

WILLIAM STOUT CHIPLEY AND THE EVOLUTION OF THE  
MEDICAL SUPERINTENDENCY AT EASTERN STATE  
LUNATIC ASYLUM, 1855-1869

Ronald F. White

**F**rom its founding in 1824 until 1844, Eastern State Lunatic Asylum in Lexington, Kentucky, was governed by a strong board of managers which was deeply involved in local politics. Medical care was provided part-time by local physicians, especially those associated with Transylvania University.<sup>1</sup> Beginning in 1844 Eastern State was placed under the watchful eye of Dr. John Rowan Allen, the first in a long line of full-time medical superintendents. For the first few years Allen enjoyed a good working relationship with the board of managers and was able to focus on the medical aspects of his profession and initiate important reforms in the institution. By the early 1850s, however, the affairs of Eastern State became increasingly linked to state politics as a consequence of the funding of the extensive expansion and renovation of the physical plant. In 1854 increased state oversight culminated in the forced resignation of Allen as a result of cost overruns associated with his purchase of a heating system for the asylum. For Allen it became painfully evident that, henceforth, the medical superintendency at Eastern State would require considerably more than medical expertise.<sup>2</sup>

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RONALD F. WHITE, PH.D., is an associate professor of philosophy at the College of Mount St. Joseph in Cincinnati where he teaches ethics, health-care ethics, and the philosophy of human nature.

The author would like to thank Layne (Nonnie) D. Klein at the Cincinnati Medical Heritage Center for her assistance in locating several of Chipley's publications.

1 See Ronald F. White, "Custodial Care for the Insane at Eastern State Hospital in Lexington, Kentucky, 1824-1844," *The Filson Club History Quarterly* 62 (1988): 303-35.

2 See Ronald F. White, "John Rowan Allen, M.D., and the Early Years of the

For the next fourteen years, William Stout Chipley, Allen's successor, exemplified the new nineteenth-century superintendent; he was a nationally recognized physician as well as a gifted politician. However, unlike Allen, Chipley's fate in 1869 had nothing to do with the performance of his administrative duties but rather was determined by the bitter political rivalries triggered by the Civil War in a border state.

There are clear dangers involved in writing the history of the American asylum solely from a national perspective. By focusing myopically on a national perspective, such as the workings of the Association of Medical Superintendents, the *American Journal of Insanity*, and the like, historians have often underestimated the idiosyncratic nature of the asylum. Local circumstances played an important role in the history of Eastern State and the formulation of mental-health policies in Kentucky. This essay will examine some of the indigenous forces that contributed to Chipley's success and the political reasons for his eventual resignation. It is to be hoped that this kind of analysis will contribute to our larger understanding of how the American asylum changed over time and how the idiosyncracies of local and state politics have contributed to this evolution.

### Medical Philosophy

William Stout Chipley was born in Lexington, Kentucky, on 18 October 1810.<sup>3</sup> He was the son of Steven and Amelia Stout Chipley. Steven Chipley was a respected clergyman and one of the original investors in the ill-fated Fayette Hospital.<sup>4</sup> Chipley attended medical

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Psychiatric Profession in Kentucky, 1844-1854," *The Filson Club History Quarterly* 63 (1989): 5-23.

3 A brief biographical sketch of Chipley, written by his daughter, can be found in Robert Peter, *The History of the Medical Department of Transylvania University* (1st publication series, no. 20; Louisville: The Filson Club, 1905), 147-53. His obituary appears in the *American Journal of Insanity* 36 (1879-1880): 358. See also a brief biography in the *American Journal of Insanity* 38 (1881-1882): 177-79.

4 The original building at Eastern State was intended to serve as a medical hospital in conjunction with Transylvania. However, the panic of 1819 left Steven Chipley

school at Transylvania University where he wrote a thesis entitled, "An Inaugural Dissertation on Variola and the Prophylactic Power of Vaccination."<sup>5</sup> After graduating in 1832, Chipley moved to Columbus, Georgia, where he established a successful medical practice and was even elected mayor. In 1844 with news of the ill health of his parents, Chipley returned to Lexington where in 1853 he was elected to the chair of Theory and Practice of Medicine at Transylvania. In 1855, when his duties began at Eastern State, he retained his Transylvania appointment as well. Following the lead of his predecessor John Allen, Chipley enjoyed a double appointment at the asylum and the medical school, a unique chapter in the history of the American asylum, which lasted until 1857 when the Transylvania Medical Department closed.

Chipley soon realized that the superintendency would require medical experience beyond his Transylvania degree, so in 1857 he traveled to Europe where he witnessed the administration of moral therapy firsthand. It was not unusual for American superintendents to make a pilgrimage of this kind. The English and the French were the first to challenge the longstanding belief that insanity is an incurable bodily ailment. This shift from custodialism to treatment found expression in what nineteenth-century medical superintendents called "moral therapy." In contrast to the rigid determinism of Calvinism and the traditional medical view that insanity was incurable, moral therapy promised the restoration of reason. This new approach placed an emphasis on specialized architecture, improved living conditions, orderly lifestyles, and patriarchal hospital organization under a trained physician.

While European Quakers provided the original impetus for moral therapy, the American medical superintendents were the first to attempt its implementation on a large scale, beginning at the

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and the original investors in financial ruin and the edifice unfinished. For the story of the early years of Eastern State, see Ronald F. White, "Custodial Care for the Insane at Eastern State Hospital."

5 The composition of a "Medical Thesis" was the final requirement for graduation with a medical degree at Transylvania. The theses are on file in the university archives of Transylvania University library's special collections department.

Hartford Retreat in 1824 and later at other northeastern asylums.<sup>6</sup> Moral therapy was clearly consistent with the optimism of the antebellum reform movement in the United States.<sup>7</sup>

One of the most important tenets of moral therapy, as it was practiced in the United States, was the distinction between "recent cases" and "old cases." When the onset of the disease had occurred less than a year prior to hospitalization, physicians diagnosed it as a "recent case." If that patient was treated in a well-ordered asylum, insanity was considered highly curable. But if the patient had been afflicted for more than a year prior to treatment ("old case"), then the patient was deemed an incurable candidate for lifelong custodial care.

Medical superintendents practicing moral therapy relied heavily on architecture to control the physical and psychological environments. Various classes of patients were routinely separated, or "classified," in order to control unhealthy associations. Classification schemes varied among institutions; however, most separated patients in respect to at least some of the following criteria: gender, social status, curability, and disfiguring disabilities such as epilepsy. Once therapeutically classified, patients were subjected to highly structured and disciplined lifestyles which might include agricultural labor, education, and religious services.

Chipley's commitment to moral therapy found philosophical justification in his belief in the malleability of the mind and the essential goodness of the human spirit. He believed that an innate power prevents the occurrence of insanity in most people; however, "it fails chiefly when it is inefficient for want of cultivation, or when it has been misdirected in the earlier periods of life." Therefore, Chipley argued, much of the "essential difference between sanity and insanity consists in the degree of self control exercised."

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6 Charles L. Cherry, *A Quiet Haven: Quakers, Moral Treatment, and Asylum Reform* (Rutherford: Fairleigh, Dickenson University Press, 1989), especially chapter 6, "Quakers and Moral Treatment in America."

7 For a historical study of antebellum poorhouses, penitentiaries, and asylums, see David Rothman, *The Discovery of the Asylum: Social Order and Disorder in the New Republic* (Boston: Little, Brown and Company, 1971).

Although the educated and uninstructed alike are subject to illusions of the senses, "the trained mind of one will recognize the true character of its illusions. . . , while the other, unable to reason or judge, will accept them as real, and act accordingly." Therefore, Chipley observed that "very few educated persons become insane, and when an instance does occur, it may be readily traced to some defect in the early training of the mind." Treatment, for Chipley, aimed at arousing the intelligent will to self-control with the use of kindly and humane treatment and a "judicious system of rewards for good, rather than punishment for evil doing."<sup>8</sup>

Chipley's faith in the curative power of education naturally influenced his faith in moral therapy and molded his social and political views as well. In 1861 Chipley privately published a brief, obscure book titled: *A Warning to Fathers, Teachers, and Young Men, in Relation to a Fruitful Cause of Insanity, and Other Serious Disorders of Youth*.<sup>9</sup> It is a classic example of nineteenth-century asylum philosophy influenced by Victorian morality. Drawing on his experience at Eastern State, Chipley believed that the same totalitarian principles that governed the treatment of the insane in mental asylums could be applied in society as a whole in eradicating the sinful and unhealthful practice of masturbation.

Chipley's stated intent in publishing this book was twofold. He hoped to inform those who have charge of the young of "the numerous sources of the evil, and the most efficient means of preventing the formation of the habit." He also hoped to present a:

truthful picture of the grave maladies produced by the practice, for the benefit of those who are ignorantly rushing to certain ruin, and who yet possess sufficient force of will to restrain their

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<sup>8</sup> William S. Chipley, *Annual Report of Kentucky Eastern Lunatic Asylum* (1857), 21.

<sup>9</sup> Chipley, *A Warning to Fathers, Teachers, and Young Men, in Relation to a Fruitful Cause of Insanity and Other Serious Disorders of Youth* (Lexington, 1861). For a detailed philosophical discussion of this book, see Ronald F. White, "Dr. Chipley's Warning: Masturbation and the Nineteenth-Century Asylum" in Florence Estes, ed., *Philosophical Studies in Education: Annual Proceedings of the Ohio Valley Philosophy of Education Society, 1987-1988* (Terra Haute: Indiana State University Press, 1989), 115-26.

unhallowed passions, and to return to the paths of purity and virtue, where alone vigor of body and mind may be preserved.<sup>10</sup>

In the first chapter, Chipley enumerates many of the causes known to produce the habit, including: the impulses of nature; idle and inactive life; use of spirits, wine, strong coffee, or tea; full flesh diet - especially if highly seasoned; precocious childhood; irritation about the genital organs; want of cleanliness (circumcision defended); ascarides worms in the lower bowel which produce itching and lead to friction which ultimately develops the passion; priapism; soft and heating cushions; and flagellation.

One of the most prolific causes was pornographic literature. In this regard, he placed the blame squarely on the French:

Many libraries yet contain the vulgarities of the 13th, 14th, and 15th, centuries - Rabelais, Berold de Verville, Regnier, Brantome, Boccaccio, still have readers and may be found in our public libraries, accessible to our sons and daughters. Centuries have passed away and yet these foul productions are permitted to survive and disseminate their poison through society. Their primary effect on the French was most fatal; and the general cultivation of this species of literature has entailed upon that nation moral evils which centuries will be required to remove.

These views naturally influenced Chipley's interpretation of the French Revolution as a period, "When a whole people were prepared to trample virtue and religion under foot while they bowed down before the most shameless harlots as the only divinities worthy of adoration." The degeneration of French society perniciously stalked the rest of the Western world, not only through the dissemination of its corrupt literature but also through its fashion:

Is it not to be regretted that to this day our young people must rely on this corrupted people for fashionable dress and that they always eagerly adopt whatever may purport to be Parisienne? Who but a people thus educated would think of introducing the extremes of low necked dresses, bustles and crinolines?<sup>11</sup>

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10 Chipley, *A Warning*, vi-vii.

11 *Ibid.*, 47-49.

French dancing was also deemed dangerous, particularly "certain kinds of dances which bring the sexes into close embrace to execute the most voluptuous movements."<sup>12</sup>

In a review of Chipley's book, the *American Journal of Insanity* applauded his efforts and commended him for a balanced appraisal of the issue, especially for his careful use of language that would not excite the very practice the book was intended to discourage.<sup>13</sup> Indeed, Chipley's views were probably consistent with medical and psychiatric literature of that era. What is important for our understanding of the therapeutic environment of Eastern State during this era was Chipley's firm belief that education and self-control play an integral part in maintaining mental and physical health in both a well-ordered asylum and a healthy society.

Chipley's belief that the environment holds the key to both mental and physical health found expression in an 1851 article he wrote for the *Western Journal of Medicine and Surgery* entitled "The Sanitary Condition and Vital Statistics of Fayette County, Kentucky."<sup>14</sup> Chipley's observations on the water supply proved to be prophetic:

I have no doubt that the public health will improve as the custom of using rain water obtains more generally, especially in the city. My own observation leads me to believe, that the well water in the city is not as pure now as it was twenty-five or thirty years ago . . . .<sup>15</sup>

Indeed, beginning in July 1855 Chipley's first major task at Eastern State was to weather the last of four major cholera epidemics. For many years the institution had endured endemic diarrhea among the residents, a malady often referred to as the "acclimating disease." The cost in human life for this final cholera epidemic was high. Out of twenty employees, seven were lost, including a male attendant, the assistant matron, the gardener, the

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12 Ibid., 54.

13 *American Journal of Insanity* 18 (April 1861): 472-75.

14 Chipley, "The Sanitary Conditions of Fayette County, Kentucky," *The Western Journal of Medicine and Surgery*, series 3, 8 (No. 5; December 1851): 461-90.

15 Ibid., 3.

baker, the watchman, a local physician, and a temporary nurse. In all, thirty-four patients died.<sup>16</sup>

Chipley's interest in public health eventually led to his discovery of the hospital's polluted water supply. Within ten days of boring a new well, the longstanding diarrhea epidemic and the frequent cholera visitations at the hospital ended.<sup>17</sup> A principal reason for the decline in the overall death rate at Eastern State during Chipley's administration was the reduction in the number of deaths associated with the cholera epidemics. During the Allen years there were two major epidemics. In 1849, ninety-six patients were admitted and ninety-eight died. In 1850, 119 patients were admitted and ninety-two died. Hence, a total of 190 patients died during those two years alone. In contrast, the 1856 epidemic resulted in only thirty-four deaths of a total of sixty-five.<sup>18</sup> No doubt, the overall improvement of the general health of patients after 1856 contributed substantially to Chipley's ability to decrease the practice of traditional somatic medicine (which often called for bloodletting, emetics, and purgatives) and to increase the use of moral therapy.

Chipley's experience as medical superintendent also provided an ideal opportunity to observe a variety of human behaviors. In 1859 he read a paper before the Association of Medical Superintendents of American Institutions for the Insane. In this article he discussed the problems that arise when a patient refuses to eat. Although he did not regard it as a distinct form of mental disease, he nevertheless coined the term "sitomania" to designate "that intense dread of food which many patients experience." Chipley discerned both mental and physical causes for the disease. He considered the distinction important because proper treatment is based upon it:

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16 Chipley, *Annual Report* (1854-1855), 13-22.

17 Chipley, *Annual Report* (1869), 19.

18 These numbers were first compiled for my doctoral dissertation, "A Dialogue on Madness: Eastern State Lunatic Asylum and Mental Health Policies in Kentucky, 1824-1883" (University of Kentucky, 1984). See appendices.



It would be folly to force food in one whose stomach is manifestly incapable of elaborating it, and with whom the assimilative functions are perfectly torpid; and it would be an error of equal magnitude to dose one with physic whose digestive apparatus was in a state of perfect integrity, and who endures the torments of hunger because he has heard a voice commanding him to thus seek martyrdom.<sup>19</sup>

It is of great historical interest that Chipley also identified a particular form of sitomania common among young women:

I allude to those cases in which a morbid desire for notoriety leads to protracted abstinence from food, in spite of the pangs of hunger, until finally all sustenance is refused. I have never witnessed a case of this kind except in females predisposed to hysteria. These cases are remarkable because they are almost peculiar to well-educated, sensible people, belonging to the higher walks of society.<sup>20</sup>

### The Building and Grounds

As superintendent of Kentucky's largest mental institution, Chipley found it necessary to petition legislators in order to secure funds for the maintenance and expansion of Eastern State, and he was often called upon to make recommendations for the reform of state policies relating to mental illness. In the early 1860s Chipley convinced the state to purchase a large tract of land adjacent to the hospital to provide labor opportunities for the male patients. For many years Eastern State had leased a nearby farm; however, in 1858 that farm was no longer available. Almost all of Chipley's patients came from agrarian communities. He also acknowledged that most of them were of the incurable class and therefore would spend their entire lives at the asylum. Nevertheless, Chipley underscored the necessity of maintaining a farm by arguing that "moderate labor is highly serviceable to the incurable, and contributes essentially to the restoration of others."<sup>21</sup>

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19 Chipley, "Sitomania: Its Causes and Treatment," *American Journal of Insanity* 16 (July 1859): 4.

20 *Ibid.*, 8; Kenneth F. Kipple, ed., *Cambridge World History of Human Disease* (Cambridge: Cambridge University Press, 1993), 579.

21 Chipley, *Annual Report* (1858), 12.

Females were also encouraged to labor. In 1864 Chipley reported that female patients routinely assisted in the domestic affairs of the wards and in the ironing room and that they made and repaired all the clothing worn by the patients.<sup>22</sup>

The therapeutic value of moral therapy was contingent upon whether the patient was deemed an "old" incurable case or a "recent" curable case. In 1861 Chipley pointed out that of the seventeen recoveries, fifteen were recent cases, and the average time spent in the asylum was four months.<sup>23</sup> However, as Dr. Allen had discovered much earlier, the vast majority of the patients admitted at Eastern State were old incurable cases. In 1864 Chipley indicated that of forty-five patients admitted during that year, only eight were insane less than one year prior to admission. This accumulation of old cases was attributed to a shortage of space. Indeed, there was room for only a third of the patients who applied for admission:

This inability to accommodate all cases, as they occur, leaves a large number at home, or in the common jails, until, by lapse of time, they become incurable, and entail a heavy additional expense on the State. I am sure that we have here at least one hundred incurables who might have been, by proper treatment . . . restored to reason and usefulness in from four to six months.<sup>24</sup>

Chipley, therefore, suggested that it would be financially prudent to expand the buildings at Eastern State.

Because architecture also played a major role in "classifying" the various segments of the patient population, officials at Eastern State frequently found themselves petitioning state government for costly building projects. In the 1860s, at a time when many state institutions were questioning the social utility of the asylum and reducing expenditures for the insane,<sup>25</sup> Chipley's political savvy landed several substantial state appropriations. Early in the 1860s the new farm, workshop, slaughterhouse, and other improvements

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22 Chipley, *Annual Report* (1864), 11.

23 Chipley, *Annual Report* (1864), 8.

24 Chipley, *Annual Report* (1861), 13.

25 Gerald N. Grob, *Mental Institutions in America: Social Policy to 1875* (New York: Free Press, 1973), chapter seven.

generated an aura of pride. Chipley conceded in 1863 that, "There is scarcely any other drawback to the usefulness of the institution than the want of room to accommodate the numerous applicants who are now necessarily excluded from its benefits."<sup>26</sup> In 1867 Chipley landed an unprecedented appropriation of \$150,000, earmarked for the expansion of the buildings. The four projects funded included a new building to house the superintendent's family and female patients, the renovation of the building for seventy "negro lunatics," a new laundry and boiler house, and a gateway to the grounds. With the completion of these projects, the patient population at Eastern State increased from 194 in 1854 to 403 in 1869.

#### State Policy Reform

Chipley routinely used his annual reports as vehicles for expressing his ideas on matters of state mental-health policy, including the education of the mentally retarded, the use of the insanity plea, the incarceration of the violently insane, and accommodations for black lunatics.

As early as 1855 Chipley argued in favor of establishing a school for the education and maintenance of the mentally retarded. The movement toward specialized institutions for the mentally retarded had French origins. Eduard Seguin wrote the first comprehensive work on the subject and in 1837 founded the first institution for the education of the mentally retarded. In 1848, guided by Seguin's writings, Dr. Hervey B. Wilbur opened the first experimental school in the United States at Barre, Massachusetts.<sup>27</sup>

In defence of the creation of an educational institution for the mentally retarded, Chipley again expressed his faith in the power of education. He pointed out that the state was already spending about \$25,000 a year for the "mere purpose of sustaining miserable existences" and optimistically suggested that these funds, if

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<sup>26</sup> Chipley, *Annual Report* (1863), 7.

<sup>27</sup> Albert Deutsch, *The Mentally Ill in America: A History of Their Care and Treatment from Colonial Times* (2nd ed.; New York: Columbia University Press, 1967), 343.

diverted, "would be more than sufficient to school every idiot in the State . . . putting almost all of them into a condition to earn their own support."<sup>28</sup> In 1860 Chipley's tenacity and faith in institutions as instruments of state philanthropy was rewarded with the founding of the Kentucky Institution for the Education and Training of Feeble-Minded Children in Frankfort.

Chipley also expressed concern for state laws governing the use of the insanity plea in Kentucky's courts. In this regard, he echoed the views espoused by the Association of Medical Superintendents, namely that insanity is a disease and that physicians must play a significant role in determining whether the perpetrator of a crime should be punished or placed in a mental institution. Chipley acknowledged that several medical experts usually testified in cases involving the insanity plea, but only rarely were the physicians given ample opportunity to properly examine the defendant.<sup>29</sup> "Very frequently," he wrote:

the medical witness sees the prisoner for the first time at the bar, and is required to pass gravely on his mental condition, with only a distant view of the accused, and the crude notions of unprofessional and probably ignorant and prejudiced witnesses as his guides.<sup>30</sup>

For that reason, Chipley believed that the most competent physicians preferred to avoid testifying in court. To correct this problem, he urged Kentucky legislators to adopt a law, similar to one in effect in Maine, which called for the examination of criminals employing the insanity defense by qualified medical superintendents. He suggested the formation of a committee composed of two intelligent citizens along with the superintendent to conduct a protracted study of the defendant.

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28 Chipley, *Annual Report* (1855), 39-40.

29 For an analysis of how the uneasy relationship between law and medicine influenced the outcome of a famous court case in Kentucky, see Ronald F. White, "The Trial of Abner Baker, Jr., M.D.: Monomania and McNaughtan Rules in Antebellum America," *Bulletin of the American Academy of Psychiatry and Law* 18 (1990): 223-33.

30 Chipley, *Annual Report* (1858-1859), 30.

In 1886 Chipley published an interesting commentary on a case that went before the Kentucky Court of Appeals. *Smith v. Commonwealth* involved a homicide that was committed under the influence of alcohol. In the lower court, the jury convicted Ropert Smith based on the judge's instruction that "intoxication is no excuse for a crime." The case was overturned, however, by the Court of Appeals based on its ruling that intoxication is a form of transient "moral insanity" and that the charge against Smith should have been reduced to manslaughter.

Chipley disagreed with the ruling on several grounds. First of all, he rejected the notion that the crime of drunkenness could be used as an excuse for other offenses "I believe it is a sound principle of law that a person in the commission of an illegal act is responsible for all of the immediate consequences of the act." Chipley also attacked the assumption that "moral insanity" was a widely accepted form of mental disease and that it mitigated personal responsibility.

The nineteenth-century distinction between the "moral" and "intellectual" faculties of the mind was based on the ancient theory that reason and passion are distinct mental faculties and that insanity can afflict either. Moral insanity (called weakness of the will by contemporary philosophers) was, therefore, characterized by a pathological inability to control passions such as anger, hate, envy, or jealousy. Chipley, however, believed that insanity always involved the impairment of intellectual faculties.

In the school of morals, and the forum of conscience, I will readily admit that all crimes are species of insanity; but I am not prepared to admit the plea of insanity as an excuse for violations of law unless it can be shown that there is a congenital or accidental defect of those powers with which the Creator has endowed man for the purpose of enabling him to discriminate between right and wrong and to choose the one and avoid the other.<sup>31</sup>

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31 Chipley, "In Court of Appeals, State of Kentucky *Smith vs. Commonwealth* with Remarks by W. S. Chipley, M.D., Medical Superintendent of the Eastern Kentucky Lunatic Asylum, Lexington, Kentucky," *American Journal of Insanity* 23 (July 1866): 20.

Chipley insisted that moral insanity was not widely recognized by the medical or legal authorities in England or the United States and that, if widely accepted, the doctrine would be pernicious, especially in cases involving the insanity plea. In his time he observed a disturbing proliferation of mental diseases based on this distinction that had begun to erode the basis of legal responsibility:

... moral depravity is allowed to usurp the immunities of disease, every vice is finding a place in the nomenclatures of human maladies, and the courts are filled with pleas of moral mania, dipsomania, homicidal mania, pyromania, kleptomania (etc). . . that we are likely to have the world crowded with maniacs who may get drunk, murder, steal, burn, forge, rape, and work utter destruction to social order and the peace and happiness of society

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Once the determination was made that defendants were indeed insane, Chipley believed that they should be incarcerated in institutions specifically designed for them. First, he pointed out that the insane themselves often find the presence of the criminally insane objectionable. "I have known some insane persons," he declared, "to manifest the greatest indignation when one of this class has been introduced into the ward, and some have refused to sit at the same table with them." Second, the criminally insane are frequently more difficult to restrain and therefore "stronger bolts and bars are required than for the security of others." Because these patients often suffer from monomania, they retain many of their intellectual faculties and therefore are more likely to attempt to escape.

Chipley believed that, once incarcerated, the criminally insane should never be released. "Within my observation," he wrote, "no species of insanity is so persistent or so liable to recur as that which leads to the shedding of blood." Therefore he believed that these patients should remain under the control of the courts "so that none should be permitted to mingle again in society without a full and fair investigation by the same authority by whose order they were committed to the custody of the asylum." Because Kentucky had

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32 Ibid., 42.

relatively few criminal lunatics, he thought a district ward could be utilized for their care.<sup>33</sup>

In 1857 Chipley urged the state to afford special accommodations for slaves. He reported that:

Many masters have sought to place their insane servants in this Institution for treatment, and it has been a painful necessity that compelled us to refuse their admission, especially when the case has presented flattering prospects of yielding to suitable treatment. But no provision has been made for their accommodation and, if we had room, it would be manifestly improper to mingle these persons with our own race.

He argued that providing care for slaves was not only "dictated by humanity" but it also made good economic sense "for there are no pauper slaves - all have masters who will willingly meet every expense that may be incurred in the support and treatment of their unfortunate servants."<sup>34</sup>

In 1854 Western State Lunatic Asylum was founded at Hopkinsville. With this second state-operated institution came the issue of the distribution of patients. When the Kentucky state legislature addressed the question, a line was drawn through the center of the state to determine which asylum insane Kentuckians would be sent to. To Chipley's dismay, a proviso was added to the bill which put all of the state's "insane negroes" into his charge at Eastern State. Though not of immediate consequence, Chipley found the policy to be injudicious. As a matter of economics, Chipley reported that one negro woman from Christian County had been delivered to Eastern State at a cost of sixty-nine dollars and that it would cost an additional twenty dollars to pay her expenses home. Hence, he argued, the state could have saved about eighty-nine dollars if that patient had been sent to Western State.

Throughout his tenure at Eastern State, Chipley remained a tireless advocate for the insane.<sup>35</sup> However, despite what must have

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33 Chipley, *Annual Report* (1858-1859), 29-33.

34 Chipley, *Annual Report* (1857), 24.

35 Because nineteenth-century medical literature is not well indexed, it is difficult to compile a complete bibliography of Chipley's writings. In addition to the works

been regarded as an exemplary record of public service, Chipley also had the misfortune of having to guide the state's largest mental hospital through the ravages of the Civil War.

### The Lunatic Asylum Wars

The Civil War heightened political antagonism in Kentucky as its citizens remained divided on the question of secession. Although himself a devoted Union man, Chipley saw his three sons enlist in the Confederate Army.<sup>36</sup> As the fighting neared the Lexington area, Chipley made preparations to protect the asylum from Confederate troops.

In a publication sent to the board of managers, Chipley described the impending emergency:

On the second day of last month the forces under the command of Kirby Smith entered this city, and placed it under the despotic sway of military rule . . . we may not hope to escape the blasted fortunes of other similar institutions within the limits of the confederacy, whose inmates have been driven from their comfortable abodes to suffer and to perish as those of their unfortunate class did before the enlightened philanthropy of the present century . . .<sup>37</sup>

From Chipley's standpoint, the threat was very real. The hospital faced not only military occupation but also potential shortages of essential supplies and even forced conscription of the staff into the Confederate army. At least part of the threat was ameliorated by Chipley's timely actions:

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cited in this essay, the following articles were also published by Chipley: "General Remarks on Alternative Medicines," *Western Journal of Medicine* 7 (1851): 1-104; "Medical Journals and Medical Criticism," *Western Journal of Medicine* 8 (1851): 277-93; "Feigned Insanity, Motives, Special Tests," *American Journal of Insanity* 22 (1865): 1-75; "Memoranda on Anaesthetics," *American Journal of Insanity* 22 (1865): 76-80.

36 "The Lunatic Asylum War, Letters From the Battlefield: A Card From Dr. Chipley," *Lexington Observer and Reporter*, 15 December 1869, p. 3.

37 Chipley, *Report of Dr. W. S. Chipley, Medical Superintendent of the Eastern Lunatic Asylum: A Valuable Document Showing the Interest the Insane have in Politics*; also published in Chipley, *Annual Report* (1862), 9.



As soon as I learned that the Federal forces had fallen back and left the country open to the depredations of the enemy, I directed the steward to purchase a supply of groceries, flour, clothing, shoes, etc. . . .<sup>38</sup>

Because the hospital routinely kept enough supplies to care for an army, Chipley secretly concealed the hospital's provisions. On 2 September 1862 Confederate forces entered Lexington.

Like other superintendents of his era, Chipley believed that his professional expertise qualified him to cultivate the moral values that govern a healthy society. He therefore took steps to purge the institution of any "Traitors."

Hence, all the officers and male employees in this Institution are required to take and subscribe the oath of allegiance to the Government of the United States, pledging themselves to discountenance secession, and give no aid or comfort to the so-called Confederate Government.<sup>39</sup>

Although Kentucky was divided during the war, the Democratic party took the reins of state and local government in the immediate postwar era.

Chipley's report and his pro-Union stance did not catch up with him until 28 December 1867 when the Fayette County Democratic Club voted to send a committee to the governor urging Chipley's removal. The resourceful superintendent survived this initial onslaught only to face a more hostile state Democratic party machine beginning in 1869. The local newspapers followed the struggle with great interest, dubbing the event the "Lunatic Asylum War."

The final debacle apparently began in April 1869 when P.P. Johnson, an attorney representing a group of anonymous complainants, presented documents relating to Chipley's management of Eastern State to the board of managers. The board took these charges to Chipley who, in turn, provided written testimony from hospital employees in his defense. Choosing to

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<sup>38</sup> Chipley, *Annual Report* (1862), 11.

<sup>39</sup> *Ibid.*

remain anonymous, the complainants declined to provide additional documents when requested to do so by the board of managers.

Eventually, a bill initiated by Dr. D. L. Price, representative of Fayette County, reached the legislature. The bill, which was said to be "important because it has a political bearing," called for the election of medical superintendents by the legislature. In a letter to the *Lexington Observer and Reporter*, Chipley pointed out that Price himself was a former Union sympathizer who had voted for Lincoln.<sup>40</sup> While Chipley chose not to address the political issue of whether the superintendent should be elected or not, he did defend his own character: "If, as I now understand is the case, my political status in 1862 is the whole point at issue, I plead guilty. I was an ardent union man." Despite his political views, Chipley insisted that he never harbored any bitter feelings toward those who differed with him and that he was on intimate terms with many supporters of the southern cause, including his sons and many employees at the asylum. Chipley insisted that "in no instance, then or at any time, has a single individual been either employed or discharged on account of political opinion; nor has any purchase been directed to be made from any such consideration."<sup>41</sup>

Political badgering continued throughout the latter months of 1869 until Chipley finally announced his resignation. The board of managers accepted his resignation and unanimously elected Dr. John W. Whitney as his successor. Chipley purchased an estate near Lexington called "Duncannon" where, for a brief time, he attempted to operate a private sanatorium. But, as related by his daughter, the enterprise was short-lived:

On December 9, 1871 at eleven o' clock at night, snow on the ground, standing with his family and several whom even then he had under his charge around him, after barely escaping with their lives, he saw the "Duncannon" mansion reduced to ashes.<sup>42</sup>

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40 "A Card From Dr. Chipley," 2.

41 *Ibid.*

42 Peter, *History of the Medical Department*, 152.

In 1875 Chipley accepted the position of superintendent at the College Hill Asylum near Cincinnati. On 11 February 1880 at seventy years of age, he died at College Hill.<sup>43</sup>

The political removal of Chipley as medical superintendent at Eastern State signalled major changes in the administration of mental-health policy in Kentucky. Gerald Grob has noted that the Civil War contributed to a new emphasis on managerial efficiency in American asylums which fed a movement toward greater state control. Indeed, by the 1870s the plight of the mentally ill in the United States would be determined less by local trustees and superintendents and more by centralized state boards.<sup>44</sup> In Kentucky this centralization of state authority was embodied in legislation passed in 1873.

While the national trend toward state centralization was certainly evident in Kentucky, idiosyncratic forces were also at work. Throughout the "lunatic asylum war" medical and managerial competence were never at issue, and in the end a national reputation and an otherwise stellar career as Kentucky's foremost medical superintendent could not shield Chipley from the insidious forces of Civil War politics.

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43 *Ibid.*, 153.

44 *Ibid.*, 153; Grob, *Mental Institutions in America*, 280-82.