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From 1904-1960, over 3,500 Alaskans were deemed insane by a jury and sent to the privately-owned Morningside Hospital in Portland, Oregon. The Morningside Hospital History Project (MHHP) aims to find these "Lost Alaskans" by digitizing archival documentation scattered across the country, reconnecting families with information about their lost relatives, and bringing the history of Morningside back into public memory. As a volunteer-run organization with no ties to a larger institution and a unique modus operandi of guerilla virtual reunification, the MHHP is a fascinating case that challenges both halves of the term "community archives." This study uses semi-structured interviews with MHHP volunteers and Morningside researchers to explore themes of volunteer motivation, competing values of privacy and access, sustainability and independence, and repatriation.

Headings:

Community archives

Digitization of archival materials

Genealogy

FINDING THE LOST ALASKANS: VOLUNTEER AND RESEARCHER
EXPERIENCES WITH THE MORNINGSIDE HOSPITAL HISTORY PROJECT

by
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1 Introduction

On March 21, 1942, a young man around the age of 27 passed away from tuberculosis in Portland, Oregon. This wasn't so remarkable. That year, 2.4% of all deaths in the city of Portland were due to the disease (Kasius & Pitney, 1946, p. 300). The reason his death is so noteworthy was that the young man, James Ebana, had spent the last 12 years in a psychiatric institution 1800 miles away from his home in Alaska.

James was only a year old in 1917 when his mother, an Alaska Native woman named Cecelia, succumbed to the same disease that would eventually kill him. Following her death, James and three of his five siblings were sent to the Christ Church Mission in Anvik. James lived there for over a decade, until he was declared insane and sent to Portland, Oregon in 1930. Alaska had no psychiatric institutions at the time, and the federal government contracted care of the territory's insane to a small private hospital in the City of Roses. When he arrived at Morningside Hospital, James was described on intake as follows: "Age 14. School-boy. Epilepsy, grand mal type. Dull and slow. Probably defective. No psychotic symptoms" (*Morningside Hospital September 1930 Quarterly Report*, 1930).

James' condition worsened through the long years spent at Morningside—ironic, considering the hospital's founding patriarch Henry Waldo Coe often justified the contract system by claiming that balmy Portland was more conducive to convalescence than the harsh Alaska climate. Quarterly reports sent from Morningside to the

Department of the Interior belie the reporting physician's distaste for the young man. In 1938, he was described as "surly, mean, vicious, treacherous and undependable" (*Morningside Hospital June 1938 Quarterly Report*, 1938). This unflattering portrait contrasts with the memory of James' older sister, Kate. Kate never again saw her brother after he was sent to Morningside, a place she knew so little about she thought it was in Washington. But she kept her brother in her heart, and "longed to bring him home to Anvik" (Renfroe, 2009). She was still searching for her brother all the way up until her death in 2005.

The sketch of James Ebana's life given here is derived from various scraps of documentation: birth and death certificates, hospital quarterly reports, and census records. These documents sat in archives from Juneau to Portland to D.C. for decades, all the while James' sister had no idea what had happened to her brother. The reason we can piece these documents together and tell James' story today is because a group of volunteers have spent over a dozen years scanning records about Morningside patients and reunifying them digitally. These volunteers belong to the Morningside Hospital History Project (MHHP)¹, a volunteer-run organization dedicated to documenting the history of Morningside. Kate's daughter-in-law Robin is one of those volunteers, and she first became involved with the project to figure out what had happened to James. Now, she helps other Alaska Native people find the archival traces of their lost family members, and works alongside other volunteers to bring the history of Morningside to the public.

¹ The project has been referred to by many different names, including "The Lost Alaskans Project," "The Morningside Hospital History Project," and "Morningsidehospital.com". For clarity and consistency, I refer to it as the Morningside Hospital History Project, or MHHP, throughout this paper.

Morningside Hospital occupies a unique place in the histories of both Alaska and Oregon, as a private Portland hospital that for almost half a century held a contract with the federal government to care for all Alaskan psychiatric patients. Since around 2008, the MHHP has been working to bring that history back into public memory and family history. As a volunteer-run organization with no current ties to a larger institution and a unique modus operandi of guerilla virtual reunification, the MHHP is a fascinating case that challenges both halves of the term “community archives.”

This study explores how MHHP volunteers and Morningside researchers make sense of the Morningside Hospital History Project, engaging with the growing literature on motivation, strategy, and impact within grassroots archives. Through interviews with MHHP volunteers and Morningside researchers, this study grapples with a series of research questions: 1) What motivates volunteers and researchers in their work? 2) How have the mission and strategies of the MHHP changed over time? 3) What role do volunteers and researchers see the MHHP playing in public memory?

Emergent themes from the study include curiosity as an enduring motivation for volunteer archival work, the uncertainty of guerilla virtual reunification as a sustainable framework for expanding access, and an underlying ethos of return expressed through physical and symbolic repatriation.

2 Literature Review

Though the MHHP does not explicitly self-describe as an archive, this study considers the MHHP within the context of community archives, mobilizing the existing literature on collecting and volunteer efforts in order to make sense of the project. The first section of this literature review is a brief history of Morningside Hospital and of the MHHP. The following sections explore several interwoven strands of archival scholarship that illuminate different parts of the MHHP: community archives, virtual reunification, and genealogy.

2.1 Morningside

2.1.1 Morningside Hospital

From 1904 to 1960, any person in Alaska who was judged to be insane by a jury was sent to Morningside Hospital in Portland, Oregon. Morningside, which went by many different names in its earlier years, was a private psychiatric institution founded by Henry Waldo Coe and passed down through his family through three generations (Bach, 2021, p. 17). While Coe's sanitarium initially served local patients, in 1904 he won a contract with the U.S. Department of the Interior to care for all Alaskan psychiatric patients. This arrangement was a consequence of Alaska's political status as an incorporated but unorganized territory of the United States. Alaska's legal code, borrowed from the state of Oregon, mandated the institutionalization of individuals found not guilty by reason of insanity, but no psychiatric institution existed within the borders

of Alaska. In 1900, U.S. Congress passed legislation providing the District of Alaska with a civil code. The bill also empowered the governor of Alaska and the secretary of the interior to accept bids for the care of Alaska's insane from any psychiatric institution west of the Rockies (T. Smith, 1974, p. 21). The contract was held for four years by Oregon State Hospital in Salem, until overcrowding forced that institution to withdraw its bid and Henry Waldo Coe swept in.

From the moment the contract came into force, Morningside was beset on all sides: Portland neighbors considered the hospital a public nuisance and sought to drive it outside city borders, Alaskans railed against the injustice of the contract system, and the federal government investigated the institution many times following accusations of fraud, abuse, and neglect. Still, Morningside held onto its contract, in four-year increments, for over half a century. In that time, over 3,500 people came through Morningside, and many never made it back to Alaska. Morningside housed patients as young as infants and as old as octogenarians, though the majority of patients were in their twenties and thirties when they first arrived. Alaskans at Morningside were given varied diagnoses, from dementia praecox/schizophrenia to epilepsy to acute mania. Most Morningside patients were white Americans or first-generation immigrants from Europe, though Alaska Native patients made up a significant minority, up to 30% of patients at a given time. The majority of care at Morningside was custodial, as the hospital was chronically understaffed in terms of medical professionals. Even so, shock therapies such as insulin coma therapy, Metrazol therapy, and electroconvulsive therapy were in use from the 1930s onwards in a minority of cases.

Critiques against Morningside escalated in the 1940s and 50s after a spate of federal investigations repeated charges of poor conditions and the unethical nature of the contract system. In 1956, Congress passed the Alaska Mental Health Enabling Act, which provided funding for the establishment of a psychiatric hospital in Alaska and transferred control over the Morningside contract to the Alaskan legislature. Subsequent congressional hearings found serious evidence that the Coe family had profited illegally off of the contract, and Alaska's first state governor declined to renew the contract with Morningside in 1960. Following the loss of this revenue stream and the substantial hit to the institution's reputation, Morningside tried unsuccessfully to rebrand itself as an "open hospital" in the 1960s. The hospital closed permanently in 1968, and the land was sold for the development of a shopping mall. The hospital's own records are no longer extant; it is sometimes stated that the records were lost in a fire, though I have been unable to substantiate those claims.

2.1.2 Lost Alaskans: The Morningside Hospital History Project

Though there was limited academic attention to the role of Morningside in Alaskan history in the decades following the hospital's closure (Naske, 1979; T. Smith, 1974, 1982), a lack of accessible records and public knowledge kept Morningside relatively obscure. Two researchers, Ellen Ganley and Karen Perdue, decided to try and change that in 2008 with the founding of the Morningside Hospital History Project. Ganley and Perdue had initially set out to research the history of Alaska mental health care more broadly, but quickly homed in on Morningside. They gathered a team of volunteers from across the United States to help conduct research and digitize archival records. As listed on the website homepage, the project's goals are "to have the

Morningside story recognized as an important part of Alaska history” and “to provide information to families still searching for loved ones who disappeared decades ago” (The Morningside Hospital History Project, n.d.).

The documents digitized by the MHHP fall into three major categories, each coming from different archives. Quarterly reports sent from Morningside to the Department of the Interior are housed in the National Archives in Record Group 126 (Records of the Office of Territories). These reports differ in their thoroughness, but most contain a few sentences recording the status of each patient at Morningside. Death certificates for individuals who died at Morningside are housed in the Oregon State Archives. Finally, court records of insanity hearings are housed in the Alaska State Archives. Collecting and digitizing records is an ongoing process, with volunteers local to each repository returning over and over to gather more records.

In addition to collecting and digitizing materials, the MHHP has attempted to harness digitized records to create a searchable patient database. The MHHP first announced the launch of a patient database on their website in late 2013 (Ganley, 2013). The database integrated all three major sources: quarterly reports, death certificates, and court records. Users could search the database by patient name and find any documents relating to that patient. Sometime between February and August 2020, the database went offline, and the project hasn't been able to fix it yet. Currently, documents digitized by the MHHP are available through Google Drive folders that require permission to access.

A thorough literature review of all online published material related to the MHHP, as well as some personal involvement, made it possible to sketch this summary of the project. This study uses semi-structured interviews with MHHP volunteers and

Morningside researchers to dig deeper into the history and current focus of the project. Though the MHHP is a fairly unique endeavor in both focus and structure, parallels can be found in more conventional and well-studied archival models. Insights from a wide range of scholarship helps situate the MHHP within the broader world of archives, direct inquiry during semi-structured interviews, and aid in the analysis of the resulting data.

2.2 Community Archives

Community archive scholarship is the first strand of archival literature that will illuminate an analysis of the MHHP. The term community archive refers to a constellation of different types of archives and archival projects with varying degrees of similarity. As Bastian and Flynn note, the practice of a community collecting its own archive existed long before the term was first coined in 1942 (Bastian & Flinn, 2020b, p. XX). In the latter half of the twentieth century, community archives came to refer to archival collections connected to a specific group that may be under-documented in traditional archives, collected by non-professional practitioners. Community archives became a serious topic of study in the late 2000s, and the past decade or so has seen explosive growth in literature on the topic and in the proliferation of community archives themselves. Current scholarship emphasizes the diversity of theory and methods contained within the label of community archives, placing community archives as one cluster of approaches within the larger “archival multiverse” (Pople, Mutibwa, et al., 2020, p. 2). One influential method of conceptualizing what makes community archives distinctive comes from Terry Cook’s model of shifting archival paradigms (Cook, 2013).

2.2.1 Archival Paradigms

Though the phrase “shifting archival paradigms” calls to mind the Kuhnian model of scientific revolutions, Cook’s archival paradigms are more like frameworks or mindsets than formalized paradigms, something he acknowledges in the original article. While he claims that the archival profession has seen these paradigms come and go as dominant frameworks, each still exists today, and archivists and archival projects usually pull from multiple frameworks to ground their work.

Cook argues that the archival profession traditionally relied on the paradigm of evidence. Archival principles such as *respect des fonds*, original order, and provenance all flow from the understanding that archives are supposed to serve as evidence for the actions they describe. However, archives can be thought of not just as preserving evidence of specific actions, but as preserving historical memory in a broader sense. This paradigm of memory is what moved archivists in the twentieth century from being passive receivers of documents to active collectors and shapers of historical heritage. Next came the paradigm of identity, when postmodernism influenced archivists to consider their work less in terms of preserving a singular Truth and more in terms of preserving the various voices and perspectives that make up society. The final paradigm, not yet fully formed when this piece was written in 2013, is concerned with community, with the professional archivist serving as a mentor and partner for emerging archives collected by lay-people.

The MHHP engages all four paradigms/frameworks in complicated and entangled ways. The two goals listed on the website’s homepage, for instance, embrace both halves of the evidence/memory tension that Cook identifies. The project aims both to make the Morningside story a part of Alaska’s cultural memory, and to help families find evidence

of their loved ones' individual fates. The identity of Morningside's patients as marginalized people deemed mentally ill by the state, and often as Alaska Natives, is central to the MHHP's self-story. And finally, the MHHP is an emergent archive collected by non-professionals who consider themselves to be in community with Morningside patients through their Alaskan identity, and sometimes through direct family ties. As I aim to untangle this complicated knot of goals and epistemologies, it will be helpful to turn to another strand of community archives literature.

2.2.2 Values and Motivations

One strand of community archives literature particularly relevant to the MHHP focuses on the motivating values behind community archives, those ideas that drive volunteers and non-professionals to dedicate so much of their time and effort to these projects. Michelle Caswell has written widely on the affective nature of community archives, identifying the capacity for imagination as a key strength (Caswell, 2014; Caswell et al., 2016). In particular, Caswell has argued that community archives operate as a site for negotiating collective remembrance in the memoryscape (Caswell, 2014, p. 45). The term "memoryscape" describes the landscape through which memories move, contest, and are contested by one another. The role that the MHHP plays, or that MHHP volunteers think it should play, in the memoryscape of Morningside and Alaska will be a key focus of this study.

Other scholarship deals even more directly with the question of how the people behind community archives conceive of their work, using semi-structured interviews to tease out these nuances. In one study, Caswell et al. interviewed 17 community archive volunteers, staff, and founders at 12 sites across Southern California (Caswell et al.,

2017). They found that a key motivation for these participants was to combat symbolic annihilation, a term borrowed from media studies to describe how marginalized communities are invisibilized in dominant cultural narratives. Caswell et al. found that community archivists saw their work combatting symbolic annihilation as having three impacts: ontological (seeing oneself in history), epistemological (having proof of the existence of one's community), and social (strengthening and expanding one's communal ties through engaging with archives). In another study, Quiambao interviewed nine community archive volunteers from five sites in New York City and identified a wide variety of motivations for volunteering (Quiambao, 2020, pp. 45–51). The most commonly cited motivations were an interest in research, a desire to diversify and expand historical resources, a passion for the particular community, and a sense that their work helped express their political values. Through semi-structured interviews with MHHP volunteers, this study takes up Quiambao's call for further research by exploring community archive volunteer motivations in a different context.

2.2.3 The Morningside Hospital History Project: A Community Archive?

While the literature on community archives offers valuable framing and directions for inquiry, it is clear that the MHHP is not a typical community archive, troubled by both the idea of community and of archive. Firstly, a foundational aspect of community archives is the idea that the archive is collected and maintained by the community it describes. Community, however, is complicated in the case of Morningside, an institution now 55 years since disbanded. If there are any living individuals who were once patients at Morningside, they have not sought out the MHHP. Some MHHP volunteers are descendants/relatives of Morningside patients, but the majority have no familial

connection to Morningside. However, the majority of the volunteers are Alaskans by birth or residence, and claim community with Morningside patients by emphasizing the Alaskan-ness of these patients.

Perhaps the closest parallel to the MHHP's relationship to community and institutions can be found in the literature on community archives relating to residential schools in Canada. Like its neighbor to the south, Canada in the nineteenth and twentieth century was home to a network of government and religious boarding schools that aimed to assimilate Indigenous children into white society by destroying their links to Indigenous languages and cultural practices. The last residential school in Canada closed in 1996, and Indigenous communities have sometimes turned to archival projects to help process the grief and heal their communities. The Shingwauk Residential Schools Centre, for example, started building a community archive following the first reunion of Shingwauk Survivors and their families in 1981 (McCracken & Hogan, 2021, pp. 3–4). The Shingwauk Indian Residential School was roughly contemporaneous with Morningside Hospital (1874-1970), and both institutions fractured communities by separating individuals from their families, though for different stated purposes and with a great disparity in percentage of the community affected. Shingwauk Survivors and their direct descendants, however, have built community in a way that Morningside patients and their descendants/relatives have not. In the absence of a community of patients and relatives, I am particularly interested in learning if and how MHHP volunteers express their kinship or community with Morningside patients.

In addition to the troubled community, the MHHP is also a troubled archive. Community archives are often connected to the idea of collecting counter-narratives and

records from the community itself, rather than institutional records that demonstrate the dominant narrative. While the MHHP has a contact page on its website asking people to share stories about relatives who were patients at Morningside, the vast majority of documentation it has collected is the outsider, official narrative authored by doctors and government officials. Again, parallels can be drawn to another project relating to residential schools in Canada. The Post-Apology Residential School Database (PARSD) is a digital collection of material relating to residential schools following the Canadian government's official apology in 2008. The material is primarily authored by mainstream, non-Indigenous sources such as media and government reports (Allard & Ferris, 2015, p. 375). To counter these dominant narratives, PARSD has begun to invite “guest taggers”—Indigenous academics, activists, and community members (including residential school survivors and their children)—to add tags to individual documents (Allard et al., 2018). Though the MHHP has not embarked on such an initiative, the expressed desire on its website to collect stories from relatives of patients suggests that its volunteers are also thinking about the composition of the archive.

This tension between the MHHP and both halves of the term “community archive” generates productive avenues of investigation, but it is not exhaustive. Other strands of archival literature can shed light on different aspects of the MHHP's mission and operation.

2.3 Virtual Reunification

Another concept in archival studies, loosely but not exclusively connected to community archives, is virtual reunification. Virtual reunification refers to the reassembling of materials from physically dispersed repositories into a consolidated

digital collection. A majority of the scholarly attention to virtual reunification comes from Ricardo Punzalan, who has written a dissertation and two articles on the subject (Punzalan, 2013, 2014a, 2014b). Though the possibility of virtual reunification has been noted since large-scale digitization projects were first discussed, Punzalan's work is the first to investigate the methods and outcomes in depth. He stresses that virtual reunification projects do not just piece together fragments to make a whole collection. They also take advantage of technologies characteristic of digital collections, such as descriptive metadata, advanced search and retrieval, transcription/translation, and visualization (Punzalan, 2014b, p. 298). Though the current organization of MHHP resources falls far below the standard of digital collections, the former database was certainly an attempt to "transcend the physical limitations of formats and genre" by allowing researchers to search for a particular patient across a multitude of records.

Punzalan notes that the majority of literature concerning virtual reunification, apart from his own work, consists of project reports written by individuals involved in the projects themselves. While these case reports provide valuable insight into the methods used, they tend to emphasize positive outcomes and deemphasize barriers, challenges, and failures (Punzalan, 2014a, p. 2). Punzalan's own case study of the virtual reunification of Dean C. Worcester photographs provides a helpful framework for conducting case study research on virtual reunification projects from a non-practitioner standpoint. His work also identified three major barriers to virtual reunification: multiple and competing visions, ambiguity and uncertainty, and relative value and significance (Punzalan, 2014a, p. 3). Interestingly, Punzalan notes that participants in the Worcester reunification project reported some anxiety regarding the lack of relationship between

their institution and the communities portrayed in the photographs they were digitizing. This points back to Cook's archival paradigm, and raises questions as to specific challenges that may arise depending on which paradigm(s) a virtual reunification project sees its work as fulfilling.

One limitation with Punzalan's work on virtual reunification is his assertion that virtual reunification can only occur as a result of interinstitutional collaboration (Punzalan, 2014b, p. 299). He argues that because virtual reunification demands negotiation between owning institutions, it can only come about through those institutions. The MHHP demonstrates that a form of "guerilla virtual reunification" does exist, though the sustainability of completely grassroots virtual reunification projects is called into question by the MHHP's database failing in 2020.

2.4 Genealogy and Family History

The final strain of archival literature that will help structure inquiry into the MHHP relates to the fields of genealogy and family history.² In public-facing material, the MHHP often positions itself as a resource for genealogy. Newspaper articles on the project write about "help[ing] families discover what happened to former Morningside patients" and "bringing closure to the families of these lost Alaskans" (McBride, 2022; Muldoon, 2012). And in 2015, the MHHP announced through their blog that they would be partnering with the non-profit genealogical company Family Search to provide access to its patient database, though this has yet to come to fruition (Ganley, 2015).

² Though some sources distinguish between genealogy and family history by methods or approaches, the two terms are generally used interchangeably, and will be used as such in this paper.

Understanding the literature on archives and genealogy, and in particular the rise of the online genealogy industry, will help make sense of the MHHP's aims and methods.

2.4.1 Online Genealogy and Public-Private Partnerships

Genealogy, meaning tracing one's family lineage through ancestors, has a long history in American culture. Christine Garrett has identified three key periods of genealogical interest in American history, beginning with the nation's centennial in 1876, continuing through the postwar period and rise of social history, and ending with the rise of online genealogy at the turn of the twentieth century (Garrett, 2009). Two large companies dominate online genealogy today: the non-profit, Mormon-affiliated Family Search, and the for-profit corporation Ancestry. Archivists have written about the impact of online genealogical companies on traditional archives, to which genealogists were long a key base of patrons (McKay, 2002; Tucker, 2006). In particular, archivists have turned their attention to the public-private partnerships that Ancestry has leveraged to create a near-monopoly in online genealogy.

In a sense, Ancestry.com is one big corporate virtual reunification project: it takes scattered archival records, digitizes them into online collections, and leverages advanced search and retrieval and visualization functions to provide alternate points of entry into the records. But Ancestry is not a product of interinstitutional collaboration between archives: the records in Ancestry's collection come primarily from public-private partnerships. Through these partnerships, Ancestry negotiates deals with individual archives to digitize a portion of records for free or a reduced fee in exchange for being ingested into Ancestry's database. Depending on the individual partnership, Ancestry may or may not provide the archive with a digital copy of their own collection. Public-

private partnerships have been criticized by archival scholars as a neoliberal privatization of the public sphere (Cifor & Lee, 2017), and others have emphasized that information asymmetry leads to Ancestry taking advantage of less-resourced archives (Kriesberg, 2017). One case study of the Georgia Central Register of Convicts collection goes even further, arguing that Ancestry's model creates "fractured, distributed collections" that alienate records from their provenance (Carlson, 2019, p. 4).

Though the critiques of privatization do not apply to the MHHP, which is not a private corporation and does not charge for access to digital records, Carlson's broader critique of provenance alienation is sharply relevant. Carlson draws parallels between the alienation of Georgia's convict records from their provenance, and the alienation that Georgia's convicts themselves experienced when the machinery of the state transformed them from individuals into bodies in cells and numbers on a registry (Carlson, 2019, p. 40). The same process occurred when individuals in Alaska were sent to Morningside and transformed from people into patients/inmates (as they were often described). The MHHP positions itself as seeking the human stories behind Morningside, and especially from Morningside patients. It is worth considering how volunteers square this mission with their work on building a database from official records, and how they consider their approach to genealogy in concert with or in opposition to the for-profit genealogy industry that Ancestry represents.

3 Methods

At its broadest level, this paper is a qualitative case study of the Morningside Hospital History Project. Case studies are a well-established and popular methodology for research in the field of archives and libraries, especially community archives (Bastian & Flinn, 2020a; Poppo, Prescott, et al., 2020). Many case studies of community archives, however, are practitioner/“insider” case studies, authored by individuals who work at the archive under study. Punzalan has identified this trend as problematic for the study of virtual reunification, as practitioner case studies tend to focus on successes at the expense of considering the challenges and compromises needed to overcome them (Punzalan, 2014b, p. 318). This study therefore addresses that gap by presenting a non-practitioner analysis of a virtual reunification-adjacent project with a focus on the goals of the project and how they have and have not been achieved.

More specifically, this case study utilizes the methods of semi-structured interviews and grounded theory to produce thick description and analysis of the work of the MHHP. Semi-structured interviews are characterized by the usage of an interview guide to prepare questions and the flexibility to adjust the sequence of questions or add additional questions based on the participant’s responses (Luo & Wildemuth, 2017). Semi-structured interviews are valuable because of the richness of data they produce, but their open-endedness introduces the possibility of error and bias (Harvey-Jordan & Long,

2001). These issues can be guarded against by practicing active reflexivity throughout the process (Soedirgo & Glas, 2020).

Grounded theory is a methodology for conducting qualitative research in social science based on inductive analysis, introduced by Glaser and Strauss in 1967 (Qureshi & Ünlü, 2020). This study incorporates three major aspects of grounded theory: simultaneous data collection and analysis, theoretical sampling, and constant comparison. Simultaneous data collection and analysis is the practice of beginning analysis once the first piece of data has been collected, rather than waiting for all data to be collected. This makes both theoretical sampling and constant comparison possible. Theoretical sampling involves making decisions on what data to collect based on the analysis of data already collected and analyzed (Wildemuth & Cao, 2017, pp. 138–139). Constant comparison describes a method for data analysis that focuses on comparing pieces of data in order to produce inductive insights (Boeije, 2002; Westbrook, 1994, pp. 246–247; Yan & Wildemuth, 2017). In addition to framing the MHHP through community archival logics, grounded theory approaches are valuable for providing a systematized approach towards the inductive nature of this study.

3.1 Positionality

The idea for this master's paper was born out of my own personal experience with the MHHP. As part of the requirements to receive my bachelor's degree in history, I wrote an undergraduate thesis on the history of Morningside Hospital. Records digitized by the MHHP were absolutely vital to my project, because I wrote my thesis during the COVID-19 pandemic and could not visit any archives. Since graduating, I have had conversations with volunteers for the MHHP about the continued work of the project.

I am approaching this study from a hybrid insider-outsider perspective: I have never worked as a volunteer for the MHHP or used its resources for family history research, but I am familiar with the project's history and have existing relationships with some current volunteers. Instead of trying to categorize my position as either insider or outsider, I adopt Dwyer and Buckle's dialectical approach, which enables a consideration of the similarities and differences between researcher and participant across many different dimensions (Dwyer & Buckle, 2009). My familiarity with the MHHP has allowed me to build targeted potential interview questions, but my distance from its day-to-day operations means I am at less risk of taking tacit knowledge for granted. However, my position also generates some risk. Participants with whom I have no previous relationship may self-censor in order to present a more positive view of the project. In my interviews with individuals who have used MHHP resources for research, I may be biased towards sentiments that seem congruous with my own experience as a Morningside researcher.

Outside of my familiarity with Morningside and the MHHP in particular, my status as a white American with no family connection to Alaska affects my position in relationship to my participants. Most volunteers with the MHHP are from Alaska or have made it their home, and have deep connections to the history and legacy of the state. Researchers who have used MHHP resources for genealogy and family history research will undoubtedly also have familial ties to the state. Because a significant portion of Morningside patients were Alaska Natives, some of my participants are also Alaska Natives. I chose not to specifically collect racial demographic information, but I found

that all of my participants independently brought up race when discussing the history and legacy of Morningside.

To address the effects of my positionality on my research, I practiced active reflexivity in the research process. Soedirgo and Glas outline four strategies for active reflexivity that I have incorporated into my process: 1) record reflections and assumptions early and often, 2) systematize reflections into a pre-interview record outlining the expected effects of positionality, 3) involve other individuals in the reflection process, and 4) incorporate reflexivity work into published research (Soedirgo & Glas, 2020). I used a memo-writing process to record my own observations and initial thoughts at several key points in the process of each interview: before the interview, immediately after the interview, and after transcribing the interview. I used these memos to reflect on interviews with my advisor and have revisited them in the process of writing this paper.

3.2 Data Collection

3.2.1 Eligibility and Recruitment

Recruitment for participation in this study was divided into two cohorts: people who have engaged with the MHHP as a volunteer, and people who have engaged with the MHHP as a researcher. For the purposes of this study, the volunteer cohort was limited to individuals who have worked with the MHHP for a sustained period of over a year.

Individuals listed under the “Research Team” heading on the website’s “About Us” page (The Morningside Hospital History Project, 2012) were prioritized for participation.

These measures ensured that I was able to collect information and hear perspectives from the individuals who have been most impactful in the direction and operation of the

project. For the purposes of this study, the term researcher will refer to individuals who have not volunteered with the project, but have engaged with the project in some form while conducting academic or genealogical research about Morningside. The final size of each cohort was five volunteers and two researchers, for seven total participants.

Recruitment for this study followed a snowball sampling method beginning with an initial primary contact, a current volunteer for the project. After conducting this first interview, the initial contact put me in touch with other current and former MHHP volunteers. Participants for the researcher cohort were recruited through direct recruitment with existing contacts. Though I initially hoped to interview at least one participant who had directly used MHHP materials to conduct family history research, I was unable to make a suitable contact for this project. Instead, I interviewed a genealogical researcher who had conducted independent research about Morningside and had limited contact with the MHHP.

Potential participants were contacted via email using recruitment scripts (Appendix A). After participants consented to be interviewed, they received a research information sheet (Appendix B) alongside their confirmation email. The sheet informs them of their rights as a participant and asks them to decide whether they consent to being recorded during the interview. The research information sheet also informs participants that they have a right to be referred to with a pseudonym, with the understanding that the specific nature of the study means I cannot guarantee complete anonymity for participants from the volunteer cohort. In the end, none of the seven participants chose to be referred to by a pseudonym, and I have used first names throughout the rest of this paper to identify specific participants.

3.2.2 Interviews

Seven semi-structured interviews were conducted for this study, one session with each participant. All interviews were conducted remotely through the video conferencing software Zoom. The recorded portion of each interview lasted from 40 to 90 minutes, with several minutes before and after the recorded portion to get acquainted and review logistical matters. I conducted interviews using a semi-structured format, designed around central questions relating to the participant's perception of and history with the MHHP. Semi-structured interviews were suitable for this project because they facilitate both standardization of core questions and flexibility to emerging themes. They are also particularly well-suited for the process of simultaneous data collection and analysis, which is central to grounded theory.

Interviews were conducted using a standard interview guide (Appendix C), with sections adapted based on whether the participant is from the volunteer or researcher cohort. Additionally, supplemental questions were added to the guide before interviewing volunteers whose work on a particular aspect of the MHHP is public knowledge. Overall, interviews followed a common two-part structure, while the semi-structured format allowed me to tailor my approach both ahead of the interview based on prior knowledge of the participant, and during the interview based on rapport with the participant and in response to information they provided.

The first section of each interview focused on the participant's experience with the project. In all interviews, I began by asking how the participant first learned of and became involved with Morningside and the MHHP. This usually segued into a discussion of the participant's specific role volunteering with the MHHP or researching

Morningside, prompted by additional questions. At the end of this section, I asked participants specifically about their motivations for volunteering or researching.

The final section of each interview focused on the participant's perception of the mission, strategies, and value of the MHHP. This section tended to be more highly structured, as participants usually needed more explicit prompting to discuss their opinions rather than simply give an account of their involvement. Each interview ended with space for participants to ask questions and add any additional information they thought would be relevant to this study.

To enable continuous data analysis for this study, interviews were transcribed and coded as soon as possible after being conducted. Based on the principles of theoretical sampling, interview guides were updated in preparation for each interview, as continuous data analysis of previous interviews determined what data I needed to collect next (Wildemuth & Cao, 2017).

3.3 Data Management and Analysis

3.3.1 Data Management

During each interview, Zoom captured an audiovisual recording and an automated transcript. Following each interview, I exported the audiovisual recording to audio-only, discarded the video recording, and used the automated transcript to prepare a clean, verbatim transcript for use in analysis. Over the course of this project, all interview data were held in a secure digital location, accessible only to myself.

Verbatim transcription is a labor-intensive process, even if starting from the position of correcting an automated transcript. The number of interviews conducted for this study was limited by the expectation that each interview would require around four

hours' worth of transcription labor. I chose to prioritize producing verbatim transcripts over conducting more interviews because my data analysis relies on a close reading of the interview as text, and the use of filler words or repetitions/false starts is information in the same way that the expressed sentiments are information. Additionally, preparing the transcript is intellectual work in its own right. Spending hours with each interview carefully listening to every word and moving between the written and audio representations allowed me to fully engage with the content of the interviews. Preparing post-transcription memos reflecting on interviews after transcription aided in the reflexivity process and alerted me to emerging themes across interviews.

3.4 Data Analysis

The verbatim transcripts of participant interviews formed the corpus of data for analysis. I conducted a thematic analysis using an iterative inductive coding process based on the constant comparative method (Boeije, 2002; Yan & Wildemuth, 2017). This process began immediately following transcription of the first interview. A first round of open coding on each interview compared fragments of the interview to each other in order to develop categories. This preliminary analysis directed my approach to the next interview.

The second step of analysis began after coding the first two interviews, and consisted of axial coding to compare categories across interviews from participants within the same cohort. This second step was repeated with each new interview until reaching data saturation with five interviews in the MHHP volunteer cohort. Open and axial coding was repeated for the researcher cohort, which consisted of only two

interviews. Though these interviews did not reach data saturation, practical constraints prevented me from conducting more interviews.

The final step of analysis consisted of axial coding to compare interviews across groups, meaning comparing the interviews with volunteers to the interviews with researchers. This step enabled a consolidation of the themes that had inductively arisen from data analysis. During this step, the coding was refined down to six major themes, which form the basis of analysis in the following chapter.

4 Discussion

4.1 Overview

In total, this study consists of seven semi-structured interviews, five in the volunteer cohort and two in the researcher cohort. The volunteer cohort includes both founders of the MHHP, Ellen and Karen. Three other MHHP volunteers were also interviewed: Niesje, who works on court records, Robin, who works with Alaska Native concerns, and Eric, who works on documenting grave sites in Portland. The researcher cohort consists of Kristin, an academic researcher who has recently worked alongside the MHHP, and John, a genealogical researcher who has had very limited interaction with the MHHP. Though I had initially hoped to include participants who had used MHHP materials extensively for genealogical research, I was not able to recruit any such participants in the timeframe of the project.

Though explicitly collecting demographic data on participants was not a component of this study, many participants shared salient aspects of their identity that were relevant to their engagement with the history of Morningside. These aspects often included their relationship to the state of Alaska, their racial identity, and any personal connection to Morningside.

All participants shared their current state of residence, both for the logistical purpose of scheduling interviews across time zones and as it related to their interest in Morningside. Four out of seven participants currently live in Alaska, with the rest

residing elsewhere in the Pacific Northwest of the United States. The two participants who live in Oregon approach their work primarily from an Oregonian perspective—they expressed much more interest than the others in the founder of the hospital, Henry Waldo Coe, and in the Oregonian legislators who fought for the Alaska Mental Health Act that ended Morningside’s contract with the federal government.

Three participants discussed their identity as Alaska Native people as it related to their relationship with Morningside. This included two MHHP volunteers, including one of the founders, as well as the genealogical researcher. The remaining four participants did not discuss their personal racial identity, but they did all separately bring up the relevance of Morningside to Alaska Native histories. Additionally, they all recommended I speak to the two Alaska Native MHHP volunteers about the Indigenous aspect of this history.

The last salient personal identity that participants discussed was their personal connection to Morningside. Three participants disclosed that they had family members who had been sent to Morningside, and that their interest in Morningside began as an attempt to learn more about their family history. The three participants with a family connection to Morningside were also the three Alaska Native participants. It is interesting here to note that the majority of patients at Morningside were not Alaska Native—the proportion of Alaska Native patients at Morningside changed over the years, but it was usually around 30%. The small sample size and non-random sampling methods used in this study make it impossible to draw any statistical conclusions about the relationship between race and genealogical interest in Morningside, but all participants—Indigenous and otherwise—spoke about Morningside and its legacy in racialized terms.

The rest of this chapter explores six key themes that arose from the interviews with MHHP volunteers and allied researchers: volunteer/researcher motivation, perceptions of the MHHP's mission, archive stories, privacy and access, institutional partnerships, and repatriation and return. These themes arose from inductive coding of verbatim interview transcripts, and they are certainly not the only way to organize the information collected. Rather, they represent an attempt to consider closely the concepts and problems that participants found most salient in describing their work with the MHHP and Morningside more broadly.

4.2 Volunteer and Researcher Motivation

Learning about volunteer and researcher motivation was one of the primary goals of this study, and each participant was asked explicitly what motivated them to dedicate their time and effort to this work. In answering those direct questions, most participants gestured towards a sense of personal curiosity or interest in the material. When reviewing the interviews as a whole, however, it became clear that participants often answered the question about motivation by referencing themes and ideas they had introduced earlier in the interview, usually stretching all the way back to their recollection of how they first became involved with Morningside. The question of what motivates volunteers and researchers, thus, is actually two questions: why do they start doing the work, and why do they continue doing it? This section explores these two interconnected questions in order to give a fuller account of participants' own understandings of their motivations.

In general, participants used three motivating impulses to explain why and how they first became involved: professional involvement, personal interest, and family history. The two MHHP founders both attributed the beginning of the project to their

professional careers: Ellen as a planner for the Alaska Disabilities Council and Karen as the Commissioner for the Alaska Department of Health and Social Services. They both described learning about Morningside over the course of their careers and coming together in the early 2000s to start researching the history of Morningside as a team. Two other participants also drew on their professional interests to explain how they became involved with Morningside. Niesje recalled how Karen reached out to her because of her legal background and asked for assistance in searching territorial records, which became her focus as a volunteer. The academic researcher, Kristin, located the genesis of her interest in Morningside within the archives. She recalled stumbling across the papers of a Morningside doctor in her university's special collections while looking for material to help get her students engaged in classes on mental health. In each of these instances, participants were drawn to Morningside because it related to other professional interests, including mental health and the law.

The next most common reason participants cited for their initial involvement was family history. All three participants who had a family connection to patients at Morningside told the story of their family member as a way to explain their interest. These stories were marked by generational trauma, familial silences that were reinforced by archival erasure. All three expressed that they turned to archival research because they could not get the information they needed from their family. For John, the genealogical researcher, his parents' refusal to talk about his grandmother Louise's death at Morningside was tied to the related generational trauma of Indian boarding schools. Both of John's parents were survivors of the Chemawa Indian School, and he described himself as a "byproduct of that boarding school mentality." John's father blamed his

mother Louise for sending him to Chemawa as a child, and for the fact that he never received any correspondence from her during the decade he spent there. John later learned that Louise had been sending letters to her son the whole time, but the school administration had confiscated them before they reached him. This betrayal turned John's father against his mother for the rest of his life, and he refused to talk to John about her. John only found out that Louise had been sent to Morningside once he obtained a copy of her death certificate after learning from a cousin that she had passed away in Portland. Once he learned where his grandmother had been buried, his motivation turned to finding a way to repatriate her remains back to Alaska, a task that took well over a decade. For the two other participants with family connections to Morningside, their quest to learn what happened to their family members lead them to continued involvement with the MHHP.

Finally, one participant became involved through his own personal interest and related volunteer work. Eric is an MHHP volunteer based in Portland who focuses on documenting the graves of Morningside patients who died at the hospital. He had already been volunteering with a friend at Multnomah Park Cemetery for several years, cleaning up the grounds and documenting gravestones on the website Find a Grave, when two MHHP volunteers approached them and asked for help locating a few patients. Eric helped with those patients and then kept going, pulling death certificates at the Oregon State Archives and building a virtual cemetery for Morningside patients through Find a Grave. His friend eventually moved on to other projects, but Eric stuck with Morningside—his curiosity kept him invested. Though only one participant identified personal interest as the initial motivating factor for their involvement, it was the dominant

frame used by participants to explain their continued investment in research and volunteering, alongside two other frames: emotionality and mission-alignment.

Personal interest, sometimes expressed as a sense of curiosity or need to know, emerged as the primary motivating factor in participants, especially those who had volunteered with the MHHP for many years. Participants spoke directly about their fascination with the history of Morningside when asked about motivation, and it also surfaced throughout the interviews. Volunteers who had done archival research often spoke in terms of discovery and exploration, describing “riveting letters” and archival treasures that kept them engaged. Niesje said of her first trip to the archives: “And once we started, we were hooked. We were hooked.” There was an especially strong sense, shared by almost all the participants, that there was still a wealth of information waiting to be recovered by further research. When asked what kept him motivated to stick with this project all these years, Eric responded simply: “All the unanswered questions.”

Beyond this sense of wonderment and insatiable curiosity, participants sometimes spoke of other emotions that kept them tied to their work. Chief among these was grief for the patients of Morningside and an accompanying sense of duty towards their memory. Ellen answered the question about motivation first by describing her personal interest in Alaskan history. After a pause, she added: “I had a couple of young children at the time, too. And just the thought of children going there got—you know, got me going, and still does, so.” These expressions of emotional connection to the history of Morningside were most often connected to discussions of grave repatriation, something that will be discussed further in the final section of this chapter.

Most important to the question of motivation, however, is the feeling expressed by participants that these emotional connections compelled them to keep up their work.

As expressed by Eric:

And sometimes, when I'm in the cemetery, I get a real sense of sadness.³ How these folks' lives would have been so different had they been alive now. I mean, they—folks with epilepsy don't go into asylums now. They did then. We can cure tuberculosis now, they couldn't then. Women with postpartum depression are not treated by putting them in an asylum. We have medications for that now. I don't want us to go backwards.

For Eric, the sadness he experiences when present with the graves of Morningside patients binds him to their memory and spurs him to action. Though he lamented that so many patients would be better served by today's medical advancements, he can't bring them back—what he can do is make sure their stories continue to be told, so that we don't “go backwards.”

The idea that the history of Morningside is a cautionary tale for the present relates to the third continuing motivation expressed by MHHP volunteers: a sense of alignment with the MHHP's mission. Most often, this came in the form of expressing a duty to tell the story of Morningside and connect with the descendants of Morningside patients. Both of these sentiments are explored more fully in the following section, which focuses on volunteer and researcher perception of the MHHP's mission. As it relates to motivation, it is somewhat surprising that personal interest and an emotional reaction to the history were far more commonly stated motivations than a sense of mission alignment. As will

³ Eric's comment here bears a striking resemblance to a remark by Oregon senator Richard Neuberger: “As a lifelong resident of Oregon, I have had strong pricks of conscience whenever I passed Morningside hospital and realized that its inmates were Alaskans, who had been unrooted from their distant homes and native realm.” (A. R. Smith, 1956) Note how the physical landscape of Portland is changed by the recognition of Morningside and its patients, whose captive bodies (in life and death) serve as reminders of injustice.

be discussed below, all MHHP volunteers expressed firm agreement with what they saw as the mission of the project. They all strongly believed in the importance of their work, but that importance was not the main motivating factor. In a diffused, volunteer-run organization like the MHHP, it was not enough for the work to be important—it also had to be personally affective. Whether through curiosity or sympathy, participants were motivated primarily by emotions.

Notably, none of the participants spoke about their volunteer work with the MHHP as a stepping stool to professional archival work. In a previous study, Quiambao found that many volunteers at community archives across New York City aimed to gain professional opportunities or skills through their volunteer work (Quiambao, 2020, p. 65). In contrast, all participants in this study were either retired or established in other careers with no plans to pursue a career in archives, which is representative of MHHP volunteers as a whole. Co-founder Karen expressed that they had decided early on that “none of us wanted to be paid for what we were doing” and “our philosophy was that these were not going to be jobs.” As it relates to motivation, it appears that the project has self-selected against volunteers interested in archives as a profession.

Overall, the dominance of personal interest as an enduring motivator for MHHP volunteers suggests that mission-driven archives cannot expect to retain volunteers purely on the strength of their mission. Alignment with the mission motivates initial support, but sustained involvement requires people that find the mundane work emotionally and intellectually engaging. The following section deepens the focus on MHHP as a mission-oriented archive by analyzing how participants perceived the goals of the project.

4.3 The MHHP's Mission: Rescue, Reconnect, Retell

An introductory blurb on the MHHP's website lists the project's goals as twofold: to "have the story [of Morningside] recognized as an important part of Alaska history" and to provide information for families searching for their lost loved ones. (The Morningside Hospital History Project, n.d.) When participants were asked to define the MHHP's mission in their own words, they spoke about three tightly connected major goals: to compile a list of patient names from archival records, to reconnect families of Morningside patients with their loved ones, and to tell the story of Morningside to a broader audience. Though not every participant mentioned all three goals in their initial response, they all touched on each goal at some point throughout their interviews. The difference in emphasis placed on each goal across interviews can be explained by the different roles that volunteers fulfill. Niesje and Eric, who both specialize in archival research in their volunteer roles, focused on the information gathering aspect. Robin, whose work with the MHHP involves providing information about Morningside to Alaska Native communities, focused on the reconnection aspect. Still, the remarkable consistency of responses suggests a well-defined mission and provides an opportunity to take a closer look at how the MHHP's work is framed and understood.

The first major goal of the MHHP, which undergirds the other two, is to collect information about Morningside patients. This was often framed as a matter of generating a "list of names"—a phrase that popped up again and again across interviews. Two participants even held up printouts of spreadsheets to the camera during our remote interviews as a physical demonstration of the primary importance of having a list. At the outset of the project, Karen and Ellen had no way of knowing how many people were ever sent to Morningside, let alone the identities of the patients. Ellen described the

moment when she found a 1907 list of current Morningside patients as “probably the beginning of, you know, really kind of pushing us forward,” and every participant who did archival research shared a similar sentiment. The “list of names” was invoked as a metonym to gesture towards the full life of the patient, or at least what pieces of it could be recovered by assembling the scattered records. When discussing the future of the patient database, Robin envisioned “having names that people can go search and say, ‘Yeah, that was my relative. And yeah, I talked to somebody about them, and this is what I’ve learned.’” In other words, she understood the virtual reunification of records as a tool for reconnecting families with the memory of their loved ones.

This desire to share information about Morningside patients with their families is the second major goal of the MHHP as identified by participants. Participants often talked about this objective in terms of reconnection and healing generational trauma caused by the lack of information. Niesje expressed the importance of connecting with families as such:

And, you know, we didn’t have email then, so what did that do to the individuals and their families and their culture? And I’ve been enough involved in individual cases, which, despite not meaning to, that I know for many families this was a devastating event. And one—it was—involved great trauma to the family, and one that is still a wound, and the need for finding this lost relative and using it as a door to heal is extremely important.

The three participants with family connections to Morningside all expressed that learning more about their family member was personally important to them. Robin and John both specifically described placing new grave markers for their loved one as a healing experience. Discussions about reconnecting with family members often turned into discussions about repatriation specifically, which will be explored further in the final section of this chapter.

The three participants with family connections to Morningside also all expressed that most of their family members did not share their interest in the information they had uncovered. John received total silence from his family when he sent them a copy of his grandmother's death certificate, and again when a judge in Oregon sent letters to his family informing them that John planned to exhume her remains. Karen said she felt the stigma of her uncle's repeated stays at Morningside weighed heavily on her father, who didn't know what to make of the research. Recent scholarship has identified the right to refuse involvement as a key feature of reciprocity in community archives (Punzalan & Marsh, 2022, p. 38). If the MHHP's goal is to reconnect families through enhancing access to archival records, they have to be prepared to respect descendants' right to refuse that reconnection. Several participants identified this tension, which will be discussed more fully in the latter section on privacy and access.

The third major goal of the MHHP as expressed by participants is to tell the story of Morningside to the broader public. Similar to the "list of names", "telling the story/telling their stories" was a stock phrase that came up again and again across interviews to signify a wide range of activities. Some participants emphasized a duty to publicize the history of Morningside as widely as possible, through public lectures, radio spots, and perhaps a documentary. This was often accompanied by a sense that the history of Morningside should serve as a cautionary tale for the present. Two participants paraphrased the common sentiment, attributed to different sources, that "those who do not know history are doomed to repeat it." Kristin noted that the Morningside story "was kind of like a spider's web"—multi-faceted and far-reaching, with the potential to offer distinct lessons to different groups of people. Multiple participants spoke about a desire

to have the history of Morningside incorporated into school curricula in both Alaska and Oregon, and Kristin already teaches Morningside as a component of her classes on global mental health.

In their repeated references to bringing the story of Morningside to the public, participants gestured toward what Caswell has identified as community archives' work in the memoryscape (Caswell, 2014, pp. 45–48). The term memoryscape, borrowed from the field of global cultural studies, emphasizes the contested nature of memory and the work that goes into constructing and maintaining narratives about the past. By leveraging archival documentation to contest which (and whose) histories are told, community archives like the MHHP engage in acts of reparative history.

The MHHP's mission can be gleaned from the moniker sometimes attached to the project: "The Lost Alaskans." Running throughout the interviews was the understanding that Alaskans sent to Morningside had been lost: their names, their stories, and their physical remains. In recovering their names, MHHP volunteers hope to recover their stories and bring them to their families and to the broader public. In this way, each of the three major goals identified above are interwoven into a larger mission to find the Lost Alaskans. As Eric described:

Because basically, they just disappeared. They came down from Alaska, they went into this place, they lived there, they died there, they were buried here, and that's it. And their names were lost, except on some dusty reports in a—in an archive in Washington, DC. And government records don't tell the whole story. So, I would like to have a part in telling the whole story.

Archivists may balk at the stereotype of "lost" documents locked away in a dusty archive, waiting to be discovered by an intrepid researcher. But this knee-jerk reaction risks losing sight of the truth: in most cases, Morningside patients really were lost to the world when they were sent from Alaska to Portland. In gaining the label of Morningside

inmate⁴, they lost their identities as individuals and community members. And while it is true that information about Morningside patients was recorded and later ingested into professional, institutionalized archives, that information remained as good as lost to the vast majority of Alaskans. The following section explores the relationship between Morningside researchers and institutional archives in further depth.

4.4 MHHP and the Archives

As part of the semi-structured interviews, participants were prompted to describe their experience at archives in as much mundane or extraordinary detail as they desired. The decision to ask participants to provide such descriptions was inspired by Ryan Lee Cartwright's article on queer cripp archival stories, which was in turn inspired by Antoinette Burton's identification of "archive stories" as a serious object of study (Burton, 2006; Cartwright, 2020). Like Burton and Cartwright, I wanted to understand how archives are experienced and then narrativized by their interlocutors. Participants described their experiences at archives as alternately engrossing, frustrating, helpful, and hindering. This section explores participants' archive stories in all their manifestations, focusing especially on interactions with archive staff. The second half of this section explores cemeteries as an archival space.

All seven participants had experience searching for Morningside records at institutional archives. Participants mentioned eight total archives: four state/federal archives, three university special collections/archives, and one state historical society (a private non-profit institution). As discussed in previous sections of this chapter,

⁴ I generally choose to use the word patient when describing those institutionalized at Morningside, but "inmate" was the more common word used in contemporary documentation. This was common across psychiatric institutions in the early to mid-twentieth century.

participants often used the language of discovery and exploration in their archive stories. They emphasized the often-monotonous work of trawling through box after box of old records, struggling to decode old-fashioned handwriting and identify relevant documents. Niesje and Eric, who worked with court records and death certificates, respectively, described how the structure of those records hindered their searches. Both types of records were organized purely chronologically, without any separation between different types of trials or locations of death. The records concerning Morningside patients were therefore scattered between the records of everyone else who had faced trial in Alaska or died in Oregon from 1904-1960, and the only way to identify relevant records was to read each one. This tedium was contrasted with the excitement at breakthroughs big and small, from reading an interesting report to stumbling across an entirely new set of records.

Niesje told a particularly dramatic story of archival discovery:

Well, I had done pro tem work in Nome, and I remembered—there's this—there used to be in the Nome court this fabulous vault door. During the gold rush, this huge vault door, like a bank vault, had, you know, come up by sea and been installed in the courthouse because they would—they would take gold in at the courthouse. And that vault door was still there, and I—in the clerk's office—and I'd been in there and I'd noticed there were just tons of old territorial court records in there. And Nome was one of the major court sites in territorial Alaska. And so then I was up there doing pro tem work, and I asked Judge Esch, who was there, I said, "I can't find any territorial court records for these sanity proceedings, and lots of other things, in Juneau, do you know anything about that?" And he smiled, and he took me out in the hall. And he pointed down the hall, and there's rows of boxes, and he says, "All of the sanity files from the late 1800s up to statehood and maybe beyond are in those boxes right there."

Here the oft-used metaphors of "mining the archives" and "hitting gold" become explicit: Niesje found a treasure trove of records stashed behind a vault where miners had once stored literal gold. Like the stereotypes of dusty archives described above, the researcher-as-explorer narrative often vexes archivists for its tendency to invisibilize archival labor (Whearty, 2018). In fact, participants rarely mentioned interactions with

staff in their archive stories until I prompted them, an indication of the extent of said invisibilization by researchers. When prompted, though, participants generally spoke positively about archival staff. Most participants described the archivists they encountered as pleasant to deal with, but not particularly involved in their visit.

Describing her visit to the National Archives in D.C., Karen said:

And I believe we're just—we were not any kind of remarkable. I mean, there's so many people there from all over the world doing all kinds of research. [...] They were very competent, and very helpful. But that was my memory of it.

This view of archivists as generally helpful, but not knowledgeable or interested in Morningside specifically, is contrasted by the vision that MHHP volunteers have about their project, and especially the role they see themselves filling for the next generation of Morningside researchers. One of the key features of community archives is the importance they place on archivists having subject matter expertise and/or lived experience related to the community they endeavor to archive, and MHHP volunteers expressed similar sentiments. In more professional archival roles, lived experience or a personal relationship to the subject matter is often not required nor even desired.

While participants generally recalled positive interactions with archival staff, two participants described a particularly troubling experience. One participant, when recounting the general timeline of the MHHP, spoke about an incident where a group of MHHP volunteers went to a governmental archive and discovered that the archivists had destroyed a substantial portion of Morningside records immediately before their visit. The participant believes they were patient records that Morningside had transferred to the archive after its closure, and that they were probably the only surviving patient records.

Another participant recounted the same story when asked about her interactions with archival staff. She reported that the archive requested she provide a letter from the

Alaska Commissioner of Health and Social Services approving the project's research before they allowed her to view patient records. Like the other participant described, when she went to the archive, she found out that the records had been destroyed a week before. The participant believes that the archivists destroyed the records out of privacy concerns after learning about the MHHP's research. She said that she understands wanting to preserve privacy, but believes that the documents were public record and the archive had no right to destroy them. Both participants spoke about these destroyed records with a real sense of loss, believing the archivist in charge of the disposition acted irresponsibly and permanently hindered their efforts to create a full list of Morningside patients. While deaccessioning is a routine procedure for archivists working in institutionalized environments, MHHP volunteers experienced it as a devastating blow to their work and a serious mistake on behalf of the archivists.

While I came into this project intending to capture participants' archive stories, I conceived of archives in terms of their most traditional and familiar institutional forms: government repositories, university collections, and private historical institutions. Through the course of the interviews, however, I heard archive stories that took place not at any archive I had imagined, but at cemeteries. Very little scholarly attention has been paid to the specifics of cemetery records. As recounted in a 2011 article by Richard Cox and Debra Day, most research on cemeteries has focused on tombstones/grave markers, and especially on efforts by volunteers to document gravestones online (Cox & Day, 2011, p. 92). They contend, however that archivists should also be concerned with cemetery records themselves, which can provide more information than a tombstone can. Eric, the volunteer who focuses on documenting patients who died at Morningside,

expressed the same sentiment. Especially in the case of Morningside, many patients were buried in unmarked graves, or else multiple people were buried under one tombstone. In these cases, cemetery records may be able to prove that a patient was indeed buried at this location even when there is no grave marker—if one can get access to the records.

Cemetery records are generally held by the cemetery as long as it remains in operation, and unlike governmental archives, they have no mandate to serve the public. Morningside patients were buried at several cemeteries across Portland, some municipal, some private. Eric reported wildly differing treatment across the cemeteries. Some are cooperative and helpful; others outright refuse to let MHHP volunteers access any records. One cemetery, abandoned in the 1980s and now maintained by a neighborhood association, went as far as to threaten Eric with trespassing if he returned to the location.

Though some cemeteries limit their research/reference services to family members of the deceased, there is no guarantee of good treatment there, either. When John first reached out to the cemetery where his grandmother was buried to inquire about exhuming her body, the woman he spoke to quoted a figure of \$6,000. John wasn't able to come up with the money, and later learned that the woman had been fired for double-selling grave plots and pocketing the money. The woman who took over her position told John the real price would be \$1,500, but she didn't believe that John's grandmother was actually buried there. John had to wait for yet another woman to take the position, who agreed to the exhumation after John acquired a court order.

While participants had overall positive experiences at archives, the frustrations they experienced were related to the perceived and literal distance between the archives and the story of Morningside—archivists were unfamiliar with the history, archives

themselves were located far away, and participants were sometimes denied access to information they felt they had a right to see. These grievances share a striking parallel to the critique of Morningside Hospital that eventually led to its downfall: that the institution was physically distant and unaccountable to the Alaskans who had the most direct stake in it. When Congress passed the Alaska Mental Health Act in 1956, they returned power over the institutionalization of Alaskans to Alaskans themselves, through their territorial government. The MHHP isn't seeking to shut down the archives that hold Morningside records, or even to remove records from those archives. But the project aims to drastically expand access to those records. In so doing, they must grapple with the competing values of privacy and access.

4.5 Privacy and Access: The Patient Database

The issue of preserving privacy is especially salient in historical collections related to health and medicine, which often contain identifiable personal health information of individuals who did not consent for that information to be archived permanently or made public. There is a strong body of existing literature on the issue of privacy in historical medical collections, especially as it relates to implementation of the Health Insurance Portability and Accountability Act, or HIPAA (Dowrey, 2017; Wiener & Gilliland, 2011). Little attention has been paid, however, to the specific intersection of medical archives and genealogy. Redacting names may be a workable solution for archivists dealing with historical medical records they believe will be used primarily as evidence of medical practices, but it renders the records useless for genealogical research. Participants expressed these concerns during interviews—they recognized the sensitivity

of the stories they uncovered through archival research, but insisted on the importance of sharing those stories widely.

With the understanding that redacting names would be antithetical to the MHHP's goal of facilitating family history research, participants mentioned other ways they sought to sensitively handle privacy concerns. Karen spoke about an early blunder that informed the way MHHP volunteers shared their work. After running into a friend at an unrelated meeting, Karen took out her laptop and pulled up the spreadsheet of Morningside patient names. She pointed to a row listing a child who shared a last name with her friend and asked him if he recognized the name. Visibly shaken, her friend replied that he did. It was the name of his younger sibling who had disappeared as a child. His mother never knew what had happened to the child. Karen said:

And so it was a transformational experience for this individual, and I shouldn't have done it at the meeting, because he was destroyed. But what we realized is it was a duty to provide this information, in some fashion, so people can get closure, or they can find the remains of their family member if that's even possible.

Karen realized that she had to be careful about what records she showed to people and in what environment, a lesson that several other participants told me they made sure to practice. But seeing her friend reckon with this new information strengthened her conviction that the MHHP had a duty to connect family members with information about their relatives who had been sent to Morningside.

Participants spoke again and again throughout the interviews of the importance of providing as much access as possible to Morningside records, as evidenced by their frustration with the archive that destroyed a portion of records out of concerns for privacy. Niesje, for example, was irritated by the outcome of the MHHP's supposed partnership with Family Search, which has been stalled for years. Connecting it to a

larger pattern of state archives entering into public-private partnerships with genealogical companies, she commented: “It really pissed me off, because—how can you do this? Then I, as a citizen, can’t have access to it? But I’m the public.” To most of the participants, the fact that Morningside records had been ingested into institutional archives meant that they were part of the public record, and therefore the public had a right to access them.

Academic researcher Kristin took a different approach to privacy than the other MHHP volunteers and researchers interviewed, owing to her focus on academic rather than genealogical research. Kristin submits her research project for IRB approval every two years, and all students who work with her on the project also go through the IRB process. She expressed that going through the IRB might not be strictly necessary due to the scope of her research, but she does it anyway “to treat this with the utmost care and concern” and as a learning experience for her students. Kristin is extremely cautious about respecting privacy in her Morningside work, declining to use any materials with identifiable patient information in the classroom. She acknowledged that “one of the most ethical things is in this case, like helping family members have access. But as you said, like even that we have to do with quite a lot of care.” Access and privacy are competing rights, and the decisions that participants make about which to prioritize are often determined by their positionality relative to the institutions and/or communities they serve.

The tension between privacy and access is keenly felt in discussions that participants had about the database, which for many years provided a method for researchers to search through the entire corpus of the MHHP’s digitized documents for

specific names. The database was funded through a grant from the Mental Health Trust, and went online in late 2013 (Cole, 2014). Though no participants could give a firm date of when the database went offline, the Wayback Machine reveals that the “Search Patient Records” tab disappeared from the website’s homepage sometime between February and August 2020 (The Morningside Hospital History Project, 2020a, 2020b).

The MHHP patient database is an example of virtual reunification as a product, created by virtual reunification as a process—what Punzalan describes as the “product-process relationship” (Punzalan, 2013, p. 43). When it was live, the database brought together digital surrogates of records that were physically scattered, and enabled advanced search and retrieval capabilities that would not be possible even if all the materials were physically reunited. In this sense, the database fulfilled the hope for drastically expanded access that the MHHP mission demanded.

Punzalan has argued that virtual reunification “can only proceed through inter-institutional collaboration” between owning institutions (Punzalan, 2014b, p. 299). The MHHP’s patient database shows that this is not necessarily true; individuals can come together outside of the boundaries of formalized institutions to create digital surrogates of scattered collections and reunite them virtually. This form, which I have termed “guerrilla virtual reunification” to highlight its ad-hoc organization and distinguish it from Punzalan’s more formalized model, sidesteps many of the concerns about ownership of digital surrogates through an access-oriented, publish first, ask questions later strategy.

Though the database is offline now, MHHP volunteers see this as a temporary setback, and are already thinking about ways to improve the database once it is restored. Two participants spoke about the future of the database as a participatory archive, though

they used different language. Karen expressed that “archival material is frozen in time.” She contrasted the stasis of physical records with the fluidity of the database, which has a mechanism for updating information that may have been incorrectly transcribed, or even perhaps for allowing public users to add to the database. Robin voiced a similar sentiment in her interview, imagining a future database where family members could add stories of their loved ones into the database alongside patient records. Though not expressed in these terms, Robin’s vision was that of a participatory archive. The term participatory archive describes an orientation rather than a specific approach, but it is often connected to the use of Web 2.0 tools to enable community annotation of digital archival collections, such as the PARSD’s incorporation of guest tagging (Allard et al., 2018). Alexandra Eveleigh’s critical examination of the limitations of participatory archives suggests that implementing and sustaining community description is easier said than done, however (Eveleigh, 2017).

The patient database was an invaluable tool for research, and its loss is keenly felt. When describing how they field research requests from family members or other people interested in specific Morningside patients, multiple MHHP volunteers lamented how limited they were by the loss of the database. Ellen remarked: “There’s just not much—I mean, the database did it all, you know. It’s really too bad.”

The documents that populated the patient database are still available in two Google Drive folders linked on the website’s homepage. These folders are the fruits of hundreds upon hundreds of hours of volunteer labor, and they represent a dramatic expansion of access to records that previously could only be accessed by traveling to D.C., Portland, Salem, and Juneau. But they fall short of a true virtual reunification

project, and MHHP volunteers understand this. All the participants who mentioned the database expressed extreme frustration that it has been offline for years. They spoke about restoring the database as a high priority, one that was usually wrapped up in a bigger question of the MHHP's relationship to the Mental Health Trust, which will be discussed in the following section.

Across the interviews, participants spoke about privacy and access as competing needs, especially in the realm of genealogy and family history. While cognizant of the sensitivity of the records they collect, MHHP volunteers consistently valued expanding access over preserving privacy, and indeed much of the thrust of the project relates to a perception that institutional archivists have not done enough to make records relating to Morningside publicly accessible. In addition to being an experiment in guerilla virtual reunification, the Morningside patient database is an experiment in a genealogically focused community archive, with all the accompanying tensions of privacy and access.

4.6 Institutional Partnerships

One surprising theme that emerged from interviews with MHHP volunteers in particular was the desire to find an institutional partner. The MHHP was founded to fill a need they felt that institutional archives weren't filling, and as discussed in the section on archive stories, volunteers usually described their work as fundamentally different to the archivists they encountered. But unlike some community archives, the MHHP does not position itself as inherently in opposition to mainstream institutions. In fact, most volunteers interviewed for this study saw partnership with an institution as the next step for the MHHP.

The primary motivation that participants described for seeking an institutional partner was to ensure sustainability. The database going offline was a wake-up call to the MHHP, demonstrating that the project can't survive forever purely off the labor of informal, unpaid volunteers. The creation of the database in 2013 was a triumph of guerilla virtual reunification, occurring outside of the walls of institutional archives. The database's demise in 2020, however, lends credence to Punzalan's assertion that virtual reunification projects require long-term design and continued maintenance, things that MHHP volunteers have come to believe can only be provided through institutional partnerships.

Many participants see the Alaska Mental Health Trust Authority (often referred to simply as "the Trust") as a natural partner for the MHHP. The Trust was created as a direct result of Morningside's downfall. The Alaska Mental Health Enabling Act, which returned control over the Morningside contract to the Alaskan legislature, also provided funds to build a psychiatric institution within Alaska. Those funds came from Congress in the form of a one-time cash grant of \$12.5 million and the transfer of a million acres of federally owned land in Alaska to establish a continuing revenue stream (*H.R.6376 - 84th Congress*, 1956). The Alaska Mental Health Trust was established to administer those million acres, but by 1982, only 35% of the land remained in state ownership. After over a decade of litigation that reached the Alaska Supreme Court, the Trust was reconstituted into its current form in 1994 as the Alaska Mental Health Trust Authority (Alaska Mental Health Trust Authority, n.d.)

Due to the Trust's origin in the demise of Morningside and its mandate to serve Alaskans with psychiatric illnesses, some participants expressed an opinion that the Trust

had a duty to support the MHHP. Karen emphasized, of Morningside patients: “These are the trust beneficiaries. Every single person in this list is a trust beneficiary.” This is a legal as well as a moral argument, resting on the statutory definition of trust beneficiaries under AS § 47.30.056 (2016) as well as a sense that the Trust’s obligations extend from the purely fiduciary to include responsibility over memory. As Robin said: “If these people hadn’t been sent there, you [the Trust] wouldn’t exist. So you kind of owe it to them, you know, owe to their families and to the future, to document that history.”

Discussions between the MHHP and the Trust are ongoing, with several of the participants interviewed for this study taking a lead on the initiative to secure continuing Trust support for the MHHP.

Some participants also discussed other institutions they thought might be a good fit for the MHHP as a permanent partner. Niesje spoke about her desire to involve Alaska Native Corporations in the MHHP, work that has already begun as Niesje and other MHHP volunteers presented on the project at the Sealaska Heritage Institute in October 2022 (Sealaska Heritage Institute, 2022). Kristin reported that she backs the MHHP’s decision to seek partnership with the Trust, but also believes that the Alaska State Archives or the University of Alaska Library system could conceivably house the MHHP under their mandates. Though not a formal partnership, many MHHP volunteers worked with the University of Alaska Fairbanks on an oral history project about the Mental Health Trust, which Ellen described as very successful (Project Jukebox, n.d.).

A growing body of archival literature addresses themes of sustainability and institutional partnerships in community archives. Matthew J. Heichelbech’s thesis explores three community archives that have been accessioned into institutional archives

across the United States, and Claire Du Laney's master's paper reports on how community archivists conceive of sustainability in terms of what Joanna Newman terms "situational sustainability" (Du Laney, 2019; Heichelbech, 2015; Newman, 2010). My findings demonstrate an eagerness for institutional partnership that outpaces the hesitancy described in much of the existing literature. When asked about why the MHHP had never formally incorporated as a nonprofit, Karen laughed and said: "We wanted the Trust to take this on, we never wanted to form our own nonprofit." Even still, participants retained an activist, public-memory focused framework characteristic of community archives and often pitted directly against the perceived conservatism of institutional archives.

These findings suggest that the boundary between community archives and other forms of archives are more slippery than previously conceived, and that individuals coming from outside a professional archival framework do not necessarily inherit the sharp distinction between institutional and community archives that the literature presents. More important than remaining independent, MHHP volunteers were concerned with remaining able to carry on their three-part mission: to rescue, reconnect, and retell. Honoring the focus that participants placed on the meaning of their work rather than the environment in which their work takes place, the final section of this chapter analyzes how the discourse of repatriation colors MHHP volunteers and Morningside researchers' understanding of their work.

4.7 Repatriation and Return

The most striking theme emerging from the interviews with MHHP volunteers and Morningside researchers was that of repatriation, both literal and metaphorical.

Though not publicized in the online literature about the project, several families have worked with the MHHP to have the remains of a family member who died at Morningside repatriated back to Alaska. Stories about these instances of repatriation surfaced throughout interviews, and their prominence reveals an underlying ethos of return that runs through the MHHP's work. This section describes the MHHP's efforts at grave repatriation and places it within the context of digital return and memoryscapes to elucidate the project's role in what one participant termed "repatriating the stories".

Every participant spoke about grave repatriation as an aspect of either the MHHP's work or their own personal relationship to Morningside. Most participants tied the topic of grave repatriation specifically to Alaska Native communities. For example, Eric mentioned that in addition to the main virtual cemetery for Morningside patients he maintains on Find a Grave, he also curates a separate virtual cemetery specific to Alaska Native Morningside patients, "should their families want to disinter and bring them home." Niesje connected the issue of repatriation to Alaska Native cultural beliefs about the spiritual significance of human remains, and other participants also spoke about repatriation primarily in relation to Indigenous communities. There are several reasons why the discourse of repatriation is so heavily racialized. First, participants are implicitly drawing from the broader cultural context of Indigenous grave repatriation in North America, from the passage of the Native American Graves Protection and Repatriation Act (NAGPRA) in 1990 to the renewed push to identify unmarked graves at residential schools across Canada and the United States beginning in 2021. Second, the idea of repatriation implies a strong connection between an individual, their community of origin, and their homeland—their *patria*. In this context, it is unsurprising that people

would focus on Alaska Natives as a people connected to the land of Alaska. Finally, all three participants I spoke to who had family connections to Morningside were Alaska Natives, and all of the specific instances of grave repatriation that participants mentioned were of Alaska Native Morningside patients. Whether or not this suggests that Alaska Native people are more likely than others to take an interest in their family history and/or go through the process of repatriation, it means that participants drew exclusively on cases involving Alaska Native patients to speak about repatriation in general.

In his interview, John spoke at length about the process of repatriating his grandmother Louise's remains back to Alaska, a years-long journey marked by bureaucratic stumbling blocks. As mentioned in the previous section on archives and cemeteries, John had to wait many years to find someone in the cemetery office to cooperate with his requests. After receiving a court order from a judge in Oregon, John was authorized to have Louise's remains disinterred in 2017. An anthropologist by training, John assisted with the disinterment, and found his grandmother's partial skeletal remains buried three feet below the surface, suggesting that others had been buried deeper in the same plot. John opted to cremate Louise's remains to avoid the complications of trying to transfer skeletal remains from Oregon to Alaska. He was stopped at the airport while bringing her cremated remains through security, and showed the security agents the court order and certificate of cremation. Airport security officials required John to pass Louise's ashes through a scanner and tested a sample of her remains for explosives, the last in a long line of bureaucratic dehumanization that began almost a century ago when Louise was first sent to Portland. Despite all the hurdles and

setbacks, John was glad to have finally been able to provide his grandmother with a “real burial” in her home community of Haines, Alaska.

Robin shared a story about her friend’s father, an Athabaskan man who was sent to Morningside after developing hallucinations following a gangrenous injury. Robin’s friend was only nine years old when his father was sent to Morningside, and for decades after, he made trips down to Portland to wander the graveyards and search for his father. When Robin’s friend told her about his father, she helped him apply for his father’s death certificate, locate his grave marker, and have his remains exhumed and returned to Alaska. About her own family connection to Morningside, Robin said:

I’m very attached to graveyards, and finding—like, so for James Ebana, we’re never going to find his grave. So I had a grave marker made and sent to Anvik next to his sister, my husband’s mom. You know, just so that, you know, he has a place. Those things are really important to me. I don’t know why, but they are.

When physical repatriation was impossible, Robin found the placement of a symbolic cenotaph to be a meaningful act of care for her family member, a way to give him a place to rest alongside his family rather than in distant Portland. Robin and Karen both spoke about the possibility of creating a monument in Alaska for Morningside patients as a way to provide family members with a place to “put flowers on something, or have some closure.” Through these symbolic acts of reburial, it’s possible to see how grave repatriation is only the most literal manifestation of a broader desire for and commitment to return.

The three major goals of the MHHP—to gather a list of names, to reconnect with family members, and to tell the story of Morningside—are all expressions of an ethos of return. At its most basic level, the MHHP seeks to do what the Alaska Mental Health Enabling Act did back in 1956: to return Alaskans back from Morningside. This return

encompasses both the physical remains of Morningside patients and the records about them held in archives in Oregon and Washington, D.C. The concept of digital return as an alternative to physical repatriation has quickly gained steam in the world of archives and museums, where it is often connected to Indigenous communities and systems of knowledge (Bell et al., 2013; Hawcroft, 2016). Digital return places emphasis on reincorporating archival materials and museum objects into originating communities, and especially on the circulation of knowledge within a community. In this respect, the MHHP can be understood as an independent digital return project (as opposed to the institutionally initiated projects most often described in the literature).

Just as in describing grave repatriation, participants focused on Alaska Natives in speaking about digital return. MHHP volunteers spoke about a desire to “[give] back the Natives their power,” “give to them to do with as they decide,” and the hope that “just by getting more and more Native organizations information, there will evolve some ownership.” The specific actions participants mentioned as part of this effort ranged from getting the database back up and running, to conducting workshops about Morningside research at Alaska Native Corporation meetings, to potentially partnering with an Alaska Native Corporation as an institutional repository.

Stories about Alaskans finding their long-lost relatives and having their physical remains repatriated home are emotionally affecting and symbolically powerful, and their prominence in MHHP volunteer narratives makes sense. But rather than a disconnected separate goal, grave repatriation should be understood in relation to the less literal, but no less meaningful, forms of return that the MHHP was created to facilitate. When asked what she perceived as the MHHP’s mission, Kristin replied: “repatriating the stories, and

the physical remains where they exist.” By privileging stories as things capable and deserving of being repatriated alongside physical remains, the MHHP situates its work of return within the memoryscape. Whether by placing a new grave marker in Alaska or by curating a virtual cemetery, the MHHP reintegrates these “Lost Alaskans” into personal, communal, and cultural memory.

5 Conclusion

In the words of one participant, the Morningside Hospital History project is “a bunch of dedicated volunteers chasing chaos.” Run entirely by volunteers with no formal archival training, the MHHP doesn’t even describe itself as an archive—and yet, the work it does is intimately connected to the strategies and missions of community archives.

Studying the MHHP under an archival lens provides new insights for the world of community archives and beyond. This study extends the literature on volunteer motivation at community archives by identifying curiosity as an affective, and effective, continuing motivation for long-term volunteers. An account of the MHHP’s relationship with institutional archives, especially regarding tensions between privacy and access, highlights the domain-specific needs of genealogical researchers in the history of medicine. In introducing the term guerilla virtual reunification, this study proposes the existence of virtual reunification beyond the walls of professional archives. Analysis of the challenges the MHHP faces in terms of sustainability and its current search for an institutional partner, however, suggests that grassroots virtual reunification projects are particularly vulnerable. The MHHP’s current push to partner with the Mental Health Trust Authority also demonstrates that sustainability is more important than independence to some community archival projects. Finally, this study expands the

literature on digital return and repatriation by considering how the racialized discourse of grave repatriation is subsumed into a more general ethos of return.

Though this study provides a valuable case study to advance several strands of archival literature, it is limited by the time constraints of a master's paper. I was unable to conduct interviews with genealogical researchers who had extensive interactions with the MHHP, or professional archivists who had served MHHP volunteers. Comparing the perspectives of these groups towards the MHHP's mission and strategies would have served as a fruitful addition to the existing comparison between volunteers and unaffiliated researchers. Further studies concerning the MHHP in particular are unlikely, but future scholars may find the scope and methods of this case study useful for conducting research with similar grassroots archival projects.

In addition to furthering archival scholarship, I hope this study also benefits the MHHP itself by giving volunteers the language to speak about their work in archival terms. As Randall Jimerson argued, archivists must embrace the power of archives and use it responsibly (Jimerson, 2006). For me, part of that responsibility involves supporting non-traditional archives and helping them claim archival power for themselves. This case study demonstrates that the MHHP is engaged with serious, complicated, and incredibly powerful work: its greatest challenge now is ensuring the sustainability of that work.

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7 Appendices

7.1 Recruitment Scripts

7.1.1 Initial Email

SUBJECT LINE: Invitation to participate in a study on the Morningside Hospital History Project

Hello,

My name is Shir Bach, and I am a graduate student at UNC-Chapel Hill in the School of Information and Library Science. I am conducting a research study to explore the Morningside Hospital History Project (MHHP) from the perspective of archival studies.

I would like to interview individuals who have volunteered for the MHHP or used its materials for research. If you have volunteered for the MHHP for a sustained period of over one year, or you have used the project's materials for research (academic, genealogical, or other), you are eligible to participate.

What will I be asked?

You will be asked general questions about your experience with the MHHP, followed by a series of questions about your motivations for [volunteering/research] and your perception of the mission, strategy, and value of the project.

How long is a session?

The study will consist of a single interview that is between 30 – 60 minutes long.

When and where?

I will reach out to schedule a Zoom call with eligible participants. No traveling is required. Interviews will be conducted during the months of December and January.

Interested in participating?

Please reply to this email with your contact information and I will be in touch to schedule a time to conduct the interview.

If you have any questions, please contact me at [email].

Thank you for your interest,

Shir Bach
UNC Chapel Hill
School of Information and Library Science

7.1.2 Confirmation Email

SUBJECT LINE: Confirmation: Your participation in a study about the Morningside Hospital History Project

Dear [PARTICIPANT NAME]:

Thank you for agreeing to participate in my study to explore the Morningside Hospital History Project (MHHP) from the perspective of archival studies. As I mentioned, you will be asked general questions about your experience with the MHHP, followed by a series of questions about [your motivations for volunteering and] your perception of the mission, strategy, and value of the project. You won't need to prepare anything before the session.

You are scheduled to participate as follows:

DATE: [DAY, DATE]

TIME: [TIME]

PLACE: Zoom Conference Call

As soon as possible, please do the following:

1. Verify your ability to participate in a Zoom call

The study will be conducted remotely over Zoom. Please verify that you can use Zoom and perform any necessary installations or updates before the time listed above. If you have never used Zoom before, please contact me and we can schedule a time to try it out together before the session.

2. Read the Understanding Your Participation document (attached)

With your permission, the audio and video of the Zoom session will be recorded. You will be asked to verbally consent to video recording at the beginning of your session. We will only use the recording for note-taking and transcript purposes. If you choose to be identified by a pseudonym, your name will not be used for any purpose beyond this session.

A few key reminders:

- During the study, I will ask you to answer some interview questions about your experience with the Morningside Hospital History Project.
- Please reserve a quiet space where you will not be disturbed or interrupted during our session.

Also, if you find that you cannot participate on your scheduled day, please contact me as soon as possible so I can reschedule your interview.

Thanks again!

Shir Bach

UNC Chapel Hill

School of Information and Library Science

7.2 Research Information Sheet

University of North Carolina at Chapel Hill

Research Information Sheet

IRB Study #: 22-2691

Principal Investigator: Shir Bach

The purpose of this research study is to explore how volunteers and researchers make sense of the work of the Morningside Hospital History Project (MHHP). You are being asked to take part in a research study because you have indicated that you have done genealogical research related to Morningside Hospital.

Being in this research study is completely voluntary. You can choose not to be in this research study. You can also say yes now and change your mind later.

If you agree to take part in this research, you will be asked to participate in a semi-structured remote interview. Your participation in this study will take about an hour total. We expect that six people will take part in this research study.

You can choose not to answer any question you do not wish to answer. You can also choose to stop the interview at any time. You must be at least 18 years old to participate. If you are younger than 18 years old, please stop now.

The possible risks to you in taking part in this research are:

- Emotional distress
- Consequences of breach of confidentiality

To protect your identity as a research patient, you may choose to be identified with a pseudonym. Due to the focused nature of the study and the small pool of eligible participants, it is possible that someone may be able to identify you as a participant. If you choose to be identified with a pseudonym, the research data will not be stored with your name. I will ask you to confirm your choice to be referred to by a pseudonym before and after the interview, and you can change your mind at any time.

As a potential participant, do you wish to be identified by a pseudonym, or with your real name?

_____ Use a pseudonym

_____ Use my real name

This research will be conducted via semi-structured interviews over a remote meeting platform, Zoom. The Zoom interview session will be password protected and will be unique to each interview. At the beginning of the interview, you will have the opportunity to verbally give your consent to have the interview recorded. I will ask, "Do I have your consent to record this interview?" While a recorded interview is preferred, it is not required for participation.

As a potential participant, are you willing to be recorded during the interview and do you give your consent to be recorded?

_____ OK to record me during the study

_____ Not OK to record me during the study

Recording files will be downloaded directly onto a password protected external hard drive device. Only the audio portion of the recording will be retained, and the video portion will be deleted immediately. If you choose to be identified by a pseudonym, audio files and subsequent transcripts will be de-identified and your name will not appear on the file or the transcript. Documents tracking the names of participants with pseudonyms will be stored in another password protected file separate from interview audio recording or transcript files. All files will only be retained on this device through the submission of this research and will be deleted as soon as the research is completed.

Additionally, you may request to turn off audio or video recordings at any time for any reason and remain in the research. If you choose to stop participation at any point for any reason, all files will be deleted permanently.

If you have any questions about this research, please contact the Investigator named at the top of this form by emailing [email]. If you have questions or concerns about your rights as a research subject, you may contact the UNC Institutional Review Board at 919-966-3113 or by email to IRB_subjects@unc.edu.

7.3 Interview Guide

This document describes the semi-structured interview guide. The interview goal is to understand the motivations behind volunteers for the Morningside Hospital History Project (MHHP), as well as volunteers' and researchers' perceptions of the mission, strategies, and value of the project.

[Introduction]

Are you ready to get started? Great, I just have some opening business to address, and then we'll start the interview.

So, the purpose of this interview is to learn more about your experience with and perceptions of the Morningside Hospital History Project. We'll do that by going through a series of questions, which will take approximately one hour.

Before we get started, there are a few things that you should know. First, when I write up my thesis, I may want to quote some of the things that you have said. You have the choice to be identified by a pseudonym or by your real name. Because this study is about Morningside, and there are only so many people involved, it's possible that someone may be able to identify you even through a pseudonym. One thing that I'll do to mitigate that is to separate instances where I quote from you about identifiable things like what you do for the project, from quotes where you talk about your opinions on the project. With all that in mind, do you want to be identified with a pseudonym?

IF NO: Okay, I'll ask you again at the end of the session, so please speak candidly during the interview and we can reassess privacy at the end.

IF YES: Okay, great. I'm going to use first name pseudonyms, and you can pick a name yourself, or I can list some choices and you can tell me which you'd like. The reason I'm having you pick before we begin is so that I can refer to you by the pseudonym during the interview instead of having to go back and pseudonymize the audio and transcript afterwards.

Next up: this interview is completely voluntary – if for any reason you want to stop, please just let me know. We can end the interview at that point with no negative consequences for you, and I can discard anything you've told me up to that point. You can also choose not to answer a specific question for any reason.

Finally, I'd like to record this interview so that I can generate a transcript to keep for my notes to make sure I don't miss anything. No one else will have access to this recording or the full transcript, and I'll delete it once I'm finished with my master's paper in May. Do I have your consent to record this interview? Great, thanks.

Do you have any questions for me? Okay, let's get started. I'll click the recording button and then do my introductory spiel.

My name is Shir Bach, and it is [date]. I'm interviewing [name/pseudonym], a volunteer with the Morningside Hospital History Project. Let's get started!

[Experience- Volunteers]

- [Name], tell me about how you came to volunteer with the MHHP.
- What kind of work do you do for the MHHP?
- How has your work shifted over time? Do you still volunteer with the MHHP?
- What kind of challenges or obstacles have you run into in your work with the MHHP?
- Can you give a range of how much time per week you spend on MHHP work? Has that changed over time?

[Experience- Researchers]

- Tell me about how you came to research Morningside.
- How did you first hear about the MHHP?
- What MHHP resources have you used in your research? (Blog posts, Google Drive archive, database, consultation with volunteers)

[Motivation]

- What motivates you to dedicate time and effort [to the MHHP / to researching Morningside]?
- Does your work [with the project / with your research] utilize skills you've acquired from professional work? Have you learned new skills of the course of this work?

[Perceptions]

- What do you think the mission of the MHHP is?
- How does the MHHP try to achieve its mission?
- What value do you think the MHHP brings to the world?
- What do you think is next for the project?

[Conclusion]

- Is there anything else that you think would be helpful to know regarding your experience with the MHHP that we haven't talked about yet?
- Do you have any questions you'd like to ask me?

Great, thanks! I'm going to turn off the recording now, please stay on so we can talk a bit.

[Sign off]

Thank you again. Before we leave, I'd like to confirm your choice to (not) be referred to with a pseudonym. Would you like to modify that choice?

Also, would you like me to send you a copy of my final paper once it's completed in May? Great, I'll send that to you through the same email I've been using.

If there's anything you'd like to follow up on down the road, you have my e-mail address. Please don't hesitate to reach out.