History of ASH Work Group Recommendations

Phase III: ASH Brain Health System Redesign | August 2021-July 2022

The Austin State Hospital (ASH) Redesign efforts completed a third phase of planning throughout 2021-2022. The History of ASH Work Group (Appendix A) convened community members and experts with knowledge and expertise in preserving artifacts, capturing oral histories, and conducting strategic planning for preservation efforts. The goal of this work group was to determine how to best preserve the history of ASH as the new hospital is launched.

The History of ASH Work Group and partnering institutions have the vision and momentum to develop ASH and other Texas state hospitals into the most robust, person (patient)-centric historical sites in the nation. Many former asylums across the country are abandoned, slated for demolition, repurposed for economic development, or converted into small museums operated by volunteer staff and open by appointment only. Creating and filling the Historic Preservation and Grants Coordinator position for the state hospital system, securing a forthcoming preservation needs assessment for ASH, and projects conducted by Dr. King Davis and archaeologists are fundamental to establishing the state hospitals' public history programs. However, those efforts are springboards for the comprehensive work to save people's stories and provide overdue reparative justice for people with mental illness across the State of Texas and its history. To continue building on those efforts and succeed in this endeavor, ongoing funding and support from the State, grants, philanthropic gifts, and buy-in from diverse stakeholders are critical for ensuring that rescuing these histories are not half measures due to lack of permanent professional staff, resources, and critical infrastructure. The State of Texas has a historic opportunity to preserve a meaningful, accurate history of one of its public health institutions. The recommendations in this document encompass a thorough roadmap, starting with the preservation and interpretation of ASH's history. The following report reviews the work group's Phase II recommendations and establishes the additional recommendations for Phase III to share the history of ASH.

Recap of Phase II Recommendations

"The first recommendation is to hire a project manager to oversee the implementation of the preservation, collection management, and interpretation of the historical artifacts." D.D. Clark was hired in 2021 as the Historic Preservation & Grant Coordinator for the state hospital system. Her hiring is the first step toward creating a preservation program for the state hospital system.

"The second recommendation is to complete a review of the collections and their current environments, and determine how best to preserve the items." The Hogg

Foundation for Mental Health awarded a grant to Dr. King Davis from the University of Texas' School of Information to identify, organize, and produce high-resolution digital copies of ASH's historical documents, including admission, treatment, and discharge records. This project started in January 2022 and is expected to be completed by the end of the year. However, this project covers just one part of the historical artifacts and records held by the Health and Human Services Commission (HHSC) that need to be accessioned, cataloged, and preserved. More information is included in the History of ASH Work Group Phase II report on how to complete this recommendation, and updates on the progress of the recommended preservation needs assessment and inventorying needs can be found in the Sustainability Sub-Work Group Recommendations.

"The third recommendation is to share the ASH's collections and campus history through a phased historic interpretation plan based on the *Standards and Practices for Interpretive Planning* of the National Association for Interpretation and other respected interpretation resources and guides." The complete documentation of the collections allows HHSC and ASH to discover, understand, and share its rich history with the community. The History of ASH Work Group recommends sharing this history by establishing a community history center. The previous report outlines phases on how to develop such a center. The History of ASH Work Group began work on Phase I by identifying themes, advocacy goals, and audience needs and preferences, as well as recommendations on where to locate the center, the types of physical spaces it might include, and who is needed to make the center happen. This discussion can be found in ASH Community History Center Recommendations.

"The fourth recommendation is to gather potential funding options to support sharing the history of the ASH with the greater public." The History of ASH Work Group addressed this recommendation by identifying grant opportunities that match prioritized projects, determining who the applicant for grant opportunities would be based on the type of project, and developing a basic communications plan to garner financial and in-kind support. These approaches can be found in the Funding Sub-Work Group Recommendations.

To build upon the work group's Phase II report, the team created two subgroups to focus their efforts and accomplish more within the timeframe of Phase III. The first subgroup focused on how to sustain the history sharing efforts for HHSC, and the second subgroup concentrated on funding needs for several items tied to sharing the history of ASH.

Sustainability Sub-Work Group Recommendations

It can be overwhelming to know where to start with over 150 years of history, so our work group defined a list of prioritized projects. Many of these project ideas arose from the Phase II report's second recommendation "to complete a review of the collections and their current environments and determine how best to preserve the items."

- 1. Preservation Needs Assessment: The Phase II report recommended to "conduct a preservation needs assessment of the artifacts and the buildings in which they reside." Different options for completing a preservation needs assessment were considered by the work group until a member, Jenna Cooper, offered her professional services for free. Work began on the preservation needs assessment, and it will take approximately one calendar year to complete.
 - a. While Cooper will provide more specific recommendations following the release of these recomendations, the current storage of artifacts and documents in buildings without climate control is unsustainable. The group recommend that building 636 (22,436 square feet) be reserved for storing historically significant artifacts and documents because it is climate controlled and can be quickly modified to support better preservation.
- 2. Collections Inventory: The Phase II report recommended to "procure Collections Management Software (CMS)," and "create a comprehensive inventory of all artifacts and archival collections under Austin State Hospital custodianship." Determining which CMS to use is a project itself as there are many choices available. A list of some of the options available is included in Appendix B.
 - a. The first step to determine which CMS to use is to create a work group whose charge is to identify the best system. This work group might be composed of a team leader; experts in historical collections management; a purchaser from the agency; a representative of a typical user such as a researcher or teacher; and someone familiar with other needs such as point of sale options, donor management, and membership management.
 - b. Top 3 priorities for a CMS:
 - User-friendly & searchable (internally and externally with managed access that complies with HIPPA and other regulations).
 - ii. Access across state hospitals.
 - iii. Capability for adding storage.
- 3. **Oral Histories:** Oral history is "a basic structured collection of spoken firsthand memories in an interview setting." While archives and artifacts can provide a

¹Barbara W. Sommer and Mary Kay Quinlan, *The Oral History Manual*, 2nd ed. (Lanham, Maryland: AltaMira Press, 2009), 1.

wealth of information about the history of an institution, capturing the stories of the people who lived and worked at the hospital humanizes this history and allows us to connect more deeply with it. The history of the Austin State Hospital is one of people and not simply the artifacts they left behind.

In addition to supporting a robust historical narrative, an oral history program will give ASH and HHSC the opportunity to partner with local universities and provide a significant educational opportunity for students who, through their programs, will participate in making and disseminating history. It is also a chance to enlist people outside the mental health field to conduct interviews and learn more about mental illness, and it can be a part of an ongoing program to promote the work of the Austin State Hospital.

- a. We recommend establishing an official oral history program that provides training on best practices and legal forms for obtaining official consent.
- b. We recommend identifying long-term digital storage of the recordings, transcriptions, and consent forms.
- c. We recommend developing processes to incorporate oral history interviews and projects that were undertaken prior to the establishment of an official oral history program.
- d. We recommend developing a training program that includes standard instructions on conducting oral histories, as well as trauma-informed care training.
- e. We recommend actively including peers and hospital residents in the interview process, and the overall planning of the oral history program. Having a diverse team of experts in oral histories alongside people intimately familiar with the state hospital system will strengthen engagement in the project and the quality of the oral histories collected.
- f. A draft work plan that outlines the steps of developing an oral history collection this program is included in Appendix C.
- g. The following is a list of potential categories of narrators to interview for the oral history program:
 - i. Current and former staff
 - ii. Current and former residents
 - iii. Families of current and former residents
 - iv. Agency retirees
 - v. Steering committee for the ASH Redesign project
 - vi. Public officials
 - vii. Individuals from advocacy groups
 - viii. Architects
 - ix. Archaeologists

- x. Mental health practitioners and experts outside of ASH
- h. Interviewers could comprise the following:
 - i. Experts in collecting oral histories
 - ii. People in an educational program with a related career path such as psychiatry, psychology, nursing, history, sociology, social work, and anthropology (undergrad, masters, and doctoral).
 - iii. Professionals in a related career path such as doctors, nurses, historians, and archivists.
 - iv. People who served at ASH
 - v. People with lived experience who are not in a program at ASH.
 - vi. HHSC staff and retirees
 - vii. Members of the Volunteer Service Council (VSC) for ASH
- i. It is recommended that a partner system composed of an oral history expert paired with a person with lived experience is implemented so that each person contributes their expertise to the process.
- j. Alongside an oral history project that has a start and an end date, we recommend continuing training and offer professional development for an ongoing oral history program at ASH. History is always happening and new stories are waiting to be told.
- 4. **Call for Artifacts:** Over the years, many former employees or residents could have brought home artifacts or memorabilia from their time at the hospital. These potentially valuable collections can be reclaimed through a "call for artifacts." This call could also serve as a means for promoting the campus' history.
 - a. A gentle process for accepting artifacts could be implemented before an official call goes out.
 - Before an official call goes out, a formalized process that includes legal forms outlined in HHSC's Preservation Operational Procedures should be established.
 - c. Storage needs should be considered before the official call goes out. Storage solutions need to be adaptable because we will not know how much exists until it is returned. A separate space for processing the items before going into storage will also need to be set up.
- 5. **Preservation plan for the ASH Cemetery:** An often forgotten aspect of the hospital's history is the ASH Cemetery. We recommend including the cemetery in future preservation plans for the hospital.

Funding Sub-Work Group Recommendations

The Funding Sub-Work Group has focused its recommendations on how to fund and promote the identified projects from the Sustainability Sub-Work Group.

- 1. When applying for grants the Funding Sub-Work Group recommends considering the scope and goals of the project to determine who is the applicant.
 - a. HHSC might be the applicant for large, system-wide projects that bring together multiple state hospitals' preservation goals. This ensures ownership and control of the project will lie fully within the state agency and can easily be implemented from hospital to hospital.
 - b. For projects with more narrow scope and goals, ASH can form a partnership with an outside organization or expert. ASH and the outside organization develop a formal agreement and the outside organization applies for funding as the applicant. This arrangement allows HHSC and ASH to enlist the services of experts in the historic preservation fields. An example of this partnership is currently in place with the University of Texas at Austin project led by Dr. King Davis. Examples of potential organizations to form future partnerships are:
 - i. Academic institutions (Appendix D)
 - ii. Non-profit organizations
 - Organizations can include ones that focus on mental health, historical preservation, an intersection of both, or others that have an interest in assisting with funding the state hospital's historical preservation projects.
 - iii. ASH Volunteer Council
 - iv. Create a friend's group to facilitate smaller projects
- 2. Focusing on the prioritized projects identified by the Sustainability Sub-Work Group, the funding sub-work group put together an extensive list of grant opportunities from local and national funders categorized by project type. This can be found in Appendix E.
- 3. A comprehensive communications plan about the work that ASH and HHSC is doing to preserve and share its history would assist in its ability to procure additional funding. The more people who learn about the importance of this work the more support it will receive in in-kind donations, monetary donations, and volunteer time.
 - a. Efforts already made to share this work have garnered increasing interest and support for this project, including:
 - October 2021 three work group members presented to an audience at Texas State University.

- ii. May 2022 the Bob Bullock Museum displayed artifacts from ASH to go alongside a traveling mental health exhibition.
- iii. May 2022 Dr. King Davis spoke about his work preserving ASH records in partnership with NAMI at the Bob Bullock Museum.
- iv. May & June 2022 press releases and news articles about the Bob Bullock Museum exhibit have been published by outlets such as KXAN, Community Impact, and Spectrum News.
- b. A communications plan example for ASH to use is provided under Appendix F.
- c. Suggested additional outlets to improve outreach:
 - i. Local community newspapers and media in the surrounding area:
 - 1. Black newspapers and media
 - 2. LGBTQ outreach
 - 3. Latinx newspapers and media
 - 4. Additional demographic groups
 - ii. Government media and relationships (to be managed by HHSC)
 - iii. Local library outreach
 - iv. Professional organizations or associations that center around mental health, preservation, or an intersection of the two
 - v. Utilize internet forums focused on volunteer services

ASH Community History Center Recommendations

Expanding on Phase II's third recommendation "to share the ASH's collections and campus history through a phased historic interpretation plan," the History of ASH Work Group recommends that once initial preservation and collection management projects have been completed, ASH and HHSC will share this history through a community history center.

1. What to call it?

- 1. Austin State Hospital Community History Center (ASH CHC)
- We specified "Community History Center" because referring to it as a "resource center" might lead some people to confuse it for a place to find access to counseling.

2. Where to locate it?

- 1. The work group considered two different buildings to house the community history center—501 and 540. The work group determined that 501, also known as "Old Main," would be the preferred option for several reasons:
 - i. It is a Texas and national historic landmark, which means that while there cannot be too many modifications to the building, there is a direct connection between the building and the purpose of the community history center. The building is a Kirkbride structure, which reflects the historical understanding of care and recovery at the hospital's inception.
 - ii. The historical designation opens up opportunities for grant money for its maintenance and improvement.
 - iii. It has an elevator and a wheelchair ramp, whereas 540 does not.
 - iv. Both buildings require a significant investment to turn them into a community history center.

3. What is in it?

1. Advocacy goals

- Counter misperceptions of what ASH is and what it was by showcasing its history and the cultural and political settings that influenced its development.
- ii. Destigmatize mental illness and eliminate the fear of people who are mentally ill/ hospitalized.
- iii. Highlight peer voices by telling their stories and exploring the history of recovery at ASH.
- iv. Tell new stories:
 - 1. Discover stories that need to be told via outreach efforts.
 - 2. Implement methods that allow for non-traditional storytelling.
 - 3. Discuss recordkeeping that has missed important stories.

- v. Educational programming for kids, parents, and teachers about how to discuss mental health and illness.
- vi. Importance of representing patient art throughout the space.

2. Themes

- i. The origins of the Austin State Hospital:
 - 1. What did it mean for ASH to be the first state hospital west of the Mississippi River? Who lived here and where did they come from?
 - 2. What was the land before it became a hospital and what was Austin like at the time? Placing the hospital's location within the context of when it was created—the hospital was not in the middle of town like it is now, but rather in a more rural part of Austin.
 - 3. How did Austin residents interact with the hospital and its campus? Austin residents used to picnic on the grounds and used the campus as a park.
- ii. Building community:
 - 1. The history of community support (volunteers, university partnerships, etc.)
 - 2. The evolution of ASH's status and its role in the community over time.
 - 3. The role of patients in the creation and maintenance of ASH as landscapers, furniture makers, etc.
- iii. Land and architecture:
 - 1. Geographical development and the ebb-and-flow of land ownership over time.
 - 2. The hospital's architecture and how it revealed and furthered segregation and racial disparities.
- iv. The evolution of treatment:
 - 1. Conceptions of care and recovery.
 - 2. Forms of treatment and advances in health care.
 - 3. Attitudes toward residents, including broader equity issues such as how treatment and diagnosis differ among people of different races, genders, and classes.

3. Audience needs and preferences

- i. Entertainment value
 - 1. Connections to popular media.
- ii. Child and family friendly
 - 1. Make content understandable to kids.
- iii. Accessibility on reading and consuming information

- 1. Mindful of tiny writing on labels
- 2. Audio descriptions
- 3. Spanish translations
- 4. Digital exhibits, databases, and tools to reach wider audience who reside outside of Austin.
- Avoid solely text-based exhibits—include multimedia components such as recorded interviews similar to ones on display at the "Mental Health: Mind Matters" exhibit at the Bob Bullock Museum.

iv. Elevator access

 Consider what's on the first floor and what's on the floors inaccessible to people with mobility limitations from an equity standpoint.

4. Physical spaces

- i. Exhibition space:
 - 1. Draws people into the center
 - 2. Rotating exhibits can explore the different themes and advocacy goals detailed above

ii. Media room:

- 1. Showcase movies, images, oral histories
- 2. Display current and former patient art, music, etc.
- 3. Space that presents an opportunity for people receiving care and other people to share their works or perform.
- 4. This room can share space with exhibitions.

iii. Classroom:

1. Professors, researchers, teachers, practitioners, and graduate students can conduct workshops

iv. Reading room:

- 1. A quiet space for research and reflection.
- 2. Does not need to be large because of the niche nature of the collections.
- 3. Classroom and reading room will require specialized equipment like computers and projectors.
- 4. This can also serve as classroom space.

v. Casual community space:

- 1. An area where people can sit, relax, and have conversations with each other and enjoy a welcoming atmosphere.
- vi. Auditorium-style room for conferences, events:
 - 1. A space large enough for seating and speakers to present including a podium or temporary riser if necessary.

- 2. This can be in a nearby location such as the chapel or set up in a way that allows for temporary conversion of other spaces in the center into auditorium-style rooms.
- 3. It is recommended to charge outside groups for use of the auditorium because of administrative and overhead costs.

4. Who makes the center happen?

- 1. A friend's group or fundraising board for ASH CHC:
 - i. Active members of other philanthropic organizations and foundations.
 - ii. Community leaders who have experienced mental illness.
 - iii. Elected officials interested in this history.
- 2. HHSC and ASH employees:
 - i. Historic Grants and Preservation Coordinator
 - ii. Communications teams:
 - 1. Provide access to a green room and recording space to assist with multimedia exhibitions and digital components.

3. Preservation staff:

- i. Collections manager:
 - An experienced museum and/or archives professional to oversee cataloging, archival processing, curatorial duties, and some outreach responsibilities until HHSC hires additional professional staff to oversee specific domains.
- ii. Museum or archives assistant(s) to catalog objects and process archival collections.
- iii. Professional curator to design rotating exhibitions for the community center, traveling exhibits, digital content, and contribute to scholarship about the history of the state hospital system.
- iv. Professional museum or cultural heritage outreach staff member who plans events held at ASH's community center and auditorium, and liaisons with community groups to share ASH's stories.
- v. All professional staff positions should provide a competitive salary that is commensurate with experience to ensure the retention of expert staff and to compensate them for the tremendous amount of work that preserving a state hospital system's history entails.
- vi. Support roles, such as museum or archives assistants, can be grant-funded positions that last for a year or two to accommodate the significant amount of work needed at the beginning of the project.
- vii. Adjust job responsibilities for existing positions at different hospitals to start managing the collections at their respective hospitals, and

- provide training for current staff without professional expertise in managing historical collections.
- viii. Residents, community members, and other consumers who can serve as curators, docents, and local historians and receive honorariums for their contributions or work on a volunteer basis.
- 4. Partnerships with history and memory organizations, researchers, funders:
 - Austin History Center and other repositories that contain ASHrelated collections.
 - ii. Texas State Library & Archives Commission
 - iii. Texas Oral History Association
 - iv. Baylor University Institute for Oral History
 - v. Dr. King Davis and his team of researchers:
 - Current project funded by the Hogg Foundation in locating, identifying, categorizing, and producing high resolution digital copies of all documents (admission, treatment, discharge, budgets, personnel documents, photographs, construction documents, etc.) currently held at ASH. Dr. Davis is already noted for leading the decade-long effort to digitize the archives of patient records of the Central State Hospital in Virginia.
- 5. Partnerships with higher education institutions (see Appendix D):
 - i. Austin Community College
 - ii. Concordia University
 - iii. Huston-Tillotson University
 - iv. St. Edward's University
 - v. Texas State University
 - vi. University of Texas at Austin
 - vii. University of North Texas

Conclusion

The biographies of people with mental illness are frequently obscured or absent in historical accounts, including vital and census records that furnish the most basic context for individuals' lives. Until recently, people who died while institutionalized were often buried in unmarked graves or represented by numbered grave markers, their names and final resting places perhaps irremediably lost. The tens of thousands of uncatalogued archives and artifacts that live all over ASH and other state hospital campuses, including facilities without climate control, are at risk of deteriorating, getting lost or thrown away, or being treated as government surplus. Moreover, with each passing year, former patients and staff who can provide oral histories or answer calls for

artifacts move or die. Time is of the essence for collecting and safeguarding the patchwork of personal accounts, archives, and artifacts that are indispensable for telling a fuller, more peer-centered history of Texas' state hospitals. Documenting the past is not the only consideration for preserving our state hospitals' histories— "documenting the now" and creating sustainable physical and digital space for future donations is also paramount to eradicating historical silences of people's experiences.

Sharing the histories of people who have received care and our psychiatric hospitals is equally as imperative as preserving them, and those efforts intertwine with managing state hospital historical collections. The interpretation of historical sites, objects, and archives is built upon well-documented collections, as well as peer, staff, and community participation. The American public's perception of people with mental illnesses as a threatening "other" is a layered and massive societal problem that draws from historical stigmatization and inhibits people from disclosing their experiences. The general public overall has a poor understanding of acute and chronic mental illnesses that state hospital patients often experience, and we are only now reckoning with historical and current systemically biased factors in diagnosing and treating people with mental illnesses. Education and contact with people with mental illness from all demographics will reduce stigma, especially within museums and community spaces hosted on state hospital campuses where peers take leadership roles. Including peers, staff, and community members in a collective effort to provide interpretation and programming for Texas state hospital histories is a powerful step forward towards the people of Texas validating the humanity of people with mental illnesses and embracing them as valued community members.

Appendix A

History of ASH Work Group Members

Name	Organization/Role	Role
D.D. Clark	Historic Preservation & Grant Coordinator, Health and Specialty Care, HHSC	Co-Chair
Elizabeth Stauber	Archivist and Records Manager, Hogg Foundation for Mental Health	Co-Chair
Lauv Bruner	State Hospital Construction Project Coordinator, Health & Specialty Care, HHSC	Member
William Bush, Ph.D	Professor of History Texas A&M University, San Antonio	Member
David Cansler, MD	Director of Health Information Management, HHSC	Member
Jenna Cooper	Records Analyst, Austin History Center	Member
Mary Kahle	Community Member	Member
Parker LaCombe	Director of Peer Services, ASH	Member
Peggy Perry	Director of Quality Management, Health & Specialty Care System, State Hospitals, HHSC	Member
Sherley Spears	Cultural Consultant	Member

Appendix B

Collection Management Software Recommendations

- i. Archives Space: requires a lot of prep and not ideal for museums; used primarily for archives
- ii. PastPerfect: good for objects, difficult to modify for archives; there are work-arounds, but they're hard to train people to use.
 - 1. PastPerfect is a one-stop-shop and overall user-friendly.
 - 2. Will PastPerfect have the storage capability to accommodate all of the state hospitals' records?
- iii. Need software that can be used throughout the state as they require digital storage for catalog records and digitized materials.
- iv. Important cloud-based software; facilitate using a controlled vocabulary (subject terms that are universally used). Also consider security, access control, redaction, and capability of functioning with Dr. Davis' work.
- b. Software overviews from AASLH
- c. Software Pros, Cons, and Costs:
 - i. CollectiveAccess:
 - 1. Pros: Assistance with migrating data, including Excel & XML files, cloud-hosting packages.
 - 2. Cons: Open-source software (less tech support and typically involves more of a learning curve unless you pay for a hosting package).
 - 3. Cost: Ranges from \$175-\$285/month; additional storage is available at \$50/month for each 100 GB allotment.
 - ii. Gallery Systems (TMS Suite):
 - 1. Pros: Can batch import from Excel or XML, robust support services, TMS Suite acts as a single database, TMS Collections is a web-based application.
 - 2. Clients can manage their own servers or have Gallery Systems Managed Hosting handle it.
 - Cons: eMuseum (online public access portal) is not included in the base software, does not support APIs, and the company will need to be contacted to receive a quote.
 - iii. Lucidea archives software (two options for online sharing–ArchiveEra and Eloquent Archives):
 - Pros: Easy to train users, makes online content very accessible, can generate finding aids, web-based, has membership module that allows researchers to login, can be connected with Lucidea's museum collections management program (Argus).
 - 2. Cons: There's no all-in-one option, the company will need to be contacted to receive a quote.
 - 3. ArchiveEra is the scalable, more budget-friendly option.

4. Quotes are needed-the website is missing estimates.

iv. PastPerfect:

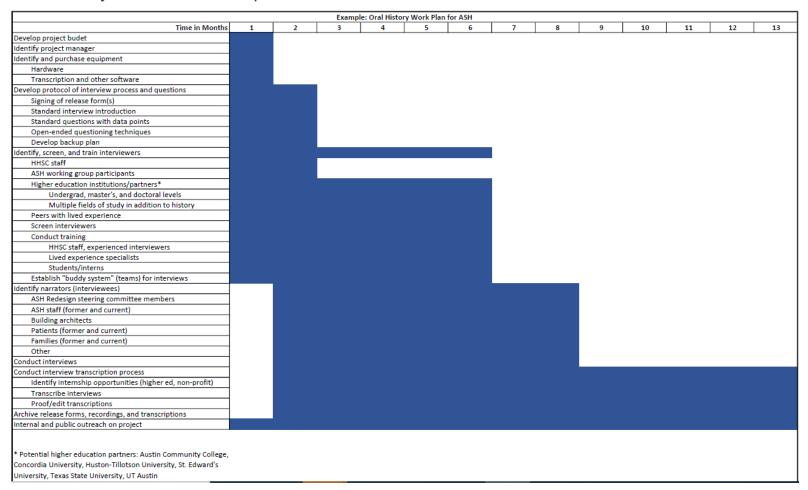
- 1. Pros: Affordable, includes capability of cataloging an array of collections and materials, essentially a "one-stop-shop."
- 2. Cons: Archives catalog is not intuitive like the other catalogs for objects and library materials.
- 3. Cost: Annual hosting costs between \$870-\$2245 for the full-2XL package range.

v. Re:discovery:

1. Pros: Modules for collections management and libraries and archives, easy to learn.

Appendix C

Oral History Work Plan Example



Appendix D: List of Higher Education Partners

Institution	Curriculum opportunity/notes	Contact name	Email address and/or website
Austin Community College	Office of Experiential Learning Internships Program		https://internships.austincc.edu/
Austin Community College		Dr. Al Purcell, Professor of History	apurcell@austincc.edu https://www.austincc.edu/purcell
Concordia University	Very interested in partnership opportunities.	Dr. Ann Schwartz, Professor of Sociology, Director, School of Humanities and Social Sciences	ann.schwartz@concordia.edu Humanities and Social Sciences Faculty and Staff
Concordia University	Very interested in partnership opportunities.	Dr. Matthew Bloom, Chair of History Program	Matthew.Bloom@concordia.edu Humanities and Social Sciences Faculty and Staff
Huston- Tillotson University	Internships, clinical experiences, and extracurricular activities across academic disciplines.	Linda Y. Jackson, Director of the Center for Civic Engagement and Community Outreach	https://htu.edu/36705/linda-y- jackson-to-head-huston- tillotson-universitys-center-for- civic-engagement

Institution	Curriculum opportunity/notes	Contact name	Email address and/or website
Huston- Tillotson University	Very interested in partnership opportunities. Internship in archives and historical collections Museums and Cultural Centers.	Dr. Alaine Hutson, Department of History. Also willing to contact other academic fields.	ashutson@htu.edu Dr. Alaine Hutson, Professor of History
Saint Edward's University	Internships	General website with link to employer information	https://career.stedwards.edu/job s/category/internships/
Saint Edward's University	Very interested in collaborating with colleagues in social work	Jena Heath; on board of Texas Oral History Association	jennah@stedwards.edu Journalism and Digital Media: Jena Heath
Texas State University	Multiple academic disciplines		https://www.txstate.edu/ (search "Internships" for options and contact information)
Texas State University	College of Liberal Arts Internships; multiple academic disciplines		https://www.liberalarts.txstate.e du/Current- Students/internships.html

Texas State University	Internship requirement for public history students	Dr. Peter Dedek, Professor of Historic Preservation and Coordinator, Public History Program	pdedek@txstate.edu https://www.txstate.edu/history/ people/faculty-staff/dedek.html
Texas State University	Oral history	Dr. Justin Mark Randolph, Associate Professor of History; teaches oral history	jmr553@txstate.edu https://faculty.txstate.edu/profile/ 2266604
University of Texas at Austin	Multiple academic disciplines		https://www.utexas.edu/search/results?query=internships (search "Internships" for options and contact information)
University of Texas at Austin, School of Information	Coursework on conducting preservation assessments, creating preservation plans, and writing grants	Rebecca Elder, School of Information; cultural heritage consultant	rebecca@elderpreservation.co m School of Information: Rebecca Elder
University of Texas at Austin, School of Information	Currently working with students to develop archives of ASH	Dr. King Davis, School of Information Research Professor	king.davis@austin.utexas.edu School of Information: Dr. King Davis

Appendix E

Grant Funding Opportunities

1. Open-ended Grants

- a. Summerlee Foundation
 - i. Average grant amount is \$10,000
 - ii. Prior to submitting a proposal, grant seekers must contact the Program Director to schedule a discussion of the proposed project. This discussion must take place at least 60 days before the letter of inquiry (LOI) deadline.
 - iii. Guidelines for the LOI:
 - 1. Summarize the project and tell us why it is important.
 - 2. Highlight the qualifications of key personnel who will carry it out.
 - 3. Include a requested amount and a project budget.
 - 4. Outline a timetable for the project.
 - iv. LOI deadline: July 1, 2022 for the September 2022 Board of Directors meeting

b. Moody Foundation

 The Foundation accepts LOIs on an ongoing basis, and their trustees meet four times a year to consider grant awards. Because of this, the grant application process from inquiry to funding decision may take up to six months.

c. Austin Community Foundation

- i. The Community Grants Program is a year-round grant opportunity for local nonprofits working in eight impact areas. The following are applicable to the history of ASH project:
 - 1. Arts & Culture
 - 2. Community Engagement
 - 3. Education
 - 4. Health & Wellness
- ii. Applications for the Community Grants Program are accepted year-round.

d. Lola Wright Foundation

- i. Established by Miss Johnie Elizabeth Wright in 1954, the Lola Wright Foundation supports children and youth, public health and human services, education and community development, and arts and culture.
- ii. The Foundation's grant making activities are limited to organizations operating primarily within a 50 mile radius of Austin, Texas.
- iii. Application Deadlines: February 28th and August 31st

e. Shield-Ayres Foundation

- i. Funds organizations with programs that serve the communities of Bexar and Travis counties.
- ii. The Shield-Ayres Foundation generally funds in the following areas: health, human services, environment, education and arts.

- iii. The Foundation considers grants for the following expenses: capital campaign, endowment, program, capacity building, or **unrestricted operating expenses**.
- iv. The Foundation's average grant size is around \$10,000, although the Foundation may choose to fund organizations at lower or significantly higher levels. The Foundation may choose to spread larger grants over multiple years, and its largest grants have primarily been to organizations with which the Foundation has an existing relationship.
- v. Organizations are eligible to apply to the Shield-Ayres Foundation once in a twelve-month period, regardless of the approval status of the organization's last application.
- vi. The Foundation will consider multiyear commitments of up to three years. To be considered for multiyear funding, the case should be made clearly in the proposal. The Foundation typically does not consider multiyear funding for organizations that they are funding for the first time.
- vii. The Shield-Ayres Foundation has moved to a two-stage electronic application process. Letters of Inquiry (LOIs) can be submitted at any time; however, LOIs must be received by February 15th and August 15th to be considered at the first and third quarterly Board of Directors meetings, respectively (generally held in March and September).
- f. The Effie and Wofford Cain Foundation
 - i. No website
 - ii. Gives primarily to scientific, medical, and educational institutions.
 - iii. Application form not required.
 - iv. Primarily funds Texas organizations and amply funds historical activities according to its 990.
 - v. Board meeting date(s): October (annual meeting); 6 to 8 interim meetings (dates vary)
 - vi. It is unclear how to request funding from this foundation, so one may need to reach out directly to the board. Phone number: (512) 346-7490.
 - vii. "...the Cain Foundation provided funds for student scholarships, teaching awards, and grants to Texas-based charities, including Austin-based Health Alliance for Austin Musicians (HAAM) and the SIMS Foundation, which provides mental health and addiction recovery services for those in the music industry." -TSHA entry on Franklin W. Denius —Director, President (deceased in 2018).
 - viii. More information about the foundation.
 - ix. In the last 5 years, they've awarded 366 grants to 142 organizations totaling \$26,211,229.
- g. The Nannette C. Wickham Charitable Foundation (Austin foundation)
 - i. No website
 - ii. 990 shows that they give primarily to Austin organizations
 - iii. In the last 5 years they've funded 28 grants to 13 organizations totaling \$202,900.

- iv. W. Kenneth Wickham Jr. Director
 - 1. 35 Cousteau Ln, Austin, TX 78746-3127
 - 2. 512-527-0634

h. The Gordon A. Cain Foundation

- Final disposition of all proposals occurs at meetings of the Foundation's Board of Trustees in May and December of each year. Proposal deadlines are April 1st and November 1st.
- ii. Requests for funding should be submitted as a formal proposal. Please do not use presentation binders, report covers, display binders, or folders. The proposal should be concise, clearly written, and include the following:
 - A detailed explanation of the purpose and objectives of the proposed project or activity. A brief history of the organization and those of whom it serves. Please include the community need for the project.
 - A most recent audited financial statement, a current and itemized annual budget for your organization, and project budget if applicable. Please include the amount needed for the entire project and the amount of the grant you are requesting.
 - 3. A list of major sources of support, your staff description, and list of the Board of Trustees members.
 - 4. The most recent copy of your organization's 501(c)(3) tax-exempt letter from the Internal Revenue Service.
 - 5. The description of an evaluation plan.
 - 6. Letters of inquiry and proposals should be addressed to:

James D. Weaver, Chairman The Gordon A. Cain Foundation Eight Greenway Plaza East, Suite 606 Houston, Texas 77046

i. Museums for America from IMLS

- i. The Museums for America program support museums of all sizes and disciplines to undertake projects that strengthen their ability to serve the public. Project activities may include exhibitions, educational or interpretive programs, digital learning resources, professional development, community debate and dialogue, audience-focused studies, and/or collections management, curation, preservation, and conservation.
- ii. Requires cost-sharing

2. Oral History Grants

- a. Community Oral History Grant | University Libraries | Baylor University
 - i. Allots up to \$2,500 and provides assistance from beginning to end with the oral history process.
 - ii. Texas nonprofit organizations may apply for an annual grant that provides financial support, plus guidance in developing, conducting, processing, and presenting oral history projects initiated by the organization.

- iii. Priority will be given to organizations doing oral history for the first time and to projects that address under documented people, places, and events.
- iv. The local organization will initiate the project, carry out the interviews, and develop and arrange public programming to share the outcomes with its community.
- v. The goal of the award is to promote community participation in planning and carrying through an oral history project. We think of it as being of the community, by the community, and for the community. Units or departments within colleges or universities may work with a local community-based organization on a project, but the grant should be initiated and carried through by the community organization.
- vi. Biennial grant-cycle —Fall 2022 for next cycle of applications

3. Preservation Grants

- a. Several funding agencies make grants available for assessments, conservation treatment, digitization, audio preservation, and other preservation activities. The <u>Northeast Document Conservation Center</u> (NEDCC) can help plan and carry out these grant-funded activities and can offer advice on planning proposals. Begin the conversation by contacting info@nedcc.org.
- b. <u>Preservation Assistance Grants for Smaller Institutions | The National</u> Endowment for the Humanities (neh.gov)
 - i. Institutions that represent the contributions of underrepresented communities highly are encouraged to apply.
 - ii. Can assist with paying consultants and purchase of storage and preservation supplies.
 - iii. Grant cycle just ended, so there is ample time to apply for the next one.
 - iv. Next grant application should be due in January 2023.
 - v. Further information: <u>Preservation Assistance Grants NOFO 2021 and 2022 (neh.gov)</u>

c. Preservation Austin

- i. Preservation Austin offers **matching grants** of up to \$10,000 in three categories: Education, Bricks and Mortar, and Planning/Historic Resource Survey/Local Historic Designation.
- ii. Offers grants on a biannual basis, with applications due on January 15 and June 15.

d. Preservation Texas

- i. Focuses on historic building preservation.
- ii. Does not have a regularly occurring grant program but will have specific grant opportunities on occasion—worth getting on an email list.
- e. National Register of Historic Places
- 4. Collections and Infrastructure Grants
 - a. Save America's Treasures | Institute of Museum and Library Services (imls.gov)
 - i. See View Opportunity | GRANTS.GOV
 - ii. \$25,000-\$500,000 grants

- b. <u>National Endowment for the Humanities Infrastructure and Capacity Building Challenge Grants</u>
- c. Collections Assessment for Preservation (CAP) Program
- d. Museum Assessment Program
- e. <u>Texas Historical Commission</u>
 - i. As a result of the 82nd Texas Legislature's budget reductions, the History Museum Grant program is suspended indefinitely.
 - ii. <u>Museum Services</u> (provides help with starting a museum)
 - iii. List of grant opportunities

Appendix F

Example: Stakeholder Communication Plan

GOAL(S):

To garner stakeholder feedback regarding a state hospital recovery and collections project, remove as much ambiguity as we can in the process, and create a feedback loop in support of community ownership of said project.

Audience	Strategy	Key Message	Delivery Channel(s)	Communication Setting	Date/Time	Owner
ASH Employees	Introduce concept, share visual of collections, discuss potential and/or options and interest in supporting project.	This is your history, your family's history and deserving of community ownership. We invite you to be what makes it happen. Concludes with signup)	ASH All User email, Flyers, turnout meetings, face to face, and monthly newsletter	Townhall on ASH campus. (Chapel)	30-minute program X2, 12:30 pm & 5pm Month, Year	Team Lead, Employee Council Designee
ASH Patients (referred or selected by Recovery Team)	Introduce concept, share visual of collections, discuss potential and/or options and interest in supporting project.	This is your story. Your hand in this story is invaluable. We invite you to be a vertically integrated part of this project. (Concludes with signup)	Recovery Team selection, message of meeting via Social Worker to patient, PPT Presentation, Q&A	Ward presentation	30-minute program at either 10 am and 7pm Month, Year	Team Lead, Peer Lead or designee
Volunteer Council for ASH	Introduce concept, share visual of collections, discuss potential and/or options and describe opportunities on how to support the project.	You're a big part of this story. It can't be told without sharing how influential the VC has been in promoting recovery efforts at all levels of RSH history. Come share your story. (Sign up for Work Groups)	VC Agenda notice, Meeting: PPT presentation, Q&A	Monthly VC meeting venue	Month, Year	Team Lead

Audience	Strategy	Key Message	Delivery Channel(s)	Communication Setting	Event Schedule	Owner(s)
External Stakeholders: (City Council, Historic Committee, ASH retirees & previous employees, Civic Organizations. etc.)	Introduce concept, share visual of collections, discuss potential as well as options and interest in supporting project.	This is a community story. The hospital nor the recovery stories would be here without this community. Come be a part of sharing how this story is told. (Concludes with signup)	Newspaper announcement City council and Civic Organization meeting announcements, Phone call invitation to ASH retirees, historic committees, and local preservation groups. Social Media posts and Podcast	Townhall ASH Chapel, or preferred meeting place for group	Two meetings 7:00 pm Month, Year	Team Lead
Interested Parties (includes all individuals who voiced interest in participating in project)	Discuss concept, intentions, desires, opportunities and identify collective skillset. Workgroup signup with contact info.	Much like the 1919 citizens of this community, all of you are in a position to make this a reality. It's a large undertaking, with many unknowns, but not beyond your determination. Let's identify key topics or subject areas for closer attention. For these key topics and subject areas, lets identify and build Work Groups for closer review of those areas. (Work Group signup) (A summary of interest, topics, desires, and preferred intentions will be completed for Central Admin)	Phone calls to all who signed up or voiced an interest. Forums, community meetings, and surveys Social Media posts and podcast	Forum and breakout activities ASH Rec Hall.	Two meetings, approximately two weeks apart. Month, Year	Team Lead
Work Groups (Based on interested from individuals who signed up – could include funding, membership drives, sustainability, etc.)	Divide attendees into desired workgroup. Activate process to confirm, implement, and engage Work Group Charters.	Actualization of this project rests within these groups not only uniquely, but even more so as a whole. Breathe life into your charters; construct a project that not only captures history of the past, but celebrates where we are today and inspires what we're reaching for in our tomorrows	Email and phone calls to work group members.	TBD by workgroups	Bi-monthly will be recommended and to begin in Month of Year A total of 8 meetings will be suggested with the final two preparing a summary to be submitted to Central Admin)	Team Lead and work group co- chair