
HISTORIC PRESERVATION REVIEW BOARD

Historic Landmark Case No. 15-15

The Dr. Ernest Hadley House

4304 Forest Lane NW

Square 1619, Lot 78

Meeting Date: September 24, 2015
Applicant: Off Boundary Preservation Brigade
Affected ANC: 3D

The Historic Preservation Office recommends that the Board not designate the Dr. Ernest Hadley House, 4304 Forest Lane NW, a historic landmark in the D.C. Inventory of Historic Sites, and not request that the nomination be forwarded to the National Register of Historic Places.

The property does not appear to merit designation under District of Columbia Criterion D and National Register Criterion C for its architecture, nor District of Columbia Criterion C and National Register Criterion B for association with the lives of persons significant in our past, nor District of Columbia Criterion B and National Register Criterion A for its contributions to our understanding of broad patterns of the city's history.

The building does not stand out from its peers architecturally or historically. What we know of Dr. Hadley is that he was a professionally successful and significant psychoanalyst in Washington, but one of many of his era.

Background

The Hadley House was one of fourteen two-story dwellings constructed on Forest Lane in the early 1930s by W.C. & A.N. Miller, and one of hundreds the Millers developed in Wesley Heights and Spring Valley from 1925 until World War II. While Spring Valley is overwhelmingly Colonial Revival in style, the slightly earlier Wesley Heights is a mixture of Colonial and Tudor Revival, with Norman, Spanish, and other styles thrown in. The Hadley House and its neighbors were designed by the Millers' in-house architect, Gordon Earl MacNeil, who was striving for each home to be distinctive in massing and elements within a compatible aggregate, applying a limited palette of styles and materials throughout the neighborhood.

After its completion, the Tudor-Revival-style 4304 Forest Lane was purchased by Agnes Marie Hadley, wife of Ernest Elvin Hadley, a former member of the medical staff at Saint Elizabeths Hospital, now in private practice as a psychoanalyst. Dr. Hadley maintained an office on I Street NW. The Hadleys remained at the residence the remainder of their lives; the property was sold after Agnes's death in 1988. The building appears to have been altered little.

Evaluation

Landmark designation is inherently comparative. Landmarks must meet one or more criteria of significance, but it is necessary to have more than *some* significance, as no building was erected

for no purpose or used for nothing. Landmarks must possess a degree of significance that makes them special, distinctive from most of their peers. After all, the definition of a landmark is of something that stands out visually or is particularly important.

The Hadley House is reminiscent of the recently reviewed Heurich-Parks House (3400 Massachusetts Avenue) in that it is an example of a twentieth-century revival style residence at one time inhabited by a prominent member of the medical profession. Like the Heurich-Parks nomination's treatment of Dr. Parks, this one does not document Dr. Hadley sufficiently well or compellingly to demonstrate that his home should be recognized and protected as a landmark.

Style

Although every house is in some sense unique, the Hadley House is not unique stylistically, as one might say of the recently reviewed 3020 Albemarle. And while uniqueness of expression is not a necessary criterion, neither is this home one of the best examples of a small class of a particular style, like the Spanish-Revival 3400 Massachusetts. In fact, 4304 Forest Lane is probably not even the best example of its Tudor Revival style on its cul-de-sac, although it is superior to some others on the street and elsewhere. It is surrounded by dozens designed a similar Tudor mode by the same architect for the same builder. Some are grander and more elaborate, some are simpler in detail, and it is very difficult to believe that any observer would have singled out this example for special attention had it not been proposed for demolition.

The Tudor Revival is much more common in Washington than is, say, the contemporaneous Spanish Revival. Whole neighborhoods—and in this case, roughly half a neighborhood—were designed to recall late medieval England.

The nomination claims a special significance for this home as a subspecies of Tudor, the “Storybook Tudor.” The term appears to have arisen as a real estate marketing classification in the 1960s. There is nothing wrong with that in itself; stylistic nomenclature often reflects post hoc categorization. The term is mostly used in California, a reflection not only of the products and by-products of the motion-picture industry, but also of the fact that Southern California was one of America's least likely contexts for historic English architecture, so Tudor often melded there with established Craftsman, Spanish, etc. The term “storybook” is ill-defined; in fact, it is not always even referred to in works on Tudor Revival architecture, but it is discussed in various articles. It refers to especially whimsical examples. There is nothing wrong with having subtypes, but their characteristics should be generally agreed upon.

Classifying buildings on a spectrum between fanciful and academic has some merit. Consider the free interpretations of Colonial Revival that Stanford White is famous for, versus the many exquisitely academic recreations of Colonial—and the many ill-proportioned, badly detailed knock-offs. On the other hand, Tudor offers some natural challenges to this kind of schema. Grand or modest, it was very much an English vernacular that predated the profession of architect. Thus, even academic recreations, even if grand, are translations of a mode that was organic and varied. As with other styles, architects reviving Tudor were usually less interested in historical accuracy than in providing impressive, comfortable houses. Even actual reconstructed Tudor buildings—such as Richmond's Agecroft Hall—were not reassembled exactly as they had stood. Designers looked to historical models for picturesque inspiration rather than precise emulation. So, there was always whimsy involved. They scaled up and

scaled down and borrowed from different periods and places. After all, architects like Gordon MacNeil were designing dozens of suburban mini-estates for the affluent, not a single replica manor for an eccentric millionaire.

Still, there is little that is especially fanciful or humorous or exaggerated in MacNeil's 4304 Forest Lane. Most notable are the fireplace and some unconvincingly substantial beams on the interior. The use of only *some* stone at openings in the otherwise brick walls is presumably meant to suggest the reworking of openings over time. The use of clinker brick is not unlike the employment of "used" brick and washes applied to the exterior of some post-Williamsburg Colonial Revival houses, and it acts a substitute for the original, inferior and by then unavailable Tudor product: soft, irregular, hand-molded brick. But the asymmetrical massing of this house is not inconceivable in a historical prototype, nor are most of the details or materials. MacNeil knew he was working in a revival style to satisfy middle-class tastes—tastes that would be satisfied at less than full emulation of an old English house, and at a cost less than that expended upon the Tudor-Revival estate country estates of their more affluent contemporaries. If there's a story being told here, it's not *Snow White*; it's the myth of living like a country squire, whether a sixteenth-century or a twentieth-century one.

More important than the degree to which this house represents "storybook" architecture then, is the problem that it doesn't do so to a greater degree than its neighbors and peers. Many incorporate the same elements and materials, including the whimsical ones. It's largely the massing that differs. The Hadley House is another example of a building that is part and parcel of its neighborhood, yet perhaps it is more so than usual, as this entire neighborhood was planned and executed by the same builders and designers. While the Hadley House is a structure that would contribute to a potential historic district, it is not a landmark. It is better than some examples in the neighborhood and not as good as others. It cannot be said to be better, more architecturally significant, or even more "storybook" than the Wesley Heights houses in the following pictures:







History

The Criterion A argument for the house contributing to broad patterns of history has been summarized as “typifying a period in the development of our neighborhoods where a yearning for a simpler past in the form of a medieval cottage built on the edge of the forest primeval met the future, a world of automobiles, conveniences such as bathrooms, modern kitchens and central heating.” Of course, even if true, this could be applied to many, many examples of many revival

styles in this neighborhood and elsewhere in the city. The Hadley House participates in and contributes to the development and maturing of a suburban neighborhood—and by extension, the District of Columbia—to a degree about equal with its neighbors.

Architectural historians have made much of the disruption of World War I causing American homebuyers, builders and designers to look backward. But they had always done so, at least once designers sought models beyond what vernacular builders had always produced. Such revival architecture was always referred to as modern. The war exposed a broader swath of the American public to Europe, and that influenced tastes. Even as late as the early 1930s, the country and the District had seen little true Modernism in architecture to which to react; there were still few available non-historicist precedents considered appropriate for a large house or an entire neighborhood. Did the war chill and delay local acceptance of Modernism? Perhaps. But Deco and Moderne were welcomed, albeit more for apartment, rowhouse and commercial construction.

As for the house's significance for its association with Dr. Hadley, given the available information, what may be said of the house may be said of its former occupant as a psychoanalyst: a respectable example, but one among many, and requiring a compelling argument to be considered a standout.

Having worked at Saint Elizabeths Hospital in the 1920s before going into private practice. Ernest Hadley was an early psychoanalyst, especially if we consider “early” as the period from 1909—when Sigmund Freud visited America to deliver a series of lectures at Clark University—until the 1930s, when many European psychoanalysts immigrated to escape the Nazis. But the Clark lectures took place in 1909, and they had a profound and rapid influence on American psychiatry, which had previously concentrated on somatic causes for neuroses and psychoses. The Washington Psychoanalytic Association was founded in 1914, and many of its early members were staff at St. Elizabeths Hospital, such as superintendent Dr. William Alanson White, chief neurologist Dr. Edward Lazelle, and assistant clinical psychiatrist psychotherapist Dr. Lucille Dooley. Already by the mid 1910s, the local newspapers were picking up the current thought, calling Dr. White “the man who reads your dreams.” Freud’s ideas and methods found their way into popular columns on dream analysis and neuroses.

Dr. Hadley was, in a sense, part of a second generation of psychoanalysts, studying under the first. He began work at St. Elizabeths the year after the hospital’s Dr. Edward J. Kempf published his textbook *Psychopathology* (in which, among other things, Kempf coined the term “homosexual panic”). Hadley’s boss, Dr. White, encouraged him to do research and suggested that he try psychoanalysis on schizophrenics. Hadley’s greatest accomplishment at the hospital was his superior ability to communicate with “hebephrenic” schizophrenics, keeping them from growing more withdrawn.¹ In this, he may be said to be a pioneer, as strict Freudians were reluctant to employ psychotherapy on those with whom they could not always carry on a deep, rational conversation. Hadley was very respected in his field and was one of the founding members and an officer of several societies and institutes, including the Washington Psychoanalytic Institute (an offshoot of the Washington-Baltimore Psychoanalytic Society) and

¹ Hebephrenia, or disorganized schizophrenia, is not necessarily characterized by delusions or hallucinations, but by disorganized behavior and speech, inappropriate emotional responses, lack of happiness and motivation.

its Washington School of Psychiatry, and the William Alanson White Psychiatric Foundation. He taught younger psychoanalysts, through both classes and analysis, and remained active treating schizophrenics and those with various neuroses.

Yet, there were so many prominent psychoanalysts active in the Washington area, and especially St. Elizabeths, in the early decades of the twentieth century, and Hadley is generally not mentioned in histories of psychoanalysis in America. If Hadley published (e.g., *The Psychoanalytic Clarification of Personality Types*, 1938), some published more prolifically. If Hadley worked in a hospital setting, others, such as William A. White, Winfred Overholser, Edward Lazelle and Nolan D.C. Lewis remained longer and rose higher. If Hadley taught, so did others, some while employed at St. Elizabeths or, like Ben Karpman, as head of psychiatry and professor at Howard University College of Medicine for two decades. Several doctors worked extensively with schizophrenics, including Nolan Lewis, Edith Weigert and Frieda Fromm-Reichman.² Others, like Philip Graven, specialized in work with epileptics. Although Hadley was decorated for his chairmanship of the psychiatry panel of the Army induction board at Fort Myer during World War II, it was Winfred Overholser and Harry Stack Sullivan who had formulated guidelines for the psychological screening of inductees to the United States military before the war—and William A. White who had proposed to the Army the psychological screening of troops prior to the *First* World War.

Although little published, Harry Stack Sullivan was among the most influential of those who passed through St. Elizabeths. “Along with Clara Thompson, Karen Horney, Erich Fromm, Otto Allen Will, Jr., Erik H. Erikson, and Frieda Fromm-Reichmann,” he “laid the groundwork for understanding the individual based on the network of relationships in which he or she is enmeshed. He developed a theory of psychiatry based on interpersonal relationships where cultural forces are largely responsible for mental illnesses. In his words [and contrary to Freud], one must pay attention to the ‘interactional’, not the ‘intrapsychic’,” an American approach not bound by orthodoxy. There are several biographies of Sullivan and works about his thought and methods.

Washington’s greatest figure in psychoanalysis is probably William Alanson White, the superintendent of St. Elizabeths Hospital from 1903 to 1937. In addition to administering a 5,000-patient hospital (which included daily staff briefings on patients), White read voraciously, published prolifically, lectured at Georgetown, George Washington and the Army Medical School. A reformer, he did away with most of the physical restraints used in the hospital and instituted a psychoanalytic treatment service, bringing together the staff that included Hadley, Kempf, Graven, Karpman, Lewis and many others. Several summers he traveled to Europe to visit mental hospitals. He corresponded with Freud, which was not always pleasant, because “White was never circumscribed by the narrowness of Freud’s approach... White was an eclectic who was ready to apply any useful means or discipline to alleviate symptoms relating to a patient’s problems.” Still, he is credited as being one of the persons most responsible for spreading psychoanalysis in America.

² Fromm-Reichman and Weigert were both emigres and had known Freud. Fromm-Reichman practiced mostly at Chestnut Lodge in Rockville, where she was the most prominent member of a well-respected staff, and she was one of the founders of the New York division of the Washington School of psychiatry.

Considering the more limited application of psychoanalysis and Freud's particular theories of motivation today, White seems prescient and practical, rather than overly conservative or undisciplined in thought. Talk therapy for schizophrenics today revolves around managing the disease and coping with day-to-day problems, reinforcing the need to stay on medication. Experience has vindicated the strict Freudians on the limitations of psychoanalysis in such cases, but not for the reasons they imagined. Rather, theories of physiological and hereditary causes of mental illness, once crowded out by psychoanalytic theory, have reasserted themselves.

None of this is meant to take away from Dr. Ernest Hadley. The point is that, largely reliant on an obituary, the nomination has barely scratched the surface on Hadley himself, let alone sufficiently explored the context of psychoanalysis in Washington or the U.S. to place the doctor within it.