

One Hundred And Thirty First  
ANNUAL REPORT

OF THE

**South Carolina State  
Hospital**

FOR THE YEAR ENDING JUNE 30, 1954



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# REPORT OF SOUTH CAROLINA MENTAL HEALTH COMMISSION

Columbia, S. C., July 1, 1954

*To His Excellency, James F. Byrnes,  
Governor of South Carolina:*

The care of the mentally ill is one of the oldest of state obligations, ante-dating in South Carolina even its existence as a state. The State Hospital is an old institution, the third oldest State Hospital in the nation. The corner-stone for the original building was laid July 22, 1822. This building, the Mills Building, still stands and is in use for the housing of nurses and attendant personnel.

During the war years the hospital had fallen from the high level to which Dr. C. Fred Williams and his associates had raised it. The attrition of medical personnel during the war had reduced its medical staff by 1949-1950 to 12 physicians, vainly striving to care for more than 5,000 patients; its buildings, for the lack of funds for needed repairs, were in a sad state of deterioration.

In 1951, as a consequence of the General Assembly's recognition of the grave problem, a committee, composed of three members of the Senate, three members of the House and three persons appointed by the Governor, made a survey of South Carolina's mental health facilities and laws, filing a report in which they recommended the rewriting of the mental health laws and called attention to the woeful conditions existing in the State Hospital, the most over-crowded mental hospital in the United States with the exception of one hospital for Negroes in Alabama.

Following a visit of some 100 members of the General Assembly, led by the Governor to the State Hospital to see for themselves the conditions existing there, the General Assembly, reacting promptly to the demonstrated need, appropriated in three years \$11,000,000 for new construction in the state's mental health facilities.

Prior even to the filing of the Mental Health Study Committee's report during the recess of the General Assembly, \$477,800, upon the Governor's motion, was spent by the hospital to install a sprinkler system so as to minimize the danger of fire, until then



a harrowing hazard for both the hospital management and patients. This money, advanced by the Sinking Fund Commission, is being repaid out of reduced insurance rates. The wisdom of this expenditure was almost immediately demonstrated when the sprinklers extinguished with no loss of life or panic, a dangerous fire in the Taylor Building, housing some 265 acutely disturbed patients.

Of the \$11,000,000 appropriated for permanent improvements, \$8,900,528.64 has been or is being spent on new construction at the State Hospital; \$1,049,471.36 is being or has been spent to increase the capacity and the care and treatment of the mentally deficient at Whitten Village, formerly the State Training School; and \$1,050,000 is being spent to construct Pineland, a new training school for Negroes, for whom the state heretofore made no provision.

The years 1951-1954 have been as a result the greatest period of sustained construction in the more than 125 years of the hospital's existence.

At the two divisions of the State Hospital there have been or are being constructed:

Six modern ward buildings, housing 912 acutely disturbed patients. Anyone who had visited the condemned Taylor Building, now abandoned, and seen the conditions of squalor and overcrowding in which patients were of necessity kept and who now visits any one of the new buildings can immediately appreciate the improvement in the mental condition of these unfortunates—the most pitiful cases in the institution. In the old buildings there were no facilities for treatment. In each of the new buildings are four treatment rooms where doctors may make use of shock and other therapies to bring patients out of their excited state. In each of the buildings are occupational and recreational therapy rooms, each adjoining enclosed courtyards where patients may get out into the sun and fresh air for exercise and recreation. At each end of each building are additional outdoor recreation and exercise yards.

To replace the kitchen at the Columbia Division, from which the hospital was attempting to feed more than 3,000 patients with equipment designed to feed only 1,800, there has been erected, as an addition to the already existing modern warehouse, a kitchen and bakery which is probably one of the finest of its kind in the



United States. And in the treatment of mental patients adequate food, appetizingly prepared and served hot, is also of real therapeutic value.

Two 500-capacity multi-purpose recreation halls, which can be used for religious services on Sunday as well as for dances, other recreational purposes and meetings on week days are now in process of construction together with a central library for the use of the patients and a new occupational therapy department. When these buildings are completed use by patients of the present recreation hall on the top floor of the center building, a panic and fire hazard on account of its inadequate exits, will be abandoned.

Building No. 1 at State Park, which was almost as much of a disgrace to the state as the Taylor Building, has been completely renovated and today is one of the brightest spots in the institution. The work here was done at minimum cost by hospital maintenance personnel.

The heating plant at the Columbia Division, inadequate and overloaded, has been enlarged to take care of the hospital's needs for some years to come.

Construction of additional ward buildings providing adequate surgical and medical care for the patients, who in addition to their mental illnesses suffer from the diseases and mishaps common to the human race, will greatly increase the standards of medical treatment and will further reduce overcrowding.

At the State Training School at Clinton, now Whitten Village, the approximately \$1,050,000 has been or is being spent to construct:

A new hospital dormitory housing more than 210 helpless children, together with an employees' dormitory building for the personnel necessary to staff the hospital dormitory.

The Administration Building, woefully inadequate for the much larger institution into which Whitten Village has grown, has been more than doubled in size.

An additional classroom building and a physical therapy building for the Circle unit of the Village have been completed. The remainder of the funds except for various minor repair and enlargement projects is going into the construction of new dormitories to increase the capacity of the institution and to make possible the acceptance of additional trainees.



The final contract for the construction of Pineland, a training school for the Negro mentally retarded, is to be let in January.

This school in its first phase will consist of a school building containing an all-purpose auditorium surrounded by six dormitories for patients and trainees.

Already operating is a 100-bed pilot unit to which the first mentally retarded Negro children were admitted and where personnel to care for and train them are themselves being trained.

Until this institution was established South Carolina provided no facilities for Negro mental defectives and the State Park Division of the State Hospital had been accepting a minor fraction of them as being the only institution in which they could be cared for when they became an oppressive burden upon their families.

The passage in 1952 of the new Mental Health Act, based on an adaptation of the model mental health law to South Carolina conditions, gives South Carolina an admission law which conforms to the best of modern standards, embodying a recognition of the fact that mental illnesses are diseases and the state's mental health facilities are hospitals.

To implement this concept the standards of the State Hospital have been gradually raised. In 1951 the State Hospital medical personnel was on a 57-1/2-hour work-week on day duty and a 67-hour work-week for night duty hours. Today, working on three shifts, the medical department puts in a 44-hour work-week. The number of full time physicians on the hospital staff—the hospital supplements their work with the services of many part-time physicians and consultants—has risen from 14 in 1951 to 22 in 1954. Where there were no clinical psychologists employed in 1951 there are now three. The number of chaplains has risen from two to three; the number of recreation workers from one to two; the number of psychiatric social workers from three to six; the number of nursing and attendant supervisors from 18 to 24; the number of ward nurses from 19 to 44; the number of ward attendants from 320 to 620.

In the same period, reflecting a steady improvement in the caliber of the hospital's care and treatment the per capita cost has risen from \$1.68 a day to \$2.05. At the same time the patient population has risen from 5,320 to 5,950 and the annual admission rate, indicating an earlier recognition of mental disease by physicians and the public, now is over the 2,000 mark.



Similar dramatic changes have taken place at Whitten Village where the per capita costs have risen from \$1.32 to \$1.93. The population of Whitten Village in the same period of time has been increased from 1,315 to 1,635 and in the next fiscal year should reach 1,770.

In the field of prevention and early discovery of mental disease, encouraging progress is being made. To the three clinics at Charleston, Greenville and Spartanburg, there has been added a fourth at Columbia. In these clinics, serving the entire state, persons having emotional or other problems which could develop into mental disease, requiring long hospitalization, can find diagnosis and treatment.

This field of early diagnosis and prevention, together with mental health education, designed also to aid in the early diagnosis of mental disease and in the prevention of mental illness, are in many ways the most profitable areas in which to attack the mental health problem. They offer the state the hope that it can save itself and its citizens in later years the waste and expense of long periods of hospitalization otherwise inevitable.

South Carolina cannot rest on its oars now, nor turn back. Similar progress is being made in the mental health field by other states; competition for psychiatrists and other needed medical personnel grows increasingly keener. What has been slowly gained can be quickly lost.

A great deal more construction and reconstruction needs, of course, to be done before the State Hospital will be the institution that it should be, one in which South Carolina may take pride. Within its means the state should provide, therefore, for the continuation of the improvement program until all overcrowding is eliminated and all dilapidation and decay remedied.

Since the State Hospital's population rises at an annual rate of approximately 200, and the training schools have still a backlog of applicants for admission, some provision should also be made, as has been made for the state institutions of higher learning, for the Mental Health Commission to retain the monies paid in by paying patients or their families to create a fund to be used for the purpose of constructing additional facilities at any of the mental health institutions as needed, or for research, until now the most neglected area in the mental health field, although it promises most to both patients and taxpayers.



The Commission would like to record its thanks to the staff and employees of the State Hospital, the Mental Health Clinics and the Commission's central offices, as well as its deep appreciation to you for your interest in and support of the state's mental health program.

Respectfully submitted

G. A. BUCHANAN, JR., *Chairman*