

SECTION 213 REPORT TO THE ADVISORY COUNCIL ON HISTORIC PRESERVATION

**U.S. Department of the Interior's Evaluation of the
Government Services Administration/National Capitol Region Rehabilitation of
Saint Elizabeths Hospital National Historic Landmark (West Campus) for the
Department of Homeland Security National Headquarters**

Washington, DC

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Introduction:

St. Elizabeths Hospital West Campus, a 176-acre tract located between Martin Luther King Junior Avenue and Interstate Highway 295 in the Anacostia section of Washington, D.C., is currently under consideration for redevelopment as the headquarters facility for the Department of Homeland Security (DHS). This parcel is part of the St. Elizabeths Hospital National Historic Landmark (NHL) District designated by the Secretary of the Interior on December 14, 1990. On January 12, 2007, John M. Fowler, Executive Director of the Advisory Council on Historic Preservation (ACHP) requested a special 'Report on the Redevelopment of St. Elizabeths' under Section 213 of the National Historic Preservation Act (16 U.S.C. §470u) "detailing the significance of (the) historic property, describing the effects of (the) proposed undertaking on the affected property, and recommending measures to avoid, minimize, or mitigate adverse effects." During the past nine months NPS staff has visited the NHL District, reviewed draft documents and followed the deliberations of the St. Elizabeths Hospital West Campus Consulting Party Working Group. On October 1, we received the Draft Environmental Impact Statement (DEIS) that defines the alternative plans developed by the Government Services Administration (GSA) for the reuse of the West Campus as the DHS Headquarters. The DEIS serves as the basis for the comments on evaluation of effects. This report speaks for the historic resource and explains how the DHS plans would affect this unique National Historic Landmark, a resource that is by definition one of the most important cultural, architectural and historical properties in the United States.

Significance:

St. Elizabeths Hospital is nationally significant for its associations with historical persons, events, architectural innovation and landscape design for over a century from the time that it was founded in 1852 until the mid-twentieth century. This legacy was officially recognized by the Secretary of the Interior's designation as a National Historic Landmark in 1990. The resource includes some 336 acres located along both sides of Martin Luther King Junior Avenue. The West Campus, the subject of this review, is the heart of the NHL District and contains the most significant landscapes, views, and buildings.

St. Elizabeths represents one of the most progressive, reform movements in our nation's history: the humane and professional treatment of the mentally ill. It is the direct descendant of initial improvements in mental health care begun in Great Britain in the late 18th century which influenced Quaker reformers at Friends Hospital in Philadelphia in 1818 (NHL 1999) which was developed further at the Institute of the Pennsylvania Hospital in Philadelphia (NHL 1965) by Thomas S. Kirkbride during the second quarter of the 19th century. Dorothea Dix, one of the most noted humanitarians and social reformers of the mid-19th century was instrumental in bringing the Kirkbride plan to Washington in 1852 and having it serve as the basis of the newly authorized federal hospital for military personnel suffering from mental illnesses. This movement towards humane and constructive therapeutic treatment of the mentally ill represented one of the most important reforms that swept the nation in the 19th century, transforming it from a culture of ignorance and neglect to one of respect and hope. One of the most important aspects of this approach was providing clean well lit and ventilated facilities in the midst of a healthy, rural environment where the patients could enjoy beautiful landscaped settings and benefit from working in the gardens and on the associated farm. This early form of occupational therapy became a hallmark of the Kirkbride approach.

Dix worked closely with Charles H. Nichols who served as the first superintendent until 1877. Dix (who had an apartment on the grounds of the hospital) and Nichols engaged Thomas U. Walter, one of the leading American architects of his generation (who served as Architect of the Capitol from 1851 to 1865 during the expansion of both the Senate and House wings and the construction of the present dome) to design the Center Building, the first and most prominent of the early buildings. This building improved on the Kirkbride design and was embraced by Kirkbride himself in his seminal work "On the Construction, Organization, and General Arrangements of Hospitals for the Insane". Known as the "echelon plan" or "the improved linear plan" it "afforded the best facilities for the thorough classification and inspection of the Patients, for ventilation and external views, and for the requisite sub-division of the pleasure grounds." This plan, first developed at St. Elizabeths, and still very much in tact today, was widely copied at hospitals throughout the United States during the last half of the 19th century. The Nichols tenure was also distinguished for its treatment of African Americans within the same institution as whites, although in segregated buildings.

In the late 1870s, Nichols' successor, William W. Godding, pioneered the first "cottage plan" scheme which was to become the standard in the field. This plan consisted of a series of detached buildings that featured dormitory accommodations and day rooms. In 1902 Godding's successor initiated another major expansion of the facility with thirteen buildings designed by the Boston firm of Shepley, Rutan and Coolidge. Four of these buildings were the first to appear on the East Campus, which had been primarily reserved for the farming operation up to that time. Most of these structures survive today offering a view of mental hospital construction over six decades that traces the developments and theories of the mental health field.

In addition to the architectural and landscape aspects of treatment the Hospital was noted for many other progressive practices. One of the first full-time pathologists in a public mental hospital was hired in 1884. Clinical and scientific research expanded in the early 20th century, leading the field in introducing these functions to mental treatment facilities. In 1907 experimental psychologist Sheperd Ivory Franz took charge of one of the first psychology laboratories. St. Elizabeths pioneered psychotherapy, hydrotherapy and malarial therapy. Superintendent William Alanson White, through his association with Carl Jung, made St. Elizabeths one of the first American hospitals to introduce psychoanalysis, and by 1914 created the position of clinical psychiatrist.

Perhaps the most remarkable aspect of the Landmark's significance is its high level of physical integrity. Not only did the site bear witness to an important transition in the way we care for the mentally ill, the evidence of the history on the site is remarkably complete. The evolution of the field of mental health is displayed through out the grounds like a great text. The many phases of development have been carefully maintained over the past 150 years and exhibit both historical importance and considerable beauty making it a potential site of both instruction and pleasure.

Effects of the Proposed Undertaking:

The GSA proposed adaptive reuse of the West Campus of St. Elizabeths Hospital poses serious, permanent alterations and destruction of multiple character defining features of the NHL. The cumulative effect of these changes would require that the facility in its entirety be considered for dedesignation as an NHL. The landscape setting so important to the design concept that forms the basis of Landmark recognition will be profoundly altered, both in terms of experience of the resource within the property and in the views of the property from outside the NHL, particularly from central Washington. Some buildings will be demolished and the degree to which surviving buildings will be altered remains to be determined, but the security measures inherent to the new use will most certainly require significant alteration. Archeological resources will be destroyed and potential for public use and enjoyment of the Landmark and its landscapes would be virtually eliminated. It also seems reasonable to conclude that once the new use is in place, any further alterations and demolitions by DHS could not be prevented. In general, this proposal calls for a treatment of the Landmark that is wholly incompatible with its most character defining features.

The DEIS provides the basis for these summary conclusions and states the results of such a reuse on page iii of the executive summary. These conclusions regarding impacts bear repeating here:

1. Direct, major, long-term, adverse impacts on historic buildings would occur due to demolition of some of the buildings on St. Elizabeths West Campus, and to the construction of three entrances along Martin Luther King, Jr. Avenue.
2. Direct, long-term, major, adverse impacts to St. Elizabeths' landscape would occur as features outlined in the Historic Resources Management Plan would be impacted.
3. Due to new construction, there would be direct, major, long-term, adverse impacts on views to and from the Center Building, views from the lawn, views from Congress Heights Historic District, and views to and from the West Campus Cemetery.
4. All alternatives would result in direct, major, long-term, adverse impacts on archeological resources due to new construction.

We concur with these conclusions and commend GSA for accurately assessing the damage that will occur to the NHL if this program is carried out. The uncontested destructive impacts of the proposed program are so extreme that negotiations have not produced an alternative, or the promise of one, that could possibly preserve the NHL. All four alternatives presented including the preferred alternatives, impose an extraordinary burden on the historic resource.

Historic Landscape: The 176-acre West Campus will receive over five million square feet of new construction. (By comparison, The Pentagon, one of the largest buildings ever constructed for the federal government, contains 3.7 million square feet.) The historic landscape has been analyzed in two major studies in recent years and the components of the design have been summarized in figure 4-3 of the DEIS. As described, all of the landscape in the West Campus is significant and integral to the historic resource. The vast majority is identified as either "Therapeutic, Ornamental Landscape", which includes and surrounds the main building clusters, or as "Agricultural Landscape" or "Cemetery and Woodland Slope". All of these landscapes are crucial to the integrity and significance of the NHL. Only the 27.4 acre "Service Landscape and Ravine" area might offer non-intrusive, relatively non-visible opportunities for new construction. However, all alternatives call for the construction of massive buildings on all landscape parcels with the exception of Landscape Unit 3, the Agricultural Landscape. At the very least, 27 of the 60 identified historic landscape features (DEIS p. 5-37 to 45) will be adversely affected. Of course, the new construction will not only directly damage landscape features, it will fundamentally alter the existing relationship of the historic campus buildings. The alternatives site plans all specify massive new construction in close proximity to historic structures that would fundamentally alter the views from and to the buildings and limit their views, both within the complex and from outside the complex.

Security Requirements and Public Access: In addition to the extensive new construction, the plans require improved security fencing. The existing perimeter fences and walls would need to be supplemented with an additional inner chain link fence that would establish a twenty-foot no-mans-land within the outer perimeter. The new security fencing will impose a major incompatible design change. The security requirements for the site will also result in severely limiting or totally eliminating the possibility for public access to the site and the interpretation of its social and architectural history. At this stage in the Hospital's history, more than a hundred and fifty years after its founding, public access in the context of a new use would provide an important opportunity to interpret the nationally significant history of the site. Barring such access, while not in violation of the Secretary's Standards, confronts the broader objectives of federal preservation programs.

Historic Buildings: Each of the alternatives would produce serious direct impacts on the historic structures. At least 29% of the contributing historic structures are slated for demolition with a cumulative loss of between 11 to 23% of historic floor space (DEIS p. 5-21). Specific treatments of buildings are generally not being considered at this level of planning. However, many of the buildings contain significant interior spatial arrangements as well as original finishes and features that will likely pose problems in the reuse of the structures. The structures cannot be treated as "shells" for purposes of the reuse plan without seriously compromising their integrity.

Recommended Measures to Avoid, Minimize, or Mitigate Adverse Effects:

The reuse plan set forth in the DEIS does not allow for any constructive criticism that would realistically bring the proposal into conformity with the Secretary's Standards for the Treatment of Historic Properties and the avoidance of consideration of dedesignation of the NHL should it be implemented. Reuse of the West Campus as a federal office park is certainly possible and would seem to offer the most likely opportunity for preserving the historic buildings and landscape. However, an appropriate reuse would require doing what GSA and other federal agencies have done at other major facilities, and begin with the evaluation of the historic resource, setting appropriate design guidelines and developing reuse proposals that work within the guidelines. We do not question the spatial and security needs set forth by DHS; we find that they are incompatible with the St. Elizabeths Hospital NHL. Pursuing the DHS program at St. Elizabeths will, in the words of the DEIS, have "direct, long-term, major, adverse impacts" on the Landmark which will deprive the nation of one of its most historically significant and unique resources. We encourage DHS to seek an alternative location where they will be free to pursue their needs unencumbered by historic architectural and landscape resources that were not intended to house their type of facility.

GSA is fully capable of pursuing an appropriate approach to St. Elizabeths; one that can both provide federal agencies with desirable facilities and at the same time offer the public a major cultural and recreational amenity. The opportunity presented by the reuse should preserve the site both for its intrinsic historic significance and its general appearance as one of Washington, D.C.'s most distinguished visual landmarks.

The potential to provide the general public and particularly the city neighborhood of Anacostia with a spectacular park and an interpreted historic resource is clear. St. Elizabeths West Campus served its originally intended use for nearly one hundred and fifty years. The vacating of the West Campus by the Hospital in itself constitutes an adverse effect that should be mitigated. Rather than now subjecting this noble resource to a use program far beyond its capacity, St. Elizabeths should be brought into the public light that it so richly deserves. This federal facility, born of the most ambitious motives of social reform, humanitarian treatment and medical progress, deserves to be respected materially and interpreted to the public. The achievements of a woman of conscience such as Dorothea Dix, and inspired hospital administrators such as Charles H. Nichols, and renowned architects such as Thomas U. Walter, deserve to be a part of the public historical experience. The fact that the historic use of the hospital largely prevented such public use is no reason why we, as a nation, should not seize the opportunity at this time. The destruction of St. Elizabeths Hospital is not necessary. To do so will mark a sad failure in the management of our most important historic sites.

Documents Included In the DOI Section 213 Review:

St. Elizabeths Hospital National Historic Landmark Nomination, NPS, 1990.

Draft Environmental Impact Statement for Department of Homeland Security Headquarters at the St. Elizabeths West Campus, General Services Administration, September 28, 2007.