

DATA SHEET

UNITED STATES DEPARTMENT OF THE INTERIOR
NATIONAL PARK SERVICE

NATIONAL REGISTER OF HISTORIC PLACES INVENTORY -- NOMINATION FORM

FOR FEDERAL PROPERTIES

FOR NPS USE ONLY	
RECEIVED	APR 25 1979
DATE ENTERED	26 1979

SEE INSTRUCTIONS IN *HOW TO COMPLETE NATIONAL REGISTER FORMS*
TYPE ALL ENTRIES -- COMPLETE APPLICABLE SECTIONS

1 NAME

HISTORIC

AND/OR COMMON

SAINT ELIZABETHS HOSPITAL

2 LOCATION

STREET & NUMBER

2700 Martin Luther King Jr., Avenue, S.E.

CITY, TOWN

Washington, D.C.

STATE

VICINITY OF
CODE

NOT FOR PUBLICATION
CONGRESSIONAL DISTRICT

COUNTY

CODE

3 CLASSIFICATION

CATEGORY	OWNERSHIP	STATUS	PRESENT USE	
<input checked="" type="checkbox"/> DISTRICT	<input checked="" type="checkbox"/> PUBLIC	<input checked="" type="checkbox"/> OCCUPIED	<input type="checkbox"/> AGRICULTURE	<input type="checkbox"/> MUSEUM
<input type="checkbox"/> BUILDING(S)	<input type="checkbox"/> PRIVATE	<input type="checkbox"/> UNOCCUPIED	<input type="checkbox"/> COMMERCIAL	<input type="checkbox"/> PARK
<input type="checkbox"/> STRUCTURE	<input type="checkbox"/> BOTH	<input type="checkbox"/> WORK IN PROGRESS	<input type="checkbox"/> EDUCATIONAL	<input type="checkbox"/> PRIVATE RESIDENCE
<input type="checkbox"/> SITE	PUBLIC ACQUISITION	ACCESSIBLE	<input type="checkbox"/> ENTERTAINMENT	<input type="checkbox"/> RELIGIOUS
<input type="checkbox"/> OBJECT	<input type="checkbox"/> IN PROCESS	<input checked="" type="checkbox"/> YES: RESTRICTED	<input checked="" type="checkbox"/> GOVERNMENT	<input type="checkbox"/> SCIENTIFIC
	<input type="checkbox"/> BEING CONSIDERED	<input type="checkbox"/> YES: UNRESTRICTED	<input type="checkbox"/> INDUSTRIAL	<input type="checkbox"/> TRANSPORTATION
		<input type="checkbox"/> NO	<input type="checkbox"/> MILITARY	<input checked="" type="checkbox"/> OTHER:

4 AGENCY

REGIONAL HEADQUARTERS: (If applicable)

U.S. Department of Health, Education, and Welfare

STREET & NUMBER

330 Independence Avenue, S.W.

CITY, TOWN

Washington, D.C.

STATE

VICINITY OF

5 LOCATION OF LEGAL DESCRIPTION

COURTHOUSE,
REGISTRY OF DEEDS, ETC.

Recorder of Deeds

STREET & NUMBER

CITY, TOWN

STATE

6 REPRESENTATION IN EXISTING SURVEYS

TITLE

U.S. Archives and Files of Saint Elizabeths Hospital

DATE

FEDERAL STATE COUNTY LOCAL

DEPOSITORY FOR
SURVEY RECORDS

CITY, TOWN

STATE

8 SIGNIFICANCE

PERIOD	AREAS OF SIGNIFICANCE -- CHECK AND JUSTIFY BELOW			
<input type="checkbox"/> PREHISTORIC	<input type="checkbox"/> ARCHEOLOGY-PREHISTORIC	<input type="checkbox"/> COMMUNITY PLANNING	<input type="checkbox"/> LANDSCAPE ARCHITECTURE	<input type="checkbox"/> RELIGION
<input type="checkbox"/> 1400-1499	<input type="checkbox"/> ARCHEOLOGY-HISTORIC	<input type="checkbox"/> CONSERVATION	<input type="checkbox"/> LAW	<input type="checkbox"/> SCIENCE
<input type="checkbox"/> 1500-1599	<input type="checkbox"/> AGRICULTURE	<input type="checkbox"/> ECONOMICS	<input type="checkbox"/> LITERATURE	<input type="checkbox"/> SCULPTURE
<input type="checkbox"/> 1600-1699	<input checked="" type="checkbox"/> ARCHITECTURE	<input type="checkbox"/> EDUCATION	<input type="checkbox"/> MILITARY	<input checked="" type="checkbox"/> SOCIAL/HUMANITARIAN
<input type="checkbox"/> 1700-1799	<input type="checkbox"/> ART	<input type="checkbox"/> ENGINEERING	<input type="checkbox"/> MUSIC	<input type="checkbox"/> THEATER
<input checked="" type="checkbox"/> 1800-1899	<input type="checkbox"/> COMMERCE	<input type="checkbox"/> EXPLORATION/SETTLEMENT	<input type="checkbox"/> PHILOSOPHY	<input type="checkbox"/> TRANSPORTATION
<input checked="" type="checkbox"/> 1900-present	<input type="checkbox"/> COMMUNICATIONS	<input type="checkbox"/> INDUSTRY	<input type="checkbox"/> POLITICS/GOVERNMENT	<input checked="" type="checkbox"/> OTHER (SPECIFY) Medical-History
		<input type="checkbox"/> INVENTION		

SPECIFIC DATES

BUILDER/ARCHITECT

SIGNIFICANCE

St. Elizabeths Hospital, as an institution, is significant in terms of events associated with the development of methods in the United States to protect and care for the mentally ill. Architecturally, the several building complexes at St. Elizabeths are significant because they represent the development of institutional architecture over a century. In addition, there are individual buildings that, in and of themselves, are important in terms of American architecture and/or the architecture of health facilities.

1) EVENTS

The establishment of St. Elizabeths Hospital was a landmark in the mid-nineteenth century reform movement to provide both protective and healing care for the mentally ill. Dorothea Dix persuaded Congress to establish a Government Hospital for the Insane in order to provide "the most humane and enlightened treatment..." St. Elizabeths has gained national and

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constructed on the Blagdon tract. Development continued on the Blagdon tract through the remainder of the century. In 1902 a group of twelve buildings were erected, four of which were on the eastern tract. Development between the World Wars and after World War II has been largely on the eastern tract.

At the turn of the century, the Hospital owned two other tracts of land which were operated as farms by the patients. The Stevens farm consisted of 60 acres and was a half mile south of Martin Luther King, Jr. Avenue. The Godding Croft farm of 350 acres was approximately five miles south and is now called the Oxon Run Children's Farm. These farms continued in use until the 1960s when they were relinquished by the Hospital and turned into public parks. The Hospital presently consists of 336 acres.

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2) Mission

The establishment of St. Elizabeths Hospital was a landmark in the mid 19th century reform movement to provide both protective and healing care for the mentally ill. At the time of its founding in the 1850s, the prevailing practice was to view mental illness as a permanent, and hopeless, condition. Those afflicted were not treated, but were only sequestered, and often in the most squalid condition. Dorothea Lynde Dix, a leader in this reform persuaded Congress to establish a Government Hospital for the Insane on "the Saint Elizabeths tract" in southeast Washington to provide "the most humane and enlightened curative treatment of the insane."

The choice of site, on a promontory where the Potomac and Anacostia Rivers meet, was central to the concept of protection and healing. A remote, rural location both removed from society those who were thought to be harmful and provided a bucolic and peaceful setting that was

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thought to promote recovery. The healing approach, because little was known about mental illness, consisted of "moral treatment" -- placing patients in congenial surroundings where they would learn by example from normal attendants.

At the time of the Civil War, the Hospital was pressed into service to receive soldiers wounded on the nearby battlefields. The Minie ball, used in the guns of that period, shattered the bones so completely that they could not be set, so limbs were often amputated on the battlefield. Many of these patients who survived were sent to "The Government Hospital for the Insane." A small factory for making artificial limbs was set up on the grounds, and when the amputees were ready for them the artificial limbs were fitted. These men, who were here for some time, refused to write home saying they were in a hospital for the insane; they simply wrote they were at "The Saint Elizabeths Hospital." The name was used so frequently that in 1916 Congress officially changed it to Saint

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Elizabeths Hospital, and for some unknown reason the apostrophe was left out.

Since 1855, when the first patients were admitted, St. Elizabeths has continued at that site to provide care and treatment for the mentally ill which has represented the best and most enlightened state of art. It has gained national and international renown for its training and research, as well as its treatment programs. While making full use of traditional methods of proven and continuing value, St. Elizabeths has pioneered in the development and/or use of new and more effective treatment modalities.

St. Elizabeths is the only Public Health Service Hospital in the Nation devoted entirely to mental health. It is charged with providing treatment, care and rehabilitative services for a variety of patient categories, the largest being the residents of the District of Columbia. Other major categories include beneficiaries of the Federal Government, U.S. nationals who become mentally ill while abroad,

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non-resident visitors to the District of Columbia, residents of the Virgin Islands and of the U.S. Soldiers Home, and those persons charged or convicted in criminal proceedings in the United States or D.C. courts who are deemed to required psychiatric diagnosis or treatment.

FACILITIES

Existing development of the St. Elizabeths Hospital site is largely located on a level upland plateau with elevations ranging from 150 to 170 feet above mean sea level. Service buildings on the western campus (the power plant complex) are located in a ravine at the base of the plateau, elevation 100-140 feet above mean sea level. Another ravine occurs on the eastern campus, running between Building 120 and 122. Both ravine areas, as well as the norther bluffs of the upland plateau, are characterized by moderate to steep slopes in excess of 2 to 1 in grade. Steep-sloped areas and ravines are largely wooded areas of mature trees.

The Hospital was developed over a period of five basic building phases which are discussed below (See Map #6). A

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description of individual buildings is contained in the continuation section. All existing buildings may be located by number on Map #7.

ORIGINAL COMPLEX

It was primarily the steep topography and the view toward the Capitol from the high ground which determined the site for the first buildings at the Hospital. The initial construction began in 1852 with the Center Building which was developed along the Kirkbride or Trenton modification of Gothic revival architecture. (See Map #1, 2, 3, and 4).

The West Lodge (1856) and East Lodge (1861), as well as Center Building, were designed by the same architect so that the style and character (though not size) were similar.

These two buildings were originally quarters for colored male and female insane, respectively, and were separate from the main building. They were symmetrically arranged with the Center Building forming a group. The Center Building was a self contained facility providing its own patient and staff accommodations, recreation facilities, food preparation facilities and heating plant. The only other

#1-8 →
L. B. BOVIC
4/26/79

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supporting structures existing were the stables and machinery/carpentry shop. The grounds were devoted to agriculture and were traversed by a serpentine network of roadways (some necessitated by steep contours). One roadway went to the foot of the property, terminating at a landing at the Anacostia River. Construction of the wall began during this period to protect the property and patients. Construction was basically with all native materials as evidenced by the fact that in 1861 the "brick kilns and lumber mills of eight years' standing have been removed from the front of the hospital edifice."

Late Nineteenth Century

During the nineteenth century, construction of patient facilities was limited to the Blagdon tract. Additional structures were built to house different types of patients (i.e., epileptics), but also to add support facilities such as separate kitchens, a bakery, a boiler house, carpentry and machine shops, a laundry and a (fire) engine house. A

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few secondary buildings were on the northeast portion of the site, both these were farm buildings, and did not interrelate with the rest of the Hospital on a day-to-day basis.

Interestingly, the Hospital developed a network of subterranean tunnels both within buildings and as pathways between buildings (e.g., Center Building to Old Howard Hall and to the General Kitchen; from the General Kitchen to the Detached Dining Hall). These tunnels provided for both pedestrian use and rail use. The concept of covered walkways between buildings became almost standard construction philosophy at the Hospital. This was exemplified by the Detached Service division (some of which may still be seen connecting the Allison group and Linden, Holly and Detached Nurses Home). In 1892 an appropriation was made for the introduction of electric lights. The superintendent had hoped to use electricity to provide for "extensive use of electric fans for cooling and ventilating

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apartments for the sick, the assembly room, kitchen and laundry." However, it was not until 1895 that the electric plant and electrical machinery was installed (buildings 56, 57).

In 1900 a complete sewer system was constructed. It was 24" diameter vitrified glazed tile pipe encased by 4"-6" of concrete. The sewer line discharged through a hole in the wall into the river.

Orchards, as well as cropland, once existed at St. Elizabeths. The interest in providing a peaceful, as well as productive setting, can still be seen in many of the trees. Massive white oak (*Quercus alba*), northern red oak (*Quercus borealis*), and american elm (*Ulmus americana*) can be seen, with up to 54" diameter trunks, and heights in excess of 80 feet. That these were actually planted is evident in the plantation-type grid plantings north of Willow (Building 8).

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Early Twentieth Century

Within 50 years, by the turn of the century, overcrowding was severe, with abandonment of many of the earlier buildings as patient care facilities when they became physically or functionally obsolete. In 1902, the most massive expansion in St. Elizabeths history began, resulting in an 82% increase in space over the previous decade. The entire southwestern portion of the site was developed. This development was the construction of the 12 "lettered" buildings which were uniformly designed in a late Victorian style with a slight Mediterranean influence. All but four of the lettered buildings were constructed on the western side of Martin Luther King, Jr. Avenue (then Nichols Avenue) (See Map #5).

Between the World Wars

Later, when additional space was needed, new buildings had to be located where there was space, which was not necessarily the optimal location for building functions. Construction consequently spread to the east side of Martin

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Luther King, Jr. Avenue (then Nichols Avenue). The 1930s saw the construction of several of the largest buildings at St. Elizabeths: Nichols, White and Eldridge. These three buildings, along with several of the earlier "lettered" buildings, formed a quadrangle of development. Also in the 1930s to the early 1940s, the last defined complex was developed at the Hospital. This was the C. T. (Continuous Treatment) group of nine buildings. It was during the 1940s that the Hospital population soared to between 7,000-8,000 patients. (The present patient population is less than 2,000).

Post World War II

The last identifiable building period at the Hospital was in the 1950s when several special purpose structures were built (geriatrics, Warehouse and Laundry, Chapel, and John Howard Pavilion for the criminally insane). It was also during this time that the largest building at St. Elizabeths was constructed: Dix Pavilion. These buildings have been

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constructed individually rather than as one or more complexes, and none of the individual buildings are of historical significance in terms of their architecture or events associated with them. These buildings, therefore, are viewed as intrusions within the Historic District.

} Post
WWII
blat

L. ...
4/24/79

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elevations ranging from 150 to 170 feet above mean sea level. Service buildings on the western campus (the power plant complex) are located in a ravine at the base of the plateau, elevation 100-140 feet above mean sea level. Another ravine occurs on the eastern campus, running between Building 120 and 122. Both ravine areas, as well as the northern bluffs of the upland plateau, are characterized by moderate to steep slopes in excess of 2 to 1 in grade. Steep-sloped areas and ravines are largely wooded areas of mature trees.

The Hospital was developed over a period of five basic building phases which are discussed below (See Map #6). A description of individual buildings is contained in the continuation section. All existing buildings may be located by number on Map #7.

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international renown for its training and research and has provided leadership in the development and/or use of new and more effective treatment modalities. Dr. I. W. Blackburn, a pioneer in the field of neuropathology, did much of his work at the Hospital following his appointment in 1884. Dr. G. W. Foster brought the new technique of hydrotherapy to St. Elizabeths from Europe before the turn of the century. Soon thereafter the first psychology laboratory in the century was established at the Hospital. Malaria was given therapeutically for patients suffering from general paresis for the first time in the Western Hemisphere by Dr. Watson W. Eldridge in 1922. In 1941, the Hospital became the first in the United States to adopt the psychodramatic techniques of Moreno.

2) COMPLEXES

The original complex now consisting of the Center Building and East Lodge, is an example of the Collegiate Gothic style of architecture. While a

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number of external features, such as embattled parapets and oriel windows, lend a richness to the facade, the buildings had no porches and were even prison-like in appearance. The immediate grounds, however, were developed as a park along lines similar to that developed in the United States by Frederick Law Olmstead. A wall of stone and brick served to enclose the western portion of the Hospital grounds running along the public road (subsequently Nichols Avenue; thence renamed Martin Luther King Jr., Avenue) southwesterly to the Anacostia River.

The original complex was extended during the latter part of the century to include service buildings and additional housing and treatment facilities for the patients. The latter were constructed in a Victorian style with the notable additions of open air facilities for the patients consisting of a multiplicity of porches and also by covered wooden walkways connecting

2nd copy
LEONARD
4/24/78

This bldg

Show to a less elaborate degree the same architectural style as Center bldg and are individually significant examples of individual architecture associated with Victorian period details.
see comment sheet
Leonard 4/27/78

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many of the buildings (as can still be seen, for example, between the Home Building and the Detached Dining Hall).

The third complex was authorized by Congress at the turn of the century. The twelve lettered buildings are twentieth century Mediterranean in style with Spanish tile roofs. Although four are scattered among winding driveways, the other eight are located in two lines of four each. The open air features have been continued with the inclusion of porches on almost every side of each building.

The fourth complex, or set of two complexes, completed the transition from the scattered location of buildings during the nineteenth century to the tightly formed precision university style of the twentieth century. White, Nichols and Eldridge together with two earlier buildings, enclose a quadrangle. Brick piazzas connect White with Nichols and Nichols with Eldridge. The

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three buildings are five and six stories in height as they face the quadrangle and present similar though by no means duplicative facades. The other complex of the thirties consists of seven buildings and is known as the Continuous Treatment Group. The single interior building is three stories, while the external buildings are two. They are connected by brick passageways and present an interesting appearance, although the layout is not as evident from ground level as it is from the air.

3) INDIVIDUAL BUILDINGS

A. Center Building: The original portions of Center Building are significant as an excellent rendition of American Gothic Revival architecture. It is also significant because it represents the transition period of mental health from one of confinement to one of treatment. Several of the technical aspects of Center Building are significant including the heating system,

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fire walls and floors mortared for fire protection.

The Superintendent's residence on the second floor with many of the original pieces of furniture is significant in its representation of mid-nineteenth century institutional life styles.

B. Firehouse: The Firehouse is significant in that it is a pure example of a small Victorian firehouse. The tower was used for drying the leather hoses as well as to contain a bell (and a clock). Other original equipment still remain.

C. Bakery: The Bakery, together with the General Kitchen (Creamery) contains a number of interior items of significance from a service standpoint, including the cart tracks and ovens. The trusse construction of the roof as well as the exterior brickwork, is also

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significant (this does not include the later addition on the southeast corner).

D. Dining Hall (33) - The significance of the dining hall rests with its interior design as well as its exterior brick and woodwork.

E. Ice House (52) - The Ice House is a significant example of field stone construction and is a somewhat unique example of an early refrigeration plant.

F. Library (40) - The library, originally constructed as a laboratory, is significant in its exterior brick work and design as well as several original features associated with its first use, such as the large clerestory glass window in the roof.

G. Relief (32) - This building is significant because it is representative of the several large patient buildings constructed during the latter part of the nineteenth century, and is the most attractive of the group. It is connected Atkins Allison and Home by long

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covered wooden porches.

H. Linden (28) and Holly (29) - This building is significant in both its exterior design and interior parts of its central core. While constructed as an office rather than patient building it is representative of the larger lettered building, although somewhat more ornate in design.

J. Burrows Cottage (18) - This building is significant as a representation of late Victorian residential architecture. Few changes have been made internally or externally.

K. Gatehouse No. 1 (21) - This is an excellent representation of an adopted use of a romantic Victorian Gothic Cottage design. There are a number of significant design features including cast iron decorations on the roof line.

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GEOGRAPHICAL DATA

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. 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 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. 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.

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.