

BEFORE COLUMBIA U:
THE BLOOMINGDALE INSANE ASYLUM
AND THE LEGACY OF BUELL HALL

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*“They could not know—could not even dream—that in less than three-quarters of a century it would be necessary for the asylum to move on fifteen miles further into the country to escape the din and turmoil of the city. Yet so the event has proved.”*¹

In April of 1892, the trustees of Columbia College closed a \$2,000,000 deal—an amount that exceeds sixty-seven million dollars today—purchasing four blocks of land in Harlem Heights.² It was a move that tactfully established Columbia as the leading university in New York City. President Seth Low placed the first cornerstone for the Low Library, the university’s first building on the new campus, on December 7, 1895. Just five months later, a cornerstone was laid for the building of Schermerhorn Hall, dedicated to the study of the natural sciences and Physics. During the dedication ceremony, President Low addressed an astounding five thousand of New York’s high society:

“We are met today to dedicate to a new use this historic ground. Already it is twice consecrated. In the Revolutionary War this soil drank the blood of patriots, willingly shed for the independence of the land. Since then, for three generations, it has witnessed the union of science and of brotherly kindness devoted to the care of humanity suffering from the most mysterious of all the ills that flesh is heir to. Today we dedicate it, in the same spirit of loyalty to the country and of decision to mankind, to the inspiring use of a venerable and historic University.”³

As President Low identifies, the current campus of Columbia University rests upon a land “twice consecrated” by historic pasts. First, it was the site of a battle during the American Revolution. This statement would become retroactively ironic given Columbia’s comparatively small Union presence during the American Civil War as well as the widespread attitudes of apathy, hesitation

¹ Columbia U, “Buildings and Grounds Collection, 1755-2011, Bulk 1880-2000,” *Series III: Morningside Heights Campus*, Box 2, no. 7201471 (n.d.).

² Chamberlain, *Universities and Their Sons*, 717.

³ *Ibid*, 720.

or hypocrisy on campus toward the city's abolitionist causes in the nineteenth century.⁴ But this paper is interested in, according to Low, the campus's second historic past—that of its witnessing of “the union of science and of brotherly kindness.”

Before Columbia University, the land between 116th and 120th provided for the Bloomingdale Insane Asylum. Originally proposed in 1769 by Peter Middleton, King's College graduate of 1768, the Lunatic Asylum of the New York Hospital (predecessor to Bloomingdale) opened in lower Manhattan in 1808.⁵ After some time, the hospital's board of governors—many of whom were Columbia affiliates—“saw the importance of having the establishment aloof from noise” with “gardens and spacious grounds.”⁶ As a result, the asylum moved with its current patients up to Harlem in 1821 and was renamed the Bloomingdale Insane Asylum.

The only building from the asylum to survive the transition and remain standing today is Buell Hall, the 3-story brick building just east of the Low Library. Originally the Macy Villa for the Bloomingdale asylum, Buell Hall now houses the French department's Maison Française and the Temple Hoyne Buell Center for the Study of American Architecture.⁷ In a recent article featured in the *Columbia Spectator*, Sarah Yang discusses how the history of the Bloomingdale Insane Asylum should be a reminder of early introductions to Harlem's “institutional nature.” In other words, the succession of institutions built uptown starting with the asylum should not be taken for granted in an increasingly gentrified Harlem.⁸ Yang also diligently revives the stories of some of Bloomingdale's patients, who—as this paper will detail later—were deeply mistreated during their stays at the asylum. But looking even further, the comparison of two maps—one from

⁴ Eric Foner, *Columbia and Slavery: A Preliminary Report*, 26–31.

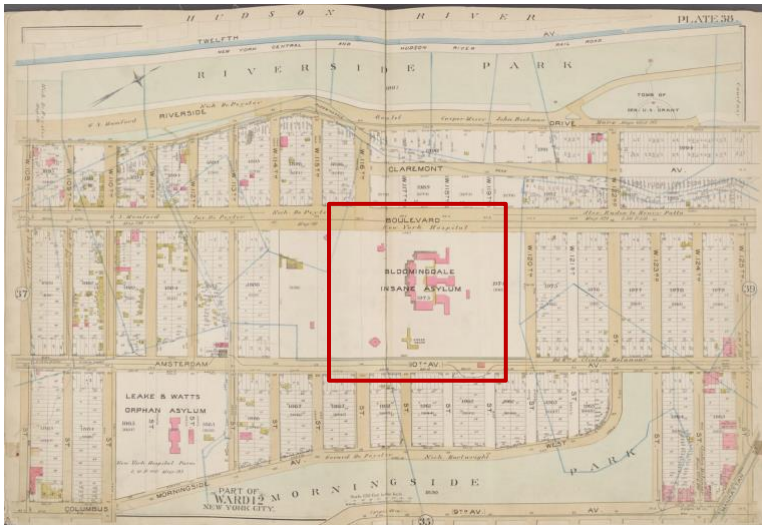
⁵ Columbia U, “Columbia University, Honorary Degrees, Microsoft Excel,” 2022.

⁶ Columbia U, “Buildings and Grounds Collection.”

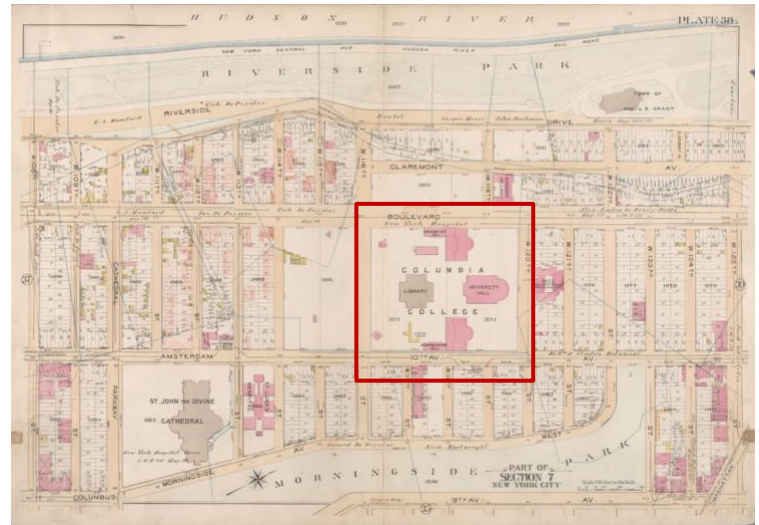
⁷ “Buell Hall.” In *Wikipedia*, October 8, 2022.

⁸ Sarah Yang, “Beyond Buell Hall: The Lives and Legacies of Bloomingdale Insane Asylum,” *Columbia Spectator, The Eye*, December 10, 2023, sec. Features.

1891 and the other from 1902—shows the rapid turnover from the last year of the Bloomingdale Insane Asylum’s residence in Manhattan to Columbia’s takeover.



1891, Lionel Pincus (Bromley). Plate 38.



1897, Lionel Pincus (Bromley). Plate 38.

This quick transition obscured the opportunity for the asylum to remain historically relevant in the years to come and yet, there is much to impart from the legacy of Bloomingdale. This paper attempts to contend with various aspects of the asylum that remain present in the undercurrents of Columbia University today.

The board of governors of the New York Hospital was the philanthropic body in the city that helped to open Bloomingdale. The board in 1820 included vice-president Thomas Eddy and John Jay’s son, Peter Augustus Jay. Eddy was a prominent philanthropist in New York City who, amongst his many ventures, supported anti-slavery and worked with the Manumission Society.⁹ He also worked on a penal reform bill with Philip Schuyler that eliminated from fourteen crimes

⁹ Raymond A. Mohl, “Humanitarianism in the Preindustrial City: The New York Society for the Prevention of Pauperism, 1817-1823,” *The Journal of American History* 57, no. 3 (1970): 350.

the sentencing of death or life in prison.¹⁰ Peter A. Jay, who later became a trustee of Columbia, succeeded as president of the Manumission Society after his father John, who himself owned five slaves.¹¹ Peter was also the son-in-law to the president of the board in 1820, Matthew Clarkson.¹² To paint the picture, the New York Hospital was funded by a group of elites involved in a network of philanthropy, all of whom helped to shape institution-building in the city.

When the board released their annual report in 1820, which outlined the early achievements of the ‘lunatic hospital’ in lower Manhattan (which would become Bloomingdale the following year), the authors must have been aware of the precedent they were setting with their new venture to treat mental illness:

“...in the course of the last year, they have admitted 1702 patients; who with 259 remaining on the 31st December, make 1961 that have received the benefit of the Hospital during the year 1820.”¹³

The same report discloses the results of their patients:

“Of this number, 1381 have been cured, 64 relieved, 100 have been discharged at their own request, or that of their friends, and 19 as improper objects, 31 have eloped, or been discharged as disorderly, 141 have died...”¹⁴

These numbers should indicate something about the future prospects of the asylum. The year before its Harlem location opened, the asylum treated 141 patients who died. It’s a staggering number—evidently not treated as such in the document—that reflects the futile nature of the early treatments for people with mental illnesses in New York. These statistics would surely carry over into the operations of Bloomingdale in the years to follow.

¹⁰ Arthur A. Ekirch, “Thomas Eddy and the Beginnings of Prison Reform in New York,” *New York History* 24, no. 3 (1943): 379–80.

¹¹ Foner, *Columbia and Slavery: A Preliminary Report*, n.d.

¹² “Peter Augustus Jay (Lawyer),” in *Wikipedia*, September 15, 2023.

¹³ New York Hospital, *State of the New-York Hospital for the Year*. New York. Printed by Mahlon Day, No 84 Water Street 1821 (New York, 1821).

¹⁴ New York Hospital, *State of the New-York Hospital for the Year*.

The property upon which the Bloomingdale Insane Asylum stood was a coveted site for the undertaking of the treatment for the insane. With its view overlooking the Hudson River and it being one of the “most elevated hills known, in history,” it was considered a beauty “rarely equalled” and a place where patients could heal from their afflictions.¹⁵ It is worth mentioning that Columbia trustees had already planted the early seed of its eventual purchase of the land by donating a botanic garden for the asylum’s new location uptown.¹⁶ Nonetheless, the new building ushered in an era within the medical field of New York that sought to find new ways to treat mental illnesses. This included the ‘moral treatment’ for its patients which promoted the “best interests of the insane, by avoiding, as far as possible, the aspect of a prison, and surrounding the buildings with agreeable prospects.”¹⁷ Rather than being subjected to hostile conditions as in a prison, patients at the Bloomingdale asylum would live comfortably and, for all those except the “most violent,” with the ability to roam the pristine property.¹⁸ And for all this the Bloomingdale Insane Asylum was praised publicly; however, the conditions on the interior did not reflect the same idyllic environment.

An 1880 article published in *Harper’s Weekly* boasts the new women’s wing of Bloomingdale which had been in operation for roughly sixty years. Illustrations depict large hallways and comfortable common spaces with female patients dressed in their nineteenth century finest. The tone of the article reflects the positive perception that the public maintained regarding the asylum. Around the same period in 1874, however, the self-titled ‘authoress’ Elizabeth Parsons Ware (E.P.W.) Packard published her book “Modern Persecution, or married

¹⁵ Pliny Earle, *History, Description and Statistics of the Bloomingdale Asylum for the Insane* (New York : Egbert, Hovey & King, Printers, 1848), 23–26.

¹⁶ *The Christian Journal, and Literary Register 1821-07: Vol 5 Iss 7* (Open Court Publishing Co, 1821), 3.

¹⁷ Pliny Earle, *History, Description and Statistics of the Bloomingdale Asylum for the Insane*, 24.

¹⁸ Columbia U, “Buildings and Grounds Collection.”

women's liabilities" which documents the cruel treatment and living conditions of the asylum.¹⁹

Packard relays the testimony of a woman confined for 3 months at the asylum. During the first night of her stay, the woman did not receive any food. Attendants threatened to send her to the "Lodge" which in the modern sense would be solitary confinement. She was stripped of her clothes and neglected without any clothing and later, she reports that they beat her until she bruised and forced her into a strait jacket.²⁰ In another testimony, a reporter from the *New York Tribune* went undercover in 1872 as a disturbed patient and reported his experience in his piece titled, "Among the Maniacs, Four Days in the Excited Wards of Bloomingdale."²¹ During his confinement, the reporter observed a patient "had been dragged by an arm or leg into his room, and there flung violently upon the floor."²² Packard's documentation is bolstered by others like it.

Recently, Columbia University's Rare Books and Manuscripts Library (RBML) purchased a collection of patient records from the Bloomingdale Asylum. Resident physicians and attendants took extensive notes on the progress, or lack thereof, of their patients. Surely without realizing it, the caretakers who wrote these updates recorded valuable insights about the true conditions of the asylum. It is not difficult to read between the lines and imagine the abuse inflicted upon patients given some of their behavior. As Yang writes in her aforementioned article, "...the admittance of the majority of patients [was] a direct consequence of being out of

¹⁹ E.P.W. Packard (Elizabeth Parsons Ware), *Modern Persecution, or Married Woman's Liabilities: As Demonstrated by the Action of the Illinois Legislature*, vol. II ([Chicago]: Packard, 1874).

²⁰ Packard, 346-347.

²¹ Chambers, "Among the Maniacs, Four Days in the Excited Wards of Bloomingdale," *New York-Tribune*, August 31, 1872.

²² Packard, 349.

step with society”²³ whether a widow, an estranged family member or simply a ‘talkative’ woman.²⁴

Another article likely from *Harper’s Weekly*, written two years after Columbia moved onto the land and Bloomingdale transferred its patients to White Plains, praises the “charitable work” of the asylum. The board of governors of the New York Hospital certainly prided themselves on the generosity of their mission to provide treatment for insanity, and the article confirms as much:

“It is the essential characteristic of a benevolent corporation, of which the Society of the New York Hospital is a typical illustration, that neither its members nor any other set of individuals... can have the slightest pecuniary interest in its welfare.”²⁵

Certainly, it is worth mentioning that in the early days of Bloomingdale, admission was open to both private payers as well as those from the city almshouse, where many poor or sick people were living.²⁶ Although the asylum initially opened its doors to patients of all economic statuses, as time went on, rising patient numbers began to reflect a growing population of wealthy patients.²⁷ By 1872, when the *Tribune* reporter investigated the asylum, it is said that the lowest rate per one week’s stay was twenty dollars—more than five hundred dollars today.²⁸ The *Tribune* article argues:

“The Bloomingdale Insane Asylum is a private institution, owned and conducted by personal enterprise. It is evident, also, that it is a speculative institution, and is maintained at a profit at the expense and abuse of the unfortunate boarders.”²⁹

²³ Yang, “Beyond Buell Hall.”

²⁴ Bloomingda, “The New York Bloomingdale Insane Asylum Records, 1880-1910,” *Series I: Admission Records and Daily History* Volume 1, no. 14329111 (n.d.).

²⁵ Columbia U, “Buildings and Grounds Collection.”

²⁶ Earle, *History, Description and Statistics of the Bloomingdale Asylum for the Insane*. 19-22.

²⁷ *Ibid.* 19-22.

²⁸ Packard (Elizabeth Parsons Ware), 352.

²⁹ *Ibid.*, 352.

It was in the interest of the asylum to “keep the paying boarder as long as his friends pay his keeping” and as such, many patients stayed longer than they likely needed to under harsh and neglectful conditions.³⁰

Literature from the Bloomingdale period also illuminates how those in the medical field regarded mental illnesses, or what they referred to as ‘insanity.’ Dr. Pliny Earle was a resident physician at the Bloomingdale Insane Asylum from April 1844 to 1849.³¹ He wrote extensively about the asylum in his work “History, Description and Statistics of the Bloomingdale Asylum for the Insane.”³² Within his extensive documentation of the population statistics of Bloomingdale’s patients, the embedded racism, classism and sexism is apparent.

Given his assumptions about the immigrant population’s ability to assimilate into “so heterogeneous” a population as the United States, Earle posits that “it is to be expected that many of the inmates of its public institutions will be foreigners.”³³ He goes on to highlight how many of the recorded patients were not born in the United States. Beyond that, Earle compares the patient population of the asylum to only the white population of the state of New York from the National Census of 1840. This comparison can only suggest that admission to the asylum was limited to white people.³⁴ And this assumption is further supported by the fact that Earle documents only one male patient from Africa in one of his tables, and there is no further discussion of this fact.³⁵ It is possible—though unlikely—that more people of color were admitted after Earle’s residence ended, but nonetheless the literature reflects how white people were

³⁰ Packard (Elizabeth Parsons Ware), 351.

³¹ “Pliny Earle (Physician),” in *Wikipedia*, September 7, 2023.

³² Earle, *History, Description and Statistics of the Bloomingdale Asylum for the Insane*.

³³ Earle, 64.

³⁴ *Ibid*, 61.

³⁵ *Ibid*, 63.

chiefly granted the opportunity for treatment as well as the basic acknowledgement of their suffering—a privilege not given to Black and Brown people at the time and still frequently today.

Insanity was also considered an affliction that only impacted those of a higher economic status. In his discussion of patient occupations, not only does Earle practically forgo the occupations of the female patients, but he summarizes that,

“A large proportion of the inmates, as will be perceived by the table of occupations, are from the classes unaccustomed to manual labor.”³⁶

Given this premise, the Bloomingdale asylum operated as an elite and exclusive institution—of course not taking for granted the abuse from within. The discrimination was equally apparent with regard to sex as well. Although the rates of male patients were generally higher than their female counterparts, women were much more susceptible to “requiring restraint.”³⁷ In the records from the RBML, physicians complain about the behavior of their female patients who were described as, “noisy,” “untidy,” “dissatisfied” with their marriage, “excitable during menstruation,” or “talkative” (to name a few).³⁸ And within the diagnoses of mental illness, Earle admits:

“The nosology of mental diseases is still so imperfect that it is difficult to make an arrangement of cases which be of any material value, either practical or theoretical.”³⁹

In other words, the classification of the disease was completely dependent on the subjective opinion of the physician. It is no wonder then that in addition to high death rates within the asylum, there were at least eight suicides (although likely more). And suicide, or attempted suicide, was considered a ‘threat’ that was “invariably...for the purpose of frightening the people

³⁶ Earle, 27.

³⁷ Ibid, 37.

³⁸ Bloomingda, “The New York Bloomingdale Insane Asylum Records, 1880-1910,” *Series I: Admission Records and Daily History* Volume 1, no. 14329111 (n.d.).

³⁹ Earle, 102.

are around them, rather than from any propensity in that direction.”⁴⁰ For all these reasons, the inner workings of the asylum, as bravely documented by Packard and the *Tribune* as well as through Dr. Pliny Earle’s reports, expose the cruelties of the institution as well as the perpetuation of discriminatory practices surrounding the treatment of mental illnesses.

One interesting element within the discussion of mental illness involved its causes. Beyond familial predisposition and reasons addressed in this paper, insanity was also considered a product of decreased state power. This statement was found from an article about Bloomingdale:

“Insanity was a rare thing in China under a galling despotism, but since the rebellion it is said to have much increased... There facts do not argue in favor of ignorance and despotism, but of a more serious attention and conformity to the established conditions of life and healthy activity.”⁴¹

As mentioned here, the case was not necessarily to support an oppressive government power but rather to promote a more subtle and stealth-driven agenda of social conformity and order, plainly under the veil of a white supremacy.

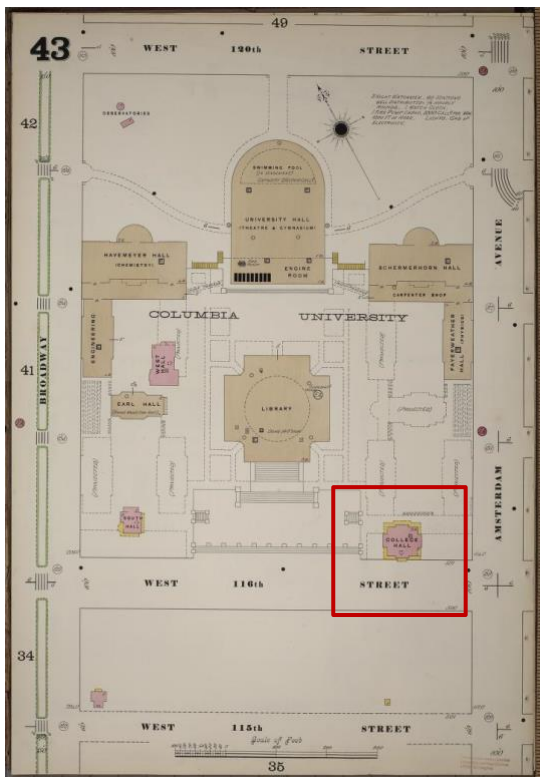
By 1886, seventy years after its doors officially opened, all the property that would be designated for the Bloomingdale asylum had been built. This included the hospital’s main facility which rested between Broadway and Amsterdam Avenue (once Bloomingdale Boulevard and 10th avenue, respectively) from about 117th to 119th streets.⁴² This structure was divided equally between male and female quarters as well as had wings for the patients deemed most violent amongst those admitted. The Green House was a separate L-shaped building that sat parallel to Amsterdam and 117th street. It was donated by Mrs. John C. Green for \$130,000 “to

⁴⁰ Earle, 106.

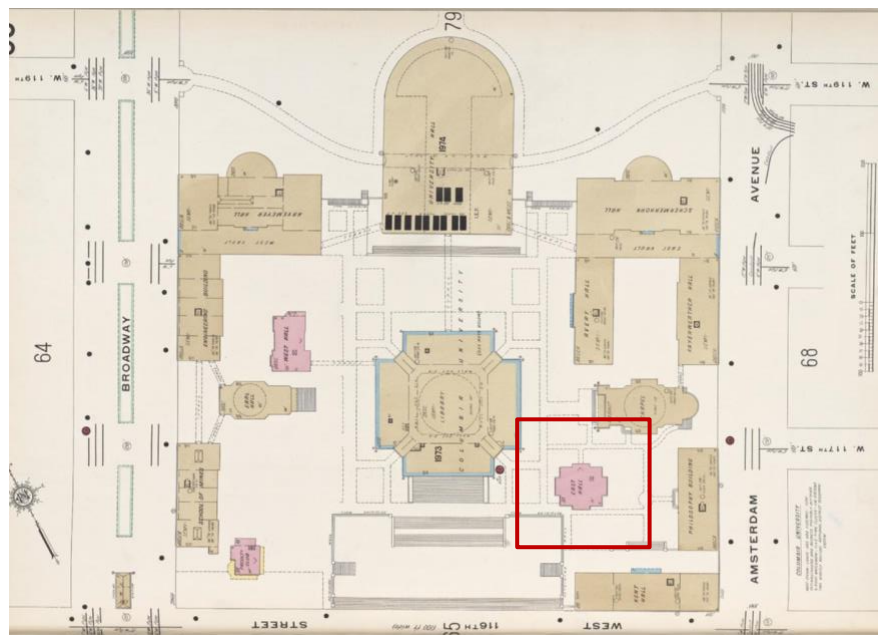
⁴¹ Columbia U, “Buildings and Grounds Collection.”

⁴² Lionel Pincus and Princess Firyal Map Division, “Map Bounded by Hudson River, W. 125th St., 9th Ave., W. 108th St.”

provide for the women patients those comforts to which they may have been accustomed,” so that they may sit about and engage in “needlework or conversation.”⁴³ The Macy Villa was the last building constructed for the asylum, and it stands today on Columbia University’s campus as the only surviving structure from the original asylum. William H. Macy donated the villa in 1885 “to increase the number of grades of classification” within the asylum, and accordingly, a “small number of the wealthier male patients” willing to pay a higher price could be assigned to one of its “fairly large private” bedrooms.⁴⁴ Originally the Macy Villa sat on the corner of 116th and Amsterdam Avenue; however, it was physically relocated in 1906 some two hundred feet north at its present location east of the Low Library when Kent Hall was built.⁴⁵



1902, Sanborn Fire Insurance Map. Image 46.



1912, Lionel Pincus (Sanborn Fire Insurance Map). Plate No. 66.

⁴³ Columbia U, “Buildings and Grounds Collection.”

⁴⁴ Ibid.

⁴⁵ Ibid, “Shop Talk and Columbia Gossip.”

The building has taken on many names since Columbia moved uptown—first College Hall, then East Hall in 1906, Alumni House in 1935, Maison Française in 1977 and finally renamed Buell Hall in 1983. In alignment with its past as the Macy Villa, East Hall had at one point a room dedicated only to the “men of the graduate schools” who were free to lounge and smoke. In accordance with its changing identity on campus, Buell Hall has been a frequent headline in Columbia publications over the years as students grasp the meaning of its presence on campus.⁴⁶

A letter to the editor in the *New York Times* from 2003 put to rest any speculation that the university and the asylum had an agreement to keep the villa:

“...the asylum never required Columbia to preserve the building, and the architect Charles McKim planned for its demolition. As additional buildings were erected on campus, the asylum structures were demolished, but since the building planned for Buell Hall’s site was never built, it survived.”⁴⁷

It was only by pure coincidence that the brick building known today as Buell Hall remained intact through the transition. And because the building underwent renovations throughout the periods of East Hall, Alumni House and Maison Française, the presence of Bloomingdale has dwindled overtime on campus; however, that the building remains provides an opportunity to think more symbolically about its place on campus.

An apt way to arrive at the conclusions of this paper would be to highlight a brief threat to Columbia’s purchase of the land in 1892, which set the tone for the ways that the university would plan to occupy the space. On March 19, 1892, *Harper’s Weekly* released a memo describing the issue: “The success of the scheme, however, is threatened by a bill introduced in

⁴⁶ Columbia U, “Buildings and Grounds Collection.”

⁴⁷ “At Columbia, An Accidental Survivor,” *The New York Times*, June 8, 2003, sec. New York.

the Legislature providing for opening a street through the property.”⁴⁸ The piece asserts that this street would “largely destroy the value of the site for the permanent location of the college.”⁴⁹ Arguably, that Columbia treated this bill as a ‘threat’ to its opportunity to grow as a university hints at the private and exclusive nature of the institution itself. The proposition of a street that would presumably allow public passersby to cross through the campus was considered a non-negotiable deterrent to purchasing the land. This sentiment would subsist through today as the campus gates to College Walk feel increasingly uninviting to the public eye.

When thinking about the implications of Buell Hall’s legacy on campus—a symbol of the land’s history as the Bloomingdale Insane Asylum—a few things come to mind. First, Bloomingdale’s history of exclusion based on class and race is one that certainly carries over into aspects of campus life today. The current total cost (including student, housing, food, etc) to attend Columbia as an undergraduate student is \$89,587.⁵⁰ As a result, the school often attracts students with inherited wealth, many of whom are white or international students, who can pay full tuition and leaves behind those who are unable to finance the costs. And students who borrow are left with an incredible amount of debt in the aftermath of graduation. These are not new facts, but they are worth mentioning now within the broader context of Bloomingdale, which through high living costs inadvertently attracted a wealthier, white patient population, leaving those without resources unable to receive care.

Additionally, there is a twinge of irony that the only building to remain from Bloomingdale is the Macy Villa which was, as mentioned earlier, designated for the wealthier male patients. There was a period in the early days uptown when trustees of Columbia University

⁴⁸ Columbia U, “Buildings and Grounds Collection.”

⁴⁹ Ibid.

⁵⁰ “Cost & Aid | Columbia Undergraduate Admissions,” accessed December 22, 2023.

feared the growing population of students from the public schools of New York and, what Robert McCaughey calls, “The Problem of the Vanishing Knickerbocker.”⁵¹ The school was losing traction with the sons of wealthy New Yorkers who were all flocking to Dartmouth, Amherst or Wesleyan—to name a few. In addition, there was a large presence of Jewish students on campus whom trustees thought deterred such students from applying to Columbia. As a result, within an already antisemitic and racist institution, a series of exclusionary measures related to the application process were put in place, including the Thorndike Intelligence Test which “significantly disadvantaged test takers unfamiliar with American culture.”⁵² With these measures, the trustees could perform “social engineering” on their student population in order to increase the presence of wealthy white men on campus.⁵³

Regarding mental healthcare on campus, in the last year students successfully petitioned the school to expand the number of full-time providers on campus due to long wait times for students to receive help. A recent interview that *Spec* did with the director of Counseling and Psychological Services [CPS] at Columbia remarked how, in 1992, when he first assumed the role “the entire staff identified as white and heterosexual.” Today, out of the entirety of CPS staff, 60% are people of color—progress that feels far too delayed.⁵⁴ A post from 2019 in the r/Columbia subreddit thread reads: “What is it about this place that eats people?”⁵⁵ One commenter mentions the pressures of Columbia’s financial burdens, high grade expectations—especially for those with financial aid or scholarships—and living in New York City as some of

⁵¹ Robert McCaughey, *Stand, Columbia: A History of Columbia University* (New York: Columbia University Press, 2003), 260.

⁵² McCaughey, *Stand, Columbia: A History of Columbia University*, 268.

⁵³ *Ibid*, 269.

⁵⁴ Caroline Capozzi, “Columbia Health Expands with More Staff, New Telehealth Partnership after Student Demands for Better Mental Healthcare,” accessed December 22, 2023.

⁵⁵ “What Is It about This Place That Eats People?,” Reddit Post, *R/Columbia*, April 27, 2019.

the many factors that contribute to an unhappy student population. The bottom line: many students struggle silently from a variety of forces within university life.

Importantly, the shiny veil of Columbia University's prestigious name should not mask its complicated past and present. The presence of Buell Hall on campus sustains the memory of the Bloomingdale Insane Asylum and its legacies of exclusion that have carried over into aspects of the university life today. The "accidental survivor" of the asylum stands as a form of resistance against the covert suppression of truth about the university's history, and it is through histories like Bloomingdale that Columbia can be held to a higher standard of transparency regarding its past and present perpetuations of exclusion of all kinds.⁵⁶

⁵⁶ Columbia U, "Buildings and Grounds Collection."

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