

**Interview with Couple Who Both Were Staff
and Wish to Remain Anonymous
[at Augusta State Hospital during the 1950s]**

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Interviewer: Diana Scully

DS: When did you work at AMHI and what did you do there?

ANON 1: We worked there, best that I can remember sometime in '52 to sometime in '59... Someone told us that if you worked there over seven years you couldn't be on a jury or we couldn't sign any legal papers...I don't know, but we left anyway before seven years was up. It wasn't AMHI; it was just the State Hospital. As I can remember when I first went to work there, it was two Stone Buildings, male and female, and I worked on Lower Stone and there were Sections 1, 2, and 3. Section 1 was the infirmary where anyone from the whole hospital that was there could go up and they had a waiting room there and had surgery or whatever. Section 2 I can't remember what kind of states there were there, but Section 3 was TB...

So I worked there for quite a while and I was thinking the other day about trying to picture it in my mind...I worked down there on Lower Stone Section 1. We had a wonderful, I think she was like a maid, but she did a lot more...I don't know if they were called a CNA or what they were, but she was really, really good. Stone was the admission ward and Upper Stone was for the patients who were really violent and out of hand and whatnot...At that time they did insulin therapy.

DS: I would like to hear about that.

ANON 1: ...I don't know what building it would be or where it was, but it was a whole long ward, probably 12 or 15 beds. The patients would come from wherever and they would give them these massive doses of regular insulin or we would...Of course they would go into insulin shock slowly...What we had to do was pencil down or [keep track] in our head things they would talk about, things that they'd say as they were slowly going...unconscious into the coma...We'd have to hurry because there were, like I said, 12 or 15 of them and you had to keep your eye out because if they got too far, we would have to...put the tube down their nose into their stomach and give them sugar water to bring them back. But if they got too far, hope we could keep up with them. Then the doctor would have to come and give them an IV because we weren't allowed to do that then. It was really interesting but I thought kind of scary, but I don't remember being scared about it then, but I think I would be now.

DS: So they would do this to a large number of people at a time?

ANON 1: Oh yeah. They'd come in and you would just give them big doses of regular insulin.

DS: You'd have to monitor them very carefully.

ANON 1: Oh yeah. I don't know if there were two or three [staff] that were there...Then when all the people from the wards that they came from came and got [the patients] after they had been treated...a lot of times they would have a reaction on the wards that they were on...

DS: How often did the patients receive these treatments?

ANON 1: Every day.

DS: Every day? Which patients would receive these treatments? How would this be decided?

ANON 1: I don't know. Just ones that they felt needed it... Then the electric shock treatment was a big thing... That was once a week unless they needed it oftener or if anyone acted up or too violent of if they just felt they needed it, up they'd go to Upper Stone and they would line up and I mean there was no privacy and such. What would happen is they would lie on the bed, put the electrodes on. Someone would have to hold them because they would have convulsions and everyone that was in the line, all the other patients, would – a lot of them didn't want it – you know, no, no, no, but and there was no sedation – they just had it, but the ones if they were acting up or whatever and they had to go, they didn't act up as much. They were better.

DS: So did patients receive both treatments?

ANON 1: No, no, no.

DS: So they either got one treatment or the other?

ANON 1: Yeah. The insulin therapy I don't think lasted too long. I don't remember how long, but they just kind of phased that out. They didn't get much out of it. But I can remember writing down or hearing them say anything that would have helped the psychologist that I could think of.... Dr. X was head doctor in charge... He was a real short man. I was really very wary of him. He would be making rounds and he would stiff right up... and then Dr. Y came after that. Both were our two, whatever, administrators or doctors in charge, whatever...

I know that the insulin was phased out, and I went to work for the OR. They had this busy OR, this really busy OR. We did all kinds of surgeries. Big surgeries, everything. Delivered babies. We were busy over there...

DS: Were many babies born there?

ANON 1: Oh I remember several. Yeah.

DS: And what happened to them after they were born?

ANON 1: They'd go back to their room and put the baby there for a while... After that I worked in the clinic. They had a clinic where patients could come. Every patient there had to have a physical every year and we got a list of who it's going to be for a certain day and not too many at a time. That's how I found my uncle that lived there. He had been there for years and I didn't realize he was such a person. And when he came I saw the name. Then I looked at him and saw the family resemblance and we kept talking... He got up there when he was practically out of high school... He kind of melted in to oblivion, I guess... It's like no one talked about things like that as much at all... Well, anyway we... started taking him out just an hour. I remember we took him first to a restaurant. Well it like to blew his mind. Jukebox and he had a cup of coffee and a piece of pie. He felt that was wonderful and then we'd take him out for a little longer. It ended up that we took him home with us and he lived with us for a while... for a long, long while.

DS. How wonderful!

ANON 1: ...He was able to be left alone. We went off for a week once and he stayed home alone; [he could] do everything. One night we were eating supper and he said, "I can't stay here anymore. I got to go home." Well, it broke my heart because I, you know, thought he was happy.

So we took him back [to the State Hospital] and talked to the doctor. He said that after he'd been there for that length of time it was sort of like home for him...

DS: How long did your uncle live with you before he said he wanted to go back?

ANON 1: Two years. A couple of years, something like that. Of course the kids were little. I used to worry about them bothering him as he wasn't a bit used to kids, but he had his own rules and they respected that.

DS: It was wonderful that you took him in.

ANON 1: Yeah. He enjoyed it...They had built the B ward, so [next] I went there and was in charge of the floor. That's where I was working and then the Asian Flu was going around in '59. I got that and...a really dear friend...we worked together there all the time and she got it, too. I had that encephalitis at seven months pregnant. So anyway that is when I stopped working there. I had one baby [while working] there and that was wonderful, and it was a wonderful place to work. It really was. We all worked together, and I'm sure it was the same old thing that happens everywhere, you know, but we didn't realize it. We just enjoyed it. We both worked together there.

DS: How things change there over the years?

ANON 1: Thorazine coming in at some point. I'm not sure what year, but what a difference. In the '50s some time.

DS: What was is like before and what was it like after Thorazine?

ANON 1: It cut down...shock treatment and stuff. There were still a lot of seclusion rooms that we had to deal with. All they had was a mattress. The mattress was made out of thick canvas so they couldn't tear it. Oh yeah. They smashed their feces on the walls and all over the mattress... Like I said the insulin stopped. That didn't work. OR stopped; they discontinued that also.

DS: When Thorazine came, did they need the seclusion room less often?

ANON 1: Yeah. When I was in training in [another state], they did all the water stuff and I don't remember them ever doing that...in Augusta...

DS to ANON 2: What was your job at the State Hospital?

ANON 2: I started on Middle Stone, which was the admitting ward...Then after that I worked down to the...geriatric floor and I worked down there for a while. I was charge attendant down there and assistant supervisor and then I went from there. I kept to the Stone Building and worked up there for quite a while. Then they transferred me to the criminal building, which is maximum security. They brought the patients up from the state prison...and we had some pretty rough people there. I liked that though. It was a good job. The whole thing was a good job, but I think I enjoyed...the geriatric patients the best. I love to be helping people...Then they had the school of nursing and so I took a course in that—today I would be an LPN if I had got my license, because I gave shots and had the whole training just like an LPN does. We had to give shots to the patients, especially when Thorazine came out. They didn't have the nurses come around and do it; we did it. And I used to cut their hair and shave them...

We wore white. We had to dress just like a nurse all in white. Black shoes, white pants, white shirt, black bow tie. You had to wear that bow tie. You didn't want to be caught with it off, because you got chewed out if you did. You had to be in full uniform all the time. We enjoyed

working there. If it hadn't been for the seven-year thing, we probably would have retired from there.

DS: That seven-year thing is interesting. I've never heard about that before.

ANON 2: Somebody told us that. I don't remember if it was a lawyer, but somebody told us that after seven years you couldn't serve on a jury or sign any legal papers. You know, I suppose like serving on a jury, you would kind of lean toward people who were mentally ill, you kind of lean in their favor, so I suppose that's why they didn't want you on a jury. As far as legal papers, I don't know that that had to do with it.

We had seclusion rooms. We had quite a few of them in the maximum-security building and that had a fence all the way around it with barbwire over the top. We had to take them out twice a day and once in the morning and let them walk around the yard and we had to take them out in the afternoon.

DS: How long were people usually there? A long time?

ANON 2: Some were and some weren't. It's funny because one time I was...scrubbing the day room floor and this guy had sat there and he would never talk to anybody...He would just sit in a stupor, catatonic stupor all the time. And we had this [other] guy; he was cussing. He was a little Italian and he was in for murder, and I had my back to him and he came running and he was going to jump me...That [first] guy jumped up and nailed him and knocked him right out cold. Of course, we had to report. The doctor said that was good therapy for him because it was the first time he ever moved. Never said anything; just got up. Then after that I could go in and sit down, and kind of talk to him. He wouldn't talk back to me for a long time. Finally it just kept going and he'd have these spells and he said an elephant was running over him. He'd go like this, and I would say, "What's the trouble?" and he would say, "Elephant, elephant." Where he ever got elephants from, I don't know.

DS: It was real to him.

ANON 2: Yeah. You really learned a lot of up there.

DS: Of all the things you remember about the State Hospital, what sticks out the most?

ANON 2: I think it was the Thorazine getting in. What a difference it was in the patients. You could control their behavior with it and there was a lot less work and a lot less, you know, on your nerves. Especially when in the criminal building...I did work in OT, too. I had to take them in and stay with them. They had screwdrivers and knives and scissors. You didn't close your eyes. Most of them were pretty good...They had an OT man down there and they took patients from all over down there. They only kept criminals in the criminal building. I used to go sometimes when they had to go back to state prison. I would go and get them.

DS: What would a typical day be like?

ANON 2: Well, you had a busy day. Like I said, you had to give all the medications, feed them, bathe them, shave them, cut their hair. I think every Tuesday and Wednesday was haircut day...Had to do this along with all the housework and everything. You were busy. You didn't have time to twiddle your thumbs, that's for sure...

DS: What you have shared is very helpful. Thank you.