Iowa Hospital for the Insane
(State Mental Health Institute)
State Route 248, .5 miles south of
U. S. Route 20
Independence
Buchanan County
Iowa

HABS No. IA-54

HABS
IOWA,
10-INDEP,
1-

PHOTOGRAPHS

WRITTEN HISTORICAL AND DESCRIPTIVE DATA

Historic American Buildings Survey
National Park Service
Department of the Interior
Washington, D.C. 20240

HABS
IOWA,
10-INDEP,
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HISTORIC AMERICAN BUILDINGS SURVEY
IOWA HOSPITAL FOR THE INSANE
(STATE MENTAL HEALTH INSTITUTE)

HABS No. IA-54

Location: Independence, Buchanan County, Iowa

Present owner: State of Iowa

Present use: Mental hospital

Significance: The building was the second state mental hospital built in Iowa, and it followed functional design criteria essentially the same as those used at the first one, the construction of which had been started in 1855. In its process of construction, a general contract was awarded for the first work, but the contractor was unable to complete it. Subsequently, construction was carried out under a superintendent of construction hired by the state. In the first years he bought materials on contract and hired day labor and supervised it. In later years he contracted for work of the various trades (contracts for labor and materials both) and supervising and coordinated the work of these separate contractors.

PART 1. HISTORY

Dates of construction:

November 1868 to April 1873: Portions of the north wing, the rear center building, and the shell of the first two floors of the center building (the last roofed temporarily) were built.

1876 to 1884: The rest of the building was completed, a portion at a time.

Architect:

The architect was Stephen V. Shipman, whose office at the time of the designing was in Madison, Wisconsin. In 1871 he moved his office to Chicago. He designed mental hospitals at Elgin and at Anna, Illinois, and at Mendota and Oshkosh, Wisconsin, and a general hospital, the Presbyterian Hospital in Chicago. In Madison he designed the dome of the capitol and a

government post office. At least one of the Wisconsin hospitals had been designed before he received the commission for the hospital at Independence. Shipman was elected a Fellow of the Western Association of Architects in 1884, and a Fellow of the American Institute of Architects in 1887. He was born in 1825 and died on 12 November 1905 (1, p. 261; 6, p. 6; 15, p. 99).

Chronology:

1867-68			The General Assembly initiated action for the construction of a state hospital for the insane at Independence.
1868	June	8	The Hospital Commissioners chose the site.
1868			The Commissioners visited several hospitals for the insane in states east of the Mississippi and consulted physicians there and decided upon the "corridor form" of building plan.
			Stephen V. Shipman, then of Madison, Wisconsin, was hired as architect.
			Presenting of plans at Mount Pleasant Hospital for the Insane for recommendations.
1868	Nov.	7	Contract for construction of a portion of the north wing only was given to David Armstrong, and work was begun.
1871			Fruit and ornamental trees were planted.
1870	May	6	The state took over construction upon inability of the contractor to continue.
1870			The General Assembly appropriated the funds for the completion of the remaining portions of the north wing, for the rear center building, and for the engine house, and construction under superintendent and laborers was begun and enclosed by the end of 1871.
1872	April		Excavation of the main center building was begun.
1873	April	21	Hospital opened.
1876	Spring		Construction of south wing was begun. Completed, December 1881.
1877			Main center building completed.
1884			Construction completed.

Process of design:

Prior to 1850, very few hospitals for the insane had been established in the United States. In 1843 Dorothea Dix, beginning in New York state, brought to public attention the living conditions of the insane, who were then cared for in jails or in almshouses. In the latter "it was not unusual for paupers to be given responsibility for their custody and restraint," with cost generally the only determinant of the quality and extent of care (17, p. 278).

In 1854, President Pierce's veto of legislation which would have helped establish institutions for the insane through donation of public land led to the creation, in many states, Iowa included, of large state-supported institutions to accomplish this job (17, p. 23). The people of Iowa felt a deep obligation for the care of the insane and objected to placing the responsibility with the counties. Through 1900, nearly all the governors, superintendents, and trustees of the hospitals had favored state care of the insane, but "the erection of the state capitol building, the erection of other state institutions, and inadequate revenue for state purposes" had prevented the legislature from providing the funds as quickly as they were needed for all the necessary care (3, p. 21).

The Iowa Code of 1860 stated that the purposes of the insane hospitals in Iowa were twofold: to cure the curable and to restrain those who could not safely be allowed their liberty. "Idiots, defective from birth, were not admitted and cured patients were to be discharged immediately." Incurables and harmless patients were admitted as long as there was room for them (16, p. 56).

Iowa's first state-owned mental hospital was built at Mount Pleasant in the southeast quadrant of the state, opening its doors for patients in 1861 and reaching completion of its original building complex in 1865, ten years after commencing construction. Its capacity was 300 patients (4, p. 5; 5, pp. 5, 6).

W. G. Donnan introduced a bill into the state legislature during the winter of 1867 and 1868 to build a second state hospital for the insane and to locate it in or near the city of Independence, in the northeast quadrant of the state. Because of the crowded conditions in the Mount Pleasant hospital, Donnan's bill was passed and $125,000 was appropriated to begin construction. Requirements of the bill included: creation of a "Board of Commissioners to select a desirable location and to superintend the erection of buildings,"

and "acquisition of 320 acres of land within two and a half miles of Independence without expense to the state" (15, p. 99). Immediately upon passage of the bill, some Independence residents reacted in fear that "the patients would prove undesirable and constitute a menance to the community;" however, citizens of the city pledged the money for the purchase of the hospital property (2, p. 361). The divergence or shifting of views is of some interest.

The Commissioners of the new hospital first met in Independence on 8 June 1868 and selected from the several available tracts of land a property about one mile west of the city and the Wapsipinicon River. The land was "unbroken prairie, without tree or shrub", considered a good characteristic by some of the Commissioners, and at an elevation fifty to one hundred feet above the river, it was a high point in the vicinity (15, p. 99). There were reports of an abundance of pure soft water on the land (6, p. 4).

In deciding on the form of the new hospital, the Commissioners consulted physicians and visited several hospitals in Cincinnati, Washington, D.C., Philadelphia, and Trenton. Some of the physicians consulted recommended the cottage plan, in which a number of cottages are dispersed over a large land area. Ten to twenty patients were placed in each cottage. With this kind of plan, the patients generally required no confinement. The Commissioners, however, preferred to stay with the older ideas, since the "corridor form" was most generally used and was approved unanimously by superintendents in hospitals in this country. The Commissioners felt that the type of patients suitable for the cottage plan were the incurable and harmless, because of the freedom allowed, and that only five percent of the patients would be of this type. Inmates susceptible of cure and those of the dangerous type thus would be given better treatment and confinement in a building of the corridor form (6, pp. 4-6).

Having themselves already made some basic architectural decisions, the Commissioners then hired an architect, Stephen V. Shipman, who was then practicing in Madison, Wisconsin, "to prepare plans, drawings, and specifications" (6, p. 6). The plan that he presented to the Commissioners strongly resembled that published by Dr. Thomas S. Kirkbride in 1854, who at the same time published two influential articles entitled, "The Construction, Organization and General Arrangement of Hospitals for the Insane" (15, p. 99; 1.1, p. 369). At Independence, the predominant elements of the

total building plan were a central building four stories high connected to a wing on the north and to one on the south, each three stories high. The wings are each composed of three adjoining portions L-shaped in plan, so that the total plan of the building is in echelon form, the central building farthest forward. The eastern frontage (i.e., the length) of the total building was 726 feet (6, pp. 6, 7).

Shipman's plans were then taken to be reviewed at the hospital at Mount Pleasant, where George Josselyn, who was superintendent of construction there and who was soon to hold the same position at Independence, made several modifications and "improvements," as endorsed by the hospital superintendent, Dr. Ranney, to the extent "as to become almost new plans" (6, p. 6).[1] Among the resulting changes were:

(1) The substitution of the mansard roof for the ordinary pitched roof on the main center, and on the transverse sections. [Thus the main center building became five stories and the transverse portions of the two wings four stories].

(2) Removal of cupolas from the roofs of the transverse sections, and the addition of projecting towers to the longitudinal sections. These towers were partly rectangular and partly semi-octagonal, and increased the ornamental appearance of the building while affording means of ventilation.[2]

(3) The addition, entire, of the rear center building. [The center building was initially intended to contain the kitchen, laundry in the basement, offices and apartments for the families of the superintendent, steward, and other officers, and dormitories for domestics. The rear center building, as directed by Josselyn, was to provide space for kitchen and laundry facilities in the basement, a chapel, dining room, sitting room for patients, general storage, and sleeping rooms for female employees on the upper stories.]

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[1] Josselyn had accompanied the commissioners on their visits to the hospitals in Cincinnati, Washington, D.C., Philadelphia, and Trenton, according to a check paid to him for his expenses dated 30 March 1869. A second check was paid to him for a trip to Cincinnati on 19 June 1869, without accompaniment of the Commissioners.

[2] It appears from the photographs that this change was not carried through.

(4) Increase the fireproof qualities of the structure by the substitution of iron stairways for wooden, of masonry for wood in ventilating flues, and in other ways.

(5) Improvements in the means of ventilating (15, p. 100).

The construction plans of the building provided for foundation walls of limestone, brick upper walls using clay on the site for the manufacture of the brick, facings of Farley or Anamosa limestone, roofs of slate, and cornice of galvanized iron. The framework of the mansard roofs, eventually built, utilized brick arches and iron. The heating of the entire building was to be accomplished by the use of steam radiators enclosed in brick passageways in the basement. A duct connected the passageways with a "fan tower," which was to force fresh air over the radiators. In most of the building the registers were located in the central passageways and the heated air was to pass into the sleeping rooms through the transoms above the doors. The engine house, located directly to the west of the rear center building, contained the engine and boiler for supplying the steam for the building and also provided some sleeping rooms and storage room for "valuable machinery" (15, p. 100).

Each of the two wings, the north for male patients and the south for female, was divided into six sections--three longitudinal and three transverse. An adjacent longitudinal and transverse section constituted a ward. Thus with Josselyn's addition of the mansard story for the transverse portions of the wings, there were twenty-four wards in the hospital, and the total capacity was to be about 500 patients.

Process of construction:

The plans as described deal with a total building, and this was not built all at one time. According to the Commissioners the prices of material and labor had doubled since the time the Mount Pleasant hospital had been built. The costs of the hospital at Independence had been estimated at $125,000 for the central building and at least $225,000 for each of the two patient wings. The legislature appropriated only $125,000 and stipulated that the funds should be used for "any part that can be made complete and made ready for occupancy." Thus, although the Commissioners felt that the hospital should be erected all at one time, they had in fact to erect it a portion at a time, and they decided that the first portion should be

two transverse sections and one longitudinal section of the north wing (6, p. 7). They advertised for proposals, received bids, and awarded the construction contract to David Armstrong of Dubuque County for $88,114.[1] The contract was signed on 7 November 1868, George Josselyn was hired as superintendent of construction, and work was begun immediately.

Against the wishes of the Commissioners, the superstructure of the building was built of magnesian limestone from the Iowa quarries in Epworth, Farley, and Anamosa. Although such stone is noted to be among the most durable of the architectural stones, the Commissioners would have preferred to use brick instead, because they felt that limestone was unnecessarily expensive and that brick walls would have saved from one to two hundred thousand dollars (7, p. 8). However, the act calling for the establishment of the hospital prescribed the use of limestone for the exterior walls. However, the Commissioners were able to save some money by foregoing the construction of a temporary building for kitchen facilities and for heating and ventilating equipment. Such a building could have been built with the money remaining from the original appropriation, but the Commissioners decided the expenditure would be wasteful and that they should wait for an additional appropriation from the legislature and use the remaining funds towards the completion of the total building. They requested funds for the completion of the entire north wing and construction of the central building, for a barn, and for planting trees and general landscaping (7, p. 9). In the spring of 1871 the hospital grounds were improved, including the planting of 200 apple trees, 50 cherry trees, and 100 ornamental trees.

The legislature wanted to know why the construction of the hospital at Independence was costing more than the one at Mount Pleasant. The Commissioners attributed the higher costs to the greater distance from quarries to the hospital, the large increase in the price of building materials during the intervening time, and the larger increase yet in the wages of labor. They realized that the last item was the major cost component (7, p. 9).

Armstrong, the general contractor, was in a difficult financial

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[1] A common method of advertising for bids was to publish in the Independence newspaper and send "marked" copies to all dealers who were likely to bid.

situation. By 1 December 1869 the walls of the three sections which he was building were built only up one story. Owing to an extremely wet summer and fall, it had been very difficult and costly to get materials on the grounds. His funds were nearly exhausted, since he was able to draw payment from the state treasury for only seventy-five percent of the work done. His sureties, however, offered to make an advance funding, allowing him temporarily to continue his work. During the winter much was done in preparation for spring construction, but again he ran short of funds, and at this time his sureties refused to advance him any more money. In April 1870 the state government decided to relieve him of his contract and to take over the responsibility for payment of all contracts made for materials for the building (7, pp. 4, 11). The legislature in 1870 appropriated an additional $165,000 for the erection and completion of the remainder of the north wing, the rear center building, and the engine house "with the least possible delay." Together with the amount unexpended by Armstrong, the total money available was $231,557.

For the continuation of construction the Commissioners decided to follow a provision of the legislature allowing for the employment of "laborers by the day or the month. . .and to purchase all materials necessary to be used in the construction. . .and to carry on the work under their own immediate supervision under the agency of George Josselyn," superintendent of construction. Josselyn hired bricklayers, stone masons, carpenters, and common laborers, built carpenter and machine shops for woodworking, and obtained machinery for the manufacture of sash and doors, sawing and dressing lumber, and working moldings (7, p. 4).

By mid August 1870 the walls of the three sections which Armstrong had begun were ready for the roof, and these sections were completely enclosed before winter. Also the foundations and basement walls for the rest of the north wing, the rear center building, and the engine house were laid, and by the end of October walls of the latter two were ready for roof and were finished before winter, with the exception of their cornices. During the winter the workers were employed preparing materials for spring use. The newly constructed boiler room of the engine house was utilized for stone cutting (at reduced wages) and for carpentry in making frames, sash, and doors. Also the kitchen in the basement was used for a sheet-metal shop. The enclosed portions of the wings were prepared for plastering. By the middle of September 1871 the remaining sections of the north wing were

ready for roofs and by December were finished, except for the lower cornices. In April 1872, excavations for the main center building were started, cellar walls finished by 1 July, and walls built up two stories by 1 October. By constructing a temporary roof over that part of the building, an enclosed connection was possible between the patient wing and the rear center building, although the upper three stories of the main center building were not completed for another five years (10, p. 10). Josselyn thought that the work could have proceeded faster if the legislature had provided the funds promptly when they were needed. He estimated that the entire north wing, rear center building, and the engine house could have been finished and ready for occupancy by 1 December 1872 and the walls of the main center building finished sufficiently so that the proper connections in the basement could have been made for air ducts, steam and water pipes, and the systems by which food was distributed to the patients by means of dumbwaiters. He also estimated the construction cost of the south wing at $227,500, as compared to an estimate of $225,000 made before any construction had started (7, pp. 14, 18).

In 1872 the legislature made an appropriation of $200,000, which was the amount that was requested, "' to make provisions for the accommodations of the proper officers and attendants of the hospital, and for the reception, custody, and treatment of 200 patients'" (8, p. 4). However, according to the Joint Committee, it was owing to "unexpected advances in prices of labor and building materials" that work on these facilities was not completed as expected before the funds were exhausted (9, p. 4).[1] The required additional funds were not given because the state treasury was empty, and it was necessary to curtail work and to dismiss all workmen "who were unwilling to receive warrants on the state treasury as payment" (8, p. 5). The anticipated opening of the hospital was delayed until March or April 1873. Problems multiplied, with expenses of twenty-five dollars a day to warm the building enough for workmen to continue, and on 4 January, the Commissioners met to consider discontinuing the work altogether. Because of mortar still unhardened and pipes containing water, and considering a delay of the opening until July, the Commissioners allowed the work to continue.

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[1] The difficulties were possibly a direct result of the Chicago Fire of 1871. The increased demand in Chicago, whence Independence received many building materials, caused shortages and occasioned a cost increase of from thirty to forty percent.

Finally on 21 April 1873 the hospital was ready to accept patients, and on 1 May the first patient was received.

In the first report, in 1873, the Board of Trustees of the hospital called for the completion of the total building, since they felt that the institution could not "be administered economically until it is finished according to its plan and has its full complement of patients." In their biennial report of 1875, they recommended an annual state appropriation of $100,000 "to be continued until the completion of the south wing," which would be identical to the north wing and would serve female patients. The Trustees suggested that two sections be completed at the end of each year. For some time hospital personnel had been complaining about overcrowding--from as early as 1 December 1873, not quite a year after the opening of the hospital. The common complaint was improper classification of patients, especially in regard to placing patients of both sexes in the same wing. The superintendent reflected this fact in his report of 1876, saying "that no hospital can be complete or the necessary arrangements and details put into execution, with both sexes in one wing and when all the wards are crowded to their utmost capacity." Looking forward to the completing of the south wing, the superintendent in his report of 1878 said, "If the hospital was completed, giving suitable separation of the sexes, we could throw open the doors of most of the wards, giving free access to the airing courts during pleasant weather."

Early in the spring of 1874, work was begun on the unfinished portions of the second transverse and longitudinal parts of the north wing, which were ready for occupancy in the fall. The main center building, as had been mentioned, had been completed only up through the shell of the second floor and had been roofed temporarily. Also in 1874, its walls were brought up their full height and the framing of the mansard roof, which formed a fifth story, was begun. In 1875 the interior finishing of the first two floors was completed and they were occupied by the end of that year (9.1, p. viii). In 1876 the fourth and fifth (mansard attic) floors were finished and, by the end of the year, were occupied; and in 1877 the third floor, neglected to this point, was completed. At this time the center building was entirely complete, except for the portico (10, pp. 9, 10). The making of brick and the supplying of limestone had been done according to contract, and additional brick had been purchased already manufactured. Plastering was also done under contract (9.1, p. viii).

The construction of the south wing was handled by means of contracts; and similarly, individual contracts were awarded to the various trades and there was no general contractor. In the spring of 1876 McKay and Lundy of Independence received the contract for building the exterior basement walls of the first two sections of the south wing adjoining the center building and for furnishing granite and other materials. Their contract called for them "to furnish materials, and do this work, with concrete foundation and footing stone, for the sum of $6250."[1] In the spring of 1877, the Independence Manufacturing Company received the contract to "furnish materials and make all frames, doors, and sash for the wards started in the south wing" (10, p. 4).[2] The Commissioners reported in 1878 that all contracts had been completed to their satisfaction "and at less cost to the state then could have been done by the day" (10, p. 5). They also pressed for an appropriation of $135,000 for the completion of the remaining four sections of the south wing, with the explanation that "it is a great loss each time the work stops and the hands discharged and it is difficult to get good reliable workmen when they are needed" (10, p. 3). They suggested, in order to make the package look more desirable to the legislature, partial appropriations during the intervening years: $25,000 in 1878, $50,000 in 1879, and the remaining $60,000 in 1880, in order to complete the hospital.

While the south wing was under construction often more work was accomplished than had been estimated under a given appropriation. According to Josselyn, "prices of materials, and labor are much lower than when the estimates for these sections of the building were estimated," and "we have been able to do more work with the appropriations made than expected" (10, p. 11). The price of iron declined to half what it had been in previous years, and as a result more iron could be used. By the time of Josselyn's report in December 1881, the hospital finally had separated the sexes in distinct wings, women in the south and men in the north. Since his report of Decmeber 1879, a transverse and a longtitudinal section had been added

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[1] Josselyn reported that the contract for furnishing stone went to James of Anamose, with cutting by McKay and Lundy, who were the lowest bidders. The setting of the stone and the brickwork were to be done by day labor, as well as the making of brick in the old yard.

[2] Part of the contract for Independent Manufacturing Company to purchase the equipment of the hospital had previously been used to make frames, doors, and sash.

to the south wing. The resident population of 1 December 1881, that is before the construction of the last two sections, was already 522 (274 men and 248 women), with attendants and other employees totaling 99. Although the capacity had been anticipated to be 500, the addition of the wards on the top two floors of the main center building increased the number to about 600 when the total plan of the hospital was completed.

The construction of the fifth and sixth section of the south wing completed the total plan. The legislature appropriated funds for this work, and on 30 March 1882 the Commissioners advertised for proposals for "excavating, putting in the concrete and footing stone, and for furnishing materials, and building the basement story of these sections (11, p. 3). On 25 April 1882 the proposals were received and considered by the board and the contract was awarded to Netcott and Lundy. Work progressed as with the other sections of the south wing, with day laborers for masons and plasterers, and with the carpenters under contract. Dr. G. H. Hill, the Medical Superintendent of the Hospital, suggested putting in dormer windows for the mansard roof of the fourth story, sixth section of the south wing (11, p. 5).[1]

A windstorm of 22 June 1882 caused considerable damage and brought to the attention of the Board of Trustees the need for some kind of appropriations for emergency situations. All appropriations were always designated for particular needs, and there were no funds to take care of the damages caused by the wind storm, and the legislature was not in session, so they could not handle the matter. The Board suggested providing an extra fund for such occasions.

Upon completion of the total plan for the hospital in December 1884 (13, p. 9), there were accommodations for 340 male patients in the north wing and the two wards of the main center building, and for 260 female patients in the south wing, a total of 600. Patients were arranged in the wards in general according to the intensity of their illness, with "the most orderly and reasonable patients" nearest to the center or administrative building, and "those restless and requiring more attention were placed at the ends of the wings. On the first two floors were placed a diverse

[1] It is curious that no mention of dormer windows is given anywhere else, but all mansard roofs have them.

classification of patients: those expected to recover, recent admissions, inoffensive incurables, and the sick and infirm.

The third floor of each wing has devoted to epileptic patients and the fourth floor to the more mobile "able bodies but demented patients" (12, p. 21).

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*Number 14 omitted.

Abbreviations:

CBR: Commissioners Biennial Report

HIMP: Hospital for the Insane, Mount Pleasant

IHII: Iowa Hospital for the Insane, Independence

LD: Legislative Documents

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