

NATIONAL HOME FOR DISABLED VOLUNTEER SOLDIERS,
MARION BRANCH
1700 East 38th Street
Marion
Grant
Indiana

HABS IN-306
IN-306

PHOTOGRAPHS

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HISTORIC AMERICAN BUILDINGS SURVEY
National Park Service
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1849 C Street NW
Washington, DC 20240-0001

ADDENDUM TO:
NATIONAL HOME FOR DISABLED VOLUNTEER SOLDIERS,
MARION BRANCH
(Marion VA Medical Center)
(VA Northern Indiana Healthcare System)
1700 East 38th Street
Marion
Grant County
Indiana

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WRITTEN HISTORICAL AND DESCRIPTIVE DATA

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ADDENDUM TO NATIONAL HOME FOR DISABLED VOLUNTEER SOLDIERS – MARION BRANCH (Marion VA Medical Center) (VA Northern Indiana Healthcare System)

HABS No. IN-306

Location: 1700 East 38th Street, Marion, Grant County, Indiana

The coordinates for the Marion Branch are 40.521096 N, -85.634819 W; this point is at Steele Circle, the central feature of the historic site plan. These coordinates were obtained in December 2011 and with it is assumed, NAD 1983. There is no restriction on the release of the locational data to the public.

Present Owner: U. S. Department of Veterans Affairs

Present Use: Marion Campus, VA Northern Indiana Health Care System. Various buildings on the campus are still used for veterans' psychiatric and long term care, and related offices, while a number of buildings on the east side of the complex are vacant and slated for demolition.

Significance: The Marion Branch of the National Home for Disabled Volunteer Soldiers (NHDVS) was established in 1889. The NHDVS was a federal institution authorized by Congress in 1865 and charged with caring for Civil War veterans disabled by their military service. By 1930 the system had eleven branches and became part of the new Veterans Administration. The Marion Branch was the seventh NHDVS branch and featured a picturesque campus of winding avenues and red brick Queen Anne buildings with wide porches and ornamental balustrades. The original buildings were designed by the Dayton, Ohio architectural firm of Peters and Burns. This firm also designed buildings for the Central Branch in Dayton and the Pacific Branch in Santa Monica, California.

As a federal facility, the Marion Home is indicative of the interplay between political patronage in Washington, D.C. and the development of a local jurisdiction. Like many of the NHDVS branches, a powerful politician was instrumental in influencing its location. Congressman George Steele of the 11th Indiana Congressional District successfully promoted the creation of this Branch in Grant County with the promise of an on-site natural gas well for free heating and lighting. This section of Indiana was experiencing a boom brought on by the discovery of natural gas in 1886. Steele served as local manager and later as Branch Governor.

In 1921, the Marion Branch became the Marion National Sanitarium, a facility dedicated to the treatment World War I neuropsychiatric cases, including what was then called shell shock and other mental disorders. The emphasis throughout the NHDVS had been shifting from residential campuses to more sophisticated medical care for veterans. Marion was an important effort to address mental illness in veterans. Since 1882 serious psychiatric cases were simply transferred to the Government Hospital for the Insane in Washington, DC. The large number of young veterans suffering from these problems after World War I brought a greater effort to use new methods of treatment to restore their mental health.

After 1930 the Marion Branch continued to specialize in psychiatric care as part of the Veterans Administration. The original hospital and many of the barracks were still used for patients until new psychiatric facilities were built on the west side of the site. While the current Northern Indiana VA Medical Center uses many of the historic structures, a number of the buildings on the east side of the campus are vacant, in disrepair, and slated for demolition.

Historian: Lisa Pfueller Davidson, 2011

PART I. HISTORICAL INFORMATION

A. Physical History:

1. Date of erection: March 18, 1890 – Official Opening

Construction on the first six barracks began in summer 1889 and on the original sections of the hospital in 1890. The rest of the over twenty original buildings at the Marion Branch were constructed between 1891 and 1902, including the north wing of the hospital (1893); barracks, 7, 8 and 9, the original mess hall, and theater (1895); barracks 10, 11, and 12, and governor's quarters (1896); the chapel (1898); and additional officers' quarters (1902).¹

2. Architect: Peters and Burns, Dayton, Ohio

3. Original and subsequent owners, occupants, uses: The Marion Branch has been owned and used by the Federal Government for veterans' residential and medical care since its founding.

1889-1920 – Marion Branch, National Home for Disabled Volunteer Soldiers
1921-1929 – Marion National Sanitarium (for neuropsychiatric care)

¹ See Historical Context section for citations.

1930-1995 – Marion Veterans Administration Hospital/Medical Center
1995-present – Marion Campus, VA Northern Indiana Veterans Health Care System
(combined with Fort Wayne Veterans Affairs Medical Center)

- 4. Builder, contractor, suppliers:** Little information survives regarding the contractors. William Saint is mentioned as the original contractor in some sources, with stone for foundations coming from an on-site quarry. S. C. Moore and Son were the contractors for the mess hall and two barracks in 1895-96.
- 5. Original plans and construction:** Peters and Burns designed the original hospital, barracks, and support buildings. Although varied in design, all of the early buildings feature red brick and limestone exteriors and a Queen Anne design sensibility. They placed these structures within a picturesque site plan of curving streets, possibly with assistance from a landscape gardener named Charles Beck, who is reported to have worked at other NHDVS branches.
- 6. Alterations and additions:** Several modern hospitals and other support buildings were added to the west side of the campus, first in the 1920s (now demolished), 1940s, and two new larger hospital facilities in 1997 and 2000. A number of the original barracks (Nos. 1 through 6) adjacent to the modern hospital have been preserved and are used for office space. Planned demolition of the original hospital and other buildings on the east side of the campus will drastically alter the surviving historic character of the site plan.

B. Historical Context:

The Marion Branch is three miles from the City of Marion, splendidly located upon a tract of 300 acres bordering upon the Mississinewa River and includes virgin forest, pasture and farm lands. The grounds are maintained excellently well, and with flowers, shrubbery, trees, shaven lawns, well kept walks and drives form a picture of surpassing beauty.²

Marion Branch was established in 1889-1890 during a period of rapid expansion for the National Home for Disabled Volunteer Soldiers (NHDVS). This area of east central Indiana was experiencing a natural gas boom and the new federal facility – the seventh local branch in the system - was welcomed as another marker of local prosperity. The National Asylum for Disabled Volunteer Soldiers (renamed National Home for Disabled Volunteer Soldiers in 1873) was established by an Act of Congress signed by President Lincoln in March 1865. Federal officials recognized the growing need to care for Union soldiers injured during their Civil War service and subsequently unable to support themselves. This unprecedented federal effort paralleled many state and local initiatives to care for disabled soldiers as the wounded filtered back North after years of fighting. The initial legislation did not specify where the Asylums would be located, but the general understanding was that several sites in different parts of the

² *Marion Branch NHDVS – National Military Home, Indiana, c. 1916, Marion VAMC files.*

northern states would be needed. By 1930 when the National Homes were incorporated into the new Veterans Administration, the system had grown to include veterans of multiple conflicts cared for at eleven campuses located around the country.

Many of the historic National Home sites are still part of the vast system of hospitals and other veterans' benefits managed by the Department of Veterans Affairs (the Veterans Administration was converted into a cabinet-level agency in 1989). There was a long history of Federal pensions and other financial support for disabled veterans, dating back to a 1776 law enacted by the Continental Congress. In 1833 the Bureau of Pensions was created by Congress, thus inaugurating the first federal veterans' benefit bureaucracy. The Civil War would greatly increase the number of veterans and the size of the federal veterans' pension system. Perhaps the most direct stepping stone to the establishment of the National Asylums was the 1862 General Pension Law. Congress established pensions for veterans disabled by injury or diseases during their service. By allowing for disease-related military disability for the first time, Congress greatly expanded the pension system. Historian Patrick Kelly has analyzed the unprecedented scope of the National Asylums and the veterans' benefits bureaucracy in the nineteenth century as representing a unique social welfare intervention of the Federal government in an otherwise laissez-faire era.³

There were a few, much smaller, federal institutions for disabled veterans that provided some precedent for the National Asylums – the U. S. Naval Asylum in Philadelphia, and the U.S. Soldiers' Home and the Government Hospital for the Insane, both in Washington, DC. The U.S. Naval Asylum for disabled and elderly regular Navy and Marine veterans was authorized first in 1811. Sufficient funds to complete a building in Philadelphia were finally authorized during the 1830s. The first purpose-built structure for the U.S. Naval Asylum was a Greek Revival central building designed by architect William Strickland. This multi-use building included living quarters, dining hall, reading and smoking areas, and a chapel.⁴

The U.S. Military Asylum, redesignated the U.S. Soldiers' Home in 1859, was created by Congress in 1851 after decades of debate. Many national leaders resisted the idea of a national military asylum as too similar to well-known monarchical military asylums such as France's Hotel des Invalides and England's Chelsea Hospital. It was the needs of Mexican-American War veterans that finally forced the issue. The Home was available to disabled and elderly regulars, or to volunteers with at least twenty years of service, who had contributed to its support through pay deductions. The Soldiers' Home administration structure of a board of commissions, branch governors, secretaries and treasurers parallels the one established for the NHDVS. Initially planned with three branches, the Home was centralized in Washington, D.C. by the late 1850s because of low demand. The Home included a pre-existing Gothic Revival

³ Patrick Kelly, *Creating a National Home: Building the Veterans' Welfare State, 1860-1900* (Cambridge: Harvard University Press, 1997), 2-4, 18. Kelly relates the unusual benefits of "martial citizenship" to the patronage traditions of the late nineteenth century.

⁴ A Second Empire hospital designed by John McCarther was added to the site in 1868. Suzanne Julin, "Northwestern Branch, National Home for Disabled Volunteer Soldiers," Milwaukee County, Wisconsin. National Historic Landmark Registration Form (draft), (2008), 30. U.S. Department of the Interior, National Park Service, Washington, D.C. (hereafter, Julin, "Northwestern Branch," NHL Registration Form).

cottage used by President Lincoln as a summer home during 1862 to 1864, and three Gothic Revival/Italianate-inspired structures built between 1851 and 1857. The bucolic grounds on a rise three miles north of the Capitol featured winding paths, attractive plantings, and scenic views.⁵

The Government Hospital for the Insane, soon known as St. Elizabeths, was established by Congress in 1852. Architect Thomas U. Walter designed the main hospital and central administrative building. This institution was founded to care for regular members of the Army and Navy, and residents of Washington, DC suffering from mental illness. St. Elizabeths also featured a naturalistic landscape with attractive views of the capital city from the south. Concurrent with establishing the NDHVS system in 1866, Congress passed an Act allowing for the treatment of Union veterans diagnosed as insane within three years of service to receive treatment at St. Elizabeths. In 1882, another law was passed allowing the National Homes to transfer mentally ill members to St. Elizabeths.⁶

None of these institutions would prove to be adequate to handle the demand resulting from the Civil War conflict. Of the three million men who fought in the Civil War, over seventy percent were U.S. soldiers, many of them volunteers. By the end of the war, nearly 282,000 Federal troops had survived a gunshot wound and nearly 30,000 had survived amputation of a body part.⁷ The suffering of soldiers from wounds, disease, and psychological stress troubled many civilians who sought to help. Local efforts to provide meals, shelter, or medical care sprang up all around the country, many building on the philanthropy skills of upper class women. Many of the local groups came to be organized under the umbrella of the U. S. Sanitary Commission (USSC), established by order of President Lincoln in 1861. Creation of the USSC was spearheaded by New York City Unitarian minister Henry Bellows and other prominent men in the Northeast. Initially the Commission was charged with monitoring the medical care of Union troops and this mission gradually expanded to include coordinating volunteer efforts, inspecting army medical facilities, providing medical staff, and providing short-term housing and travel assistance for discharged men, among other initiatives.⁸

The USSC would be a major voice in the debate over how to help disabled veterans as the war drew to a close. At the heart of the issue was the question of whether a simple expansion of the pension system or a more complex federal institution was necessary. Many, including Bellows and the USSC, initially resisted the idea of a federal institution for veterans as demeaning, expensive, and un-American. Gradually even the USSC acknowledged that many disabled veterans would not have sufficient community or family help to live independently even with a pension. They conceived a model of three asylums in diverse geographic regions providing shelter, military discipline, and light work that would encourage independence and eventually return the soldiers to society. USSC did not have the funds to put this plan into action

⁵ Kelly, 12; Judith Gladys Cetina, "A History of the Veterans' Homes in the United States, 1811-1930" (Ph.D. dissertation, Case Western Reserve University, 1977), 50-53, 87; Julin, "Northwestern Branch," NHL Registration Form, 30-31.

⁶ Julin, "Northwestern Branch," NHL Registration Form, 31.

⁷ Kelly, 15.

⁸ Julin, "Northwestern Branch," NHL Registration Form, 32; Kelly, 21.

and their work was almost completed discontinued by early 1866. However, these ideas directly informed the creation of the National Asylum for Disabled Volunteer Soldiers, in spite of the strong anti-institution stance of the USSC.⁹

As originally called for in the 1865 legislation, the National Asylum administrative structure numbered nearly 100 prominent citizens. The sentiment to help veterans and the recognition of their potential political power had resulted in swift passage of the bill without a workable administrative structure or clear direction on the best way to proceed. The Republican-controlled Congress, reacting to growing discontent with delays, amended the original act in April 1866 to create a more efficient and effective 12-member Board of Managers. The Board of Managers included the President of the United States, the Secretary of War, and the Chief Justice as ex officio members and nine men appointed by Congress. The political appointees were often veterans themselves. It was through their efforts that the Board of Managers fulfilled its charge of setting up branches of the NHDVS, conducting regular inspections, monitoring the organization's finances, and reporting to Congress.¹⁰

Benjamin F. Butler was elected president of the Board at its first meeting in May 1866 and held that position until 1880. Butler was a former Union Army general and controversial Republican politician from Massachusetts. He had the opportunity to exert a great influence on the development of the institution and its early branches in Maine, Wisconsin, Ohio, and Virginia.¹¹ The Eastern Branch was opened in Togus, Maine on November 10, 1866 to serve veterans in the Northeast. The first of the original branches, the Togus property was a former health resort that offered a number of buildings for immediate use. The Northwestern Branch in Milwaukee also was established in 1866, after negotiations with the Wisconsin Soldiers' Home Society transferred the money and property already acquired by that group to the federal effort. The Central Branch was located outside of Dayton, Ohio in 1867 to be accessible to a large number of veterans in the lower Midwest, western New York and Pennsylvania, and states to the south. The citizens of Dayton donated \$28,000 to the effort, again illustrating local desire to capture the benefits of having a federal facility.¹²

Initially some thought the National Asylums would be temporary and cease to exist as the disabled soldiers were able to return to family or died off. However given the level of investment and effort put into early design and construction for the National Asylums, it seems unlikely that the Board of Managers ever really expected the need for their services to go away. A name change in 1873 from National Asylum to National Home for Disabled Volunteer Soldiers officially acknowledged the long term resident status of most veterans as well as achieving the semantic change long sought by the Board. In 1874, Benjamin Butler wrote of his surprise that the demand for accommodations at the four branches was continuing to grow, given

⁹ Kelly, 23, 67; See Cetina, Chapter 3 for a discussion of the debate over institutional versus non-institutional care and the role of the USSC. Care of veterans by the NHDVS also included "outside relief" payments to veterans remaining in their own homes or residing a state-run soldiers' home.

¹⁰ Kelly, 47-48, 54.

¹¹ For more on Butler's colorful career and controversial reputation, see Kelly, 83-84.

¹² Julin, "Northwestern Branch," NHL Registration Form, 35.

the history of low enrollment at the regular Army Soldiers' Home in Washington, D.C..¹³ In addition to Milwaukee, Dayton, and Togus, the Southern Branch in Hampton, Virginia was established in 1870 in order to have a branch in a warmer climate and one more convenient to African-American veterans from the South.

A quasi-military system of drills and inspections sought to maintain discipline among the ranks and the fact that the administrators were also officers added to a hierarchy of authority and procedure.¹⁴ Residents of the home were required to wear a uniform, observe curfews, submit to inspections, and participate in work details if able. Infractions were punished by fines, loss of privileges, or expulsion. Governors, the lead administrator for each branch, stressed that strict military discipline was not expected but rules had to be enforced to ensure a healthful environment for all. Not surprisingly given the large number of men at a typical branch, the rules, particularly curfews and the prohibition on drunkenness, were frequently broken.

Rather than slowing as originally expected, the demand for the National Homes continued to grow as the Civil War veterans aged and Congress broadened admission requirements. In 1884 there was a major expansion of the eligibility requirements for the NHDVS branches. Previously proof had to be provided that one's disability was a direct result of military service. Now any honorably discharged Union veteran was eligible for admission, as well as veterans of the War of 1812 and the Mexican War. As previously self-sufficient veterans became disabled due to various causes, including the long term effects of their military service or simply old age, the demand for Soldiers' Home admission grew rapidly.¹⁵ Previously reluctant to expand, the Board of Managers now moved rapidly to establish the Western Branch in Leavenworth, Kansas in 1884, the Pacific Branch in Santa Monica, California in 1887, and the Marion, Indiana Branch in 1889.

Establishing the Marion Branch

Local Congressman George Steele, Sr. was instrumental in securing a branch of the National Home for his district. He served in the Union Army during the Civil War, retiring as a Lieutenant Colonel in 1876. At this time Steele returned to Marion and worked in the pork packing business until elected to Congress. Steele represented the 11th Indiana Congressional District from 1880 until 1890, and again from 1894 until 1902. These were boom years in east central Indiana, beginning with the local discovery of natural gas in 1886. Additional gas wells were established in Marion in January 1887. Natural gas could only be transported over short distances in this period, but it was an ideal fuel for industrial processes requiring high heat, such as glass manufacturing. Approximately 300 factories were constructed in the region between 1886 and 1893. The town of Marion grew from 3,500 residents in 1887 to approximately 9,000 in 1890.¹⁶

¹³ Kelly, 124.

¹⁴ Kelly, 141-48.

¹⁵ Kelly 128; Cetina 171, 167. Disabled veterans of the Mexican War and War of 1812 were first eligible in 1871, but there was some confusion regarding how to interpret the law requiring proof of service-related disability.

¹⁶ Nancy J. Hubbard, "Marion Branch, National Home for Disabled Volunteer Soldiers Historic

The growth of the region, and the promise of free heating and lighting via an on-site natural gas well drilled by local land owners and officials, assisted Steele's efforts to attract a branch of the National Home to his district. Legislation proposing a new branch in Grant County, Indiana was introduced during the spring of 1888.¹⁷ The Military Appropriations Committee approved the bill in April, causing much excitement in Marion and the local press.¹⁸ President Grover Cleveland signed the bill on July 23, 1888, with a \$200,000 appropriation for initial construction, and stipulations that a 200-acre tract be found with an on-site natural gas well drilled at local expense. The local press reported on the gleeful reception of this news, stating:

Not in years has anything occurred that was the cause of such general and genuine exultation and satisfaction. The importance of this accession to Marion can hardly be overestimated. There are those who regard the Soldiers' Home as of more importance than all the factories the town has acquired. ...It will be one of the six homes in the United States, and at once makes Marion a point of national interest. To Major Steele, who has worked tirelessly and unceasingly for the success of the measure is due the gratitude of every man and woman in the town and county.¹⁹

In his report to Congress for the 1888 fiscal year, Board of Managers President General William B. Franklin stressed the overcrowded conditions at the Home branches and the efforts to accommodate the continued increase in membership. In addition to the new Grant County, Indiana branch, work was underway to build additional barracks at existing branches.²⁰

A Board of Managers committee traveled to Marion on September 24, 1888 to view proposed sites for the new branch. They considered location, drainage, and gas well potential. The authorization act required that local landowners pay the cost of drilling a gas well. The site initially chosen by the committee was described in glowing terms:

The site selected is about 2 1/2 miles below the town of Marion, on the bank of the river flowing through the town, a branch of the Wabash River. It is traversed by a railroad. The ground is high dry, in a good state of cultivation, easily drained, with some fine timber, susceptible of ornamentation to a high degree, and in the opinion of the committee it complies in all respects with the requirements

District," Grant County, Indiana. National Register of Historic Places Registration Form, 1999. (U.S. Department of the Interior, National Park Service, Washington, D.C.), 13-14; Matthew D. Rector, "The Early Development, Design, and Construction of the Marion Branch of the National Home for Disabled Volunteer Soldiers," (M.A. Thesis, Ball State University, 2002), 19.

¹⁷ Hubbard, 13-14

¹⁸ "A Soldiers' Home," *Marion Weekly Chronicle*, 6 April 1888, 8.

¹⁹ "Hip, Hip, Hurrah," *Marion Daily Chronicle*, 23 July 1888, 3.

²⁰ NHDVS Board of Managers, "Letter from the President," *Annual Report of the Board of Managers of the National Home for Disabled Volunteer Soldiers for the Fiscal Year Ending June 30, 1888* (Washington, DC: GPO, 1889), 2-3.

of a Branch Home, and, so far as the committee can now judge, with those of the act of Congress establishing the Branch Home. There is a stone quarry on the site, which will materially cheapen the cost of construction of the Home buildings to be erected.²¹

Unfortunately efforts to drill a gas well on this property failed. It was determined that this and any other site to the north of Marion was just too far from the “gas belt” to provide a suitable well. As an on-site gas well was Congressionally-mandated, the committee again visited Grant County to search for a suitable site during February 1889. General Lew A. Harris and Colonel J. B. Thomas represented the Board of Managers on this trip. The Geiger and Elliot tract, three miles south of Marion, was chosen at a price of \$110 per acre. The committee claimed that the much higher price (the original selection to the north cost \$60 per acre) was acceptable because market value of this land was higher due to better soil and transportation access. However Congress would only allow \$90 per acre, so the difference was raised from local citizens. The 216.84 acre site was purchased during March and April 1889.²²

On May 2, 1889, General Harris demonstrated the new gas well at the site for a visiting delegation from the Board of Managers. Architect Silas R. Burns was also present to walk the grounds and consider building siting. Burns was a principal in the Dayton, Ohio firm of Peters and Burns. Col. J. B. Thomas and architect Burns returned later that month with landscape gardener Charles Beck from the Central Branch in Dayton, Ohio to further examine the property.²³ A newspaper account indicates that the landscaping and beautifying the grounds was to be the work of Beck, who is described as “design[ing] the work at Leavenworth [Western Branch] and Santa Monica [Pacific Branch]. Mr. Beck is an artist in his line, with few equals and no superiors, and he is highly enthusiastic over the aesthetic possibilities of the Marion home.”²⁴ It is not clear whether Beck’s duties included the entire site plan or simply plantings. This article also noted engineers were surveying the property and sending reports to Burns regarding locating the buildings.

The firm of Peters and Burns was familiar to the NHDVS Board as the architects for several new barracks built at the Central Branch in Dayton. Typically local architects were hired by the Board of Managers to design Branch buildings. As a quasi-independent Congressional board, the NHDVS operated outside of the normal system for federal building managed by the Supervising Architect of the Treasury. Local managers served as liaisons to the board and oversaw construction. Silas R. Burns (1855-1940) was educated at MIT and practiced architecture in Dayton, Ohio until the turn of the twentieth century. He seems to have been the lead architect on this project. His partner in Dayton was Luther Peters. Around 1900 Burns moved to Los Angeles and spent the rest of his career in practice there. His obituary lists him as

²¹ NHDVS Board of Managers, “Proceedings of the Board of Managers Meetings,” *Annual Report of the Board of Managers of the National Home for Disabled Volunteer Soldiers for the Fiscal Year Ending June 30, 1889* (Washington, DC: GPO, 1890), 39.

²² NHDVS, *Annual Report 1889*, 68-69; Hubbard, 14. The National Register nomination indicates that Grant County gave additional funds to cover the higher purchase price of the final site.

²³ Hubbard, 15; “Building Site Chosen,” *Marion Weekly Chronicle*, 17 May 1889, 4.

²⁴ “Building Site Chosen,” *Marion Weekly Chronicle*, 17 May 1889, 4.

the architect of buildings at the NHDVS Pacific and Central Branches, in addition to his work on the Marion Branch.²⁵

In the 1889 *Annual Report*, General Franklin requested \$191,000 for construction at the Marion Branch, stating that the site has “been purchased, drawings and estimates for the structures have been made and the buildings have been contracted for.”²⁶ While some buildings would be constructed quickly and occupied on a limited basis, the 1890 appropriation was to “sufficiently enlarge this Branch to accommodate the number of disabled soldiers who will seek admission to it, and to give it the necessary administration buildings, officers’ quarters, and chapel.”²⁷ An early site plan published in the *Marion Chronicle* during 1889 and 1890 shows the basic complement of planned buildings, but little resembles the final plan (Figure 1).²⁸ Twelve barracks are clustered along a grid of streets on the southern side of the site. The hospital, dining hall, theater and other buildings are located close by to the north, with curving connecting avenues but very little space between buildings.

Work began during the summer of 1889 on clearing the land, creating topographic maps, planning sewerage and utilities, and site planning for the buildings. The first construction priority was six nearly matching brick barracks – now designated Buildings No. 1-6. The buildings were complete except for water service by June 30, 1890 and 299 members were in residence. The branch officially opened on March 15th and some veterans, including a work detail from the Central Branch, had already been living on site.²⁹ General Arthur F. Devereux, a Union Army veteran from Massachusetts, was appointed as the Marion Branch’s first Acting Governor.³⁰ The first report of the Branch by Governor Devereux in June 1890 indicates that construction and management were still quite incomplete in spite of the official opening date a few months earlier. Initially Devereux had to do all the officers duties, with help from his daughter Louise. The branch lacked a surgeon until late May when Dr. A. D. Kimball arrived to take charge of the temporary hospital housed in part of Barrack no. 4. Poor drainage around the ongoing construction site resulted in numerous cases of malaria. When a treasurer arrived in late June to assist Devereux, the damp conditions aggravated his war wounds. Devereux complained about these conditions but assured the Board that the drainage problems would be fixed without excessive cost. There was only a pre-existing farmhouse on site for the officers, which Devereux

²⁵ “Burns, Silas R.” entry in Henry F. Withey and Elise R. Withey. *Biographical Dictionary of American Architects (Deceased)* (Los Angeles: Hennesey & Ingalls, Inc. 1970), 100-101. Pacific Coast Architecture Database [<https://digital.lib.washington.edu/architect/architects/188>] says he married a Louise Devereux in 1891. It seems likely that this was the same Louise Devereux who was the daughter of the Marion Branch’s first governor. Around 1900 Burns moved to Los Angeles and spent the rest of his career in practice there. His *Los Angeles Times* obituary (11 August 1940) lists him as the architect of buildings at the Pacific Branch of the NHDVS in West Los Angeles and Central Branch in Dayton, in addition to his work on the Marion Branch.

²⁶ “Letter from the President,” *Annual Report 1889*, 2.

²⁷ Ibid.

²⁸ “Grant County Soldiers’ Home,” *Marion Weekly Chronicle*, 14 June 1889, 7; “Marion Branch of the National Soldiers’ Home,” *Marion Chronicle*, 28 February 1890, 2.

²⁹ NHDVS Board of Managers, “Marion Branch Report,” *Annual Report of the Board of Managers of the National Home for Disabled Volunteer Soldiers for the Fiscal Year Ending June 30, 1890* (Washington, DC: GPO, 1891), 161.

³⁰ Rector, 27.

assessed as too small, in poor condition, and not readily adaptable. He lamented the fact that his surgeon and treasurer drove the three-and-a-half miles back and forth from rented quarters in Marion and were not available on site after hours.³¹

A revised site plan from December 1890 shows topographic contours and a mix of completed and in process buildings, including the first six barracks (1889-90), Barracks No. 7 (later Building No. 60), the original cemetery, and the first phase of hospital construction including the center administration building and dining room/kitchen ell and the south wing (Buildings No. 19, 20, and 22, 1890-91).³² (Figure 2) As built, this site plan is much more spacious and graceful than the original draft, with a circle located at the center of the plan (later named Steele Circle and containing a bandstand).³³ Curving streets surround the circle, around which are placed the hospital, mess hall, and governor's residence. The first six barracks were built in two rows of three, roughly in the early plan location, but subsequent barracks were placed to the east in a loosely formed quadrangle behind the headquarters building. Marion Branch member N. A. Hunt wrote a letter describing his new home during this period:

This a new home was opened to guests about one year ago, then one at [a] time, finished and occupied six barracks buildings 250 feet long by 40 feet wide and three stories high including basement. There are three more buildings same size partly finished. . . . the foundation is laid for very large and very fine hospital. These buildings are uniform in size and general appearance and are built in the best style of architecture. There is about 300 acres in the park near half of which is a beautiful forest . . . the rest has been a cultivated field.³⁴

Hunt highlights both the ongoing construction and the natural beauty of the site.

The new hospital administration building (No. 19), its kitchen and dining hall ell (Building No. 20) and one wing (Building No. 22, or the south wing) were nearing completion in mid-1891. While the first round of permanent construction of the Marion Branch was complete by fall 1891, the Branch still lacked proper officers' quarters and a permanent mess hall. An additional gas well would be needed, as well as improved water works.³⁵ Members of the new branch also felt the lack of recreational facilities. Perhaps due to the ongoing difficulties of establishing a new Branch, General Devereux resigned and was replaced as Branch Governor by Captain Justin H. Chapman of Connecticut, previously the Branch Treasurer.³⁶ Governor Chapman wrote in his 1891 *Annual Report*:

³¹ *Annual Report 1890*, 161-62.

³² Marion VAMC, Engineering drawing files.

³³ Hubbard, 15.

³⁴ Typescript of Letter, N. A. Hunt, (1 January 1891), Marion & Grant County File, Marion Public Library.

³⁵ NHDVS Board of Managers, "Marion Branch Report," *Annual Report of the Board of Managers of the National Home for Disabled Volunteer Soldiers for the Fiscal Year Ending June 30, 1891* (Washington, DC: GPO, 1892), 201-02.

³⁶ Devereux accused Colonel E. F. Brown, Inspector-General, of neglect of duty in the supervision of construction at Marion. The complaint was referred to the Board of Managers' President at their January 13, 1892 meeting, but his response was not entered into the record. See *Proceedings*, (13 January 1892), in *Annual Report 1892*, 57.

With the exception of a small percentage of offenders, the discipline has been good. As soon as we are able to offer the members the pleasures and recreations furnished by the older branches, such as a band to give daily concerts, a reading room, a billiard room, and a place for lectures and concerts, members will be more contented, and these improvements will be conducive to good order and discipline. I hope they may be furnished in the near future.³⁷

Chapman also writes about the efforts to beautify the grounds, including one and a half miles of graveled streets and avenues, 5,000 feet of brick gutters, and lawns and flower beds around the barracks. An osage orange hedge was planted in place of the old rail boundary fence on the north and west and plans were underway to plant much needed shade trees and shrubs around the grounds.³⁸

In June 1892, Governor Chapman reported that two more barracks were complete, as well as the hospital, kitchen, temporary mess hall, commissary and quartermaster's building, and laundry. He further recommended construction of two additional barracks and quarters for the treasurer and surgeon.³⁹ In 1893 he again requested more barracks, stating "for the past two years the barracks have been much overcrowded, and will continue to be so during the winter months until more room is given us."⁴⁰ Chapman also noted the continued need for support structures such as a chapel (services were being held in the basement of a barracks) and a conservatory to grow flowers for the grounds. With over 1,200 members and more applying, the demand for space at the new Branch quickly overwhelmed its capacity and subsistence budget. The new hospital wing had just opened, doubling capacity to 300 beds, and it was already full. The Branch was temporarily closed to new members on November 9, 1893, as men were soon sleeping on floors and in hospital wards. Over 350 men were turned away until admission reopened on May 17, 1894. Chapman's 1894 *Annual Report* included a request for two more barracks.⁴¹

For the next several years, the Marion Branch continued to build additional buildings and experience seasonal overcrowding and temporary admissions closures.⁴² In mid-1895, the

³⁷ NHDVS Board of Managers, "Marion Branch Report," *Annual Report of the Board of Managers of the National Home for Disabled Volunteer Soldiers for the Fiscal Year Ending June 30, 1891* (Washington, DC: GPO, 1892), 202.

³⁸ *Ibid.*, 202-03.

³⁹ NHDVS Board of Managers, "Marion Branch Report," *Annual Report of the Board of Managers of the National Home for Disabled Volunteer Soldiers for the Fiscal Year Ending June 30, 1892* (Washington, DC: GPO, 1893), 167-168.

⁴⁰ NHDVS Board of Managers, "Marion Branch Report," *Annual Report of the Board of Managers of the National Home for Disabled Volunteer Soldiers for the Fiscal Year Ending June 30, 1893* (Washington, DC: GPO, 1894), 150.

⁴¹ NHDVS Board of Managers, "Marion Branch Report," *Annual Report of the Board of Managers of the National Home for Disabled Volunteer Soldiers for the Fiscal Year Ending June 30, 1894* (Washington, DC: GPO, 1895), 140.

⁴² Inspector-General's Office, *Inspection Report – National Home for Disabled Volunteer Soldiers* (Washington, DC: GPO, 1894), 16; NHDVS Board of Managers, "Marion Branch Report," *Annual Report of the Board of*

Stinson Memorial Hall theater was recently completed, while plans were underway to construct two new barracks, a greenhouse, stable, and a permanent mess hall to replace the temporary wood structure.⁴³ Efforts were also made to convert attic spaces in the hospital and other buildings into dormitories to address the overcrowding issue. The inspector visiting Marion from November 5-11, 1895 remarked somewhat bemusedly that “even in these admirable barracks with open fireplaces in addition to the usual ventilating system and recessed dormitories, there seems to be the usual liking among the men for the attics as [illegible] places, as more retired and pleasant.”⁴⁴ By 1899 the Marion Branch had twelve large brick barracks, but it was only the establishment of the Danville Branch in Illinois that finally relieved the perennially overcrowding problem. With the construction of the Marion Branch chapel in 1898-1900 and new officers’ quarters in 1902, the campus was largely complete.⁴⁵

Construction of the Marion Branch was happening during a period of expansion for the National Homes, both in terms of new branches and new buildings for existing branches. General Franklin noted that earlier efforts to limit expansion of the Homes had led to the current overcrowding and recommended extensive expansion to accommodate long term growth:

There seems no doubt that the increase of the Home will go on for a long time, as the disabilities which lead old soldiers to seek the shelter of the Home are becoming greater every year. No one can tell to-day when this increase will begin to grow smaller, and the existing branches of the Home must, therefore, be kept open for a long time hereafter.⁴⁶

After a brief hiatus, expansion of the NHDVS continued with the Danville Branch in 1898, the Mountain Branch at Johnson City, Tennessee in 1901, and the Battle Mountain Sanitarium in South Dakota in 1907. While Marion represents the last of the picturesque Victorian branches, these later campuses exhibited the shift toward formal Beaux Arts planning and increased emphasis on modern medical care.

Governor Chapman, after years of ably managing the branch, died in November 1904. Colonel Steele became governor at this time. Like the other NHDVS branches, several souvenir

Managers of the National Home for Disabled Volunteer Soldiers for the Fiscal Year Ending June 30, 1897 (Washington, DC: GPO, 1898), 151. The Inspector-General’s Office began conducting annual inspections of all NHDVS branches in 1894.

⁴³ NHDVS Board of Managers, “Marion Branch Report,” *Annual Report of the Board of Managers of the National Home for Disabled Volunteer Soldiers for the Fiscal Year Ending June 30, 1895* (Washington, DC: GPO, 1896), 154-155.

⁴⁴ Inspector-General’s Office, *Inspection Report – National Home for Disabled Volunteer Soldiers* (Washington, DC: GPO, 1895), 27.

⁴⁵ Inspector-General’s Office, *Inspection Report – National Home for Disabled Volunteer Soldiers* (Washington, DC: GPO, 1899), 42; NHDVS Board of Managers, “Marion Branch Report,” *Annual Report of the Board of Managers of the National Home for Disabled Volunteer Soldiers for the Fiscal Year Ending June 30, 1900* (Washington, DC: GPO, 1901), 164; NHDVS Board of Managers, “Marion Branch Report,” *Annual Report of the Board of Managers of the National Home for Disabled Volunteer Soldiers for the Fiscal Year Ending June 30, 1902* (Washington, DC: GPO, 1903), 160.

⁴⁶ NHDVS, *Annual Report 1889*, 3.

booklets were published featuring photographs of the Marion Branch staff, buildings, and grounds. The earliest one that has been located for Marion dates to circa 1908. In typical booster language, the text declares:

The Government of the United States has made better provision in all respects for its defenders than has any other country in the world. Among all the Homes there is none better, it is universally conceded, than the National Military Home, Indiana. It is a city within itself, having in addition to magnificent quarters with all the modern conveniences, bathing facilities of the very best, a magnificent hospital with all modern equipment . . .⁴⁷

The majority of the booklet contains photographs of various buildings at the Branch with staff or members posing in front. The handsome brick structures are surrounded by manicured lawns and mature plantings (Figures 3 and 4). Another booklet from 1911 reiterates the praise for the Marion Branch's complete facilities and beautiful grounds, calling the NHDVS "a special tribute of a grateful nation to the courage, valor, and patriotism of its soldiers, volunteers in time of war."⁴⁸

The Marion Branch, like its NHDVS counterparts, became a visitor destination and a source of local pride and economic development. The author of *Centennial History of Grant County, Indiana, 1812-1912* praised Colonel Steele's success in acquiring the Branch and its positive impact on Marion:

The Soldiers' Home is a city within itself, and is one of the best single assets of Grant county. More than half a million dollars are distributed annually in the maintenance of the institution and the pensions paid the members. It is estimated that more than \$6 million have been distributed in pensions and a like amount in the improvements and maintenance of the property. . . . Marion has always received advertising from visitors to the institution, and it is the summer evening pleasure resort of the whole countryside.⁴⁹

In this period Colonel A. B. Crampton served as governor and the library was built with assistance from the Carnegie Corporation. While the Marion Branch continued to be seen as an asset to the region, important changes in the nature of the institution were about to take place due to the impact of World War I.

⁴⁷ NHDVS, Marion, *National Military Home Indiana* (Wabash, IN: Press of the Plain Dealer, c 1908), Marion VAMC files.

⁴⁸ W. Swift Wright, *Souvenir Photographs – National Home for Disabled Volunteer Soldiers Indiana – Twenty-First Anniversary*, (Marion, IN: W. Swift Wright, 1911), Marion VAMC files.

⁴⁹ "National Military Home of Indiana," in Rolland Lewis Whitson, ed., *Centennial History of Grant County, Indiana, 1812-1912* (Chicago and New York: The Lewis Publishing Company, 1914.), 345-348.

World War I and the Growth of Veterans' Health Care

World War I brought a great influx of new veterans, many young men with acute medical or psychiatric conditions that tested the capacity of the entire federal veterans' benefits system. At this time the NHDVS and the Bureau of Pensions were the two federal entities serving veterans. In 1917 Congress passed an amendment to the War Risk Insurance Act that established vocational and medical benefits for those with service-related disabilities and a low-cost insurance system for the totally disabled veteran and his dependents. The Public Health Service and contract hospitals were enlisted to quickly expand capacity.⁵⁰ Within the NHDVS, World War service men were admitted via an Act of Congress on October 6, 1917. There was a growing realization that meeting new demands for more sophisticated medical care would require substantial reorganization. Colonel R. C. Humber addressed these issues in his inspection report for 1919. In his view, the current “perfunctory and routine manner” of medical care in the NHDVS hospitals would not suffice to treat the ailments of the newer veterans:

In the past the patients cared for in the hospitals were generally those afflicted with the diseases of old age. These patients required a minimum of treatment and a maximum of care and nursing, a permanent cure being, of course, impossible. ... An entirely new condition is now confronted. With the new members from the late war will appear diseases and disabilities of every character and degree, requiring from the surgeons, professional ability and skill of the highest order.⁵¹

Changes in the needs of veteran patients were accompanied by major advances in medical treatment over the previous twenty years, including an increase in surgical treatment and other specialties, such as psychiatry.

Psychiatric care was rapidly evolving during the early twentieth century, however the specialty was still in its infancy, with precise diagnoses of conditions such as schizophrenia, manic-depression, and post-traumatic stress disorder still years away. The professionalization of psychiatry in this period did bring changed terminology, with “madness” or “lunacy” falling out of favor and instead descriptive phrases such as “mental alienation” or “nervous disorder” gaining currency.⁵² In the immediate aftermath of the World War, treatment of combat-induced mental illness was complicated by debate over the causes of “shell-shock” or “war neuroses.” Shell-shock was seen as fundamentally a neurological problem, with the mental illness caused by the concussion of high explosives. Patients considered to have war neurosis exhibited largely the

⁵⁰ Suzanne Julin, “National Home for Disabled Volunteer Soldiers – Assessment of Significance and National Historic Landmark Recommendations.” 2008. (U.S. Department of the Interior, National Park Service, Washington, D.C.), 34-35 [hereafter Julin, NHL Overview].

⁵¹ Inspector-General's Office, *Inspection Report – National Home for Disabled Volunteer Soldiers* (Washington, DC: GPO, 1919), 11.

⁵² See “Appendix A Note on Terminology,” in Carla Yanni, *The Architecture of Madness: Insane Asylums in the United States* (Minneapolis: University of Minnesota Press, 2007), 161-62.

same symptoms as shell-shock, but the cause was viewed as a more complex blend of neurological and psychiatric issues brought on by trauma.⁵³

Prior to this period, each NHDVS branch had dealt with their mentally-ill members in an ad hoc manner, generally designating a ward in the hospital for group supervision and, after 1882, transferring the most difficult or violent cases to St. Elizabeths (Government Hospital for the Insane) in Washington, DC. In September 1920 the NHDVS Board of Managers passed an official proposal to convert the Marion Branch into a neuropsychiatric facility dedicated mainly to World War I veterans with nervous or mental conditions. Other members were transferred, usually to Milwaukee or Danville. Civil War veterans suffering from psychiatric conditions, typically dementia, were cared for at the Southern Branch in Hampton, Virginia.⁵⁴ The *Marion Daily Chronicle* described proposed changes at the Marion Branch, noting that “plans for the conversion of the buildings and equipment of the Marion branch of the National Military Home into a national psychopathic sanitarium include the expenditure of several thousand dollars in the remodeling and enlarging of practically all of the present buildings.”⁵⁵ Local architect Harry G. Bowstead was preparing working drawings and would oversee the remodeling. His plans were developed in consultation with NHDVS officials, the Bureau of War Risk Insurance, and the Rockefeller Foundation. The Rockefeller Foundation representatives included experts in mental hospital design such as New York State architect Lewis Pilcher and Dr. Thomas Salmon, well-known psychiatrist and medical director of the National Committee for Mental Hygiene of the Rockefeller Institute. On January 1, 1921, the branch name officially changed to Marion National Sanitarium.⁵⁶

Colonel William MacLake served as Medical Director and Superintendent of the National Sanitarium. During fiscal year 1922, the sanitarium cared for 1,215 patients. Most of the patients were Army veterans of the recent German War, as it was called, but 10 Spanish American War veterans were treated, along with 24 Marines and 66 Navy veterans.⁵⁷ The Marion complex also received an 80-bed neuropsychiatric tuberculosis facility to fill a specialized but vital need to provide tuberculosis treatment for World War veterans also suffering from “psychoses.”⁵⁸ Other new sanitarium facilities included an Occupational Therapy

⁵³ Paul Wanke, “American Military Psychiatry and Its Role Among Ground Forces in World War II,” *Journal of Military History* 63, no. 1 (January 1999): 128. The prevalence of mental conditions among World War I veterans was discussed, but the prevailing concern seemed to be more effective admission screening and avoiding loss of man power on the front to “nervous conditions.” See Thomas W. Salmon, “The Future of Psychiatry in the Army,” *Military Surgeon* 47, no. 2 (August 1920): 200-207.

⁵⁴ Inspector-General’s Report – NHDVS (1925) published in *Construction at Soldiers’ Homes, Hearings Before the Committee on Military Affairs*, House of Representatives, 69th Congress, 1st Session (Washington, DC: GPO, 1926), 17.

⁵⁵ “Making Preparations for Change at Marion Soldiers Home,” *Marion Daily Chronicle*, 17 August 1920, 7.

⁵⁶ Hubbard, 15; “Marion Sanatorium is Among Leaders,” *Marion Leader-Tribune*, 19 December 1925.

⁵⁷ NHDVS Board of Managers, “Marion Branch Report” *NHDVS Annual Report* (1922), 3, typescript in VACO Library. Colonel William MacLake, Medical Director and Superintendent, submitted the branch report.

⁵⁸ U.S. Treasury Department, *Report of the Consultants on Hospitalization Appointed by the Secretary of the Treasury to Provide Additional Hospital Facilities* (Washington: GPO, 1923), 22, 26. Money for the neuropsychiatric tuberculosis hospital was appropriated on June 27, 1921.

building (1922), and a gymnasium (1923).⁵⁹ A row of duplex houses was built west of the chapel to house the expanded medical staff. An article in the Indianapolis *Sunday Star* commented that:

More than 1,000 boys who fought in the war are receiving treatment and training to heal and cure the wounds to the mind, nerves, and body in general. Everything possible is being done to make them happy. When one visits certain parts of this institution he is likely to forget that he is visiting a sanitarium, as the appearance is more like a college.⁶⁰

In spite of the image of young veterans recovering in a college-like setting, the stresses of the war had created a new member population more severely ill than originally anticipated. In 1924, NHDVS Chief Surgeon B. F. Hayden noted that not only was the sanitarium filled to capacity, but the nature of the institution was changing due to a larger number of psychotic patients, rather than milder cases he termed “psychoneurotic.” The limited treatment options of rest, electric shock therapy, or counseling could not help many severely traumatized veterans. Several cottages, as the barracks were called in this period, needed to be converted to closed wards with strict supervision and metal radiator and window guards were installed in the hospital and other buildings.⁶¹

Given the steady demand for the specialized treatment provided at the Marion Sanitarium, the Board of Managers started lobbying Congress in 1925 for funds to expand.⁶² At this time the campus included 67 buildings, including four hospital buildings and eleven “cottages” or barracks. The appraised value of the buildings was \$2,360,300.53.⁶³ An inspector noted that although the branch was well-equipped for rehabilitating neuropsychiatric patients, few were able to leave once admitted. Chief Surgeon Hayden’s analysis differed, even as he also noted the increasing demand for the Marion facilities. He emphasized the extensive occupational therapy program, including encouraging able patients to do useful jobs around the complex.⁶⁴ Marion did receive another 200-bed barracks in 1929 and a 75-bed hospital annex in 1930 (Building No. 25), but requests for further expansion were denied because the Veterans Bureau

⁵⁹ NHDVS Board of Managers, “Report of Chief Surgeon,” [James Mattison (24 November 1922)], *NHDVS Annual Report* (1922), 3, typescript in VACO Library.

⁶⁰ Henry S. Wood, “Health Received by War Vets at Marion Sanitarium,” *Indianapolis Sunday Star*, 25 May 1924, copy of clipping in files of the VACO FPO.

⁶¹ NHDVS Board of Managers, “Report of the Chief Surgeon,” *NHDVS Annual Report* (1924), 3, typescript in VACO Library. For more on military psychiatry in this period see Eric T. Dean, Jr., *Shook Over Hell: Post-Traumatic Stress, Vietnam, and the Civil War* (Cambridge, MA: Harvard University Press, 1997), esp. Chapter 2 – “Every Man Has His Breaking Point”: War and Psychiatry. Post-Traumatic Stress Disorder (PTSD) was not officially recognized until 1980.

⁶² NHDVS – Board of Managers *Annual Report* (1925) published in *Construction at Soldiers’ Homes, Hearings Before the Committee on Military Affairs*, House of Representatives, 69th Congress, 1st Session (Washington, DC: GPO, 1926), 37.

⁶³ Inspector-General’s Report – Marion Branch, NHDVS (1925) published in *Construction at Soldiers’ Homes, Hearings Before the Committee on Military Affairs*, House of Representatives, 69th Congress, 1st Session (Washington, DC: GPO, 1926), 29.

⁶⁴ NHDVS Board of Managers, “Report of the Chief Surgeon,” (5 December 1925), *NHDVS Annual Report* (1925), 2-3, typescript in VACO Library.

planned a large neuropsychiatric addition to its hospital in Chillicothe, Ohio. In 1930, Marion was the third largest branch in the system with over a thousand patients and the largest civilian staff of 486 employees. However, big changes were underway for veterans' care and the NHDVS.⁶⁵

In early 1930, General George H. Wood, President of the NHDVS, testified before the House Committee on Military Affairs that the World War had dramatically shifted demand for the Home's services. Between 1907 and 1919 no additional construction was undertaken anywhere in the system. By the end of the war, the potential membership had increased tenfold. In 1929, the state soldiers' home in Bath, New York became the eleventh branch of the NHDVS. However Members of Congress had been advocating for restructuring federal veterans' services for the last several years. Three different agencies served veterans – the National Home for Disabled Volunteer Soldiers, the Pension Bureau, and the Veterans Bureau (founded in 1921 and primarily involved with medical care and insurance). Various restructurings were considered; the most straightforward and ultimately successful proposal was combining all three agencies under a new Veterans Administration. This proposal was approved by Congress on July 3, 1930 and instituted through an executive order. The NHDVS Board of Managers resisted the initial proposals, but finally their eleven branches were folded into the new VA, with Marion continuing to specialize in psychiatric treatment.⁶⁶ Several other branches had constructed new hospitals or barracks before the shift and in 1931 the Marion Branch now was the third smallest branch in spite of continuing to serve an average of 1,200 patients. Little construction took place during the 1930s other than the replacement of the mess hall in 1938 after a fire destroyed the 1895 original.

Another large ward/administration building (Building No. 124) was added to the Marion complex during World War II (Figure 5). After World War II, there was again a large increase in the number of veterans, but the trend was toward outpatient rather than residential care. In 1950, the Marion VA Hospital housed 1,700 patients – 1,300 World War I veterans considered chronic psychiatric cases and 400 World War II veterans. Supposedly three out of four of these younger veterans would be discharged within a year, having received the benefits of modern treatments such as electric and insulin shock therapy, pre-frontal lobotomies, or narco-synthesis, a truth serum treatment. Less drastic therapies included occupational and physical therapy as well as counseling. The view was that World War I veterans were generally institutionalized, due to limited medical options, but new patients could be cured by advanced methods.⁶⁷ Early drug therapies and other treatments were becoming available but psychiatric care for veterans remained a difficult issue.

By 1975, the Marion Veterans Administration Hospital included 97 buildings on 120 acres. Seventeen of the buildings housed 1,210 veterans.⁶⁸ Many of the historic buildings were

⁶⁵ NHDVS Board of Managers, "Letter from the President," *Annual Report for the Fiscal Year 1929* (Washington, DC: GPO, 1930), 5; *Construction at Soldiers' Homes, Hearings Before the Committee on Military Affairs*, House of Representatives, 71st Congress, 2nd Session (Washington, DC: GPO, 1930), 4, 11.

⁶⁶ Cetina, 382-383.

⁶⁷ Richard S. Simons, "Veterans Are Not Forgotten," *Indianapolis Star Magazine*, 21 May 1950, 6-7.

⁶⁸ Typescript, "Veterans Administration Hospital, Marion, Indiana – Historical Notes," Marion VAMC files.

still used for their original purposes, but some modernization efforts began to emerge. Starting in 1976 with Building No. 10, several barracks were converted from open ward into four bed semi-private rooms.⁶⁹ Acoustic tile drop ceilings and built-in cabinets were installed to update the space here and in Buildings No. 7, 11, and 18, the cluster of barracks on the east side of campus known as Franklin Court. In 1978 the complex was renamed the Marion VA Medical Center. A Facility Development Plan completed in 1989 described plans for expansion, such as a 240-bed geropsychiatric hospital and new dietetic building.⁷⁰ In 1995 Marion was combined with Fort Wayne VA Medical Center to create VA Northern Indiana Health Care System (NIHCS). Marion continued to provide psychiatric and long term care while general medical cases are handled in Fort Wayne. The new geropsychiatric hospital was completed in 1997. Another 100-bed psychiatric hospital opened in 2000.⁷¹

During the late 1990s, the Marion Branch was surveyed and added to the National Register of Historic Places as a historic district with 78 contributing historic buildings, indicating a concern for documenting and preserving the site. However, many buildings on the east side of the campus, including the original hospital, Buildings No. 10, 11, 18 and 7, and Building No. 60 (the original barracks no. 7), were left vacant. As these buildings quickly deteriorated, VA administrators have made plans to demolish them. Efforts to find new uses or work with developers have not been successful, including a 2007 proposal to turn several barracks into affordable senior housing.⁷² Historic Landmarks Foundation of Indiana put the Marion Branch on its list of 10 most endangered landmarks in 2004, 2005, and 2006.⁷³ Numerous historic buildings are currently slated for demolition.

PART II. ARCHITECTURAL INFORMATION

See individual reports on selected Marion Branch buildings for detailed architectural information:

HABS No. IN-306-A	NHDVS – MARION BRANCH, BUILDINGS No. 19 & 20 (Hospital and Hospital Annex)
HABS No. IN-306-B	NHDVS – MARION BRANCH, BUILDING No. 21 (Hospital North Wing)
HABS No. IN-306-C	NHDVS – MARION BRANCH, BUILDING No. 22 (Hospital South Wing)
HABS No. IN-306-D	NHDVS – MARION BRANCH, BUILDING No. 34 (Director's House)

⁶⁹ Jerry Miller, "VA's Building 10 Gets a New Look," *Marion Chronicle-Tribune*, 29 December 1976.

⁷⁰ Department of Veterans Affairs, "A Century of Caring – VA Medical Center, Marion, Indiana," 1989, Marion VAMC files.

⁷¹ Marc Lazar, "VA to Replace Old Psych Center," *Chronicle-Tribune*, 3 December 1997; Gail Koch, "Historic Hospital Nears Its Demise," *Chronicle-Tribune*, 14 July 2002, 1.

⁷² Andrew Neel, "VA Considers Senior Housing," *Chronicle-Tribune* [Marion, IN], 5 August 2007, 1.

⁷³ Sean F. Driscoll, "VA Remains Endangered," *Chronicle-Tribune*, 6 February 2005.

HABS No. IN-306-R	NHDVS – MARION BRANCH, BUILDING No. 25 (Hospital Annex No. 2)
HABS No. IN-306-U	NHDVS – MARION BRANCH, BUILDING No. 62 (Greenhouse)
HABS No. IN-306-AA	NHDVS – MARION BRANCH, BUILDING No. 24 (Hospital Annex No. 1, Barracks No. 8)
HABS No. IN-306-AD	NHDVS – MARION BRANCH, BUILDING No. 7 (Barracks)
HABS No. IN-306-AI	NHDVS – MARION BRANCH, BUILDING No. 60 (Medical Treatment Building)
HABS No. IN-306-AH	NHDVS – MARION BRANCH, BUILDING No. 10 (Barracks)
HABS No. IN-306-AJ	NHDVS – MARION BRANCH, BUILDING No. 11 (Barracks)
HABS No. IN-306-AK	NHDVS – MARION BRANCH, BUILDING No. 13 (Guard Barracks)
HABS No. IN-306-AL	NHDVS – MARION BRANCH, BUILDING No. 18 (Barracks)
HABS No. IN-306-AM	NHDVS – MARION BRANCH, BUILDING No. 42 (Supply Service Building)
HABS No. IN-306-AN	NHDVS – MARION BRANCH, BUILDING No. 121
HABS No. IN-306-AO	NHDVS – MARION BRANCH, BUILDING No. 135 (Pump House)
HABS No. IN-306-AP	NHDVS – MARION BRANCH, BUILDING No. 140 (Trash House)
HABS No. IN-306-AQ	NHDVS – MARION BRANCH, BUILDING No. 102 (Duplex Quarters)
HABS No. IN-306-AR	NHDVS – MARION BRANCH, BUILDING No. 120 (Pump House No. 3)

PART III. SOURCES OF INFORMATION

- A. **Architectural drawings:** Original or early architectural drawings for the Marion Branch buildings have not been located. The PLIARS database preserves many floor plans that serve as a record of existing conditions and change over time – the earliest of these drawings date to the 1930s. Engineering Services at the Marion VAMC has extensive flat files, but very little early material. Most of these drawings date to the second half of the twentieth century.
- B. **Early Views:** The best sources of early views are the published souvenir books from 1908, 1911, and c. 1916. The Indiana Room at the Marion Public Library also has a collection of early views, mainly postcards, of the Marion Branch. This collection also has the earliest image of the Branch that has been located, a photograph of the hospital under construction, c. 1891.

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Marion VA Medical Center files [general historical files and drawings], Marion, IN.

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PART IV. PROJECT INFORMATION

Documentation of selected buildings at the former Marion Branch of the National Home for Disabled Volunteer Soldiers was undertaken in 2011 by the Historic American Buildings Survey (HABS) of the Heritage Documentation Programs division of the National Park Service, Richard O'Connor, Chief. The project was sponsored by the Department of Veterans Affairs (DVA), Office of Construction and Facilities Management, Kathleen Schamel, Federal Preservation Officer. Project development was coordinated by Catherine Lavoie, Chief, HABS and by Douglas Pulak, Deputy Federal Preservation Officer, DVA. The field work was undertaken and the written histories were produced by Lisa P. Davidson and Virginia B. Price, HABS Historians. The large format photography was undertaken by HABS Photographer Renee Bieretz; an initial photographic survey was completed by HABS Photographer James Rosenthal in 2008. Valuable assistance was provided by James A. Broyles, Project Engineer, Engineering Services, Marion Campus, VA Northern Indiana Health Care System.

PART V. ILLUSTRATIONS

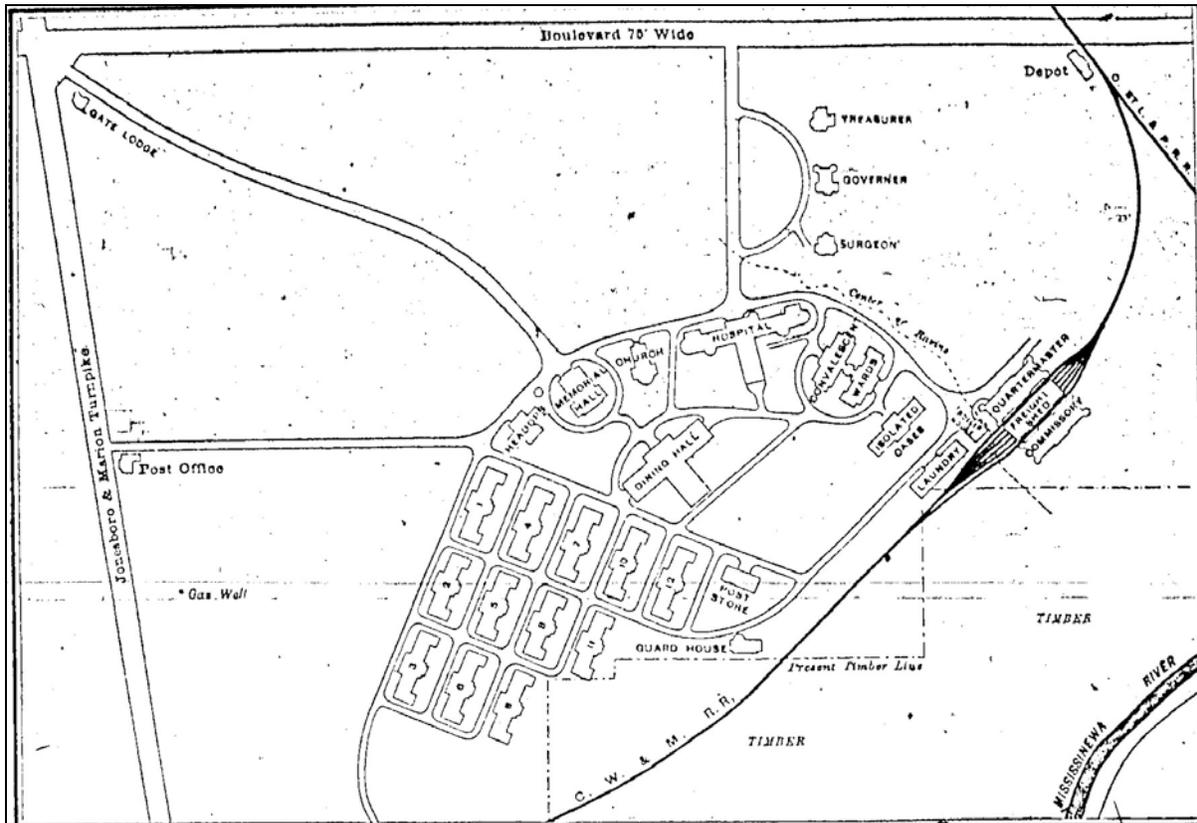


Figure 1: Proposed Marion Branch Site Plan, c. June 1889
Source: "Grant County Soldiers' Home," *Marion Weekly Chronicle*, 14 June 1889,
Marion & Grant County File, Marion Public Library

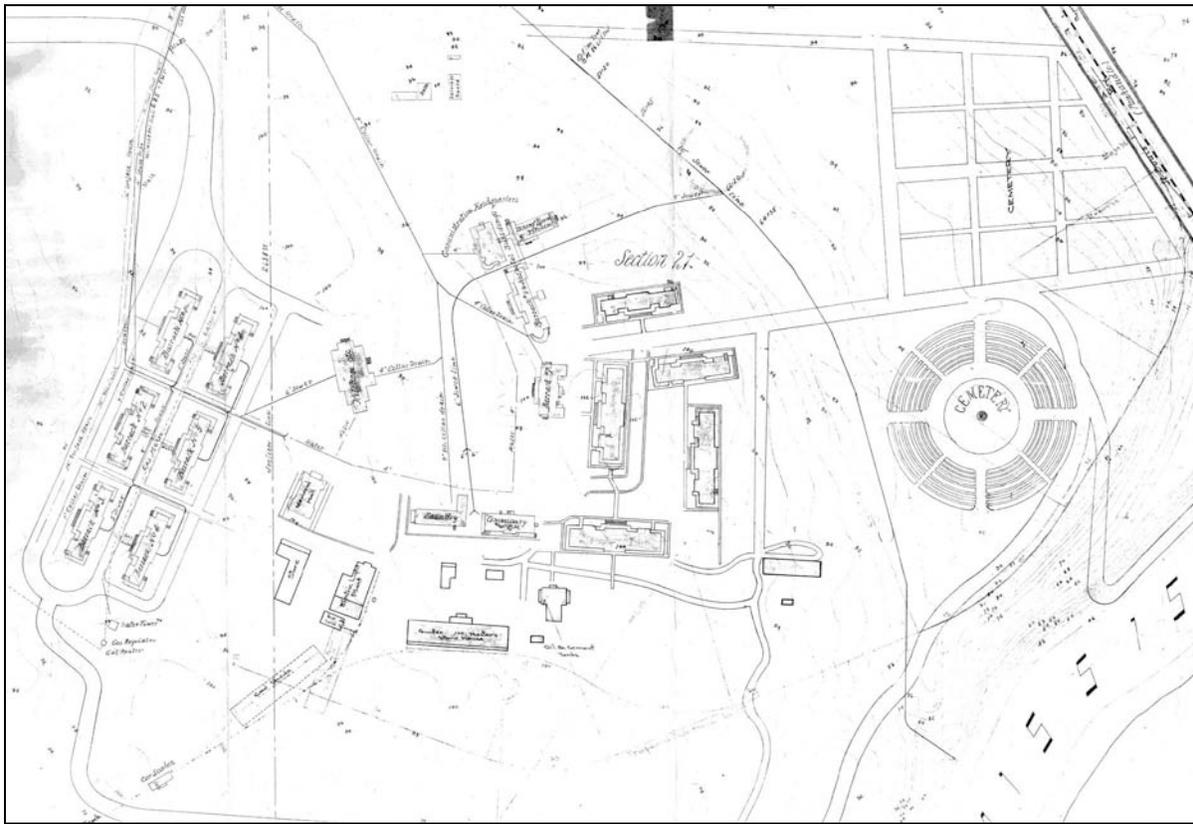


Figure 2: Excerpt of Topographic Map, Marion Branch, December 1890
Source: Engineering Services Drawing Files, Marion VA



Figure 3: Bandstand in Steele Circle, c. 1908
Source: *National Military Home Indiana*, c. 1908, Marion VAMC files



Figure 4: Company No. 5 in Front of Barracks, c. 1908
Source: *National Military Home Indiana*, c. 1908, Marion VAMC files

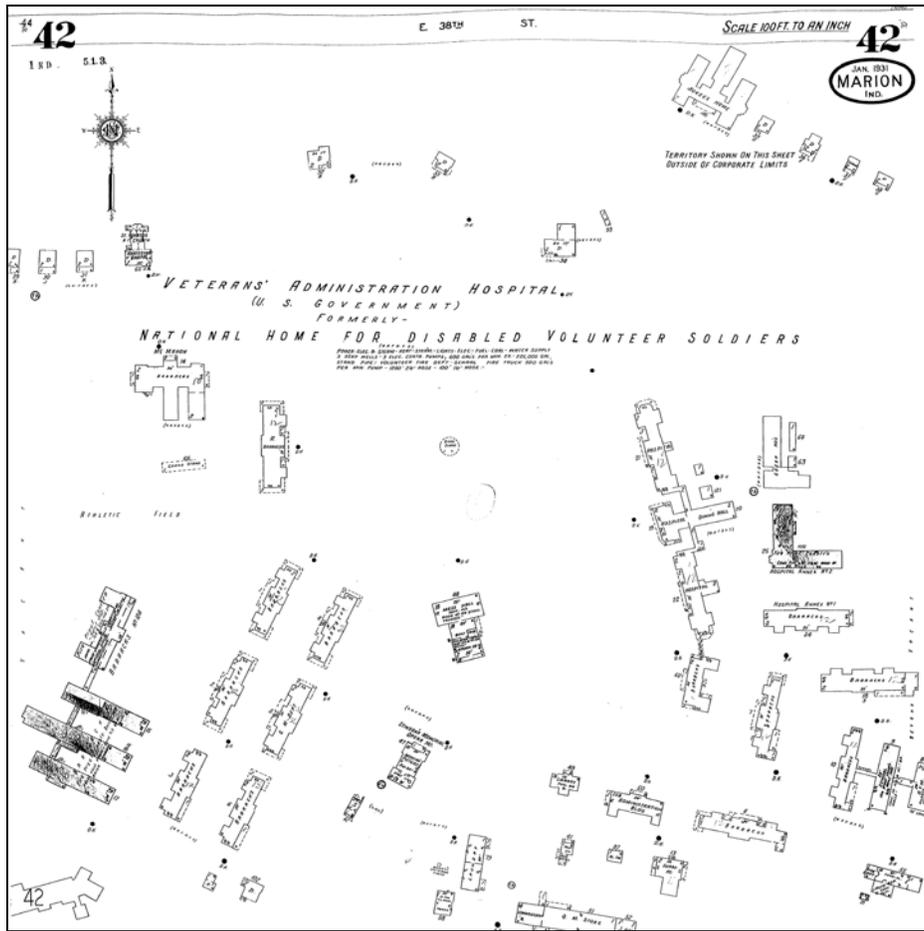


Figure 5: Marion VA Hospital Site Plan, revised c. 1947
Source: adapted from Marion, IN Sanborn Fire Insurance Map