MSc Occupational Therapy

OT6054: Occupational Therapy Project 4

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Title: The Development of Occupational Therapy in Grangegorman Psychiatric Hospital, Dublin: 1934 – 1954

Abstract

Background: Reflecting back on the history of a profession helps to shape its future practice (Mayer 2000). Occupational therapy has its origins in moral treatment and from the beginning of its profession it played a role in psychiatric hospital settings (Peloquin 1989). This study explored the development occupational therapy in Grangegorman psychiatric hospital from 1934 to 1954.

Method: Historical documentary methods were used to analyse the primary sources of Grangegorman hospital archives, governmental documents and newspaper archives.

Results: A chronological timeline of key events in the development of occupational therapy is presented. Thematic analysis revealed three key themes; a) hospital, State and international influences, b) the role of key nursing staff in providing occupational therapy services and c) challenges of limited resources and conflicting rationales.

Conclusion: Key events highlight influences from Europe, Britain and America in the initial establishment of occupational therapy in Grangegorman. Occupational therapy centred on handicraft and productivity based activities and appeared to be a valued discipline in the hospital. The role of specially trained nursing staff in providing occupational therapy in Grangegorman and their key roles in the establishment of the Irish Occupational Therapy Association, throws light on the early/pre-professional era of occupational therapy practice in Ireland.

Implications for Practice: This study adds to the unfolding history of occupational therapy in Ireland and reinforces the importance of examining the profession’s history to help provide new perspectives on its current day practice.
Introduction

Reflecting on the history of a profession contextualises its contemporary practice and aids its continuing development (Higgs et al. 2004). Occupational therapy is a relatively young profession and its history has been well documented in countries such as the United States (Quiroga 1995), Canada (Friedland 2012) and the U.K. (Wilcock 2002). This study is part of a larger research project in the University of Limerick researching the history of occupational therapy’s development in Ireland (Pettigrew et al. 2016). Specifically, this study explores the development of occupational therapy in Grangegorman, historically Ireland’s largest public psychiatric hospital (O’Brien 2013).

Literature Review

Occupational therapy has its origins in the moral treatment movement (Peloquin 1989). Although the movement declined in the latter half of the 19th century, its emphasis on occupations in promoting patients’ wellbeing influenced the principles of occupational therapy, formally established in the United States in 1917 (Peloquin 1991). Psychiatrist David Henderson introduced occupational therapy at Gartnavel Royal Hospital, Glasgow in 1919 (Wilcock 2002). A study tour by the Royal-Medico-Psychological Association (RMPA) to Dutch mental health hospitals in 1928 influenced the more widespread introduction of occupational therapy, as organised by specially trained nurses, throughout psychiatric hospitals in Britain (O’Sullivan 1955). The establishment of Dorset House School of Occupational Therapy in 1930 by Elizabeth Casson marked the beginning of the discipline’s professionalisation in Britain (Hall 2016).

At present, there is little published research on occupational therapy’s origins in mental health care within Ireland (for exception see Prendiville and Pettigrew 2015). Evidence from print media archives indicate that the term ‘occupational therapy’ was used from 1930 onwards (Dunne et al. 2013). Two key figures people in the establishment of occupational therapy in mental health hospitals during the 1930s were Dr. Eamon O’Sullivan, who established an occupational therapy department in St. Finan’s Hospital Killarney (Pettigrew et al. 2013), and Dr. Ada English, who developed occupational therapy in Ballinasloe District Asylum (Davoren et al. 2011).
Grangegorman Hospital

Joseph Reynold’s (1992) historical account of Grangegorman contains several brief mentions of occupational therapy from 1934 onwards. The Richmond Asylum was the first public psychiatric asylum in Ireland, opening in Dublin in 1815 (Fuller Torrey and Miller 2003). In the mid-1890s an extension of the asylum was built in Portrane, North Dublin (Kelly 2007). A name change to Grangegorman Mental Hospital occurred in 1921 and in line with psychiatric institutions countrywide, its numbers increased drastically with a total population of over 3,000 patients during the 1930s (Reynolds 1992). In 1930 Grangegorman was under the charge of Resident Medical Superintendent (RMS) Dr. John O’Conor Donelan (Reynolds 1992). The daily care of the patients was overseen by nursing staff who were required to have undergone three years training (Brennan 2014). Hospital inspection reports highlight recreational activities such as cinema performances, dances, outdoor team sports and productive activities such as laundry, kitchen and farm-work (Inspector of Mental Hospitals 1930 - 1933).

Its closure in 2013 and a general move to uncover Ireland’s institutional history, has prompted recent interest in Grangegorman from media and artistic disciplines (Behind the Walls 2011; Ghosts of Grangegorman 2015). Kelly’s 2007 and 2015 studies of the hospital highlight the richness of Grangegorman’s archival data. This study aimed to use archival documents to explore how the practice of occupational therapy developed in Grangegorman psychiatric hospital between the years 1934 and 1954. Specifically, it aimed to map out the key events in occupational therapy’s development, identify the key people involved and the key interventions used. The mid 1950s marked the peak of institutionalisation in Ireland (Walsh 1968) and a shift in the occupational therapy paradigm (Kielhofner 2009), suggesting this subsequent period be examined in a separate study.

Method

In line with similar historical studies (Sedgwick et al. 2007; Prendiville and Pettigrew 2015), historical documentary methods were used to analyse the documents in this study. Although the critical theory paradigm can also provide useful perspectives on history (Dunne et al. 2015), this study used a social constructivist paradigm with an interpretivist approach. This emphasised the inclusion of different sources to capture multiple views and aimed to understand the authors’ written communication within its historical context (Holstein and Gubrium 2011).
Data Collection

Primary source data creates original perspectives on past events (McDowell 2002), helps portray how situations evolve over time and provides access to otherwise inaccessible information (Cohen et al. 2007). For these reasons the data was comprised of primary source documents from the 1934 to 1954 time period, as outlined in Table 1.

Table 1. Documentary Sources

<table>
<thead>
<tr>
<th>Name of Source</th>
<th>Location of Source</th>
<th>Date of Source</th>
<th>Author of Source</th>
<th>Description of Source</th>
</tr>
</thead>
</table>
| Grangegorman Mental Hospital Committee Minutes | • National Archives of Ireland (1934, 1935 and 1936 Committee Minutes)  
• Lenus: The Irish Health Repository [online] | 1934, 1935 and 1936 (Extracts only)  
• 1946, 1948, 1949, 1952, 1953, 1954 (Full Committee Minutes) | Hospital Committee Board members, which also included the RMS Chief Clerk and Dublin Assistant City and County Manager | Hospital Committee Board Meeting Minutes and Visiting Committee Reports |
| The Boroughs of Mental Hospitals and Miscellaneous Circulars | • The National Archives of Ireland | 1934 to 1946 | Department of Local Government and Public Health | An index of reports from all psychiatric hospitals in Ireland |
| Inspector of Mental Hospital Reports | • Lenus: The Irish Health Repository [online] | 1934 to 1954 | Inspector of Mental Hospitals, Ireland | Annual reports from Inspector of Mental Hospital |
| Department of Foreign Affairs Documents, Series 31, Health Matters | • The National Archives of Ireland | 1934 | • Grangegorman Chief Clerk  
• Secretaries from Irish Governmental Departments  
• Acting Consul General for the Netherlands | Correspondence between Grangegorman and Governmental departments organising logistics of 1934 study tour |
| Occupational Therapy Notes: London Conference on Occupational Therapy | Occupational Therapy and Rehabilitation, 13(5), 351-352 | 1934 | Eleanor Clarke Slagle | Notes on London Conference of Occupational Therapy, July 1934 |
| Irish Newspaper Archives | • ProQuest database [online]  
• Irish Newspaper Archive database [online] | 1934 to 1954 | • Irish Independent  
• Irish Press  
• Irish Times | Newspaper reports relating to occupational therapy in Grangegorman |
Quality of Historical Documents

The four interdependent criteria of authenticity, credibility, representativeness and meaning were used to assess the quality of the archival documents (Scott 1990). Regarding authenticity, the data sources examined included published official governmental reports, hospital archives and newspapers archives - all public documents lending strong support to their genuineness (Scott 1990).

Credibility involves taking the standpoint of the author to assess if what is documented is sincere and accurate (Scott 1990). The Grangegorman Committee Minutes consisted of public figures who were mostly Dublin County or Dublin City Councillors (Reynolds 1992). These figures were involved with the financial management of the hospital and also patient welfare, through regular Visiting Committee inspections. The Inspectors of Mental Hospitals were appointed on a statutory basis and their annual reports provide a more general overview of hospital proceedings (Brennan 2014). It has been argued that the Inspectors of Mental Hospitals at times felt under pressure to present a misleading portrayal of law and order (Prior 2004). These considerations were kept to the fore, and each archival document, including the newspaper reports, was scrutinised with a degree of scepticism (Prendiville and Pettigrew 2015).

An inevitable limitation to the representativeness of this study was that not all the Grangegorman Committee Minutes were available for the 20 years researched. To enhance representativeness, multiple primary data sources were used to triangulate the data for accuracy and minimise potential distortion from single data sources (Krefting 1991). The meaning of the documents was approached considering the perspectives of the authors and their intended readers (Payne and Payne 2004). Specific uncertainties with handwriting legibility and document terminology were cross-checked with the Senior Archivist of the National Archives of Ireland. Reflexivity was addressed by ongoing critical reflection through a reflective journal (Berger 2013), considering potential bias due to the stance of the author as an occupational therapy student.

Analysis

Both chronological and thematic analysis were used in line with McDowell’s (2002) recommendation that using both methods can help contextualise snapshots of history. Similar to Sedgwick et al.’s (2007) historical review of occupational therapy development in Canada, archival material was organised chronologically and a timeline chart was used to map out key
events. Braun and Clarke’s (2006) six step guide for thematic analysis was employed to identify, analyse and report patterns within the archival documents. Codes were generated from all archival data sourced, using an inductive approach (Braun and Clarke 2006). These were collated into potential themes which, following ongoing review and revision, were refined into the three themes discussed below.

**Ethical Considerations**

The data sources used were publicly available documents, meaning that it was not necessary to obtain consent for the use of names of the official representatives and staff identified. Twelve years of Grangegorman Committee Minutes were not accessible due to ethical restrictions imposed by the Health Service Executive (HSE). Following requests to the HSE Mental Health Administration, small excerpts of the 1934 to 1936 Committee Minutes were made available with the omission of any identifiers. All data was treated with respect and sensitivity (Wiener and Gilliland 2011). Consideration was given that the documents indirectly concerned the care of vulnerable people and these people, along with the people named in the documents, may have living relatives (Lusk 1997).

**Results**

**Chronological Analysis**

The timeline in Table 2 presents a general narrative of the first 20 years of occupational therapy in Grangegorman. The first evident key event in Grangegorman’s development of occupational therapy was RMS, Dr. O’Conor Donelan’s attendance at the London Conference on Occupational Therapy in July 1934 where key speakers included Eleanor Clarke Slagle and Elizabeth Casson (Clarke Slagle 1934; O’Conor Donelan 1934). In a report, Dr. O’Conor Donelan details the “interesting lecture” (1934, p. 589) by Eleanor Clarke Slagle who spoke of the benefits of occupational therapy in mental health institutions. This report was forwarded onto the Grangegorman special sub-committee whom, as outlined in Department of Foreign Affairs documents (1934) and newspaper reports (Irish Press 1934; Irish Independent 1934), carried out an inspection tour of psychiatric hospitals in Britain, the Netherlands and Belgium. Hospitals which impressed the committee with their running of occupational therapy included Santpoort hospital in the Netherlands and Cardiff Mental Hospital (O’Conor Donelan 1934; Reynolds 1992).
Nurse Mary Fox and Attendant James H. Lea were sent from Grangegorman to Cardiff Mental Hospital for a six month training period in occupational therapy in March 1935, followed by two more nurses, Francis Norton and Mary Bergin in July (Grangegorman Committee Minutes 1935). After an initial probation period following their return, the four trained nursing staff were given permanent positions to provide occupational therapy in both Grangegorman and Portrane hospitals (Boroughs of Mental Hospitals 1936).

The continued development of occupational therapy under Chief RMS Professor John Dunne was praised by the Minister of Local Government and Public Health in August 1940 (Irish Times 1940). In 1946, an application scheme was drawn up for more suitable hospital provisions (O’Mahony 1946). From this, the Minister of Health approved a grant for additional occupational therapy accommodation in March 1949 (Grangegorman Committee Minutes 1949). In July 1949, Professor Dunne, recommended that the Hospital Board undertake the training of outside students in the occupational therapy department in Grangegorman. He argued this would help maintain the hospital’s high standards of care and “benefit the country generally” (Grangegorman Committee Minutes 1949, p. 185). Although this proposal was submitted to the Minister for Health, there were no further references in subsequent Grangegorman Committee Minutes.

In March 1951, the Irish Occupational Therapy Association (IOTA) was founded by Edward Fanning and notable Grangegorman occupational therapy staff (Fanning 1951; Irish Press 1952). A letter from Fanning to the Irish Times in June 1951 (p. 3), detailed how a late invite to the Congress of the British Association of Occupational Therapists resulted in the inability of the IOTA to attend the Congress, with the exception of one its members who attended as a member of the British Association. A newspaper report of an IOTA meeting held in Grangegorman hospital on 11th March 1952, detailed that “plans for a four-year course in occupational therapy and an officially recognised diploma for successful students were discussed” (Irish Press 1952, p.7). In 1953, the IOTA organised an exhibition in the Mansion House of patients’ work from occupational therapy departments in local hospitals including Grangegorman hospital (Irish Times 1953).
<table>
<thead>
<tr>
<th>Year</th>
<th>Event</th>
</tr>
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<tbody>
<tr>
<td>1934</td>
<td>July: RMS Dr. John O’Conor Donelan attends a lecture by Eleanor Clarke Slagle at the London Conference on Occupational Therapy, organised by the National Council for Mental Hygiene. &lt;br&gt; <strong>August – November:</strong> A special sub-committee is established by Grangegorman Hospital Committee Board to visit psychiatric hospitals and centres in England, Scotland, Wales, the Netherlands and Belgium.  &lt;br&gt; <strong>December:</strong> The RMS Dr. O’Conor Donelan writes to Dr. McCowan, Medical Superintendent at Cardiff Mental Hospital, asking if nursing staff can be sent over to train in occupational therapy.</td>
</tr>
<tr>
<td>1935</td>
<td>March: Grangegorman staff Nurse Mary Fox and Attendant James H. Lea begin a six month occupational therapy training course in Cardiff Mental Hospital.  &lt;br&gt; <strong>July:</strong> Dr. McCowan writes to Dr. O’Conor Donelan praising Nurse Fox and Attendant Lea’s progress. On the 24th July, two more nursing staff Attendant Francis Norton and Nurse Mary Bergin, travel over to Cardiff Mental Hospital for six months training in occupational therapy.  &lt;br&gt; <strong>October:</strong> Attendant Lea commences occupational therapy in Portrane with 12 to 15 male patients. In Grangegorman, an additional special nurse is appointed to help supervise the female occupational therapy department under Nurse Fox.</td>
</tr>
<tr>
<td>1936</td>
<td>January: Decision made by Grangegorman and Portrane Visiting Committee that items made in the occupational therapy departments not used by the hospital would be sold. Profits would to be given to the Hospital Canteen.  &lt;br&gt; <strong>February:</strong> Permanent appointment is made of 4 nursing staff to replace Fox, Lea, Bergin and Norton who are engaged full time in providing occupational therapy services.</td>
</tr>
<tr>
<td>1937</td>
<td>Proposals are made to expand Grangegorman’s female occupational therapy department.  &lt;br&gt; Two attendants and three nurses are named under the staff pay scale as occupational therapist officers and are given maximum rates of pay.</td>
</tr>
<tr>
<td>1938</td>
<td>Occupational therapy is now organised under the supervision of newly appointed Chief RMS, Professor John Dunne.  &lt;br&gt; A number of new looms are purchased for the occupational therapy department in Grangegorman.</td>
</tr>
<tr>
<td>1939</td>
<td>No mentions of occupational therapy in available archival data searched.</td>
</tr>
<tr>
<td>1940</td>
<td>Minister for Local Government and Public Health praises Grangegorman’s work in developing occupational therapy at opening of new nurses’ accommodation building.</td>
</tr>
<tr>
<td>1941</td>
<td>Inspector of Mental Hospital reports 28 female patients are engaged in occupational therapy in Portrane.</td>
</tr>
<tr>
<td>1942</td>
<td>Annual Inspector of Mental Hospital Report outlines that the number of patients employed in occupational therapy is restricted due to limited accommodation.</td>
</tr>
<tr>
<td>1943</td>
<td>Annual Inspector of Mental Hospital Report states that approximately 60 patients are engaged in Grangegorman hospital’s two female occupational therapy departments.</td>
</tr>
<tr>
<td>1944</td>
<td>Proposed pay increase of £10 per annum to “occupational therapist” Nurse C. Hughes.</td>
</tr>
<tr>
<td>1945</td>
<td>Praise given by Portrane Visiting Committee to the occupational therapy department where patients are making flower pot stands from milk powder tins.</td>
</tr>
<tr>
<td>1946</td>
<td>Scheme drawn up by Dublin Assistant and County Manager, to extend Grangegorman and Portrane hospital accommodation, including occupational therapy facilities.</td>
</tr>
<tr>
<td>1947</td>
<td>Reported shortage of raw materials in the occupational therapy department.</td>
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<tr>
<td>1948</td>
<td>Grangegorman Committee advised to enlist the help of the Red Cross organisation to source rug canvas material for the female occupational therapy department.  &lt;br&gt; Occupational therapy staff are approved a list of necessary articles of a total cost of £800 to £900.  &lt;br&gt; Individual tributes given by the Visiting Committees to Officer Hagen, John Buckley and Nurse Breslin for their work in the occupational therapy departments.</td>
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</table>
Emerging Themes from Thematic Analysis

1) Hospital, State and International Influences in the Development of Occupational Therapy

Thematic analysis pointed to three main influential bodies in Grangegorman’s development of occupational therapy – Grangegorman Hospital Committee and RMS, international influences and the Irish State Government. The investigation of occupational therapy was one of Grangegorman’s special sub-committee’s seven aims for their inspection tour of foreign hospitals (Murphy 1934). A central message from their tour was the need to develop occupational therapy in Grangegorman with “trained, experienced teachers aiming at the active employment of about 90 per cent of their patients” (Irish Independent 1934). The RMS’s subsequent letter of request to the Medical Superintendent of Cardiff Hospital, suggests he was eager to begin training staff in occupational therapy following the sub-committee tour (O’Conor Donelan 1935). The apparent investment of the RMS in occupational therapy services continued with the appointment of Professor Dunne. Along with recommending Grangegorman as a training centre, Professor Dunne approved the purchase of a “very extensive list” of supplies for the occupational therapy department at an estimated cost of £800 to £900 (Grangegorman Committee Minutes 1948, p. 111).

A notable finding to emerge was the State’s role in Grangegorman’s development of occupational therapy. Governmental correspondence from the Minister of Local Government
and Public Health, Seán T. O'Kelly and the Minister of External Affairs, Eamon de Valera, were required to organise the logistics of the 1934 tour (Department of Foreign Affairs 1934; Department of the Taoiseach 2013). The provision of the Minister of Health’s 1949 grant for additional occupational therapy accommodation was significant as it was one of only two proposals approved, in what was described as “the abandonment” of the original 1946 scheme for more suitable hospital provisions (Grangegorman Committee Minutes 1949, p. 129).

2) The Role of Key Nursing Staff in providing Occupational Therapy Services

An overview of the nursing staff referenced in their provision of occupational therapy is presented in Figure 1. It is important to note there may have been other nurses involved in occupational therapy services who were not named in the documents searched. Grangegorman’s establishment of occupational therapy centred on the four nursing staff, Fox, Lea, Norton and Bergin who underwent a special six month training course in Cardiff. By October 1935, Mary Fox was running the female occupational therapy department in Grangegorman while James Lea was running the male occupational therapy department in Portrane (Grangegorman Committee Minutes 1935). The original aim of the Hospital Committee was that both Grangegorman and Portrane would be equally catered for in terms of occupational services (Grangegorman Minutes 1935, p. 607), suggesting that Mary Bergin was thereafter appointed to Portrane’s female occupational therapy department and Francis Norton was appointed to Grangegorman’s male occupational therapy department.

The staff member mentioned most frequently in the Committee Minutes was John G. Buckley, appointed as an occupational therapy attendant in Portrane in July 1942 (Boroughs of Mental Hospitals 1942). John Buckley’s resourcefulness and dedication are highlighted in Figure 1. Praise from the Visiting Committees of the occupational therapy staff and their service was a pattern which emerged in the documents. Another notable finding was that several of the prominent occupational therapy nursing staff were also involved in the establishment and running of the IOTA. Mary Fox was the Association’s President, Officer J. Hagen the vice-chairman, Mary Breslin the secretary and John Buckley the Association’s treasurer (Irish Press 1952).
3) Challenges of Limited Resources and Conflicting Rationales

At a semantic level (Braun and Clarke 2006), one of main challenges posed in occupational therapy’s development was lack of hospital resources. There were limited numbers of patients accessing occupational therapy. The expression “wandering aimlessly” was used
several times by the Inspector of Mental Hospitals (1938; 1942; 1943) to describe the large number of patients who remained idle. In 1952 and 1954, it was reported by that occupational therapy was being carried out at ward level (Inspector of Mental Hospitals 1952; 1954), suggesting efforts to extend its services. Delays in supplies was another pattern which emerged, however this also inspired innovative thinking as highlighted by the Portrane Visiting Committee who “learned with interest” (1948a, p.214) that rubber from old tyres was used to repair rubber mats.

Table 3. Activities undertaken in the Occupational Therapy Departments 1935 - 1954

<table>
<thead>
<tr>
<th>Occupational Therapy Activities</th>
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</thead>
<tbody>
<tr>
<td>• Brush-making</td>
</tr>
<tr>
<td>• Making Flower Pots</td>
</tr>
<tr>
<td>• Fretwork</td>
</tr>
<tr>
<td>• Knitting</td>
</tr>
<tr>
<td>• Embroidering</td>
</tr>
<tr>
<td>• Picture Framing</td>
</tr>
<tr>
<td>• Rug-making</td>
</tr>
<tr>
<td>• Wire work</td>
</tr>
<tr>
<td>• Spinning</td>
</tr>
<tr>
<td>• Painting</td>
</tr>
<tr>
<td>• Mattress-Making</td>
</tr>
<tr>
<td>• Darning</td>
</tr>
<tr>
<td>• Rubber Mat-Making</td>
</tr>
<tr>
<td>• Book-binding</td>
</tr>
<tr>
<td>• Woodcrafts (e.g. making stools, tables)</td>
</tr>
<tr>
<td>• Making Trolleys</td>
</tr>
<tr>
<td>• Basket Weaving</td>
</tr>
<tr>
<td>• Cushion Making</td>
</tr>
<tr>
<td>• Weaving</td>
</tr>
</tbody>
</table>

From a latent approach, another main challenge was the conflicting rationales guiding the occupational therapy practice, with ongoing contradictions between the hospital viewing occupational therapy as therapeutic and as another form of hospital work. Table 3 illustrates the range of occupational therapy activities referenced. It is evident that some of the activities, e.g. mattress-making, were beneficial to the general running of the hospital. The perspective that occupational therapy was a form of work was also expressed by patients themselves. In 1948 a request was made by patients engaging in occupational therapy for cigarettes, their reasoning being that “other working patients get them” (Portrane Visiting Committee 1948b, p. 177).

In contrast, the therapeutic underpinning of the occupational therapy practice is illustrated throughout the inspection reports in references such as its “homely spirit” (Grangegorman Visiting Committee 1948a, p. 361). The positive benefit of occupational therapy on patients’ wellbeing is exemplified in the comment below.
“In the therapy room they seemed a happy and contented lot, and before I left one of the patients sang a song and a really good singer she was” (Portrane Visiting Committee 1946, p. 257).

There were suggestions of an increase of individual tasks in the occupational therapy departments in the 1950s, with the Portrane Visiting Committee observing patients “each at his own job” (1952, p. 1115), and reports of engagement in tasks such as making children’s felt toys (Grangegorman Visiting Committee 1952b). Mary Fox’s opinion in the Irish Independent (1953) is the only perspective from the nursing staff which emerged in this documentary analysis. She mentions occupational therapy’s aim of helping patients “to do work which was suitable for them and, where requested, to train them if possible in any occupation they would want” (Irish Independent 1953, p. 8).

Discussion

Historical research in occupational therapy is a systematic method for understanding the chronology, interrelationship and critical factors influencing historical occupational therapy events (Stein et al. 2013). This study maps the first twenty years of occupational therapy’s development in Grangegorman stemming from hospital, governmental and international influences, in an early/pre-professional era within an Irish institutional context. The original research aims identified will be discussed under the following headings below.

Situating Grangegorman’s Development of Occupational Therapy within its Historical Context

This study’s chronological analysis shows that Grangegorman’s introduction of occupational therapy, in many ways parallels the process of occupational therapy’s introduction in Cardiff Mental Hospital and several other British psychiatric hospitals, which also stemmed from a study tour of Dutch psychiatric centres (O’Sullivan 1955). Both tours were impressed with the occupational therapy in Santpoort hospital, which emphasised ward level activity and dedicated handicraft workshops (Evans 1929; Reynolds 1992). The handicrafts and utility activities, for the service of Grangegorman hospital, resemble occupational therapy activities in St. Finan’s Hospital, Killarney (Lane 2014) and similar British public psychiatric hospitals (McCrae and Nolan 2016). While Dr. O’Connor Donelan and Professor Dunne contributions may not have been as significant as St. Finan’s Resident Medical Superintendent Dr. Eamon O’Sullivan, documentary analysis nevertheless highlights their commitment to developing
occupational therapy in Grangegorman within the financial and institutional constraints of the time.

The practice of occupational therapy by specifically trained nurses, as shown in Grangegorman, was common in psychiatric hospitals in the beginning decades of occupational therapy’s professionalisation (Wilcock 2002). Hall (2016) highlights the better financial means of private hospitals to employ professionally qualified occupational therapists, which can be seen in the Irish context where the privately funded St. Patrick’s Hospital, Dublin sought employment of a professionally trained occupational therapist from 1946 onwards (Dunne et al. 2016).

The interface between professionally qualified and unqualified practitioners in the healthcare profession may lead to problematic negotiations of control (Alaszewski and Meltzer 1979). Although Mary Fox had undergone occupational therapy training in Cardiff and it is probable Grangegorman’s other IOTA members received training in Grangegorman hospital itself, these IOTA members did not have a “full Diploma” – the professional qualification required by the Association of Occupational Therapists (AOT), usually awarded following a three year study course (Wilcock 2002, p. 240). The presence of possible tension between the early/pre-professionally qualified IOTA and the AOT – whose members were professionally qualified occupational therapists from England, Wales and Northern Ireland (Wilcock 2002) – was alluded to in Fanning’s (1951) letter detailing the late invitation arrival in June 1951. The congress mentioned was likely the preliminary congress for the establishment of the World Federation of Occupational Therapists (WFOT) and it is notable that there were no Irish representatives at its inaugural congress the following year (WFOT 2011). This distinction between the professionally qualified bodies and the early/pre-professionally qualified IOTA also carried through to the 1965 establishment of the Association of Occupational Therapists of Ireland (AOTI) (Fleming 1986). Although the IOTA had initially aimed to develop a school for occupational therapy training (Irish Press 1951), they played no role in the formation of St Joseph’s College, Dún Laoghaire in 1963 (AOTI, 2015). While recognising the contribution of the IOTA to the development of occupational therapy in Ireland, it is evident that it would have been very difficult for an organisation of minimally trained members to take a lead role in the development of an educational institution aimed at educating professionally qualified therapists.
Occupational Therapy Practice in Grangegorman – Establishing the Therapy within the Occupation

This study highlights the valued contribution of the occupational therapy staff to Grangegorman and Portrane hospital. Mary Fox’s quote in the Irish Independent (1953) helps illustrate the rationale behind the hospitals’ occupational therapy practice. She highlights the importance of doing work suitable for the patient, suggesting a consideration of patients’ ability - a concept raised in Eleanor Clarke Slagle’s 1934 lecture. Her quote of providing training to patients “if possible in any occupation they would want” (Irish Independent 1953, p. 8), illustrates a provision of individual choice with consideration for pragmatic constraints. In line with this, evidence from the Committee Minutes from the late 1940s and early 1950s, illustrates more choice and individualising of patient activities in the occupational therapy departments.

Despite the therapeutic benefits, challenges were evident in Grangegorman’s development of occupational therapy, mainly being the large number of patients who remained unoccupied. Findings show the number of patients engaged in each occupational therapy department was most frequently between 15 and 30. The total population of Portrane and Grangegorman in the time period studied was over 3,000 (Reynolds 1992), signifying a deviation from the special sub-committee’s original aim of engaging about 90 per cent of its hospital patients (Irish Independent 1934). Similar to psychiatric hospitals in England (Hall 2016), there appears to have been challenges in both tailoring occupational therapy to the mass hospital population and catering for individual patients. Grangegorman’s organisation of occupational therapy at ward level in 1952 illustrated an effort to address this challenge.

Thematic analysis highlighted the task orientated focus of Grangegorman’s occupational therapy. Unlike similar American institutions (Quiroga 1995: Barker Schwartz 2003), there was little evidence to support other therapy goals such as vocational skills or habit-training to support the discharge of patients (Bing 1981). Findings from Schepet-Hughes’ 2001 anthropological study, suggest there was cultural resistance in Ireland to reintegrating people with mental health problems back into the community. The largely institutional society of Irish mental health services in this time period stemming from various social factors (Brennan 2014), helps contextualise the occupational therapy focus in Grangegorman, which drawing from Harvey-Krefting’s 1985 historical review, can be seen as providing purpose to patients’ lives within the hospital rather than necessarily preparing them for outside living.
Implications for Practice and Areas for Further Research

Along with other recent work (Prendiville and Pettigrew 2015; Dunne et al. 2016), this study adds to the unfolding history of occupational therapy in Ireland. Dr. O’Conor Donelan’s attendance at the 1934 London Conference of Occupational Therapy, where Eleanor Clarke Slagle and Elizabeth Casson were guest speakers, signifies the direct influence that English and American pioneering occupational therapy figures had on the development of occupational therapy in Ireland. This adds to knowledge of correspondence between the Irish and American occupational therapy disciplines, as evidenced in pioneering figure, William Rush Dunton’s foreword in Eamon O’Sullivan’s 1955 “Textbook of Occupational Therapy”. Data restrictions meant this study was unable to obtain further information enquiring whether other Irish figures were present at the 1934 conference. Further research is therefore required to investigate this and examine more generally the historical correspondence links between Irish and international occupational therapy disciplines.

This study adds to literature which highlight the significant role psychiatric nurses played in delivering occupational therapy services in its early/pre-professional era (Wilcock 2002; Webb 2002; Hall 2016). Reviewing later Committee Minutes, a reference was found for the application of “a Trained Occupational Therapist” in Grangegorman 1960 (p. 5). Further thorough research is required however, to continue the process of mapping the development of occupational therapy in Grangegorman (becoming St. Brendan’s Hospital in 1958) from 1955 onwards.

Caden’s (2014) oral history interview with Donal Kelly (born 1928) who was appointed as a non-professionally qualified occupational therapist in Castlerea sanatorium in 1952, highlights his mutually beneficial relationship with professionally qualified occupational therapists. This was a theme also found in Alaszewski and Meltzer’s (1979) interview-based study which highlighted a symbiotic relationship based on an exchange of knowledge between professionally and non-professionally qualified occupational therapists. This current study makes tentative suggestions of a tension between the early/ pre-professionally qualified IOTA and the professionally qualified occupational therapy bodies however research is required to further explore this relationship.

This study also highlights the role of occupational therapy in an institutional culture, leading to a retrospective critical questioning of occupational deprivation. Archival newspapers highlight that Grangegorman represented a modern day treatment centre of its time (Irish
Times 1937; Irish Press 1940). Critically reflecting on this reminds us that as a profession we are shaped by our sociohistorical context (Molke 2009). The time lapse between the initial 1946 application for additional occupational therapy accommodation and its eventual construction in 1953 resonates with Governmental constraints on Irish health resources today. This study also draws parallels with contemporary issues of dividing clinical time between group and individual therapy and highlights the importance of role-emerging in developing the discipline of occupational therapy.

Limitations

The HSE ethical restrictions limiting access to several years of Committee Minutes mean there are inevitable gaps of knowledge in this study (Ahmed 2010). Critical reflection prompts consideration for reasons why some, but not all archival documents survived or were made accessible (Dunne et al. 2015). McDowell (2002) argues that historical documents may conceal as much as they reveal, prompting consideration that the documents analysed were mainly written by people in positions of managerial power. The limited evidence portraying the nursing staff’s point of view presented a challenge in determining how closely Grangegorman’s occupational therapy related to contemporary occupational therapy principles. Finally, an important consideration is the notable absence of patients’ experiences of occupational therapy. People’s experiences of psychiatric hospitals in the early to mid 20th century have often presented a bleak picture (Avis 1964; Grealy 2008). Given the client-centred core of occupational therapy (Rebeiro 2000), the perspectives of patients in Grangegorman would have contributed valuable information to this research.

Conclusion

This study mapped the first 20 years (1934 – 1954) of occupational therapy’s development in Grangegorman psychiatric hospital. Historical documentary research methods were used to analyse hospital archives, governmental documents and newspaper archives. Addressing specified research aims, key events highlight influences from Europe, Britain and America in the initial establishment of occupational therapy in Grangegorman in 1935. In line with contemporary psychiatric hospitals, the activities carried out in Grangegorman were mainly handicraft and productivity based. This study illustrates the role of specially trained nursing staff in the provision of occupational therapy in Grangegorman and their key roles in the establishment of the IOTA, throwing light on the early/pre-professional era of occupational
therapy practice in Ireland. Documentary analysis illustrates the therapeutic rationales underpinning the occupational therapy services yet also highlights discrepancies where occupational therapy was sometimes viewed as “work”. Differing to similar American occupational therapy settings which also focused on the rehabilitative aspect of activities (Quiroga 1995), emphasis in Grangegorman was mainly on task-based activities in the hospital.

This study adds to the unfolding history of occupational therapy in Ireland, illustrating the importance of examining the profession’s history to help provide new perspectives on its current day practice.
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