A policy of kindness to patients, established a hundred years ago by the founders of the pioneer Federal mental hospital, survives the test of time and experience.

## St. Elizabeths Centennial

## **By WINFRED OVERHOLSER**

THE INSTITUTION known today as St. Elizabeths was established in Washington, D. C., 100 years ago, March 3, 1855, as the Government Hospital for the Insane. The change of names, a consequence of popular usage, is characteristic of a policy which has distinguished its practice since the great humanitarian, Dorothea Lynde Dix, penned the words which Congress approved in the basic legislation: "Its object shall be the most humane care and enlightened curative treatment of the insane of the Army and Navy of the United States, and of the District of Columbia."

The name St. Elizabeths was applied originally by early Maryland settlers to a tract of land which was occupied eventually by the hospital. When a part of the original building, now known as the center building, was used for surgical care of patients from the Union Army, it was called St. Elizabeths Hospital. Patients and staff eventually applied the gentle name to the entire institution. In 1868, Dr. Charles H. Nichols, the hospital's first superintendent, commented on the "happy circumstance that gave this establishment a designation of so much beauty and of such sacred association." In 1916, the Congress made the title official.

In the past 100 years, there have been many

Dr. Overholser is the superintendent of St. Elizabeths Hospital, Washington, D. C. advances in the care of the mental patient—technical, institutional, administrative, medical, legal, and social advances—with St. Elizabeths often in the forefront. The hospital has been the originator of many contributions to mental health. But its first contribution, the concept of kindliness, formulated by Dorothea Dix, remains outstanding.

The atmosphere of kindliness earned St. Elizabeths the title of "The Hospital with a Heart," from Sam Stavisky in an article published in Colliers magazine. The patients are given as much latitude as their condition warrants. They experience restraint only when they may injure themselves or others.

The administration of Howard Hall, the maximum security section of the hospital, reflects this policy in a place where it might seem least likely to succeed. The patients there, many of them under criminal charges, are considered to require close observation, yet they successfully conduct a limited form of selfgovernment.

Once a month, the Howard Hall patients participate in an "administrative meeting," conducted by officials other than those engaged in treatment. It offers patients an opportunity to air their opinions and discontent and to have their suggestions and complaints discussed by fellow patients.

These patients also publish their own journal, a mimeographed magazine, edited, illustrated, and duplicated entirely by and written almost exclusively for patients in that hall. Last December, the *Howard Hall Journal* reprinted from the American Mercury an article, "Medicine is Curing Me of Crime," written by its former editor. An example of a patient's contribution to the *Howard Hall Journal* is the brief statement on the following page, giving a patient's experience with, and reaction to, television programs.

Patients are encouraged to offer administrative suggestions and criticisms in their journal, and these suggestions are carefully reviewed by the superintendent for constructive guidance. This is true also of *The Elizabethan* published by and for patients in other branches of the hospital. Although the superintendent has found and used constructive suggestions in these publications, their pages are relatively free of critical comment.

Other contributions of St. Elizabeths have been reported elsewhere. St. Elizabeths pioneered the use of malaria fever for treatment of paresis, hydrotherapy, the use of a photographic department, pathologic museums as an adjunct of training, a psychological laboratory, forensic psychiatry, and the therapeutic value of the creative arts and crafts including the psychodrama. In 1942, St. Elizabeths was the first public mental hospital to use the psychodrama as developed by Moreno.

St. Elizabeths is today pursuing with high hopes the application of drugs which appear to bring about a therapeutic effect with their ability to quiet and relax the patients. On the other hand, it looks with great skepticism on such drastic therapies as shock treatment and lobotomy.

St. Elizabeths is distinguished, in another sense, by the fact that its chief administrator, the superintendent, has always been a professional psychiatrist. This practice conforms with the principles laid down by Dorothea Dix. The American Psychiatric Association has for years advocated that the administrative head of a mental hospital should be a psychiatrist. Superintendents of St. Elizabeths all have been honored with the presidency of the American Psychiatric Association.

The importance of having a professional psychiatrist at the head of any mental hospital is based on the principle that all details of administration are part of the psychiatric treatment. The situation is not comparable with that of a general hospital. Every item of finance is subject to consideration by a physician of the effect on medical care of the patients. Although 40 percent of the staff of 2,500 have no direct contact with the patients, all contribute to the patients' welfare and receive some instruction as to behavior whenever they come in touch incidentally with the patients.

St. Elizabeths is a complex of more than 50 principal buildings occupying 360 acres on a hill across the Anacostia River. The view from its parks and porches surveys the Capitol, the Washington Monument, and the memorials to Jefferson and Lincoln. Its facilities include a firehouse, a library, a beauty parlor, several cafeterias, a private railroad for carrying coal to the steam plant, an incinerator, a police and fire department, a laundry, 9 kitchens, and a 400-acre farm a few miles away at Oxon Hill, Md. The assessed value of this property is in the neighborhood of \$18,000,000, although it could not be duplicated for that sum. The new geriatric building alone represents an investment of \$3,500,000.

The hospital population is in the neighborhood of 7,500. The admissions are approximately 1,500 a year; discharges are about 1,000 a year. A majority of the discharged patients leave after a stay of no more than a few months, although one patient recently was discharged as cured after 26 years' residence. Roughly, a fourth of those admitted have been patients in a mental hospital on earlier occasions.

A hundred years ago the official view was that not more than 250 beds should be the capacity of any mental hospital. The original plans for St. Elizabeths called for about 90 beds. But with the growth of the population, St. Elizabeths has reflected the increasing number of patients eligible for admission to St. Elizabeths. As noted originally the hospital was intended to accommodate only personnel from the defense forces and, incidentally, residents of the District of Columbia. Today it is authorized to receive patients from more than 20 sources, including Indian reservations, veterans from the Soldiers' Home, and others in beneficial relation to the Federal Government.

Scientific advancement in the treatment of mental patients has helped to offset the rise in admissions. Effective treatment and prevention of paresis has reduced the number of patients suffering from that disease from about 6 percent of the admissions to almost zero. In common with other mental hospitals, St. Elizabeths has been receiving an increasing proportion of aged patients. Nearly 40 percent of the hospital's admissions today are persons above 60 years of age.

With the opening this summer of the new Dorothea Lynde Dix Pavilion, an admission and treatment building, there will be greater opportunity for improving diagnosis of patients upon admission. This will permit a greater degree of intense individual attention with the possibility that the patient may be cured and discharged that much more promptly.

In addition to the recognized psychiatric treatment, St. Elizabeths has long been known for its careful attention to the physiological basis of mental illness and for its generally comprehensive interest in patient health. It is the only public mental hospital in the United States which is approved for a rotating internship, in recognition of the high caliber of performance and equipment at its medical and surgical building. Interns at this hospital do their pediatric and obstetrical and laboratory work at other hospitals.

In appraising the accomplishments of St. Elizabeths, it is difficult to assign credit to any particular technique. Studies of the value of psychotherapy are always difficult to frame The response of the patient may result from a variety of factors. Although some techniques, such as drug therapy, appear to give a relatively clear-cut basis of evaluation, the complications of the individual personality frustrate most efforts at evaluation of treatment. Intensive attention to the individual is the key to improvement. This conviction dates back to the hospital's report for 1888 which regarded individual attention to the patient as more important than anything else.

No less important than the new diagnostic center, the Dix Pavilion, is the plan for revised and improved statistical methods of analyzing patients on a cohort basis. When this plan is applied, new facts will be ready to aid in the evaluation of mental hospital care. St. Elizabeths is confident that the facts will justify its traditional policy.

## The World on a String

A mental patient's views on television are here reprinted with minor editorial change from the journal written and published by residents of Howard Hall, St. Elizabeths Hospital. They illustrate the character of creative expression in the Howard Hall Journal, and they suggest also the opportunity for evaluating the influence of TV programs on mental health, both in and out of the hospital.

This is one of those rare cases where the mountain comes to Mohammed. Only in this instance it is we, the hospital shut-ins, that are unable to go to the mountain, and it really isn't a mountain at all, it's the outer world. To us shut-ins, the world is divided into two parts, our own little isolated inside world and the outer world of people free to pursue their ends. One of the major problems to a shut-in is not that he is a shut-in, but rather that the outer world is shut out. Perhaps most of us can understand and accept the fact that because of varying degrees of mental illness we are, out of necessity, shut-ins, but what many of us find so difficult to accept and understand is why so much of the outer world is shut out. Fortunately, we are not alone with our problems, for the administrative doctors of Howard Hall are well aware of our dilemma as evidenced by their unceasing efforts to bring to us as much of the outer world as is practically possible. Certainly they are aware of our psychological need for contact with the outer world. One of the steps taken by the administration has done more to alleviate this situation than all others combined.

They presented us patients with the world on a string. They have brought the outer world, in all its entirety, into our recreational day rooms!