Institutions and places for 'excluded' groups of people

By Maggie Davidson

1. Introduction

This essay examines institutions and places for 'excluded' groups of people. People can be, or feel, excluded from mainstream society for many reasons including religious belief, ethnic or cultural origin etc.

Here I have focused on those classed as having a mental illness, or disability, or as criminal, vagrant or unemployed or feckless, and those with infectious diseases. The key places and buildings therefore include gaols, lock-ups, workhouses, isolation hospitals, pest houses and asylums.

Secondary historical sources relate how societies have viewed and responded to such groups and how this has changed from the early medieval period to the current day. However, these largely deal in generalities and represent an 'official' narrative written from the stance of those attempting to quarantine, cure, reform or punish these individuals.

Analysis of a specific local landscape over time offers the opportunity to examine how these places were created and influenced the development of towns and villages. It also allows us to assess how far these groups are visible in the archaeological and landscape record. Throughout, I have use contemporary terms such as 'mad', 'feeble minded', 'defective', 'vagrant' etc rather than the modern politically correct equivalents which I feel are essential to present the evidence and discuss the findings. I hope that this does not offend.

2. Description of the Area

2.1 Location and topography

The area selected for study is located in South Hertfordshire centred on St Albans and bounded by the River Ver to the west, River Colne to the east and River Lea to the north. The three rivers that bound the area are slow moving and meandering and have been considerably altered from medieval times by the construction of water mills, ponds, weirs, dams and water meadows.

More recently, a number of lakes have been formed as the result of gravel extraction and the creation of public parks. The majority of the area lies between about 80 and 130 metres above sea level. Overall, most of the area is gentling sloping (0-30%), although there are steeper slopes in places, most notably Shenley Ridge to the south east.

2.2 Geology soils and vegetation

The area lies on the edge of a former glaciated zone with evidence for three distinct glaciations. The second glaciation, the Gipping, produced a mass of chalky boulder clay which is evident to the East of St Albans (Hunn, 1994). The soils here consist of deeper sandy loams with some localised stony areas. In the river valleys, alluvium and gravel predominate and spread to varying extents.

The widest spreads are seen on the River Ver south of Redbourn and by the site of Roman Verulamium. The north western quadrant of the area is part of the Chilterns dip slope and is dominated by clay with flints with some pebbly clay and sand. The soil here is more acidic, heavy to work and poorly drained. Mineral resources consist mainly of sand and gravel and have been exploited mainly in the eastern part of the area. Chalk and clay have also been extracted throughout the historical period. However, the main products of the area were those derived from farming: corn, meat, leather, wool and timber.

2.3 Early occupation and settlement history

Niblett and Thompson (2005) provide a thorough and very readable account up to AD 1600. There is evidence for human activity from the lower Palaeolithic onwards with a number hand axes and both Mesolithic and Neolithic flint scatters. There are earthworks dating from the Neolithic and bronze age, but the majority date from the Iron Age and include an impressive array of ditches around the oppida at Verulamium and Wheathampstead and to the north of the current city.

The Roman town of Verulamium was the first major settlement on the main road from London to the north west (Watling Street). Medieval St Albans, located slightly north east of Verulamium, was a thriving and prosperous market town heavily reliant on the coaching trade (Smith and North,2003). However, in 1838, the new London to Birmingham railway was built bypassing St Albans. This had a huge impact on the coaching trade and community as a whole. Alty et al (1982) cite a newspaper cutting from 1842: 'Barnet, Redbourn and other towns on the route, that depend upon the traffic, are mere shadows of the past. Between the former and St Albans, grass to the width of two feet may be seen growing in the middle of the highway'.

It was not until the Midland Railway opened in 1866 that there was a direct route from London running north through St Albans. This railway revitalised the economy of the town, although some of the larger villages that were on the old road route and were bypassed by this railway, like Redbourn, took much longer to recover. It was probably an important factor in locating the Victorian prison and first Middlesex Asylum within this area and is largely responsible for its current status as a commuter town.

3. Methodology

The starting point for this study was Hertfordshire Historic Environment Record (HER) database, which yielded a list of 1279 items. (What is an 'item'?)As well as following these up and examining primary material where possible, I have made extensive use of other sources which have revealed additional sites and events not recorded on the HER; including evaluations of two asylum sites prior to their redevelopment.

Although most of the locations I have examined fall within the recent historical era, the evidence is patchy and not always reliable. Appendix 2 lists all of the locations that I have researched together with the type and quality of information available. Here I have just made some general observations.

Excavation and evaluation reports covering these locations are very limited and the focus has been on the prehistoric and Roman eras. The excavation at Napsbury in 1996 prior to demolition aimed to 'clarify levels of disturbance across the site derived from the construction of the hospital' that is that the hospital's standing buildings and record of its occupation were not 'archaeology'. Neither was trying to locate or confirm the deserted medieval village referred to in documentary sources. Other reports contain inaccuracies, for example the evaluation of part of Shenleybury states that the cottages adjacent to the farm were built for staff when they actually housed some less disturbed patients. I have visited a number of the sites and locations to carry out rough reconnaissance surveys which have been particularly valuable in appreciating issues of visibility and gradients. Although there are a number of standing buildings, these are not always easy to access. I had, for example, to arrange a special visit to HarperburyHospital. Many have been converted to other uses so the original internal plan is lost. Building plans have been tremendously useful but are difficult to track down and need to be considered alongside documentary sources about extensions and revisions and oral accounts of actual use.

I have also made use of oral history sources to ascertain different perspectives and gain insights - rather than as a source of additional 'facts'. As an experienced research interviewer I am very aware that the stories told depend on questions asked and the attitude and response of the interviewer. I have found a number of useful aerial photos from websites and the HER archive but have not had time to investigate satellite or other remote sensing data.

Working with maps has been a learning experience - attempting to get them to the same scale using photocopiers, tracing paper and scanned images has been very time-consuming and not 100% successful. However, I have really benefited from this experience and it has given me a real feel for the area and its geology and generated some new insights that I may not have obtained from manipulating digital data.

4. Findings - key locations over time

Before the late 19th century the different categories of persons and institutions were not well defined in Britain and provision for them varied considerably. There was little

distinction between hospital, pest house, gaol or workhouse and people with mental illness or learning disabilities could have ended up in any of these places or being cared for by family or boarded with local people.

I have therefore presented the evidence chronologically rather than by group with the periods defined by key legislation and events that shaped the nature and scope of provision for these excluded groups:

· Care in the community - before the Elizabethan poor laws of 1603

· Parish and private relief - between the old and 'new' poor laws (1603-1834)

· Total institutions - Victorian asylums, prisons and workhouses (1834-1913)

· Colonies - The Mental Defectives Act and villa asylums (1913-1939)

· War wounded and prisoners (1939-1945)

· Dismantling the asylums and colonies (1945-1996).

I have briefly described the key locations and buildings below within the contemporary political and ideological framework because this informs the later discussion on the reasons for selecting these places rather than others.

4.1 Care in the community - before the Elizabethan poor laws (1100-1603)

The earliest recorded institutions in my area were two leper houses associated with religious estates. Niblett and Thompson note that the first of these, St Julian's, was built around 1130 on Watling Street some 2 km from the market square for 'a number of needy people' that is it was not restricted to those with leprosy. A separate leper house for women, St Mary de Pre was built in 1194. This too was located on Watling street, this time to the north west of the town.

In 1344 St Julian's hospital was reconstituted by the Abbot of St Albans for five priests and, around the same time (1328) St Mary de Prae reverted to a Benedictine Nunnery. Both were dissolved and annexed to the Abbey in 1528. Both institutions are well documented with additional aerial photos of crop marks and evidence from excavations from building service trenches in 1939 and 1967 at St Mary de Prae.

Although the precise location of the leper hospitals is unclear, their location on the main road, sufficiently far out of town to avoid 'contagion' and with the River Ver separating them from the main town, are significant.

The dissolution of the monasteries and the 16th century agricultural enclosures swept many people from the land giving rise to fears of a tide of vagabonds. Concerns about political insurrection and that these rootless beggars would be a drain on the common

wealth led to a series of acts from the 1530s onwards that laid out extreme punishments for vagrancy. For example, the (swiftly repealed) 1547 Act imposed slavery as a punishment for failure to work. The 1536 'Tudor Poor Law' charged public officers of parishes, townships and boroughs with the duty to 'maintain the impotent poor'. Arrangements usually involved more or less informal arrangements involving church houses or boarding out with local people. This was essentially the forerunner of the 1601 Poor Law (enacted in 1603).

For the less deserving poor, persistent vagrants and criminals there were other solutions. Peters (1998) notes that in Anglo Saxon England, imprisonment was normally only used in some cases of witchcraft or theft and that the first institutions serving as 'prisons' from the 11th Century were probably disciplinary cells in monasteries. In 1166, Henry II issued the Assizes of Clarendon ordering that sheriffs should build jails in each county to hold the accused until they could be tried by itinerant Royal Justices. These gaols were rarely purpose-built and security tended to consist of chains and fetters rather than high walls and barred windows. The number of prisons increased rapidly after about 1270. By 1520 there were some 180 imprisonable offences; a significant number dealing with vagrancy, breaking the peace, infamy, illegal bearing of arms and 'moral offences'. In St Albans, the Liberty and the Borough both had their own courts and gaols. The Liberty Gaol was located in the Abbey Gatehouse, adjacent to St Albans Abbey and used as such from about 1539 until 1867. The original Borough Gaol was located in the old Town Hall in the main market place.

Society's treatment of the insane or feeble-minded in medieval and earlier times is conventionally seen as one of brutality, neglect or at best amused tolerance of the 'village idiot'. However, Philo (2004) emphasises that there were large variations - both in time and space - and identifies five key types of space. In this area, the contemporary leper houses and gaols probably provided some shelter, but there are no records to confirm this. There was also reputed to be a Holy Well located on the site of Holywell House (built later in the 18th century) that may have been a focus for healing.

4.2 Parish and private relief: between the old and new poor law (1603 -1834)

The enactment of the 'Elizabethan Poor Law' in 1603 formalised the duty to provide for the impotent poor. The later 1609 Act setting up Houses of Correction, later known as Bridewells, separated the deserving and undeserving poor. The St Albans Bridewell, serving both the Liberty and Borough, was located next to the Abbey gaol. Another central piece of legislation was the 1662 Act of Settlement whereby paupers and vagrants were returned to their home parish.

During this period a large number of parish workhouses were provided by building new, or acquiring existing, buildings. This was supplemented, sometimes replaced by, boarding out the paupers with other families. All of the parishes in this area had their own workhouse. Those that have been located were all sited very close to the parish church and generally away from commons and greens; although Harpenden is a notable exception to this. For the criminal and less deserving, the two gaols and the Bridewell

mentioned above were still in operation, although the borough gaol moved about 10 metres to the east when the new Town Hall, incorporating two cells, was built in 1831.

Punishment by transportation was used extensively, meaning that there was little need to expand gaols. St Albans was no exception to this with 10 out of the 18 cases coming before the Borough Sessions between Michelmas 1819 to Epiphany 1823 receiving a sentence of transportation (Alty et al, 1988).

In addition to the gaols, there were local parish lock-ups or 'cages' for the temporary storage of perpetrators pending transfer to the main gaols or courts, or simply to allow the drunk and disorderly to sober up. The HER records lock-ups in three parishes (Shenley, Harpenden and Wheathampstead) and there was certainly at least one more for St Peters, outside the church. It is likely that other more populous parishes like Redbourn, St Stephens, St Michaels and Sandridge also had lock-ups but there are no records to confirm this.

Prison reformers like Howard were critical of the disorder, failure to post rules and indiscriminate mixing of inhabitants (young people with hardened criminals, debtors with felons) in these gaols (McGowan,1998). It was not until 1823 that the sale of alcohol in prisons was prohibited. The key problem was the unregulated boundary between the prison and the community. The central part of St Albans in 1820 illustrated the close proximity of the gaols, especially the Borough gaol, to ale houses and the town centre. Transforming these into orderly, sober, disciplined and bounded places started with the Penitentiary Act of 1779 that emphasized the importance of solitary confinement, religious instruction, hard work, uniforms and coarse diet, but the St Albans gaols were not replaced by a new style prison until 1867.

Pest houses were an early and primitive form of isolation hospital in the 17th and 18th centuries to isolate those with infectious diseases, especially smallpox. Generally, only the most populous parishes had their own pest houses and these were normally leased (Smith, 1987). Smaller parishes would have rented property on an ad-hoc basis. Only four have been located in this area from the HER for St Stephens, Sandridge, Wheathampstead and Redbourn and their dates of operation are unclear.

Although the dispensary movement, that advocated the foundation of hospitals had started around 1714, there is no documentary or other evidence of a dispensary in St Albans until 1861. Four private asylums are documented in this area (Philo, 2004), the most famous being the 'College Insanorum' owned and run by Nathaniel Cotton where William Cowper was treated between 1763 and 1765. It was located on the corner of Dagnall Street, on the edge of the town centre. It is interesting to note its proximity to a number of non-denominational chapels and houses suggesting that this part of the town was the 'progressive' part.

In 1802 an asylum in St Albans was licensed for 11 patients and an asylum in St Stephens is recorded in the 1812 sessions record but their location is unknown. It may be possible to trace the names of their owners from property records. In 1834, another license was

granted for a house and buildings at Oyster Hills in the Parish of St Michaels. The precise location is unknown, but Oyster Hills on the 1897 map is marked adjacent to the Union workhouse.

4.3 Total institutions: Victorian asylums, prisons and workhouses (1834-1913)

The phrase 'total institutions' was first coined by Goffman (1972) to describe places like the large asylums and prisons which he characterized as 'a social hybrid, part residential community, part formal organisation' that were 'the forcing houses for changing persons'. And the Victorians did believe they could transform the mad and the bad by structured and restrictive regimes and architecture. Markus (1993), Taylor (2007) and Smith (2007) provide full accounts of the design principles and philosophy behind the new prisons, workhouses and asylums. These new places were no longer seen as a refuge by the desperate and destitute (McGowan, 1998 and Philo, 2004). The change is striking in St Albans. The Union workhouse was a complex of imposing buildings completed in 1836 located on the north western borough boundary on high ground; but not the very highest point (110m contour rather than 120m). I have only been able to locate a partial plan indicating alterations carried out in 1929 but the OS map indicates its overall scale and location. The new prison completed in 1867 was an imposing brick building this time located on the eastern borough boundary next to the railway station.

The severe regime inside these new Union workhouses and prisons was also imposed on 'pauper lunatics' and 'mental defectives' and concerns about this prompted the development of the county asylum; the first large scale and public provision for mental illness.

The 1847 Commission on Lunacy recommended siting these in locations with a 'healthy character' and a 'cheerful and extensive view'. The urban/rural fringe was seen as an ideal location because of good transport links combined with reasonably cheap land. However, not all counties had access to such an asylum and, where they did, it was more expensive to accommodate people there than the workhouse. Hertfordshire did not have access to a county asylum until the opening of the Three Counties asylum located just outside Bedford and shared with Bedfordshire and Huntingdonshire in 1862.

There was, however, one of the last, and most reliably documented private asylums located at Harpenden Hall in the 1850s. Hertfordshire's own asylum was built at Hill End on the eastern edge of the town (about one mile further east of the prison) between May 1897 and June 1902 with the first patients admitted in April 1899. The original documents claim the location was chosen because it was 'near the centre of the county's population' (Anderson, 1996). It is however clear from patient records that the reason for locating it in south rather than central Hertfordshire was to accommodate additional patients from Middlesex (these accounted for 143 of the 571 patients in 1903). When the Middlesex asylum was completed in 1905 and Middlesex patients were transferred there, they were replaced with 95 patients from Cornwall! The railway siding and branch line installed in 1897. Just to the west of the map, Owen's Brickworks was established and supplied most of the bricks to build it. Like most of the contemporary large county

asylums, it was built as a largely self-contained community with its own farms, workshops, chapel, mortuary etc. all in beautifully landscaped grounds.

It was substantially extended in 1905 and again in 1917. Just outside the main gatehouse, sixteen cottages for junior married staff were built from 1901-1907 with many others built or purchased near by in later years. Land was acquired in a piecemeal fashion and the 1912 Kelly's Directory records that the estate comprised about 225 acres. Shortly after, MiddlesexCounty built their own, slightly larger asylum at Napsbury just outside the village of London Colney along similar lines with the park designed by William Goldring. It was located close to the Midland railway line and, again, had its own siding especially built. The booklet accompanying the opening service in 1905 described it as 'geologically situated on the outcrop of the London basin'; possibly an attempt to justify and legitimise its location in a different county. The images contained in this are particularly striking in their Art Nouveau representations of a peaceful and tranquil setting in the country for troubled minds.

The earliest equivalent of a general medical centre was the St Albans and mid Herts dispensary which provided a free service operating out of a rented house adjoining Holywell Hill from 1861-1887 (Victoria County History: VCH). A new site was purchased for the dispensary in 1887 adjacent to the Union workhouse. In 1893 this was further extended and new buildings constructed and became the Sisters' Hospital for Infectious Diseases. The location of such a hospital relatively close to the town was contradictory to advice that such hospitals should be located 'at places as far distant from any populated neighbourhood as conditions of accessibility permit' (Medical Officer Local Government Board, 1882).

4.4 Colonies - The mental defectives act and villa asylums (1913-1939)

The Mental Defectives Act of 1913 required every county and borough authority in England and Wales to provide institutional care for the local defective population. It represented the legislative answer to growing concerns and pressure to control these people, particularly women, who were 'subhuman' and represented a threat to the moral welfare and gene pool of society at large (see Wright and Digby, 1996; Thomson,1998 and Brigham et al, 2000).

The 'colonies' were created as permanent residences - there were no cures or remission envisaged for the feeble-minded. Some counties began building colonies to house these 'defectives' almost straight away, but the major impetus came when the Poor Law unions were dissolved in 1930 so the workhouse was no longer an option for accommodating them.

The first colony established in this area was Hangers Institution for the Feebleminded, later the Middlesex Colony and finally HarperburyHospital, that opened in 1926 in a combination of converted huts and new buildings. This was run by Middlesex and located next to their second asylum - Shenley - built on a villa plan. The large echelon style

asylum was no longer in fashion and a more domestic feel was planned using a number of smaller buildings in a circular type plan - a sort of Garden City for the disturbed.

Wolfensberger (1974) provides a thought-provoking analysis of the different images of the retarded (as menace, burden of charity, object of pity, holy innocent or developing person) and how this has shaped the design and location of places designed house them. The Hertfordshire colony for mental defectives was built across the road from the Herts County Asylum on 92 acres of land and opened in 1933 for 600 patients, about a 20% of whom were children. I have been unable to locate any detailed plans for this site.

4.5 War wounded and prisoners (1939-1945)

The three large asylums were all used as military hospitals during the war. Most of the photographs I have located date to this period even though it represents less than 10% of their total life-span. Also, the only hospital/medical related street name present in the new housing estate built at the Hertfordshire asylum is 'St Bart's Close'.

Shenley hospital was also used to house wounded prisoners of war and its tower (some 46m tall and built on top of Shenley Ridge) is visible for about three miles in each direction. Not surprisingly, it was used as a fire watch post and for military radio-communications surveillance during WW2 (Semellman, 2004). An American Forces hospital was built in the grounds of North Mymms House during WW2. The HER also notes a prisoner of war camp at Gorhambury.

4.6 The National Health Service and dismantling the asylums and colonies (1945-1996)

The immediate post war period saw a general NHS hospital constructed on the site of the old union workhouse incorporating some of the existing buildings. The road was also renamed from Union Lane to Normandy Road to convey heroism and victory rather than workhouse and poverty. This is largely closed and the remaining workhouse and Sisters' hospital buildings were demolished around 2001 to make way for new housing. The three asylums and two colonies all closed during the 1990s.

Virtually all of the buildings of the two Hertfordshire institutions have been demolished to make way for a new housing estate and a community park which takes its name, HighfieldPark, from an estate to the south of these sites. The remaining buildings have been converted into other uses or are scheduled for demolition. Little remains of the two Middlesex asylums apart from their listed water towers and some of the landscaped parkland. Only Harperbury remains largely untouched and has now become an important centre for training in learning disability and autism although plans to redevelop part of the site for housing were submitted in 2006.

5. Discussion of key issues

This section draws together the findings and explores key themes related to their location, definition of boundaries, visibility and how these aspects changed over time. It also considers how they influenced development of surrounding areas and how they were experienced from different perspectives. Finally, it discusses how these places have recently been re-branded and its implications for cultural heritage.

5.1 Why were places for care, reform or punishment located where they were?

From the above it is clear that the location of these places was, to some extent, influenced by contemporary attitudes to these groups and what could and should be done about them. The location of pest houses and the later isolation hospitals would seem to represent a compromise between fear of contagion and accessibility - not all were located in isolated spots. Presumably it was seen as acceptable to locate the St Albans isolation hospital next to the Union Workhouse because it was away from the respectable people.

A concern with isolation is also apparent in locating the earlier leper houses. However, because these were funded by alms it was important that they should be also located on main routes and associated with respectable (that is, religious) institutions. The location of the 19th and 20th century asylums was influenced, to some extent, by chance - the right sort of land at the right price becoming available at the right time.

However, there are other factors at work. The two earlier asylums were particularly well-placed to use rail transport to facilitate transport of materials and people in and out. The two Middlesex asylums (Napsbury and Shenley) are also located on one of the old medieval roads out of St Albans to London reflecting an ancient connection between places. The proximity of the union workhouse to the earlier medieval gallows site reinforces the 'outcast' status of its inmates.

The additional requirement of having working farms to both support the institutions and provide occupational therapy for patients also led to their siting on good agricultural land. It is interesting to compare the later Middlesex asylum and colony where the land for both was acquired in one transaction. The asylum was located on the southern portion of the estate close to the existing village of Shenley with the colony to the north away from any other habitation and sited on a minor road. This almost certainly reflects the prevailing attitudes of the need for extreme isolation of mental defectives to protect the wider community. The close proximity of all five institutions probably also arose for reasons of synergy and convenience - mobility and transfer of staff; as well as misdiagnosed patients.

5.2 How were their boundaries defined and maintained?

Existing natural boundaries played an important role in separating these places from mainstream society e.g. the two leper houses were separated from the town/main settlement by the river. In contrast, the early gaols had no defined boundaries and these

were extremely permeable with frequent movement of people in and out and sometimes changes of role from gaoler to gaoled! (Walker, 2002). Apart from the distinctive abbey gatehouse that housed the gaol and house of correction, these early gaols and parish workhouses were domestic in scale blending into the surroundings. Although the parish workhouses were located close to the parish church, these tended to be close to the parish boundaries signalling some separation from the wider community.

Although the three asylums all had gatehouses, they were not surrounded by high walls or hedges. The asylums were all built on a north-west/south east axis with the main entrance to the north or north west. The south east aspect from the edge of the asylums was generally open with land sloping away. The two colonies are both surrounded at the edge of the road by high and densely planted hedges; possibly to prevent people looking out and looking in. In contrast to the asylums, the land at the back of Harperbury actually slopes up so there is a very limited vista looking out from the rear boundary and this is dominated by the water tower at Shenley hospital to the south.

The children's ward, built at the very furthest point from the entrance is actually built in a dip reducing both the view and daylight. It is also interesting to consider visibility of these places from outside. Although the imposing water tower at Shenley formed a major local landmark, the other asylums were far less visible. The opening order of service for Napsbury in 1905 notes its location as 'just out of sight of the venerable pile of its (St Albans) cathedral' presumably so as not to offend the natives! The prominent location of the union workhouse has already been noted; in contrast the Victorian prison was located on the outskirts on level ground so was only visible from the immediate vicinity.

5.3 How did the above change over time?

In his seminal work on the history of madness, Foucault (1967) declares that 'asylums were the new leper hospitals' because they tended to be located on the same sites. Whilst this may have been true in 17th and 18th century France, it does not appear to be the case in Hertfordshire. Whilst there are some common threads and synergies in this area, for example the infectious diseases hospital built next to the Union workhouse and the asylums and colonies concentrated in the south eastern part, the evidence for 'tainted places' is not convincing. I suspect that this is because this study considers a longer time frame and other types of institution.

In this area, what is striking is how the locations of institutions changed to reflect contemporary views and regimes of punishment, reform, cure and isolation. The location of the earlier gaols close to the centre of town reflects a need to maintain surveillance combined with the fact that most of the inmates of these gaols were debtors or petty thieves; the murderers, rapists and more hardened criminals were either executed or transported to the colonies. When these options were curtailed and eventually withdrawn, prisons had to house more dangerous people so there was a need for larger and more secure institutions located more remotely and surveillance and policing moved from the whole community to specially employed staff.

This is paralleled in the development of workhouses where the move to a centralised location away from existing parish churches and the provision of a separate chapel also reflects the declining role, authority and responsibility of the church. Asylums too moved from fairly central locations to the extreme edge in semi or wholly rural settings; again with their own chapels. However, there are very interesting parallels between the *type* of locations of the early leper houses and public asylums and the overall functioning of these communities. They were all located well outside existing towns but on main communication routes. In many respects (food production, staff houses on site, extensive workshops and gardens) the asylums were closed communities for seclusion, contemplation and improvement - not dissimilar to monastic complexes that included the leper hospitals.

5.4 How did they influence the surrounding areas?

The large Victorian asylums and workhouses may have been sited in remote locations, but that does not mean that they hindered the development of the surrounding areas. Markus (1993) argues that many of these institutions developed 'protective bubbles' around them because of fear of the inmates. Whilst this has some truth, it is rather simplistic because these places also represented significant attractions in terms of employment and business opportunity. The development of villages close to the asylums seems to reflect this dichotomy. For example, the village of London Colney was located adjacent to the first Middlesex asylum at Napsbury but rapidly expanded to house staff working at this and the other asylums as it occupied a central location in the 'chain' of five institutions. However, even by 1960, land immediately adjacent to the hospital was still largely undeveloped and it was not until the 1970s that houses and a school were built here.

5.5 How were these places seen and experienced from different perspectives?

I have focused here on the asylums and colonies because this is where most evidence exists. Many general historical sources present these institutions as symbols of power, oppression and social control. Whilst this is important, it is only one viewpoint.

A large scale study of the nearby Bedford asylum (Pettigrew et al, 2000) used a series of detailed interviews with ex patients and staff. They found a deep sense of attachment to the place, particularly its grounds and setting. This is echoed in similar work on Inverness asylum where ex-patients took every opportunity to return for fetes or, unofficially, to sleep rough in the grounds (Philo, 2007).

Large asylums both dominated and also became deeply embedded in local communities. Generations of the same family worked at these places and the neighbouring communities were changed by immigration as they began recruiting staff from overseas from the 1950s (Pettigrew et al, 2000; Brown, 2001, NW London Mental Health Trust, 1998). It is also important to remember that there was no single staff or patient perspective as there were hierarchies within these two groups that affected their treatment and outlook - up to the 1960s the more junior staff were as tightly supervised and regimented as the patients.

'Higher functioning' inmates of the colonies had more opportunities to work on the farms, in the workshops and go outside than others and also performed many of the same tasks as the nurses. Brigham et al (2000) cite one case where an inmate actually drew up the staff rotas and annual leave charts! The official view derived from building plans and managers of strict gender separation is contradicted by patient and staff accounts of what really happened (Lewis, 1996 and Pettigrew et al, 2000). Asylum plans indicate intended function - for example, the 'patient's recreation centre' and swimming pool at Harperbury was appropriated by staff from the start and patients never actually used the facility (O'Driscoll, personal communication).

What emerges from these histories are complex and paradoxical places that mixed confusion, despair, fear, bullying, therapy, sanctuary, refuge, friendship and beauty. They were all of the types of places Philo defined as places for madness in the middle ages, and more, rolled into one.

Earlier prisons and workhouses also incorporated elements of refuge and sanctuary. Unmarried pregnant women would sometimes carry out acts of minor vandalism like breaking windows so that they would be in jail and well fed with medical attention when their babies were born (Zedner, 1998).

5.6 How are these places being re-branded or re-packaged and its implications for preserving cultural heritage?

My starting point for this project was my surprise at how the three local asylums and two colonies were being effectively been airbrushed out of local consciousness and history. I have now discovered that the same has happened to the union workhouse and Sisters' hospital. These institutions may not represent a very glamorous or comfortable aspect of our past, but they were instrumental in developing the size and character of the northern and eastern fringe of St Albans and surrounding villages over the last 100 years and have had a profound impact on their inmates and staff. Superficially, all that remains, apart from at Harperbury, is beautiful parkland, impressive water towers and a few 'quality' buildings - a sort of Disneyland asylum.

You have to look very hard to find the minimal efforts to recognise they were part of the area's history. This raises a number of issues: what exactly is 'cultural heritage'; and what should be preserved, for whom and why? Should we just preserve the aspects that the inmates liked or should we retain some of the ugly and frightening aspects? The quality or significance of areas surely relates to their social significance within a local, regional or national context and not just the architectural quality of standing buildings or the age of any remains. The draft archaeological strategy for historic centre of St Albans (Herts County Council, 2005), quotes English Heritage's definition of historic environment as 'all the physical evidence for past human activity and its associations that people can see, understand and feel in the present world'. However, for this strategy, 'historic' means before 1700. This very modern example also allows us to see rebranding in action and emphasises the crucial importance of landscape archaeology in understanding the past:

for example the changes of names on maps and the removal of communication links (in this case railway sidings).

I hope that it also demonstrates the need to consider issues of social control, safety and sanctuary, punishment and healing in our analysis of landscapes in the historic period and earlier eras. More settled and larger groupings from the Neolithic onwards would have had to deal with mad, feeble-minded, bad and 'difficult' people as would earlier hunter gatherer groups of modern and archaic humans.

5.7 Conclusions and future work

I feel that I have only really just begun to scratch the surface of this topic. I hope that I have demonstrated that landscape archaeology can provide revealing insights into how societies have dealt with 'difficult' people. I also hope that I have persuaded that these comparatively modern landscapes are worthy of study and of the need to re-examine what is classified as historic environment and to consider how it is preserved and presented.

In researching this topic I have been very frustrated by the lack of material and disregard for 'modern' heritage and for people who have no voice. I have also been deeply upset by much I have read, particularly about the treatment of those termed feeble-minded. However, I have adored poring over and tracing old maps and seeing, walking and feeling the continuity and change in routes, boundaries and place names over time. In terms of future work, the immediate priority is to fully document what I have done to date and to archive it with the local society and HER to help them update the database. They acknowledge this is overdue.

The next steps really fall into four categories. The first is more detailed investigation of primary sources. I am intrigued by the close proximity of the old medieval road, possible deserted medieval village, Neolithic earthworks, the Colney Chapel moated site and the Middlesex asylums. Satellite images, aerial photos and 3D mapping would be particularly useful to explore this connection together with issues of visibility, aspect and surveillance.

The second is considering the benefits and feasibility of obtaining more data about some of the sites. For example, some limited and targeted excavation in some parts of the asylum and union workhouse sites may throw light on issues like sense of self, contact with outside, diet and physical health and social hierarchies within these institutions. Additional data from staff, patients/inmates and local residents would also be invaluable, especially where this could be collected in a constructive and directed way. Repertory grid techniques (Kelly, 1955) would be particularly useful in mapping cognitive space and boundaries.

Thirdly, there is a need to consider how far some of the general findings from this area would apply to other types of areas and regions - the semi-rural setting and close proximity and links to London played a key role in locating these places. Examining two

or three very different types of areas would be instructive: a large northern city (e.g. Glasgow, Manchester or Leeds); a more rural area (e.g. Lincolnshire Wolds, North Devon or Gloucestershire); and a declining industrial town (e.g. Merthr Tydfill, Ilkeston or Barrow).

Finally, there is a need to tackle the heritage issue. These places and people will rapidly become invisible unless we are prepared to engage with how the mad, the bad, the feckless, the impotent poor and the feebleminded were viewed and treated in the very recent past. It is hard enough to find primary information about some of them now less than 100 years after they were closed. How are archaeologists and others 500 years in the future (when they may be old enough to be considered 'historic environment') going to piece together and make sense of these places?

References

References are listed in alphabetical author order. #For local history, I have indicated where these are available (as at March 2008):

· St Albans Library is the main library at the Maltings, Victoria Street, St Albans.

· HALS is Hertfordshire Archives and local Studies, Peggs Lane, Hertford.

Items marked 'in library' are available on the shelves, those marked 'archive collection' have to be ordered from their stores.

HER is Herts Historic Environment Record Office at County Hall, Peggs, Lane, Hertford.

Alty, E. et al 1982 *St Albansc 1820. 'The Town'.* St Albans Architectural and Archaeological Society unpublished (available in St Albans library). Published by the Civic Society?

Anderson, B 1996 *Nearly a Century: The history of Hill End Mental Hospital St Albans 1899-1995.* unpublished manuscript (available from HALS archive collection).

Brigham, L. et al (eds) 2000 *Crossing boundaries: Change and Continuity in the History of Learning Disability.* Kidderminster: Bild Publications.

Brown, K. 2001 *Harperbury Hospital, from Colony to Closure 1928-2001.* Hertford: Harper House publications (available HALS library).

Cell Barnes Hospital - assorted papers, photographs and records. Available from HALS archive collection (Off Acc 1346 - items 32-35).

Foucault, M. 1967 *Madness and Civilisation: A history of Insanity in the Age of Reason*(trans R. Howard). London: Tavistock Publications.

Goffman, E. 1970 *Asylums*. Harmondsworth: Penguin.

Herts County Council (2005) *An archaeological strategy for historic centre of St Albans(draft 2005).*Unpublished - downloaded from 1/2/08.

Hill End Hospital building and site plans available from HALS archive collection (Off Acc 3959, NS 12/4 (boxes 19, 21, 27 and 28), NS 12/12).

Hunn, J. R. 1994 *Reconstruction and measurement of landscape change: A study of six parishes in the St Albans area.*BAR British Series 236. Oxford: Hadrian Books.

Kelly, G.A. 1955 *The psychology of Personal Constructs*. New York: Norton.

Lewis, R. 1996 Living in hospital and in the community. Horizon Trust (available HALS library).

Markus, T.A. 1993 *Buildings and Power: Freedom and control in the origin of modern building types*. London: Routledge.

McGowan, R. 1998 'The well ordered prison: England 1780-1865' in Morris, N. and Rothman, D. J. 1998 *The Oxford History of the Prison: The practice of punishment*. Oxford: Oxford University Press p 71-99.

Medical Officer Local Government Board 1882 *Report and Papers on the Use and Influence of Hospitals for Infectious Diseases.*(available at HALS Library)

Morris, N. and Rothman, D. J. 1998 *The Oxford History of the Prison: The practice of punishment*. Oxford: Oxford University Press.

Munby, L.M. 1977 *The Hertfordshire Landscape*. London: Hodder and Stoughton.

Napsbury Hospital 1905 *Order of Service on the opening of the Middlesex Asylum at Napsbury*. (unpublished - available St Albans library).

Niblett, R. and Thompson, I. 2005 *Alban's Buried Towns: An assessment of St Albans archaeology up to AD 1600.*Oxford: Oxbow books.

North West London Mental Health Trust 1998 *ShenleyHospital1934-1998* (available at HALS library).

Peters, E. M. 1998 'Prison before the prison: the ancient and medieval worlds' Morris, N. and Rothman, D. J. 1998 *The Oxford History of the Prison: The practice of punishment*. Oxford: Oxford University Press p 3-43.

Pettigrew, J., Reynolds, R. W. and Rouse, R. 2000 *A Place in the Country: Three counties asylum 1860-1898*. Hitchin: South Bedfordshire NHS Trust (available HALS library).

Philo, C. 2004 *A Geographical History of Institutional Provision for the Insane from Medieval Times to the 1860's: The space reserved for insanity*. Lampeter: The Edwin Mellen Press.

Philo, C. 2007 'Scaling the Asylum: Three Geographies of the Inverness District Lunatic Asylum' in Topp, L., Moran, J. E. and Andrews, J. (eds) *Madness Architecture and the Built Environment.* London: Routledge p 105-130.

Ripon, S. 2004 *Historic Landscape Analysis.* York: Council for British Archaeology.

Semmelmann, K. 2004 *Shenley Water Tower, Shenley , Herts: Historical building record HN 428*. Baldock: The Heritage Network (available at HER office).

Smith, L. 2007 'The architecture of confinement: urban public asylums in England 1750-1820' in Topp, L., Moran, J. E. and Andrews, J. (eds) *Madness Architecture and the Built Environment.* London: Routledge p 41-61.

Smith, J. R. 1987 *The Speckled Monster: Smallpox in England 1670-1970, with particular reference to Essex.*Chelmsford: Essex Record Office (available at HALS library).

Smith, J.T. and North, M.A. (eds) 2003 *St Albans1650-1700: A thoroughfare town and its people*. Hatfield: University of Hertfordshire Press (available St Albans library).

Tarlow, S. and West, S. (eds) 1999 *The Familiar Past? Archaeologies of later historical Britain.* London: Routledge.

Thompson, I. 2002 *Redbourn: Extensive Urban Survey Project assessment Report.* Hertfordshire County Council (unpublished, available at HER).

Thompson, I. 2002 *Harpenden and Wheathampstead: Extensive Urban Survey Project assessment Report.*Hertfordshire County Council (unpublished, available at HER).

Thomson, M. 1998 *The Problem of Mental Deficiency: Eugenics, Democracy and Social Policy in Britain c. 1870-1959.*Oxford: Oxford University Press.

Taylor, J. 2007 'The Architect and the Pauper Asylum in late Nineteenth Century England' in Topp, L., Moran, J. E. and Andrews, J. (eds) *Madness Architecture and the Built Environment.* London: Routledge p 149-172.

Walker, S. 2002 *Crime in Hertfordshire: Volume 1 Law and Disorder.* Dunstable: The BookCastle (available St Albans Library).

Wolfensberger, W. 1974 The Origin and Nature of our Institutional Models Syracuse University: Syracuse.

Wright, D. and Digby, A. (eds) 1996 From Idiocy to Mental Deficiency: Historical perspectives on people with learning disabilities Routledge, London.

Zedner, L. 'Wayward sisters: the prison for women' in Morris, N. and Rothman, D. J. 1998 *The Oxford History of the Prison: The practice of punishment*. Oxford: Oxford University Press p 295-324.