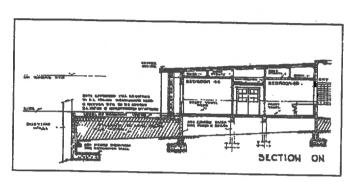
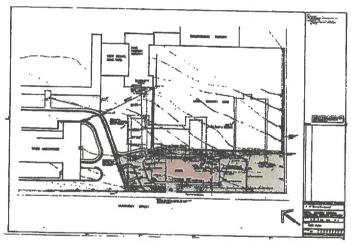
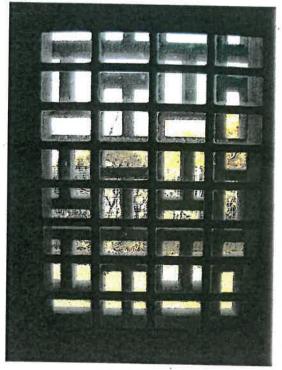
# Willow Court Conservation Management Plan Stage D



# Allonah, A Ward and Industrial Therapy





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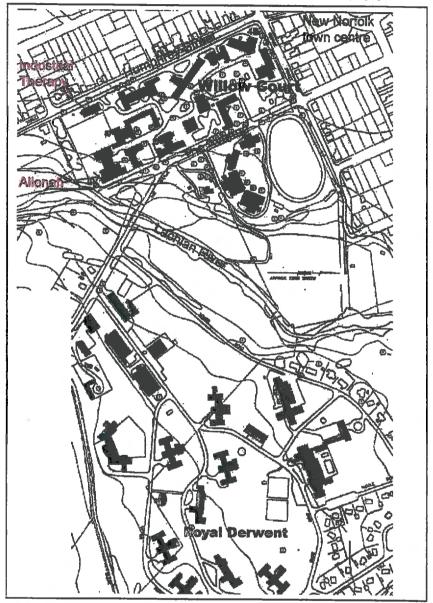
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## Introduction

## Background

This Conservation Management Plan is the Fourth Stage of a Conservation Plan for the Willow Court site at New Norfolk, it is prepared on behalf of the Derwent Valley Council. This report addresses two buildings, Allonah or A Ward and the Industrial Therapy building and their adjacent landscape areas.



1998 Map of Willow court and Royal Derwent Taken from: 'Colonialism and it's aftermath. Research Cluster, University of Tasmania. July 2002

Willow Court occupies an area of approximately 18 Hectares on the western side of the Lachlan River in New Norfolk. Following the deinstitutionalisation of Willow Court in 2000, portions of the site have been retained by council and other lots released for private development. The Conservation Management Plans for these areas are covered in the previously prepared Stages of the Conservation Plan (A, B, C) as shown on the diagram below, along with the two areas that constitute D.

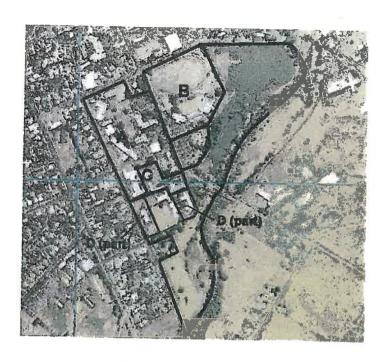


image modified from: Scripps, Knaggs, Barwick & Loveday 2005. Willow Court Conservation Management Plan – Stage C.

"Derwent Valley Council is undertaking this Conservation Plan to guide development of the site in a coherent and sensitive manner maintaining and enhancing the values of the site with appropriate reuse of the many buildings and spaces.

Willow Court is not only a major heritage site for the New Norfolk community, Tasmania and Australia as a whole. It is also a site with significant development potential.

This Conservation Plan is a document required by the Special Development Zone of the New Norfolk Planning Scheme 1993 that encompasses Willow Court. The Intent statement in the Special Development Zone states:

- (a) Facilitate the re-development and re-use of the former Royal Derwent Hospital and Willow Court Centres;
- (b) Protect the cultural heritage values of the significant Structures and Spaces within the Zone;
- (c) Protect the natural landscape values of the Zone;
- (d) Integrate any new development with the existing open space, access and any reticulated service networks;
- (e) Ensure new Development addresses the identified potential environmental hazards;
- (f) Limit any potential land conflicts and other environmental impacts for established uses in the Zone and in adjoining Zones.

The Planning Scheme requires that a Conservation Plan be prepared to the satisfaction of the Tasmanian Heritage Council. Development of the site consistent with the policies in that Conservation Plan is "Permitted" (all other standards of the Scheme being complied with).

"In accordance with the New Norfolk Planning Scheme this Conservation Management Plan must be assessed by the Tasmanian Heritage Council.
There is a partnership agreement in place with the State Government for Willow Court that is relevant to the Conservation Plan. The key issues identified by this agreement

- Effective utilisation of the substantial built heritage at the historic precinct known as "Willow Court".
- Development of opportunities for increased participation, employment and investment in cultural activities and culturally based enterprises.
- The protection and management of Derwent Valley's cultural heritage assets. The need to identify the unique cultural product of the Derwent Valley, and the product from any future redevelopment of Willow Court, as a basis for increased participation in strategic tourism industry development, training, marketing and promotional activity opportunities. 1

Development that complies with the principles of the Conservation Plan but which may not be specifically provided for in the Conservation Plan is discretionary. This demonstration of compliance with the principles of the Conservation Plan is to be provided with any planning applications for development of the site and will be considered by the Derwent Valley Council and the Tasmanian Heritage Council. Included in such applications will be the statutory public advertising of the proposal and the rights to public representation and appeal."<sup>2</sup>

Stages of the Conservation Plan

are:

The subject of Stage A, prepared by Nelson, Barwick, Slatyer & Loveday in 2003, is the area of Willow Court that was sold for private development.

The report on Stage B, known as the Oval Precinct, by Nelson, Barwick & Loveday in 2004 was prepared in response to expressions of interest to develop this area. The report for Stage C, covering the buildings known as Bronte House and the Barracks was prepared by Scripps, Knaggs, Barwick & Loveday 2005 related to buildings that were to be retained by the council

Stage D of the Conservation Plan, the area covered within this report, is an extension of Part C and covers land and buildings which currently remain in Council ownership. This report, at the request of the Derwent Valley Council, is a response to private expressions of interest in developing these portions of the site. It is recognized that the preservation of the built fabric of the institution is of cultural significance and that maintenance of the buildings and landscape is facillitated by occupation. This Conservation Management Plan is a mechanism by which potential developers and the council can assess the merit and suitability of future development proposals.

Conservation Plan Methodology

This Conservation Management Plan uses the same structure as previous stages. The following is the methodology extracted from Stage B:

"The objective of this Conservation Plan is to identify the heritage significance of each of the buildings and landscape areas and develop conservation policies to guide development in accordance with their heritage significance. This follows the process outlined by James Kerr In The Conservation Plan and in The ICOMOS Burra Charter. The history of this part of the site has been based on both primary and secondary documentary sources. It has also been based on oral history interviews conducted with former employees of Willow Court.

lbid p2.

Nelson, Barwick and Loveday. Willow Court Conservation Management Plan – Stage B Oval Precinct. 2004. pp 1-2 Introduction

This Conservation Plan has been undertaken with a specific objective, that is, to identify uses and development appropriate to the buildings' significance which can become 'permitted' under the Planning Scheme. This means that some tasks undertaken in other conservation plans such as a detailed photographic or graphic recording of building elements such as windows, doors, fireplaces, skirting boards architraves and cornices do not form part of this conservation plan. Policies have been developed, however, which ensure that these building details will be conserved. Photographs and plans of each building have been included to be read in conjunction with the building histories, statements of significance and conservation policies. As the future uses for this part of the site had not been finally determined, the specific requirements of the relevant statutory controls such as the Planning Scheme, the Building Code of Australia and The Disability Discrimination Act were not considered for this study as their application is dependent on use and building type classification.

#### Methodology

- Prepare a history of this part of the site based on documentary and photographic sources and oral history interviews
- Assess the historic heritage significance
- Prepare statements of significance
- Identify the significant elements and apply relative ratings of importance.
- Develop conservation policies
- Assess suitability of known future uses against heritage significance

Oral history interviews were conducted with previous Willow court employees: Bob Schnierer and John Bevan for the Industrial Therapy Building; Nora Johnson, Denis Whelan and Lou Rice for Allonah A Ward; and Tony Nicholson for both buildings.

Building and landscape histories were compiled by Paul Johnston (industrial therapy) and Miranda Morris (Allonah) with the assistance of Ryan Strating. Sue Small was consulted on landscape significance.

Statements of significance and conservation policies were developed by the project team.

## Wider Values of Willow Court

The local significance of the site is derived partly from the location of the site; it occupies a large portion of the floor of the natural amphitheatre formed by the 'strikingly beautiful landscape' surrounding New Norfolk and partly due to the proximity to the town centre of an institution that, in history, when public perceptions were rather more harsh than presently, has suffered a widespread social stigma resulting from its use as a state institution for the care of disabled and mentally ill people.

Willow Court is the site of an institution that experienced continuous development and occupation from 1830's until 2000. The built form and landscape express the changing way that disabled and mentally ill people were treated by the medical and therapeutic professions and viewed by broader community attitudes. It offers an important site for learning about our cultural history and evolution. <sup>3</sup>

<sup>&</sup>lt;sup>3</sup> Austral Archeology. Willow Court/Royal Derwent Hospital Precinct Study. Volume 2 Heritage Assessment. October 1996.

The following is an extract from the Stage B Report by Nelson, Barwick and Loveday, that identifies the importance of Willow Court as part of our cultural heritage.

"Willow Court displays social history through many periods of time to the present day. It is not a static element set in a particular period.

it also demonstrates a specific arena of social history rarely made available to the public and often misunderstood - the area of how society copes with people it considers have mental illnesses and/or disabilities.

Willow Court has social relevance to living people; both in New Norfolk and many places beyond. Many of these experiences are fraught. unhappy and possibly unresolved. The impact is not just to individuals but whole families and the wider community.

Willow Court demonstrates political history and bureaucratic history as well as medical history and gives an insight into social constructs and misconceptions through the ages. It demonstrates how we treat each other then and now. It demonstrates that in many instances our approaches have changed little through the ages, despite new buildings and new medicines or medical ideas.

Both the spaces around buildings and the buildings themselves reflect the social cultural values through the ages.

There are significant architectural elements on the site as well as spatial forms and landscape elements.

The site as a whole ... [has] a cohesiveness which is part of its heritage significance. It is important to maintain the "campus" nature of the site and ensure it is not segmented through the impact of separate uses across the site. Its overall nature through various periods of its history should remain evident." 4

"Statements of significance for the site as a whole have been previously prepared for the Register of the National Estate listing and the Tasmanian Heritage Register listing.

Whilst this study has uncovered more historical information and undertaken further levels of assessment, a new statement of significance has not been included at this stage but will be formulated when the entire site has been studied." 5

This conservation plan recognizes the wider values of the precinct as a whole as determined by previous plans and considers that with the completion of the final plans for the site, it is imperative that a 'whole of site' statement of significance is prepared to enable an appreciation of the importance of Willow Court to the Tasmanian community.

#### Buildings in this Study

There are two buildings addressed in this conservation plan:

- Allonah House (previously known as 'A Ward')
- Industrial Therapy

Both building have been assessed for their overall significance and given an indicative rating of high, medium or low significance for the building.

Elements within the buildings have then been identified, given ratings of significance and policy recommendations made to ensure that the heritage significance of the buildings is retained.

<sup>&</sup>lt;sup>4</sup> Nelson, Barwick and Loveday. Willow Court Conservation Management Plan - Stage B Oval Precinct. 2004. p. 4

<sup>&</sup>lt;sup>5</sup> Ibid p4. Introduction

#### Landscape

This Conservation Plan identifies the main landscape elements and spaces that contribute to the development of landscape significance as determined in previous management plans.

'Each landscape (including gardens and courtyards) has also been examined and assessed. Each space has been given policy recommendations, a grade of overall value and elements to be retained to ensure continuity of the site's history are The significance of the landscape development has also been determined. identified and overall policies identified. 16

#### Aboriginal Heritage

An assessment of Aboriginal archeological values was made in September 1996. The recommendations stated that some sites on the East side of the Lachlan River should remain free from development, however no such areas were identified in the Willow Court study area.

Further study on the sites' Aboriginal Heritage, carried out in September 2003 by Rocky Sainty, as part of Stage A of the conservation plan found that there were no sites, however, due to the amount of Aboriginal sites in the area...

... Aboriginal sites may possibly be found beneath existing buildings. However as no Aboriginal sites were found within the study area there is no objection to the works proceeding as it is unlikely to impact upon Aboriginal sites. If any Aboriginal sites are unearthed once works begin, then works are to cease and the Tasmanian Aboriginal Land Council and the Aboriginal Heritage Section should be contacted immediately.

As contained under Section 14(1) of The Aboriginal Relics Act 1975:

"Except as otherwise provided in this Act, no person shall, otherwise than in accordance with the terms of a permit granted by the Minister on the recommendation of the Director-

(a) destroy, damage, deface, conceal or otherwise interfere with a relic."7

<sup>&</sup>lt;sup>6</sup> ibid. p. 5

#### **Summary of Recommendations**

#### Allonah, A Ward

Principles for Redevelopment

The Allonah building is to be retained and conserved to provide an interpretation of its history and its relationship to the Willow Court site.

The extent of its retention is determined by the specific building elements that are characteristic of it's design and function, as well as its presence on the site.

The adjoining landscape areas may not be significant in their specific elements, however, their relationship to the building and the rest of the site are important characteristics to appreciate significance.

Utilisation of existing spaces and functions is encouraged, however, the lack of natural light and ventilation for new rooms will necessitate alterations which in order to retain the character of the building, will have to be largely confined to existing openings. The solid and loadbearing construction will not be altered economically.

The high security design elements are to be preserved as a distinct part of the building and the conservation of these as an integrated interpretation area is promoted with public access encouraged. These include the modesty screen, single bedrooms, raised nurses station, bathroom and the secure yard. Reuse of these elements with reversible alterations is acceptable.

Allonah occupies a prominent position at the corner of the Willow Court. The raising of the ground level of this part of the site provides an important vantage point for the visual connection with the Royal Derwent Hospital site. Together with the axial approach of the entry road, emphasized by the remaining perimeter wall, these spaces are important open landscape elements that are to be retained. Public access to these spaces is encouraged. Consideration should be given to retaining in council ownership the old perimeter wall and the access road it supports.

The archaeological potential of the site and the demolition fill used in the foundations of the building should be investigated.

Redevelopment is constrained to new building elements in the rear yard and internal alterations towards the southern part of the building. New openings visible to the exterior are acceptable when confined within existing structural elements to retain similar opening patterns.

#### Adaptive reuse potential

The reuse of the building will require a function that is compatible with the existing spatial arrangement. The building has already been reused for a nursery and storage area with offices for site maintenance and thus demonstrates the capacity for other uses.

The characteristics of high security design are significant and, to preserve this, uses should be largely internalized and focused on the secure yard.

Commercial operations could make use of the small bedrooms as storage spaces, offices, or particular technical uses requiring isolation, such as laboratories or testing

facilities. Climate control services for heating and ventilation may be able to utilize existing ducting.

Day areas are larger in area than the smaller bedroom areas. They have good potential for natural light and ventilation and connection to the outside areas.

These spaces are suitable for group rooms for training, dining, lounge, shared offices, or studio spaces and are well supported by existing toilet and kitchen facilities which can be upgraded.

## Industrial Therapy Building

Principles of Redevelopment

The Industrial Therapy Building should be retained in its current location.

Despite being of low significance, it is able to demonstrate the role of Industrial Therapy in the later years of the Institution through its history as a service building.

Subsequently, its construction elements of prefabricated steel portal framing and Kliplock cladding and roofing should be retained to demonstrate the functional and industrial character of the building. A portion of the substantial kitchen exhaust and plant is to be retained to enhance this interpretation.

New construction is to be restricted to the rear yard and new work should be utilitarian, without ornament or embellishment.

The spatial arrangement should be retained with a 'shopfront' presenting to the public areas.

The surroundings are to be investigated for archaeological potential where the remnants of Wards A and B and their outbuildings including the mortuary, may be found.

The perimeter wall is to be maintained and consideration given to retaining the wall in council ownership.

#### Adaptive Reuse Potential

Its utilitarian design, being a large open area and clear spanning frame, will allow many possible reuses with minimal alteration.

Its retention as a light Industrial facility is preferred as it allows the clearest interpretation of its history.

Alteration for other uses may not be economic against options for demolition and/or relocation, however, partial adaption for other uses allied to light industrial uses may be suitable.

## **ALLONAH or A WARD**

department of public works 1965-67

#### History of The Building

Maximum Security Ward (Female). This small and easily managed ward will accommodate girls with behavioural problems of an antisocial kind.<sup>1</sup>



Allonah, originally conceived as the Female High Security Ward, and known as Ward A for most of its working life, was part of a major reconstruction programme that had its roots in a report by Dr Catarinich, Victoria's Director of Mental Hygiene in 1944. Victoria at that time was in the process of completely demolishing one of its own state mental hospitals, Yarra Bend, after a public outcry about its mediaeval conditions. Dr Catarinich, after examining Lachlan Park, indicated that the overcrowded, obsolescent, unhygienic and structurally unsound buildings were severely hampering modern methods of treatment and he recommended that the whole site that is now identified as Willow Court should be abandoned.

In 1949 the Parliamentary Standing Committee on Public Works was instructed to report on proposals for a new mental hospital. It was to take up Dr Catarinich's recommendation and put forward plans for a completely new hospital for the mentally ill on the eastern side of the river at an estimated cost of £1.5 million. But the old site was not to be entirely abandoned. Dr Brothers, Director of Mental Hygiene, who had himself been the administrator of Lachlan Park, 2 proposed that the site be remodelled as a 'Mental Defectives Colony' which would cater for the range of people identified under the Mental Deficiency Act (1920) many of who were now at St Johns Park. The financial outlay and the extent of the work proposed stretched the building program over a period of twenty years, the changes at the West Hospital, now Willow Court coming last.

The first clear program for the West Hospital was drawn up in 1964 when the Parliamentary Standing Committee on Public Works was asked to report on the proposed

<sup>2</sup> 1936. Gowlland, 155

<sup>&</sup>lt;sup>1</sup> Parliamentary Standing Committee on Public Works (PSCPW), Proposed redevelopment: Mental Defectives Colony, Lachlan Park Hospital, in Tasmanian government Parliamentary papers. 1964, Government of Tasmania Hobart. August 12, 1964. Chairman T. G. Pearsall. 8

redevelopment of the site as a Mental Defectives Colony.<sup>3</sup> The purpose of this 'colony' was described by Dr JRV Foxton, Director of Psychiatric Services, was.

to care for mentally deficient patients, ranging from infancy to old age on one hand and from total idiocy to high-grade feeble mindedness on the other. Therefore, provision [had] to be made for those who [were] totally dependent (ie more all less permanently confined to bed), for children adolescent [sic] and adults, and for patients who require secure detention to protect the public. 4

These categorisations follow those of the Mental Deficiency Act (1920) which remained in force until 1963. Section 5 of the Act listed four classes of 'defectives'. The first three, idiots, imbeciles, and feeble-minded persons reflected different levels of ability to self care. The fourth class, 'moral defectives' covered people who, 'from an early age [displayed] some permanent mental defect coupled with strong vicious or criminal propensities of which punishment has had little or no deterrent effect'. It was this last category, encompassing a diminished 'moral' rather than intellectual ability that captured the girls who would be incarcerated in the Female Maximum Security Ward.

The proposal for a high security female ward with a specific focus on young women came at a time when there was what amounted to a moral panic around the delinquency of girls. Institutions were being proposed as early as 1941, and a home for delinquent women was discussed at the ALP conference in 1947. Ward A was one of several building programs to deal with women who ventured outside social constructs of ideal femininity. At Latrobe in 1960 a building, 'Weeroona', had been purchased for a girls' training centre whose alterations included a secure unit. It opened in 1961, catering for girls aged between 12 and 17 who were trained for domestic service but were also under psychiatric surveillance. The same year a female prison was constructed at Risdon, where the women would be encouraged into femininity with the decor of 'curtains, dressing tables and attractive light shades' in their cells.

Around the hospital those incarcerated in Wards A and C were known as the 'Bad Girls' and 'Bad Boys'. <sup>10</sup> Lou Rice, in charge of Ward C, said that the boys he selected were those with the highest IQ from secure Ward 10. The girls appear not to have been chosen from a particular ward, but several. Nora Johnson, who was Charge Nurse when Ward A opened, commented that many of them. 'highly intelligent'. Both Nora Johnson and Lou Rice described their charges as psychopaths. <sup>11</sup> Although this classification had a long history its application had been sporadic and loosely defined until the 1940s when a 'trickle of research became a torrent'. <sup>12</sup> The definition of a psychopath given by McCord & McCord in 1964 was an:

<sup>&</sup>lt;sup>3</sup> Parliamentary Standing Committee on Public Works (PSCPW), Proposed redevelopment: Mental Defectives Colony, Lachlan Park Hospital, in Tasmanian government Parliamentary papers. 1964, Government of Tasmania Hobart. August 12, 1964. Chairman T. G. Pearsall.

<sup>&</sup>lt;sup>4</sup> PSCPW, 1964. 3

<sup>&</sup>lt;sup>5</sup> Mental Deficiency Act, 1920 (11 Geo. V. No. 50), Tasmanian Statutes, 1826 to 1959, volume 4, subsection 5.

<sup>&</sup>lt;sup>6</sup> AOT HSD 1/1/5495 & 6/1/656

<sup>&</sup>lt;sup>7</sup> Standing Committee of Public Works 1960/2.

<sup>8</sup> DSW 1963/3, 5.

Standing Committee of Public Works 1961/28 & PWD 1962/46

<sup>&</sup>lt;sup>10</sup> Lou Rice, pers. com. 24. 6. 98

<sup>11</sup> Lou Rice, ibid., Nora Johnson, pers. com., date

<sup>&</sup>lt;sup>12</sup> William McCord & Joan McCord, *The Psychopath: an essay on the criminal mind*, Princeton, New Jersey: D. van Nostrand Company, 1964, (based on their *Psychopathy and Delinquency*, New York: Grune and Stratton, 1956) vii.

Asocial, aggressive, highly impulsive person, who feels little or no guilt and is unable to form lasting bonds of affection with other human beings. 13

Already in 1942 studies had shown that the institutionalisation of psychopaths had very little beneficial effect; nor did the range of treatments from drugs and lobotomies to hypnosis and group therapy.14 This was borne out by Nora Johnson's comment: 'I don't think we did a damn thing for them.... We tried.'15

What the McCords did find was that childhood rejection greatly exacerbated the manifestations of aggressive psychopathy.16 And institutionalisation could be seen as a reinforcement of rejection. The girls in Ward A seldom had visitors. They had come to the Royal Derwent, Nora Johnson said, because they were considered 'a pest in the community. Often, what was then defined as delinquency in girls has more recently been seen a response to trauma, particularly child abuse. 17 Although she was not generally privy to their histories when she did get a glimpse she would think 'you poor bugger, you never had a chance from the word 'go'.18

Psychopathology often manifested in delinquent behaviour and, although behaviour that was conceived of as delinquent was only sometimes identified as clinically psychopathological, the two were often intertwined. Furthermore, different behaviours were considered delinquent and/or psychopathological depending on a person's gender. Carol Smart indicates that girls who rebelled or were sexually active were perceived as exhibiting signs 'of a much deeper pathology than deviancy by a male'.19 Studies have indicated that not only were girls more likely to be pathologised for their sexual activity but they were also more likely to be placed in institutional care to 'protect them from themselves'.20 This was true not only of girls considered psychopaths but also those considered 'sub normal'.21 In 1964 this view was presented to the Parliamentary Standing Committee on Public Works by Dr JRC Weatherly, Deputy Psychiatrist in the Department of Health Services and former Superintendent of Lachlan Park. He told the committee 'a large proportion of the inmates at Lachlan Park had been committed by the courts because they were unmanageable or because, in the case of girls, they had been unduly promiscuous',22

The Mental Deficiency Act was repealed in 1963 and replaced by the Mental Health Act (1963, No. 63), reflecting changing attitudes. In section 4, the classification of a moral defective had been changed to a person with a 'psychopathic disorder' who was 'abnormally aggressive or seriously irresponsible'. For women the most significant change, though, was an additional clause:

<sup>&</sup>lt;sup>13</sup> ibid, 3.

<sup>&</sup>lt;sup>14</sup> June Purkiss, a Senior Nursing Officer, remembers 'naughty girls' often been given ECT. pers. com. 6.8.98.

<sup>15</sup> Nora Johnson, date <sup>16</sup> McCord, chapter 5

<sup>&</sup>lt;sup>17</sup> Denise Russell, Women, Madness and Medicine, Cambridge: Polity Press, 1995, 101.

<sup>&</sup>lt;sup>18</sup> Nora Johnson, date

<sup>&</sup>lt;sup>19</sup> Carol Smart, Women, Crime and Criminology, London: Routledge & Kegan Paul, 1976, 133.

<sup>&</sup>lt;sup>20</sup> Amber Dean, Locking Them up to Keep Them Safe: criminalised girls in British Columbia, BC: Justice for Girls, 2005. http://www.justiceforgirls.org/publications/pdfs/jfg\_complete\_report.pdf.

21 Earlier in the 20th-century American psychiatrists marked the sexual woman as the definition of the

female psychopath. Elizabeth Lunbeck, ' "A New Generation of Women": Progressive psychiatrists and the hypersexual female', Feminist Studies, 13/3, Fall 1987, 513-543, 513. For constructions of the sub normal girl and sexuality see Gail Reekie, Measuring Immorality [reference]. <sup>22</sup> PSCPW, 1964, 10

Nothing in this section shall be construed as implying that a person may be dealt with under this act is suffering from mental disorder, or from any form of mental disorder described in this section, by reason only of promiscuity or other immoral conduct.'23 (my italics)

In spite of this new clause sexual behaviour appears to have continued to figure largely in the commitment of girls. Joan Sangster noted the correlation between expert opinion on juvenile delinquency and the reasons teenagers were apprehended: 'boys broke the law, and girls violated gender and sexual conventions'.24 Nora Johnson said that many had worked as prostitutes, but only recalls one instance when a girl was admitted who was pregnant, and she was sent away to stay with her parents.<sup>25</sup> Girls who might otherwise have been at the Royal Derwent were often listed as being at other locations, possibly because of pregnancy. In 1963, for instance, twenty five 'mentally defective girls' were detained at Mount St Canice and five at the Salvation Army Home in Lansdowne Crescent.26

During the period that A Ward was being constructed the institution was undergoing a process of gender integration but A. and C. Wards were designed to be clearly segregated. Access to the shared occupational therapy centre was considered a privilege. Lou Rice, Charge Nurse for Ward C. said that most of the women were put on the Pill, although this may have been a later date. He remembered his boys and the girls from Ward A. coming together to watch TV:

In the summertime they'd have to bring their coats up because it was too cold when they sat next to each other. Well, you'd know what was going on, but then I'd think to myself, 'well, if I was in their position, what would I do?<sup>27</sup>

Although the report on the proposed development of the Mental Defectives Colony did not appear until 1964 there was some indication in 1959 that high security wards were proposed. Furthermore, at this point the intention appears to have been for the permanent wards to be located on the eastern side. The annual report of the Department of Health Services revealed:

Two maximum security wards have been proclaimed part of the Government Institution for Defectives, as well as the Mental Hospital. This is a temporary expedient to provide maximum security for defectives with criminal records pending the construction of detention wards at the new mental hospital.28\*

Ward A was one of five new buildings to be erected under this proposal. Described as the female maximum security ward it topped a list that also included an occupational therapy building, a mixed adolescent ward, a hospital and totally dependent ward, and a school.<sup>29</sup> The new ward would cost an estimated £73 000 and

<sup>&</sup>lt;sup>23</sup> Mental Health Act, 1963 (1963, No. 63), The Acts of the Parliament of Tasmania Passed during the Year 1963 in the Twelfth Year of the Reign of Her Majesty Queen Elizabeth the Second, Hobart: Government Printer, 1964.,

<sup>&</sup>lt;sup>24</sup> Joan Sangster, Girl Trouble: female delinquency in English Canada, Toronto: Between the Lines, 2002, p 69. 25 Nora Johnson [date]

<sup>&</sup>lt;sup>26</sup> DHS 1963/72, 19.

<sup>&</sup>lt;sup>27</sup> Lou Rice, [date]

<sup>&</sup>lt;sup>28</sup> 1959/5938

<sup>&</sup>lt;sup>29</sup> PSCPW, 1964. 4

When the report was produced the plans were at a preliminary stage. One of the departmental architects was overseas [New Zealand<sup>30</sup>] 'investigating latest trends and equipment particular to building for Mental Hospitals'.<sup>31</sup>

The new ward for 20 patients was to be built at a proposed cost of £73 000 consisting a day room, dining room, kitchen, doctors room, quiet room, seclusion room, sister's room, workroom, visitors room, a toilet, 12 single rooms, one eight bed dormitory, and bathrooms.<sup>32</sup>

It was conceived as complimentary to the high security male ward 'C' which was being converted ['to be reconstructed to make it a suitable modern award for male youths with problems of antisocial behaviour'33]. The occupational therapy building was planned to service both, consisting of female and male workrooms, the main workroom, a stage, change rooms, stores, a projection room, toilets, locker rooms and staff rooms.34 Weatherly calls this a small occupational therapy unit:

In addition to space for light work of an industrial type, this building will provide space for entertainments and social activities for the patients of the male and female Maximum Security Wards.<sup>35</sup>

The annual reports of the Public Works Department and the Health Services Department show an agonisingly slow progress of the Female Security Ward and it appears that the East hospital secure wards, referred to as refractory blocks, were being built first. In 1960 the erection of the two refractory blocks was announced by the PWD as one of its projects for the coming year.36 In 1961 the plans for the Female Security Ward were being prepared. $^{37}$  In 1963 the PWD recorded that the two new refractory blocks were under construction. 38 In 1964 some indication of the reasons for the delay were revealed. While the refractory blocks were 'nearing completion', the PWD lamented that it was so short of architects that some of its work was being farmed out.39 But perhaps more importantly, given the extent of the work being done, the problem lay more with an overstretched budget. The injection of Commonwealth funds under the State Grants (Mental Health and Institutions) Act (1964) enabled the building program to progress with renewed vigour.40 In 1965 refractory blocks were announced to be complete and tenders were advertised for the 'Maximum Security Unit West'.41 It is clear that by now, if not earlier, that the new A Ward and the converted C Ward were conceived as one. The following year the building was 'well advanced'.42 And in 1967, when they were completed, the Department of Health Services described the complex as a Total Security Block, consisting of Male and Female Maximum-Security Wards'. 43

<sup>&</sup>lt;sup>30</sup> PSCPW, 1964. 8

<sup>&</sup>lt;sup>31</sup> PSCPW, 1964. 4

<sup>&</sup>lt;sup>32</sup> PSCPW, 1964. 5

<sup>&</sup>lt;sup>33</sup> PSCPW, 1964. 8

<sup>&</sup>lt;sup>34</sup> PSCPW, 1964. 5

<sup>&</sup>lt;sup>35</sup> PSCPW, 1964. 8

<sup>&</sup>lt;sup>36</sup> PWD 1960/66, 21

<sup>&</sup>lt;sup>37</sup> Health services, 1961/62, 51

<sup>&</sup>lt;sup>38</sup> DHS 1963/72, 6 & PWD 1963/66, 29.

<sup>&</sup>lt;sup>39</sup> PWD 1964/31, 31.

<sup>&</sup>lt;sup>40</sup> DHS 1964/70, 27.

<sup>&</sup>lt;sup>41</sup> PWD 1965/39.

<sup>&</sup>lt;sup>42</sup> DHS 1966/54, 27.

<sup>&</sup>lt;sup>43</sup> DHS 1967/74, 9.

The building program, particularly because of the length of time it was taking, ran almost parallel to changing ideas in mental health policy and practice. In 1959, when Ward A. was first conceptualised, the Director of Mental Health, Senior Psychologist and Senior Psychiatrist were developing a five-year plan for a 'comprehensive mental health service based on principles of the World Health Organisation'.<sup>44</sup> These focused firstly on individual patient rights and clear processes and secondly on a much broader approach to mental health care. In 1963 the first part of this focus was formalised by the Mental Health Act which replaced the antiquated Mental Hospitals Act (1858) and the Mental Deficiency Act (1920). The new act aimed 'to make fresh provisions with respect to the treatment and care of persons [suffering from mental disorder] and with respect to their property and affairs'.<sup>45</sup> It established both a Guardianship Board and a Mental Health Review Tribunal and required all patients detained under the old act to be examined and reclassified.<sup>46</sup> The girls in Ward A. came under the authority of the Guardianship Board as 'suffering from a mental disorder, being —

(ii) in the case of the patient who has not attained the age of 21 years, psychopathic disorder or subnormality, and that the disorder is of a nature or degree that warrants the reception of the patient into guardianship ....<sup>47</sup>

After the age of 16 they could apply to the Tribunal for reassessment every six months.

In 1967, a much more ambitious project was formalised in the Mental Health Services Act.<sup>48</sup> Mental health had been hampered by being structured as a hospital bounded arm of the Department of Health Services. The new act set up a Mental Health Services Commission. It was given the power to deliver mental health services in any manner it deemed appropriate; it had the ability to employ appropriate people, organise training and instruction, and conduct research.<sup>49</sup> It was to be made up of a Medical Commissioner, an Administrative Commissioner and the Clinical Commissioner who would be, where possible, the Professor of Psychiatry at the University.<sup>50</sup> It was to be assisted by an advisory committee of three: a person nominated by the Treasurer, a person experienced in business management and 'a woman with experience of work in the field of social and human relations'.<sup>51</sup> Regional psychiatric teams employing psychiatrists, psychologists, psychiatric nurses and social workers were set up for state wide services. Although the building program at the hospital continued and occupancy continued to rise — reaching a staggering 1000 in 1970 — these changes marked the beginning of the demise of institutional care.

A second innovation by the new Mental Health Services Commission that would affect the longevity of A and C Wards was the appointment of a Director of Forensic Psychiatry. The primary purpose of this position was to oversee the planning and construction of a psychiatric hospital at Risdon prison that would cater for psychopathic patients who had been committed to the Royal Derwent Hospital<sup>52</sup> via the criminal courts.<sup>53</sup> By 1982 the Royal Derwent no longer accepted forensic cases and C Ward was closed. There is no mention in the reports about A Ward, but it is unlikely that it was used for maximum-

<sup>&</sup>lt;sup>44</sup> DHS 1959/59, 38.

<sup>45</sup> Mental Health Act, 63/1963.

<sup>&</sup>lt;sup>46</sup> DHS 1965/66, 25.

<sup>&</sup>lt;sup>47</sup> Mental Health Act, 63/1963, Section 22.

<sup>&</sup>lt;sup>48</sup> Mental Health Services Act, 24/1967.

<sup>&</sup>lt;sup>49</sup> Mental Health Services Act, 24/1967, Section 3.

Mental Health Services Act, 24/1967, Section 4.
 Mental Health Services Act, 24/1967, Section 7.

<sup>52</sup> Lachlan Park Hospital was renamed Royal Derwent Hospital in March 1968.

<sup>&</sup>lt;sup>53</sup> MHSC 1973-4, 1974/74, 5

security after this point. The occupational therapy building that had been shared by A and C Wards was being used for activities for the intellectually handicapped residents. These included regular disco and talent shows and an annual three-day sports carnival which would, made in a barbecue, sideshows and variety entertainment with participation of residents, staff and the public.<sup>54</sup> This change of use foreshadowed the official separation of administration of the East and West Hospitals with the West becoming the Willow Court Residential Centre for Intellectually Handicapped.<sup>55</sup>

The boost to the hospital provided by the establishment of a Mental Health Services Commission had subsided by 1982 when budgetary cutbacks plunged it into crisis, and the lack of expenditure on the upkeep of buildings, both East and West, at the Royal Derwent Hospital saw them falling into disrepair.<sup>56</sup>

The design of the Female High Security Ward is difficult to attribute. A model of the redevelopment at Willow Court and plans of the new buildings were presented to the Parliamentary Standing Committee for Public Works by the Deputy Chief Architect of the Public Works Department, S. T. Tomlinson, in 1964,57 but it was the District Architect of the South Eastern region, G. F. Miley who attended the site meetings.<sup>58</sup> And Nora Johnson who attended the initial planning meetings thought that an architect employed by the Hobart City Council had been involved.<sup>59</sup> Given the shortage of architects at this time it is possible that several people contributed at different stages. It would appear though that other institutions were examined before the design was completed. Tomlinson told the committee that one of the departmental architects was in New Zealand 'investigating the latest trends and equipment particular to building for Mental Hospitals'.60 Nora Johnson remembers the plans as having been considerably altered between the initial planning and completion in mid-1967. Unlike much of the rebuilding at the West Hospital site, the Female High Security Ward was located in an area not previously used, although in the 1890s it had been the proposed site for a male refractory ward after the transfer of criminal lunatics from the Campbell Street asylum in Hobart.61 One of the reasons for this is not going ahead may well have been the extent of fill required before construction could start, a factor that contributed to the delay of the Female High Security Ward. The contract for building A Ward was won by Allan Rhodes Constructions, a company based at New Norfolk.62

The building shared many attributes with a prison. The walls both internal and external were thick concrete; the windows reinforced with metal grilles. The sleeping arrangements included an eight bed dormitory for the girls who behaved and twelve isolated cells for those who didn't. The latter had massive cell doors with Judas windows and asylum locks. The day rooms were kept under surveillance from the 'bioscope room', a glassed-in space raised on a dais, a design concept that had its roots in the

<sup>&</sup>lt;sup>54</sup> MHSC 1981-2, 1982/13, 13.

<sup>&</sup>lt;sup>55</sup> MHSC 1984-5 1985/11.

<sup>&</sup>lt;sup>56</sup> MHSC 1981 -2 1982/13, 7.

<sup>&</sup>lt;sup>57</sup> PSCPW 1964.

<sup>&</sup>lt;sup>58</sup> AOT [reference] Lachlan Park Hospital. Erection Female Maximum Security Ward, Occupational Therapy Centre & Male Maximum Security Ward C. alterations: site minutes 18.11.65-23.2.67. (Site Minutes)

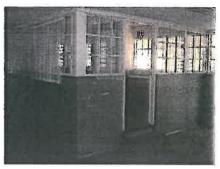
<sup>&</sup>lt;sup>59</sup> Nora Johnson

<sup>&</sup>lt;sup>60</sup> PSCPW 1964, 4 & 8

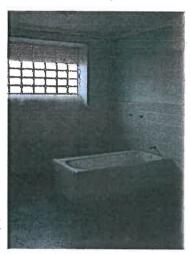
<sup>&</sup>lt;sup>61</sup> Gowlland, 110-111 & Austral Archaeology, Willow Court/Royal Derwent Hospital Precinct Study, volume 2, Hobart, 1996, 8.

<sup>62</sup> Site Minutes. Contract start was 1.11.1965 and handover date 19.5.1967.

Benthamite panopticon. 63 The bathrooms provided no privacy. The only outside area provided was a yard enclosed by concrete walls 15 feet high. Some concessions were made through furnishing. Curtains were provided: Daytona Brown or Yuma Tan for the cells facing the yard, or the lighter Georgia Green or Vermont White for the cells facing the roadway. The dormitory received a more cheerful Pierrot fabric. The dining-room curtains were brown and orange, the day room red and grey as were the quiet and seclusion rooms. The doctor's room was curtained in olive and green and so was the visitors' room which was situated off the entrance lobby but seldom used.



View of the sisters station from the corridor



View of the bath area with highlight windows fronting the secure yard.

The grimness of this environment was offset on the one hand by the primitive conditions of the buildings that had preceded it — buckets for toilets, straw mattresses, inadequate heating, forms and trestles for eating — and on the other by the humanising efforts of those who lived and worked there. Nora Johnson tried, although she met with some resistance, to arrange easy chairs in groups rather than the institutional ranking against the walls and organised a smoking/coffee corner. Initially the meals had all been prepared in the central hospital kitchens on the eastern side and delivered to the wards, but Nora Johnson and, more particularly, her deputy Minnie Whelan introduced the girls to cooking. As well as cooking the meals, they served them at the tables, 'a bit like a restaurant — because they didn't have any manners'. Most of the ingredients were delivered to the back door, but the girls grew their own vegetables along one of the walls in the yard.<sup>64</sup>



View of single bedroom ronting secure yard



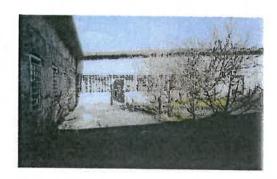
View of day room southern window

<sup>&</sup>lt;sup>63</sup> The words 'cells', 'asylum locks', 'bioscope room' are all used in the site minutes.

<sup>&</sup>lt;sup>64</sup> Nora Johnson.

The days were monotonous. During the week the girls who had behaved went to the occupational therapy building across the yard and sat at trestle tables packing pegs for the Pioneer Peg Factory in New Norfolk. 65 Nora Johnson referred to this as slave labour. The girls were paid just enough to buy a few cigarettes but the big attraction was sitting with the boys. The only other paid work Nora Johnson remembers was collating for the Government Printer which the girls undertook in the day room. The monotony was sometimes relieved by outsiders. Mylie Peppin taught those who wish to learn how to throw pots and one of the Cazaleys came to the ward on Saturdays and taught them physical exercises. Unlike Ward C. which had a yard about five times the size of A, full-scale sport was not possible in the girls yard. They did have a netball net and occasionally played a self defined version of the game which was limited to some extent by the planting that Nora Johnson and the girls had undertaken to prettify the yard. It was much more an area to sit in 66





View out bedroom window through 'modesty' screen towards Lachlan river

Secure yard with fruit trees and entry door from the dining room

Occasionally there was socials at the occupational therapy centre and they played songs such as Johnny Farnham's 'Sadie the Cleaning Lady' as loud as they could on the gramophone, or they watched TV. But evenings were short; the girls were locked in their cells at 8 p.m. and stayed there until seven next morning. Very occasionally was this varied, to watch the Beatles on TV, for instance, during their tour of Australia. Only one nurse was on duty at night and, Nora Johnson commented, 'she'd be a damned fool to open a locked cell in the night'.<sup>67</sup>

Although the architecture and regime suggest the need for a high level of control, patients in Ward A writing in the hospital newspaper *Parkland News* in 1969 indicate that it was not all grim. In July that year there were only ten girls and residents and Cheryl H. wrote that it was being operated as more of an open ward. In September Gwen, Rita, Marie and Ann wrote of a trip they had made with Nurses Woolley and Molloy to Marion Bay Beach. 68 There is a sense that this ward was obsolete even whilst it was being built. The last girls left around 1985 and alterations were made to the toilets to fit it for male occupancy. By 1990 the ward had closed and the building and yard were used as a nursery as part of a structured employment project for people with intellectual disabilities. 69

<sup>&</sup>lt;sup>65</sup> This was one of the main activities at the hospital and left a void when the peg factory closed at the end of 1975.

<sup>66</sup> Nora Johnson.

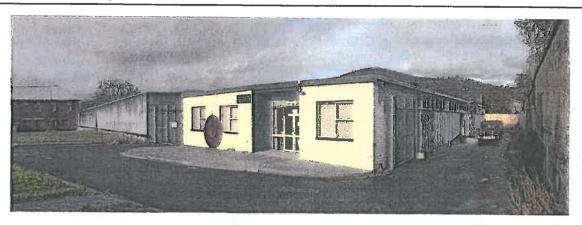
<sup>&</sup>lt;sup>67</sup> Nora Johnson

<sup>68</sup> SLT Tasmaniana Parkland News, July-November 1969.

<sup>&</sup>lt;sup>69</sup> Organised by Bob Schnierer, pers.com. 12.7.06.

# industrial therapy building

department of public works 1973



#### history of the building

For most of its recorded history, the residents of Willow Court, in all of its forms, have been employed in activities.

Throughout the 19<sup>th</sup> century the activities were largely orientated towards maintenance, repair and servicing of the asylum itself and ranged from 'cleaning wards, assisting in the kitchen and sculleries, working in the wash house and sewing in the needle room. Men were cutting firewood, working in the garden and recreation ground, doing carpentry, tailoring, boot making and repairing drains.'

In the later years of the 19th century, much criticism was recorded that menial activities were not suitable for patients and that 'the monotony of work undermined any therapeutic effect' <sup>2</sup>

It is then somewhat surprising then to reveal that 'occupational therapy' at Willow Court in the 1960's, involved groups of male and female inmates spending the waking hours of their days packing pegs for a local manufacturer.

Industrial Therapy however was different. The end product varied and thus the history of Industrial Therapy at Willow Court is largely one of the provision of equipment to occupy tradesmen/patients to produce manufactured goods.

While Occupational Therapy was concerned with the process of making with no necessary outcome and was largely centred around craft based activities, Industrial Therapy provided products for sale both outside of the institution, or for specific tasks within the institution. <sup>3</sup>

In its most recent incarnation, industrial therapy was renamed, 'structured employment' and operated on both sides of the Lachlan River for both the mentally ill and the mentally disabled.

<sup>2</sup> Nelson et al p.67

<sup>&</sup>lt;sup>1</sup> Crabbe 1886.

<sup>&</sup>lt;sup>3</sup> John Bevan per. com. 1.06.06

With the completion of wards in the East Hospital, (to be called the Royal Derwent Hospital, RDH), Industrial therapy began on the site with the adoption of the remaining female ward K2, following the mid 1960's demolition of the adjoining of the 1887s Female refractory buildings.

K2, built later in 1901 as an additional ward wing to K1, was modified for wood and metal workshops for the use by both the mentally ill patients and disabled patients.



K2 Former Industrial Therapy from Part A of CMP Nelson, Barwick, Slatyer & Loveday 2003

Ward A. was constructed in 1859 and referred to as the 'Gentleman's Cottage'.

Ward B, the Male Refractory Building was constructed in 1893.

Both buildings occupied the corner of the Willow Court site bounded by Humphrey and Grey Streets, as well as several ancillary outbuildings.

Both were demolished along with K1 in the major redevelopment of Willow court in the mid 1960's.



Southern corner of Willow Court, current location of Industrial Therapy is in bottom right corner on far side of Humphrey Street where the original Wards B is shown. TMAG Q2478



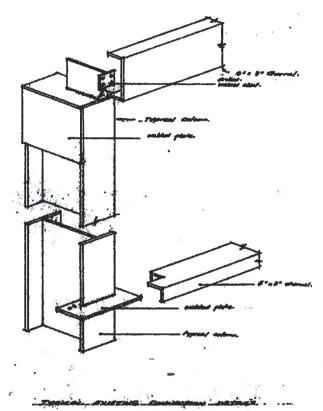
Southern end of Willow Court showing the Gentleman's Cottage adjacent the Male Refractory Ward. circa 1940.

The Industrial Therapy Building, designed by the Public Works Department and constructed in 1973 was located in the general area of the demolished Ward A and B. The boundary wall that formed the enclosure to the Male Division of the Hospital was not demolished and remains to this day.

<sup>&</sup>lt;sup>4</sup> Nelson et al p.63

The initial use of the Industrial Therapy Building, however, was as a temporary kitchen servicing the Willow Court and Royal Derwent Hospital complex until 1976 while the main kitchen on the RDH site was being refurbished. The kitchen was eventually closed in 1976 and the building was vacant for a number of years. <sup>5</sup>

Mention is made in previous studies and local anecdotes indicate that its previous use was as a temporary kitchen in 1953 on the RDH site, however, no firm evidence supports these claims. § The original drawings do demonstrate that the building was made up of prefabricated components and that indicates that it may well have been relocated to its present location.



Detail showing prefabricated components.
From 'Industrial Therapy Workshop, RDH, New Norfolk, C62.329.1' 1973.
Department of Public Works Tasmania, dwg.No. 05

With the inclusion of a pre cast concrete business in the Industrial Therapy programme in 1985, the building in its current location assumed the role it was originally intended. The large column free concrete floor was ideal for concrete form work and the moving of heavy casting elements. With the segregation of administration at this time with Mental Health managed from RDH and Disability from WC, the Industrial Therapy Building was unique in accepting patients from both sides of the river with a typical 50/50 ratio. Given the name 'Structured Employment' the patient / worker was always male and physically suitable for the heavy lifting involved and often included recovering alcoholics made up of tradesmen and footballers. 7

<sup>&</sup>lt;sup>5</sup> Bob Schnierer per. com. 11.07.06

<sup>&</sup>lt;sup>6</sup> Austral Archaeology, Willow Court/Royal Derwent Hospital Precinct Study, Vol. 2, Heritage Assessment. P.17

<sup>&</sup>lt;sup>7</sup> John Bevan per. com. 1.06.06

Structured Employment was also able to integrate Occupational and Industrial Therapies with the design and making of moulds being created in Occupational Therapy, concrete molding in Industrial Therapy and the finishing including painting being performed back in the Occupational Therapy Building. 8

timline at willow court	1965	1970	1975	1980	1985	1990	1995	2000
Industrial Therapy		kitchen 1973 - 1976		concrete works		woodwork workshop		
				61-1991		1991- 26 jan 2001		

Willow Court closed End Oct 2000

Industrial therapy workshop timeline.

Woodwork and metalwork housed in K2 were transferred to the vacated Ward 10 in the East Hospital. With the relocation in the care for recovering alcoholics to St. John's Park Hospital, in the early 1990's, industrial therapy experienced a decline in ablebodied males suitable for the heavy lifting in the precast concrete works. Wood and metal work equipment was then relocated into the Industrial Therapy Building where it remained until the closure of the site in 2000.9

With a capacity for 12 working persons, the building produced a wide variety of goods including outdoor furniture for 'K and D' garden shops and pencil boxes for the Education Department in its wood shop, and provided maintenance for wheelchairs in the metal shop. Furniture restoration projects were completed for private orders and step ladders for the Hospitals use. Special jigs were created to facilitate construction by disabled workers while less capable workers were given assistant tasks to perform.

Patients would also produce their own work, typically small furniture for family gifts and high quality furniture as presentations to retiring management staff. <sup>10</sup>

The building continued to operate until the final closure of the entire site, increasingly being utilized for maintenance work as part of the 'structured employment' programme.



outdoor furniture timber components

'Bronte' Jarrah garden setting constructed in

industrial Therapy for K and D Hardware stores.

Bob Schnierer August 1999 Photographic Inventory.

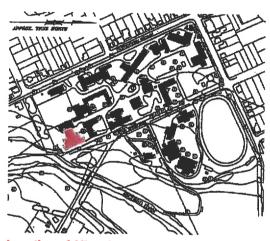
<sup>&</sup>lt;sup>8</sup> Bob Schnierer per. com. 11.07.06

<sup>&</sup>lt;sup>9</sup> Bob Schnierer per. com. 11.07.06

<sup>&</sup>lt;sup>10</sup> John Bevan per. com. 1.06.06

### Allonah (or A Ward)

#### SITE REFERENCE



#### **PHOTO**



Location of Allonah

# Description of the Place

'A' Ward later known as Allonah, was designed by the Department of Public Works in 1965 as the 'Female Maximum Security Ward' and was documented and constructed together with the Occupational Therapy Block and Ward C.

Built between November 1965 and May 1967, the contract was awarded to New Norfolk builder Allan Rhodes Constructions for 292,769 pounds.

The working drawings H5 284 to H5 289 are an accurate representation as found on site and provide an indication of materials and construction methods. Importantly, they also reveal the extent of cut and fill and natural ground levels associated with the site. The contract works also included the Occupational Therapy Block which was documented with A ward, as well as C ward which was documented separately.

A new screen wall to the northwestern elevation incorporates an extended overhang for this part of the building. Together with minor alterations from the later years of occupation, this screen wall is the main deviation from the design as drawn

Allonah is located on the northeast corner of the Willow court site bounded by the original Grey Street (now an avenue of trees providing public access to the river) and the Avenue as it splays towards its crossing point on the Lachlan River. Consequently, the natural ground level at this site rapidly falls away towards the river bank, with a change in level of 17 feet over the site. The gradient then prohibited simple construction and, subsequently, there is no evidence of prior constructions on the site.

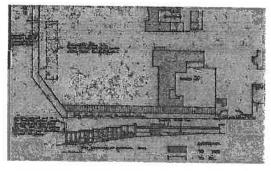
The site is bounded by a high brick wall that originally enclosed much of the site and extends from the original entry gate, down the avenue, stepping to follow the slope, and returning up Grey Street and along Humphrey Street.

# Allonah (or A Ward)

The construction of A Ward necessitated substantial filling over approximately half of the area of the site, to a height approximately 10 feet above natural ground level at the intersection with the boundary wall.



Aerial photograph, circa 1940



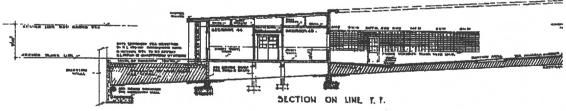
Wall elevation and plan detail, Demolition of Old Buildings, Lachlan Park Hospital New Norfolk, Dept. of Public Works H5/274 1964.

A substantial retaining wall was constructed immediately behind the older brick perimeter wall and the fill was provided by the substantial demolition programme that preceded the construction of Allonah. The demolition drawing detailed above indicates the site for demolition rubble.

The concrete footings for the building were large, wide and deep. Designed as strip footings they extended through the depth of the fill. A review of the footing design, however, was required during construction that necessitated further footing depth. This added to construction time and costs.<sup>1</sup>

Walls were constructed with insitu concrete to an internal skin that was faced externally in common bond red brickwork. The insitu concrete walls are exposed internally to the courtyard, and exhibit a smooth float finish and overhanging security detail. Insitu concrete of the walls continued to form ceilings over the bedroom areas to create an impenetrable enclosure.

SECTION ON LINE D D.



Section detail, Female Maximum Security Ward, Occupational Therapy Block Lachlan Park Hospital, Dept. of Public Works, H5/287, 1965.

<sup>1</sup> Site minutes various meetings

#### Allonah (or A Ward)

Roof structure was strutted off ceilings and internal walls and supported a single pitch skillion roof extending over both the Occupational Therapy Block, and the Allonah Ward. The walls of the courtyard also followed this single rake which in turn follows the natural ground line.

The roof of the north east elevation extends to form a large overhang supported by concrete block piers at regular intervals. Between piers a concrete block screenwall infills those bays that front the bedrooms. Similar free standing walls are found screening the bedroom windows of the dormitory room on the north west wing. The blockwork, laid on its side and arranged to a pattern, provided a 'modesty' wall that restricted both view and interaction with bedrooms.

Detail design work throughout the building reflects the high security intention of its design.

Flush finishes to internal surface and junctions with door and window openings as well as the absence of built in furniture, prevented climbing, or hanging points.

Thickness of materials including glazing set within gridded steel frames and heavy doors framed in steel with minimal ventilation and viewing apertures, present a robust deterent for breakage.

Windows are fixed glazed with mechanical ventilation provided to all rooms.

Internal surfaces are finished in paint or sheet vinyl coved up walls.

Lighting and ventilation registers are flush finished to surfaces.

Door hardware are knob controlled with flattened profiles.

Staff rooms are elevated one step above the ground level as a surveillance and defensive device.

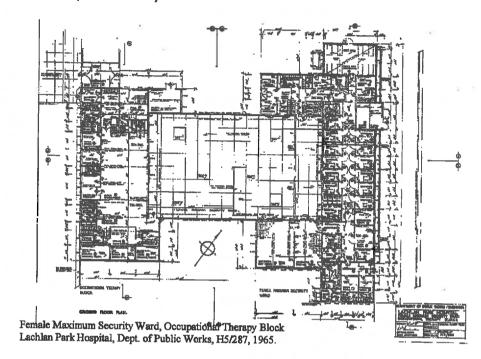


day room window sill



single bed room door. Note door hinges, steel grate vent along bottom and viewing window

# Allonah (or A Ward)



While the plan form exhibits characteristics of the 'Pavillion' system found in earlier buildings at Willow Court, these references are general only.

Central staff areas positioned for surveillance and control of patients follow the 'panopticon' approach to institutional places of confinement and wings that allow access to light are elements common to other Willow Court Ward buildings.

The plan arrangement in general is split into two areas that allow control through a main central corridor while segregating the day and night areas.

The main entry is located on the day end of the building to the south and thus is accessed along the driveway via the carpark area to the south.

Entry is accessed via three sets of doors that define a foyer with a visitor room and toilet, and a staff room and toilet off the vestibule. Access through the vestibule presents the visitor into the day area with the main access corridor leading to the night wing.

Adjoining the entry proper, ancillary rooms are located including a quiet room and seclusion room, however, their actual use was varied. A doctors room is also located adjacent the entry and is significant is having a clear unobstructed external window.

A sisters room and staff work room, raised on a platform with clear glazed partitions, scrutinize access to the patient day area including a toilet block, dining room served by a kitchen, servery/scullery and, separated from the dining room by a timber framed glazed partition, a 'patients day room'. This area also provides access to the internal secure courtyard.

The kitchen has a separate access for deliveries via a store and lobby.

Both of the patient rooms, despite being on the southern side of the building, are designed as a separate wing and have windows on three sides with external views beyond the carpark to the distant hills through large windows: The only external view from a common area other than the view of the sky from the courtyard. Both patient rooms are overlooked by the sisters and work rooms.

#### Allonah (or A Ward)

The wing serving the night functions is connected by a corridor with 6 individual rooms on each side. Each bedroom has a solitary window and door, and measure 8 feet 3 inches wide and 12 feet 1 inch long.

The corridor leads to an 8 bed dormitory room. A duty room, raised a single step, provides surveillance of both the bedroom corridor and the dormitory. The 'Laundry', 'drying', a 'clothing store' and 'linen' and 'cleaners' room, as well as

patients 'toilets', form a cluster of functional rooms centred around the 'duty room'.

Another door accesses the 'patient's locker', 'wash room' and bathrooms that form an opposing wing to the patients day rooms, across the courtyard. While separate functions, they are incorporated into the one space with only neck-high partitions providing separation and a minor level of privacy.

Baths and basins are built into plinths and set off sides walls. Timber lockers are full height and located on the perimeter of the entry to the rooms. Two shower stalls are centrally located as well as timber bench seating. Direct access to the courtyard is provided ,however, the build-up of garden beds along this wall suggest that the access was not necessarily used. High level windows, towards the courtyard to the south, provide the only natural light.

Its last use as a workshop and nursery for 'structured employment is evident in the opening up of windows in the day rooms and subsequent new frames and security mesh. The dormitory room is used for general council storage, and some bedrooms and store rooms have been used for collecting mechanical parts, milk cartons and bicycle parts, all a result of the non-specific uses of the building during the closing phase of the Hospital.

The courtyard wall has had a new opening cut into its southeastern wall and a steel security gate fitted. The origin of this work is unknown.

## The Condition of the Building

The building is in good condition but suffers from a lack of maintenance.

Delamination of wall vinyl and water ingress through failing water cylinders and other plumbing problems, have not had significant effect of building fabric. Timber fascias requires painting and some deformed roof plumbing needs replacement.

The building's northeast elevation exhibits substantial foundation settlement, however, this has no apparent impact on the structure of the building.

The bath and wash room fittings however has been significantly demolished with seating and wall tiling broken, (largely the result of vandalism).

The courtyard is largely intact with prolific weed and blackberry bush growth, with some trees originating from the earliest period of the late 1960's.

Paint over spray along the southern wall are the result of painting of furniture during the 'structured employment' period.

# Allonah (or A Ward)

Allonah, A Ward is of historic heritage significance.

Statement of Significance

While the building may be recent, the history of the building describes the continued development of the institution through to its closure.

It demonstrates aspects of the evolutionary pattern of institutional care.

The building is a good representation of design for high levels of security.

The building is highly utilitarian in its architectural approach, and can be considered a rational approach in meeting the functional requirements of modern methods of care and confinement. Designed with minimal embellishment embellishment, the architecture can be considered as a modern medical approach to design.

Allonah, A Ward is unique amongst the wards of Willow Court as a place specifically designed for the confinement of women who required secure detention for the protection of the public.

The building demonstrates the attitude of Tasmanian society to young 'women who ventured outside social constructs of ideal femininity' and in comparison to its male maximum security ward equivalent, Carlton C Ward, it is able to demonstrate gender bias in that social attitude. The institutional change to a 'Mental Defects Colony', reinforced by the Justice system through the committal process for 'unmanageable, or in the case of girls, ... unduly promiscuous' and the classification of those girls as psychopaths, are important aspects of Tasmanian social history.

The building from its conception to its closure, represents these radical changes in institutional care and classifications since the post WW2 period.

The eventual redundancy of the building demonstrates the changes in Tasmanian society through the 1960's and 70's that were experienced throughout the western world with the women's liberation movement.

The building fabric, including the modesty screen wall and the high levels of security, and the inward focus of the plan arrangement around the central courtyard given over to planting, demonstrate these social attitudes.

The significance of the building lies in its contribution to the Willow Court site as a whole demonstrating the evolving patterns of mental health care in Tasmania.

The building through its history and design provides an insight into changing attitudes to socially acceptable behaviour for women and the high level security design is representative of their perceived threat to social standards and society as a whole. Its understanding as a place for women is highly significant.

# Allonah (or A Ward)

levels of significance

The Allonah, A Ward is of high significance relative to the buildings of Willow Court.

# significant elements

elements	level
9	
external building form roof form entry elevation modesty screen wall openings	medium medium medium high medium
individual bedrooms day rooms nurses stations wash/bath rooms corridors dormitory room	high low medium low medium low
landscape secure yard secure yard walls planting beds bitumen road and concrete kerb gate and fencing boundary wall below ground level deposits	high high medium low low high medium

# Alionah (or A Ward)

Opportunities and Constraints

The significance of the building suggests that a large proportion of the building should be retained.

The small 'cell' like rooms and long corridors are not easily adapted for new uses without substantial alteration and while the spatial qualities of these spaces are significant, substantial intrusion will impact on heritage value. The number of similar rooms however suggest that only a representative number need to retained and consequently internal alterations will be acceptable.

The loadbearing structure of insitu concrete will not promote alteration simply or economically and the absence of natural ventilation will also demand substantial fabric changes and new services for heating, power etc. and water and drainage will not be easily inserted into or through existing solid concrete and masonry walls, floor and ceiling. The existence of asbestos particularly to the reticulated heating system should be anticipated. Following its removal, new services may utilize existing conduits.

The poor quality foundation soil, made up of potentially significant deposits as fill, will require substantial footings for new building work as well as archeological investigation. New building work will be largely confined to the rear yard to allow Allonah to retain its visual connections to both Willow Court at the side of Bronte, and the Royal Derwent site along the entry elevation.

The retention of the entry road for public access will allow the main entry elevation of Allonah to have a public face suitable for both interpretation and commercial uses while providing vehicle access to the rear of the property.

The highly significant boundary wall should be retained in council ownership.

The secure yard is both important for interpretation and useful for reuse of the building. Its landscape use as a garden can be maintained and with respect for original trees p may be suitable for a commercial use. Its spatial qualities however, emphasized by the massiveness of the walls will prohibit substantial alteration however an opening to an external area may be utilized for new access.

# Allonah (or A Ward)

Conservation Policies

The building is to be retained.

The building is to be maintained and defective roof plumbing and fascia repaired.

The building can be altered and adapted to suit new uses, however, the extent of such alteration must allow the general form and spatial qualities of the building to be apparent. All new work should be subservient to the original form and additional stories are not acceptable.

Significant elements of the building are to be retained.

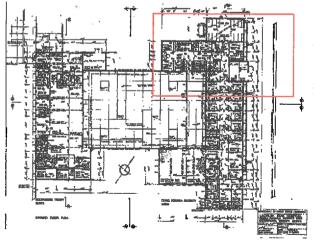
New uses that have a minimal impact on original fabric and able to provide an interpretation of its history are preferred.

Public access is an important consideration in determining new use and a formal interpretation display of the building's past use should be incorporated with any new development. Preference should be given to uses that allow public access.

Consideration should be given in any subdivision to maintain in council ownership the perimeter wall and ensure its retention and maintenance. This will also allow maintaining the access road for public access to the prominent corner of the site for interpretation of the relationship of the two hospitals.

The retention of 3no. (min) complete bedrooms with all fittings and fixtures are preferred as an interpretation of its history along with the associated modesty screen wall. These rooms are to be selected on the northeast elevation where public access is encouraged. Should public access be allowed to the interior, then the dormitory and duty room should also be retained and consideration given to access to the secure yard.

Where public access is not provided by new uses then retention of the original fabric as outlined above is required.



Note: retention of the building fabric of this area for public access and interpretation is recommended, including the repair of built-in furniture and fittings and fixtures.

#### Allonah (or A Ward)

Removal of building fabric is acceptable beyond this area to allow light and ventilation to the interior however window reveals and structural concrete block columns are to be maintained. Salvaged blockwork is to be used in the repair of the modesty screen in the Bronte courtyard. Internal alterations are acceptable throughout the remainder of the interior with moderate and sympathetic alterations to the exterior acceptable.

The building fabric fronting the Bronte courtyard is to be largely retained however the non original windows of the dormitory will allow alternative window types. New openings are to be smaller than existing and discreet with matching existing head or sill levels. No new openings into the secure yard are permitted except for interpretation for public access should the yard not remain accessible. Minimal removal only is acceptable as part of an approved interpretation project.

Additions to the existing structure may be acceptable in the southern yard, however, if visible from the Royal Derwent Hospital site, they will be required to be discreet and subservient in scale. ie: materials need to be non reflective and of natural tones contrasting with the existing to avoid misinterpretation of the original building, and of a height less than existing.

No new building work is allowed in the secure yard.

The spatial quality provided by the surrounding wall is to be retained. Free standing temporary or glazed structures, detached from walls, and associated with the use of the yard as a garden may be acceptable if the scale does not interfere with the spatial quality. New openings to the exterior are only accepted as part of an interpretation project. New openings from the interior are acceptable. The existing planting beds and the associated established plants are to be retained and maintained. New garden work is acceptable provided that it is distinguishable by a contrasting pattern and edging detail.

#### Allonah (or A Ward)

### Illustrated conservation policies



View from the Royal Derwent Hospital site.
The visual connection between Allonah and the RDH site is to be maintained.
New additions are not to prevent this connection and alterations to allonah need to be constrained to

existing building elements to be retained.



View towards Allonah from the entry road.

The entry visual connection is to be maintained and no new allowed to obscure this view.

The linear roadway to the corner of the site should be retained as public accessible space.



The building elevation fronting onto the Bronte courtyard and its immediate side walling is to be retained in a predominantly intact condition. New openings and signage are to be minimal and discreet and allowed only as necessary for new uses. Preference is to retain original fabric fronting public areas.

# Allonah (or A Ward)



The side wall fronting the Bronte courtyard has a window that should be reinstated (located behind adjacent screen wall) and a screen wall to be repaired. Surface drainage to this area should be provided.



The secure yard wall fronting the Bronte courtyard is to be retained. However a minimal and discreet opening may be acceptable if incorporated within an approved interpretation plan if public access to the secure yard is prevented through a future use.



The 'modesty' screen wall is highly significant and is to be retained.

Public access to this elevation and to the corner of the site is encouraged.

## Alionah (or A Ward)



The communal bathroom and wash room have been vandalised, however, most elements are intact and able to serve new bathroom uses. Retain elements and incorporate them into new facilities for bathing



The dining room window has been altered by later uses. The insertion of openable frames into existing reveals is acceptable due to the degraded state of the original fabric.

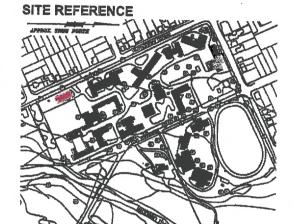


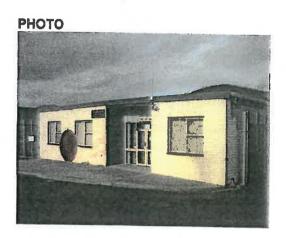
The communal toilet of the day area has been converted for male use. Redevelopment of this space is acceptable providing impact on the courtyard is minimised.



The entry signage is highly significant and should be retained in its original position or integrated into an interpretation display at another location.

## Industrial Therapy Building





Description of the Place

Location

The Industrial Therapy Building was designed in 1973 and constructed following tenders in May that same year. The building is located in the southern corner of the site where A Ward (the Gentleman's Cottage 1859), B Ward (the Male Refractory 1893) and a number of outbuildings situated until the site was cleared.

The building is 35 metres long and 16 metres wide and highly utilitarian. Constructed with a steel portal frame on a reinforced concrete slab floor, and is clad and roofed in uncoloured galvanized 'Kliplock' sheet metal. The entry elevation forms a distinct separate component and was constructed in unfinished face quality concrete blockwork to the same pitch and profile as the portal frame. This front section is separated by the workshop floor by a timber glazed partition that forms an office, foyer and staff lunchroom. Concrete block walls also form staff and worker toilets.

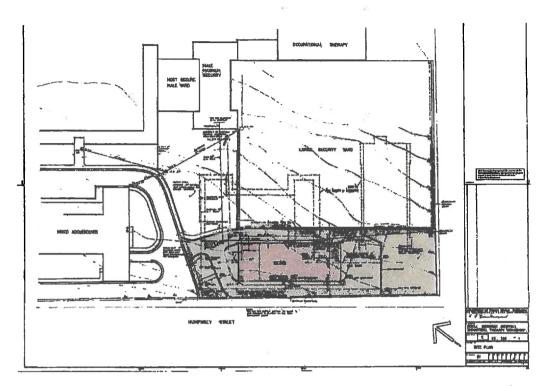
The construction/tender drawings, produced by the Department of Public Works under the approval of the Chief Architect Tomlinson, indicate that the steel portal frame as well as the sheet metal roofing and cladding and highlight glazing were previously used in another building.

The frame was constructed as a sequence of portals, and a sub frame provided fixing for the Kliplock sheet metal. The structure was designed to be dismantled, transported and re erected.

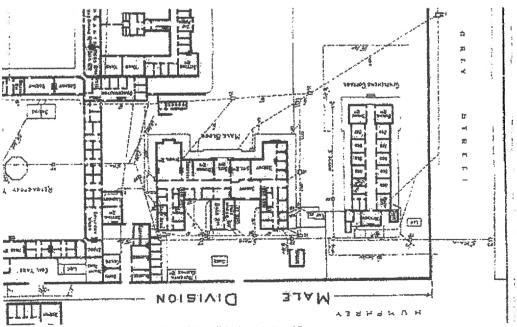
The building's original use as a kitchen is evident from the large extraction canopies inside and an equally large extraction exhaust mechanical duct and plant outside. Vehicle access was provided to all sides of the building, with loading bays to the rear and one side.

The building is currently being used as a joinery workshop.

### **Industrial Therapy Building**



Dept. of Public Works, Tas. Royal Derwent Hospital Industrial Therapy Workshop, Site Plan, 62.329-1, dwg.07, 1973 plan area shown coloured and dashed lines show approximate position of demolished wards A and B (from dwg. No. H5/284)



Inverted plan showing reletive position of demolished wards A and B.

Note the location of outbuildings and mortuary.

Public Works Dept. Tas. Block Plan Buildings, Mental Diseases Hospital, New Norfolk, dwg. 8399. circa 1930

### Industrial Therapy Building

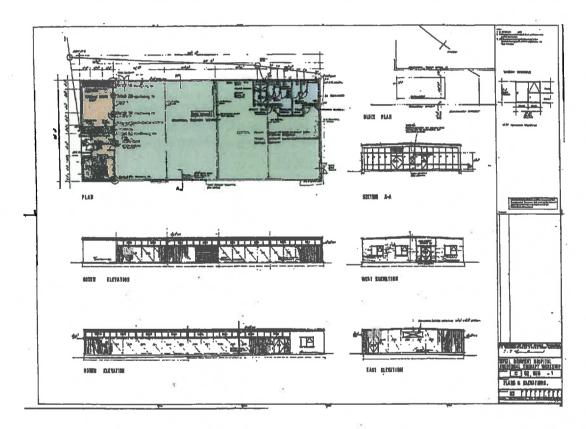
## The Condition of the Building

The building is in good condition and is currently used as a workshop. The concrete blockwork entry wall has recently been painted. Some roof plumbing is failing through broken fittings.

The rear yard has substantial rubbish evident and parts of the original kitchen extraction duct are stored there also.

The masonry brick perimeter wall shows signs of rising damp which may be exacerbated by the placement of bitumen adjacent the base of the wall.

The wall also has been subject to vandalism with minor graffiti and broken brickwork opening evident.



Dept. of Public Works, Tas. Royal Derwent Hospital Industrial Therapy Workshop, Plan and Elevations, 62.329-1, dwg.03, 1973 plan area coloured to show open floor are, (green) toilets, (blue) and office, staff and entry. (yellow)

#### **Industrial Therapy Building**

The Industrial Therapy Building is of low historic cultural heritage significance relative to the buildings of Willow Court.

#### Statement of Significance

The Building is however, the only building specifically constructed for Industrial Therapy on the site of Willow Court and the Royal Derwent Hospital.

Consequently, it has the ability to acknowledge the role of Industrial Therapy in the care of the mentally ill and disabled, in the later part of the twentieth century.

It is necessarily a utilitarian building whose function as a workshop is no different to many other workshops for other industrial uses.

It use as a temporary commercial kitchen demonstrates this characteristic of a functional and adaptable structure. Its demountable portal frame structure is then an important quality of its function and thus its significance.

Despite the lack of a particular distinctiveness and minor architectural quality, it does have the capacity to contribute to our understanding of the evolution of the treatment of the mentally ill and intellectual disabled. In particular, the development of occupational and industrial therapies and is more significant given that therapy was an important component of institutional care.

While given that the building is the last new building to be erected on the site and that its significance may not be as high as earlier buildings, it is important to appreciate that collectively all buildings contribute to the understanding of the institution as a whole, the evolving patterns.

This is recognized in previous studies and inparticular, Austral Archaeology, 'Willow Court/Royal Derwent Hospital Precinct Study Vol. 2 Heritage Assessment'

"the built fabric, ..., represents a continuum of medical use and changing ideas in the philosophy of care of the mentally ill. Buildings and fabric from all periods should be retained and conserved" p.38

The building contributes to the understanding of community attitude to work in the institution changed radically over time.

Of lesser value though not insignificant, is the alternative and previous uses attributed to this building in other parts of the site. In this respect, the structural components of the building demonstrate this aspect of its history.

The archeological values however are high and have the potential of yielding significant information about the earlier years of the institution. Refer to Tasmanian Heritage Council Archaeological Practice Note 2 'to establish significance and archaeological potential and to provide guidance on the steps required and the most suitable format for its application'

The perimeter wall bounding the service yard behind the building is representative of the previous occupation of this part of the site.

However the wall in its own right together with its timber mastheads is highly significant in understanding the nature of confinement of earlier periods in the history of the institution.

#### Industrial Therapy Building

## Levels of Significance

The significance of the building lies in its contribution to the Willow Court site as a whole demonstrating the evolving patterns of mental health care in Tasmania generally and the role of Industrial Therapy in particular, as represented through the built fabric. The follow elements are graded in significant relative to this understanding.

#### significant elements

elements	level
built fabric	
external building form	medium
mechanical plant and ductwork	medium
structural frame	medium
external envelope	medium
internal glazed partitions	medium
internal toilets	low
internal staff room	low
internal extraction canopies	medium
ancillary building and external racking	low
landscape	
bitumen road and concrete kerb	low
unfixed mechanical plant	low
boundary wall	high
telegraph masts	high
vegetable garden	low
below ground level deposits	high
security fencing	low

#### opportunities and constraints

The functional design of the building will allow many alternative uses.

The clear span and concrete floor will suit a variety of light industrial uses where flexible layout of equipment is required.

The enclosed rooms to the entry elevation compliment the shop floor in providing for both management and staff amenity as well as a shopfront for customer relations and display. The ability to access both the side and the rear of the building provides vehicle entry options. The adjacent walls will restrict extensions to the building and prevent expansion, however, the rear yard offers this potential.

Any disturbance of the foundation soils, particularly in the rear yard will require archeological investigation.

Although the building has had a previous location on the RDH site and its design intent has largely been as a dismountable and relocatable structure, its current location relates to its function as a workshop and shopfront for products from the industrial therapy programme. The buildings' position at the rear site also relates to its service function where historically ancillary buildings were placed.

#### Industrial Therapy Building

#### Conservation Policies

The building is to be retained.

The building is to be maintained and defective roof plumbing repaired.

The building can be altered and adapted to suit new uses however the extent of such alteration must allow the general external form and internal spatial qualities of the building to be apparent. All new work should be subservient to the original form and the building is to maintain its 'stand alone' status.

The current use as a light industrial workshop is a preferred use that has minimal impact on original fabric and is able to provide an interpretation of its history.

Consequently, a degree of public access is provided to the 'shopfront' and consideration should be given to a formal interpretation display of the building's past use.

The structure components of the building is to be retained.

The steel portal frame and roofing and cladding need to be substantially retained to allow an understanding of the prefabrication components.

The utilitarian nature of the building should be respected. Decorative and painted finishes avoided and new additions and signage etc. should develop and 'industrial aesthetic' approach that compliments its use.

The building should be retained in its current position.

Relocation of this building may be acceptable if archeological investigation suggests that the foundation materials of previous structures would provide a greater understanding of the history of the place. An approved archeological programme, including an interpretation and public access plan, will need to be in place prior to relocation and demolition of footings.

Components that indicate the previous use of the building are to be retained, including the kitchen canopies and mechanical plant and ductwork, however, it is acceptable that only a substantial portion of these elements are required to represent this phase of its use.

The ground and sub ground deposits are to be retained and managed in accordance with Tasmanian Heritage Council Archeological Practice Note 2 'to establish significance and archaeological potential and to provide guidance on the steps required and the most suitable format for its application'

This policy relates to all disturbance of the ground surface and includes excavation for new building and service requirements.

Prior to new service excavation, the location of existing service trenches are to be marked and investigated for their reuse. It is anticipated that both new stormwater and sewerage lines as a result of subdivision, can utilize existing service trenching.

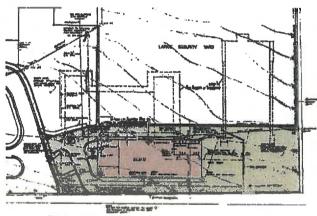
#### Industrial Therapy Building

The surrounding landscape can be altered, however, not to the detriment of maintaining its preferred industrial use. Consequently, entry points should be retained including the side and rear vehicle bays and the front pedestrian shopfront.

The rising damp of the boundary wall needs to be addressed and bitumen removed to allow an air drain at this junction. Any horticultural or agricultural use to the yard areas need to contain sub surface water to prevent detrimental impact on the subsurface deposits.

It is recommended that in a future subdivision, the wall be segregated from the new title and retained in possession of the Derwent Valley Council to ensure its maintenance and preservation.

It is also recommended that consideration be given to establishing a complimentary archaeological interpretative experience focusing on archeological investigation. Due its location in an undisturbed and periphery location on the site, the yard offers great potential for an educative interpretation through archaeology.



Archaeological Sensitivity Zoning Plan
All sub surface disturbance of the area shown
as shaded, is required "to establish significance
and archaeological potential" in accordance
with PN2, "to provide guidance on the steps
required and the most suitable format for its
application."



#### **Industrial Therapy Building**

## Illustrated conservation policies



The relationship of the building fronting onto open areas should be retained and its use as a light industrial building is supported. Additions should be to the rear to maintain access to both side areas and retain its simple built form.



The perimeter masonry wall is to be retained together with the telegraph masts.

The wall is to be maintained and rising damp and salt damage addressed by conservation practitioners.



The substantial external plant equipment and ductwork should be retained in part to represent its previous use.

Compatible new uses should encourage retention.

### Industrial Therapy Building



Roof plumbing repairs should be conducted to maintain good building condition.

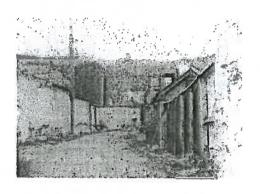
Prefabricated components of the frame and cladding should be retained together with ancillary industrial fixtures such as the lighting and steel racking.

Future alterations and additions, including signage should continue an industrial service aesthetic.



The interior is intact and its retention in part is encouraged including the exhaust hoods from its use as a kitchen.

Maintaining the functional relationship of work floor and offices is encouraged.



Archaeological investigation is required prior to any excavation. Refer to Tasmanian Heritage Council Archaeological Practice Note 2 'to establish significance and archaeological potential and to provide guidance on the steps required and the most suitable format for its application'

The site's interpretation is encouraged.

Photograph of rear yards, outbuildings and perimeter wall on the site of the Industrial Therapy Building, prior to demolition of wards A and B in the 1960's. Gowlland p.161

## Introduction to Landscape Significance

"Although the traditional focus of interest in historic sites inevitably rests with the buildings, it is in fact the surroundings and grounds that often contribute strongly to both the aesthetic presentation of the buildings, and to the continuity of the collection of individual buildings that make up the whole institutional setting...

Landscape elements are diverse, and may include:

- The placement of the site in the broader landscape setting, and its relationship with the surrounding topographical features such as rivers and hills, as well as highways and town streets.
- The spatial setting upon the site, of each individual building, and of the collection of buildings which make up the institution.
- Detailed objects such as fences, gates, trees, seats and even signage.
- Evidences of broad circulation patterns and directional flows including pedestrian paths and vehicle tracks.
- Gardens may be productive of food; as were many at the New Norfolk complex, or decorative; used to hedge out and separate, or to enclose and include.
- Some of the landscape elements (hard and soft) will have special significance beyond their particular physical form and location." <sup>1</sup>

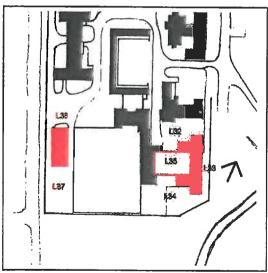
The buildings of Allonah and Industrial therapy both are set within spatial areas that are also significant to the surrounding buildings and the complex as a whole, with characteristics often shared between adjacent buildings.

The spaces also include remnants of previous structures both above ground and below the surface where archaeological investigation is yet to determine the extent of informational value of the remains.

Please note that the following description and histories are condensed versions that have already been discussed in the main document. Refer to those sections for further appreciation of significance.

L32 L33

L37



#### Areas of this report

Bronte courtyard (See part C, CMP)
Allonah, entrance from Avenue

L34 Allonah, rear southern area

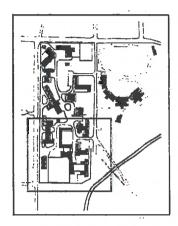
L35 Allonah, secure yard L36 Industrial Therapy, fro

Industrial Therapy, front (see L12, Part A, CMP)

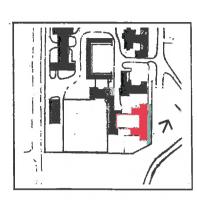
Industrial Therapy, side and rear yards

## NAME: Allonah, entry driveway

### SITE REFERENCE L33



#### PLAN



#### **PHOTO**



view north west along driveway



view south east towards entry

### **DESCRIPTION/HISTORY**

The roadway is surfaced in bitumen and continues the full length of the Allonah building. It served as a vehicle and pedestrian access to Allonah where the entry is located towards the end of the drive and a carpark was provided to the south of the building.

The roadway was constructed as part of the building works and is placed on substantial fill behind a concrete retaining wall behind an existing masonry perimeter wall. The concrete and reinforcement of the retaining wall is evident at road level.

The old wall was modified by the construction of Allonah and replaced with a wire and steel post balustrade above road level.

As the bitumen continues from building to wall, no planting exists in this area, however, substantial trees at the riverside park end to the avenue overhang this area.

#### CONDITION

Some subsidence in the surface is evident at the building edge. The perimeter wall exhibits some graffiti and rising damp.

# NAME: Allonah, entry driveway

## SIGNIFICANT ELEMENTS

- The linear open space contribute to an important appreciation of the planning of Willow Court.
- The end space represents the corner of the site and is a prominent visual connection with the Royal Derwent Hospital site across the river.
- The perimeter wall is highly significant as a remnant element from pre-1964 demolition period.
- The adjacent trees overhanging the space are significant landscape elements.

## STATEMENT OF SIGNIFICANCE

As a roadway, the landscape area is significant as a thoroughfare and entry space bounded by the ward bedrooms and screened by the 'modesty' wall. The linear space, defined by building edge, overhanging trees and wall, indicates its

location at the corner of the site.

The elevated position (artificially made possible by the substantial filling of the site) provides a unique vantage point for the visual connection between Willow Court and the Royal Derwent Hospital.

**SIGNIFICANCE** 

medium

## **CONSERVATION POLICIES**

- Retain open linear space and vehicle access to the rear of the site. No new built constructions allowed in this area.
- Maintain perimeter wall in good condition.
- Maintain adjacent trees in good condition.
- Provide site interpretation of the Royal Derwent Hospital history at corner of the Willow Court site at the end of the access road if public access retained.



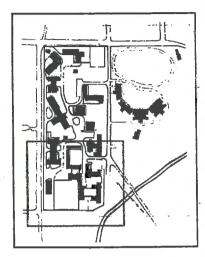
Upper level view of perimeter wall and concrete wall at base



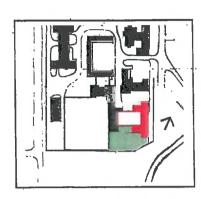
Lower level view of perimeter wall showing deterioration due to rising damp

NAME: Allonah, rear yard

## SITE REFERENCE L34



#### PLAN



#### PHOTO



Rear of Allonah and the secure yard wall.



Equipment sheds for site maintenance by 'structured employment' circa 1998

#### **DESCRIPTION/HISTORY**

The rear yard is bounded by the old perimeter masonry wall that was backfilled with demolition rubble at the time of the construction of Allonah.

The open area to the rear of Allonah has been a service yard for the operation of the ward.

Service entry to the kitchen is located here and the carpark for staff and visitors is evident in the sealed section of the yard.

While most of the yard has been built up, the area adjacent the C ward secure yard may be at natural ground. This area, adjacent to the perimeter wall stepping up, would have been the front yards to the Gentleman's cottage.

During the time of the closure of Willow Court in the late 1990s, the yard served as an equipment storage and vehicle washdown area where a remnant concrete slab is found. Wire and steel post fencing is also found in this area however its origins are not known.

A single tall 'Flax' tree is present in the yard and although its six suggests that it may be up to 25 years old, its origins are not known.

NAME: Allonah rear yard

## SIGNIFICANT ELEMENTS

The perimeter wall is highly significant.

The carparking area should be retained to encourage use of the existing entry to Allonah.

### CONDITION

The perimeter wall shows signs of deterioration from rising damp.

## STATEMENT OF SIGNIFICANCE

The rear yard has significance in demonstrating the circulation patterns of the existing building while the wall is highly significant in demonstrating the confinement of the mentally ill in the 19th century.

SIGNIFICANCE

Low

## **CONSERVATION POLICIES**

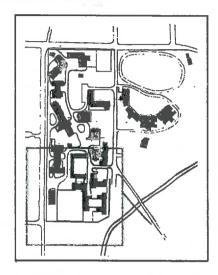
Maintain the perimeter wall in good condition.

Encourage reuse of the carpark.

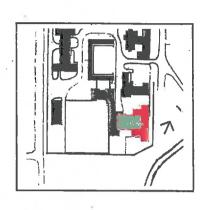
All excavation is to be managed in accordance Tasmanian Heritage Council Archaeological Practice Note 2 'to establish significance and archaeological potential and to provide guidance on the steps required and the most suitable format for its application'

### NAME: Allonah, secure yard

## SITE REFERENCE L35



#### PLAN



#### PHOTO



Lower level of the yard looking toward the day room entry..



Looking towards the upper level of yard

#### **DESCRIPTION/HISTORY**

The secure yard is an open area accessed from within the Allonah building used by the residents of the ward. The ground level falls from the south western end fronting the Occupational Therapy Block down to the lower end fronting onto Allonah day rooms, tollets and Wash rooms. The yard is bounded on all sides by a smooth finished concrete wall with security overhang. Day rooms and some bedrooms look over the yard and wash rooms and tollets have highlight windows in these walls. The yard is surfaced in bitumen and has equally spaced planting beds edged in concrete.

The garden is wildly overgrown with blackberries infesting most of the upper level beds. The middle and lower level beds however exhibit plantings that due to their size and variety may originate from the first period of occupation. Typically each bed has a large fruit tree planted generally central to the bed and rose bushes to each of the rectangular bed's comers. In evidence through the winter months (the period of investigation) are apricot trees and Queen Anne pink flowered roses. Other varieties may be present.

The yard was largely a passive space with little opportunity for recreation. Staff contributed to its development and maintenance bringing plants and cultivating a small vegetable patch along one wall. A netball ring was constructed by staff for active recreation. In later years the yard was occupied by 'structured employment' and used as a nursery for garden maintenance. A gated opening was constructed in the southern wall however its origins are unknown.

### SIGNIFICANT ELEMENTS

The spatial quality of enclosure is highly significant. Subsequently the walls and openings are important in understanding this quality.

The remnant planting and the garden beds are significant.

#### CONDITION

The yard is good condition.

The planting is overgrown and weed infested.

## STATEMENT OF SIGNIFICANCE

The secure yard has significance in demonstrating the provision of an exercise area specifically for women. The planting then emphases the gender distinction of a passive recreation space as opposed to the active male secure yard of C Ward.

#### SIGNIFICANCE

high

## **CONSERVATION POLICIES**

Maintain the spatial quality of the yard.

Prohibit permanent structures and all structures greater in height of the walls.

Openings in the walls are only acceptable as part of public access for an approved interpretation plan.

Clean yard of debris and weeds and maintain substantial planting.



Secure yard reused as a nursery during occupation by structure employment. View along wall of the Occupational Therapy Block. circa 1998

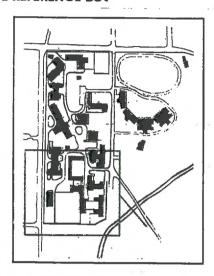


View towards the Occupational Therapy Block. circa 1998

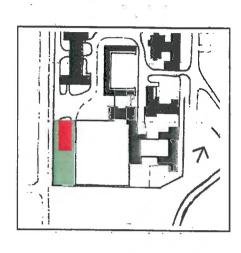


# NAME: Industrial Therapy, rear yard and access roads

### SITE REFERENCE L37



#### PLAN



#### **PHOTO**







Rear yard with boundary and C Ward walls and exhaust



Access road with boundary wall

## **DESCRIPTION/HISTORY**

The rear yard to the Industrial Therapy Building is partially sealed in bitumen for vehicle parking and turning, and the remainder has been left at natural ground level. Some evidence of vegetable gardening exists from the closing period of Willow Court, but otherwise the area has been undeveloped since the demolition of the Gentleman's Cottage and B Ward in 1964.

The remnants of these and other built structures including the mortuary, may exist under the surface.

The rear yard has elements of the exhaust ductwork from the period of the temporary kitchen.

The bitumen sealed road follows the masonry boundary wall to access openings in the side and the rear of the building. The bitumen surface continues from the building edge to the wall. Both side areas are secured with wire mesh gates.

No plantings exist in any of these yards.

#### CONDITION

The yard is good condition suitable for service work and vehicle access.

The yard is overgrown and weed infested.

The rear has substantial collection of rubbish.

The masonry boundary wall shows signs of rising damp and salt deposits.

#### SIGNIFICANT ELEMENTS

The boundary masonry wall is significant in understanding confinement in Institutional car of the  $19^{th}$  century.

The access road and rear turning area demonstrates the pattern of use of the industrial building

### STATEMENT OF SIGNIFICANCE

The rear and side roads of the Industrial Therapy Building are integral to an appreciation of the function of the building, as well as an understanding of the building as a separate and prefabricated structure.

The masonry perimeter wall and concrete C Ward secure yard wall are highly significant in understanding confinement in both 19th century and 20cth century institutions for the mentally ill.

SIGNIFICANCE

low and high

#### **CONSERVATION POLICIES**

Maintain the perimeter wall and arrest decay.

Investigate the archaeological potential of the site. The ground and sub ground deposits are to be retained and managed in accordance with Tasmanian Heritage Council Archeological Practice Note 2 'to establish significance and archaeological potential and to provide guidance on the steps required and the most suitable format for its application' Promote its continued use for light industry by retaining vehicle access to the rear of the site.



Perimeter masonry boundary wall With timber line mast.



Wall detail showing rising damp, salt deposits and break down of masonry.

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## **Appendix**

#### **Architectural drawings**

Department of Public Works – Tasmania Lachlan Park Hospital New Norfolk, Demolition of Old Buildings. 1964 H5/279 Demolition site plan

Department of Public Works – Tasmania
Lachlan Park Hospital
Female Maximum Security Ward, Occupational Therapy Block and Ward C, 1965
H5/285. stormwater and fire sprinkler system connections.
H5/286. ground floor plan
H5/287. sections, elevations
H5/288. sections, elevations
H5/289. roof plan
AA262/0 sprinkler layout

Department of Public Works – Tasmania Royal Derwent Hospital Industrial Therapy Workshop, 1973 62.329-1

03 plans and elevations

04 foundation details

06 roof panels and windows

07 site plan

08 miscellaneous details

09 roller shutter door and timber partitions details

District Architect, 1952 site and drainage plan, Lachlan Park Hospital at New Norfolk 114-2

Department of Public Works – Tasmania Mental Defective Colony, Lachlan Park, 1964 H5/229 (service entry drawing)