

# THE PATIENTS WHO LIVED HERE



OVER THE COURSE OF ITS 135-YEAR history, a total of 65,000 patients were admitted to Northampton State Hospital. Some stayed a few days, while others lived here for 50 years or more.

In the early years, the patients were white Massachusetts residents—mostly farmers, laborers, domestics, or factory workers. They were joined by Irish immigrants transferred from overcrowded Boston facilities. Occasionally foreign-born patients outnumbered native-born. There were more women than men.

The most frequent cause for mental illness was listed as “unknown” or “hereditary.” Other reasons given were alcoholism, poor health, melancholia (depression), domestic trouble, death of a friend, disappointment in love, hard labor, religious excitement, post-partum depression, epilepsy, and head injury. It wasn’t difficult to commit someone to the asylum; it required only an order by a judge or physician and a family member. The asylum was a means of social control for people, such as the poor, physically disabled (especially deaf persons), immigrants, or “deviant” women. As one former patient said, “the hospital was a convenient place for inconvenient people.”

In the early 20th century, the patient population became more elderly. In 1890, admitted patients more than 60 years old comprised 10%; this grew to 33% by 1936 (mostly patients with dementia). By 1948, the percentage stood at 50%.



## TWO FEMALE PATIENTS

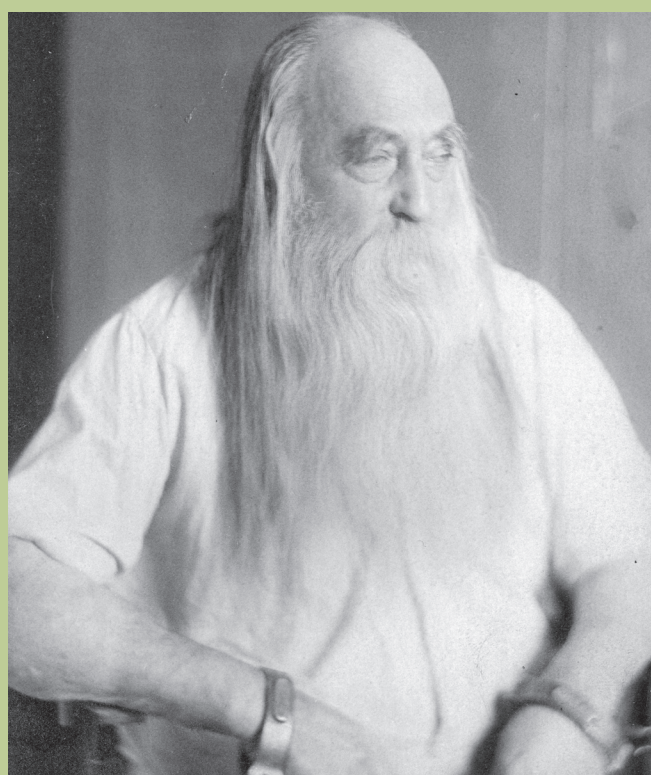
Unidentified patients, *circa* 1900. Most of the women were domestic or factory workers, whose illnesses were caused by heredity or senility. Most men were factory workers or farmers, and one third were mentally ill because of alcoholism.

Photo at left: Sherer & Moore. *The Life and Death of Northampton State Hospital* (Historic Northampton, 1994)



## DAYROOM, SIDE BY SIDE: 1920s AND 1967

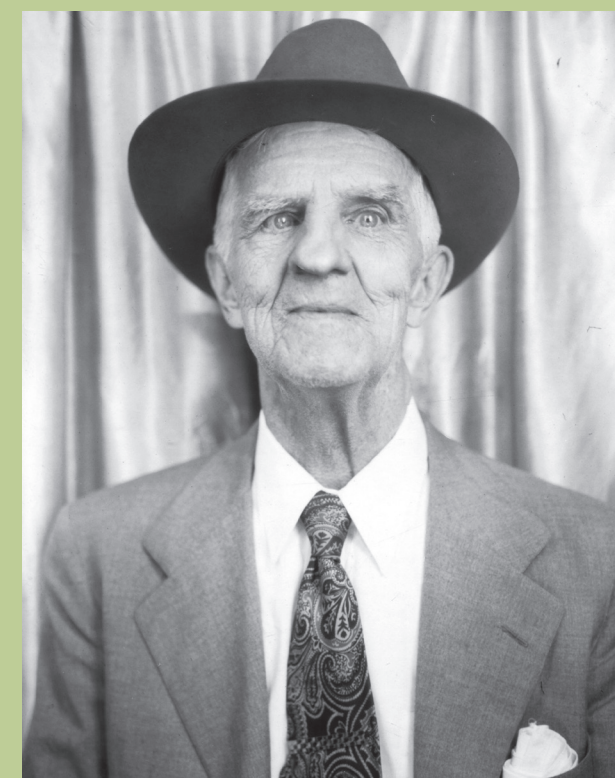
Left: The day room for males in the 1920s. On the right: The same dayroom in 1967 shows how the population had increased and aged. By 1948, half of those admitted had age-related senility.



## UNIDENTIFIED MAN IN SHACKLES

The first patients were transferred from hospitals in Worcester and Boston, and some were shackled during the trip. By the second month, the superintendent reported that he had stopped the use of all personal restraints, but later records show that straightjackets were used. The man in the photo is unidentified.

Four photos above: Moore & Schuleit Haber. *Images of America: Northampton State Hospital* (Arcadia Publishing, 2014)



## “THIS IS MY HOME. I’M NOT LEAVING.”

Isaac Heald, a friendly and gentle man and a patient for decades, shown here in 1955, opted not to leave, even though he lived on a parole ward which entitled him to walk downtown regularly.

## NORTHAMPTON LUNATIC ASYLUM

- 1856** Cornerstone laid
- 1858** First patients admitted
- 1864** Dr. Pliny Earle appointed superintendent
- 1900** Hospital was already well over capacity and described as “overcrowded”
- 1903** Legislative act changed name to Northampton State Hospital
- 1928** Construction of Memorial Complex on South Campus
- 1932**
- 1950s** Widespread use of medications introduced
- 1955** Peak patient population (*circa* 2,500)
- 1959** Hospital farm closed
- 1967** Work therapy discontinued due to changing legal environment
- 1969** Hospital organization changed from type and severity of disorder to geographically organized “unitization”
- 1970** Commitment hearings began; Community Project and Geriatric Care Team initiated patient placement, reducing patient population by two-thirds
- 1978** Consent Decree mandated reduction in patient population
- 1986** Old Main closed; remaining patients moved to Memorial Complex
- 1993** Last 12 patients left Northampton State Hospital
- 2006-2007** Old Main demolished

“As a result of this constantly increasing growth in numbers, we have been seriously handicapped in the care of our patients.”

—Annual Report 1922

“At night at bedtime the ward became very silent; and depending where you slept you were able to hear the staff members leave the ward, get in their cars talking to each other, start their cars and drive off. ... After they left everything went real quiet, and then you could hear the keys of the night charge nurse entering the ward. The first thing that would pop in my mind was, damn, I hate this place.”

—John, former patient

“Conditions at the Northampton State Hospital are not suitable for long term patient care ... physically, the [hospital] is deplorable ... treatment can’t go on here.”

—Blue Ribbon Commission on the Future of Public Inpatient Mental Health Services, 1980

“One reason for the slow but inevitable failure of the Northampton State Hospital to both provide adequate care for its patients and to treat them as they ought to be treated, was the inability of the hospital’s administrators to adapt to change. The hospital, an early leader in progressive treatment and an early supporter of those who pressed for these new treatments, began to lag behind.”

—Sanford Bloomberg, former psychiatric physician at Northampton State Hospital, 2006

