

Property owners

Parcel 234/38 and portions of Parcel 234/2 (Building 16 [Pumping Station], 37 [Hitchcock Hall], 38 [Hagan Hall], 118 [Warehouse and Laundry], and 118A [Warehouse Annex]):

District of Columbia Department of Mental Health
64 New York Avenue, NE, 4th Floor
Washington, DC 20002

Remainder of Parcel 234/2:

United States Department of Health and Human Services
200 Independence Avenue, SW
Washington, DC 20201

Applicants:

D.C. Preservation League
401 F Street, NW
Room 324
Washington, DC 20001
(202) 783-5144

Authorized representative:

Signature

Date

Name and Title

Committee of 100 on the Federal City
Post Office Box 57106
Washington, DC 20037
(202) 628-8030

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Statement of Significance (Section 200.2[e])

The Government Hospital for the Insane, established in 1852 and officially renamed St. Elizabeths Hospital in 1916, is historically significant because it is the physical embodiment of the evolution of hospitals for the care of the mentally ill during the course of almost a century.¹ It was the first federal hospital for the insane. It was the first hospital to implement the 1852 propositions developed by the influential Association of Medical Superintendents for American Institutions for the Insane (AMSAIL) to guide the construction and administration of asylums and continued to be in the forefront of treatment for the mentally ill into the mid-20th century. It was the first American hospital to make specific provision for treating mentally ill African Americans. It was among the first to employ a pathologist. It pioneered the use of hydro- and malarial therapy. Superintendent William Alanson White played an early and critical role in the introduction of Freudian psychotherapy to the United States.

A number of nationally significant individuals have been directly associated with the Government Hospital. Dorothea Dix was involved in establishing the hospital and in selecting both its first superintendent and its site. Each of its first four superintendents, Charles Nichols, William Godding, Alonzo Richardson, and William A. White, served as president of AMSAIL and its successor organizations, the American-Medico-Psychological Association and the American Psychiatric Association.

Located in the nation's capital, the Government Hospital was intended to be and was a model for state hospitals for the insane in the 19th century. Designed by Charles Nichols, in conjunction with Thomas U. Walter, the huge Center Building is an important example of the Kirkbride, or congregate care building type. The large, but somewhat less institutional "cottages" constructed on the campus reflect the recommendations of late 19th and early 20th century reformers who favored treatment of long-term patients in more home-like settings. Finally, the huge buildings on the East Campus reflect the 20th century emphasis on hospital treatment for urgent cases.

The landscape is directly associated with the history of the hospital, but is also significant in its own right. In addition to providing the fresh air and exercise that many reformers thought the single most important treatment for insanity, the grounds encouraged the passive contemplation of nature. The area around the Main Building, probably designed by Superintendent Nichols himself, is a good example of a picturesque asylum landscape. The southern part of the West Campus may reflect, in part, the recommendations of Frederick Law Olmsted, Jr. The East Campus, used as the hospital farm until the turn of the 20th century and still containing much open land, is significant for its association with the productive agricultural labor which was considered part of treatment.

All of these significant associations are reflected in the amazingly intact physical fabric of the hospital complex. Although some buildings have been demolished, the campus as a whole survives to testify to the national importance of one of Washington's most significant historic resources.

¹ In this nomination, the term "Government Hospital" will generally be used to refer to the 19th Century hospital complex; "St. Elizabeths" will be used for the later period.

Historical Narrative (Section 202.2[f])

Founded in 1852, the Government Hospital for the Insane was the federal government's first hospital designed to care for the nation's mentally ill.² The first medical superintendent was Charles H. Nichols, who worked closely with the social reformer Dorothea Dix to establish a model institution in the capital city. Dix and Nichols selected a 185-acre portion of the old royal land grant known as St. Elizabeths—"incomparably the best location."³

Medical superintendents of hospitals for the insane, the nineteenth-century equivalent of psychiatrists, considered location an integral part of treatment for mental illness. The St. Elizabeths tract met all their practical, aesthetic, and medical criteria. Located just under three miles from the Capitol, it was safely separated from the city by the Anacostia River, yet accessible via Pennsylvania Avenue, East Eleventh Street, the Navy Yard Bridge, and Piscataway Road. Building materials and heavy supplies such as coal, wood, and flour could be landed from boats at the hospital's wharf. Two springs on the grounds furnished drinking water. A substantial portion of the land was suitable for farming, a critical concern not only for supplying the hospital with food but also for providing patients with occupational therapy. Five miles of winding roads in the vicinity of the hospital provided room for "private pleasure walks." Equally important, according to Nichols, patients would enjoy a panorama of rural landscape, scenic river, and urban activity that would prove "of immense consequence" to their mental health.⁴

The Center Building, the first of many structures erected on the grounds of the hospital, was designed by Nichols, working with Thomas U. Walter, Architect of the Capitol. It is one of the first mental hospitals based on the "Kirkbride" or "linear" plan. The Kirkbride plan was named after its principal advocate, Thomas S. Kirkbride, medical superintendent of the Pennsylvania Hospital for the Insane and one of the founders of AMSAI, which later became the American Psychiatric Association. Kirkbride's plan provided a blueprint for "moral treatment," the antebellum therapeutic philosophy that emphasized emotional and social factors in treating mental illness. In 1852, AAMSAI had codified detailed guidelines for the construction of hospitals committed to moral treatment in *26 Propositions Relative to the Construction of Hospitals for the Insane*.

Nichols introduced several improvements to the Kirkbride plan. His most significant innovation was the placement of wing-sections *en echelon*. Setting each section a short distance behind its neighbor, Nichols believed, "afford(ed) the best facilities for the thorough classification and inspection of the patients, for ventilation and external views, and for the requisite sub-division of the pleasure grounds." The echelon plan, as Nichols termed it, became a characteristic feature of nineteenth-century American mental hospitals. In Kirkbride's widely consulted *On the Construction, Organization, and General Arrangement of Hospitals for the Insane*, he characterized Nichols' design as the "improved linear plan."⁵ The Center Building influenced the design of several state mental hospitals as well as a number of mental hospitals outside the United States.⁶ It played a significant role in establishing the Kirkbride plan as the predominant architectural form of mental hospitals during the mid-19th century.

² The hospital originally filled two roles: as the equivalent of a state hospital for the residents of the District of Columbia and as a military hospital for members of the Army and Navy.

³ Senate Executive Document 11, 32nd Congress, 2nd session, serial 660.

⁴ Nichols to Dorothea Dix, Jan. 1, 1853, Dix Papers, Houghton Library, Harvard University.

⁵ Earl Bond, *Dr. Kirkbride and His Mental Hospital* (Philadelphia, 1947), 99, 102.

⁶ *American Journal of Insanity* 45 (January 1889), 446-49, notes that Nichols' plan was "reproduced in Australia, in Newfoundland, and in many state institutions." Nova Scotia also adopted his plan, according to a diary entry by Thomas U.

Another original feature of the Nichols design for the hospital was the placement of two "colored lodges" near the Center Building.⁷ Mentally ill African Americans rarely received hospital care before the Civil War. Occasionally they were accommodated in separate institutions or in makeshift wards segregated from white wards to the extent practical. Nichols, in creating the colored lodges, heeded the advice of Francis Stribling, superintendent of the Virginia Western Lunatic Asylum, against associating the races. But he disagreed with Stribling's recommendation that African Americans be treated in a separate institution. Nichols' background as a Quaker possibly influenced his decision to provide quarters for African Americans at The Government Hospital. The substantial black population in the District of Columbia may also have been a factor in the decision.⁸

Severe overcrowding in the 1870s led to the next phase of The Government Hospital's development. Nichols's successor, William W. Godding (1877-99), adopted a new kind of hospital design known as the cottage plan. In contrast to the Kirkbride plan, the cottage plan called for a series of unconnected or "detached" buildings. Another difference was the predominance of dormitories, whereas the Kirkbride plan had provided single rooms for most patients. In addition, under the cottage plan day rooms and sleeping quarters were often placed on separate floors. As it evolved at the Government Hospital and elsewhere, the cottage plan consisted mainly of two-story buildings, each housing anywhere from 50 to 100 or more patients. Atkins Hall (Building 31), erected in 1878, was the first of some 18 cottages built at the Government Hospital during Godding's 22-year tenure. Atkins Hall preceded by one year the more comprehensive and better known development of the cottage plan at Kankakee, Illinois. The Kankakee State Hospital has been called the "first systematic departure in the United States from congregate construction [i.e., the Kirkbride plan]." In building Atkins Hall, however, Godding was among the first to experiment with the new design. By the mid-1880s, Godding had become a prominent national spokesman for the cottage plan. Until the turn of the 20th Century, development at the Government Hospital proceeded on an ad hoc basis, with individual buildings constructed as the need arose.

In 1891, Godding acquired additional land several miles south of the hospital at Oxon Hill, Maryland, where a farm was operated in part by patients. Godding Croft, as the farm land became known, accommodated some of these patients in two small cottages. Today it is called Oxon Hill Farm and is run by the National Park Service.⁹

In 1902, Godding's successor, Alonzo B. Richardson (1899-1903) initiated a large-scale effort to modernize the Government Hospital. With a Congressional appropriation of \$13 million, Richardson

Walter, dated November 4, 1853, where Walter notes his completion of the plan and elevation of the Nova Scotia hospital patterned after the Government Hospital "at the request of Miss [Dorothea] Dix & Dr. Nichols." Thomas U. Walter Papers, The Athenaeum. The earliest influence possibly was on the Spring Grove State Hospital in Catonsville, Maryland. The hospital had been established in 1852 after Dix petitioned the state legislature and construction began the following year. The hospital's planning commissioners described its wings as "connected with the first return *en echelon*," *Report of the Commissioners of the Maryland State Lunatic Asylum* (Baltimore).

⁷ Charles H. Nichols to Turner & Yardley, n.d., transcription of Nichols correspondence in historical records file at St. Elizabeths Hospital; Thomas S. Kirkbride, *On the Construction, Organization and General Arrangement of Hospitals for the Insane*, 2nd edition (Philadelphia, 1880), 135.

⁸ The West Lodge for black males was later torn down; the East Lodge was converted to a nurses' home (Building 30) and later to offices. For more information on the treatment of blacks during the antebellum period, see Gerald Grob, *Mental Institutions in America: Social Policy to 1875* (New York: Free Press, 1973), 243-255.

⁹ Godding Croft is not included in this nomination.

executed a comprehensive and long-range plan for the hospital's expansion. He collaborated with the Boston architectural firm of Shepley, Rutan and Coolidge in designing 13 "lettered" buildings (so-called because designated by letter rather than name). One of the buildings became the new administrative headquarters and another served as a home for nurses and attendants. Six of the seven new cottages, resembling carefully landscaped garden apartments, were designed to accommodate about 50 patients each; Building Q held about 120 patients.

Because little open land remained on the original West Campus, four of the new buildings were placed on the east side of Nichols (now Martin Luther King, Jr.) Avenue. The east side had previously been reserved for farming operations, providing patients with work and furnishing foodstuffs for the hospital. A tunnel was built under Nichols Avenue to link the east campus to the West Campus. All subsequent development of the hospital occurred on the 175-acre East Campus.

The new buildings represented the largest expansion in the hospital's history and constituted an impressive architectural achievement. The Department of the Interior appropriated \$1,500 to build a model of the new buildings for the St. Louis world's fair of 1904, where it was proudly displayed in the Government Building.

The placement of the buildings and their landscaping may reflect the recommendations of Frederick Law Olmsted, Jr. In 1901 Richardson asked the Olmsted firm to evaluate the West Campus and make recommendations for the location of the new buildings, hoping to be able to acquire new land to the south. On January 15, 1901, Olmsted, Jr. replied with a long report. Although the new land was never purchased, many of Olmsted's recommendations concerning the West Campus appear to have been accepted.¹⁰

St. Elizabeths' physical plant saw little further change until the 1930s. The most notable exception was Hitchcock Hall, built in 1910 as an auditorium for the entertainment of patients and staffs. Forms of entertainment included vaudeville performances, moving pictures, operettas, musicals, dances, and lectures. In 1914, five small tuberculosis cottages (no longer extant) were built, each housing 20 patients. During World War I, seven "semipermanent" wards for 500 patients were constructed to accommodate the wartime increase in military cases. These wards were not demolished until after World War II.

The last significant expansion of the hospital during the historic period occurred in the 1930s under Richardson's successor, William Alanson White (1903-37), when two large complexes were created on the East Campus. The first of these consisted of a quadrangle made up of two existing buildings (Buildings 89 and 91—R Building and Glenside) and three new ones. The first of the new ones was the Medical and Surgical Building (Building 90—later renamed the W. W. Eldridge Building), erected in 1931. Then came the Men's Receiving Building (Building 93—now the William A. White Building), erected in 1934, and the Women's Receiving Building (Building 92—the Charles W. Nichols Building), erected in 1936.

These new buildings are significant because they represent the portion of the hospital then devoted to acute care, physical and mental. The Medical and Surgical Building reflected a particularly important development. With the creation of a department of internal medicine in 1920, St. Elizabeths became the

¹⁰ Frederick Law Olmsted, Jr. to Alonzo B. Richardson, January 15, 1901 (Manuscripts Division, Library of Congress).

first public mental hospital accredited for training medical interns. The Medical and Surgical Building subsequently housed what was, in effect, a general hospital operating on the grounds of a mental hospital.

At the same time, construction proceeded on a wheel-shaped complex of cottages, known as the continuous treatment buildings. Six two-story dwellings for patients were arranged around a central cafeteria/kitchen. These buildings were the last designed along the lines of the cottage plan.

The Government Hospital's reputation as a leader in clinical and scientific research dates from the last quarter of the 19th Century. Early hospitals for the insane allocated few funds for research. I. W. Blackburn, hired in 1884, was one of the first full-time pathologists in a public mental hospital. A skilled artist, Blackburn achieved renown for his anatomical drawings of the brain. Shortly after his death in 1911, the hospital honored his achievements by naming its new laboratory (1923) after him.

Under the leadership of Superintendent White, St. Elizabeths became the nation's premier research institution. In 1907, White hired experimental psychologist Shepherd Ivory Franz to take charge of a newly created psychology laboratory in the Allison Buildings, later moved to Blackburn Laboratory. It was one of the first in a public mental hospital. Within a few years, the laboratory evolved into a full-fledged scientific department independent of the ward service. By 1920, the department consisted of a psychologist, two pathologists, a bacteriologist, and several technicians. It published a bulletin of research articles and served as a training ground for interns.

During the White years, St. Elizabeths pioneered a number of therapies, including psychotherapy, hydrotherapy, and malarial therapy. White's interest in psychoanalysis stemmed from his meeting with Swiss psychoanalyst Carl Jung at a conference in Amsterdam in 1907. The next year St. Elizabeths became one of the first American hospitals to practice psychoanalysis. In 1914, White organized a psychoanalytic society at the hospital and created the position of clinical psychiatrist, whose full time could be devoted to psychotherapy. By 1920, special wards had been designated for patients receiving psychotherapy. That same year, Edward Kempf, the hospital's clinical psychiatrist, published the results of his clinical work in *Psychopathology*, his pioneering psychoanalytic study of schizophrenia.

Modern hydrotherapy also was pioneered as a treatment for mental illness at St. Elizabeths. Assistant physician George Foster had introduced hydrotherapy units in the now gone Toner and Oaks buildings during the 1890s. Under White, it became the most frequently administered treatment at the hospital. White found it especially valuable in reducing the need for mechanical restraints. In 1904, he installed hydrotherapy units in the new B and C buildings, the male and female receiving wards for new admissions. In 1907, after visiting German mental hospitals, White introduced a system of continuous baths based on the German model at St. Elizabeths. By 1924, the baths were prescribed 106,816 times for more than 4,000 patients.¹¹

White achieved international recognition when he introduced malarial therapy at St. Elizabeths in 1922 as a method of treating the general paresis caused by syphilis. Malarial treatment was the most significant therapeutic innovation of the 1920s. It grew out of the work of the Austrian physician Julius

¹¹ 1907 Annual Report, 9; White, "Hospitals and Asylums of Europe," 134; David Shutts, *Lobotomy: Resort to the Knife* (New York: Van Nostrand Reinhold, 1982), xv.

Wagner-Jauregg, who received the Nobel Prize in 1927 for his research. St. Elizabeths was the first hospital in the Western Hemisphere to utilize the new therapy.

By the time of White's death in 1937, St. Elizabeths' leading role in scientific research and clinical applications had been firmly established. Subsequent developments in which St. Elizabeths played an important role include dance therapy, psychodrama, pastoral counseling for the mentally ill, and mental health programs for the deaf.

The final phase of construction for patient housing occurred in the 1950s and early. Four large institutional buildings were built during this time: the Geriatric Building (Haydon Building, erected 1951), the Dix Building (1955), the John Howard Pavilion (1959), and the Rehabilitation Medicine Building (1963). These buildings are considered non-contributing because they were built after 1940, the end of the period of significance for this nomination.

Description of the Historic District (Section 200.2[h])

Summary

The Government Hospital for the Insane/St. Elizabeths Hospital occupies one of the most prominent sites in Washington, D.C. The 336-acre campus is located on a high plateau in Southeast Washington, overlooking the confluence of the Potomac and Anacostia rivers, with a panoramic view of the capital city and northern Virginia (Photo 1). The buildings are placed within a park-like setting, with large trees, designed landscape features, winding roads and walkways, and open green lawns (Photo 2). The site was carefully selected to provide recreational and therapeutic value to the patients in the federal government's first hospital created to care for the mentally ill, both black and white.¹²

The campus is divided roughly in half by Martin Luther King, Jr. (formerly Nichols) Avenue. The West Campus includes the earliest buildings; the East Campus was acquired in 1869 for use as the hospital farm. The first buildings for patients located to the east of Martin Luther King Jr. Avenue date from 1902. Since that time, most new construction has taken place there. The East Campus was transferred to the District of Columbia in 1987.¹³ The buildings on the West Campus were vacant in 2004 and most were in poor condition. Many had been "moth-balled" to preserve their interiors from further deterioration. A few hundred patients were still housed on the East Campus, where the buildings were generally in better condition.

Most of the historic buildings on the campus were constructed during four major building campaigns (see Figure 1). Each campaign was managed by one of hospital's first four superintendents: Charles H. Nichols, William W. Godding, Alonzo Richardson, and William Alanson White. Nichols's Main Building embodies the Kirkbride, or linear, plan for hospitals for the mentally ill, based in turn on the principles of "moral treatment" advocated by reformer Dorothea Dix. The buildings constructed between 1877 and the 1930s follow the detached, or "cottage" plans favored by reformers of the late 19th

¹² This description relies heavily on the *St. Elizabeths Historic Resources Management Plan*, prepared for the D.C. Office of Business and Economic Development and the Office of the Assistant City Administrator for Economic Development by Devroux and Purnell, Architects, in 1993.

¹³ The District also acquired title to Building 16 (Pumping Station), 37 (Hitchcock Hall), 38 (Hagan Hall), 118 (Warehouse and Laundry), and 118A (Warehouse Annex). Except for Hitchcock Hall (discussed below), all of these buildings are of recent construction and considered non-contributing to the significance of the hospital.

century as a way to provide long-term care for chronic patients in more home-like surroundings. The 20th Century buildings also reflect a movement away from moral treatment towards an emphasis on medical treatment and clinical medicine, as well as on newly introduced Freudian psychoanalytic theory. Construction continued at St. Elizabeths into the 1950s, when the population of the hospital peaked at over 7,000 patients, and beyond, but these buildings are classified as non-contributing because they were built outside the period of significance established for this nomination.

This section begins with a discussion of the buildings, followed by a brief description of the grounds and landscaping, but it must be emphasized that this is an artificial distinction. The Government Hospital/St. Elizabeths is an integrated complex that embodies concepts and practices in the development of mental health facilities from the mid-1850s well into the 20th century. The hospital was created as a unified therapeutic environment made up of both buildings and landscape. Even when confidence in the power of a beautiful setting to heal faded, the grounds continued to be carefully maintained. For this reason, the entire site is considered to be a contributing element to the significance of the hospital.

Charles H. Nichols (1852-1877)

The Main Building (Buildings 1, 2, 3, 4, 5, 6, and 8 - 1853-1895, photos 3 and 4):¹⁴ The 700-foot long Main Building was located to take advantage of the site's dramatic views of Washington. Although the last part of the building was not completed until 1895, the pattern was set by Superintendent Nichols in the early 1850s. He intended the Government Hospital to be a model institution, demonstrating that "moral treatment" could cure the insane. The original Center Building embodied the principles of the congregate treatment system developed by Thomas Kirkbride. The plan consisted of a center section with wings extending to either side. The central block contained the superintendent's home and office, the kitchen, administrative offices and receiving rooms, a chapel, and an assembly room. Dorothea Dix had a room reserved for her in the superintendent's suite. The wing to the east housed women and the one to the west men. The wings consisted of a series of separate wards, with private rooms for each patient, as well as day rooms, dining rooms, bathrooms, and housing for attendants. Each ward also had access to a separate enclosed outdoor exercise yard. Patients were classified by sex, by social class, and by type and degree of disorder. Violent or disruptive patients were housed farthest from the center; as they improved, they were rewarded by being relocated to more desirable wards on the upper floors and closer to the superintendent's quarters.

The Government Hospital's design modified the standard Kirkbride plan by recessing each ward some distance behind the line of its neighbor, to which it was connected by a short cross corridor. On October 1, 1860, Dr. Nichols wrote that the plan of the Center Building and its wings was "appropriately denominated *en echelon*." He described this design as having advantages in respect to classification, light, and ventilation, as well as helping to break up the mass of this very large building. Thomas U. Walter, Architect of the Capitol, is responsible for the architectural details of the Main Building, which Dr. Nichols described as "Collegiate Gothic," a style that was considered particularly appropriate for hospitals for the insane.

¹⁴ The building numbers, assigned by St. Elizabeths, correspond to those shown on the site plan. The hospital classifies the additions to the original Center Building as separate structures. This nomination uses the term "Main Building" to refer to the whole assemblage.

Service facilities and utilities were located in the basement. A central kitchen supplied food to the wards through a system of dumb-waiters. A narrow gauge railroad for kitchen and other supplies ran the length of the building, partially along a steam tunnel. A pedestrian tunnel, part of a campus-wide system, ran below the railroad tunnel. The *Annual Report* for 1859 stated that the plan of heating was hot water circulation and that ventilation was provided by a fan, 12 feet in diameter, propelled by a 24 horse-power engine. According to a communication to the Secretary of the Interior dated October 1, 1859, this was believed to be the first attempt in this country to heat a building of this size and extent in this way. There were originally four boilers, two under the West Wing, near its junction with the Center, and the others under the East Wing.

The original design of the Main Building included only the Center Building (Building 1), the West Wing (Building 3), and the East Wing (Building 4), and was intended to house no more than 250 patients. As the number of patients expanded, Nichols first added Dawes (no longer extant) and Garfield (Building 5) to the west wing and expanded the central block to the south (Building 2). Retreat, also known as Pine (Building 6), was added to the end of the east wing in 1884, by Superintendent William Godding. Willow (Building 8) was built in 1895 as a detached cottage; it was attached to the Main Building in 1936.

Construction of the Center Building began in 1855, after the West Wing (Building 3—begun in 1853) had already been completed and work on the East Wing (Building 4) had begun. The first patients had already been admitted in January, 1855. In a report dated October 1, 1858, Nichols reported on the progress of the Center Building and the East and West Wings:

The first section of the west wing was plastered, and all sash, which are of iron, were glazed and ready to be hung. The first and second sections of the east wing were in the hands of plasterers. All the walls of the Center have been raised to their full height. The rear exterior walls had reached the foot of the 3rd story, and the front [the] foot of the second story.

He confidently expected to get the "whole" under roof before the close of the season.

The Main Building as it now stands consists of a four-story administrative block flanked by two, extremely long, two- to four-story wings. The exterior is of red brick, from clay dug and burned on the premises, on a foundation of stone, with a painted metal roof. A five-story tower with an oriel projects from the northwest (main) elevation of the administrative block. Label molds, battlements, and corner buttresses reflect the Collegiate Gothic idiom chosen for the Government Hospital. The oriel over the main entrance is decorated with Gothic tracery and cast iron balconies. A porte cochere was added to the main entrance in 1874.

East Lodge/Detached Nurses Home (Building 30 - 1860, 1887)

The three story main block was constructed in 1861 as the East Lodge. In 1887, a two story wing was added. The building is of red brick, with a brick watertable, a molded beltcourse between the first and second floors, rusticated sills, Gothic drip molds over all windows, and a full entablature with a plain frieze. The hipped roof is surmounted with rectangular vents with finials.

The East Lodge was one of two buildings constructed to house mentally ill African Americans. East Lodge housed women; West Lodge (demolished) men.

Gatehouse No. 1 (Building 21 - 1874)

Gatehouse No. 1 is located at the original entrance, at the north end of the Government Hospital grounds. It is a small, picturesque stick-style cottage, one story with finished attic (no basement). Walls are brick on a quarried stone base. Brick quoins decorate the corners of the building and segmental brick arches span window openings. The steeply pitched, hipped roof is covered with hexagonal slate tiles. Two gabled dormers with cross bracing face to the front; there is a single dormer in each of the other surfaces. Amazingly intact cast iron cresting survives at the ridges of roof and dormers and there is a striking English medieval-style brick chimney. All windows are double hung, six over six sash. An 1898 photograph shows an open entrance porch on the south with a steep slate roof. This porch has been removed and replaced by a one-story flat roofed, glass enclosed guard area.

The primary purpose of the gatehouse was to protect the privacy of the patients.

Staff Residence No. 8 (Building 79 – c. 1860)

This small cottage may have been built on the West Campus and later moved to the East Campus to house men employed at the hospital farm. It has been altered. In 2004, the building had been removed from its foundation and was awaiting relocation.

Wall (1869, 1924)

The wall runs from north of Borrows Cottage (Building 18), east to Martin Luther King, Jr. Avenue, then south along the rear of the sidewalk to the southern end of the hospital grounds, and west to a point just beyond the rear of E Building (Building 69). The northern half of the wall is brick, and the southern half is quarried stone. The halves meet at a vertical mortar joint east of Staff Residence No. 4 (Building 76).

First mention of the need for a wall is made in Superintendent Nichols's *Annual Report* of October 1, 1855:

I beg leave to call your attention to the importance of surrounding the hospital and outbuildings, at such a distance therefrom as will include about 40 acres of the grounds, with a close wall, as a condition necessary to the privacy, exercise and industry of the patients. A wall of brick upon a stone foundation, coped with blue flagging, would be the least expensive. . . durable and respectable in appearance.

The wall was extended to the rear of the Administration Building in 1924.

William W. Godding (1877-1899)

The buildings constructed by Superintendent Godding are all located on the West Campus, except for the few surviving buildings associated with the farm complex across Martin Luther King, Jr. Avenue. The most important buildings were constructed within the curve created by the Main Building and established the generally NNW by SSE line of development adhered to in all subsequent building campaigns. Frederick Law Olmsted, Jr., in his 1901 recommendations for the further development of the property, wrote that these buildings “seem to have been huddled about in the vicinity of the great main building with no regard for agreeable or even orderly appearance.” This comment still applies.

Atkins Hall (Building 31 - 1878/1899)

Atkins Hall, Home, and Relief are large, free-standing brick buildings, located on the east side of the West Campus. Together they frame three sides of a central quadrangle, now occupied by a parking lot.

The Detached Dining Hall (Building 33) completes the quadrangle. Many of the buildings are attached to each other by means of wooden porches.

Atkins Hall is a brick, cross-plan building, with a brick watertable, segmental brick arches over the windows, molded wood window frames and sandstone sills. Intended to house 50 “quiet working men,” the building consisted originally of two floors, with an open dormitory on the second floor and a day room on first. In 1899 a third story was added.

Atkins Hall was the first of the new "cottages" built to provide long-term care for the chronic insane. Doors and windows were not locked and patients could come and go as they wished. At the time of construction, this alternative to the congregate care system embodied in the Main Building was so controversial that Atkins was designated as a “temporary” building. Based on its success, Congress appropriated \$30,000 for additional “temporary” cottages.

Relief (Building 32 - 1879/1895)

Relief is four-story brick building with decorative brick details, including a watertable with black brick banding above and hood molds over the windows. The central block is flanked by two T-shaped wings. In 1895 a four-story addition was attached to the west side of the central block with a brick hyphen.

The second cottage constructed to relieve overcrowding in the Main Building, Relief was intended to house 250 men of “the quiet classes of the chronic insane.” The floor plan combined separate wards, like those in the Main Building, with dormitories. The original picturesque roof, with dormers and chimneys, has been replaced.

Home (Building 36 - 1883)

Home is a T-shaped, two-story brick building with one hexagonal end bay. Decorative brick details include a rubbed brick watertable, springcourses, and a corbelled cornice. Original shed dormers were replaced at some time with the present louvered eyebrow dormers. The windows have brick hood molds and stone sills.

This cottage was constructed for 150 men, many of them disabled and requiring constant nursing care; epileptics were housed on the second floor.

The Rest (Building 40 - 1882; moved 1904; renovated 1929)

The Rest was originally constructed on a site 200 feet to the north of its current location; in 1904 it was moved and altered. This eclectic, two-story brick building features decorative brickwork, decorated board-and-batten dormers, and a hipped roof with louvered ventilator. There are segmental brick arches over exterior doors and windows at the first floor. The two-story structure contains four rooms on each floor, with a single finished room in the basement.

This was the first scientific building at the Government Hospital. According to the Board of Visitors *Report* of October 1, 1883, bodies of patients who had died were cared for here until the wishes of relatives or friends could be ascertained. But it also served as a laboratory, where Dr. I. W. Blackburn performed autopsies in an attempt to identify lesions on the brain that contributed to insanity. Blackburn was one of the pioneers in the field of pathology in the 19th Century, In addition to his work at the hospital, he taught classes at Georgetown University Medical School. The building was renovated in 1929 as a circulating library.

Greenhouses (Building 20 - ca. 1882-1959)

Because alterations and replacement of fabric are common for this building type, precise dating of these structures is impossible, but it is known that there was a heated greenhouse on the grounds as early as the 1860s. The surviving structures, which include one iron and glass building, appear to constitute a rare surviving 19th-century greenhouse complex.

Greenhouses played important roles in 19th Century hospitals for the insane, used to propagate plants for the farm and to provide cut flowers for the buildings. In the *Annual Report* of 1892, Superintendent Godding reported that:

All the bedding plants used in decorating the extensive grounds are brought forward during the winter in this house. They add an element of beauty to the summer landscape, enter into the moral treatment of the insane, and so become a medicine to the mind.

Dining Hall for Detached Buildings (Building 33 – 1885, photo 5)

The brick Dining Hall measures about 60 by 140 feet (inside dimensions), open throughout. The basilica-like structure has ample side and clerestory windows for light and ventilation. There are segmental brick arches over doorways and windows, and a transom over each exterior doorway. At the gable ends, small Romanesque wall arcades, springing from corbels, follow the roof lines. The roof of the nave portion is covered with slate; the aisles are covered with tin. The building contains a single, tall, main story and a basement. Fifteen foot-wide aisles are separated from the 20 foot-wide nave (clear span) by rows of plain, round columns that support prominent roof trusses over nave and aisles. The original floor of the hall was replaced by mosaic tile on concrete in 1915. Walls are plaster with tile wainscoting dating from 1915, 1916, and 1917. At the north end of the hall is a partially partitioned-off area, apparently where a raised stage was once located. In the basement, cast iron columns with fluted shafts, classic bases, and stylized palm leaf capitals are spaced about 15 feet on center. A brick hyphen connects the Dining Hall to the Detached Kitchen, constructed in 1900 to replace the original kitchen located in the basement (see below).

The first mention of the Dining Hall is in the Board of Visitors *Report* of October 1, 1884:

An important want is a common dining hall for the inmates of the detached buildings. A one-story structure, with hall of a capacity to provide for serving 600 inmates at once, arranged with suitable tables for carving and keeping the food warm, would in the case of the quiet classes of the insane be found a far more satisfactory arrangement for all parties concerned than that of numerous small and scattered rooms.

But the *Report* of 1898, describes an additional function of the dining hall:

Twice in the year, on New Year's and Easter Monday, the great common dining hall of the detached buildings is cleared of its tables and the inmates have a joyous dance with unconfined floor space. By working all night, the attendants have the tables back in order for the morning meal. It is worth all its costs; these two evenings are to the patients more than the amusements all the rest of the year.

Linden (Building 28 – 1893, photo 6)

Holly (Building 29 - 1893).

Willow (Building 8 - 1895)

These three Italianate brick cottages, collectively known as the Dix buildings, were built to house female epileptics in a relatively small-scale and homelike setting. They are located between the Main Building and the East Lodge.

Linden's central projecting bay has a peaked roof with decorative finial. The building features decorative brick details and a wood porch with chamfered columns.

Holly is a two story brick building with some decorative details. The three-story tower has a peaked slate roof and a stone stringcourse and round-arched windows. Like Linden, this building has a wood porch.

Willow was originally constructed as a free-standing cottage for female black epileptics. The cottage features the same kind of brick decorative detailing found on the other two buildings and is completely surrounded by a wood porch. The north and east sides of the porch are enclosed; the south side is open. In 1936 it was attached to the Main Building by a brick hyphen.

Allison A (Building 25—1899)

Allison B (Building 26—1899)

Allison C (Building 24—1899)

Allison D (Building 23—1899)

This cluster of brick Italianate cottages with white stone trim and broad frame porches was constructed to house 100 infirm soldiers and sailors. Some of the porches have been enclosed, compromising the integrity of the buildings, but the original exteriors survive behind the porches, deteriorated but intact. Allison A is three stories, while the other buildings are two stories. Corner towers frame the porch at Allison A. Allison A and D are now attached; B and C are free-standing.

Engine House/Fire House (Building 41 - 1891; moved 1905, photo 7)

The Fire House is a brick structure with slate roof, with a square tower attached to the east side. The main structure is two stories with an attic (no basement), and the tower is 5 stories (plus a small basement). There are decorative Victorian segmental arches over all original exterior openings. The original arches over the two entrances to the Fire Station have been replaced to accommodate wider door openings. Windows are double hung wood sash, with stone sills and wood stools. A round window decorates the gable. There are raking cornices at the gable ends of the main block and small raking cornices at the roof line of the tower. Classical molding decorates the eaves. A decorative copper point crowns the peak of the tower. The building was moved in 1905, when small additions were made to the east and south (rear).

The top floor of the tower is occupied by a clock with four faces; the floor below houses a bell. The bell story has tripartite, louvered window openings with semi-circular arches. The bell is close to 3 feet tall, attached to a wheel with a rope. It has two inscriptions. One reads: "McShane Bell Foundry, Baltimore, Maryland 1894", and the other: "At morning call awake, at weepers [sic.] slumber take." The old clock mechanism survives. According to the *Annual Report of 1886*,

Nothing adds more to the comfort and order of a hospital for the insane than a standard time-keeper, so placed that it can be seen from all quarters. There is a sense of companionship to the inmates in the very striking of the hours.

The first reference to fire prevention at the Government Hospital is found in the Board of Visitors *Report* of October 1, 1879, which mentions a "small hand fire engine and about 400 feet of 2½ inch standard leather hose. . . . a Knowles fire pump has [also] been provided, with a steam cylinder of 16 inch diameter, a water cylinder of 10 inch and 16 inch stroke, guaranteed to throw four full streams at the same time to the top of the tower of the hospital." On August 17, 1888, an appropriation was requested to purchase "an efficient steam fire engine and to provide a suitable building for same." The present building dates from 1891.

Borrows (Burroughs) Cottage (Building 18 - 1891)

This substantial Queen Anne house is located on the women's side of the campus, away from other buildings and near the original entrance to the grounds. The irregularly massed building consists two stories, a finished attic, and a basement. The exterior walls were originally unpainted brick with contrasting trim, but are now painted white. The hipped roof is slate, with two dormers facing front, and one dormer on each of the other three sides. A decorative ventilator is located at the roof peak of the hipped roof, and there are two tall English-style chimneys. An illustration in the 1898 Board of Visitors *Report* shows a frame porch on the front with a balcony above. These have been replaced by a recent, somewhat out of scale porch. The porch on the rear appears to be a recent addition. Windows are double hung, two over two sash. The interiors were renovated when the building was being used to house married staff members, but some original decorative features survive.

The wealthy family of a patient had the cottage built for their daughter and her nursing staff; after her death in 1917, the cottage was donated to the hospital. The building is mentioned in the Board of Visitors *Report* of August 28, 1891:

The most noticeable gift of the year is that of a cottage for the insane. . . . This is a building which a Washington lady (Mrs. C. Z. Borrows), out of generous purpose. . . has caused to be erected on the grounds of the hospital, and which she gives to the United States, in order that her afflicted child may have a home there while she needs it, and that at last there may be . . . "vacancies" at St. Elizabeth, where the residents of the District of Columbia having means, when overtaken by insanity, can be suitably accommodated without encroaching upon the rooms. . . for those. . . unable to defray the expenses of their care.

Boiler House/Ice Plant (Building 52 - 1892)

This handsome, fieldstone building is located in the ravine south of the Main Building. It features random ashlar stonework with brick dressings and a dormered gable roof. The building provided power to the older buildings on the West Campus until it was replaced by the new Power House in 1910. By 1944 it has been converted to an ice plant.

Bakery (Building 46 - 1878-1910)

General Kitchen (Building 45 - 1883-1890)

Old Storeroom (Building 44 - 1900)

These three buildings, constructed over a 22-year period, have been joined together into a single, somewhat altered, structure (photo 8). The plain, utilitarian buildings are decorated only with corbelled

cornices and simple hood molds. The large size of the buildings indicates that feeding the hospital's patients, attendants and staff, numbering nearly 1,000 in the late 19th century, was no small task. The buildings are rare surviving examples of their building types and are also significant for the worker housing that was located on their upper floors. A portion of Building 44 has been demolished.

Staff Residence No. 9 (Building 86 - 1888)

This simple cottage was built on the East Campus to house men employed at the hospital farm. It has been altered. In 2004, this building had been removed from its original site and was awaiting relocation.

Dry Barn (Building 82 - 1884)

This large, vertical-sided clapboard structure is one of only two farm buildings remaining from the agricultural operations on the East Campus that provided food for the hospital and exercise and occupational therapy for the patients.

Refreshment Stand (Building 128 - c. 1884)

This small, vertical sided stand probably dates from the 1880s. The roof has been replaced. Its original use is unknown.

Tool House (Building 53 - 1895)

This small, utilitarian service building has been much altered.

Alonzo Richardson (1899-1903)

Richardson's tenure of superintendent was brief, cut off by his premature death at the age of 51, but he was responsible for the Government Hospital's largest building campaign. The new construction, which included a nurses' residence, an administration building, psychopathic hospitals for men and women, a new power plant, and ten new cottages, was designed both to end extreme overcrowding and to incorporate the most advanced thinking of the day concerning the treatment of mental illness. In 1901, Richardson obtained a Congressional appropriation of \$13 million for the first systematic expansion of the hospital. He contracted with the important Boston architectural firm of Shepley, Rutan, and Coolidge to build the new buildings, all designated by letters of the alphabet. Buildings A, B, C, and M are aligned with Martin Luther King, Jr. Avenue (photo 9), while Buildings E, J, K, L, M, and Q are scattered in a campus-like setting on the southern portion of the West Campus. Buildings I, N, P, and R are located on the East Campus, again following the line of Martin Luther King, Jr. Avenue. Designed in the Italian Renaissance Revival style considered particularly appropriate for hospitals, the buildings share many features, but are subtly differentiated in detail.

The new construction continued the expansion to the SSE set by his predecessor and, for the first time, extended onto the East Campus.

Laundry/Construction Shops (Building 49 - 1899)

This gable-roofed, red brick building appears to combine three structures dating from different periods of construction: the Laundry of 1899, the Laundry Addition of 1924, and the "Upholstery Shop," possibly built as early as 1856. The combined structure, with its hood molds and corbelling and its simple massing, looks like a typical 19th century industrial building.

Construction and laundry work was considered part of treatment, as a kind of occupational therapy. By 1902, the workers in the laundry were primarily black women patients.

Detached Kitchen (Building 34 - 1900)

This two-story red brick building features segmental arches over the windows and shed dormers.

The building replaced the original kitchen in the basement of the Detached Dining Hall.

A (Administration) Building (Building 74 – 1903, photo 10)

This large, brick building (with basement) consists of a central, three-story pavilion flanked by two, two-story wings. The pavilion features a portico with six colossal order Roman Doric columns. Each column rests on its own base and pedestal; between them, they carry the architrave and frieze. In lieu of a cornice, the portico has a broad roof overhang. A clock tower is located at the peak of the hipped, red clay brick roof of the building. According to the *Annual Report* of June 20, 1907, "there has been installed in the clock tower of the new Administration Building a Howard tower clock with four dials, each 4 foot 7 inches in diameter, which are illuminated at night by the electric lights."

The building is red brick trimmed with white stone quoins and keystones over the windows. The projecting eaves of the roof are supported by heavy brackets. Some original detail reportedly survives on the interior, including original, very large fireplaces with projecting mantelpieces supported by oak pilasters and beams.

An inscription over the main entrance to this building reads "1902," but according to the Board of Visitors *Report* of September 15, 1905, the hospital's business offices moved from the old Main Building to the new Administration Building on October 13, 1904.

B Building (Building 75 - 1902)

C Building (Building 73 - 1902)

These two buildings are located on either side of the Administration Building, to which they were originally connected by underground tunnels and one story, covered arcades (now gone). They are two-story brick buildings with white stone trim, pronounced corner quoins, and red tile roofs with overhanging eaves supported by heavy brackets. Central cupolas are located at the roof peaks. The buildings are approximately 270' long—larger than they look because of their E-shaped plans. Two-story porches are located at the front corners and the buildings also feature cast-iron balconies.

Designed as psychopathic pavilions for the early treatment and diagnosis of acute cases, these buildings demonstrated the extent to which the Government Hospital had accepted the medical model for treating mental illness. The buildings included surgical and other clinical facilities. Patients with chronic mental conditions were referred to parts of the hospital that provided custodial care, while acute cases were treated immediately within the buildings. Building B was for male patients; Building C for female.

E Building (Building 69 - 1902)

Like the other lettered buildings, this brick and stone building features corner quoins and heavy brackets supporting the wide overhang of the red tile roof.

The building was designed as nurses' quarters.

P Building (Building 100 - 1902)

R Building (Building 89 - 1902)

These two large buildings were constructed on the East Campus. The two-story brick and stone buildings have irregular plans, with wings both front and rear. They feature hipped roofs covered with Spanish tile, wide eaves supported by brackets, and central cupolas. Round-arched windows accentuate the pavilions at the centers of the main elevations. Prominent two story porches are located at the end of the main elevations; the arched openings are barred and screened. R Building was later incorporated into the quadrangle created during the William Alanson White building campaign of the 1930s (see below)

Located on the then largely treeless agricultural land of the East Campus, these buildings were designated for “disturbed, destructive, and untidy” males, according to the *Annual Report* of 1901. The most disturbed patients were thought to be the least sensitive to their surroundings.

Cottages:

All of these buildings follow the pattern set by the other lettered buildings: brick with white stone trim, two stories, hipped Spanish tile roofs, wide eaves with large brackets, and central cupolas. Most feature large porches.

I Building (Building 95 - 1902)

N Building (Building 94 - 1902)

These two T-plan buildings are located on the East Campus. They were designed to hold 40-60 male patients working on the nearby farm.

J Building (Building 60 - 1902)

This T-plan cottage, on the West Campus, was designed to hold 40-60 chronic white female patients needing medical attention. For this reason, it was built near the Toner Group of infirmary buildings (demolished).

K Building (Building 66 - 1902)

Like J Building, this is a T-plan cottage intended for 40-60 chronic white female patients.

L Building (Building 64 - 1902)

This T-plan cottage, with large, elliptical porches at either end of the main elevation and a cast-iron balcony over the main entrance, was designed to hold 40-60 white female patients “of the better class.” It occupies the most prominent site of this group of cottages and has finer interior finishes than its neighbors.

M Building (Building 72 - 1902)

Intended to house 41 white female epileptics who needed constant medical care, this T-plan building was located between the female psychopathic pavilion (Building B) and the nurses’ quarters (Building E). As was typical for cottages housing epileptic patients, the area of porches and terraces surrounding this building exceeded the area for interior sitting rooms.

Q Building (Building 68 - 1902)

This relatively large cottage was designed for 120 black and white female patients of the “disturbed class.” It was located well away from Martin Luther King, Jr. Avenue and other cottages, but near the nurses’ quarters. It features prominent, two-story elliptical porches at the ends of the main elevation.

Power House (Buildings 56 and 57 - 1902/1910)

These two attached brick industrial buildings are located in the ravine to the south of the Main Building adjacent to the former Baltimore and Ohio Railroad spur (now removed) which supplied them with coal. Building 56 is a rectangular one story structure with segmental arches over the windows, a plain

entablature, and buttresses reinforcing the walls. It was constructed in 1902 to provide power, heat, and light to the buildings of the Richardson expansion.

Building 57 was originally a tall one-story in height; two stories were added on top of the original building in 1915. It also has segmental arches over the windows and wall buttresses. When this building was completed in 1910, it supplied power to the entire hospital complex and the boilers in the old power house (Building 52) were removed.

The entire complex is dominated by the two tall chimney stacks.

Horse barn (Building 83 - 1901)

This picturesque, one-story brick building, part of the farm complex on the East Campus, resembles the “rustic” barns built on turn-of-the-century gentlemen’s farms.

William Alanson White (1903-1937)

The final group of historic buildings included in this nomination dates from the period when William Alanson White was superintendent.¹⁵ Although the new buildings designed to house patients continued to follow the cottage model, laboratories and other buildings reflected the final abandonment of “moral treatment” in favor of medical intervention based on scientific, clinical research as the appropriate treatment for mental illness.

Hitchcock Hall (Building 37 – 1910, photo 11)

Designed by the Washington architectural firm of Sunderland Brothers, this brick building features elaborate stone trim: keystones and corner blocks at the windows, consoles supporting the pediment over the entrance, a cartouche on the front façade, and round windows on the second floor framed with naturalistic foliage.

The 1,200 seat hall/ theater was used for patient assembly and amusement. Its completion was announced in the *1910 Annual Report*:

Hitchcock Hall has been entirely completed and has been used upon several occasions. The first occasion of its use was a play acted and managed entirely by the officers and employees of the hospital. Since then it has been used for the nurses’ graduating exercises and for various other assemblings. A moving-picture outfit has just been purchased, and it is hoped that this will add much to the value of the entertainments during the coming winter.

General Store/Canteen (Building 39 - 1916)

This simple, rather rustic, shingled building is dominated by its low lines and the deep overhang of its roof. There is a finial at the peak of the roof.

Here, according to the caption on a historic photo, “patients having parole of the grounds may purchase articles needed or desired by them, and the possibility of disease from food, of temporary elopements [escapes], and of the purchase of undesirable articles is much reduced.”

Mechanical and Electrical Shops (Building 12 - 1920)

¹⁵ Some of the buildings were not completed until after White’s death in 1937.

This two-story, flat-roofed, concrete industrial building is divided into 11 bays by projecting piers. Each bay on the top two floors was originally filled with triple, six over six double-hung wood windows. Many of the openings have now infilled. A recessed segmental arch is located at the top of each bay.

Garage (Building 81 – 1921)

Little information is available on this plain, utilitarian building.

Blackburn Lab (Building 88 – 1923, photo 12)

This two-story plus raised basement, rectangular, brick building features a broad white stone belt course over the second floor windows and a narrower white sill course for the windows above. Combined with the long line of the hipped, clay tile roof, these details give the building a distinctly horizontal emphasis. The entrance, at the top of a long flight of stairs, is accented with simple stone panels. The original triple entrance door appears to have been replaced. Windows on the front are standard single and paired six-over-six double-hung wood sash, but on the back very large industrial windows light the laboratories within.

The laboratory, originally located in The Rest, was moved to this building from the Allison Buildings. It was named after Dr. I. W. Blackburn.

Glenside (Building 91 - 1923)

This simple, long, low brick building features a shallow hipped roof covered with what appear to be asbestos shingles and pierced with long shed-roofed dormers.

Employees' cafeteria (Building 70 - 1924)

This rather makeshift structure combines two "temporary buildings." It has been heavily altered on both exterior and interior.

Staff Residence No. 1 (Building 15 - 1924)

Staff Residence No. 2 (Building 17 - 1924)

Staff Residence No. 3 (Building 27 - 1924)

Staff Residence No. 4 (Building 76 - 1924)

Staff Residence No. 5 (Building 67 - 1924)

Staff Residence No. 6 (Building 99 - 1924)

These small houses are located on both the East and West campuses. Most are typical two-story American four-square buildings with porches across the front, most of which have now been enclosed. Most are constructed of hollow clay tile, now painted white. They were built to house staff physicians who worked in nearby buildings.

Storage Shed (Building 11 - 1925)

This small shed, built to store pipe and other construction materials, is currently covered with corrugated metal.

Gatehouse No. 2 (Building 78 - 1926)

Gatehouse No. 4 (Building 97 - 1926)

These two buildings were constructed at two new entrances to the hospital. Gatehouse No. 2 is on the West Campus and responds to the shift in orientation that resulted from the Richardson expansion.

Gatehouse No. 4 reflects the new importance of the East Campus as the center of 20th century development.

Medical and Surgical Building/W. W. Eldridge Building (Building 90 – 1931, photo 13)

Women’s Receiving Building/Charles H. Nichols Building (Building 92 – 1936, photo 14)

Men’s Receiving Building/William A. White Building (Building 93 – 1934, photo 15)

These three buildings were located in such a way as to incorporate earlier buildings 89 and 95 into a quadrangle enclosing a large, park-like open space (photo 16). Together they served as St. Elizabeths receiving and general hospital.

All three buildings are massive—five stories facing the central open space and up to six stories on the rear elevations. Projecting wings and central pavilions break up the massing of each building. Although details vary, all of the buildings are brick, trimmed with a variety of white stone beltcourses; stone, or stone, trimmed lintels with prominent keystones; and shallow hipped tile roofs. The entrances to the Eldridge and White buildings are accented with stone frontispieces. The Nichols Building, which is the focal point of the quadrangle, features the most elaborate detail. The three bay central pavilion projects from the main elevation of the building and is approached by way of a raised platform surrounded by a stone balustrade. The entrance and the second floor window above it are set in a stone frontispiece. The entrance is framed by attached columns topped with a broken pediment; there is a segmental arched pediment above the window. A large stone cupola with a bell-shaped roof is located on a balustraded platform at the peak of the roof.

Behavioral Sciences Building (Building 102 - 1932-1933)

This long, two-story brick building features a strongly projecting pavilion in the center and two slightly projecting end pavilions. The entrance and the second floor window above it are accented with a decorative stone frontispiece. The windows in the center pavilion feature stone keystones and corner blocks.

Continuing Treatment Complex:

Godding No. 3 (Building 106 - 1938)

East side 4 (Building 107 - 1939)

Godding No. 5 (Building 108 - 1940)

C.T. Kitchen and Cafeteria (Building 109 - 1933)

Godding No. 6 (Building 110 - 1940)

Richardson No. 1 (Building 111 - 1933)

Richardson No. 2 (Building 112 - 1933)

This complex of large brick buildings were constructed for long-term patients. Six cottages surround a central kitchen/cafeteria building, to which they are connected by brick passageways (photo 17). The cottages are two stories; the kitchen and cafeteria are three. All have shallow hipped Spanish tile roofs. The H-plan cottages feature two-story screened porches at the ends of the wings. Details are minimal: white stone keystones, corner blocks, sills, and belt courses, and restrained entrances.

Comfort station (Building 96 - 1922)

Comfort station (Building 98 - 1920s)

Comfort station (Building 77 - 1922)

These small utilitarian structures emphasize the continued importance placed on recreational use of the ground by patients.

The Grounds

The extensive, landscaped grounds have been an integral part of the Government Hospital for the Insane from its creation in the 1850s through the end of the 20th Century. Beautiful surroundings were a critical element in the philosophy of “moral treatment.” Contemplation of nature was widely seen as a way of awakening reason. In addition, landscaped grounds provided healthful outdoor recreation and fresh air. Finally, the hospital farms provided both the physical activity that was the 19th century equivalent of a occupational therapy, and much of the food consumed at these very large institutions. Superintendent Nichols, who seems to have designed the grounds, summarized the optimistic view of the mid-19th Century when he wrote of the Government Hospital in his *Annual Report* of 1860:

nothing gratifies the taste, and spontaneously enlists the attention, of so large a class of persons as combinations of beautiful natural scenery, varied and enriched by the hand or man; and it may be asserted with much confidence, that the expenditure of a thousand dollars each year, directed to the single object of promoting the healthy mental occupation of one hundred insane persons, with either amusements or labor, would not be so effectual in recalling reason to its throne, as will the grand panorama of nature and of art, which the peculiar position of the site now commands.

In the same report, he announced his plans to

finish the grading and graveling of miles of foot paths and carriage roads, cultivate and proportion the trees, and spread a green turf beneath the feet of the strolling invalid who would woo nature for the heath that spurned nature had denied.

In spite of subsequent construction, recent lack of maintenance, and the loss of a number of large trees through storm damage, the West Campus still preserves these features largely intact (see photos 2, 3, and 9).

By the late 19th Century, confidence in the healing power of landscape had faded. Expenditures on beautifying the grounds continued and the importance of fresh air, outdoor exercise, and food production was still recognized. But in his *Annual Report* of 1880, Godding wrote:

No insane person is injured by natural beauty; greensward irritates no nerves however sensitive; those who pass by the flowers to-day may turn to them with delight to-morrow; so, it is well to widen our green lawns and brighten the walks with roses. In the line of the esthetic treatment of the insane, we hang the halls with pictures, send cut flowers to the tables and rooms, bring in music and singing birds, and nine out of ten care nothing for these things; what to them that the sunshine is in the sky, so it shines not in their lives? Ah! but it is the individual case, the tenth one that we are content to benefit with all this; the nine suffer no harm from pleasant surroundings; surely we do not err in making their home more homelike.

In the 1920s, the hospital grounds were described in a local newspaper as having 170 varieties of trees set in broad green lawns. According to the article, trees came from Asia, the Caucasus Mountains, Greece, Bulgaria, China, Japan, India, and Persia, as well as redwoods from California. The grounds were also enhanced by flower beds supplied from the six greenhouses. Although there were fewer flower beds in 2004, most of the trees and open lawns survived.

Civil War Cemetery (photo 18)

The Civil War cemetery on the West Campus was created about 1864, when part of the Government Hospital was being used as a general military hospital. According to an article by Josephine McQuillin, published in the October 1961 edition of the "Saint Elizabeths Reporter," the headstones were arranged to form a cross when seen from the river or the road below the bluff. The cross is reportedly still visible in the winter months.

Period of Significance, List of Contributing Buildings and Structures, and List of Non-contributing Buildings and Structures (Section 200.2[i])

Period of Significance: 1853-1940

Contributing Buildings, Structures, and Features (listed by number)

Main Building, consisting of:

1 & 2	Center Building	(1859-1874)
3	West Wing	(1853)
4	East Wing	(1858)
5	Garfield	(1872)
6	Retreat/Pine	(1884)
8	Willow	(1895)
11	Storage Shed	(1925)
12	Mechanical and Electrical Shops	(1920-1953)
15	Staff Residence No. 1	(1924)
17	Staff Residence No. 2	(1924)
18	Borrows (Burroughs) Cottage	(1891)
20	Greenhouses	(ca. 1882-1959)
21	Gatehouse No. 1	(1874)
23	Allison D	(1899)
24	Allison C	(1899)
25	Allison A	(1899)
26	Allison B	(1899)
27	Staff Residence No. 3	(1924)
28	Linden	(1893)
29	Holly	(1893)
30	East Lodge/Detached Nurses Home	(1860/1887)
31	Atkins Hall	(1878/1899)
32	Relief	(1879/1895)
33	Dining Hall for Detached Buildings	(1885)
34	Detached Kitchen	(1900)
36	Home	(1883)
37	Hitchcock Hall	(1910)
39	General Store/Canteen	(1916)
40	The Rest/Circulating Library	(1882/1904/1929)
41	Engine House/Fire House	(1891)
44	Old Storeroom	(1900)

45	General Kitchen	(1883-1890)
46	Bakery	(1878-1910)
49	Construction Shops	(1899)
52	Boiler House/Ice Plant	(1892)
53	Tool House	(1895)
56 & 57	Power House	(1902/1910/1915)
60	J Building	(1902)
64	L Building	(1902)
66	K Building	(1902)
67	Staff Residence No. 5	(1924)
68	Q Building	(1902-1905)
69	E Building	(1902)
70	Employee Cafeteria	(1924)
72	M Building	(1902)
73	C Building	(1902)
74	A (Administration) Building	(1904)
75	B Building	(1902)
76	Staff Residence No. 4	(1924)
77	Comfort station	(1922)
78	Gatehouse No.2	(1926)
79	Staff Residence No. 8	(1888)
81	Garage	(1921)
82	Dry Barn	(1884)
83	Horse Barn	(1901)
86	Staff Residence No. 9	(1888)
88	Blackburn Lab	(1923)
89	R Building	(1902)
90	Medical and Surgical Building/ W. W. Eldridge Building	(1931)
91	Glenside	(1923)
92	Women's Receiving Building/ Charles W. Nichols Building	(1936)
93	Men's Receiving Building/ William A. White Building	(1934)
94	N Building	(1902)
95	I Building	(1902)
96	Comfort station	(1922)
97	Gatehouse No.4	(1926)
98	Comfort station	(1924)
99	Staff Residence No. 6	(1924)
100	P Building	(1902)
102	Behavioral Studies Building	(1932)
106	Godding No. 3	(1938)
107	East Side 4	(1939)
108	Godding No. 5	(1940)
109	C.T. Kitchen and Cafeteria	(1933)
110	Godding No. 6	(1940)

111	Richardson No. 1	(1933)
112	Richardson No. 2	(1933)
128	Refreshment Stand	(ca. 1884)
	Wall	(1858-9/1924)
	Civil War Cemetery	(ca. 1864)

Non-contributing Buildings and Structures

16	Pumping station	(1965)
38	Hagan Hall	(1942)
55	Locomotive House	(1947)
62	Transformer Room	(1957)
63	Transformer Room	(1957)
87	Gatehouse 3	(1958)
115	East Side No. 8.	(1943)
116	East Side No. 7	(1943)
117	Barton Hall	(1946)
118	Warehouse and Laundry	(1952)
118A	Warehouse Annex	(1952)
119	Haydon Division (Geriatric)	(1952)
120	Dorothea Dix Pavilion	(1959)
121	Chapel	(1956)
122	John Howard Pavilion	(1959)
123	Incinerator	(1964)
124	Rehabilitation Medicine Building	(1963)
125	Refrigeration Plant	(1952)
126	Cooling Tower	(1964)

Archaeological Significance (Section 200.2[j])

Archaeological Potential

In 1993 an archaeological assessment was conducted for the West Campus of St. Elizabeths Hospital. No actual excavation was conducted, however, areas with potential for archaeological resources were identified.

The resources can be categorized into three separate time periods: prehistoric; the historic land use before construction of St. Elizabeths and resources relating to the development and post-development of St. Elizabeths.

Based on environmental information, the springs and streams that historically ran through the area and the nearby supply of subsistence resources would have made it a favorable location to prehistoric populations. In addition, prehistoric artifacts have been found to the north and south of the project area, and almost the entire eastern shore of the Anacostia River has yielded quantities of prehistoric artifacts, adding to the potential for finding prehistoric use of the grounds of St. Elizabeths.

Before the development of St Elizabeths documentary evidence indicates that the property was leased as early as 1703 for the planting of an apple orchard. There is also evidence of the property being leased in

1798. A house and two farm buildings are attested within the original St. Elizabeths tract in the last 18th century. Outbuildings associated with the house may also be located on the campus.

The development of St. Elizabeths as a self-contained institutional community prior to 1875 has the potential to yield information about the functioning of the hospital and the lifestyle and treatment of its occupants, both attendants and patients.

The use of the hospital and its grounds as the site for encampments of Civil War veterans would have left an archaeological record documenting this occupation. Wounded soldiers lived outside in tents; a marine company camped on the grounds; and part of the farm was used as a cavalry depot.

The potential for these resources would be on both the East and West Campus of the hospital.

In addition to the Civil War Cemetery located on the West Campus, there is a large cemetery on the East Campus behind Building 122. This cemetery is approximately 4 acres in size and contains burials of several soldiers who participated in the Civil War and were buried there between 1873 and 1879; burials of soldiers who were patients and participated in post-Civil War conflicts; and deceased non-military hospital patients. There doesn't appear to be any separation of these sections.

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Repositories containing additional material:

American Institute of Architects
St. Elizabeths Hospital Archives

Boundary Description and Justification (Section 200.2[1])

The St. Elizabeths Hospital tract consists of two parcels -- 234/2, west of Martin Luther King, Jr. Avenue (formerly known as Nichols Avenue) and 234/38, east of Martin Luther King, Jr. Avenue.

Tract 234/2 begins at a point north of Milwaukee Place, west approximately 2,360 feet to a point where it then runs parallel to South Capitol Street approximately 2,860 feet to Firth Sterling Avenue. Tract 234/2 is closed by a straight line approximately 2,440 feet back to Martin Luther King, Jr. Avenue.

Parcel 234/38 begins at a point near Bruce Street, S.E. at the northeast corner of the parcel and runs approximately 1,940 feet to Alabama Avenue; then approximately 920 feet parallel to Alabama Avenue; then approximately 1,380 feet to a point near the intersection of Martin Luther King, Jr. Avenue which runs north-south. Tract 234/38 runs parallel to Martin Luther King, Jr. Avenue for approximately 4,000 feet back to Bruce Street.

The St. Elizabeths Hospital tract is recorded as Map No. 3302 of the Surveyor's Office of the District of Columbia dated March 31, 1947

The proposed boundaries include all the land historically associated with the Government Hospital for the Insane (officially renamed St. Elizabeths Hospital in 1916). Detached parcels used for agricultural purposes, but no longer owned by the hospital are not included in this nomination.

List of Photographs

- Photo 1: View of Washington from “The Point”
Photographer: Unknown
Date: c. 2004
- Photo 2: Looking north towards Greenhouses (Bldg. 20) and Borrows Cottage (Bldg. 17)
Photographer: Marilyn Harper
Date: October 2004
- Photo 3: Main Building (Bldgs. 1, 3, and 5), Entrance and Drive, looking west
Photographer: Marilyn Harper
Date: October 2004
- Photo 4: Main Building (Bldgs. 1, 3, and 5), Rear, looking west
Photographer: Unknown
January 2002
- Photo 5: Dining Hall for Detached Buildings (Bldg. 33), Front Elevation
Photographer: Unknown
March 2004
- Photo 6: Linden (Bldg. 28), Front Elevation
Photographer: Unknown
Date: January 2002
- Photo 7: Engine House/Fire House (Bldg. 41), Front Elevation
Photographer: Unknown
Date: December 2001
- Photo 8: General Kitchen, Old Storeroom, and Bakery (Bldgs. 45, 44, and 46), showing former location of demolished section of the Storeroom.
Photographer: Unknown
Date: December 2001
- Photo 9: Looking south towards buildings B, A (Administration), D, and M (Bldgs. 75, 74, 73, and 72)
Photographer: Marilyn Harper
Date: October 2004
- Photo 10: A (Administration) Building, with B Building in the background, looking NNE
Photographer: Unknown
Date: January 2002
- Photo 11: Hitchcock Hall (Bldg. 37), Front Elevation
Photographer: Unknown
Date: January 2002

- Photo 12: Blackburn Laboratory (Bldg. 88), Front Elevation
Photographer: William Lebovich
Date: February 1981
- Photo 13: Medical and Surgical Building/W. W. Eldridge Building (Bldg. 90), looking north
Photographer: William Lebovich
Date: February 1981
- Photo 14: Women's Receiving Building/Charles W. Nichols Building (Bldg. 92), looking east
Photographer: William Lebovich
Date: February 1981
- Photo 15: Men's Receiving Building/William A. White Building (Bldg. 92), looking south
Photographer: William Lebovich
Date: February 1981
- Photo 16: Women's Receiving Building/Charles W. Nichols Building (Bldg. 92), flanked by R and I buildings (Bldgs. 89 and 95), looking east
Photographer: William Lebovich
Date: February 1981
- Photo 17: Continuing Treatment Complex: East Side #4 (Bldg. 107), C. T. Kitchen and Cafeteria (Bldg. 109), and Godding #3 (Bldg. 106), looking west
Photographer: William Lebovich
Date: February 1981
- Photo 18: Civil War Cemetery
Photographer: Unknown
Date: December 2001