

Gemma Anderson

PORTRAITS : PATIENTS AND PSYCHIATRISTS

(WELLCOME TRUST ARTS AWARD 2010)

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FOREWORD

This project began in 2007 when the forensic psychiatrist Tim McNerny saw my etchings at the Royal College of Art's Great Exhibition. I had made a series of portraits referring to pseudo-scientific theories: comparative physiognomy, phrenology and the Doctrine of Signatures.¹ After our initial meeting, we decided to work together on a project creating psychiatric portraits for the 2008 arts exhibition *An Experiment in Collaboration*, held at Jerwood Space in London. Response to this was positive and encouraged us to apply for a Wellcome Trust Arts Award so we could develop the concept further.

Before we began the 'Portraits' series in August 2009, Tim McNerny recruited willing psychiatrists who could identify patients enthusiastic to take part; doctor and patient needed to have a significant working relationship. Although we were based at Bethlem Royal Hospital in Beckenham, I also made drawings at individuals' homes in Hammersmith, Hampstead and Homerton, at a boys' school in Brentford and at other NHS units – Kentish Town Community Mental Health Centre and the Maudsley Hospital in Denmark Hill.

Such drawing from life requires trusting relationships with individuals and institutions, and it has been a wonderful experience of learning and discovery. Each individual led me on a search, as I wanted to draw not only the people but also the components in the portraits from life. Sometimes I used their personal possessions, but I found most of the animals,

plants and other objects at the Royal College of Physicians, Kew Gardens and University College London's Grant Museum of Zoology, Rock Room and Human Anatomy Room.

I was especially interested in working on portraits of psychiatric patients, as my grandmother had spent a period in a psychiatric hospital in 2004. Deeply aware of how her identity was diminished by the language of the medical institution, I witnessed how its vocabulary failed to express the history and story of the individual I loved and knew so well.

Through drawing, I have tried to represent the people involved in this project – their histories, medicines, interests and emotional worlds. The greatest privilege for me was being able to meet each person, hear their story, see their environment. Essential to this was learning about the perspective of both patient and psychiatrist.

The following essays have been written by people whom Tim and I have been fortunate enough to encounter during the project: William Schupbach, whom I first met when researching the Doctrine of Signatures at the Wellcome Library; Ludmilla Jordanova, who invited us to present a medical humanities seminar at King's College London; Stephen Brown, who was directing an excerpt from his play about paedophilia, *Future Me*, at a psychotherapy conference at Rampton Secure Hospital where Tim and I were giving a talk; and Emma Lilley, who reviewed my work at the Royal College of Art show. The Introduction is by Tim, with whom I have collaborated throughout the project.

¹ PHYSIOGNOMY: analysis of facial appearance and structure as indicators of what is going on in the mind; PHRENOLOGY: assessment of mental faculties by examining skull shape. The DOCTRINE OF SIGNATURES was a seventeenth-century diagnostic system, based on Paracelsus' interpretation of the book *Signatura rerum* (The Signature of all Things) by Jacob Böhme, contending that the form, colour or other properties of plants indicated their medical application; so, for example, yellow flowers or roots might cure jaundice or quaking aspen (poplar) heal shaking palsy.

INTRODUCTION

Psychiatry, throughout its development, has always had an association with the arts. Its most important creative relationship has arguably been with visual art, which has served as a means of representing mental disorder, as a form of treatment and as a channel of expression for patients.

These emblematic portraits by Gemma Anderson, of patients and their psychiatrists, relate to the story of mental illness and its historical representation. The images link the physical and internal worlds and are also visual metaphors for therapeutic relationships between doctors and patients in contemporary mental health treatment. Furthering a dialogue that has begun between artists, doctors, patients and the public, the series of etchings demonstrates that the drawn line, both diagrammatic and descriptive, can be a poetic depiction of an individual's emotional anatomy, whether doctor or patient.

Psychiatry has a long history in the United Kingdom, commencing at London's Bethlem Royal Hospital, an institution founded as a priory in 1247. Early psychiatry was often preoccupied with the appearance of individuals as the key to their inner mental world, relying on the science of physiognomy. Particular eye, nose and lip measurements were understood to be indicators of mental illness. After Broadmoor Hospital opened in 1863 in Crowthorne, Berkshire, patients were photographed on admission. Facial characteristics and demeanour were believed to be causative factors in their illness rather than manifestations of distress they might be experiencing.

During the twentieth century, creative therapies began to be used as a form of treatment and a path towards recovery. Outsider Art, created by psychiatric patients, emerged as an expression of their role in society. Like *art brut*¹ in France, this type of artistic expression was practised beyond the boundaries of official culture by the self-taught. It is a manifestation of the left-wing anti-psychiatry movement, as championed in the 1960s by sociologist Michel Foucault and psychiatrist R. D. Laing, which accused psychiatric practice of social control, promoting stigmatisation and of incarcerating the mentally well in asylums for reasons unrelated to their health. As psychiatry took on political overtones, so did the treatment of patients. In western countries, this ultimately led to the development of care in the community, closure of asylums and the return of psychiatry and patients to society.

The first decade of the twenty-first century has seen something of a reversal of such emancipation. Increasingly, fear of psychiatric patients and their association with a potential risk of violence is fed by tabloid hysteria and new levels of terrorist destructiveness. The unacceptability of risk has led to a resurgence of asylums in the form of secure psychiatric hospitals. Meanwhile, a threatening new phrase has been coined: dangerous severe personality disorder.

As a consultant forensic psychiatrist working at the interface between law and medicine, the offender and the mentally ill, I have been wanting to open the modern secure asylums to fresh sorts of creative expression.

¹ ART BRUT: French artist Jean Dubuffet coined the term, which literally means 'raw art', after coming across Hans Prinzhorn's *Bilderei der Geisteskranken* (Artistry of the Mentally Ill, 1922); he built up a large collection of art by inmates of asylums.

After meeting Gemma at the 2007 Royal College of Art graduate show, I initiated discussion along these lines. We wished to move away from the written representation of mental illness and the concept that the connection between a doctor and patient is mostly verbal. Instead, we envisaged a series of portraits of psychiatric patients and their doctors that might turn the tables on the people who viewed them. They would glean from an image how it is to be a patient experiencing symptoms of mental illness or how it feels to be a doctor listening, diagnosing and treating. In psychiatry, the stories that patients carry with them are often distressing and sometimes violent. How do psychiatrists cope with hearing such tragedies, and how do they process them into meaningful therapy? We hoped to create portraits reflecting relationships in psychiatric care that might lead towards recovery and a return to the community.

The project was devised so that Gemma would have ample opportunity to attend psychiatric services. She needed to hear the stories of both patients and psychiatrists, to discover the therapeutic process of rehabilitation. There was strong support from clinical teams, and psychiatrists from different specialities, gender and ethnic groups became involved. Doctors and patients took part in the same process: an interview with the artist that explored favourite personal objects, preferred landscapes and what doctor and patient shared, followed a week later by a two-hour session sitting for the portrait.

This equality of approach is sustained in the catalogue of the 'Portraits' series and at exhibitions: every sitter is identified by first name – all but one are pseudonyms – but there is no reference to anybody's status as patient or doctor. If one category of subject is seen as a visual object, so is the other. Confirmation of the value of such status-blindness has already been documented: one of the patients visited an exhibition that included his portrait and described feeling empowered by the experience. The imagery has also promoted empowerment of the doctors and received recognition within the medical profession, with publication of one of the portraits on the cover of the *British Journal of Psychiatry* in 2008.

Gemma's etchings reflect the way that doctors and patients now work together in a

process of collaboration and shared responsibility. These portraits could not have been produced 100 years ago at the Bethlem Royal Hospital, but since then psychiatric knowledge and practice have advanced to a position where hope, opportunity and doctor-patient responsibility are central to rehabilitation. Psychiatrists and patients share more than their wish for recovery; they have lives and feelings that overlap. They must bear therapeutic risk-taking together. Empowerment, self-management and social inclusion are the aims as patients and their psychiatrists work towards a life beyond illness.

TIM MCINERNY, FRCPsych, is consultant forensic psychiatrist at River House Medium Secure Unit, part of Bethlem Royal Hospital, Beckenham, run by the South London and Maudsley NHS Foundation Trust. He is responsible for the care of offender patients with complex mental health problems on the pre-discharge ward. He was previously consultant for nine years at Broadmoor Hospital, on the Young Persons Personality Disorder Unit, and since 1998 he has been visiting psychiatrist to the Falkland Islands. A Fellow of Gray's Inn, Tim McInerny trains many professionals within the criminal justice system and provides expert evidence to the courts, the Ministry of Justice and the National Probation Service. He is a clinical tutor at the Institute of Psychiatry, has lectured at national and international conferences on personality disorder, and has taught over 1,800 medical students in day courses at Broadmoor Hospital. He advises the British Board of Film Classification. Committed to bringing the creative arts into secure settings, he has collaborated with comedians, actors, musicians and artists to introduce contemporary theatre and the other arts to Broadmoor and such forensic units as River House.

William Schupbach

OF THIS TIME AND OF THIS PLACE:

GEMMA ANDERSON'S
PORTRAITS OF PATIENTS AND
PSYCHIATRISTS

The etchings of psychiatrists and patients that Gemma Anderson created in 2009–2010 will strike different people for different reasons. Admirers of fine printmaking will find themselves referring to the unlikely pairing of Lucian Freud (for the etched lineaments of the portraits) and Hercules Seghers (for the little knots of pale colours that coalesce around clumps of individual motifs). The connoisseur of portraiture will perhaps notice the density of the attributes: instead of one or two professional or personal gadgets or pieces of costume to suggest the sitter's *raison d'être*, the figures are surrounded by a rank jungle of organic forms and artefacts. However, no one will be more surprised than scholars of psychiatric iconography.



Fig. 1

Engraving by Ambroise Tardieu as a plate to Jean-Étienne Esquirol, *Des Maladies mentales*, Paris 1838. Wellcome Library, London

Over the centuries, mental illness has acquired its own distinctive iconography, which has been constructed or reconstructed by several talented authors. In the 1890s a group of physicians at the Salpêtrière Hospital in Paris (Jean-Martin Charcot, Paul Richer and Henri Meige) made a special study of the ways in which the mentally ill had been portrayed in past centuries. Later scholars have built on their work in various directions: for example, Henri Hubert Beek studied the insane in the Middle Ages (1969, 1974); Sander Gilman's *Seeing the Insane* (1982, 1996) brought to light a much wider range of sources and ideas than were previously available; and Sandro Parmiggiani's magnificent exhibition in Reggio Emilia and book *Il volto della follia* (2005) released to the world astonishing photographs covering the whole gamut of the twentieth century. Perusing them, one reads the story of generations of artists who appear to be quixotic because they use graphic means to represent the invisible: the unseen torments inside the disturbed mind.

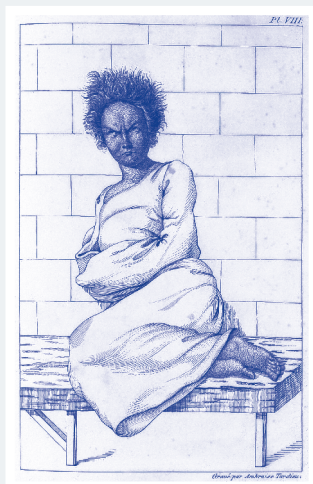


Fig. 2

A man aged 82, an inmate of the Craiglockhart Workhouse, affected with senile dementia.
Colour lithograph by John Williamson, ca. 1890, for B. Bramwell, *Atlas of Clinical Medicine*, Edinburgh 1892–1896. Wellcome Library, London, no. 386231

To attack the agitated windmills of the mind, such artistic Don Quixotes as Francisco Goya and Théodore Géricault represented the inner disturbances through various external manifestations. The settings may include paraphernalia of the asylum, such as barred windows and high-walled courtyards. Patients themselves may exhibit behavioural traits not found in polite society, such as (at one extreme) grimacing, ranting and raving Fig. 1 and (at the other) dejected oblivion. Fig. 2 As Gilman writes, 'The visualization of the insane maintains its own vocabulary of images, and these are linked to the manifestations of mental illness in much the same way that psychiatric nomenclature relates to the same spectrum'.

Turning from this tradition to the portraits by Anderson, one finds that they form a new departure in several ways characteristic of their time. One is the decision to mix psychiatrists and psychiatric patients indiscriminately in one collection. Géricault's portraits of the insane are certainly not accompanied by a portrait of their physician, Étienne-Jean Georget. However, the Anderson series comes from a time when older social distinctions between

professionals and patients have given way to a more democratic ethos, and psychiatrist and patient interact almost as a team.

Also unusual is the fact that the attributes of the sitters were contributed by the subjects themselves. The artist positively invited them to suggest the distinguishing objects they found important. Such active involvement of sitters in their self-definition dates the portraits to the early days of Web 2.0 communications, when individuals with no special power could display themselves to the world as they wished to be seen (through Twitter and Facebook, popular contemporary websites).

The third surprising feature of these etchings is that the patients' mental illness is invisible. Looking at their portraits without any background knowledge, one could not necessarily tell that they are suffering or have suffered from mental disorder. This may be a tribute to the psychiatrists, and to the medication at their disposal. But it is surely also a sign that the patients are appreciated and recorded as individuals first, as patients second, and as illustrations of a medical stereotype not at all.

What about the portraits of the psychiatrists? They, too, can be compared with stereotypes. American psychiatrist Irving Schneider looked at the portrayal of his profession in popular cinema and found three types, which he called Dr Evil, Dr Dippy and Dr Wonderful. Dr Evil is an arrogant descendant of Victor Frankenstein, while Dr Dippy appears to have been totally assimilated to the mindset of his patients rather than they with his; and Dr Wonderful manages to diagnose and cure by telepathy, without the time-consuming demands of testing, talking, taking histories and writing up notes.

In contrast with these one-dimensional caricatures, the psychiatrists in Anderson's portraits are individuals with a history, interests and attachments that are separable from their profession; these are shared with other people from the same social context. They have preferred places to spend their holidays; they have objects and furnishings – actual and mental – that they look to for comfort and inspiration, such as favourite foods, books and music. Their attributes in the portraits show that they have the same work demands and material needs as professionals in other fields of employment in the same part of the same city. Additionally, their relationships with their patients are depicted as more fruitful than the stereotypes suggest, for their job is not to command a stage like the good or evil hypnotists beloved of Hollywood, but rather to manage, control and even arrest the symptoms of mental illness troubling their fellow citizens.

The classlessness of the portraits is very much of their time. In 1932–1933 another artist was himself a patient at the Maudsley Hospital in Denmark Hill, Southwark, where some of Anderson's subjects reside: Thomas Hennell (1903–1945), who wrote a book about his experiences, *The Witnesses* (1938). He was interviewed by two doctors, whom he calls Dr Craugasides and Dr Embasichytros. They appeared to Hennell like Kafkaesque inquisitors, alternating between condescension and carping. The distance between patients and psychiatrists seemed to Hennell to be institutionalised in the asylum: where he was seeking sympathy and understanding, he found opacity and contradiction. This was the period of the pin-striped consultant illustrated in *Punch* cartoons during the 1920s and 1930s.

Anderson's portraits of patients and psychiatrists from the same hospital 75 years later are strikingly different. Their 'vocabulary of images' (in Gilman's phrase) is demotic: they show a levelled society, where patients and doctors may buy the same clothes from the same shops, go to the same hairdressers and support the same football teams. That is simply to say, the world around them has altered during those 75 years, and even professions based on scientific disciplines are not exempt from social change.

The 16 works in Anderson's 'Portraits' series are distinguished documents of their time, and the complete set of them, which has been acquired for the Wellcome Library in London, complements graphic depictions of the insane and their doctors from the sixteenth century onwards. They will surely be appreciated by future generations of historians.

WILLIAM SCHUPBACH is a librarian at the Wellcome Library in London specialising in iconography, especially in photographs, paintings, prints and drawings. He has published articles on Dutch and Flemish paintings of patients, doctors, alchemists and surgeons, and a monograph on Rembrandt's painting, *The Anatomy of Dr Nicolaes Tulp*. His most recent project was an exhibition in Beijing of some of the earliest documentary photographs of China (1869–1872), showing a way of life now disappearing under modern rebuilding plans.