August 2, 2013

Governor Martin O’Malley
Office of the Governor
100 State Circle
Annapolis, Maryland 21401-1925

Dear Governor O’Malley:

We write on behalf of the American Civil Liberties Union of Maryland, the Caucus of African-American Leaders, the Maryland State Conference of NAACP Branches, the Anne Arundel County NAACP, and the Maryland Disability Law Center, to ask the State of Maryland to investigate and publicly acknowledge the historical mistreatment of African-Americans in the state’s mental health system, particularly at Crownsville State Hospital, which, for half a century, was the only state hospital to admit significant numbers of African-Americans.

Specifically, we seek an investigation into conditions experienced by African-Americans at Crownsville and the troubling evidence of experimentation upon human subjects of all races in Maryland’s psychiatric hospitals during the 20th century. In addition, we request that the State attempt to identify the patients who died at the hospital and whose remains were sent to medical schools, as well as the 1,800 patients buried on the site of the Crownsville property, and to provide an appropriate memorial for these individuals.

No existing state publication sufficiently documents the extent to which racism informed Crownsville’s creation and the treatment of patients there. Instead, efforts to document what happened at Crownsville and to honor the memories of its patients have fallen largely to volunteer local historians, whose research has raised troubling concerns about the mistreatment of African-American patients. We outline below some of the concerns that have been raised by these historians, in public reports and news accounts in The Washington Post, The Baltimore Sun, The Afro, and The Capital.

**Crownsville’s Beginnings Were Grounded in Racism**

Before the advent of state psychiatric hospitals, African-Americans and whites who were labeled as having mental illness were housed in County almshouses. Within the almshouses, African-Americans were subjected to completely inferior conditions:
Almost every Lunacy Commission annual report calls for the building of a proper state facility for the African American insane. A string of commission secretaries recognizes that the almshouse housing reserved for people of color almost always was of poorer condition than that for whites, usually a “dilapidated cabin, more or less clean, and always overcrowded.” Writing of the Frederick County facility, one secretary thought, “the beasts of the field are taken better care of than the poor negroes.”

Montevue, the facility in Frederick, accepted African-Americans labeled insane from across the state, in exchange for payment.

During the late 19th century and early 20th centuries in Maryland and elsewhere, advocates began calling for an end to the horrific conditions in which those labeled “insane” or “feebleminded” were held, but the primary beneficiaries were typically white. Rather than permit African-Americans to be housed in psychiatric hospitals alongside whites, African-Americans diagnosed with mental illness languished in County almshouses, as report after report documented atrocious conditions. Instead of integrating mental health facilities, the Maryland Lunacy Commission urged the state to establish a separate asylum for the “negro insane.”

In fact, after the Civil War, in Maryland and across the country, the number of African-Americans labeled “insane” skyrocketed. Whites claimed that this surge was due to black inferiority and the inability of blacks to handle their newfound freedom. An excerpt from the 1893 Annual Report of the Maryland Lunacy Commission summarizes this prevailing view:

“Since our late civil war, insanity, as is well established, is greatly on the increase, especially among the colored race, and it is believed that this increase in the latter race is consequent upon their sudden emancipation, which engendered trials and cares heretofore unknown to them; added to this the fact that by nature they lead very exposed lives, and are as a class very immoral and dissipated.”

These beliefs about blacks featured prominently even in campaigns to improve the conditions in which blacks were held. Even as the Lunacy Commission called for improvements, they nonetheless maintained the need for segregated hospitals, claiming, among other things, that “as a rule, [African-Americans] are much more violent and require greater care when suffering from acute mental trouble than do the average white insane.”

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2 Schoeberlien, p. 450.
Racial segregation in Maryland’s psychiatric hospitals persisted deep into the 20th century – Crownsville was not desegregated until 1962 – but little effort has been made to document how this affected the care and treatment of blacks who were diagnosed with mental illness during that period.³

Separate and Unequal: Conditions at Crownsville Were the Worst in the State

Crownsville was established in 1911 as the Maryland Hospital for the Negro Insane. The state used patient labor to build much of the campus in order to save money:⁴

Work on the Hospital for Negro Insane, later renamed Crownsville State Hospital, commenced in late April 1910. Thirty-one African American male patients from Montevue Asylum were put to work clearing the land and building a railroad spur to the hospital site.⁵

By contrast, it is unclear whether white patients were ever forced to build the insane asylums in which they were held. Regardless, the failure to adequately resource Crownsville would emerge as a consistent pattern for at least the next fifty years.

Crownsville was intended to be ‘separate but equal,’ but according to local historians and press accounts, Crownsville was plainly inferior to its counterparts, and was often treated as a dumping ground for African-Americans who were not even properly diagnosed as having mental illness. Crownsville scholar Paul Lurz has said that Crownsville was treated as “‘a place of last resort for black people with any kind of problem that affected [their] behavior.’”⁶ The evidence that is available from reports, local historians and news reporters certainly points to appalling general conditions at Crownsville:

• At certain times in Crownsville’s history, patients were more likely to die in the facility than to be discharged. According to an early report issued by the hospital, for example, between 1923 and 1928, 217 patients were discharged – but 365 patients died.⁷

• “There are only eight physicians at the institution, including the two psychiatrists, or approximately one doctor to every 208 [patients]. Crownsville has 70 attendants or about one to every 230 patients. It is short by an estimated 140 on its staff. … There is scarcely 12 inches between the beds in the dormitories (of feeble-minded children) when accepted standards require institutional beds to be at least three feet apart.

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⁵ Schoberlein, p. 468.
⁷ Crownsville State Hospital Board of Managers, 1926 Triennial Report and 1928 Biennial Report.
… Stories of persons forced to sleep on the floor, beaten, denied sufficient food, burned with cigarettes, and allegedly tortured by sadistic attendants, are legion.”

- In a 1940 letter to the Governor pleading for additional resources, the Superintendent of Crownsville wrote that “This hospital is exclusively for colored and obviously has to provide for patients not only from every County of the State but from Baltimore City as well. This applies not only to adults but also to feebleminded. Added to our responsibility is also the providing for criminal cases from the Maryland Penitentiary, House of Correction and the Criminal Courts. These types are very difficult to handle even under the most favorable circumstances. When this problem is presented in a building with all other types and inadequate provisions for accommodations and proper isolation the solution is an exceedingly difficult one…I have called attention to this situation for a number of years with the hopes that in the not too distant future these patients may be moved … where proper facilities for treatment and occupation are provided.”

- “From wartime till the 1950s, Crownsville was the most crowded, understaffed mental hospital in Maryland. Children sometimes slept two to a bed, or on mattresses on the floor. …Alone among Maryland’s mental hospitals, Crownsville housed the criminally insane, the mentally ill and retarded, adults and children along with drunks and people with syphilis and tuberculosis, all on one campus. Adults and children dwelled in the same wards. … By 1949…there were 1,800 patients at a Crownsville campus designed for 1,100, and one doctor for every 225 patients.”

- “In the 1940s, conditions at the hospital deteriorated rapidly. The patient census shows that the population went from a manageable 521 in 1920 to 2,719 in 1955. …Patients were crowded into windowless dorms and given little to eat. They wandered aimlessly or were shackled to chairs and walls because they posed a risk to themselves and others. Many photos, restricted by the Maryland State Archives for privacy reasons, reveal the terrible conditions.”

It has also been reported that in many instances over the years, African-Americans were sent to Crownsville inappropriately. For example, in 1961, a trio of civil rights activists were arrested for trespassing trying to integrate a restaurant on Route 40

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9 Letter from Superintendent Robert P. Winterode to Gov. Herbert O’Conor, dated January 31, 1940.
near Elkton. After they were detained, they went on a hunger strike and were ordered transferred to Crownsville State Hospital to be “evaluated.”

But no concerted effort has been made to put together the pieces of the story that has been told over the years, and the result is that there exists no full accounting of what happened at Crownsville.

Credible Evidence of Questionable Procedures and Experiments on Patients at Crownsville and Other State Hospitals without Consent

Some of the most serious and most controversial charges about conditions at Crownsville are allegations that patients were subjected to procedures and experiments without consent. The full scope of testing and research on patients at Crownsville and other psychiatric hospitals without their consent or the consent of their families has never been documented, despite its obvious historical and social significance.

A review of research efforts described in annual reports of the Department of Mental Hygiene from the 1950s suggests that using patients as research specimens without consent and other troubling practices were commonplace at Crownsville and other state hospitals. For example:

- Doctors conducted a painful procedure known as pneumoencephalography, which involved drilling a hole in the skull and draining fluid from the brain, and then replacing it with oxygen or helium so that doctors could better see the brain in x-rays. Patients suffered for two to three months from debilitating headaches, seizures and vomiting until their bodies replaced the fluids. Archived documents reference a study at Crownsville using this procedure from 1956: Pneumoencephalographic and Skull X-Ray Studies in 100 Epileptics.

- Syphilitic patients were injected with malaria as a form of treatment, which generated its own physical effects, as "some patients in their delirium become violent and must be strapped to their beds." Officials then injected patients with bismuth in order to “treat” the malaria they had injected in the patients. Patients were repeatedly injected with bismuth as their malaria symptoms would begin to recur within 48 hours.

- At Spring Grove Hospital, doctors conducted a study in conjunction with investigators at the National Institute of Mental Health entitled "Clinical Reactions and Tolerance to LSD (Lysergic-Acid) in Chronic Schizophrenic Patients" and presented their findings at a national meeting in 1955.

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13 Department of Mental Hygiene, Public Mental Health Program - Maryland 1956, p. 29.

Throughout this era, state reports describe using experimental drugs to manage the behavior of patients at Crownsville and other Maryland psychiatric hospitals. A 1956 report hints at the extent to which patients were treated as research subjects: At Crownsville, “[a] program for the use of the new tranquilizing drugs, whose action, though not completely understood, promises to effect pronounced changes in the technique of therapy in the hospitals, is being established in 1956 fiscal year.”

One of the drugs that was tested was chlorpromazine, whose introduction into clinical use is now widely regarded as one of the most significant advances in psychiatric care. But the patients who were subjected to experimental practices and the patients who contributed their bodies to advancing psychiatric research in the Maryland psychiatric hospital system have never been acknowledged. Nor has the state acknowledged or documented the extent to which these patients were used as research specimens without their consent or the consent of family members.

**Crownsville Patient Remains**

Local historian Janice Hayes-Williams has worked diligently to raise awareness about the manner in which patient remains were handled at Crownsville, combing through death records to identify the remains of those buried at Crownsville and seeking information regarding the use of patient remains for medical research.

According to news reports, there is evidence in that, “[i]n later years, hundreds of cadavers were sent off to Baltimore for medical research, usually without the consent of relatives.” “[I]n 1939, when the Maryland Autopsy Board was created, the death certificates show that significantly fewer bodies were buried at the cemetery and many more were taken to the University of Maryland medical school. Hayes-Williams says members of the autopsy board confirmed that cadavers were sent to the school for students to practice on, and later unceremoniously incinerated.”

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15 *See, e.g.*, Department of Mental Hygiene, Public Mental Health Program, 1956, p. 29 (referencing study at Crownsville: “Blood and Elextroencephalographic Changes During Treatment with Chlorpromazine and Related Drugs”); p. 65 (Springfield State Hospital, Chlorpromazine in the Treatment of Chronic Schizophrenia); Department of Mental Hygiene, Public Mental Health Program, 1957, p. 43 (Eastern Shore State Hospital, “The Relative Effects of Chlorpromazine, Miltown, Placebo on Certain Personality Traits and Symptoms of Chronic Mental Patients”); p. 69 (Springfield Hospital, “Clinical, Psychological and Myoneural Changes in Psychotic Patients Under Oral Serpasil Medication”); p. 83 (Spring Grove Hospital, “Clinical Investigation of a New Drug – Bogadin (In conjunction with investigators of the National Institute of Mental Health)”); Department of Mental Hygiene, Public Mental Health Program, 1959, p. 39 (Crownsville: “A Preliminary Evaluation of the Drug Su 3822 on a Selected Schizophrenic Population”; “Investigation of the Effect of Electro Cerebral Therapy Upon the Course of Mental Illness and Upon the Brain and Heart (Three Projects)”; p. 104 (Spring Grove Hospital, “The Use of Hexafluorodiethyl Ether (Indoklon) as an Inhalant Convulsant”).

16 Department of Mental Hygiene, Public Mental Health Program, 1956, p. 23.


The number of unmarked graves at Crownsville – approximately 1,800 – appears to exceed the numbers at any other psychiatric hospital. Although there are 900 graves marked only with small numbered stones at Springfield Hospital, for example, there was an eight-year effort by hospital staff to identify the patients buried there that culminated in a 2012 ceremony dedicating a large memorial stone etched with names. At the Spring Grove Hospital cemetery, there are roughly 1,000 patients buried in two large lots, and a handful are marked.

There have been efforts to document history and maintain small museums regarding both Springfield Hospital and Spring Grove Hospital. No such effort has been made for Crownsville, to our knowledge.

Remedies

Based on the information we have reviewed, we think it clear that the state should investigate and document what happened at Crownsville to ensure that this piece of Maryland history is properly acknowledged and never forgotten. We think it especially important to acknowledge the patients who died at Crownsville and those who contributed to medical research.

Fittingly, the Maryland Historical Trust meets at the site of the former Crownsville Hospital. Perhaps the Trust could work in concert with the Maryland State Archives, the Maryland Commission on African American History and Culture, the Maryland Department of Mental Health and Hygiene, the Civil Rights Division of the Maryland Attorney General, local historians, and concerned citizens to investigate what happened, identify the appropriate means for identifying and acknowledging the contributions of patients at Crownsville and memorializing their remains, and work towards developing a dedicated museum or other public venue.

The Editors at the Annapolis Capital Gazette recently wrote:

Since the state closed the hospital in 2004, historians Paul Lurz and Janice Hayes-Williams have labored to preserve and organize its records and identify those buried in its graveyard. Their admirable work can be the foundation of a museum in one of Crownville’s buildings, while the rest of the facility is used in some way that provides community services. … Such a museum would not be an instance of wallowing in past misfortunes. It would be a warning of what happens when society, whether from racism or some other reason, decides that a whole group of people is disposable, and that they are better off out of sight and out of mind. That’s a lesson from the past we have to learn if we want a decent future.


20 Editorial Board, “We should preserve, learn from mental hospital’s story,” The Capital, June 7, 2013
We could not agree more.

We look forward to hearing from you.

Sincerely,

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Carl Snowden
Caucus of African-American Leaders

Gerald Stansbury, President
Maryland State Conference of NAACP Branches

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Cc: Joshua M. Sharfstein, M.D., Secretary of Health & Mental Hygiene
Kisha Brown, Director, Civil Rights Division, Office of the Maryland Attorney General
LáVita M. Simpson, Executive Director, Maryland Legislative Black Caucus
Dr. Joni Jones, Executive Director, Maryland Commission on African American History and Culture
Michael E. Busch, Speaker, Maryland House of Delegates
Del. Steve Schuh, House Chair, Anne Arundel County Delegation
Sen. John Astle, Senate Chair, Anne Arundel County Delegation
Sen. Ben Cardin
Sen. Barbara Mikulski