2002 the College moved the Langhill herd to Crichton. This herd has the longest farm animal breeding project in the world. Many of the research projects are now in collaboration with universities in the UK and abroad and recent work has included:

- Development of genetic indices
- Soil compaction
- Reducing agricultural environmental impact
- Reducing lameness
- Animal behaviour and welfare

SRUC also undertakes a wide range of applied demonstrations and has an extensive schools liaison programme run in conjunction with RHET (Royal Highland Educational Trust).

The Crichton: Present and Future

Prof. David Clark (School of Interdisciplinary Studies, University of Glasgow)

Dame Barbara Kelly, FRSE (Crichton Campus Leadership Group)

Gwilym Gibbons (CEO, The Crichton Trust)

Gwilym Gibbons — The Crichton: a world destination of choice to live, work, study and play

How we work, study, play and live is changing fast. We are entering the fourth industrial revolution (Industry 4.0). The Crichton was born in the middle of the first 1.0, characterised by mechanisation and the invention of steam power. The Estate has lived through Industry 2.0 (mass production, the arrival of electricity) and Industry 3.0 (automation and the entry of computers and electronics). We now live in a world of 4.0 including Embedded Intelligence, Artificial Intelligence and the Internet of Things.

A fundamental shift is taking place in how we relate to each other, with what we do and where we work. The acceleration of innovation and the velocity of disruption is hard to comprehend. What we know, however, is that if The Crichton is a home for innovation and collaboration; agile, responsive and highly connected globally (we already have Gigabit Broadband), we have a chance to be a world contender. What makes The Crichton unique is that we have a compelling origin story and sense of place to share, one which our community can capitalise and build on, and one which creates distinctiveness in a world marketplace — we need to act globally and think locally.

That's where the 'place' that is The Crichton comes in. We have a place that is very special with lovely heritage buildings, gardens and an extraordinary backstory. Just like every comic book superhero has its origin story to explain his/her superpowers - we have ours. It is this story, encapsulated in the surroundings that we now enjoy, which makes The Crichton a powerful place that stands out in a global crowd, a place to work, play and study — a world destination of choice to Work Well. And what's more, we are a stones-throw away from some of the most stunning landscapes and seascapes in Scotland, yet within easy travelling distance of our major cities.

Today, and increasingly, people work digitally, flexibly and globally. They follow the waves, the snow and the sun. They choose to work in unusual places; places that can tell a story which they can share, be part of and celebrate. People no longer look for 'space' to work but a 'place' to work and preferably within a community which provides an opportunity for collaboration, knowledge exchange and to some extent communion.

So, our challenge, as the custodians of the Crichton Estate, is to adapt to this new exciting age: to develop simple options for individuals and businesses to touch down here, make The Crichton their base for whatever timeframe they need, and help them capitalise on the intangible asset that is our sense of place. We need flexible 'places' for work and collaboration with simple responsive 'pay as you go' or membership overhead cost structures. We need to provide lovely 'places' to work and study and to help the whole Crichton community promote, celebrate and be part of the story and history that is The Crichton estate.

Prof. David Clark (School of Interdisciplinary Studies, University of Glasgow)

I shall reflect on the exciting developments in the work of the University of Glasgow at the Crichton, particularly over the last 10 years. I will examine how the University has been able increasingly to match its academic offering at Crichton to the setting in which it is located. This has led to successful undergraduate programmes in Primary Education, Environmental Science, and Health and Social Policy. We also have postgraduate taught degrees in tourism (with an major new Erasmus Mundus initiative about to begin), as well as education and the science and humanities of the environment. Our two key areas of research strength are environmental science and end of life studies. The latter is my own field of expertise and I will describe the work of my Wellcome Trust funded team and its global programme of work. I will conclude with some exciting new initiatives exploring the potential for a 'care campus' at Crichton, in which I am engaged with a wide range of partners based on the Crichton itself, and further afield.

Dame Barbara Kelly, FRSE (Crichton Campus Leadership Group)

As we reach the end of the story celebrating the history of the Crichton, I will ask the question: Where next? We must learn from the events of the last 150 years and list what has been achieved so far but given the huge changes which have taken place since 1995 we must identify the opportunities and actions required to sustainably develop the place as a world-class site in the present conditions.

I will look at the work of the Crichton Foundation; explain the role of the Crichton Campus Leadership Group and consider the impact of the South of Scotland Economic Partnership and the Borderlands Initiative; ask how we work to help implement the changes in regional primary and secondary school provision in order to give our young people the best possible education and training opportunities and how we grow the FE and HE opportunities to attract not only local youngsters but also national and international students; and how we engage with the business community, local and national, to tackle the skills gaps ... and continue to deliver Elizabeth Crichton's visionary legacy.