

The Psychopathic Hospital: A Historical Overview

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Objectives

That psychiatric care was long provided in asylums is well known, as is the fact that these institutions closed in the latter half of the 20th century. But the history of how other systems for the treatment of mental illness developed remains poorly understood. When did alternatives to asylums emerge, and why? This project aims to answer this question by exploring the history of one of psychiatry's most important yet least known structures: the psychopathic hospital.

Origins of the Psychopathic Hospital

Inspired by developments in late 19th century Germany, the first psychopathic hospitals in North America began appearing in the early years of the 20th century. These hospitals signalled an important shift in where and how psychiatry was practiced, and their creation was motivated by an evolution in how psychiatrists – and society – understood their work and professional identity. They set forth a vision for psychiatry that was both an advancement of the profession's interests and a response to antipsychiatric critiques of the late 19th century that accused it of being heavy-handed, unscientific, and ineffectual – a conversation that has continued to reverberate in the 20th century and beyond.



Boston Psychopathic Hospital (Boston Public Library)

How the Psychopathic Hospital Differed

The psychopathic hospitals differed from asylums and state hospitals in many respects. They were urban rather than rural. They were affiliated with general hospitals and medical schools rather than being independent. They were oriented toward research and teaching in addition to care provision. They focused on diagnosis and acute treatment instead of long-term accommodation. They integrated inpatient and outpatient services. They collaborated with social workers and community stakeholders. And perhaps most significantly, they postulated a broader definition of the psychiatric patient, expanding their attention to include those who were mentally distressed but not “certifiably insane.” They became, in short, the forerunners of the psychiatric systems that we know today. Although not designed as replacements for state hospitals, in proposing new ways of seeing, new ways of working, and new psychiatric spaces, the psychopathic hospitals shifted the profession's gaze away from the alienists' asylums and toward the future.



Henry Phipps Psychiatric Clinic (Johns Hopkins Archives)

The Spread

The first psychopathic hospital in the United States opened in Ann Arbor at Michigan State University Hospital in 1903. Other facilities were quick to follow, such as the Boston Psychopathic Hospital and the Phipps Clinic, which was affiliated with Johns Hopkins University in Baltimore. The first in Canada was the Winnipeg Psychopathic Hospital, which opened in 1919. Similar institutions would open in Toronto and Quebec in 1926.

The Significance

The advent of the psychopathic hospital was a turning point for psychiatry. It was the institutional manifestation of a profession that was seeking to draw closer to the medical and scientific community while also advocating for broader psychosocial interventions and interdisciplinary care for patients. Whereas deinstitutionalization has often been ascribed to the development of antipsychotic medications and to the antipsychiatry movement of the 1960s, the psychopathic hospital tells a different story. For more than half a century before Fluoxetine or Foucault, efforts were already afoot to create a new kind of psychiatry, one that transcended the isolation of the asylum – and of the analyst's couch, for that matter – to provide care that was intensive, integrated, and impactful. The psychopathic hospital embodied a discipline that dealt in dilemmas: liberation vs confinement, science vs soul, madness vs mental hygiene. A deeper exploration of their history will shed light on how psychiatry sought to resolve these tensions in the early 20th century. In this way, it will inform our understanding of how psychiatry came to take its current form – and where it might go in the future.

Reference / Bibliography

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