





Together is the country's oldest community mental health charity. Today we support people with mental

1879
He sets up the organisation that will eventually become Together. He calls it the After Care Association for Poor and Friendless Female Convalescents on Leaving Asylums for the Insane.

The organisation works to 'find temporary homes and look for potential placements in service for women coming out of asylums'.

The Association sets up the first residential care-home in England for people with mental health needs, in Redhill, Surrey.

1894 Men are helped for the first time and the Association becomes the After Care Association for Poor Convalescents on Leaving Asylums for the Insane.

The Association extends its care to patients who are not fully recovered and becomes the Mental After Care Association for Poor Persons Convalescent or Recovered from Institutions for the Insane.

The First World War sees an increase in demand for our services. In 1916 we help 508 people, including 208 who spend some time in the Association's cottages and 154 for whom jobs are found.



**Top left** Rev Henry Hawkins, founder of Together. **Top right** Uniformed attendants looked after patients at Colney Hatch.

**Bottom** Colney Hatch Asylum was the largest such institution in Europe.



The Prince of Wales at our 1927 annual general meeting



**Left** Together's residential homes in the 1950s and 1960s were more homely than the old hospitals, but seem institutional by today's standards.

**Right** In the mid-20th century, people living in Together's residential homes learned skills such as upholstery.

Car maintenance was on the menu at this residential home in Ipswich in 1970.



Staff training became increasingly important in the 1990s.



1924 George, the Prince of Wales, becomes the organisation's Patron. By 1926 we are helping 2000 people a year: 400 through our cottage homes, 150 with work placements, and the rest through home visits.

1930s The Great Depression causes another increase in demand for our services. In 1936 a total of 3525 people are helped, including 280 who are found jobs.

1937 The Association runs its first holiday trips to the seaside for 212 hospital patients.

1939 Long-term hospital patients are moved to residential homes to make room for injured soldiers returning from the Second World War. This proves so successful that by 1942 the residential care-home model is established, and we are running 50 homes.

1950s We now have several of our own properties, where up to 50 people live as many as five to a room.

1961 The government starts to close down the large psychiatric hospitals in favour of caring for people in the community. We begin to diversify and offer new services. Our first hostel offering short-term care opens in Ipswich.

1980s Local authority social service contracts are put out to tender, and service providers compete for business. 'Care in the community' gets a bad name as many people are returned to the community without sufficient funding in place to provide them with appropriate support. The 1984 Registered Homes Act sets out new rules for running care-homes, and more positive attitudes develop towards the rights of those who use services. The 'social-care model' allows people more choice in everything from meals to medication. Our staff are encouraged to move out of our care-homes. The organisation develops staff training and is one of the first voluntary-sector organisations to pioneer NVQs.

1990 In response to the Community Care Act 1990, we broaden our range of services.

1996 By now the organisation has expanded again into the Midlands and the north of England and employs some 400 staff. Our services now include employment training, social clubs, services for people involved with the criminal justice system, and advocacy services.

The organisation changes its name to Maca (The Mental After Care Association). The scope of our work widens to include education, research and campaigning.



Together takes a whole-person approach in the support we offer.

In January 2005 we successfully campaigned against the draft Mental Health Bill





Today, Together runs bright, modern supported housing like these self-contained bungalows in Wellingborough, which opened in 2005.

We are developing new types of services, such as our 'dementia cafe' in Leeds



**Photography** Wellcome Library, London; Steve Bond; Martin Breschinski **Design** c eye The Care Standards Act sets out new guidelines for the quality of residential care. Maca opens its first crisis house.

**2004** We celebrate our 125th anniversary. Our innovative Service User Involvement Directorate is established to give people with experience of the mental health system a say in the planning and delivery of our services. Soon the Directorate is running involvement schemes across the country, and a steering group is reshaping the way our organisation – and other providers – operate. Our Director of Service User Involvement becomes the service-user voice on the National Mental Health Partnership of NHS Provider Trusts and supports other service-user organisations to develop their capacity.

2005 We change our name to Together: Working for Wellbeing, informally Together. Our new name reflects the fact that we don't do things to the people we support or for them, but work together with them. And of course Together also means 'OK' or 'in control', as in: 'She's feeling really together' or 'I've got my head together'. The word 'wellbeing', meanwhile, shows that we want to look beyond a narrow focus on what is 'wrong' with people, and to use a more holistic, whole-person approach to dealing with mental distress. It also highlights the fact that our work encompasses both potentially severe problems and more widely experienced emotional issues such as workplace stress.

Today Together supports over 3000 people through 100 different services, including: advocacy schemes, service-user involvement programmes, supported housing, services for people in contact with the criminal justice system, community resource centres, care-homes, employment-and skills-training services, community support services, and respite services for carers. We also continue to work to improve mental health practice and policy, and to end discrimination, through campaigning, research and initiatives such as our Supporting Carers Better network for carer-support professionals, and our annual Henry Hawkins lecture.

## The future

Our vision is of a world in which communities.

- value mental wellbeing
- respect and support each person's individual journey towards fulfilment and happiness.

One day we hope that there won't be a need for organisations such as ours: until then we are continually learning from the past so we can support more people in better and more imaginative ways in the future.

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