

“Help the Patients to Help Themselves.”

Social Relations of the Kings Park Psychiatric Center, 1914-1965

by

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**Introduction: “You Can Just Feel Everybody Coming Together”**

1985 – nestled along the north shore of Long Island, N. Y. sits the hamlet of Kings Park. One of Kings Parks most distinguishing characteristics that has spanned throughout its history is its reputation for caring and providing for others: new arrivals to the United States, the poor, the destitute and orphans, the elderly, the sick and the mentally ill. Yet, perhaps no institution has impacted the history of Kings Park more than the Kings Park Psychiatric Center.

Founded in 1885 as an extension of the Kings County Lunatic Asylum located in Flatbush, Brooklyn, the hospital was intended to provide a more adequate environment for the mentally ill housed in the parent institution. This humanitarian foundation served as the catalyst for what would become the equivalent of a self-sustaining community. At the height of its operations, the Kings Park Psychiatric Center would consist of patient and employee housing, a training school for nurses, a modern medical-surgical building, workshops and laundry facility, an indoor and outdoor recreation center, a community store, its own fire department and security, a farm and piggery, butcher and bakeshop, cannery, storehouse, power plant, and railroad spur. The institution also operated a separate division for children and veterans. The Veterans Memorial Hospital at the Kings Park State Hospital was the first of its kind in the state of New York, and the United States as a whole. The highest recorded patient census exceeded 12,000 persons.

The impact made by the institution on the surrounding community is evident in the scale of preparations made for the 100-Day Celebration of the hospital’s centennial: employees and administrators participated in a parade down the main Boulevard that bisects the hospital grounds and a museum was set up showcasing photographs

chronicling the hospital's history. This includes snapshots of hospital personnel and patients alike. In addition, the hospital was to sponsor softball games, concerts and kite-flying, an old-fashioned country fair and ball commemorating the hospital's one-hundred years of service. Retired employees pitched in to help paint signs, local merchants offered various materials to the celebration, and students at Kings Park High School contributed the logo for the event. The involvement of hospital personnel and community members alike suggests that the influence of the hospital has transcended its institution boundaries, "You can just feel everybody coming together," comments Marie Clark, then editor of the Kings Park Psychiatric Center's newspaper, *The Reporter*.<sup>1</sup>

Local historians and residents have identified a corresponding relationship between the hospital and the surrounding community which has persisted since the institution's founding. Specifically, that the establishment of the asylum served as a catalyst for the growth and expansion of the region. The hospital served as an attractive employer for natives of both the Long Island and metropolitan area, as well as immigrants arriving through Ellis Island. The institution also drew residents of the outer boroughs of New York City eastward onto Long Island, allowing them to be closer to their peers or relatives who were undergoing treatment at the institution. A permanent residential population began to settle around the hospital. Subsequently, local infrastructure and commerce grew alongside the expanding population. Thus, a common history appears to be shared by both the hospital and the community.

This sentiment takes further shape in assessing the social interactions of the residents of both the institution and general population: that of the patients and the lay

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<sup>1</sup> Rebecca Morris "Centennial Summer in Kings Park: A Community Born in a Hospital." *Newsday*; May 23, 1985, <https://search.proquest.com/docview/1473633704?accountid=38976>.

public, “Nobody feared the patients because we grew up with them...I used to take them home with me for lunch. I never asked anybody. I just did it.” recalls Annette Varady, a nursing supervisor who began her time at Kings Park Psychiatric Center in the children’s unit.<sup>2</sup> Letita Smith, who immigrated from Scotland to the United States with her family in 1930, reminisces on an occasion where a patient “would lean out a window and call after her to make sure she was safe as she headed home from work.”<sup>3</sup> This interaction exemplifies the friendships which formed between patients and their caretakers.

This sense of fraternity too would extend itself beyond the hospital grounds to members of the lay public itself who, as noted by Varady, “grew up” with both the hospital and its residents. This suggest an understanding between members of the public and the mentally ill as it relates to the structural and spatial arrangement of both the community and the hospital. Residents of the town of Kings Park have affirmed their relatives or peers’ experience of sharing a meal or holiday celebration together, entertainments at the hospital’s amusement hall, or interacting with one another at a community function. Local memory and oral histories, then, paint a benevolent image of the bonds connecting the hospital in Kings Park, its patients and the community. As outlined in official histories, members of the community were equally as essential to the treatment and care of the patients as were the therapeutic functions the institution.

While an outside perspective may view the actions of Varady and others as peculiar, these local dynamics attest to the social bonds that connected the lay public with the mentally ill. Local memory has established that the proximity of the hospital to the community has allowed for this correlation to develop. We may therefore conclude that

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<sup>2</sup> Morris, “Centennial.”

<sup>3</sup> Morris, “Centennial.”

those who were not privy to these local interactions lacked the understanding residents of Kings Park and the surrounding vicinity possessed. Moreover, this unfamiliarity may be supplemented by more popular conceptions, and misconceptions, of mental health care, the experience of the mentally ill in an institutional based setting, and the response of the lay public. Here, the mentally ill are by and large relegated to the status of an “other” within the general population, resulting in their ostracization from the community and confinement in a mental hospital. Institutions are then portrayed as repressive environments intent on correcting and managing behaviors that deviate from that of the social norm and separating burdensome persons from their relative and peers. These conceptions have been informed by patient narratives and exposes, which offer the lay public a glimpse into the lived realities of the mentally ill: overcrowded wards attended by ignorant ward attendants and intensive treatment methods. Historians and revisionists alike have engaged with the underlying powers operating within and beyond mental health care services.<sup>4</sup> Together, these narratives paint a history of mental hospitals based on stigmatization: of the purpose and functions of an institution, and that of its resident charges.

The former state hospital at Kings Park did not stand apart from the lived realities which commonly befell large-scale institutions throughout the nineteenth- and twentieth centuries. Annual reports and local news sources attest to the lack of available accommodations and requests for funding in order to appropriately treat and provide for patients of the institution. In addition, cases of neglect and abuse dot news headlines,

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<sup>4</sup> Erving Goffman, *Asylums: Essays on the Social Situation of Mental Patients and Other Inmates*. (New York: Doubleday, 1961)., Michel Foucault, *Madness and Civilization: A History of Insanity in the Age of Reason*. (New York: Vintage Books, 1988).

drawing the attention of social reformers and activists who championed patient rights and those of persons with disabilities; all of which presented a foundation for public hostility towards mental hospitals. Discontent towards institutional-based care is most noticeable throughout the middle- and latter decades of the twentieth-century when bureaucrats at the state and federal level began to take a more active interest and role in reforming mental health care services. Coupled with newfound modes of treatment and care which de-emphasized the position and purpose of the mental hospital, state and federal legislation characteristic of the post-World War II years assisted in creating a nation-wide transition from institutional-based care to community-based services. As a result, the number of patients receiving and requiring hospitalization steadily began to decline. In response, mental hospitals throughout the country began to consolidate their services. Buildings and portions of the grounds no longer in use were either sold to local developers or razed. By the close of the twentieth century, dozens of mental hospitals across the United States ended their decades of service. In 1996, the Kings Park Psychiatric Center closed its doors, ending its one-hundred and eleven years of operation.

Given the interconnectivity which had persisted throughout the institution's history, the closing of the former state hospital at Kings Park signaled a subsequent closing of a chapter in the history of both the town of Kings Park and broader Suffolk County region. The public's response to the hospitals closing appears divided: there were those who found the institution to be more costly and less therapeutic compared to community-based alternatives; others saw the closing as a loss to both persons requiring treatment and care and members of the lay public who found employment at the institution, as well as a *sense* of community owing to the social functions the hospital had



provided. The movement of patients in the wake of the closing of Kings Park appears common against the backdrop of a period in the history of mental health care services in the United States known for deinstitutionalization: patients were transferred to nearby mental health care facilities, placed in assisted living or nursing homes, halfway houses or returned home to their families while continuing to receive treatment at a community-based out-patient treatment clinics. Whether or not the effects of the reorganization of mental health care services in the United States was a success, or failure, remains a widely debated topic today.

A similar sense of uncertainty continues to surround the physical remains of America's former mental hospitals. In 2000, the Nissequogue River State Park opened on the former hospital grounds. That the space continues to be of service to the community of Kings Park and beyond testifies to its long history in conjunction with the town from which it acquired its name. However, the extent to which this correlation will be allowed to persist is at present inconclusive; specifically, while the possibility of adaptive reuse and development is unknown, the historical connection enjoining the community of Kings Park to its former state hospital is contingent upon the space in which the institution occupies. Speaking within the context of the former Greystone Park State Hospital, photographer and author Phillip Buehler comments, "What happened there is important to remember, and buildings are the one thing that outlast our memories, they outlast us...When the buildings are gone, a lot of those memories go with them."<sup>5</sup> Buehler's sentiment is applicable to the current state of the former Kings Park Psychiatric Center. At present, only a handful of buildings remain on the old campus. Each

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<sup>5</sup> Allison Meier, "The Vanishing of America's Historic Mental Asylums." *Hyperallergic*, May 6 2015, <https://hyperallergic.com/202978/the-vanishing-of-americas-historic-mental-asylums/>.

distinctive structure continues to weather against the effects of time, the elements and acts of vandalism, leaving the windows shattered and walls coated with graffiti. Obscured beneath layers of decay and paint lays a thought provoking and complicated history of both a mental hospital and its' surrounding community. Indeed, as Buehler continues, "Once it's gone, who is going to walk by the soccer field or whatever replaces it and be able to conjure the past? That collective memory will be gone."

The bonds connecting the hospital, its patients and the community largely remains within local memory and have only briefly been discussed in selective texts concerning the history of the institution, as seen in the works of Leo Polaski and Jason Medina. Various entries to the *Light and Lively* series published by the Leo P. Ostebo Kings Park Heritage Museum offer individual accounts of how the institution functioned within a local context. Yet, what appears to be lacking within the discussion of the Kings Park Psychiatric Center is an exclusive analysis of the ways in which the local dynamics between the institution, the mentally ill, and the public functioned and adapted themselves throughout the history of the former state hospital. This contribution builds upon and digs beneath the precedents offered by Polaski, Medina, and others who have begun to establish the literature of the institution. Moreover, an examination of the social relations concerning public institutions and their surrounding community stands apart from broader generalizations concerning the purpose and function of mental health care services in the United States. This analysis likewise uncovers the experience of members of the surrounding community as it relates to the history of the institution. In the case of Kings Park Psychiatric Center, a common history appears to unfold between the public and institutional spheres. Owing to the then historical significance of the hospital within

the history of Kings Park and the broader Suffolk County region, it would erroneous not to devote space to explore and preserve these historic interactions within the contemporary present.

This paper concerns itself with the history of the Kings Park Psychiatric Center by exploring the social relations between the institution, its patients, and the surrounding communities of Kings Park and Suffolk County. I argue that the history of the hospital is that of a working relationship between the asylum and the community it served. While a survey of the institutions complete history is deserving of consideration, in order to offer a comprehensive overview of how these existing ties operated against the backdrop of the hospitals development, and subsequently that of the town of Kings Park, it would be most beneficial to explore these localized dynamics during the periods in which they began to take shape. This analysis, then, situates itself between the onset of the First World War in 1914 and concludes during the middle of the 1960's. Evidence suggests that noticeable developments took place within Kings Park – as both a state hospital and, and as a town nestled along the North Shore of Long Island, N. Y - during this period. This would lay the foundation for the subsequent beginnings of a corresponding relationship between the hospital and the community. In addition, the first half of the twentieth-century witnessed a significant reorganization of mental health care policy at the state and federal level that would affect the ways in which the lay public interacted with the institution and its patients, and vice versa. Specifically, the rise and fall of the institution and institutionalization would become a decisive actor in altering localized dynamics.

This interdependency is evident in consulting local and regional newspapers, as well as the narratives of lived experiences supplied by former employees, patients and

residents of the region. As observed in juxtaposing histories rooted in local memories alongside those concerned with the official history of the institution – annual reports, legislative history concerning mental health care at the local, state and federal level - the bond connecting each of the parties under consideration were not fixated, but rather susceptible to broader changes and external pressures within the wider, national context. Variables that would come to impact these local dynamics include (a) reorganization of public policy at the state and federal level; (2) economic considerations concerning the expansion and maintenance of psychiatric institutions and their patients within; (3) shifting trends within the fields of medicine and psychiatry which emphasized, and deemphasized the role of hospitalization in the care and treatment of the mentally ill. This reconfiguration would begin to paint mental hospitals as an outdated mode of treatment in favor of community-based services. Taken together, these active forces would subsequently reconstruct popular attitudes towards both the mental hospital and its patients.

This paper is divided into five chapters. Its organization is chronological, with the exception of chapter three which, while it does trace a change over time, assumes a more thematic character. Chapter one acknowledges the development of public welfare and treatment of the mentally ill in the United States, specifically in the state of New York, and the conditions which promulgated the founding of the Kings County Farm and Asylum in 1885. Chapter two engages with the development of the town of Kings Park beside that of the Long Island State Hospital at Kings Park up and to the beginning of World War I. Once under the jurisdiction of New York State (c. 1895), the reorganization and development of the state hospital began to overlap with that of the surrounding

community. This correlation would persist throughout the hospitals one hundred and eleven years of operation, and thereafter.

Chapter three explores the working relationships that connect the town of Kings Park to the now Kings Park State Hospital: the relationship between the hospital and its patients, the patients and members of the community, and finally the community and the hospital. This section draws extensively on local newspapers which circulated throughout Suffolk County between the onset of World War I and conclusion of World War II, 1914-1945. Supplemented by hospital reports and oral histories, local coverage serves as a window into local interactions and daily operations that are otherwise obscured from official records. News headlines and postings offer a portrayal as to how the hospital and its patient population were presented to the public. This, in turn, would cultivate and affect popular attitudes as they pertained to the institution and the institutionalized. These expressions of benevolence and stigmatization are evident throughout these historic newspapers, making these circulars a vital asset in discerning the history of the state hospital at Kings Park and its place in the public sphere.

Chapter four synthesizes the connections explored in the previous chapter against the changing trends emerging at the local, state, and federal level following the conclusion of the Second World War up to the mid-1960's. These shifts largely concern themselves with that of psychiatric care during the middle of the twentieth-century; specifically, the transition from state-sponsored institutional-based care back to community-based services. This chapter draws on the ways in which the connections between the institution, the mentally ill, and the public were reconfigured by state and

federal policies characteristic of the mid-twentieth century. This, as a result, suggests a disruption of the ways in which each party interacted with and depended on one another.

Chapter five serves as the conclusion to the narrative. It briefly concerns itself with the hospitals downsizing and eventual closure in 1996 and the effects of deinstitutionalization on the town of Kings Park and Suffolk County at large. In addition, this epilogue muses upon the future of the history of the former state hospital at Kings Park and the space in which it occupies in local memory official history, and the landscape of Suffolk County. Implicit in this final discussion are the broader implications that may unfold should the lived history of the Kings Park Psychiatric Center fail to carry over in popular consciousness and public space. Yet, the question remains: where do we go from here?

### **Chapter One: “A More Suitable and Healthy Location”**

The state of New York has historically provided for its dependent insane. The works of Gerald Grob, Albert Deutsch, David Rothman and others are especially illustrative concerning the development of a system of centralized care in the Empire State; acknowledging the transition from county-based provisions, such as poorhouses, workhouses and county asylums, to state-sponsored care.<sup>6</sup> Complementing the expansion of an institutional based system, professional and popular attitudes relating the treatment

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<sup>6</sup> Albert Deutsch, *The Mentally Ill in America: A History of Their Care and Treatment from Colonial Times*. (New York: Columbia University Press, 1949); David Rothman, *The Discovery of the Asylum: Social Order and Disorder in the New Republic*. (Boston: Little, Brown and Company, 1971); Gerald Grob, *The Mad Among Us: A History of the Care of America's Mentally Ill*. (New York: The Free Press. 1994). Also see, Henry M. Hund et al., *The Institutional Care of the Insane in the United States and Canada. Volume 3* (Baltimore: The John Hopkins University Press, 1916), <https://hdl.handle.net/2027/nyp.33433011465501>

and care of the mentally ill periodically revised themselves according to lay and professional writings.<sup>7</sup> New York was an active participant in the period of asylum building characteristic of the nineteenth century, the first of which being the Bloomingdale Insane Asylum in Manhattan, N. Y. in 1821, and later the Utica State Hospital in Utica, N. Y. in 1843. Utica was founded as the first state hospital in New York state.<sup>8</sup> In 1890, the State Care Act required local jurisdictions to send their insane poor to state hospitals. Only three counties were exempt from the provisions outlined in the State Care Act - Kings, Monroe and New York. These counties were required to maintain their own asylums for the mentally ill. In practice, there was little reprieve to be found for the mentally ill in county asylums.

So was the case of the Kings County Lunatic Asylum located in Flatbush, Brooklyn. Political corruption, overcrowding and a lack of funding lead to the deterioration of the asylum. Former superintendent, Dr. William E. Sylvester, claimed that by 1874 the patient census had become “so great...that it [was] necessary to utilize the day rooms and hall parlors for sleeping apartments.”<sup>9</sup> The acting superintendent at the

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<sup>7</sup> Mary Ann Jimenez, *Changing Faces of Madness: Early American Attitudes and Treatment of the Insane*. (Hanover: Brandeis University Press, 1987); Lynn Gamwell and Nancy Tomes, *Madness in America: Cultural and Medical Perceptions of Mental Illness Before 1914*. (New York: Cornell University Press, 1995)

<sup>8</sup> See Deutsch, Rothman, Grob.; Nancy Tomes, *The Art of Asylum Keeping: Thomas Story Kirkbride and the Origins of American Psychiatry* (Philadelphia: The University of Pennsylvania Press, 1994); Darby Penney and Peter Stastny, *The Lives They Left Behind: Suitcases from a State Hospital Attic*. (New York: Bellevue Literary Press, 2008).

<sup>9</sup> Michael A. McClain, “A Lesson Never to be Forgotten.” Undated. Courtesy of Michael A. McClain. Also see, “Farm Hospital Center: The Life of Kings Park Psychiatric Center.” Undated. Courtesy of the Leo P. Ostebo Kings Park Heritage Museum, Kings Park, N. Y. <http://kpheritagemuseum.net/>, Leo Polaski, *The Farm Colonies: Caring for New York City’s Mentally Ill in Long Island’s State Hospital*. (Kings Park: Kings Park Heritage Museum, 2003) 6.

time, his assistants, and nursing staff were described as incompetent and the institution “a reproach and disgrace to Kings County.”<sup>10</sup>

The patients housed at the Kings County Lunatic Asylum were most directly affected by the state of conditions and affairs. Their plight came to the attention of Dr. John Cargyll Shaw, superintendent of the Kings County Asylum, who proposed “a change in the method of caring for the insane and warmly advocated the removal of the asylum to a more suitable and healthy location.” Shaw maintained that this shift “would provide homelike surroundings, plenty of room, occupation, and more natural life.”<sup>11</sup> Shaw’s proposal aligned with the trend of constructing hospitals apart from urban centers in order to encourage the patients’ recovery. Shaw would turn his attention eastward towards Long Island, which would serve as the site of the future Kings Park Psychiatric Center.

Located approximately forty miles from Kings County sat the region identified as St. Johnland of the town of Smithtown, N. Y. During the eighteenth- and nineteenth centuries, Long Island remained predominately farmland with scattered settlements connected by roadways or the Long Island Rail Road (LIRR). The rural landscape appealed to the senses of Reverend William A. Muhlenberg, a Protestant clergyman who was instrumental in the founding of St. Luke’s Hospital in New York City. Having previously worked with the dependent poor in New York City, Muhlenberg intended to create a refuge for the worthy diligent poor. He purchased four hundred acres of land in what is known at present as the town of Kings Park and established the Society of St.

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<sup>10</sup> Grob, *The Mad Among Us*, 52.

<sup>11</sup> Michael A. McClain, “A Lesson Never to be Forgotten.” Courtesy of the author.



Johnland. The settlement which Muhlenberg purchased the land for his utopia would adopt the name of St. Johnland. The region would later become known as Kings Park.<sup>12</sup>

Long Island had historically provided for the needs of the mentally ill. Evidence indicates that the dependent insane of Queens County were treated no differently than their counterparts in Kings County. The mentally found themselves housed in the asylum at Mineola, N. Y, boarded out with families, or auctioned off to the highest bidder as laborers. This latter practice was said to have been common among rural communities during the nineteenth century.<sup>13</sup> The town of Smithtown had maintained its own poor since the mid-eighteenth century.<sup>14</sup> Given the charitable nature of the Society of St. Johnland, one would assume that the establishment of an institution to care for the insane would be perceived as an extension of public welfare begun by Reverend Muhlenberg in the region. Town records suggest otherwise.

In 1884, Kings County was authorized to purchase land within Smithtown for the purposes of caring for its insane poor. 873.8 acres of farmland was purchased from St. Johnland and was met with resistance by the town of Smithtown. Local officials claimed that the institution “would be extremely detrimental to interests of the town and county.”<sup>15</sup> Minutes from the Annual Town Meeting held on April 7, 1885 record that “the town officers are hereby requested to take all lawful means in their power, to exclude the so called Kings Co. farm from this town.”<sup>16</sup> At a special meeting held in July of that year,

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<sup>12</sup> For discussions pertaining to the change in the towns name see, Miles B. Borden, *History of Kings Park in Words and Pictures*. (Amityville: Kings Park Heritage Museum, 1997) 25-27.; Bradley Harris and King Pedlar, *St. Johnland: A Forgotten Utopia...* (Amityville: Kings Park Heritage Museum, 2008) 3.

<sup>13</sup> Polaski, *The Farm Colonies*, 6.

<sup>14</sup> Harry D. Sleight, *Town Records of Town of Smithtown, Long Island, N. Y. with other Documents of Historic Value. Transcribed from the Original in the Town Clerk's Office*. (Smithtown, 1929) 12-13.

<sup>15</sup> Sleight, *Town Records*, 48.

<sup>16</sup> Sleight, *Town Records*, 167.

it was resolved that \$500 would be raised “in addition to the other Taxes” to hire a lawyer to “defend at law this town from being invaded by the so called Kings County Farm.”<sup>17</sup>

The town of Smithtown went as far as visiting the Governor in Albany to plead their case. While the Governor was noted to “concur fully in the views of our [the towns] committee,” the town appears to have dropped the matter entirely by 1886.<sup>18</sup>

The land that would serve as the future site of the Kings Park Psychiatric Center was purchased on July 31, 1885. Three temporary cottages were built to receive the first transfers from the Kings County Lunatic Asylum. Designed as a more suitable alternative, thirty-two men and twenty-two women arrived later that year as the first patients of the St. Johnland Branch Asylum, otherwise known as the Kings County Farm and Asylum. In addition to the standard regime of care, occupational therapy would prove to be instrumental in facilitating the patient’s recovery. Productivity among patients would become essential to the success of Kings Park as an autonomous institution. Patients would assist in working the farmlands as part of their therapeutic programs and, at the same time, sustaining themselves by producing their own food and resources.

Dr. Shaw had intended for this extension of the Kings County Lunatic Asylum to house a maximum of 450 patients in sixteen cottages. As the population of the parent institution swelled, so too did that of the St. Johnland branch. Within two years, there were over 200 patients at the St. Johnland asylum. Overcrowding persisted. The institutions initial three cottages were described as primitive; patients fled and became a

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<sup>17</sup> Sleight, *Town Records*, 170.

<sup>18</sup> Sleight, *Town Records*, 177-178.

nuisance to the surrounding community. By the end of 1888, there were 698 patients housed at the branch asylum. An increase in accommodations did little to alleviate the persisting number of patients at both the Flatbush and now Kings Park asylums. The Kings Park branch was littered with political scandals and cases of fraud. Following an investigation of the conditions at Kings County by the state legislature at the prompting of Dr. Oliver M. Dewing in 1893, Kings County was forced to turn authority of the two asylums over to the state.<sup>19</sup> The Kings Park branch was purchased from Kings County for \$1. Along with the Flatbush Asylum, the two institutions would come under the title of the Long Island State Hospital until Kings Park was established as its own autonomous state facility in 1900. In 1905, The facility would be known as the Kings Park State Hospital for the next eighty-years.<sup>20</sup>

The twin sentiments of benevolence and stigmatization have been observed to be active forces in recounting the events culminating in the founding of the future Kings Park Psychiatric Center. Motivated by humanity and compassion, Dr. Shaw recognized the deplorable quality of life the patients of the Kings County Lunatic Asylum were subjected to and sought to relieve their plight by removing them to a “more suitable and healthy location.” Yet, as observed, residents of the town of Smithtown appeared to resent the coming of the mentally ill and the asylum.<sup>21</sup> The protests and action filed by

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<sup>19</sup> “The Kings County Insane: Report of the Board to Establish Asylum Districts.” *New York Times*, March 5, 1895, <https://search.proquest.com/docview/95297464?accountid=38976>., Hund et al., *The Institutional Care of the Insane in the United States and Canada*, 222.

<sup>20</sup> In 1974, the Kings Park State Hospital was renamed the Kings Park Psychiatric Center. Jason Medina, *Kings Park Psychiatric Center: A Journey Through History, Volume I*. (Bloomington: Xlibris. 2018) 58.

<sup>21</sup> It has been speculated that the Society of St. Johnland did not want the name of St. Johnland associated with Shaw's vision, an asylum for the dependent insane. This presumption insinuates an expression of popular sentiments towards the future asylum and its charges. Borden, *History of Kings Park in Words and Pictures*, 25-27., Harris and Pedlar, *St. Johnland*, 3.

the town of Smithtown supports the presumption that a rift had already begun to form between the hospital and the community. In order to assess what conditions enabled the easing of these local tensions and development of a working relationship between the hospital and the community, it is necessary to consider the development of the institution beside that of the community. Doing so illuminates the areas of daily life in which the operations of the hospital and the community began to overlap with one another, thus establishing a mutually beneficial relationship that, in turn, would benefit that of the mentally ill.

## **Chapter 2: “A Thorough Understanding”**

Before the Kings County Farm and Asylum, the region known presently as Kings Park was relatively undeveloped, consisting of large, open fields and a small number of family farms. The settlement was predominately reliant on local waterways – the Sunken Meadow Creek, Stony Brook Harbor and the Nissequogue River – all of which connected the hamlet to the Long Island Sound, and thus, the outside world.<sup>22</sup> The arrival of the Society of St. Johnland in 1865 and the railroad station in 1872 had a diverse range of impacts on the isolated community. The Society offered employment opportunities, which would draw interested persons eastward on Long Island. The ease of access of the region was aided by the extension of the rail line past its point of termination in Northport to Port Jefferson. Regularly scheduled service would begin on January 13, 1873.<sup>23</sup>

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<sup>22</sup> Borden, *History of Kings Park in Words and Pictures* 17.

<sup>23</sup> Local historians have claimed that no other event would shape the history of Kings Park than the coming of the railroad. This claim bears considerable weight and stands against the conception that the hospital

The railroad ushered in a new era for the region identified as St. Johnland. The railroad enabled town residents to participate in economic, social and recreational opportunities offered by the metropolitan region. As a result, the towns reliance on local waterways began to wane. In addition, the LIRR provided access to the once isolated settlement. A permanent residential population grew; a business district, known as "The Flats" was built up around the train station, and a number of hotels opened to lodge visitors. Freight wagons and horse drawn carriages offered direct transportation to and from the rail station. Furthermore, the region became a popular destination for those seeking refuge offered by the town's shorelines and hotels in lieu of urban life. A description of St. Johnland published by the LIRR in 1882 portrays the region as "covered with excellent farms, and while it is a quiet rural district, it offers great attraction to a large class of city people who are seeking such retreats."<sup>24</sup> Taken together, the impact of the railroad helped to encourage and sustain local commerce.<sup>25</sup>

The region served as an institutional and recreational refuge. It is then comprehensible as to why the region would attract the attention of Dr. John Cargyll Shaw. The benefits offered by the serene location near the Long Island Sound appears to have met his criteria for "more homelike surroundings" with "plenty of room" to enable "a more natural life." Despite the best intentions of Shaw and others affiliated with the parent institution, the Kings County Farm and Asylum began to mirror the conditions of the Flatbush asylum. The patient population continued to outpace available

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alone was responsible for the growth of the region. See, Borden, *History of Kings Park in Words and Pictures*, 17, 19-20.

<sup>24</sup> Borden, *History of Kings Park in Words and Pictures*, 31.

<sup>25</sup> Borden, *History of Kings Park in Words and Pictures*, 19-21.

accommodations and political corruption and scandal threatened the longevity of the asylum.

The Long Island State Hospital at Kings Park expanded its physical plant and accommodations following its transfer from Kings County.<sup>26</sup> Yet, the hospital continued to be well past capacity. Requests for relief of overcrowding are reoccurring throughout the hospital's annual reports. Owing to the hospital's reorganization under New York State, patients were now able to be admitted directly to Kings Park. Previously, patients were to be admitted to the Flatbush asylum and transferred to Kings Park as soon as possible. This was due to "the greater amount of room, better air and environment generally" which "is undoubtedly more conducive to their speedy recovery."<sup>27</sup> Further, the asylum regularly received large number of transfers from other state hospitals. Finally, to even the distribution of patients admitted to the Long Island State Hospital, it was arranged that Kings Park was to receive one hundred consecutive admissions; following, Flatbush would receive fifty.<sup>28</sup> This suggest an increasing emphasis on Kings Park as it relates to care of the mentally ill at the local and state level.<sup>29</sup>

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<sup>26</sup> Jason Medina, *Kings Park Psychiatric Center: A Journey Through History. Volume II.* (Bloomington: Xlibris, 2018) 14-19, 102-104, 409-418., Polaski, *The Farm Colonies*, 11., Hund et al., *The Institutional Care of the Insane in the United States and Canada*, 223.

<sup>27</sup> *Second Annual Report of the Long Island State Hospital to the State Commission in Lunacy for the Year 1897.* (Albany: Wynkoop Hallenbeck Crawford Co., 1898)  
<https://hdl.handle.net/2027/nyp.33433010758229?urlappend=%3Bseq=69>. 9.

<sup>28</sup> *Fifth Annual Report of the Long Island State Hospital to the State Commission in Lunacy for the Year 1900.* (J. B. Lyon, State Printer, 1901)  
<https://hdl.handle.net/2027/nyp.33433010758229?urlappend=%3Bseq=317>. 12., *Sixth Annual Report of the Long Island State Hospital to the State Commission in Lunacy for the Year 1901.* (Albany: J. B. Lyon Company, State Printers, 1902)  
<https://hdl.handle.net/2027/nyp.33433010758229?urlappend=%3Bseq=399>. 53.

<sup>29</sup> See, *The Suffolk County News*, January 15, 1897,  
<http://nyshistoricnewspapers.org/lccn/sn84031477/1897-01-15/ed-1/seq-1/>.

Aggravating the symptoms of a rapidly increasing patient population was a shortage in nurses and attendants. According to superintendent Dr. Oliver M. Dewing, this was due to, “an insufficient appropriation of the Legislature,” which resulted in the reduction of employees at both Flatbush and Kings Park. Dewing emphasizes that Kings Park “is suffering from a shortage of attendants and is unable with the force of mechanics now allowed to keep the buildings and equipment in a state of satisfactory repairs.” This shortage was given shape concerning a fatal accident which occurred on November 11, 1899: a patient died from injuries sustained while attempting to be controlled by attendants, whom he made “a violent attack” against. Dewing claims “The inadequacy of the specific appropriation for employees had prevented earliest action on part of the hospital.”<sup>30</sup> The superintendent recommended, “a more generous allowance for ward attendants and mechanical repairs.”<sup>31</sup> An increase in wages would encourage a long-term commitment of employees to the profession. A similar assessment can be made in providing for the social needs and material comforts of the employees, which would increase morale among the hospital workers.<sup>32</sup>

Dewing, however, remained optimistic. The superintendent engaged in a recruiting campaign by placing advertisements in newspapers throughout upper and western New York, Vermont and Maine. Work at the state hospital appealed to immigrants arriving through Ellis Island. Local historians reference the number of Irish men and women who crossed the Atlantic Ocean to begin a new life in America and

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<sup>30</sup> *Fifth Annual Report of the Long Island State Hospital*, 9.

<sup>31</sup> *Fourth Annual Report of the Long Island State Hospital to the State Commission in Lunacy for the Year Ending September 30, 1899*. (Albany: James B. Lyon, State Printers, 1900) <https://hdl.handle.net/2027/nyp.33433010758229?urlappend=%3Bseq=24553>. 29

<sup>32</sup> See, *Second Annual Report of the Long Island State Hospital*, 27, 46-47., *Sixth Annual Report of the Long Island State Hospital*, 52.

settled in Kings Park; enough that the town would begin to develop a distinctive Irish character and identity. Dewing states that the results had been favorable. In addition, the superintendent reports that attending to the social needs and material comforts of the employees has resulted in an increase in standard among personnel, which “are repaid tenfold in the improved care of our patients.”<sup>33</sup> Now under the jurisdiction of New York State, the administration and organization of the Long Island State Hospital at Kings Park appears to have begun to improve. This is evident as per coverage of savings per patient incurred under the direction of superintendent of Dr. Oliver M. Dewing. Following a tour of the Long Island State Hospitals, the State Commission in Lunacy stated, “The standard of maintenance has not been lowered,” and that, “the patients are better provided for than last year.”<sup>34</sup> *The Long Islander* reports a “great increase in the recoveries of the insane” over the course of the last year, which “is highly gratifying to ever lover of his kind and a valuable testimony to the wide awake and efficient management of the hospital.”<sup>35</sup> *The Long Islander* attributes the efficiency of the state hospital not only to the reorganization under New York State, but the medical personnel and staff maintaining its daily functions.

In publicizing the improved quality of care and life of the institution, local news sources may, inadvertently, assist in strengthening the community’s relationship and good will towards the asylum. Moreover, acknowledging the rate of recovery may refute the conception that the facility was exclusively custodial in character. News postings are

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<sup>33</sup> *Sixth Annual Report of the Long Island State Hospital*, 11.

<sup>34</sup> “Report of the Long Island Hospital.” *The Suffolk County News*, November 18, 1898, <http://nyshistoricnewspapers.org/lccn/sn84031477/1898-11-18/ed-1/seq-1/>.

<sup>35</sup> “Improved Care of the Insane.” *The Long Islander*, October 14, 1899, <http://nyshistoricnewspapers.org/lccn/sn83031119/1899-10-14/ed-1/seq-5/>.



especially illustrative in individualizing the experience of the mentally ill at Kings Park State Hospital: their admissions, daily life, discharge, and life thereafter.<sup>36</sup> Press coverage additionally allowed the community to develop an understanding as to the nature of insanity, its symptoms, and behaviors. Notices of escapes and obituaries likewise appeared in local news columns. As a result, the community is connected to the hospital's daily operations, as well as the social life of its patients. Local news sources also documented the movement of the hospital's employees. In a relatively small and developing town, it is possible that these postings pertaining to the hospital's employees professional and social lives helped to validate the lay public's faith in the institution's capabilities. Namely, the character of the persons who would be charged to care for their ill peers and relatives.

Amid the reorganization and expansion of the Kings Park State Hospital, the town of Kings Park itself was developing itself. By 1892, it was reported that the community supported two hotels, three general stores, two physicians, two insurance agencies, a livery service, a barber and a horse shoer. There were at least twenty-one family farms, many of which offered lodgings for summer visitors. By 1897, the community now supported four hotels and ten boarding houses.<sup>37</sup> This suggests that not all who came to settle in Kings Park derived their livelihood directly from the hospital.

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<sup>36</sup> See, *The Suffolk County News*, May 26, 1899, <http://nyshistoricnewspapers.org/lccn/sn84031477/1899-05-26/ed-1/seq-1/>, *The Port Jefferson Echo*, June 22, 1907, <http://nyshistoricnewspapers.org/lccn/sn88075686/1907-06-22/ed-1/seq-1/>, *The Port Jefferson Echo*, March 22, 1902, <http://nyshistoricnewspapers.org/lccn/sn88075686/1902-03-22/ed-1/seq-4/>, *The Long Islander*, November 1, 1907, <http://nyshistoricnewspapers.org/lccn/sn83031119/1907-11-01/ed-1/seq-4/>.

<sup>37</sup> Borden, *History of Kings Park in Words and Pictures*, 31-32.

While the growth and development of the town of Kings Park and the state hospital occurred irrespective of one another, the two entities were, however, directly connected by way of local infrastructure. Of note was the permeable boundary that existed between the two parties. The Kings Park State Hospital was constructed on land located near and on public roadways. and the hospitals main driveway served as a convenient route to and from the railroad station. Further, the state had constructed a public school on land that belonged to the state hospital. The presence of a school would facilitate additional traffic and attention to the institution. Dewing's successor, Dr. William A. Macy, who entered office in 1904, acknowledges the benefits that may be derived from this publicity and stated that "the hospital is always ready to welcome proper visitors to its buildings and grounds at proper times." In lieu of these benefits, Macy expressed that this arrangement may become a matter of concern in the coming years, namely the lack of a defining boundary between the community and the hospital deprived the institution of its privacy. Even a minute infraction "would disturb the quiet running of such a large organization." Outsiders were accused of acts ranging from trespassing, to "vulgar curiosity and the interference of the rights and privileges of the patients to acts of theft or breaches of the peace."<sup>38</sup>

The relationship between the hospital and the community, then, was not stagnant. Rather, the threads connecting the institution to the public were subjected to periodic tensions characteristic of two distinctive populations cohabitating within and alongside

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<sup>38</sup> *Seventeenth Annual Report of the Kings Park State Hospital to the State Hospital Commission for the Year Ending September 30, 1912.* (Albany: J. B. Lyon Company, 1913) <https://hdl.handle.net/2027/nyp.33433010758773?urlappend=%3Bseq=187>. 28. Macy also expressed his concern regarding the school on the hospital grounds. See, *Tenth Annual Report of the Kings Park State Hospital to the State Commission in Lunacy for the Year September 30, 1905.* (Albany: Brandow Printing Company, 1906) <https://hdl.handle.net/2027/nyp.33433010758765?urlappend=%3Bseq=7>. 12-13.

one another. Perhaps to ease the tension between the public and the institution, in 1912, the superintendent invited members of the Long Island Press Association to tour and inspect the Kings Park State Hospital. A number of local news sources attended and covered the event, including nineteen members of the Press Association. The editors were offered a luncheon, a walkthrough of the facility, and a clinic on various cases of insanity. At the time of their visit, there were 3,827 patients at the hospital.

In their coverage of the visit, the press made specific mention of Macy's desire to educate the public, "to the point of a thorough understanding of what was being done towards the care and cure of insanity in State institutions." Macy affirms the necessity of hospitalization as the means of treating insanity and refutes the conception "that patients are treated brutally, and the methods are rough and harsh," though he does concede that, "we have not gone ahead as fast as we might have." Macy encourages the people to place their trust in the hospitals capabilities in treating and curing their peers and relatives. *The Port Jefferson Echo* concludes in stating that Macy intended to maintain his publicity campaign and thanked the editors for what they had done in furthering the movement.<sup>39</sup>

The actions of Dr. Macy are indicative of his efforts to cultivate a positive image and understanding of the hospital and its mission. Macy would continue to encourage public participation in the daily operations of the hospital, and by virtue, the daily life of its patients. Doing so exemplifies the synthesizes of a threefold, corresponding

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<sup>39</sup> "Editors at Port Jefferson." *The County Review*, August 16, 1912, <http://nyshistoricnewspapers.org/lccn/sn84035791/1912-08-16/ed-1/seq-5/>, "Editors Meet at Kings Park." *The Long Islander*, September 13, 1912, <http://nyshistoricnewspapers.org/lccn/sn83031119/1912-09-13/ed-1/seq-5/>, "Editors Entertained: Scribes of Long Island Had Interesting Visit to Kings Park on Monday." *The Suffolk County News*, September 13, 1912, <http://nyshistoricnewspapers.org/lccn/sn84031477/1912-09-13/ed-1/seq-1/>, "Editors Visit Kings Park Hospital." *The Port Jefferson Echo*, September 14, 1912, <http://nyshistoricnewspapers.org/lccn/sn88075686/1912-09-14/ed-1/seq-1/>.

relationship between the Kings Park State Hospital, its patients, and the town of Kings Park, a matter that is deserving of individual consideration and analysis.

### **Chapter 3: “Help the Patients to Help Themselves.”**

According to Leo Polaski, "the word "commitment" is the key to understanding the saga of the Kings Park Psychiatric Center."<sup>40</sup> In order to understand the nature of this commitment, the following chapter is dedicated to analyzing the working relationships between the state hospital, its patients, and the community is deserving of examination. This chapter is divided into three sections, each of which concerns itself with one of these localized dynamics. Section one examines the relationship between the Kings Park State Hospital and its' patient population. Specifically, the administrative and therapeutic functions of the institution, thereby illuminating the social life of its patients. The structural arrangement and contemporary modes of treatment and care of mental illness served as the foundation for members of the surrounding community to develop a connection to the hospital's patients, a correlation which embodies section two. It acknowledges the way in which the permeable boundary of the hospital allowed for direct, and indirect, interactions to take place between the mentally ill and the public. This interconnectivity between the community of Kings Park and the broader Suffolk County Region and the mentally ill would, by virtue, extend itself onto the hospital itself, which serves as the focus for section three. This final section acknowledges the social

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<sup>40</sup> Leo Polaski, *The City That Was Kings Park, 1885-1996*, November 15, 1996. Courtesy of the Leo P. Ostebo Kings Park Heritage Museum, Kings Park, N. Y. <http://kpheritagemuseum.net>.

and economic benefits afforded by the institution to the community, and vice versa.

Section three additionally addresses local tensions concerning the expansion and maintenance of the state hospital. The fiscal responsibility of the community to the state hospital would prove to be a point of contention that embodied the potential to disrupt the bonds which connected the hospital, its' patients, and the community.

#### Part I: The Hospital and the Patients.

The admissions process of Kings Park State Hospital varied over its 111 years of operation. There are, however, common features and trends which spanned throughout its history. Persons could enter the hospital by way of voluntary admissions, transfer from another institution, or as an emergency admission, should the individual be perceived as an immediate danger to themselves or others. Alternatively, patients could be committed as per the result of a criminal indictment, or by way of an order issued by a judge, otherwise known as involuntary commitment. An accompanying certificate of lunacy issued by two qualified and reputable medical examiners was required for an individual to be admitted to the institution. Patients were able to contest their commitment through a writ of habeas corpus, a legal action whereby the individual argued for their release, claiming they had been wrongfully detained.<sup>41</sup>

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<sup>41</sup> For examples of publicized cases of habeas corpus, see the case of Edward J. Reilly, "Reilly Battles for His Release from Asylum." *The County Review*, January 27, 1938, <http://nyshistoricnewspapers.org/lccn/sn84035791/1938-01-27/ed-1/seq-1/>, "Women on List of Jurors for Reilly Action." *The County Review*, February 3, 1938, <http://nyshistoricnewspapers.org/lccn/sn84035791/1938-02-03/ed-1/seq-1/>, "Reilly Will Have Jury Trial Monday in Riverhead County." *The Long Islander*, February 4, 1938, <http://nyshistoricnewspapers.org/lccn/sn83031119/1938-02-04/ed-1/seq-12/>, "Leibowitz Role Challenged as Reilly Trial Goes Over." *The Long Islander*, February 17, 1938, <http://nyshistoricnewspapers.org/lccn/sn84035791/1938-02-17/ed-1/seq-1/>, "Upstate Judge to Hold Court." *The County Review*, March 17, 1938, <http://nyshistoricnewspapers.org/lccn/sn84035791/1938-03-17/ed-1/seq-5/>.

Patients were placed on temporary wards in the hospitals reception or admissions building for the duration of several weeks. During that time, a period of observation followed in order to allow the hospital personnel to gain a better understanding of the patient's present condition and establish a working case history. This would allow attending personnel to arrive at an official, and accurate, diagnosis and formulate an appropriate course of treatment. New admissions also received a complete physical and mental examination. The extent of these examinations indicates a persisting faith in the correlation between physical health and mental well-being. Following the period of observation, patients could be released on parole or discharged entirely, transferred to another institution or were to remain at Kings Park for further treatment. After being assigned to a permanent ward, patients were placed on a carefully fixed regimen designed to replicate a home environment and encourage their recovery. In the case of the chronic class, this structured routine was to prevent incurable cases from becoming idle and experiencing further mental deterioration. A patient's daily schedule and course of treatment was arranged by hospital administrators, medical personnel and therapists according to the patient's official diagnoses and physical capabilities.

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"Reilly Found Sane by Jury; Will Resume Law Practice." *The County Review*, March 24, 1938, <http://nyshistoricnewspapers.org/lccn/sn84035791/1938-03-24/ed-1/seq-1/>. Also see the case of Phoebe and Ada Brush: *Seventeenth Annual Report*, 14., "Escaped from Kings Park." *The County Review*, May 21, 1915, <http://nyshistoricnewspapers.org/lccn/sn84035791/1915-05-21/ed-1/seq-1/>, "Brush Sisters Captured: Escaped from Kings Park, but Taken at Port Jefferson Two Days Later." *The Long Islander*, May 21, 1915, <http://nyshistoricnewspapers.org/lccn/sn83031119/1915-05-21/ed-1/seq-5/>. "Huntington Will Pay it's Doctors for Brush Suits." *The County Review*, February 18, 1926, <http://nyshistoricnewspapers.org/lccn/sn84035791/1926-02-18/ed-1/seq-6/>, "The Brush Sisters Lose Their Suit." *The Long Islander*, February 18, 1927, <http://nyshistoricnewspapers.org/lccn/sn83031119/1927-02-11/ed-1/seq-13/>. Evidence suggests that it was possible for a patient's relative or guardian to appeal for their release. See, *The Suffolk County News*, August 22, 1902, <http://nyshistoricnewspapers.org/lccn/sn84031477/1902-08-22/ed-1/seq-1/>.

While Kings Park State Hospital continued to employ the most current treatments and therapies to facilitate the recovery of their charges - including symptomatic and somatic treatments, psychotherapies, hydrotherapy, and later, more intensive treatments such as shock therapies - perhaps the most active rehabilitation service at Kings Park State Hospital was its' occupational and recreational therapies. Patients were encouraged to participate in some form of work, learn and apply a skill, or engage in a recreational activity to the best of their individual ability. Work therapies would combat against idleness and encourage the productivity of patients who would otherwise languish in their dormitories or dayrooms. Occupational and work therapies would ultimately encourage healthy habits and a routine akin to the home environment. Further, the tasks performed by patients would aid in maintaining the hospital itself, as well as serve as a mode of therapeutic treatment. Patients were also permitted to work alongside of hospital employees in select maintenance services. Patients were offered compensation for their work through credit at the hospital's community store, additional snacks throughout the day, coffee, or cigarettes. It is estimated that upwards to 70% of the hospital's patients were involved in some form of occupational or physical therapy.<sup>42</sup>

Those who expressed a specific interest in recreational activities were encouraged to exercise their skills. Patients participated in various forms of art and music, sports and other forms of physical exercise. Dances, concerts, socials, and field days were held regularly. A dramatic club was formed in 1920. Productions were held periodically and

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<sup>42</sup> For information pertaining to patient occupations, occupation and work therapies, see Polaski, *The Farm Colonies*, 76-118., Medina, *Kings Park Psychiatric Center, Volume I*, 321-335.

were performed in front of “crowded houses” of attendees.<sup>43</sup> In addition, a school was maintained on the property for children and adolescent patients, which provided them with an education and instruction on proper social skills and behaviors that would assist them upon their release back into the community.

It was not the intention of the hospital to utilize patient’s as a form of free labor, but rather to provide an alternative to idleness on the wards which would build individual confidence through meaningful work that offered a sense of personal satisfaction. Any work is preferable to idleness, “but just as no doctor would continue a dose of digitalis over a period of many months or years so none should permit a continuous dose of raveling burlaps, sewing rags, etc.” If a patient’s personal condition has not improved, another form of meaningful work or activity should be substituted. It was the intention of state hospitals to individualize the experience and care of each patient, “Work handed out “en masse” without any attempt to awaken the individual patient’s interest and developing sustained effort is not occupational therapy.”<sup>44</sup> Should a patient be forced to perform a task or work which they expressed little satisfaction in doing, it would impede rather than encourage their personal progress.

The integrity behind occupational therapy was publicized by way of exhibits and sales of the products of patient's occupational and work therapies. Sales and exhibits were commonly held directly on the hospital grounds, to which the community was invited to

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<sup>43</sup> For news coverage of the Patient’s Dramatic Club, see *The Long Islander*, October 20, 1922, <http://nyshistoricnewspapers.org/lccn/sn83031119/1922-10-20/ed-1/seq-6/>, “Made a Hit.” *The Long Islander*, January 19, 1923, <http://nyshistoricnewspapers.org/lccn/sn83031119/1923-01-19/ed-1/seq-6/>.

<sup>44</sup> *State of New York Fortieth Annual Report of the Department of Mental Hygiene, July 1, 1927 to June 30, 1928*. (Albany: J. B. Lyon Company, Printers, 1929) <https://hdl.handle.net/2027/chi.77571376?urlappend=%3Bseq=537>. 115.



attend through advertisements in local newspapers.<sup>45</sup> Press coverage notes that, “the public has become more and more acquainted with the value of this form of treatment.”<sup>46</sup> This implies that the public began to develop an interest and appreciation of occupational and work therapies; thereby strengthening their understanding of the operations of the state hospital. The products made and sold stand as a testament to the effectiveness of the hospital’s regimen. Proceeds would be redirected into occupational and recreational funds, which would allow patients to continue their work and therapies. In addition, the purchasing of a product made by a patient would offer a sense of accomplishment to the creator and encourage their continued hard work. The purchasing of a product made by a patient at Kings Park State Hospital would, therefore, “help the patients to help themselves.”<sup>47</sup>

The regiment experienced by patients at Kings Park State Hospital appears albeit common when placed against the broader context of mental health care during the early- to mid-twentieth century. Specifically, the subversion of an individual or communal identity for that of an identity dictated by the institutional setting. It was not uncommon for patients to resist their present status, thereby placing them at odds with the intentions of the medical staff and personnel. In such instances, employees attempted to engage

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<sup>45</sup> The sale and exhibit of patient products were also held at communal events, such as the Suffolk County State Fair. See, “County Fair Next Week.” *The Watchman of the Sunrise Trail*, September 6, 1934, <http://nyshistoricnewspapers.org/lccn/sn96083587/1934-09-06/ed-1/seq-3/>.

<sup>46</sup> “Christmas Sale to be Held at Kings Park.” *The County Review*, November 28, 1924, <http://nyshistoricnewspapers.org/lccn/sn84035791/1924-11-28/ed-1/seq-22/>. Also see, *The Long Islander*, July 8, 1927, <http://nyshistoricnewspapers.org/lccn/sn83031119/1927-07-08/ed-1/seq-11/>.

<sup>47</sup> “Sale of Handiwork at Kings Park Hospital Next Week.” *The County Review*, November 25, 1926, <http://nyshistoricnewspapers.org/lccn/sn84035791/1926-11-25/ed-1/seq-8/>. Also see, “Where to Buy Christmas Gifts.” *The Long Islander*, July 8, 1927, <http://nyshistoricnewspapers.org/lccn/sn83031119/1926-11-26/ed-1/seq-13/>.

with the patient in the least restrictive manner possible, only employing methods of restraint and seclusion “in rare instances,” to protect the patient and those around them.

While this feature is evident in the operation of Kings Park State Hospital, it is worthwhile to note that it appears patients could retain a certain connection to their lives prior to entering the institution. Dr. Dewing notes that upon arrival, patients were informed as to where they were, that their families had been notified, and that they may write to them should they desire to do so.<sup>48</sup> This decision may be interpreted as a way hospital personnel attempted to soothe restless patients and a motion to begin building a positive relationship with the patient. This sentiment suggests that the goodwill and understanding expressed by those most directly involved in the daily lives of the mentally ill – physicians, nurses, and ward attendants – was an integral part of both a patient’s experience at Kings Park, and the hospital’s daily operations. The attitudes of direct care personnel, then, was just as essential to a patient’s recovery as was medical and psychiatric therapies.

The most integral care giving roles at Kings Park State Hospital were those of the nurses and ward attendants. In 1897, the Nursing School at Kings Park State Hospital was established and a separate training course for ward attendants was initiated in 1913. All new hires were required to begin the training session immediately upon entering the hospitals service.<sup>49</sup> Nurses and ward attendants had the most direct interaction with the

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<sup>48</sup> *Sixth Annual Report of the Long Island State Hospital*, 61.

<sup>49</sup> For information on the School of Nursing, see, *Second Annual Report*, 41., Polaski, *The Farm Colonies*, 124-128., Medina, *Kings Park Psychiatric Center, Volume I*, 246-262. For information pertaining to the training course for ward attendants, see, *Eighteenth Annual Report of the Kings Park State Hospital at Kings Park to the State Hospital Commission for the Fiscal Year Ending September 30, 1913*. (Albany: J. B. Lyon Company, Printers, 1914)  
<https://hdl.handle.net/2027/nyp.33433010758773?urlappend=%3Bseq=281>. 30., *Thirty-Third Annual Report of the Board of Visitors of the Kings Park State Hospital at Kings Park, N. Y. to the Department of*

patients and were therefore the most essential in sustaining the hospital's operations. Their responsibilities were, moreover, the most demanding of the hospital's workforce. Employees typically worked twelve-hour days, seven days a week for three consecutive weeks, followed by five days off. The rate of pay was upwards to \$54.00 a month. A small fee was deducted from employees' monthly salary for room and board.

A combination of the demanding nature associated with working on the wards and low salary have been identified as contributing variables concerning the hospitals shortage of staff. The lack of available personnel was exacerbated with the onset of World War I, a lived reality that persisted following the wars conclusion.<sup>50</sup> Staff shortages began to interrupt the daily and therapeutic operations of the hospital - a lack of available personnel resulted in the hospital suspending or discontinuing services. It was the patients who would directly suffer the consequences associated with the shortage of staff. However, the hospital continued to operate to the best of its ability. The daily regimen of the hospital was also impeded due to the lack of available accommodations. Dr. Russel Blaisdell, assistant superintendent of Kings Park State Hospital, stated that both dormitories and dayrooms were overpopulated. Beds had to be placed side-by-side causing patients to have to crawl over footboards just to retire at night, and additional beds had to be set up in hallways. This arrangement was a fire hazard, more so that a

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*Mental Hygiene for the Year Ending June 30, 1928.* (Utica: State Hospitals Press, 1929). 34., *Forty-Third Annual Report of the Board of Visitors of the Kings Park State Hospital at Kings Park, N. Y. to the Department of Mental Hygiene for the Year Ending June 30, 1938.* (Utica: State Hospitals Press, 1939). 35-36.

<sup>50</sup> See, Bradley Harris, "News of Long Ago." *The Smithtown News*. February 19, 1981, 5. For the effects of World War I on the state hospital, see *Twenty Second Annual Report of the Kings Park State Hospital at Kings Park, N. Y. to the State Hospital Commission for the Year Ending June 30, 1917.* (Utica: State Hospital Press, 1918). 26-27. For a discussion pertaining to the hospital's contribution to the war effort, see, Polaski, *The Farm Colonies*, 114., Medina, *Kings Park Psychiatric Center, Volume I*, 234.

large majority of state hospital buildings are not fire proof. Additionally, cramped quarters would prove disastrous should a contagion break out among the patients.<sup>51</sup> Further, accusations of abuse and neglect of patients appeared in local news sources, presumably hindering the community's faith in the benevolence of the institution.<sup>52</sup>

Perhaps the most drastic allegations emerged in 1929 when an article appeared in *The New York Daily News* claiming that the regime at Kings Park State Hospital allowed, "patients to grovel for their food; the intermingling of patients suffering from infectious diseases, and the brutality of attendants." Ward attendants were depicted as orderlies who are, "actually serving as private chauffeurs, cooks, and maids to the physicians, while patients are neglected."<sup>53</sup> The accusations sparked controversy at the local and state level. As a result, Governor Franklin D. Roosevelt ordered an investigation of Kings Park State Hospital, "To a certain extent I believe the charges which have been made about conditions at Kings Park Hospital are true," the Governor states, "I know for a fact that the hospital is overcrowded by about 48%. I believe the chief trouble is the lack of accommodations for the inmates. We cannot expect real efficiency in an institution of this kind when it is overcrowded almost 50%."<sup>54</sup> The hospital cooperated with the investigation, the findings of which revealed that the hospital was overcrowded by

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<sup>51</sup> "Mrs. Leavitt Entertains: L. I. Federation of Women's Club Meets at Smithtown." *The Long Islander*, November 2, 1923, <http://nyshistoricnewspapers.org/lccn/sn83031119/1923-11-02/ed-1/seq-12/>. Also see "Insane Hospitals Still Overcrowded." *The New York Times*, February 13, 1927, <https://search.proquest.com/docview/104227429?accountid=38976>.

<sup>52</sup> See "No Cruel Treatment: Judge Exonerated Kings Park Officials Following a Court Hearing." *The Long Islander*, December 14, 1923, <http://nyshistoricnewspapers.org/lccn/sn83031119/1923-12-14/ed-1/seq-11/>, "State Hospital Attendant Acquitted by Trial Jury." *The County Review*, November 29, 1928, <http://nyshistoricnewspapers.org/lccn/sn84035791/1928-11-29/ed-1/seq-1/>, *Thirty-Third Annual Report of the Board of Visitors of the Kings Park State Hospital*, 43.

<sup>53</sup> "Order Investigation of Conditions at Kings Park Hospital Following Newspaper Charges." *The Suffolk County News*, March 29, 1929, <http://nyshistoricnewspapers.org/lccn/sn84031477/1929-03-29/ed-1/seq-7/>.

<sup>54</sup> "Roosevelt Orders Hospital Inquiry." *The New York Times*, April 2, 1929, <https://search.proquest.com/docview/105035469?accountid=38976>.

approximately 41%. According to the hospital's engineers, it would not be enough for the institution to expand on their available accommodations: the infrastructure of Kings Park State Hospital itself would have to be developed in its entirety to sustain new additions.<sup>55</sup>

Relief of the present, and future, conditions at the hospital was found in the \$50 million bond vote scheduled for November 4, 1930. Should the public vote in favor of the bond, the money would be appropriated to New York's state hospitals, including Kings Park. This would offer "the greatest hope of remedying the present serious situation and providing adequately for the immediate future." *The East Hampton Star* reports that the "proceeds from the bond issue will be used only as needed to supplement current appropriations – which cannot be increased sufficiently to meet the emergency without excessive taxation..."<sup>56</sup> An increase in taxation, which Governor Roosevelt was "personally opposed to," offers another dimension to the quality of care available to the mentally ill. Specifically, the ways in which the difficulties in maintaining a state institution could impact the local economy. In order to cultivate support for the bond, the doors to the state hospital were opened to the public. Advertised as "Come-and-See Day" would allow men and women to enter the hospital and view the alleged conditions for themselves.<sup>57</sup> The community, then, were empowered to directly improve the quality of

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<sup>55</sup> "Kings Park Overcrowded." *The Long Islander*, April 5, 1929, <http://nyshistoricnewspapers.org/lccn/sn83031119/1929-04-05/ed-1/seq-6/>, "Find Congestion in State Hospitals." *The New York Times*, May 10, 1929, <https://search.proquest.com/docview/105000216?accountid=38976>, "To Act for Relief in State Hospitals." *The New York Times*, May 11, 1929, <https://search.proquest.com/docview/105011703?accountid=38976>.

<sup>56</sup> "Residents of Suffolk County Interested in \$50,000,000 State Bond Issue." *The East Hampton Star*, October 24, 1930, <http://nyshistoricnewspapers.org/lccn/sn83030960/1930-10-24/ed-1/seq-4/>.

<sup>57</sup> "Public Invited to Visit State Insane Hospitals Tomorrow, Tomorrow Will Be Come-and-See Day, Support is Sought on Humanitarian Basis for Bond Issue to Relieve Overcrowding." *The Patchogue Advance*, October 17, 1930, <http://nyshistoricnewspapers.org/lccn/sn86071739/1930-10-17/ed-1/seq-9/>.

life of the mentally ill while ensuring they themselves would be spared an increase in taxation.

The decade following the bond issue up to the opening of the Second World War bore witness to a great deal of expansion at Kings Park State Hospital. Relief of overcrowding came in 1932 with the opening of Pilgrim State Hospital in Brentwood, Long Island, located several miles from Kings Park. Kings Park was among the state hospitals throughout the state to transfer its' excess patients to Pilgrim.<sup>58</sup> Kings Park was offered further relief by way of transferring its' surplus patients to other state hospitals in the greater New York region. Out-patient clinics also expanded their services, perhaps with the intention of supplementing institutional care should the individual case be manageable without hospitalization. Despite this reprieve, overcrowding persisted. By 1940, Kings Park cared for 6,037 patients.<sup>59</sup>

The greatest increase in accommodations came in 1940 with the opening of the eleven-story infirmary known as Building 93. 93 alone had a capacity of 1,100 persons and appeared to be entirely up-to-date in terms of safety features and available amenities for residents. Commissioner of Mental Hygiene, Dr. William J. Tiffany, stated that the decision to construct one large building as opposed to a smaller grouping of buildings was because, "infirm patients demand a greater measure of medical care and nursing

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<sup>58</sup> "Dr. Tiffany Heads Pilgrim Hospital." *The Long Islander*, November 13, 1931, <http://nyshistoricnewspapers.org/lccn/sn83031119/1931-11-13/ed-1/seq-1/>. Also see, "4,000 Patients Are Now Housed in Pilgrim Hospital, 1,000 More Soon." *The Patchogue Advance*, January 27, 1933, <http://nyshistoricnewspapers.org/lccn/sn86071739/1933-01-27/ed-1/seq-9/>

<sup>59</sup> Medina, *Kings Park Psychiatric Center, Volume I*, 50-51.

attention...Moreover, they are generally bedridden or able to move only within restricted space.” One large building, then, centralizes available services.<sup>60</sup>

The availability of services continued to be contingent on the availability of personnel. The demanding nature accompanying the task of caring for hundreds of patients in an overcrowded institution bore immense pressure on its’ workers. A special legislative committee for the investigation of working conditions of employees in state hospitals visited the Long Island institutions in late November 1934. Among the committee’s recommendations was the eight-hour work day. The bill advocating for an eight-hour work day would be vetoed by Governor Lehman in May of the following year, although, the Governor, “admitted the justice of the employees’ cause, but declined to approve the measures because state finances would not permit such a change at this time.” It would not be until June 1, 1936 that the twelve-hour work day would be replaced with an eight-hour work day and six-day work week.<sup>61</sup> However, as Kings Park entered the 1940’s and faced the prospect of an increase in its’ patient population as a result of World War II, a lack of available personnel appears to have become a long-, rather than short-term concern for the hospital’s administration.<sup>62</sup>

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<sup>60</sup> “Hospital Has New Building.” *The County Review*, August 8, 1940, <http://nyshistoricnewspapers.org/lccn/sn84035791/1940-08-08/ed-1/seq-3/>.

<sup>61</sup> “Legislative Group Visits Hospitals on L. I.” *The Suffolk County News*, November 30, 1934, <http://nyshistoricnewspapers.org/lccn/sn84031477/1934-11-30/ed-1/seq-11/> ., “L. I. State Hospital Employees Lose Campaign for Eight Hour Day.” *The Suffolk County News*, May 17, 1935, <http://nyshistoricnewspapers.org/lccn/sn84031477/1935-05-17/ed-1/seq-9/>., “Eight Hour Day for Hospital Workers.” *The Suffolk County News*, June 5, 1936, <http://nyshistoricnewspapers.org/lccn/sn84031477/1936-06-05/ed-1/seq-8/>

<sup>62</sup> See “Overcrowded State Hospitals Suffer from Help Shortage.” *The Suffolk County News*, February 12, 1943, <http://nyshistoricnewspapers.org/lccn/sn84031477/1943-02-12/ed-1/seq-4/>., “Predicts Increase in Mental Cases.” *The Suffolk County News*, May 12, 1944, <http://nyshistoricnewspapers.org/lccn/sn84031477/1944-05-12/ed-1/seq-9/>.

One may argue that the active participation of volunteers, and civic and religious organizations in the day-to-day operations of the institution offered a reprieve to the chronic shortage of personnel. The participation of the community in the daily functions of the hospital offered valuable social interactions to the patients, a feature which was considered just as essential to their recovery as was the medical and psychiatric treatment they received. Volunteers assisted patients in their occupational therapy classes and partook in recreational activities alongside of them.

This direct interaction of the public with the patient population – by way of attending an exhibit at the hospital and purchasing a product of their occupational therapy classes, or by volunteering their time - helped to bridge a gap between the hospital and the community. By involving themselves in the social life of the patient population, participating members of the community were offered an understanding of the hospital's purpose and functions, mental illness and the mentally ill. This, in turn, fosters sentiments of compassion and sympathy as opposed to avoidance and contempt. It would be, however, false to infer that a sense of stigmatization did not repel persons from the institution and its residents. It is then possible to conclude that a sentiment of both benevolence and stigmatization connected members of the community to the patient population, and to the state hospital. Moreover, the structural arrangement of the hospital – its administration and its therapies – allowed for the community to forge and retain a connection with the mentally ill.

Part II: The Patients and the Community.



The development of Kings Park and its state hospital were not mutually exclusive. The spatial arrangement of the community and the institution enabled the operations of each to overlap with one another. This would enjoin both spaces for the duration of the hospital's history. The location of the state hospital near and on public roadways allowed for a direction interaction of the community with the facility's internal operations. The campus proved to be an attraction to the public, being "meticulously landscaped and cared, and the beaches were like a paradise."<sup>63</sup> This accessibility was aided by a lack of a defining boundary physically separating the community from the hospital. This arrangement allowed for a connection to form between the town of Kings Park and the state hospital. Furthermore, this association would come to extend itself from the hospital onto the patient population. The permeable boundary dividing the residents of the town of Kings Park from those of the state hospital encouraged a direct, or indirect, interaction between both populations, thus establishing a repour between the lay public and the mentally ill. The nature of these interactions is indicative of the attitudes expressed by members of the public towards the mentally ill. These expressions have been observed to be interchangeable - from welcoming and sympathetic, to rejection and hostility – and appear to be dependent on the behavior of the individual in question, as well as their social standing at the time of the incident: as a member of the community, or as a member of the state hospital – "the patient"

Drawing the public to the hospital grounds by way of advertisements, bi-annual sales and exhibits, and open road ways encouraged the public's understanding of the state

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<sup>63</sup> Myra Dockery Fontana, *The Irish Immigrants and Their Families of Kings Park*. (Amityville: Official Offset Printing Corporation, 2009) 22.

hospital and its' residents. The volunteer services of Kings Park state Hospital illuminate's the ways in which the community directly participated into the social lives of its' patients. Given the shortage of hospital personnel, the men and women who dedicated their time to serving the patients of Kings Park supplemented the institution's own deficiencies. Akin to the rationale behind occupational and recreational therapies, the benefits offered by volunteers at Kings Park encouraged the socialization of patients who would have otherwise languished on their wards or in their dayrooms, many of whom "are without hope, from loneliness and fear." The attention offered by volunteers of the community had the potential to "restore hope and health to a lost human being." Simple activities such as reading, watching television, recreational games and walks throughout the scenic grounds could make a profound difference in the lives of the mentally ill.<sup>64</sup>

Various religious and civic organizations were regular participants in the volunteer services at Kings Park. This included a Grey Ladies Chapter of the American Red Cross, churches of various denominations and synagogues, and local Boy Scouts and Brownie Troops, to name some. The American Auxiliary Legion was especially active in the lives of those residing at the Veteran's Memorial Hospital Division at Kings Park. In each instance, the efforts afforded by the volunteers of Kings Park State Hospital – be they participation in recreational activities, the donation of gifts and hosting of parties, or sponsoring of picnics and amusements off campus – were instrumental in contributing to the workforce of Kings Park State Hospital and strengthening the connection between members of the community and the institution.

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<sup>64</sup> "Red Cross Asks Help From All for Patients at Kings Park Hospital." *Northport Journal*, May 21, 1953, <http://nyshistoricnewspapers.org/lcn/sn84031180/1953-05-21/ed-1/seq-6/>.

The structural arrangement of Kings Park State Hospital enabled a relationship to form between members of the community and members of the patient population. Sales and exhibits, volunteer opportunities and recreational activities offered the public the opportunity to involve themselves in the daily operations of the hospital, thereby allowing this dynamic to sustain itself. Further, in allowing this association to persist and evolve over the course of the twentieth-century, participating members of the community were enabled to develop an understanding of both mental illness and disease, and the mentally ill. This, in turn, humanizes both the patient and their experience at the state hospital.

Those who did not choose to directly involve themselves in the social life of Kings Park State Hospital, however, were enabled to develop an indirect connection to the institution and the experience of its' patients. The use of the press and local advertisements afforded the residents of Kings Park and the broader Suffolk County region to remain up-to-date with the daily operations of the institution. In addition, local news sources helped to develop the public image of both the institution and the institutionalized. Popular conceptions of both the hospital and the mentally ill could be derived from the way in which they were portrayed in the press. New coverage offers a glimpse into the popular attitudes expressed by the community at a given time towards the mentally ill. These conceptions, however, were not stagnant. Evidence suggests that popular attitudes appear to be dependent upon variables which contribute to the way in which mental illness is portrayed within the public sphere. This includes the behavior of the individual and their social standing at the time of the incident in question. By social standing, I refer to the position of the individual relative to the state hospital itself: as a

member of the residential population of the community, or as a member of the patient population of the state hospital. The press, then, appears as a powerful medium in which to facilitate an indirect connection between the community and the mentally ill

The language employed by local news sources in constructing portrayals of mental illness and disease provoked a range of responses from its' readers. This, in turn, instills the public with conceptions of mental illness and disease, and the mentally ill themselves. The case of the retired Reverend Ernest Gutweller is illustrative of an extension of benevolence and compassion on part of the community. *The Long Islander* described the former pastor as "blind and owing to his advanced age, has become feeble in both mind and body." He was reported to have lived alone for upwards to eight years, both his wife and daughter having been committed to Kings Park State Hospital, which has "preyed heavily on Mr. Gutweller's mind." The former Reverend was reported to have been seen, "rambling" and walking around the "trolley track, and streets at all hours of the night." He was often led home by two of the night watchmen. It was believed to be "dangerous for him to be allowed to continue this mode of existence." The public feared that "he may become lost some cold night and will possibly freeze to death or else set his home on fire." Steps to relocate the Reverend to an institution or home were initiated by the Primrose Lodge No. [569] I. O. O. F., the matter having been placed in the hands of Health Officers Dr. William J. Burns and Judge Joseph Steinert.<sup>65</sup> The portrayal of the Reverend as an old and feeble man weighed down by the absence of his wife and daughter can be interpreted as provoking compassion and sympathy on part of

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<sup>65</sup> *The Long Islander*, February 16, 1917, <http://nyshistoricnewspapers.org/lccn/sn83031119/1917-02-16/ed-1/seq-8/>.

the community to relocate him in a more adequate environment to best attend to his needs. His eventual commitment to Kings Park State Hospital was viewed as a precautionary measure for his own well-being.<sup>66</sup> Thus, the response of the community to the mentally ill is one of benevolence and humanity.

Coverage detailing more extreme behaviors attributed to mental illness prompted a more precautionary response on part of both the public *for* the wellbeing *of* the public. Charles Witt, otherwise known as “The Post Card Man” was arrested and sent to Kings Park State Hospital for observation on a temporary commitment after causing a disturbance. Witt was reported to have visited various villages in the western part of Huntington Township over the course of several years, “and for a long time his peculiarities were tolerated.” His actions finally came to pass as a nuisance, “scaring women in their homes, when, without knocking, he would walk right in their houses, while attempting to sell post cards.” His latest home intrusion placed him into legal, and subsequently, institutional custody.<sup>67</sup>

While the press does not explicitly convey what constituted as Witt’s “peculiarities,” one may conclude that his actions had disrupted public order and harmony. His arrest and hospitalization, then, was an attempt to restore and maintain peace within the public sphere. The intention of preserving the stability of the community

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<sup>66</sup> The Reverend was reported to have passed away at Kings Park State Hospital, “where he had been a patient for the past two years or more.” His wife was reported to have been released from Kings Park, “after a confinement of nearly eighteen years” and “is now the guest of relatives up-State recovering her full health.” Their daughter, too, appears to have been discharged from Kings Park and was now “a patient in an up-State sanitarium.” See, *The Long Islander*, September 14, 1917, <http://nyshistoricnewspapers.org/lccn/sn83031119/1917-09-14/ed-1/seq-8/>, *The Long Islander*, May 7, 1920, <http://nyshistoricnewspapers.org/lccn/sn83031119/1920-05-07/ed-1/seq-8/>.

<sup>67</sup> “Post Card Man Goes to Kings Park.” *The Long Islander*, March 26, 1926, <http://nyshistoricnewspapers.org/lccn/sn83031119/1926-03-26/ed-1/seq-15/>.

appears to evoke a sense of compassion and sympathy *by* members of the community *towards* the community. A sense of resentment and fear may be interpreted as being expressed towards the individual who disrupted the peace. As a result, the individual in question becomes ostracized by their fellow peers. Whether the individual was able to reintegrate themselves back into the collective body upon release is a matter deserving of separate assessment.

It has been observed that those who did not involve themselves on the grounds of Kings Park were able to remain up-to-date on the daily operations of the hospital and the movement and status of the patients by way of the local press conditions. The community, then, retained its' distance from the hospital by way of an indirect connection to the facility through the circulation of local news sources. However, given the permeable boundary of the state hospital at Kings Park and the chronic shortage of attending personnel, some patients eluded ward attendants and nurses and fled from the hospital. This brought the patients into direct contact with the community within the public sphere. Notices of missing patients were regularly posted in local newspapers and typically included relevant information pertaining to the patient – their recent movements, condition, a description of the individual, and who to notify should they be found. If not by their physical description, patients were often identified by their “mysterious” or “strange behavior.”<sup>68</sup> Locating a missing person was imperative in order to safeguard the well being of the missing patient and the general public. With respect to

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<sup>68</sup> See, “Escaped Kings Park Inmate Found Monday.” *The Watchman of the Sunrise Trail*, February 15, 1934, <http://nyshistoricnewspapers.org/lccn/sn96083587/1934-02-15/ed-1/seq-1/>, “Another Kings Park Walk Out.” *The Long Islander*, February 23, 1934, <http://nyshistoricnewspapers.org/lccn/sn83031119/1934-02-23/ed-1/seq-1/>.

the former, locating a missing patient in a timely manner could prevent injury or death. This suggests an extension of sympathy for the well-being and safety of the individual.

That members of the community actively participated in the search for missing patients infers a connection between both parties. When notified of the disappearance of her sister, Rachel Wood, Mrs. Caroline W. Bonner “had this section of Long Island posted with placards, offering rewards, as well as advertising in local newspapers.” Hospital employees and search dogs from the New York Police Department searched the woods in the surrounding vicinity for Miss. Wood. The search was joined by a local Boy Scout Troop. The search party was unsuccessful in locating Miss. Wood. Her remains were found in February of the following year, approximately four miles from the institution.<sup>69</sup> Miss. Wood was believed to have passed due exhaustion and a lack of food.

Alternatively, patients who fled the hospital and were able to be located expressed mixed responses to returning to the institution. Some cooperated, others actively resisted the efforts of authorities to guide them back to the hospital. Patients who escaped and were described as “dangerous” had the potential to provoke a sense of urgency and fear on part of the lay public to locate and see them returned to the institution in a timely manner. Under such circumstances, the motives to recover an escaped patient appears more so to ensure the safety and stability of the community. Consider the case of Edward Browning, an “escaped maniac” from Kings Park State Hospital, who stabbed Mrs. Bernice A. Weihs twice in his back with a knife he had obtained from the hospital’s

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<sup>69</sup> “Looking for Rachel Wood.” *The Long Islander*, July 23, 1926, <http://nyshistoricnewspapers.org/lccn/sn83031119/1926-07-23/ed-1/seq-11/>., “Remains of Miss Wood Found at Fort Salonga.” *The Long Islander*, February 18, 1927, <http://nyshistoricnewspapers.org/lccn/sn83031119/1927-02-18/ed-1/seq-14/>.

kitchen. Browning was "considered a dangerous inmate" and "had made several previous attempts to escape and was kept in a ward "reserved for the worst male inmates.""

Attendants had been directed to keep Browning under constant observation. Browning allegedly made his escape when attendants were absent. It was further noted that a proper search was not conducted for Browning when he was first noticed as missing. The courts criticized hospital authorities and employees for their failure to take proper precautions with Browning. The State was declared guilty of negligence.<sup>70</sup> When considered alongside the case of Rachel Wood, it becomes apparent that a thread of both benevolence and stigmatization, warmth and fear, connected the residential population of Kings Park and the broader Suffolk County region to the resident patient population of Kings Park State Hospital.

In examining the relationship that enjoins the community and the patients of Kings Park State Hospital, it becomes apparent that this connection assumed several forms. The character of these relationships appears to be dependent on both the nature of the interaction and the location where it takes place. Members of the community forged a direct connection with the patients as per their direct involvement with the daily operations of the institution. The lay public additionally maintained an indirect connection with the mentally ill through local news sources and advertisements circulating in the public sphere. The permeable boundary separating the hospital from the community allowed patients to freely enter the public sphere just as much as members of the public were enabled to cross into the institution. This flexibility embodied the

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<sup>70</sup> "Damages of \$1,500 to Woman for Injuries." *The Long Islander*, March 18, 1943, <http://nyshistoricnewspapers.org/lcn/sn83031119/1943-03-18/ed-1/seq-5/>.



potential to jeopardize the structural arrangement and internal operations of the state hospital and the town of Kings Park.

Furthermore, in analyzing the popular attitudes which facilitated a bond between the lay public and the mentally ill, it becomes evident that these attitudes extended themselves from the patient population onto the hospital itself. By involving themselves in the social life of the institution, volunteers and visitors witnessed the therapeutic purpose of institutional care, as well as its deficiencies. The hospital appears to have served an additional role in separating those who stood apart from the general community as per their disorderly behavior, thereby preserving peace and order within the public sphere. This social function assumes a more negative demeanor which infringes upon the benevolent association members of the community maintained with the patient population. What becomes apparent when considering these dual perspectives is that there exists a subsequent limitation to the extent of the community's relationship with the patient population, and implicitly, the state hospital.

### Part III: The Community and the Hospital.

Kings Park State Hospital served a variety of communal functions that would help to sustain the town of Kings Park. Thus, a connection is fostered between the community and the hospital. The very basis of the institution provided care and treatment for the mentally ill. It provided patients with medical care and necessities of living, all of which, when properly calibrated according to an individual's needs, would help to further their recovery. The state hospital also extended its medical services to the lay public. Members

of the community who sustained an injury and required medical attention or a procedure performed by a specialist found medical attention at the state hospital. The institution, then, supplemented medical care when it was not immediately obtainable by other means. It appears that the personnel at Kings Park State Hospital were open to extending their services to the community when it was in dire need. When four persons were involved in a motorcar wreck that left the victims seriously or critically injured, then superintendent of Kings Park, Dr. William J. Tiffany and his assistant, Dr. Charles Parker, “assigned four doctors and a group of eight of their best nurses to emergency work.”<sup>71</sup>

Receiving medical services at the state hospital, be it voluntarily or involuntarily, brought members of the community from the public sphere into the institution. Specifically, receiving medical attention at state hospital for the insane brought members of the community into direct contact with the therapeutic services offered by the hospital to its resident patient population. While it is at present inconclusive as to whether this participation in the hospitals therapeutic functions influenced public opinion regarding the quality of care patients received, it is plausible that the community’s proximity to the state hospital was advantageous to maintaining its own well-being. Beginning in 1916, the therapeutic functions of the hospital transcend the institution and entered the public sphere in the form of mental hygiene clinics. The first clinic was opened in Brooklyn, N. Y., the number of clinics expanding throughout the opening decades of the twentieth-century. The operation of mental hygiene clinics was to supplement that of the state hospital. Lay persons, paroled and discharged patients and those who had been

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<sup>71</sup> “Bad Accident at Smith’s Corners: 4 People Taken to Hospital.” *The Long Islander*, April 19, 1929, <http://nyshistoricnewspapers.org/lccn/sn83031119/1929-04-19/ed-1/seq-1/>.

discharged were afforded information relating to mental illness and diseases, examinations and preventative treatments, all of which was to forestall the prospect of hospitalization.

The availability of medical care and mental hygiene services provided by Kings Park State Hospital to the public exemplifies a way in which the community directly benefited from the Kings Park State Hospital. It is plausible to argue that the hospital into itself was able to procure indirect advantages from this interaction with the community. The hospital cultivated and encouraged the good will of the community in providing medical care directly on its grounds, thereby offering members of the community a glimpse into the quality of care offered to its own patients. In addition, operating mental hygiene clinics across Long Island and the outer-boroughs helped to increase both awareness and preventative care within the public sphere. The availability of medical care and mental health services benefitted both the community and the state hospital, both within the institutional space and the public sphere.

The operation and maintenance of a large-scale institution would require an available and trained staff to sustain it. The institution offered a variety of jobs to interested parties including direct care services – ward attendants, nurses, therapists, social workers, physicians – positions in maintenance and service departments, and clerical work.<sup>72</sup> Students who were looking for work during the summer months were

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<sup>72</sup> For examples of help wanted advertisements, see, “Wanted.” *The Long Islander*, January 26, 1923, 4, <http://nyshistoricnewspapers.org/lccn/sn83031119/1923-01-26/ed-1/seq-4/>, “Set Civil Service Tests For July 19.” *The County Review*, May 22, 1941, <http://nyshistoricnewspapers.org/lccn/sn84035791/1941-05-22/ed-1/seq-3/>, *The Long Islander*, February 4, 1943, <http://nyshistoricnewspapers.org/lccn/sn83031119/1943-02-04/ed-1/seq-4/>.

able to fill their time with temporary positions at the state hospital.<sup>73</sup> The combined efforts of the Nurses Training School and the Training Class for ward attendants enabled the hospital to maintain a professional and adequate standard among those who would be most directly involved in the daily lives of their patients. Subsequently, the availability of training services, and accompanying benefits perhaps served as an incentive for members of the lay public to inquire about and apply for work. Working and residing in one of the employee residences' also allowed members of the staff to save their income until they could afford to purchase their own home.

Working at the state hospital proved to be advantageous in helping the staff, and surrounding vicinity of Kings Park itself, resist the effects of the Great Depression. The hospital continued to receive funding from the State throughout the 1920's and 1930's, which ensured that employees would receive a small but steady income. Employee salaries were, in turn, funneled into the local businesses, thus helping to sustain the local economy, however small their contribution may be. Members of the public were encouraged to find work at the state hospital as it was a "depression-proof job," as work was readily available.<sup>74</sup> Coupling the availability of work, the self-sustaining character of Kings Park State Hospital ensured that both patients and employees would continue to receive amenities and resources that may otherwise be limited due to the effects of the

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<sup>73</sup> See, "Jobs & Worms." *Light and Lively: Kings Park History*. v. 1, no. 3. (Amityville: Official Offset Corporation) 25-26.

<sup>74</sup> *Fontana, The Irish Immigrants and Their Families, 175.*, Marie H. Mankowski (nee: Dolan) "Life in Kings Park." *Light and Lively: Kings Park History*. v. 1, no. 3., 9.

Depression.<sup>75</sup> As a result, Kings Park State Hospital helped to supplement the difficulties experienced by the lay public during the years of the Great Depression.

Choosing to work at the institution, then, may be in the lay persons best interest in both the short-, and long-term future. However, a reluctance persisted on part of members of the lay public and medical profession to commit themselves to psychiatric work and care. This sentiment is reminiscent of the reluctance of nineteenth century psychiatrists who sought to establish themselves and their practices beyond the walls of the asylum. Evidently, a stigma persisted concerning the prospect of institutional-based work.<sup>76</sup>

In order to meet the growing demands of an increasing patient population, the physical infrastructure of the hospital was in perpetual need of development and maintenance. This created the need for contracting services and work crews to expand the available services in order to sustain the hospital. As a result, employment opportunities were extended to members of the public who would indirectly serve the needs of the hospital. Construction projects at Kings Park State Hospital provided opportunities for unskilled and skilled workers alike, as well as relieved unemployment among laborers.<sup>77</sup>

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<sup>75</sup> For evidence of the self-sustaining infrastructure of the state hospital, see, "Industrial Revolution Beauty." *Light & Lively: Kings Park History*. v. 1, no. 2. (Amityville: Official Offset Corporation) 20., "The Night the Lights Went Out." *Light & Lively: Kings Park History*. v. 2, no. 1. (Amityville: Official Offset Corporation) 18-19.

<sup>76</sup> "Many Nurses to Fill War Demand." *The East Hampton Star*, May 6, 1943, <http://nyshistoricnewspapers.org/lccn/sn83030960/1943-05-06/ed-1/seq-8/>, "Urged to Study Nursing L. I. State Hospitals." *The Patchogue Advance*, February 1, 1945, <http://nyshistoricnewspapers.org/lccn/sn86071739/1945-02-01/ed-1/seq-5/>

<sup>77</sup> *The Suffolk County News*, April 4, 1930, <http://nyshistoricnewspapers.org/lccn/sn84031477/1930-04-04/ed-1/seq-9/>, Also see, "Supervisor Kreutzer Submits Extensive Report to WPA Head." *The Long Islander*, March 11, 1938, <http://nyshistoricnewspapers.org/lccn/sn83031119/1938-03-11/ed-1/seq-1/>, "Smithtown Transfers WPA Work." *The Suffolk County News*, October 14, 1938, <http://nyshistoricnewspapers.org/lccn/sn84031477/1938-10-14/ed-1/seq-9/>, Also see, "Plan Hospital Work." *The Suffolk County News*, November 11, 1938, <http://nyshistoricnewspapers.org/lccn/sn84031477/1938-11-11/ed-1/seq-8/>, "PWA Approves Hospital Project." *The Suffolk County News*, November 18, 1938, <http://nyshistoricnewspapers.org/lccn/sn84031477/1938-11-18/ed-1/seq-9/>.

The community was additionally able to extract material benefits from the state hospital. The paving of roads in and around the institution aided local traffic and provided an ease in transportation. Excess or discarded building materials were available for public use.<sup>78</sup> Sales and exhibits of the products of the patients occupational and recreational therapies offered men and women various household goods and decors such as linens, clothing, handicrafts and artwork. This suggests that the quality of goods and wares made by patients were up to standard to attract prospective buyers. Press coverage notes that sales were typically “very successful,” implying that sales and exhibits were regularly attended, and that a majority of, if not all, of the products available were sold. Profits obtained from the sales was used to purchase materials and supplies which would be used by the patients in their occupational and recreational therapy classes, thereby allowing them to continue to produce articles and wares which would be sold or exhibited in the future. Sales and exhibits appear as a mutually beneficial function in the relationship that existed between the town of Kings Park and the state hospital.

This relationship manifested itself in with the completion of York Hall on April 11, 1932. Dedicated on September 7, 1932. The hall was named for Monsignor John C. York, a former priest who had served on the Board of Visitors to the Kings Park State Hospital since 1910. Monsignor York had expressed a keen interest in the institution and its’ patients, his active service commemorated with the naming of the new assembly hall in his honor. York Hall was estimated to have cost \$100,000 to construct. Between 1,000-2,000 persons attended the dedication, the unveiling ceremonies conducted by junior

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<sup>78</sup> *The Long Islander*, March 28, 1940, <http://nyshistoricnewspapers.org/lccn/sn83031119/1940-03-28/ed-1/seq-6/>

patients of the institution. It was during the dedication ceremony that it was announced that the employees of Kings Park State Hospital contributed more than \$1,100 to equip the hall.<sup>79</sup> The presence and participation of members of the lay public, hospital staff, and patients during the dedication ceremony is symbolic of the future functions that York Hall would support.

York Hall was intended to serve the spiritual and social needs of the institution. The first religious service was held on May 22, 1932. Thereafter, services were regularly performed to satisfy the specific needs of the patient population, be they Jewish, Catholic, or Protestant. Holidays were also observed at York Hall. Patients were additionally provided with various recreational activities and entertainments such as dances, performances, and movies. Sales and exhibits were held at York Hall following its completion. Employees too enjoyed the amenities offered by the new amusement hall. Commencement ceremonies were held at York Hall for graduates of the hospitals Nursing School. Amusements were also held for the benefits of hospital employees, including birthday celebrations, dances and organization functions. Due to the heavy Irish influence among the staff, it was not uncommon for functions held at York Hall to feature traditional Irish music and dances.<sup>80</sup> In addition, York Hall would also come to serve members of the lay public throughout its' years of operation. Numerous civic

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<sup>79</sup> "State Hospital Hall Named for Veteran Priest." *The County Review*, September 8, 1932, <http://nyshistoricnewspapers.org/lccn/sn84035791/1932-09-08/ed-1/seq-1/>, "York Hall Dedicated." *The Long Islander*, September 9, 1932, <http://nyshistoricnewspapers.org/lccn/sn83031119/1932-09-09/ed-1/seq-1/>, "Monsignor York Was 75 Years Old on Wednesday, October 27." *The Long Islander*, October 29, 1937, <http://nyshistoricnewspapers.org/lccn/sn83031119/1937-10-29/ed-1/seq-1/>, *Thirty Seventh Annual Report of the Board of Visitors of the Kings Park State Hospital to the Department of Mental Hygiene for the Fiscal Year Ending June 30, 1932*. (Utica: State Hospital Press, 1933) 40.

<sup>80</sup> "Hospital Socials." *Light and Lively: Kings Park History*. v 1, no. 3, 3.

organizations would utilize the space located on the hospital grounds in order to hold meetings and functions to benefit their own needs.<sup>81</sup>

York Hall serves as lens in which to view the bond that connected the Kings Park State Hospital to the community of Kings Park and beyond. An interdependent relationship existed between both parties throughout the history of the institution: the state hospital served the needs of the community in the form of professional opportunities, economic stability, medical service, and material gains. The community, in turn, supported the needs of the institution twofold: members of the lay public directly served the needs of the state hospital by way of providing an able-bodied work force to serve in its various departments. The community indirectly expressed their support of the institutions therapeutic functions simply by entrusting their peers, relatives, and themselves in the care of the state hospital. Furthermore, the spatial arrangement of both the institution and the community fostered an understanding between the lay public and the hospitals administrative personnel. Implicitly, it is suggested that the state hospital and community co-existed both alongside and irrespective of the other. Despite the perceived connection which enjoined the public and the institution, evidence suggests that this relationship was not without its limitations. Social and economic tensions persisted between both parties throughout the twentieth-century which threatened the very foundation which had connected the state hospital and the community.

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<sup>81</sup> "American Legion Post Formed at Kings Park 1923." *Light and Lively*. v. 2, no. 1., 30., "V. F. W. Plan Military Ball for April 5." *Northport Journal*, March 22, 1935, <http://nyshistoricnewspapers.org/lccn/sn84031180/1935-03-22/ed-1/seq-3/>, *Northport Journal*. July 10, 1936, <http://nyshistoricnewspapers.org/lccn/sn84031180/1936-07-10/ed-1/seq-5/>.



While explicit references to the state facility and its patient population are at present illusive, it is possible to infer the opinion of lay men and women concerning the institution and the mentally ill by way of the local press. For example, in 1926, Governor Alfred G. Smith recommended that the New York State Agricultural School at Farmingdale, N. Y. be converted into an annex of the Creedmoor Insane Asylum located in Queens, N. Y. Assemblyman John Boyle Jr., of Huntington, and representative of West End Suffolk County aligned himself with the publics protest against Governor Smiths recommendations to establish a working farm at Farmingdale for the patients of Creedmoor, inquiring as to why these patients “cannot be taken to Kings Park, where the facilities for farming and where the journey could be made more comfortable and less time consumed in making it.” It appears that Boyle is speaking in best interest of the patients. However, it becomes apparent that the well-being of the public may in fact overshadow that of the mentally ill. The Assemblyman believed that, should Governor Smiths proposal be accepted, it “would only be the entering wedge and before long the entire village of Farmingdale would be absorbed, and another burden placed on the backs of the taxpayers without their consent.” The economic interest of the public, then, appeared to a motivating factor in the community’s resistance of the Governors recommendation.”<sup>82</sup>

The annex of Creedmoor was never actualized, though this interaction exemplifies how members of the community came to be at odds with the idea of an expansion of mental health care services in Suffolk County. Specifically, how the

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<sup>82</sup> “Gov. Smith’s Crazy House Condemned.” *The Long Islander*, April 2, 1926, <http://nyshistoricnewspapers.org/lccn/sn83031119/1926-04-02/ed-1/seq-9/>.

possibility of an increase in taxation placed the community at odds with the interests of caring for persons with mental illnesses. Expansion and development within the institutional space bore an impact on the public sphere. The economic interests of the town, then, can be utilized in order to view the changing attitudes of the community towards the operations of the state hospital.

The economy of the town of Kings Park was aided and sustained by the salaries of employees at Kings Park State Hospital. Visitors to the institution and residents of the community too contributed to the upkeep of local businesses and merchants, thereby forming a financial dimension to the relationship between the state hospital and the community. This structural organization was disrupted with the establishment of a community store on the grounds of the state hospital. The community store offered a variety of goods to patients, employees, and visitors including food stuffs, drinks, cigarettes and coffee. A small mobile unit was later built and traveled to the infirm and geriatric units, allowing bed-ridden patients to purchase various goods for their enjoyment. Proceeds were used to provide recreations and entertainments for the patients.

The community store provoked resentment on the part of local merchants. Opponents believed that “the State should not enter into competition with the business people of this village or any other village,” as “The State stores are in State buildings for which no rent is paid and in competition with the businessman who pays a part of the taxes to maintain these institutions.”<sup>83</sup> Viewed in this light, the local merchant was contributing to the upkeep of the institution by way of their tax dollars, which by virtue

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<sup>83</sup> “Ban on Hospital Shops Proposed by Island Salon.” *The County Review*, February 16, 1933, <http://nyshistoricnewspapers.org/lccn/sn84035791/1933-02-16/ed-1/seq-7/>., Also see, *The Suffolk County News*, January 29, 1932, <http://nyshistoricnewspapers.org/lccn/sn84031477/1932-01-29/ed-1/seq-9/>.

included the community store, *and* paid rent in order to maintain their own businesses. This was viewed as unjust and placed the state in direct competition with local merchants. In spite of legal action and public protest, the community store continued to serve the needs of patients, employees and visitors alike.<sup>84</sup>

The matter of taxation appears to be a point of contention between the town of Kings Park and the state hospital, insinuating a conflict of interest: that of the fiscal obligation of the community to the maintenance of the state hospital and its patients. The construction and opening of Building 93 exemplifies the economic tension between the state hospital and the community. The estimated cost of construction was \$1,863,290; 93 had a total capacity of nearly 1,100 and possessed the most up-to-date amenities.<sup>85</sup> That 93 could appropriately house and classify hundreds of patients would provide relief for overcrowded wards and afford patients proper treatment according to their clinical diagnosis. Taken together, the make-up of Building 93 offered hospital administrators and attending personnel a higher quality of management over the mentally ill.

While Building 93 provided the state hospital at Kings Park with accommodations and amenities necessary to better serve and treat its patient population, the “near skyscraper” provoked animosity. According to *The County Review*, Building 93 “should make many a taxpayer conscious of the problem of the mentally ill and what that problem means in dollars and cents to the taxpaying public.” This included not only the per capita cost of maintaining a patient in a public hospital, but the cost of employees’ salaries, medical equipment and other amenities associated with institutionalization; all of which,

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<sup>84</sup> See, “Hospital Head Accused.” *The Long Islander*, September 1, 1933, <http://nyshistoricnewspapers.org/lccn/sn83031119/1933-09-01/ed-1/seq-3/>.

<sup>85</sup> For a complete description of the Building 93, see “Hospital Has New Building.”

“every Suffolk taxpayer must share in that expense. For reasons of self-interest, we should be interested in reducing this budget cost. That can be done only by reducing the rate of admissions.” When placed into the public’s consciousness, the price of hospitalization is intensified. The best course of action, the column suggests, “is to heal before hospitalization becomes necessary.”<sup>86</sup>

Readers are reminded that in most cases, mental illnesses can be managed, perhaps even cured, should the individual receive immediate attention. The proposed alternative to hospitalization becomes the investment of a “few thousands allocated now for a mental health clinic” which would “repay itself many times over in the years to come.” This small appropriation, compared to the \$1,800,000 million invested in Building 93, was viewed to be the most logical and moderate course of action to best serve the fiscal considerations of the community, “This is no starry-eyed Utopian proposition,” *The County Review* states. Rather, “it is a sound and practical attack on the problem that grows more serious with each passing year.” The alternative to the “problem,” the article concludes, “seems to be eleven-story buildings at \$1,800,000 per building.”<sup>87</sup>

*The County Review* article addresses the financial realities and responsibilities experienced and absorbed by the community in maintaining the cost of care of the mentally ill. While the article acknowledges that its proposals are merely speculative, the matters of concerns driving the need for an alternative to hospitalization – the increase in tax dollars – possessed the potential to resonate with members of the lay public. This

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<sup>86</sup> “Hospital Has New Building.”

<sup>87</sup> “It Would Be Money Well Spent.” *The County Review*, August 15, 1940, <http://nyshistoricnewspapers.org/lcn/sn84035791/1940-08-15/ed-1/seq-11/>.

alternative option presents itself in the shape of an increase and expansion of mental health care clinics. An emphasis was placed on the duty of the community to address manifestations of mental illness or disease at its earliest stages and seek preventative services. These treatment centers appeared to be a more economically conscious remedy compared to costly hospitalization. This signifies a shift in not only the ways in which persons living with a mental illness or disease should be treated, but where.

The matter of transferring the locus of treatment and care for the mentally ill was addressed the following year when Commissioner of Mental Hygiene and former superintendent of both Kings Park State Hospital and Pilgrim State Hospital, Dr. William J. Tiffany, illuminated the details surrounding the proposed “Boarding Out” Plan. This involved placing convalescent patients in home environments within the community in order to better facilitate their cure, a method that has historically been utilized in the state of Massachusetts since 1866.<sup>88</sup> Boarding out convalescent patients was held as a more economical program compared to long-term hospitalization. Doing so would relieve overcrowding on the hospitals’ wards, ensure a steady income to both the family whom the patient is to be placed with, and the community where the patient was to be boarded. Tiffany claims that “Because the placing of mental cases in families has been tried over a period of years and found of benefit both to the patient and caretakers, as well as saving to taxpayers, we have encouraged the development of this program.” Yet, the Commissioner assures readers that the program would not be placed into practice

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<sup>88</sup> See, Grob, *The Mad Among Us*, 167.

haphazardly. Tiffany states that the matter was to be studied more intently, and efforts were to be undertaken “to see what other plans can be made.”<sup>89</sup>

Dr. Tiffany’s proposed Boarding Out plan offers an alternative to institutional-based care. The community was to serve as a supplemental stage in which mental illness could be treated, possibly even cured. Doing so not only afforded patients an alternative to hospitalization but would ease the pressures caused by overcrowded wards. As a result, the duties and routines of attending personnel may be simplified on a long-term basis. Further, the proposed waning emphasis on institutional care would afford the tax paying public a degree of savings in lieu of higher taxes to fund and maintain construction projects at the state hospital. The Boarding Out Program, if implemented, present the potential to revise the working relationships connecting the state hospital, its’ patients, and the community.

The proposed course of action stands in stark contrast to the sentiment expressed by former Superintendent, Dr. William A. Macy, nearly thirty-years prior. Macy had frowned upon the prospect of “shift[ing] any part of the burden of the care of the insane upon the friends of the patients or upon the county from which they came.” The “Out-of-Door” treatment was dismissed due to its lack of success and the care of persons suffering from a mental illness and disease was to be limited to capable professionals in an institutional setting.<sup>90</sup> That professional opinion was now reconsidering Macy’s

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<sup>89</sup> “Dr. Tiffany Explains “Boarding Out” Plan.” *The Long Islander*, May 15, 1941, <http://nyshistoricnewspapers.org/lccn/sn83031119/1941-05-15/ed-1/seq-14/>.

<sup>90</sup> *Nineteenth Annual Report of the Kings Park State Hospital to the State Hospital Commission for the Year Ending September 30, 1914*. (Albany: J. B. Lyon Company, Printers, 1915) <https://hdl.handle.net/2027/nyp.33433010758773?urlappend=%3Bseq=345>. 52-53., Also, see, “Out-of-Door Treatment for Insane” *The Long Islander*, October 29, 1915, <http://nyshistoricnewspapers.org/lccn/sn83031119/1915-10-29/ed-1/seq-1/>.

reluctancy implies not only a shift in the best due course of treatment available for the mentally ill, but a reconfiguration of the bonds that enjoin the institution, the mentally ill, and the public that would follow in its' wake.

#### **Chapter 4: "A New Philosophy"**

This chapter engages with the ways in which the bonds connecting the Kings Park State Hospital, the mentally ill, and the community were reconfigured by state and federal legislation pertaining to the treatment and care of the mentally ill. A detailed analysis of mental health care reform and legislation in the post-World War II years greatly exceeds the scope of this paper. For present purposes, this chapter offers a brief overview of state and federal policy as it pertains to the experience of New York. Only then may an understanding develop of the way in which the transition from state-sponsored care to community-based services impacted individual localities be attainable. Specifically, to what extent, if at all, did the reorganization of mental health care services effect the working relationships between the Kings Park State Hospital, its patients, and the community of Kings Park and broader Suffolk County region?

The period surrounding and following World War II has been identified as a decisive turning point concerning the nature and treatment of mental illness.<sup>91</sup> Policy makers and social reformers operating at the state and federal level began to increase their participation concerning the oversight and treatment of the mentally ill. Concerned with the increasing population in America's mental hospitals and the subsequent financial

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<sup>91</sup> Grob, *The Mad Among Us*, 191.

expenditures necessary to maintain the institution and the institutionalized, the question of how to best prepare for and accommodate future cases of mental illness and disease would occupy a place in the agendas of state and federal bureaucrats into the second half of the twentieth century.<sup>92</sup> The experience of military psychiatrists who served abroad during World War II found that “early and purposeful treatment in noninstitutional settings produced favorable outcome.”<sup>93</sup> Early intervention would safeguard against the need for long term hospitalization. Grob concludes that the experiences of military psychiatrists “let to innovative models of psychiatric practice that subsequently become the basis of postwar efforts to create a new mental health system.”<sup>94</sup> Prevention through education, early intervention, and community-based treatment would gradually replace long-term custodial care.

This sentiment was, arguably, enhanced in assessing popular and professional opinion concerning the effects of the mental hospital on the patient; that the institution was impeding as opposed to encouraging recovery. Accordingly, psychiatrists, “began stressing the environmental dimensions of mental disease and the efficacy of outpatient-based therapy and preventative care.”<sup>95</sup> This transition was projected to incur savings that would otherwise be reserved for maintenance of both the patients upkeep and that of the mental hospital itself. Community-based services would, in theory, prove to be more cost effective.

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<sup>92</sup> Bonita Weddle, *Mental Health in New York: A Historical Overview*. New York State Archives. Publication No. 70. (1998) 2.

[http://www.archives.nysed.gov/common/archives/files/res\\_topics\\_health\\_mh\\_hist.pdf](http://www.archives.nysed.gov/common/archives/files/res_topics_health_mh_hist.pdf). Also see, See, “Predicts Increase in Mental Cases.”

<sup>93</sup> Grob, *The Mad Among Us*, 191.

<sup>94</sup> Grob, *The Mad Among Us*, 191-192.

<sup>95</sup> Weddle, *Mental Health in New York*, 6.



Postwar innovations and theories surrounding the nature and treatment of mental illness and disease was supported by state and federal sponsored research at the request of professionals practicing medicine and psychiatry. This is evident in examining the efforts of Robert Felix, head of the Public Health Service Division of Mental Hygiene and the passing of the National Mental Health Act in 1946; the Hill-Burton Act of 1946, and the establishment of the National Institute for Mental Health (NIMH) as a division of the National Institute of Health in 1949. The totality of legislation passed, and agencies created during the immediate post-war years "further increased federal involvement in mental health care."<sup>96</sup>

Paralleling progress at the federal level, the state of New York passed legislation creating the New York State Mental Health Commission (SMHC) in 1949, which was "charged with creating a master plan for state mental health programs."<sup>97</sup> This plan would include the recruitment and training of mental health personnel, arranging both in- and out-patient services, sponsoring research, and acting as a mediator in arranging the activities of public and private agencies. Following, in 1954, the Community Mental Health Services Act (CMHSA) was passed in New York, which empowered counties or cities of fifty-thousand people to establish community mental health boards (CMHB's). CMHB's were charged with meeting the mental health needs of their communities including preventative, treatment, and educational services.<sup>98</sup>

Though the rate of development of New York's CMHB's was slow and uneven, the states CMHSA has been identified as a catalyst for legislation at the federal level.

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<sup>96</sup> Weddle, *Mental Health in New York*, 6., Grob, *The Mad Among Us*, ch 8-10.

<sup>97</sup> Weddle, *Mental Health in New York*, 6.

<sup>98</sup> Weeble, *Mental Health in New York*, 8.; Grob, *The Mad Among Us*, 234-235.

This is particularly evident under the administration of President John F. Kennedy; whose family had a personal interest in the care of persons with mental illnesses and diseases.<sup>99</sup>

President Kennedy would advocate for mental health care reform, resulting in the passing of the Community Mental Health Centers Construction Act (CMHCCA) in 1963.

\$848,000,000 in federal funds was to be disbursed over the course of ten years towards the construction of community mental health centers under programs administered by the state, research centers for mental retardation, and public and nonprofit treatment facilities for the retarded, front initial staffing costs, and provide training for teachers of handicapped students.<sup>100</sup>

Kennedy predicted that his program could reduce the number of hospitalized patients throughout the county by half. The Presidents ambitions were supported by state officials concerned with the rising cost associated with long-term hospitalization, advocates for a more liberal mental health care system that emphasized the rights of the patients and de-emphasized the restrictive nature surrounding institutionalization, and medical personnel who believed “even more can be done if community mental health centers are built all over the nation so that patients can be treated at home or with only brief stays in a center close to home.”<sup>101</sup> Together, the mental hospital was increasingly perceived as an outdated model of treatment. This belief was encouraged through the

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<sup>99</sup> “The State of the Union.” *Newsday*, January 15, 1963, <https://search.proquest.com/docview/915180908?accountid=38976>.

<sup>100</sup> “JFK Asks Bold Mental Care Plan.” *Newsday*, February 5, 1963, <https://search.proquest.com/docview/915169674?accountid=38976>. “JFK’s Mental-Aid Plan Passes Senate.” *Newsday*, May 28, 1963, <https://search.proquest.com/docview/914355927?accountid=38976>., JFK’s Mental-Aid Plan Passes Senate.” Also see, “New Era for Mental Patients’ Rights.” *Newsday*, November 30, 1964, <https://search.proquest.com/docview/913625972?accountid=38976>., Grob, *The Mad Among Us*, 257-258., Weddle, *Mental Health in New York*, 12.

<sup>101</sup> “JFK’s Mental-Aid Plan Passes Senate.” Also see, “New Era for Mental Patients’ Rights.” *Newsday*, November 30, 1964, <https://search.proquest.com/docview/913625972?accountid=38976>.

importation and adoption of innovative modes of treatment of mental illness and disease which would cast the transition to community-based services a likely reality. This includes intensive forms of treatment such as shock therapy and the prefrontal lobotomy, all of which inspired a sense of optimism among professionals.<sup>102</sup> The arrival of Thorazine and other mood-altering drugs in 1955 was widely endorsed by medical and psychiatric personnel. While they did not cure mental illness or disease, psychotropic drugs improved patients' behaviors, making their conditions more manageable and enabling them to live productive lives outside the walls of the institution.

While these innovative treatments and therapies stand at the forefront of professional and public consciousness regarding psychiatric care of the mid-twentieth century, perhaps the most underscored policy was the Open-Door Hospital. Popularized by British psychiatrists, advocates both abroad and at home acknowledged that the prison-like arrangement of the institution infantilized patients and stunted their recovery. To remove evidence of a restrictive environment – bars on windows, fences, and simply unlocking the doors – would restore a sense of dignity to the patients while enabling them to be more independent by making responsible decisions, all of which would encourage their individual recovery while reintegrating them within the community. The prospective results of the policy were addressed by hospital administrators and personnel; namely, how the patients would respond to their liberalization. Dr. T. P. Reese, a psychiatrist at the Corydan Mental Hospital in Britain where the program was tested, reported that patients did not take advantage of the policy and would freely return to the hospital. Incorporated alongside of day care and night hospitals, these policies would allow the

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<sup>102</sup> Grob, *The Mad Among Us*, 181-183.

mentally ill to be treated within the community, relegating institutional stay to a temporary role in the treatment of the mentally ill.<sup>103</sup>

The Open-Door Hospital policy appealed to policy makers and officials in the state of New York. In early 1957, assistant commissioner, Dr. Robert C. Hunt and five hospital directors of New York State institutions participated in a study tour abroad to view the policy, also known as the Open-Ward Policy or Open-Door Policy, in action.<sup>104</sup> The tour also explored how community-based services were integrated into and functioned in a comprehensive system. Following, it was recommended that the policy be applied in New York State. The St. Lawrence State Hospital in Ogdensburg, N. Y. had previously experimented with the policy; Beginning in 1955, there were only two open wards at St. Lawrence. By 1957, about eighty-percent of the patients were “free to go to the store, to church, etc.”<sup>105</sup> By the close of the 1958 fiscal year, more than ninety-four percent of patients were reported to be on open-wards at St. Lawrence.

At this time, the open-door program was established as an official department policy with the understanding that each hospital “would proceed at its own pace to open wards and revise procedures as indicated in terms of the local situation.” Presumably, the possibility of implementing the program on a wide-spread basis was aided by the introduction of psychotropic drugs and surgery’s, both of which were reported to have

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<sup>103</sup> “Dr. Snow Describes Visit to English Mental Hospital.” *Ogdensburg Journal*. April 13, 1957, <http://nyshistoricnewspapers.org/lccn/sn84031165/1957-04-13/ed-1/seq-3/>, Weedle, *Mental Health in New York*, 8-9.

<sup>104</sup> The *Ogdensburg Journal* reports that the Albany Veterans Hospital had successfully experimented with the open-door policy as early as 1952. See “‘Open Door’ Policy Proves Success at Mental Hospital.” *Ogdensburg Journal*. January 3, 1956, <http://nyshistoricnewspapers.org/lccn/sn84031165/1956-01-03/ed-1/seq-5/>.

<sup>105</sup> “Open Wards Give Patients ‘Lift.’” *Ogdensburg Journal*. February 3, 1959, <http://nyshistoricnewspapers.org/lccn/sn84031165/1959-02-03/ed-1/seq-10/>.

made patients more responsive and manageable. In addition, it has been observed that the use of Thorazine and other medications, coupled with the open ward program, had reduced the use of restraints, and later, shock treatments and psychosurgeries. Availability of staff and personnel at each institution was a matter of consideration in order to maximize the efficiency of the program, as was the response of the community where the hospital was located, whose attitudes were intricate in the success, or failure, of the open-ward program. The open-door itself was a symbolic of a new philosophy surrounding the treatment of the mentally ill, “The open door policy means a good relationship between the hospital and the community; it means tolerance of the community towards the mentally ill; it means integrated and coordinated psychiatric services. Without the confidence and support of the community,” it was claimed, “an open-door hospital cannot be established.”<sup>106</sup>

The re-evaluation of the nature of mental illness, the availability of new therapies to complement this advancement of knowledge, and the active participation of the state and federal government served as a vehicle to realize the possibility of community-based services during the mid-twentieth century. The lack of uniformity regarding the rate of development of alternatives to long-term hospitalization would result in long-term complications and unintended consequences throughout the latter half of the twentieth-

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<sup>106</sup> *Seventieth Annual Report of the Department of Mental Hygiene State of New York for the Year Ended March 31, 1958*. (Albany, 1960) <https://hdl.handle.net/2027/mdp.39015069433533>. 3.; *Sixty-Ninth Annual Report of the Department of Mental Hygiene State of New York for the Year Ended March 31, 1957*. (Albany, 1958) <https://hdl.handle.net/2027/mdp.39015069433541>. 3. Also see, “Five Former Staff Men at Parley.” *Ogdensburg Journal*. June 19, 1957, <http://nyshistoricnewspapers.org/lccn/sn84031165/1957-06-19/ed-1/seq-5/>., “Tranquilizers Boon to Mentally Ill.” *Ogdensburg Journal*. February 4, 1959, <http://nyshistoricnewspapers.org/lccn/sn84031165/1959-02-04/ed-1/seq-10/>., “Mental Hospital Releases Gain.” *Ogdensburg Journal*. February 5, 1959, <http://nyshistoricnewspapers.org/lccn/sn84031165/1959-02-05/ed-1/seq-20/>.

century. It is, however, difficult to deny the rate of success of the efforts of policy makers and social reformers, as seen in the improvement and management of patients, the decline of hospital populations and fiscal savings incurred by the transition to community-based services.

Yet, owing to the uneven distribution of funds and availability of resources, the effects of mid-twentieth century legislation does not assume a consistent character. It would, therefore, be ill suited to generalize the way in which activity at the state and federal level impacted local communities. This obscures the lived realities of both the lay public and patient population in response to the diminishing emphasis on institutionalization and the institution itself. Rather, these broader public policies may be employed as a lens which to view the reorganization of local dynamics and popular attitudes within the community. It is within this framework that a proper examination of the social relations of Kings Park State Hospital may be obtained.

The state hospital at Kings Park was an active participant in the broader medical and psychiatric community. Beginning in the late 1930's and into the early 1940's, the hospital began to incorporate more intensive forms of treatment such shock therapies; psychosurgery arrived at Kings Park on November 13, 1951. However, surgical procedures were not as widespread as the use of Thorazine and other psychotropic drugs. Between January 1, 1955 and March 31, 1955, approximately five percent of the patient population received drug therapies. Within two years, at the close of the 1957 fiscal year, 4,602 patients were being treated with psychotropic drugs. As a result, the climate on the hospital wards was reported to have improved - morale among both patients and

personnel rose, less accidents were reported and the use of mechanical restraint and more intensive treatments decreased. Most worthy of note was the steady decline of the patient population. By the end of the 1955 fiscal year, there were 10,513 patients under treatment at Kings Park; the number of patients fell to 9,559 within five years.<sup>107</sup> The ability of the hospital to begin regularly discharging patients was aided by the gradual transition to community-based services. Previously, Kings Park had managed several mental health clinics and begun to expand its social services department as state and federal funding became available. As a result, more patients could be treated on parole or in out-patient services, thereby relieving congestion on the hospital's wards

This system proved to be more economical, though the number of admissions at Kings Park continued to grow. However, this rate of increase was offset by the number of persons discharged from the institution, the majority of which being acute cases. While the precise cure to mental illnesses and disease remained largely allusive, its management was becoming increasingly refined and obtainable. This improved spirit was reported to have an impact on the surrounding community. Then Director of Kings Park, Dr. Charles Buckman observes an "Increased confidence in this institution is indicated by greater interest of the general public and the increase in voluntary admissions."<sup>108</sup> The publication of the amendments of mental health care services helped to keep the public informed of the administrative functions of the state hospital. Further, the open ward

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<sup>107</sup> *Sixtieth Annual report of the Board of Visitors of Kings Park State Hospital at Kings Park, N. Y. to the Department of Mental Hygiene for the Fiscal Year Ended March 31, 1955.* (Utica: State Hospitals Press) 8, 19-20., *Sixty-Second Annual Report of the Board of Visitors of Kings Park State Hospital at Kings Park, N. Y. to the Department of Mental Hygiene For the Fiscal Year Ended March 31, 1957.* (Utica: State Hospitals Press) 10, 14-15., *Seventy-Second Annual Report of the Department of Mental Hygiene State of New York For the Year Ending March 31, 1960.* (Albany, 1963) <https://hdl.handle.net/2027/mdp.39015069433517>. 37.

<sup>108</sup> *Sixty-Second Annual Report of the Board of Visitors of Kings Park State Hospital*, 14.

policy enabled the patients to transcend the hospitals boundaries and enter the community, thereby providing direct insight into the hospitals social life.

The publics faith in the hospitals administrative and therapeutic abilities was, however, not without fault. The increasing visibility of the mentally ill within the community instigated tensions between sectors of the lay public, the mentally ill and the state hospital. This sentiment was intensified by a series of exposes which disrupted the community's trust in the institutions mission. Taken together, the limitation of the public's benevolence begins to take shape. These interactions of the mid-twentieth century serve as a window into the reconfiguration of popular attitudes as they pertain to the mentally ill and the mental hospital.

On the morning of January 22, 1953, seventeen male patients at the Kings Park State Hospital escaped from the institution. Hours later, sixteen female patients rioted against their attendants. None of the girls were reported to have attempted to escape, however, the patients turned a fire house against the attendants. Within forty-eight hours, on January 24, two additional male patients escaped from the hospital. All of the escapees were reported to have been located and returned to the institution within the week. Dr. Buckman commented that it was not uncommon "to have outbursts like the one Thursday morning spread to other wards."<sup>109</sup>

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<sup>109</sup> Kirk Price and Jack O. Grady, "17 Riot, Flee Kings Park." *Newsday*, January 22, 1953, <https://search.proquest.com/docview/879650096?accountid=38976>., "Search Continues for Six Inmates of State Hospital." *The Long Islander*. January 22, 1953, <http://nyshistoricnewspapers.org/lccn/sn83031119/1953-01-22/ed-1/seq-1/>., "Urge Governor Dewey Act to Prevent More Hospital Escapes." *The Long Islander*. January 29, 1953, <http://nyshistoricnewspapers.org/lccn/sn83031119/1953-01-29/ed-1/seq-1/>., "Riots, Escapes from Kings



The riot of January 1953 provoked a direct response from the Smithtown Town Board: Supervisor Paul T. Given dispatched a telegram to then Governor of New York, Thomas E. Dewey, emphasizing that “The citizens of our town respectfully ask that all necessary remedial steps be taken without delay,” warning that “breaks like the one at Kings Park could not be tolerated by citizens of Smithtown.” Dr. Buckman blamed the riot and escapes on the shortage of available personnel and salaries, variables which have become all too common concerning the hospitals deficiencies. By the close of the 1953 fiscal year, there was a total of 10,172 patients on the books at Kings Park State Hospital. 1,033 attendants were employed at the state hospital at the time; there was a total of 78 vacancies on the staff.<sup>110</sup>

The lack of available personnel proved to impede the operations of the state hospital. Curiously, press coverage of the riot and escapes fails to identify a catalyst for the incident. Coverage offered by *Newsday* directs readers attention to the events at the neighboring Pilgrim State Hospital which may have provoked the actions of the patients at Kings Park State Hospital.

On February 26, 1952, James P. Nicholson and Peter V. Montemurro, two 29-year-old ward attendants at Pilgrim State Hospital, were arraigned on charges of manslaughter in connection with the death of Marcello Martinez, a 37-year-old patient at the institution. Martinez, who was suffering from a paranoid condition had died on

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Park Stir Smithtown Officials.” *The Patchogue Advance*. January 29, 1953, <http://nyshistoricnewspapers.org/lccn/sn86071739/1953-01-29/ed-1/seq-2/>., “Escaped Patients Back in Hospital.” *The Suffolk County News*. January 30, 1953, <http://nyshistoricnewspapers.org/lccn/sn84031477/1953-01-30/ed-1/seq-7/>.

<sup>110</sup> *Fifty-Ninth Annual report of the Board of Visitors of Kings Park State Hospital at Kings Park, N. Y. to the Department of Mental Hygiene for the Fiscal Year Ended March 31, 1953*. (Utica: State Hospitals Press) 10, 40-41.

February 25, 1952 at the state hospital due to “natural causes.” Martinez, who was said to have been in good health and improving, was reported to have marked bruises when members of his family viewed his body. The District Attorney was notified, and an autopsy performed. It was discovered that Martinez had died of shock, a massive abdominal hemorrhage, and a crushed chest and abdomen. Nicholson and Montemurro, the ward attendants on duty at the time, were taken into questioning. Both men confessed to beating the patient, resulting in his death. Nicholson confessed that he had struck Martinez and admitted to falsifying hospital records to convey that ““no blows were struck.””<sup>111</sup> Nicholson was convicted of 2<sup>nd</sup> degree manslaughter and faced the maximum of a fifteen-year prison sentence. Montemurro plead guilty to the charge of injuring the life and health of an incompetent person as a misdemeanor.<sup>112</sup>

Less than a month following Nicholson’s conviction, his sentence would be suspended following the recantation of a juror who claimed that he was “coerced by his fellow jurors into agreeing on the guilty verdict.”<sup>113</sup> Though he expressed doubt concerning the legality of self-impeachment, County Judge Fred. J. Munder suspended Nicholson’s sentence. In addition, Judge Munder observed that a report by the Probation

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<sup>111</sup> “Hospital Patient Dies, Attendants Confess Beating.” *The Patchogue Advance*, February 28, 1952, <http://nyshistoricnewspapers.org/lccn/sn86071739/1952-02-28/ed-1/seq-1/>, “Two State Hospital Attendants Are Held for Beating Patient to Death.” *The Suffolk County News*, February 29, 1952, <http://nyshistoricnewspapers.org/lccn/sn84031477/1952-02-29/ed-1/seq-1/>, “Hospital Attendant Convicted in Slaying.” *The Suffolk County News*, December 12, 1952, <http://nyshistoricnewspapers.org/lccn/sn84031477/1952-12-12/ed-1/seq-1/>, “Jury Convicts Hospital Attendant of Mental Patients’ Fatal Beating.” *The Patchogue Advance*, December 18, 1952, <http://nyshistoricnewspapers.org/lccn/sn86071739/1952-12-18/ed-1/seq-2/>, “Nicholson Faces 15 Years in Prison.” *The Suffolk County News*, December 19, 1952, <http://nyshistoricnewspapers.org/lccn/sn84031477/1952-12-19/ed-1/seq-3/>

<sup>112</sup> “Hospital Attendant Enters Guilty Plea to Injuring Patient.” *The Patchogue Advance*, February 12, 1953, <http://nyshistoricnewspapers.org/lccn/sn86071739/1953-02-12/ed-1/seq-8/>,

<sup>113</sup> “Juror Wants to Change Decision in Hospital Attendants Conviction.” *The Patchogue Advance*, January 8, 1953, <http://nyshistoricnewspapers.org/lccn/sn86071739/1953-01-08/ed-1/seq-7/>,

Department recognized Nicholson's good reputation and character, "I can't ignore that. I feel that a person with good character, and good previous reputation isn't going to be helped or punished by confinement to prison."<sup>114</sup> The Defense Council claimed that his client was in fact less to blame than "the system," citing that Martinez "was so physically rotten that the slightest blow could have killed him." Attention was directed towards the Department of Mental Hygiene for placing a man in such condition, "knowing that he is almost on the point of death" with forty-two other people, under the care of Nicholson and Montemurro, "neither of whom had any education, neither of whom knows a thing about medicine and neither of whom knew what the condition of this man was."

*Newsday's* coverage of the events at Kings Park State Hospital on January 22, 1953 observe that the riots "broke out within hours of the freeing with a suspended sentence of a Pilgrim State Hospital attendant in the fatal beating of a patient last February." However, "whether there was any connection was not determined immediately." Whether the events at the neighboring state hospitals on Long Island are interconnected remains entirely speculative. Yet, both instances draw attention to the deficiency's characteristic of mental hospitals during the mid-twentieth century; namely, the shortage of adequate personnel due to an insufficient pay scale. Months following the arraignment of Nicholson and Montemurro, *Newsday* published a seven-part series entitled "Walls of Fear," each installment evaluating the operations of the state hospitals on Long Island, "Are they doing their jobs?" The articles covered a variety of topics from treatments, to the conduct and training of employees, and first hand accounts from former

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<sup>114</sup> "Hospital Attendant Gets Probation in Death of Pilgrim State Inmate." *The Patchogue Advance*. January 22, 1953, <http://nyshistoricnewspapers.org/lccn/sn86071739/1953-01-22/ed-1/seq-2/>.

patients and staff members alike. A reflection of the concerns raised by the death of Martinez; the series served as an expose of the lived realities of mental patients residing within America's mental hospitals under such hardships.<sup>115</sup>

The portrayal of the social life of the state hospitals on Long Island embodied the potential to sway public opinion as it relates to the support and use of mental hospitals. However, press coverage of this type, while undeniably valid and a matter of great concern in the treatment and care of the mentally ill, may overshadow the more therapeutic foundation of an institution. It may therefore be worthwhile to explore as to whether the cases of abuse and negligence were isolated incidents in the history of a particular mental hospital, or a common occurrence. What does appear rather certain is that hospital administrators, former patients and staff alike believed that the present system of treatment and care needed to change. This reconfiguration presented itself in the form of the expansion and emphasis on community-based services and treatment, which displaced the authority of the institution in favor of a therapeutic communal environment.

The implementation of the open ward policy at Kings Park State Hospital is of interest given the interconnectivity between the mentally ill and the community of Kings

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<sup>115</sup> Madeline Ryttenberg, "Walls of Fear." *Newsday*, June 9, 1952; <https://search.proquest.com/docview/872241279?accountid=38976>., Madeline Ryttenberg, "Walls of Fear" *Newsday*, June 10, 1952, <https://search.proquest.com/docview/872966097?accountid=38976>., Madeline Ryttenberg, "Walls of Fear." *Newsday*, June 11, 1952, <https://search.proquest.com/docview/871710064?accountid=38976>., Madeline Ryttenberg, "Walls of Fear: Pillow Cases, Slaps Help 'Handle' Patients at Big Mental Institution." *Newsday*, June 12, 1952, <https://search.proquest.com/docview/871726879?accountid=38976>., Madeline Ryttenberg, "Walls of Fear." *Newsday*, June 13, 1952, <https://search.proquest.com/docview/872268691?accountid=38976>., Madeline Ryttenberg, "Walls of Fear." *Newsday* (1940-1990); June 14, 1952, <https://search.proquest.com/docview/872996349?accountid=38976>., Madeline Ryttenberg, "Walls of Fear." *Newsday*, June 16, 1952, <https://search.proquest.com/docview/872230438?accountid=38976>.

Park. *The Reporter* recalls that it was “the biggest shock” to employees, “How could you release so many of those patients from violent wards, give them honor cards and let them roam the grounds?” In practice, the open-ward program was “the best thing that ever happened for some of those confined to disturbed wards.” The freedom from confinement was termed a therapy into itself, patients “occupying themselves with outside working habits, bothering no one, and contributing to the hospitals appearance.”<sup>116</sup>

Local memory supports the observation expressed by *The Reporter*. Even so, as with any innovative therapy, the open-ward policy was not without its critics. Following a murder committed by an escaped mental patient, a Suffolk housewife motioned for a deep look at the open-door policy. Hospital administrators maintained “that the majority of the patients should not be “penalized”...simply because a small minority may get loose and injure themselves.” The housewife claims that the purpose of institutionalization was to ensure that the patients do not harm themselves, “Our legal system is based on the premise that we must protect the innocent,” she stated, “the “open door” policy has permitted the innocent to be endangered by the mentally ill, in the name of “kindness” to the mental patient.” The recent homicide and five previous incidents where “innocent people” were “slaughtered” serves as evidence “that society cannot afford this sort of “kindness”...”<sup>117</sup> Implicit is a limitation to the benevolence offered by society to the mentally ill. This tensions takes further shape as per press coverage concerning the construction of a halfway house for discharged patients. The event was reported to have been picketed by persons who had also been active in protesting the new

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<sup>116</sup> “Memory Lane – How Sweet it Was!” *The Reporter*. 10:2. December 1974.

<sup>117</sup> “County Irritant: Letters to the Editors – Mental Hospitals: Are They Being ‘Too Kind?’” *Newsday*. December 2, 1961, <https://search.proquest.com/docview/899127204?accountid=38976>.

site for a state school for children with developmental disabilities in Melville, N. Y.<sup>118</sup> The housewife's request for "application of controls over the patients' activities" appears contradictory to the premise of the open-door program, in that it restricts, rather than encourages, the patients' freedom and responsibilities. Moreover, this sentiment, perhaps, suggests a misunderstanding, or resentment, on part of members of the community of the administrative functions of the state hospital moving into the mid- and latter-half of the twentieth century.

Kings Park State Hospital continued to participate in public relation activities in order to better educate the community as to the course of treatment and care within the institution. Tours and lectures were offered during the observance of Mental Health Week at the institution, "in order that a better understanding of the nature of mental illness, its prevention and treatment, its success and failure, may be appreciated by the community."<sup>119</sup> In addition, in March 1955, Dr. Buckman, and Dr. Robert Wagner, supervising psychiatrist at Kings Park, served as lecturers in a course on "mental first aid," the first of its kind offered in Suffolk. Sponsored by the Suffolk County Mental Health Association and Kings Park State Hospital, the course was intended to brief and prepare law enforcement agents on how to appropriately engage with persons suffering from mental and emotional abnormalities.<sup>120</sup> That this lecture series was offered

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<sup>118</sup> "Launch New Project." *The Long Islander*. April 7, 1960, <http://nyshistoricnewspapers.org/lccn/sn83031119/1960-04-07/ed-1/seq-28/>.

<sup>119</sup> "Kings Park to Note Mental Health Week." *The Patchogue Advance*. April 29, 1954, <http://nyshistoricnewspapers.org/lccn/sn86071739/1954-04-29/ed-1/seq-17/>., "Operation Friendship in Program at Kings Park Hospital." *The Long Islander*. April 23, 1959, <http://nyshistoricnewspapers.org/lccn/sn83031119/1959-04-23/ed-1/seq-22/>., "'Open House' Planned at Kings Park." *The Long Islander*. April 26, 1962, <http://nyshistoricnewspapers.org/lccn/sn83031119/1962-04-26/ed-1/seq-17/>., "Via the Grapevine." *The Suffolk County News*. May 3, 1962, <http://nyshistoricnewspapers.org/lccn/sn84031477/1962-05-03/ed-1/seq-9/>.

<sup>120</sup> "Police Instruction Set in 'Mental First Aid.'" *The Patchogue Advance*. March 3, 1955, <http://nyshistoricnewspapers.org/lccn/sn86071739/1955-03-03/ed-1/seq-2/>.

alongside of the broader reorganization of mental health care services at the state and federal level can be interpreted as an effort to ensure that persons suffering from mental illnesses and diseases would receive proper public support and understanding within the community. Given the increasing emphasis on the community as the locus of treatment and care, encouraging a deeper understanding of mental illness, its treatment and care within the public sphere appears as essential to the success of community-based mental health care services as the construction of clinics and treatment centers. As observed in the construction and expansion of state hospitals, the success or failure of mental health care services continued to be dependent on the public's attitudes and perception of the mentally ill.

Amid the reorganization of mental health care services, professionals, staff members and laypersons alike wondered: what did the future hold for mental hospitals? It was beneath this reconfiguration of mental health care services during the latter-half of the twentieth century that Kings Park State Hospital gradually began to downsize its physical plant. In 1957, it was reported that the piggery was to be abandoned, "now that houses and schools are approaching nearer and nearer to the grounds."<sup>121</sup> Following, in 1961, it was observed that the budget for Kings Park contained no provision for the continuing operation of its farm."<sup>122</sup> Previously, both the piggery and farm had historically provided the hospital with food and resources, and served as a form of occupation therapy for patients. It was now more cost effective to secure resources from outside providers. Two years later, a series of bills passed through Albany which would

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<sup>121</sup> "Via the Grapevine." *The Suffolk County News*. November 27, 1957, <http://nyshistoricnewspapers.org/lccn/sn84031477/1957-11-27/ed-1/seq-9/>.

<sup>122</sup> "Farming May End at Kings Park State Hospital." *The Long Islander* April 27, 1961, <http://nyshistoricnewspapers.org/lccn/sn83031119/1961-04-27/ed-1/seq-19/>.

allow the Town of Smithtown, Kings Park School District and the Jewish Brotherhood of Kings Park to purchase land no longer being used by the state hospital.<sup>123</sup>

Given the availability of community-based services and reduction in the hospitals physical plant, the prospect that the state hospital at Kings Park may close its doors appeared likely. Yet, several developments appeared to have eased tensions concerning the longevity of the institution. Plans for an increase in salary for state employees were made in 1957,<sup>124</sup> and volunteer services at Kings Park continued to operate. In addition, the community continued to utilize the amenities provided by the institution to serve and house their own functions, as indicated by the use of York Hall. The prospect of closing the state hospital, then, would not only signal the end of a trend in the treatment and care of the mentally ill, but an end in the broader history of the town of Kings Park and Suffolk County region. Finally, in 1966, an eight-story modern medical-surgical building, known as Building 7, was opened at the state hospital.<sup>125</sup>

The investment and construction of the new medical-surgical building and additional patient wards presents itself as a physical sign of reassurance that the state hospital at Kings Park would continue to operate into the latter half of the twentieth century. To what extent this service would be available in at a time where the age of institutionalization was on the steady decline remained uncertain. The ability for a hospital to continue its operations appears to have been contingent on two contributing

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<sup>123</sup> "Albany Report by Assemblyman Prescott B. Huntington." *Islip Bulletin*. March 14, 1963, <http://nyshistoricnewspapers.org/lccn/sn95071007/1963-03-14/ed-1/seq-20/>.

<sup>124</sup> "State Passes 56 Bills." *The Long Island Traveler, Mattituck Watchman*. April 4, 1957, <http://nyshistoricnewspapers.org/lccn/sn84031433/1957-04-04/ed-1/seq-1/>.

<sup>125</sup> "State Plans New Medical Building at Kings Park." *The Long Islander*. February 21, 1963, <http://nyshistoricnewspapers.org/lccn/sn83031119/1963-02-21/ed-1/seq-7/>., "Items of Interest." *The Long Islander*. October 29, 1964, <http://nyshistoricnewspapers.org/lccn/sn83031119/1964-10-29/ed-1/seq-3/>. Medina, *Kings Park Psychiatric Center, Volume II*, 163-173.



forces: the first being the fiscal support and endorsement it received from the state and federal government. Investigations and exposes indicated an interest and investment at the broader political level to ensure the successful and adequate function of a mental health facility. The second basis of support for the hospital radiated from the community in which it served. Without the sympathetic trust of the general population in caring for the mentally ill, the state hospital would be equally unable to sustain itself.

In the case of Kings Park State Hospital, the bonds that enjoined the institution and the community had been interwoven since the asylums founding. This connection waxed and waned under external pressures characteristic of a modernizing society, war-time pressures, economic hardships and developments within the fields of medicine and psychiatry. While the community of Kings Park was not exclusively dependent on the institution to suit its needs, it is difficult to deny that the state hospital had come to serve a social function in as much as it did a therapeutic mission. The community of Kings Park, then, had invested a degree of its own operations in the functions of the institution. As a result, one may conclude that the town of Kings Park and the state hospital sharing its name formed a common identity throughout the expansion and development of both the public and institutional sphere. The history of the King Park State Hospital had become fused with that of the surrounding community, and vice versa.

Following the reorganization of mental health care services, it is worthwhile to consider what impact the transition to community-based services would ultimately have on the town of Kings Park in both the short- and long-term. As observed, the community had expressed a growing apprehension regarding the costly operation of the large mental hospital and the quality of care it offered to its patients. Yet, the hospital continued to

operate as a therapeutic institution and site for social interactions and activity. What appears to have changed is the nature and function of the hospital as a medical and psychiatric institution, and the perception of the lay population regarding the mental hospital and its charges. This, so it appears, did not entirely hinder the local dynamics persisting between the hospital and the community. Though the broader reconfigurations taking place at the state and federal level instigated a concurrent reorganization within individual localities. That the relationship persisting between the community of Kings Park and the state hospital amended and adapted itself under this new administration attests to the longevity and solidarity of these historic bonds. The very presence of the Kings Park State Hospital, then, may stand as a physical manifestation of the relationship between it, the mentally ill, and the broader lay public which would continue to persist throughout the latter half of the twentieth-century, for better or for worse.

### **Conclusion: Playground on the Sound**

Opened in 1935, Building 40 served a variety of administrative and social functions during its years of operation at the Kings Park State Hospital. This includes a women's infirmary, a children's unit and part of the mental retardation unit (MRU). Building 40 also served as a day care center for children of the hospital's employees. When it no longer served patients of the institution, its role as a day care center was extended to the community. Operating under the name Playground on the Sound, the day care provided services for children between eight weeks and five years old. It also operated a day camp program during the summer months for children six to eight years old. An advertisement in the *Northport Journal* indicates that the program drew great

interest from the community; in response, the day care expanded its hours of operation and opened two new classrooms in order to accommodate its increasing enrollment.<sup>126</sup>

Today, driving north along The Boulevard towards the Long Island Sound, all that remains of Building 40 and the Playground on the Sound is a vacant space. What had once served both the hospital and the lay public is now the future site of the New York State Department of Environmental Conservation Marine Resource Headquarters. While adaptive reuse of Building 40 was estimated to be more cost effective for taxpayers and require less construction, the DEC decided to construct an entirely new facility. Building 40 was demolished in January 2019, erasing its distinctive Y-shaped architecture and history of serving the hospital and the community from the landscape of the Nissequogue River State Park. Looming just yards from the construction site sits York Hall, which historically had served both the general population and that of the institution during the hospital's years of operation. In 2017, York Hall was listed as an Endangered Historic Place by Preservation Long Island. What the future holds for York Hall – and the last remaining buildings of the former Kings Park Psychiatric Center, all of which are eligible for the National Register of Historic Places – remains elusive.<sup>127</sup> Implicit within this uncertainty is not only the future of the history of the former state hospital at Kings Park, but that of its relationship with the town of Kings Park itself.

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<sup>126</sup> "The Playground on the Sound Inc." *Northport Journal*. August 2, 1985, <http://nyshistoricnewspapers.org/lccn/sn84031180/1985-08-02/ed-1/seq-8/>, "Summer Fun Day Camp Program." *Northport Journal*. April 4, 1986, <http://nyshistoricnewspapers.org/lccn/sn84031180/1986-04-04/ed-1/seq-8/>, Medina, *Kings Park Psychiatric Center, Volume II*, 229-231.

<sup>127</sup> "York Hall, Town of Smithtown, Suffolk County," Preservation Long Island, accessed April 1, 2019, <http://preservationlongisland.org/york-hall-town-of-smithtown-suffolk-county/>.

The latter half of the twentieth-century ushered in a new era concerning the care of persons with mental illnesses and disabilities. Post-war conceptions of mental illness, innovative therapies and programs coupled with state and federal funding for the construction of community-based services served as a catalyst for the gradual transition of the mentally ill from an institutional setting to a therapeutic community-based environment. This shift was aided with the introduction of Medicaid and Medicare, which provided funding assistance for the aged and poor. As a result, Grob observes “a lateral shift of patients among institutions” took place as witnessed in the transfer of elderly patients from mental hospitals to nursing facilities, “simply because Titles 18 and 19 made possible a substitution of federal for state funds.”<sup>128</sup> Finally, the aversion to long-term hospitalization was inspired by social movements characteristic of the 1960’s and 1970’s which emphasized patients’ rights and contested the authority of psychiatry, and by proximity, that of the mental hospital. This process of downsizing and decentralizing institutional-based mental health care known as deinstitutionalization - the theoretical frame work of which, as this paper has examined, arguably entered professional and lay circles prior to the United States entrance into World War II - would result in the consolidation and closing of dozens of mental hospitals throughout the county, including Kings Park.

The variables associated with federal and state legislation of the 1950’s-1960’s each played a role in the gradual decline and closing of the then Kings Park Psychiatric Center in 1996. This implies that no single factor – be it economic considerations, the developing etiology and treatment of mental illness, medical and disability programs, or

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<sup>128</sup> Grob, *The Mad Among Us*, 265-266.

the growing aversion to the quality of care offered at mental hospitals – was solely responsible for this significant event in the history of the former state hospital at Kings Park. Rather, the final decades of the Kings Park Psychiatric Center appear to follow a standardized narrative characteristic of mental hospitals throughout the state of New York, and the United States leading up to the turn of the century. However, as this project has revealed, to approach the history of mental health care services in America as a sequence of broad generalizations by and large obscures the lived realities of the state hospital and its surrounding locality. Conducting an individual analysis offers insight into the ways in which these broader policies enacted at the state and federal level were placed into practice at the local level, revealing a regional variation that contests standard generalizations.

That the Kings Park State Hospital and the town of Kings Park grew and developed alongside of one another is a distinguishing feature that should not be overlooked by prior conceptions of the role and function of mental hospital and the nature of mental illness. To do so bypasses not only the interconnectivity of the public and the institution, but the historical significance of the Kings Park Psychiatric Center in the history of mental health care in Suffolk County, and the state of New York. It would, then, be worthwhile to approach the subject of mental health care services free of outside influences rooted in popular misconceptions of mental hospitals and its charges. This implies that while the system of care of mental illness has been amended over the course of the twentieth century, much work has yet to be done surrounding the attitudes of the lay public as they pertain to mental health care services and those undergoing treatment. Evidently, despite the generational gap between present Kings Park residents and those

who had settled in the town while the hospital was in a period of decline, a strand of stigmatization continues to enjoin the lay public with the remnants of the former psychiatric center. What the best course of action is to reverse, or at the very least ease, the historical misunderstanding between the lay public and the mentally ill remains to be seen. However, the localized analysis of the social interactions between the residents of Kings Park and Suffolk County and those of the state hospital does indeed combat against the general narratives concerning the dynamic between both parties. Namely, refuting the notion that the mentally ill and the state hospital, were rejected by the wider lay population. In the case of Kings Park, members of the community were active participants in the administrative operations of the institution and the lives of the mentally ill and derived a number of benefits and resources from the facility. Accompanying the historical sentiment of stigmatization is that of benevolence, both forces continuing to operate alongside one another as the history of the Kings Park Psychiatric Center continues to be written and revised.

It is worthwhile to consider what role, if any, the community of Kings Park and the broader Suffolk County region, will play in preserving the history of the former state hospital, and later psychiatric center. While scholars and local historians have only begun to unearth and engage with the lived realities and historical significance of the hospital, advocacy for the preservation and development of its physical plant has likewise begun to enter public and bureaucratic consciousness.<sup>129</sup> Despite that the hospital has ceased to operate as a therapeutic institution serving the needs of the mentally ill, the grounds

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<sup>129</sup> See, Joan Mary Brierton, "Preservation Planning: An Approach to Land-Use Management: The King's Park Psychiatric Center, Long Island, New York" (Master's Thesis., University of Pennsylvania, 1992), Samson Mulugeta, "A Historians View of Kings Park." *Newsday*. Undated. Courtesy of the Leo P. Ostebo Kings Park Heritage Museum, Kings Park, N. Y. <http://kpheritagemuseum.net/>.

continue to a point of convergence for members of the community in the form of the Nissequogue River State Park. Visitors and park goers are enabled to find enjoyment, and perhaps solace, in the scenic surroundings which first drew the attention of Dr. John Cargyll Shaw and others as a site of refuge for patients then residing at the Kings County Lunatic Asylum. The former admissions and administration building of the Veterans Memorial Hospital Division presently serves as the park office and museum, while the remaining age and weather throughout the state park.

The former campus continues to be readapted in order to satisfy the needs of the broader community; yet, what do those needs presently entail? The prospect of adaptive reuse has no doubt been hindered by the state of neglect and decay exhibited by the last remaining buildings, their walls chipped and aged, painted with graffiti and windows shattered by senseless acts of vandalism. The current state of the physical plant has drawn the attention of the surrounding community, if only to illuminate diverging opinions of what should become of the former institution - development or demolition. While the prospect of revitalization is contingent on the feasibility of restoration and accompanying economic investment, equally as essential is the founding of a common ground among parties invested in the future of the property. In the case of Kings Park Psychiatric Center, this includes the local community of Kings Park, the broader Suffolk County region, and the state of New York. The exploration of the historical significance of the regional dynamics surrounding the history of the former Kings Park Psychiatric Center embodies the potential to serve as a foundation in which members of the lay public, local and state bureaucrats and social reformers may at last engage in a conversation in order to form a mutual understanding regarding the future of the former campus.

This paper has argued that the history of the Kings Park Psychiatric Center is that of a working relationship with the town of Kings Park. To exclude the voice and interests of the community in whatever the future may hold for the former grounds would be a disservice to the significance of the local dynamics that enabled the town to develop and preserve throughout the twentieth-century. Doing so would not only neglect the importance surrounding the region within the context of the history of Long Island and the state of New York, but that of the once Kings Park State Hospital within the broader narrative of mental health care services in the United States. As an integral part of the history of the town of Kings Park, and the state of New York, the Kings Park Psychiatric Center is deserving of preservation in the pages of history and the scenic landscape which it continues to occupy.



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