#### INTERVIEW OF MAGGIE TEUTEN and DR ROBIN ESSAME

#### INTERVIEWER: MARY HYLAND, ANA C and JESS HUFFMAN MAY 2024

00:00.03 Jess Huffman: So I'm just going to introduce everyone. My name is Jess Huffman. I'm the Project Manager here in Honiton. We've got Ana, who's a volunteer on the project and interviewing today. We've got Mary Hyland, who's here interviewing. We have Judy Smith and Hilda Kalap who are here as project managers. We have Dr. Robin Essame. And we have Maggie Teuten here. So Robin and Maggie are being interviewed today. The date is the 15th of May 2024. And we're recording this interview in the Thelma Hulbert Gallery in Honiton who are one of the project partners. So I'm going to hand it over to Mary to ask the first question.

00:00:56 Mary Hyland: Good afternoon, Maggie. You've joined in this project here in Honiton. What made you volunteer? What interested you when you saw about the project?

00:01:10 Maggie Teuten: I didn't actually know I was volunteering at the time. But I was contacted because I had been involved with the Ugandan Asians to some degree. And I was invited because of that. But since then, it has expanded into other things, particularly my own family history.

# 00:01:40 Mary: I see. Thank you. Would you like to tell us a little bit, or quite a bit if you would, about the Ugandan Asians and your involvement with Dr. Robin?

00:01:52 Maggie: Yes, I became involved very, well as early as it was possible to be involved because the Ugandan Asians needed, obviously, somewhere to be housed. And we had the camp buildings, that's what I call them (other people probably call them something different) and they hadn't been used for quite a long time. And they were in a really, really bad state. I took some friends with me to have a look, and they were quite disgusting. We couldn't put anyone in them. So we tried to get some agreement as to how

they could be cleaned and nobody seemed to have any decisions how that was going to be. So we got started by actually, literally, buying cleaning materials, and I'm talking about mops and buckets, and went in and cleaned them all, which was urgh mostly. That's not a job that I do, except at home, but it clearly needed doing. And I think it felt to me at that time - and this is a very personal perspective - that there were things that hadn't really, maybe we hadn't had time to think through. And these were quite basic things.

#### 00:03:23 Mary Could I ask you what year this was?

00:03:23 Maggie: Oh, it would have been 82? No. 72? 72 Sorry! Dates!

#### 00:03.34 Mary: No, that's fine.

00:03:38 Maggie T: Yes, 72. Very early, because we didn't, well, I wasn't aware that we knew that this was going to happen. But, until, you know, that's what I was told, and because I was involved in various things here in Honiton and I was also involved in the local authority. And it was the local authority that I heard from, that they were coming, and encouraged me to get stuck in because I'm one of those people, I'm afraid, I've forgotten to say no.

00:04:17 So there were four of us, two families who went and did that. But once the Ugandan Asians were here, we got involved in various other things. Because there were an awful lot of things.

00:04:36 This is going to sound very negative. And I did take your point I heard earlier about often it sounding very positive, and there were huge positives obviously, it was some wonderful work that was done, but there were some negatives in terms of things that we perhaps could learn from, if we'd had an opportunity to reflect on what had happened. And I'm talking about organisational things.

00:05:13 We relied on people's goodwill, which is wonderful. And the goodwill was there, but there were things like when, when the Ugandan Asians arrived, they were traumatised, and they had to have x-rays because, to see, whether they were healthy, and what needs they would have. And to do that the only things that they had been able to bring, very often, were their wedding jewellery that particularly the women who had stitched their jewellery in their skirts, and various other places that they put them,

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otherwise they wouldn't have been able to bring them out, and they had to have those removed from them before they could have an x ray. Now, *we* understand why that is the case. But when you've been traumatised, and things taken from you, you'd had to leave a country with nothing (well, very little), and all these things were really precious to you - to have them removed from you and not to know what was going to happen was key. So it's those sorts of things.

00:06:38 And you know, it took someone to have to think, 'How would I feel in that situation?' It wasn't me, it was the friends that we got engaged, they saw it happening, and just held on to the things and promised the individuals, 'We will be here when you come out. This is yours, you know, we're not taking them away, we're holding them for you". And that went round, people began to realise there were people who were *really* wanting to help and could understand.

00:07:14 Mary Could you just give us just a little bit of background as to where that camp was? And how many Ugandan Asians were over here? And how did you get involved Dr Robin?

00:07:28 Dr Robin I got involved because I did know the camp when it was in the hands of the army, which had been up to 18 months beforehand. And I had looked after some of the regiments while they were here. And so I knew where there was an MI room (medical inspection room), and I knew where they could have, we could use that area with a few beds as necessary. If we needed to, but of course we also could admit them to the local hospital if it was necessary.

00:07:54 There were long stay beds which proved possible to take two people, two elderly ladies, who were too frail to be looked after until they found alternative accommodation. And we also knew we could provide maternity care. And Dr. Christine Kennaway was able to join us to provide that care. And I have discussed with her, got her impressions as well, which were very much the same as mine. We were both enormously impressed with the fortitude that they showed and how little they were openly distressed.

00:09.37 Maggie: Yes

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00:09.38 Dr Robin: Which I'm sure you will agree [to Maggie]. There was also Dr. Nigandi who had come over with this particular group, and he was able to help in providing the care. And he eventually entered a practice in the Midlands, which was very pleasing. Fortunately, we all had some experience of medicine in Africa and, in fact, there were very few traditionally tropical diseases that presented with patients during their stay here. And any anaemia that was was present was due to iron deficiency, and not due to their, in many cases, vegan diet I'm glad to say.

00:10:48: [To Maggie] We certainly weren't present when the decision was made to take chest X rays. But that seems to have been a very sensible decision. I didn't hear whether there was anything very much emerging from that.

00:11:19 Maggie: I didn't actually either, because I was actually sharing with you something that the person who was one of the group that we were involved with from here's experience, so I don't actually know what outcome there was from that - it was more to do with the trauma of it happening. And an example of things.

00:11.46 Dr Robin: Yes

#### 00:11:47 Mary: How long were the Ugandan Asians in the camp?

00:11:52 Dr Robin: Very variable. Some of them left very quickly. They tended to go to Leicester I think - that was the main venue. And a few stayed after the camp was again closed. Very few I think, probably not more than one or two families.

00:12:25 Maggie: Yes

00:12:26 Dr Robin: Some people went up to Perth I understand, in Scotland

00:12:31 Maggie: Yes, and some to Cornwall. There were two families who went to Cornwall as well. But it was mostly because they already had someone there. They went to stay with people I think, but Leicester was more a body of people going I think, wasn't it?

00:12:53 Dr Robin: Yes

00:12:54 Jess Huffman: Maggie, I've got a question because I want to learn a little bit more about the support that you offered in your volunteering with the families. Can you be more specific, can you tell us a bit more about what you ended up doing in terms of supporting those families?

00:13:09 Maggie: Yes. Well in particular, some of the families, we encouraged people to build relationships with different families. As an example, we had a family with us. I do have a photograph, but I won't do it now. But they were just lovely. They had two children, we had two children, and we just invited them home. And we were not alone in this you know. There were other people who also had families - to build a relationship with - in as much as one could in that period of time.

00:13:58 The sad thing about the family we were involved in, and actually when I spoke to the other person who was involved, with the four people I've been talking about, we moved at the same time into different places. And of course the Ugandan Asians had moved too, so we lost contact and that's very frustrating. And that would be something that I'm sure some families in Honiton might well have regretted - the loss of contact and the loss of continuity in that contact.

00:14:38 But other things that we were involved with was, for instance, it was winter time and the clothing was just inadequate. And there was a problem - this is where sometimes having what I call a purple book, which is what Devon County has, that tells you if you've got a query, how do I do this? You're sent to the purple book, and it never tells you that particular thing you want to know because they've not come across that before. So the purple book equivalent for people like, for instance the WRV, I don't wish to be negative about people, the WRVS do tremendous work, but the problem is the purple book says, 'You have to pack clothes for two parents and two children'. And so consequently, these were families with multiple aunties and uncles and children and what have you. And it became chaotic, because you either had loads of clothes for grownups and non, not enough with children. And because you had to have multiples of a pack - so you had umpteen adult's clothes so that you get enough clothes for children.

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00:16:13 And then you started to see the tensions between different communities within the group that came over, that were cross that some people had better clothes than they did, because these were gifts, you know. And there were tensions. And you know, my theme with this, and perhaps - I sound terribly negative - but I'm awfully glad that we were involved because it was wonderful. I'm trying to balance that. But the negativity that comes to me is that sometimes we have to look at our processes, and say, 'How can we adapt this process for this situation,' rather than treat every situation as if it were the same.

00:17:10 Because people needed clothing, and they needed it quickly, and the children needed clothing quickly as an example. The other problem was the food. The food on the first evening they arrived, was inedible to a considerable number of people. But the positive that came out of that was, as Robin first experienced himself, is that within the group itself, there were people - there were wonderful, wonderful women - who cooked up a storm, you know, apparently easily, all they needed was the materials. We had people who could alter clothes very easily. So you could turn a big person's clothes into a little person's clothes, if you had the facilities. So once, as with the doctor you were referring to, in that group there were people that had a range of experiences that once we could engage with them could take on some of these roles.

00:18:29 And educationalists - there were a number of educationalists - we set up a playgroup because we wanted to give the young children somewhere to be, and something to help and give them some interest, and hopefully some learning too for them. But of course they were wonderful educationalists, and there are dangers in assuming that the children who came had the same needs as our own children. So as soon as we possibly could we handed over, not because we didn't want to engage, we were there to support, but we had to find people, find the materials, enable them to run their own systems. I'll shut up because Robin has so much more to talk about.

00: 19:29 Mary: How much of your time did you have to dedicate to the new Ugandan Asians. Was it at the detriment of your own practice, or, how did that work?

0019:39 Dr Robin: Well hopefully it was, I was more administrative, and the other two did most of the actual work. I did a *[unclear audio]* initially when they came over, as we set it up, and saw people virtually as soon as they arrived, if it was necessary. But Dr.

Kennaway did a great deal and I would have said that majority of course *Dr M [unclear audio]* did as well. And it was fairly well within the capabilities of the three of us to fit in well. And because we did have considerable facilities in Honiton medically speaking at the time.

00:20:45 As I said, most things weren't beyond us so we didn't need to refer any people to Exeter, but we could do if we needed to. And the demands were not great on my time, I had a certain amount to spare, as I included the camp as one of my other numerous, I did not have a very large practice at that time - which enabled me to work in these other ways as well.

**00:21:41** Mary : So what sort of period of time, I know you said 1972, but how long were they here for?

00:21:48 Dr Robin: I think we would need to refer to the people who have records.

00:22:00 Mary: Was it years, or...

00:22:04 Dr Robin: It was a matter of months - they were here over Divali of course.

0022:06 Maggie: That's right. That was a wonderful experience.

#### 00:22:11 Jess: Oh, tell us about that.

00:22:13 Maggie T: Well, I think this told me something about ensuring that we engaged with something that was so, was such an important period of time for them - a real celebration. I suppose the nearest thing I could say was probably the equivalent of our Christmas really, but gloriously colourful and creative. I remember they had pictures drawn on the floor, I mean there was nothing really, it was the most beautiful, it was rice, coloured, you remember this? *[to Dr Robin].* These beautiful, beautiful pictures appeared just made with coloured rice. And they were on the floor. How they survived, I don't know because there were all of these people milling around and there they were just on the floor, very simply, but gorgeous. And I remember Joy, my friend, and I - they insisted on dressing us up in saris, we had the most wonderful, it was an integrating experience. And

if there could be joy, there was joy. And they were *so* resilient, you're absolutely right *[to Dr Robin]*. To imagine that in such a short time, they somehow were able to draw on some strength, which I'm not sure, but I have never been tested to find in myself. I'm trying to think of other things, there was music - I think it was just a lovely experience.

00:24.32 Dr Robin: They celebrated Diwali, the place this happened, had been the officer's mess of the camp, so it was quite a decent place to do it.

00:24.34 Maggie T: It was, it was, yes.

00:24:48 Dr Robin: The huts themselves well they were quite heatable, and they had been until quite a short time before, been the standard accommodation for the soldiers and the actual heating was off an entirely closed solid fuel stove which was a traditional type (about this high) and did actually give a lot of heat out. Though obviously not enough. The accommodation, though unkempt, was adequate for soldiers I'd say and fairly standard.

00:26:02 And they coped with things so well. There was not more than one would have expected, certainly. In fact, I think Dr Kennaway and I were quite pleased, and she tells me she enjoyed the experience enormously because she had a knowledge of people in Africa in two ways, one that she had trained in apartheid South Africa which enabled her to appreciate the difference perhaps, and also in West Africa in Ghana, where she first worked and her parents had lived for a while. Again, she was surprised there was so little of the strange diseases that occurred in her experience.

00:27:22 Jess Huffman: Can I ask a question about, you both touched on it, it obviously had quite a profound effect on you in terms of the experience of having these families here. Could you tell us something about how you took what you learned from that experience, those experiences and how that might have informed things later in your life - whether about decisions you made or the roles that you took or the approach to the work that you did?

00:27:31 Dr Robin: Having been born in India myself, I had adopted certain attitudes of mine and perhaps from my family which were on the whole very respectful of the Indians

and that reinforced it very much. I think it enhanced my respect for Asians - particularly Indians - which was already fairly high.

00:28:59 Jess : Maggie, how did it inform or impact on you in lasting ways?

00:29:06 Maggie T: I think it's such a helpful question to ask because I *can* see a theme going through my later life in that I, I went on to work in Europe for the poverty programme. And I think it sensitised me to, not necessarily people in trauma but certainly people in some level of distress, through the European work. But then later, I went to South Africa and I was 12 years engaged in South Africa, eight permanently, I mean I was living there permanently. And of course, that was a time when it was only four years after the end of apartheid, so I'm talking 98, when apartheid ended in 94. And trauma, you know, of a different level - well when I say of a different level, we're talking very long-term trauma. And I think it did inform me and made me cautious. It took me six months to agree to go to South Africa. It was the Irish government who was funding this well project, it turned out, it wasn't a project to start with, we were asked to go and well, it was in the end I said, I will go, but only if it's a listening survey, I will do a listening survey, and I meant a listening survey, because I felt I didn't know enough. I knew what we'd seen in the newspapers and so on what had been going on, historically, obviously, what what other people knew...

# 0031.35 Jess Huffman: What do you mean by a listening service then? How was that different from what they expected?

00:31.40 Maggie T: The difference for me was that I went, I realised, after I kept saying no that I was not the right person - it was a set of skills that I had that made them want or ask me to go but I didn't feel that - I could understand the skillset, but it was me, that I didn't think, I thought I could make too many mistakes, and I was fearful of not being sensitive enough, and all of those sort of things and then I realised that if I went with another person and did this listening survey - it's my term, they've adopted it now, but it was my term - it meant that I could go not knowing anything, and that was actually better because perhaps I wouldn't make as many mistakes because I didn't know anything. Or at least the more I

assumed I didn't know anything, the better questions I could ask, and the better learning that could take place.

00:32:47 And we were asked, we went right the way down South Africa meeting all sorts of groups of people at every level, government and community level and everything in between. And then asking a set of questions and then writing a report and presenting it (and this was my idea, presenting it) to, to the South Africans themselves, being the people who had given us the material for the report. And I had agreed to do this in a year - and then 12 years later I got back to England! So it was quite a long period of time! But I don't want to go into all of that. But all of that, I think, was informed by what went on here.

00:33.50 It had been the first experience that I'd had, here, of of a bulk of people much bigger than had been anticipated - arriving with nothing, traumatised, but not showing it, and then, I mean, sound, apparently strong - you could see that right the way through South Africa. But given time to listen and when we set up programmes eventually, at their request, you always had to double the amount of time that you thought it would take because of the stories that had to be told.

00:34.27 Talk about oral history, no problem there, you would ask a question and the history of South Africa came and was presented to you through that individual's perspective. And that's a lot of what we did here too, it was just giving time to just be with and listen to, and give time for people to feel that they were being heard and respected. Sorry *[emotional]* - it's terribly important. Wherever you are and whoever you are. We're respecting each other, we tell our stories to each other, and that, it's no different, indeed, much, so, so powerfully important to people who've been traumatised over long periods of time. And I'm not necessarily comparing South Africa with Uganda but I never did get the whole history of Uganda and the experience of those people over time we were much more having to focus on the immediate. Listening to the stories and piecing together as much as you could. So I think it did, it was a really important thing for me, um yeah.

00:36.34 Dr Robin: Yes I think, if I may add, I can recall one man who told me quite calmly, and I'm sure he was being entirely realistic, that a few days before, he had been a millionaire in Uganda,

#### 00:36.59 Maggie: Yes

00:37.00 Dr Robin: ...and now he had absolutely nothing.

00:37.01 Maggie T: No

00:37.02: Dr Robin: Except what he had brought over with him.

00:37.04 Maggie: Absolutely

00:37.05 Dr Robin: And I have no doubt that he was able to cope with this - he seemed to be realistic, he seemed to have an idea that he would recover from it financially, at least to some extent.

00:37.24 MaggieT: Yes

00:37.25 Dr Robin: And I have no doubt he would do so. That seemed to be the impressive thing about it with people. That they could see there was a possibility for themselves. And talking to them subsequently - at the gathering last year - it is amazing how they have done so well over here. Often with these these magic moments when they had realised that their education up til then had been quite good, and there was some sort of opportunity to go on, if it was recognised, that there was this potential. And it is quite outstanding how well...

00:37.35 Maggie T: Yes, yes. And I think that bit, for me, when I, certainly when I went to South Africa, people were in complete trauma - excitement that things had changed - but still, it will take generations to get rid of this feeling of otherness, and less than. All of the things that came out of that long, long period of apartheid. But the belief that people will eventually grasp the world themselves. Because, like all of us, they have to survive. Luckily I'm very fortunate, I've never been put in that situation. Except, perhaps I should say, as a woman in a world that was out of balance, and I'm sure there are many men who have also experienced the imbalance as well, but that, you know, was the nearest thing I can connect with, but watching the impact that goes on and on when you have

been treated and you have been educated only for specific roles in society and things, it's very difficult to survive and pull yourself through.

00:40.36 Maggie T: And yet, what option do we have. We wake in the morning, we breathe through the night, we wake in the morning, we breathe through the day, and we gradually, I remember a school I went to, just to give you an example as a link to this, the first school that I went to, and the teacher had been over here just for a very short space of time, and she said, 'Would you talk to the children?' and I said, 'What would you like me to talk about?' And she said, 'Would you talk about the future. What's your future. What you look forward to in your future.' And I couldn't quite see the connection at the time. And as I started to speak - she said to me afterwards, 'These children have no capacity to imagine a future, they can only imagine the now, and they have no capacity at all.' And that never occurred to me. You see how you can make so many mistakes going into an environment if you think you know. I didn't know that. I'd always been able to look to the future. I don't mean anything grand. I mean just tomorrow I will eat - and then something amazing happens - but that was not the case - and it was quite fundamental things, like big things, like you can imagine, how you could be a different self, a more powerful self. How can you have that imagination if you've never been allowed to, you know you've been repressed and what have you. With the Ugandan Asians, they had that capacity, they could see ahead. But the South Africans didn't - well this particular would have been an example, it was very difficult. So these are the sort of things that I took, and if I had assumed, I wouldn't have known that. Yup.

# 00:43.29 Mary: That is absolutely powerful Maggie, and Dr Robin, thank you very much.

00:43.37 Maggie T: *[To Dr Robin]* I'm so pleased to have met you again. To hear a different, we never got to talk about it, and now we have.

00:43:48 Jess: Thank you very much, both of you.

[End of Transcript]