



“A Hard Pill to Swallow” Clinical Psycho-pharmacology in Mainstream North American Cinema

by Taylor Dysart – Hewton Archival Research Award recipient, 2016
PhD candidate, History and Sociology of Science, University of Pennsylvania



“Shock Corridor” (1963), co-sponsored by the Friends of the CAMH Archives for the Rendezvous with Madness Film Festival, 2005.
Promotional still photos: CAMH Archives, Workman Arts fonds.

On February 21st 1964, Margaret Hartford penned a scathing film review in the *Los Angeles Times* of the new release, *Shock Treatment*. Hartford described it as “a bad movie that will drive you right out of the theater,” bemoaning that the “demented drama” of two hours “seems more like four.” In addition to its ability to induce inescapable boredom, Hartford saw this film as illustrative of an American cultural obsession with mental illness, made manifest in a plethora of films released in the 20th century. Hartford posited that, if mental illness continued to mesmerize American filmmakers, “people will stop going to the movies altogether.”

Psychiatry, as this instance reflects, captured the imagination of American film producers and cinematic audiences throughout that century. Beginning as early as the 1930s, psychiatrists assumed greater visibility in American films as the profession and its outpatient modalities became increasingly visible to middle-class Americans (Michael Shortland, “Screen Memories: Towards a History of Psychiatry and Psychoanalysis in the Movies,” 1987). The latter half of the twentieth-century in particular witnessed numerous cinematic portrayals of mental illness and psychiatry, ranging from the jarring *One Flew Over the Cuckoo’s Nest* (1975) to *Girl, Interrupted* (1999) – both receiving numerous accolades. While scholars including Krin Gabbard, Glen Gabbard, Sharon Packer, and Sander Gilman have examined how films depicted psychoanalysis,

psychosomatic treatments, and various mental illnesses, less attention has been devoted to clinical psycho-pharmacology in film, despite its rising prevalence.

Engaging with recent works in the history of pharmaceuticals and psychiatry, including those of Andrea Tone, Jeremy Greene, and Nicholas Henckes, my MA major research paper (McGill U.) situated clinical psychopharmacology in cultural histories of medicine. My research analyzed popular portrayals of clinical psychopharmacology and psychiatric practice that emerged swiftly after the introduction of those medications in mid-century. Ultimately I maintained that between 1954 and 1977, cinematic depictions of psychiatry offered striking, visual embodiments of anxieties concerning the increasing use of clinical psychopharmacology and its role in the shifting landscape of psychiatric practice, whilst maintaining a morbid fascination with psychiatric practice that had emerged in the pre-psychopharmaceutical era – notably ECT and lobotomy, as also later in *A Hole in One* (2004, ill. here).

The anxieties over clinical psycho-pharmaceuticals as captured through mid-century film, were threefold. Firstly, these films depicted both the public and medical profession grappling with a greater understanding of their side-effects, both for individuals and society. For example, lay and professional concerns over the “Thorazine shuffle” and “soulless stare” were captured in *Invasion of the Body Snatchers* (1956 & 1978), while *The Valley of the Dolls* (1967) was symbolic of a cultural anxiety over the potential of an “over-tranquilized nation.”

(Continued, page 2)



Bill Raymond as “Dr Harold Ashton,” an ironic take on US lobotomy advocate Dr. Walter Freeman (1895-1972) in “A Hole in One” (2004).
Co-sponsored – Rendezvous with Madness Film Festival, 2004.

“A Hard Pill to Swallow” – continued

A second concern regarding clinical psychopharmacology as represented in mid-20th century films was a questioning of the role of the psychiatrist as a mental healthcare provider. Specifically, film critiques levied against psychiatrists in that era characterized their potential to prescribe psycho-pharmaceuticals improperly, or even maliciously. *Shock Treatment* (1964 version) is probably one of the most exemplary films to reflect this narrative as it documents how an asylum psychiatrist confines an individual to her institution (without consent), while experimentally deploying novel drugs to “treat” this patient.

The role of the psychiatrist, amidst this mosaic of evolving medical technologies, is a third anxiety documented in films of that era. With the proliferation of psychopharmaceuticals and the rise of several “psy-” professions, psychiatrists were at times portrayed with dramatic ambiguity for their role in the treatment of mental illness. A calling into the question of the motivations and expertise of mental health practitioners, including ward nurses and attendants, was featured in films of the 1970s, notably *Cuckoo’s Nest* and *Equus* (1977).

While these narratives by no means present an exhaustive range of sentiments ascribed to mid-20th-century healthcare clinicians, they highlight how cultural media reflected concerns about the emerging and sustained use of clinical psycho-pharmaceuticals in that field. Films, however, are not merely reflective of cultural concerns; they also possess the potential to mold, heighten, or alternatively subdue the current anxieties. As it appears that moviegoers (including this one) will continue to be enthralled with stories of the mind, it seems well worthwhile approaching these films with a critical eye.

Ultimately, I relied upon a different set of archives than those that I had initially proposed. The Chemical Heritage Foundation (renamed Science History Institute) has a fascinating collection pertaining to the advertising branch of Smith-Kline-French in the mid-20th century. The University of Toronto Libraries and Archives, and the Osler History of Medicine Library at McGill, hold extensive collections of primary sources and publications. Additionally, many of the films that I reviewed for my paper were not readily available and had to be acquired through various other parties.

Join Us

Thirty years have passed since the Friends of the CAMH Archives (the Friends) became incorporated as a not-for-profit, CRA-registered charitable corporation. Linked to CAMH’s Volunteer Resources Unit as well as to the Corporate Archives, the Friends support public education and archival activities relating to historical Canadian mental health and addiction services.



In addition to supporting CAMH the Friends are in touch with community and institutional partners for sharing heritage interests, publish a semi-annual newsletter, and manage their scholarship funds for annually granting archival research awards. Over 70 community and academic recipients have been supported since 2001. The majority of awards were made to graduate students, post-doctoral fellows, independent researchers, and teaching faculty.

The Friends are governed by a volunteer Board generally drawn from CAMH retirees and others interested in the history of psychiatry and mental health services in Canada. In the coming year, the Board hopes to attract several new board members to help drive its activities. If you are interested in historical research in Canadian mental health and addiction, I hope you will consider applying to join the Board. Specifically, we are seeking those with some knowledge or experience with social media, fundraising, membership development and/or academic archival–historical research.

The Board holds five meetings each year, September to May, and our AGM as well in May. Meetings are convened at 6:00 pm and, through CAMH’s generosity, are held at the Queen Street site.

Readers who are interested, or just curious, are encouraged to contact either myself as President of the Friends <syd.jones@sympatico.ca>, Ed Janiszewski – Admin Secretary <edjan@teksavvy.com>, or John Court – CAMH Corporate Archivist <John.Court@camh.ca>.

Board membership aside, we hope that everyone will accept our encouragement to support us through remitting a modest General Membership fee, ideally combined with a financial donation. This may readily be carried out safely & securely online, in cooperation with the non-profit *CanadaHelps.org* at: <https://www.canadahelps.org/en/charities/the-museum-of-mental-health-services-toronto-inc/> – or by returning the tear-off membership slip on the last page here.

– Sydney Jones, President

Documenting CAMH's Historic Artifacts

Over several decades the Archives has acquired a range of three-dimensional historic artifacts. Based on the collections' mandate, they should ideally be unique and provide a record of information. (Plaques, corner-stones and time capsules are exemplary.) With expert volunteer support from CAMH's Diana Shea, these artifacts are now being photo-recorded. Some will enhance CAMH exhibits, while others may be offered for loan to partners such as the ROM and the Canada Museums of Science and Tech (Ottawa) and of Human Rights (Winnipeg).

Our artifacts served many purposes: patients' apparatus or creativity; therapeutic equipment; antique or special furnishings; psychological testing; tools; and other.



Metal label inscription, "LECLERC / Milus Leclerc Inc. / L'Islet Station, Que." CAMH Archives photos, Diana Shea, 2018



Occupational Therapist Pat Wilson and clients working with the LeClerc hand loom at Lakeshore Psychiatric Hospital. CAMH Archives, LSPH fonds, ca. 1958-60



Wheelchair. Metal label inscription, "ARROW Erie, Pennsylvania Ser. no. 78710"

RENDEZVOUS WITH MADNESS Thursday, October 18th

6:00 pm – Jackman Hall, A.G.O.
317 Dundas St. West, Toronto



SPK KOMPLEX (SPK COMPLEX)
Gerd Kroske | 2018 | Germany | 111 minutes | German with English Subtitles | Canadian Premiere

In 1970, Dr. Wolfgang Huber and a group of patients founded the "Socialist Patient's Collective" (SPK) in Heidelberg, Germany. Controversial therapy methods, political demands, and a massive interest in the movement from patients deeply distrustful of conventional "custodial psychiatry," led to run-ins with the University of Heidelberg and local authorities. Their experiment in group therapy ultimately ended in arrests, prison and the revocation of Huber's license to practice medicine. SPK Complex shares the untold story of events before the German Autumn; connecting the dots from Germany's failure to address its Nazism after WW2 to present day inadequacies of the "modern" psychiatric system.

Director in attendance thanks to generous support from the Goethe Institut Toronto. Screening to be followed by a panel discussion.

Co-presented with Friends of the CAMH Archives, Goethe Institut Toronto and Seneca's Documentary Filmmaking Institute.

Leadership at Toronto for De-pathologizing Homosexuality during the Cold War

by Frances Reilly, PhD – Hewton Bursary recipient, 2012
Independent historical researcher, Toronto

Between the 1950s and 1970s homosexuality was classified as a psychological condition and considered a symptom of mental illness. At a time when gay and lesbian patients underwent intrusive and often damaging physical and psychological treatment for homosexuality, the Toronto Forensic Clinic differed in its approach, treating patients through talk therapy.

The Toronto Psychiatric Hospital (TPH) opened the Forensic Clinic in 1956 – an outpatient facility focused on rehabilitation of criminals in the Toronto area. The clinic soon focused on sexual deviancy and psychiatrists quickly noticed that the most common group of patients were gay men who voluntarily sought therapy. This was a population that stood apart from other patients who arrived at the clinic by court order because of violent and pathological conditions, such as exhibitionism, voyeurism, and pedophilia. The clinic's work was innovative, yet still assuming "normal" sexual behavior. For that reason the question of how properly to classify homosexuality as a condition concerned psychiatrists like Dr. R. E. Turner, who headed the clinic from 1958 to 1967 as TPH transitioned to the Clarke Institute (1966–98).



Prof. Emeritus R. Edward Turner (1926-2006) – Medical Director, Clarke Institute (1969–77); Chair, Medical Advisory Committee (1972-1977); subsequently Psychiatrist-in-Charge and Director, Metropolitan Toronto Forensic Service (METFORS)

Over the past few years, beginning with my doctoral work at the University of Saskatchewan, I have studied the nature of Cold War sexual psychiatry with particular focus on how (and why) homosexuality was defined as a mental condition. When the American Psychiatric Association released its first edition of the DSM in 1952, it included homosexuality as a pathological condition. Moreover, this so-called condition was the first ever to be de-classified and

removed from the manual – the result of public debate among psychiatrists and gay and lesbian activists in the early 1970s. Throughout the 1950s and 1960s the Toronto Forensic Clinic produced several papers and presentations that questioned how homosexuality could be a pathological condition when gay men and women were, in general, no more "mentally ill" than the sexual "norm" (that is, monogamous heterosexuals).

Throughout my PhD, CAMH Archivist John Court provided valuable advice and information about researching the Toronto Clinic and psychiatrists such as Dr. Turner. I received the Hewton Bursary in 2012 and, through this bursary, I had the fortunate opportunity to extend my research on Cold War sexual psychiatry to the United States. I travelled to Los Angeles and visited the ONE National Gay and Lesbian Archives and the Special Collections at the University of California, Los Angeles where I read papers of clinicians who opposed the classification of homosexuality as a symptom of mental illness.

Now a few years later I have returned to the subject of sexual pathologization and the CAMH Archives, with a specific focus on Dr. Turner, who took his role as psychiatrist within the clinic and society seriously. While not an activist, Turner later became an advocate for Toronto's gay and lesbian community. My research focus, however, is on Turner in his earlier years at the clinic when he identified the deeper problems of classifying homosexuality as a deviation akin to serious sexual behaviours. Turner stands out in this history not just for his desire for a balanced approach to dealing with actual sexual criminals, but also for his ability to consider that the current codes of normalcy were fallible. Considering the contemporary Cold War desire for clear divisions and unequivocal truth, this embrace of uncertainty (which went beyond acknowledgement) is notable.

Council spent some time in discussion of this matter. The value of a program of education was emphasized to obviate the possibility of homosexuals being discriminated against in their life and occupation so that they will not be made ill because of the stand taken against them. After considerable discussion the following motion was put forward:

- MOTION:**
1. That there is in our opinion insufficient evidence to see homosexuality as a diagnostic classification.
 2. Because of the bias, prejudice and other punitive actions which have been taken toward homosexuals we want to remove any implication of this sort.
 3. Therefore, that we as a body agree that we will not use homosexuality as a diagnosis on medical forms, insurance forms, legal forms, or any other matters to do with diagnosing a patient, and to make this Council's views known to C.P.A."
- Moved by Dr. Cormack, seconded by Dr. Levine. CARRIED.

Because it was 1975. During Dr. Edward Turner's Presidency of the Ontario Psychiatric Association, he presided at the OPA Council's June, 1975 session that discussed and passed this resolution. CAMH Archives, Dr. R.E. Turner fonds, F27.4.15

OVERCOMING STIGMA – STILL A WORK IN PROGRESS

by Nancy Dorrance – Hewton Archival Research Award
recipient, 2018
Independent historical researcher-writer, Kingston

At the dawn of both a new century and a new millennium, the president of the Canadian Psychiatric Association, Michael Myers, chose a challenging theme for his inaugural address: “Overcoming Stigma”. Two years later, the World Health Organization identified stigma as the “undefined and hidden burden” of mental illness. In 2004, the Council of European Ministers pledged its support for anti-stigma activities.

With such strong declarations from organizations around the globe, it might have seemed the 21st century would usher in a new era of understanding and empathy for people who live with mental illness. Almost two decades later, however, that vision has yet to be realized.



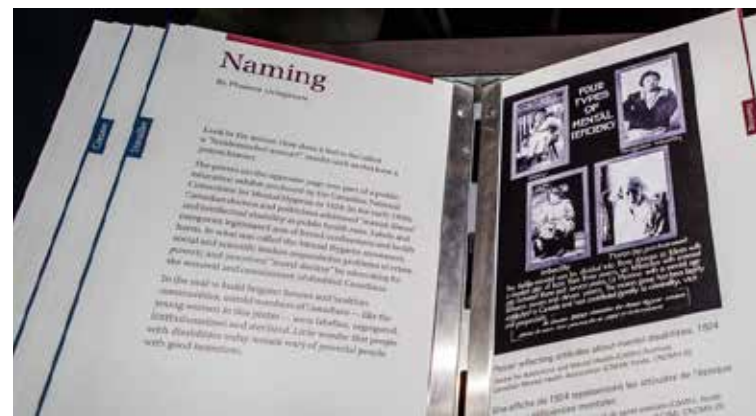
According to Prof. Heather Stuart, Bell Canada Mental Illness and Anti-stigma Research Chair at Queen's University, “We’re more knowledgeable and our attitudes have improved over the past 20 years. But our socially distancing behaviours toward people with mental illnesses are about the same – or in some cases, worse.”
Photo courtesy of the subject, Heather Stuart

Since I had chosen to explore stigma reduction as the first of several “big ideas” around mental health and addiction over the past two decades, this declaration from one of Canada’s top anti-stigma experts came as somewhat of a shock. Through my research, I’d learned that stigmatization of mental illness has existed in most cultures (with one or two exceptions) throughout history. Dr. Stuart’s findings suggested that, despite the well-intentioned and often high-profile efforts of many groups and individuals, it is still very much with us today.

The word “stigma” is derived from the ancient Greek “stig”, which was a sharp stick used to mark slaves and

criminals to signify their social status. Although the Greeks didn’t brand mentally ill people in this way, they did associate mental illness with shame, loss of face and humiliation.

During the persecution of what was deemed to be witchcraft in the 16th through 18th centuries, mental illnesses became linked with sin. This association persisted into the early 19th century, when “lunacy” or “madness” was attributed to brain dysfunction, and the concept of hereditary degeneration gained widespread acceptance. Shifting in public perception from a moral to a genetic failing, mental illness continued as something to be shunned, feared and hidden away.



Depicting that era’s “*Four Types of Mental Deficiency*,” in 1924 the Canadian National Committee for Mental Hygiene (CNCMH – later re-named and re-focused as the Canadian Mental Health Association – CMHA) laid out many, although not all, aspects of its approach to “mental hygiene” through a national touring exhibition of posters & artifacts. This poster is now reproduced on permanent exhibit, as seen above, in the **Canadian Museum of Human Rights, Winnipeg.**
CMHR exhibit photo, 2015. Poster photo, 1924: CAMH Archives, CMHA fonds, CNCMH-20

In 1963, sociologist Erving Goffman characterized the idea of stigma as “spoiled identity”, suggesting that mental illnesses were among the most deeply discredited of all stigmatized conditions. For mentally ill people, their medical condition can literally become their identity. A person *is* “bipolar/ schizophrenic/alcoholic” rather than *suffering* from disorders.

Over the past several decades, however, some people have begun viewing stigma through a different lens: one that shifts focus from the person experiencing stigma to the processes that cause it. “From this perspective, ‘stigma’ is not a mark of shame borne by the individual,” says Dr. Stuart. “Rather, ‘stigmatization’ is a complex social process that results in discrimination and social inequity.”

In the 1990s a grassroots, anti-stigma movement, comprising many with lived experience, advocates and historians, sprang up in Canada and the UK, then in other countries. Focusing on true stories from “psychiatric survivors,” the intent was to protest past marginalization and mistreatment of people with mental illness, while reclaiming the word, “mad” as a point of pride and community, rather than as a stigmatic epithet.

Early Canadian initiatives included 1993’s Psychiatric Survivor Pride Day in Toronto, which grew into a city-proclaimed Mad Pride Week. That same year, the multidisciplinary arts and mental health organization, Workman Arts, launched its annual *Rendezvous with Madness Film Festival*. Today it is the largest such event in North America, generating thoughtful public discussion around mental health and recovery.

To honour and raise awareness about the lives of patients in the mid-1800s who built the original brick boundary walls of the then “Provincial Lunatic Asylum” – still preserved on-site of CAMH’s successor hub site – York University historian Geoffrey Reaume initiated a walking tour of the walls on Mad Pride Day, 2000. In the next decade, more than 80 tours attracted public visitors along with CAMH clients and staff.

Most recently, as part of its 20th-anniversary celebrations in 2018, CAMH introduced a new hashtag on social media. #MentalHealthIsHealth highlights the disparity in the way that people with mental illness are treated compared to those with a physical illness. The program also advocates for the elimination of prejudice, discrimination and funding gaps in Canada’s mental health system.

And yet, Dr. Stuart reports, although Canadians are increasingly able to describe mental illness accurately, “We still don’t want someone with mental illness babysitting our kids; we wouldn’t hire them as a teacher, lawyer or accountant; and we don’t want group homes in our neighbourhoods.”

After centuries of fearing, shunning and concealing mental illness, widespread acceptance of it as a normal, factual part of the human health spectrum – as unthreatening and treatable as any physical ailment – remains a work in progress.

The Emergence of Experimental Neuropsychology in the Post-WW2 Era

by Eric Oosenbrug – Hewton Archival Research Award recipient, 2016

PhD candidate, Psychology, York University

The 1950s was a notable decade for Canadian psychology. Not only was evidence for the existence of a reward centre in the brain described for the first time in 1954 by James Olds and Peter Milner, but the first studies of psychological pain by Ronald Melzack, and pioneering work on memory and the functions of the temporal lobes established Brenda Milner as one of the founders of clinical neuropsychology.

In addition to being Canadian contributions to postwar psychology, they share a common thread: they represent the beginnings of collaborative efforts between psychology and neurophysiology; and all were students of Donald O. Hebb at McGill University. The history of psychology in North America tends to focus exclusively on the United States, ignoring the particularities of research and disciplinary development in Canada, such as the emergence of neuropsychology.



Prof. Donald O. Hebb, Chairman – Department of Psychology, McGill University, 1948 – 1958.
Photo courtesy of the author

My research examines the history of medicine in relation to psychology. While most histories of this kind have examined how clinical psychology developed alongside psychiatry, and tend to focus exclusively on the United States, my project investigates how psychology and

physiology contributed to one another, transforming psychology from a branch of philosophy in the first half of the twentieth century into a branch of biomedicine in the second.

The Hewton Archival Research Award, which was generously granted to me in 2016, allowed me to travel to Montreal to conduct archival research and oral history interviews critical to my study of the history of psychology at McGill. It was here that I discovered evidence that academic psychology in Canada developed in response to its own priorities and conditions – not as a mere extension of American disciplinary formations.

For example, my research indicated that post-WW1 support for psychology came about through its association with the mental hygiene movement (which continued into the 1960s) rather than a gradual development from moral and mental philosophy. Psychologists were mobilized as mental testers, helping to determine the perceived mental capacities of children, immigrants, and criminals. McGill had the first official Department of Psychology in Canada, in 1924 (significantly later than in the US) – but less known is the establishment that same year of their Department of Abnormal Psychology in the Medical faculty.

These two streams of psychology, each headed by leaders with strong misgivings for each other, stalled the integration of clinical and experimental research at McGill for a quarter century. While American psychologists transformed the discipline into an experimental science of behaviour, much of Canadian psychology remained wedded to a functionalist psychology committed to service to schools and industry. It was not until World War II that a modern psychology would emerge in Canada.

Here, too I discovered that the particular form this modern psychology would take at McGill was highly contested. While the achievements mentioned above arose from the kind of psychology that Hebb had established in the early 1950s – i.e., intimately tied to a search for neuro-physiological organization – other candidates being considered by the Selection Committee in 1946 would have brought a very different style of psychology to McGill. For example, Kenneth Spence and B. F. Skinner, both noted neo-behaviourists, would have driven the course of research in a different direction – one tied closer to linguistics and the social sciences.

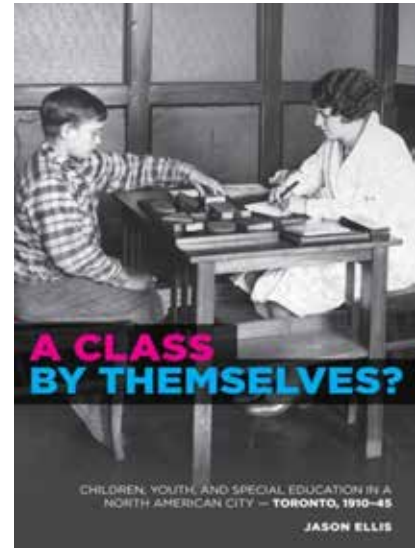
Stories of the influence of the early “neuro” on Canadian psychology have only begun to be told. The research I was able to conduct with the Hewton Award allowed me to investigate this area of Canadian history too often relegated as a footnote to broader American-focused histories of psychology and medicine.

2019 Book Notice – Jason Ellis

Hewton Bursary recipient, 2005 and
Griffin Bursary recipient, 2008

Assistant Professor, Department of Educational
Studies, University of British Columbia

A Class by Themselves? – Children, Youth, and Special
Education in a North American City: Toronto, 1910 – 45



Publisher: University of Toronto Press
Scheduled for release: 17 January 2019
ISBN: 1442628715, 9781442628717
Length: 320 pages

In “A Class by Themselves?” Jason Ellis provides an erudite and balanced history of special needs education, an early twentieth century educational innovation that continues to polarize school communities across Canada, the United States, and beyond. Ellis situates the evolution of this educational innovation in its proper historical context to explore the rise of intelligence testing, the decline of child labour and rise of vocational guidance, emerging trends in mental hygiene and child psychology, and the implementation of a new progressive curriculum.

At the core of this study are the students. This book is the first to draw deeply on rich archival sources, including 1,000 pupil records of young people with learning difficulties, who attended public schools between 1918 and 1945. Ellis uses these records to retell individual stories that illuminate how disability filtered down through the school system's many nooks and crannies to mark disabled students as different from (and often inferior to) other school children. “A Class by Themselves?” sheds new light on these and other issues by bringing special education's curious past to bear on its constantly contested present.

We are certainly gratified that Professor Ellis thoughtfully observed that, “this book draws significantly on materials in the CAMH Archives. Really, the CAMH Archives is second only to the Toronto District School Board (TDSB) Archives as the main archives in which I worked.”

<https://utorontopress.com/ca/a-class-by-themselves-2>

Hewton, Griffin and Rae-Grant Funding Awards to Support Archival Research in 2019

The Friends of the CAMH Archives (FoCA), dedicated to the history of Canadian psychiatry, mental health and addiction, have established three endowment funds. These endowments annually provide funding in memory of their late colleagues, Ms. E.M. (Lil) Hewton and Dr. J.D.M. (Jack) Griffin, OC, and – inaugurated this year through the generosity of the Laidlaw Foundation – the Dr. Quentin Rae-Grant Scholarship.

The purpose of these funding awards is to provide financial assistance to students, and others not necessarily associated with an academic institution, who propose to undertake archival research on an aspect of the history of mental health or addiction in Canada. The FoCA board at its discretion may approve awards to a maximum of \$2,500 each.

There is no application form. Candidates are invited to submit a letter of intent not exceeding 500 words, together with a budget and résumé, not later than November 30, 2018. These research awards are conditional on the recipients agreeing to submit progress reports within one year, and a final report including a financial synopsis within two years of receiving their financial allocation.

For examples of the archival research projects (formerly “Bursaries”) previously awarded, please refer to that feature as included in the SPRING editions of our

past years’ Newsletters, indexed at:

<https://www.camh.ca/en/health-info/camh-library/camh-archives/friends-of-the-archives>

To apply for a 2019 award, please submit an application by the November 30, 2018 deadline to:

Sydney Jones – President, Friends of the Archives
CAMH, 1001 Queen Street West
Toronto, Ontario M6J 1H4

Please note that electronic submissions are preferred, via: John.Court@camh.ca

Friends of the CAMH Archives (FoCA)

Centre for Addiction and Mental Health
1001 Queen St. West, Toronto, Ontario M6J 1H4
Tel. 416-535-8501 x.32159
Friends.Archives@camh.ca

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Membership Renewal Notice for 2019

New & renewal memberships and donations are encouraged via our safe, secure, online partner:



<https://www.canadahelps.org/en/charities/the-museum-of-mental-health-services-toronto-inc/>

Or via surface mail:

Name: _____

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* **Membership:** \$ **30.00** or \$25.00 for students & seniors, on a calendar year basis (currently valid through Dec. 31, 2019)

* **Donation:** \$ _____ (optional, at your discretion)

Total: \$ _____

* An Income Tax receipt will be provided for your membership remittance plus any additional donation.

Please consider remitting online or, alternatively, by mailing this form together with a cheque, payable to “Friends of the CAMH Archives”

Surface mailing address: Friends of the CAMH Archives, 1001 Queen Street West, Toronto, Ontario M6J 1H4