

Blackwell's Island:
A Microcosm of
Class Dynamics
Among Women in
Nineteenth
Century New York

Lauren Aboodi

Barnard College, Columbia University
Senior Thesis – Department of History
April 2019



ACKNOWLEDGEMENTS

Writing this thesis was one of the most challenging and rewarding experiences I have had at Barnard. I could not have done it without the support of some incredible individuals and the great archival resources at the New York City Department of Records.

A special thanks to my thesis adviser, Professor Gergely Baics, who encouraged me to think critically, pushed me out of my comfort zone, and provided a continuous stream of thoughtful edits and advice. Whenever I felt stuck or concerned, you made yourself available and helped me readjust. Your support, encouragement, and guidance were vital to my thesis writing process.

Thank you to Barnard Librarian, Shannon O'Neill, who spent time helping me find primary source materials and introducing me to several research databases.

I want to thank my thesis group for all of their feedback and suggestions. I enjoyed spending the year working on our theses together.

Lastly, I could not have written this thesis without the support of my family, who have been a constant source of encouragement and positivity throughout my time at Barnard.

Table of Contents

Introduction	1
{1} Stranded on the Island: The Profile and Hardships of Patients	8
{2} Stuck in the Middle: The Physical, Emotional, and Social Restraints on Blackwell's Island Nurses	21
{3} View from the Top: The Charitable Visitors	33
Conclusion	45
Bibliography	48

INTRODUCTION

“The Insane Asylum on Blackwell’s Island is a human rat-trap. It is easy to get in, but once there it is impossible to get out.”¹ – Nellie Bly

In 1888 investigative journalist Nellie Bly went undercover at Blackwell’s Island Insane Asylum to expose the maltreatment of female patients. Bly began her journey by feigning insanity and going through the lengthy, but fairly simple process of being sent to the Insane Asylum. She entered a poorhouse, caused disturbances, was sent to New York’s Bellevue Hospital where she continued her charade, and then was finally brought to a judge who, deeming her mentally unfit, sent her to the Blackwell’s Island Insane Asylum. Her investigation of the asylum revealed the unconscionable abuses of patients, but it also brought to light the hierarchal system developing on Blackwell’s Island among women who interacted with it.

Located in the East River between Manhattan and Long Island City, Blackwell’s Island housed hospitals, penitentiaries, workhouses, and an insane asylum.² These institutions, commonly referred to as almshouses, were commonplace in New York City throughout the eighteenth century. By 1845, however, many of these institutions were housed on Blackwell’s Island.³ Geographically separated from the rest of New York City, the Island created barriers between those admitted, those who worked there, and the rest of society. This thesis examines the relationship that female patients, nurses, and wealthy visitors had with Blackwell’s Island. It argues that a social order was established through charitable institutions that solidified the place of different classes of women in New York society.

¹ Nellie Bly, *Ten Days in a Mad-House* (New York: Munro, 1887), 49.

² Edwin S. Porter, Camera, Inc Thomas A. Edison, and Paper Print Collection, *Panorama of Blackwell’s Island, N.Y.* United States: Thomas A. Edison, Inc, 1903, Video, <https://www.loc.gov/item/00694366/>.

³ “Almshouse Ledgers,” *Almshouse Ledgers*, NYC Department of Records & Information Services, www.archives.nyc/almshouse.

Growing capitalist values in the nineteenth century help to explain the separation between those in need and others. According to historian, Robert Mohl, poverty in the nineteenth century was blamed on the poor. Thus, the solution was homogenization and moral improvement of the lower classes.⁴ Homogenizing meant that the patients placed in institutions had to act like the exemplar elites in order to participate in society. Christine Stansell further expands on this idea as she argues that charity began to focus on making the poor conform to the standards established by the wealthy.⁵ To become morally reformed, the poor had to exhibit a behavioral transformation and perform like members of the bourgeois class. Society in New York City in the nineteenth century began to fixate on concepts of morality, poverty, charity and gender. All these themes were part of the establishment of Blackwell's Island and the hierarchy that emerged among patients, nurses, and charitable visitors.

The moralization of poor women was critical as moral depravity became inherently connected with institutionalization. The population of New York classified as "dangerous" were defined by "the festivities of prostitution, orgies of pauperism, the haunts of theft and murder, the scenes of drunkenness and debauchery."⁶ The institutions on Blackwell's Island were intended to combat this overwhelming moral malice and create uplift and reform.

Women were of specific concern because of the role that they played socially and in families as mothers and wives. Historian Monique Bourque explains that women were a unique category for relief because they were considered more vulnerable to moral malice and were responsible for future generations.⁷ If women were not uplifted morally, what hope would there be for the

⁴ Raymond A. Mohl, *Poverty in New York, 1793-1825* (New York: Oxford University Press, 1971), 159

⁵ Christine Stansell, *City of Women: Sex and Class in New York, 1789-1860* (New York: Knopf, 1896), 34.

⁶ Gunja Sengupta, *From Slavery to Poverty: The Racial Origins of Welfare in New York, 1840-1918* (New York: NYU Press, 2009), 73.

⁷ Monique Bourque, "Women and Work in the Philadelphia Almshouse, 1790-1840" (*Journal of the Early Republic*, Vol. 32, No.3, 2012), 385.

children? Aggregate trends in institutionalization demonstrate that the reason for men's admittance was due to specific illness, while women would be admitted for some sort of moral issue.⁸ Women were held to a higher moral standard than men, making their almshouse experience centered on becoming virtuous. The standards placed on women led to the distinct hierarchy in the almshouse.

Patients, nurses, and visitors were all on different ends of the spectrum with respect to moral virtues like generosity, kindness, and general good behavior. It was believed by many elites that the behavior exhibited by the poor did not meet socially acceptable standards – thus, these groups needed to be institutionalized. Poor women often found themselves in the grasp of the almshouse as a result of not having support. The loss of a husband or father would often lead to poverty for these women, who then had to seek out the charity of others. Stansell explains that poor women faced a dilemma as their moral independence led to “social isolation,” and thus they needed to become dependent on charity to be accepted.⁹ Nurses, on the other hand, were externally conforming to society's needs as they were pursuing a righteous occupation. While patients were consumed by the institution, nurses utilized it to further their own independence. The charitable visitors were the role models for both patients and nurses, exhibiting the womanly virtues of charity and morality.

Many historians have written on the topics of women in New York, the conceptualization of the almshouse, and poverty. Historian Christine Stansell writes extensively on the topic of women's role in New York society in her book *City of Women*, as it was a topic that received little attention previously. She argues that New York City society exploited poor women and

⁸ Michael B. Katz, *Poverty and Policy in American History* (New York: Academic Press, 1983), 61.

⁹ Christine Stansell, *City of Women: Sex and Class in New York*, 72.

exposed them to moral depravity.¹⁰ However, the same society demanded moral standards, that led to the institutionalization of this specific class of women and established wealthy women as role models.

Historian Michael Katz explores the concept of poverty in New York society in the nineteenth century. In his books *In the Shadow of the Poorhouse* and *Poverty and Policy in American History*, he ties together the establishment of institutions and the growth of poverty.¹¹ Katz explains that almshouses were generally created to deter the working classes from asking for financial relief and that 1850 was a turning point as specialized institutions were established.¹² Katz's work suggests that Blackwell's Island was purposefully utilized as a mechanism of isolation.

Robert Mohl, author of *Poverty in New York*, discusses how proud elite New Yorkers were that there were no poor people lining the streets.¹³ This point of pride led to placing and isolating poor populations on the distant Blackwell's Island. Mohl argues that the growth of poverty and people in need of economic support was a relatively new phenomenon in the nineteenth century. Thus, charity was used to create a sense of control among elites to account for poverty's hindrance on progress.¹⁴

Each of these historians provides insights into the complexities of institutionalization, poverty, and gender in this period. I bring these themes together to determine how a hierarchy was established that determined the role of each type of woman in a growing capitalist society. I

¹⁰ Ibid.

¹¹ Michael B. Katz, *In the Shadow of the Poorhouse: A Social History of Welfare in America* (New York: BasicBooks, 1996); Michael B. Katz, *Poverty and Policy in American History* (New York: Academic press, 1983).

¹² Michael B. Katz, *Poverty and Policy in American History*, 87.

¹³ Robert Mohl, *Poverty in New York*, 86.

¹⁴ Ibid., xi.

argue that the nineteenth century's focus on charity, moralization, institutionalization, and gender led to a distinct social order among the women who interacted with the almshouse.

Inside the institutions on Blackwell's Island there were three distinct groups of women: the patients, the nurses, and the wealthy visitors exploring for charitable purposes. By examining the experiences of different classes of women in relation to the reformatory institutions on Blackwell's Island, it becomes clear that each group understood the purpose and concept of "moralization" differently. Among women, the power dynamics in charitable assistance proved to be a microcosm of the social hierarchies at large. Historians explore the establishment of the almshouse as a way to deal with the poor populations of New York. In this thesis, I argue that the almshouse was a place where power dynamics among different classes of women were reinforced.

In Chapter One, I begin by examining the identity of the patients and the reasons for their admittance, as they represented the lowest group in the hierarchy. I use data from Bellevue Hospital admittance records from 1846-48 to build a profile for the types of women admitted to New York institutions. I utilize Blackwell's Island Almshouse Ledgers from 1882 that detail background information on each patient admitted and assess their future dependence. These records show that patients were social outcasts due to their age, marital status, immigration status, or occupation. Deemed by society as misfits and morally corrupt, patients were disregarded and sometimes abused both physically and mentally. Through Nellie Bly's experience and the testimonies of family members of patients, I explore the harsh conditions of patient care. In this chapter, I argue that patients were not morally uplifted to the same level as those in superior positions, but rather segregated from the rest of society.

Moving forward with the analysis, in Chapter Two, I explore the role of nurses, who were able to gain societal appreciation with their occupation and asserted their dominance over the patients. Many newspapers from the late nineteenth century lauded the accomplishments of nurses, painting an idealized picture of the profession. Nursing was a distinctive occupation because of the physical, emotional, and mental labor it required. There was an idealized version of nurses as morally superior women. However, in reality, they had more in common with their patients than one might think, and could succumb to moral treachery in part due to hardships in their profession. I contrast the idealized nurse and real nurse to demonstrate how these women asserted their dominance, but were still stuck in a position lower than the doctors they assisted and the wealthy visitors who they aspired to be. I show that nurses did not conform to society's moral standards because of the stress of the occupation and their main goal, attaining personal power and independence.

In Chapter Three, I explore the role of wealthy female visitors, who utilized their relationship with the almshouse as a way to showcase their charity and remove themselves from the domestic sphere. These women satisfied their own curiosities and demonstrated the highly valued quality of generosity by visiting the almshouse. The visitors were able to peer into the institutional lives of both the patients and nurses, while fully knowing that they would never have to live the way these two groups do. Although they interacted with patients and nurses, visitors understood institutions at an arms length and were not fully entrenched in the complex dynamics between nurses and patients. They saw the version of the almshouse that supported their charitable ideology and satisfied their curiosities. I argue that charitable visitors utilized the institution to solidify their reputations, and only made a positive impact when their visits were made discreet and they were able to find and remedy abuses.

From the bottom of the social chain to the top, I investigate how each group interacted with Blackwell's Island and how power dynamics were established in charity to solidify each type of woman's position in society overall. I aim to show how this hierarchy was emblematic of the struggle for independence that women of all classes experienced in the burgeoning capitalist atmosphere. The social order established on Blackwell's Island speaks to the standards for women in society generally and the growing distance between classes in nineteenth century New York society.

CHAPTER ONE

Stranded on the Island: The Profile and Hardships of Patients

“I have watched patients stand and gaze longingly toward the city they in all likelihood will never enter again. It means liberty and life; it seems so near, and yet heaven is not further from hell.”¹⁵ – Nellie Bly

At the bottom of the social hierarchy inside institutions on Blackwell’s Island were the patients. Due to their age, marital status, occupation, immigration status, or general disposition, these women were deemed outcasts by society. Through the admittance records at Bellevue Hospital from 1846-48, the Almshouse Ledgers from the 1882, family accounts, formal reports, and investigative journalism, I developed a profile of these patients to demonstrate how their treatment solidified their place at the bottom of the institutional social chain. In the nineteenth century, charity focused on homogenizing and isolating those in need.¹⁶ The poor were blamed for their suffering as they did not conform to societal standards. Patients were institutionalized under the guise of betterment, but the ways in which they were treated and viewed by nurses and visitors, suggest that the true intention was to isolate them and strengthen the social structure that kept nurses and wealthy visitors in an elevated position.

Profiling a Patient

The patients in the almshouse were diverse in many ways, but the key feature they all had in common was their social vulnerability. The Bellevue Hospital data from the *Digital Almshouse Project* details the admittance of 4,626 patients to Bellevue from 1846-48.¹⁷ Patterns of age,

¹⁵ Nellie Bly, *Ten Days in a Mad-House*, 140.

¹⁶ Christine Stansell, *City of Women: Sex and Class in New York*, 34.

¹⁷ Ed. Annaliese Shrout, “The Almshouse Records,” *Digital Almshouse Project*, Glucksman Ireland House, <https://www.nyuirish.net/almshouse/the-almshouse-records/>.

occupation, marital status, and sickness are revealed. For many patients, prior to entering Blackwell's Island, they went to Bellevue for an initial examination.¹⁸ Therefore, Bellevue records present similar patterns to patient admittance on Blackwell's Island.

Elizabeth Thompson, admitted to Bellevue Hospital in 1847, provides an example of a typical patient.¹⁹ Age thirty, like 8% of Bellevue's population between 1846-48, Thompson was admitted due to "sickness" as was 28% of the population. From this, it can be surmised that generalizations were necessary in the administrative process.²⁰ Age thirty was the most common age because the administrators likely numerically rounded ages and many women may not have known their exact birth dates. "Sickness" was the most common reason for admittance because it was all encompassing and very general. Additionally, Thompson was a widow as was 22% of the institutionalized population.²¹ Thompson's widowhood left her more socially vulnerable. Without a male presence such as a husband who could offer financial support, women were often left to struggle. According to the Bellevue admittance records, approximately 3% of women admitted between 1846-48 were admitted due to pregnancy suggesting that they did not have the support of husbands or other family members.²² Characteristics that made women socially undesirable and vulnerable often led to their institutionalization and dependence on charity.

The patients in this data set ranged in age from new born babies to ninety-year-old women. Starting at age sixteen, admittance increased until age fifty, after which it slowly declined.²³ The surge in patient admittance at age sixteen is interesting as it reflects the transition from girl to woman (Figure 1.1). At age sixteen, patients could be classified as women. Women needed to fit

¹⁸ Bly, *Ten Days in a Mad-house*, 60.

¹⁹Ed. Annaliese Shrout, "The Almshouse Records."

²⁰ Ibid.

²¹ Ibid.

²² Ibid.

²³ Ibid.

seamlessly into society in ways that girls did not. If at age sixteen, a young woman was not conforming to societal standards of normalcy, institutionalization was a way to isolate her and prevent her from disturbing or bothering those who were part of “normal society.”

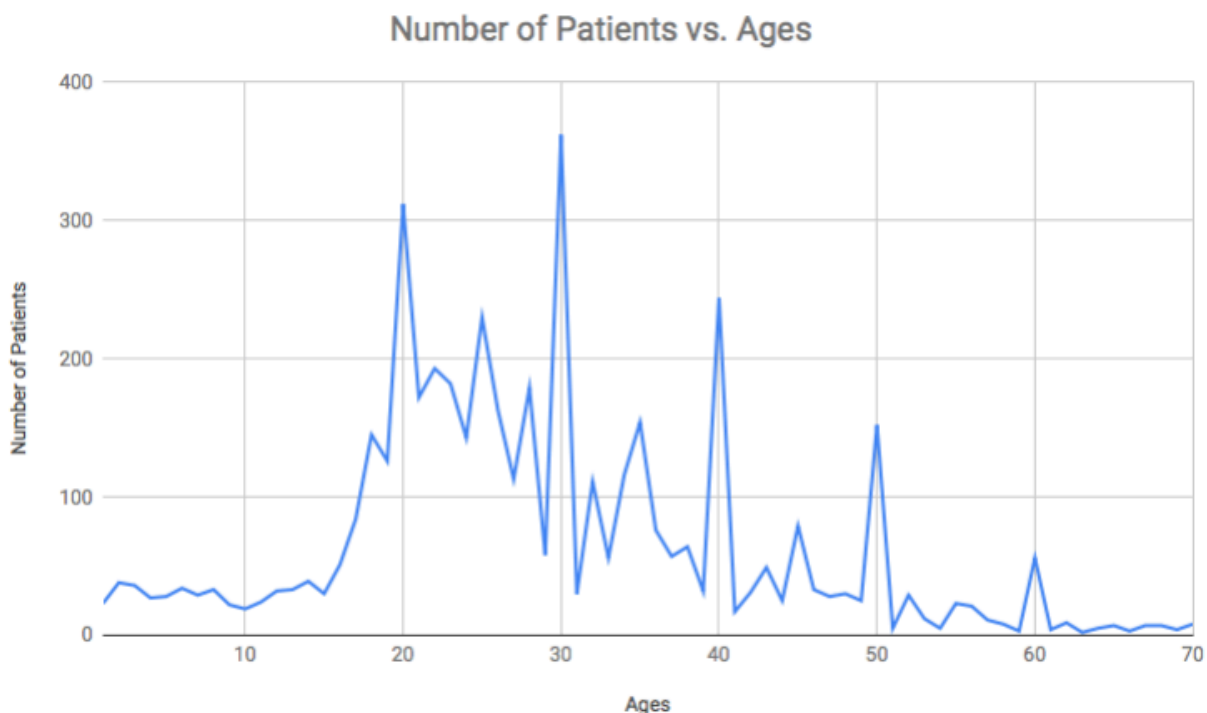


Figure 1.1: Between 1846-48 the number of patients admitted to Bellevue Hospital surged at the age of 16 and reached a peak at age 30.²⁴

The main reasons for admittance according to this data included: destitution, fever, insanity, intemperance, pregnancy, recent emigration, and general sickness. Roughly 19% of patients were admitted because they were “recent emigrants.”²⁵ Non-English speakers often ended up institutionalized because they could not communicate effectively to advocate for themselves.²⁶ According to the 1882 Almshouse Ledgers, patients were required to share their country of birth,

²⁴ Ibid.

²⁵ Ibid.

²⁶ Bly, *Ten Days in a Mad-House*, 80.

what port they landed at, and if they were naturalized.²⁷ The collection of this information suggests that many administrators were aware of the larger foreign-born population. While the 1882 Almshouse Ledgers come after the 1846-48 data, it appears that not much had changed in the demographic make-up of institutionalized patients. The entry questions from the 1882 ledgers and the immigrant data from 1846-48 both suggest that immigrants formed a large part of the patient population in institutions.

The language used in reference to the patients demonstrates the ways in which these women fell outside social norms. 32% of patients from 1846-48 of women were classified as “spinsters.”²⁸ Being single meant that these women were vulnerable because they did not have male protection via marriage. Additionally, by not having children, these women were not fulfilling their duties as mothers and providing for the future. 9% of women from 1846-48 were admitted because of “destitution,” suggesting they were unemployed and could not provide for themselves or contribute economically to society.²⁹ Patients were often admitted because they were viewed as a burden to society.

This patient data suggests that an institutionalized woman had one or more characteristics that made her different from the idealized woman in New York society. Either she was too young or too old, a recent immigrant, or even a “spinster.” She was particularly vulnerable because of her lack of social protection. Not conforming to a social standard led to increased risk of being institutionalized and deemed “permanently dependent” or in some cases declared “insane.”³⁰

Defining Insanity

²⁷ “Almshouse Ledgers, 1882” Roll No. 49, Vol. 239 (cont.) 240-241 (part), New York Department of Records.

²⁸ Ed. Annaliese Shroud, “The Almshouse Records.”

²⁹ Ibid.

³⁰ “Almshouse Ledgers, 1882” Roll No. 49, Vol. 239 (cont.) 240-241 (part), New York Department of Records.

*“An insane asylum, a place where insanity is made.”*³¹

The Insane Asylum on Blackwell’s Island housed many women who were outcasts in society, but not truly “insane.” The *American Journal of Insanity*, provided insights into the plight of the insane and treatment for it between 1840-1921. According to one article in the publication from October 1844, “Insanity frequently arises from undue indulgence of passions and strong emotions, and by permitting the mind to dwell too long and too excessively upon one subject until the brain ceases to be subservient to rational will.”³² The causes of insanity were being wildly speculated upon. Tests were developed to define it fully, particularly for medical and legal reasons. In the legal realm, an insane person was supposedly not accountable for his or her actions. Thus, the degrees of insanity needed to be explored and laid out explicitly. One rule found that an insane person had to be in an almost infant-like state to be held unaccountable, but this rule could not be applied, “as none but perfect idiots would be embraced, and no court would think of putting such a person on trial.”³³ Another test focused on whether or not the person had the ability to distinguish right from wrong.³⁴ These tests and the confusing developments in defining insanity demonstrate how little was known about it in the nineteenth century. Therefore, it could be easily manipulated to confine specific women to asylums, hindering their growth and presence in society.

The scientific literature on insanity was utilized socially to undermine vulnerable women and continue to empower men. Phyllis Chesler, author of *Women and Madness*, explains why women were especially vulnerable to institutionalization:

Unexpectedly a perfectly sane woman might find herself arrested by a sheriff; removed from her bed at dawn, or “legally kidnapped” on the streets in broad daylight or her father or her husband might ask her to accompany him to see a friend and help him with a legal

³¹ Phyllis Chesler, *Women and Madness* (Garden City: Double Day, 1972), 61.

³² “Medical Jurisprudence,” *The American Journal of Insanity* (Baltimore: Utica State Hospital Press, October 1844), 88.

³³ *Ibid.*

³⁴ *Ibid.*

matter. Unsuspectingly, the woman might find herself before a judge or physician, who certified her “insane” on her husband’s say-so.³⁵

Simply being a woman, subject to the will of men, could cause a perfectly sane woman to be sent to an asylum. In 1876, Ada Metcalf stated, “It is a very fashionable and easy thing now to make a person out to be insane. If a man tires of his wife, and is befooled after some other woman, it is not a very difficult matter to get her in a institution of this kind.”³⁶ For example, in 1857 a thirty-two year old unmarried woman in Pennsylvania, Adriana Brinckle, sold furniture which she had not fully paid for, dishonoring her family, thus leading to her father’s friend, a judge, institutionalizing her for twenty-years.³⁷ Between 1846-48, roughly 1.5% of women institutionalized at Bellevue Hospital were classified as “insane” according to the admittance records.³⁸ The ease with which women could be admitted and declared “insane,” speaks to the general treatment of women as distinct and lower than men.

The establishment of the insane asylum in the nineteenth century was a charitable endeavor that did not fulfill its stated purpose to assist and “cure” the insane. According to historian Peter Bartlett, asylums were unable to sufficiently provide care for the patients that they intended to serve.³⁹ Many historians define the nineteenth century asylum as a failure because no cures were ever fashioned and impersonal care became the norm.⁴⁰ The asylum had become “a convenient place to dump the troublesome.”⁴¹ As insanity could not be defined, neither could the institution

³⁵ Chesler, 62.

³⁶ Ibid.

³⁷ Ibid.

³⁸ Ed. Annaliese Shroud, “The Almshouse Records.”

³⁹ Peter Bartlett, “The Asylum and the Poor Law: The Productive Alliance,” Ed. Joseph Melling and Bill Forsythe, *Insanity, Institutions and Society, 1800-1914: A Social History of Madness and Comparative Perspective* (London; New York, Routledge, 1972), 48.

⁴⁰ Ibid.

⁴¹ Ibid.

developed to treat it. Therefore, the asylum became a place to isolate those who did not fit seamlessly into society's rigid structure.

Going Undercover: Nellie Bly's Investigation of Blackwell's Island

The lives of the institutionalized were not clearly documented as patients did not have the means to express themselves or share their experiences. Therefore, the main sources for understanding their struggles comes from accounts of their family members, Nellie Bly's undercover report, and formalized inspections. These sources depict the ways in which patients were weakened mentally and physically, as well as the horrible conditions in which they lived.

Investigative journalist Nellie Bly went undercover at the insane asylum on Blackwell's Island as Nellie Brown in 1888. She successfully got an article written about her in the New York Times while she was undercover, entitled, "A Mysterious Waif: Bellevue Shelters A Girl of Whom Nothing Is Known."⁴² This article confirmed Bly's success undercover. In *Ten Days in a Mad-house*, Bly documented her experiences and interactions with both the other patients and the staff. Through her exposé, the troubling experience of the patients was revealed.

Nellie Bly was considered a pioneer of "detective" or "stunt" journalism.⁴³ Her exploratory book, *Tens Days in a Mad-house* perfectly illustrates Bly's work as an investigative journalist. She pretended to be insane, leading her to institutionalization where she would document how she was treated and what she witnessed as a bystander. Bly began by entering a temporary home where she tried to exhibit "insane" characteristics like refusing to eat and not sleeping. The police were then called to remove her from the temporary home. She was taken to court, where she continued to feign insanity by speaking of faraway lands and pretending she did

⁴² "In and About the City," *New York Times (1857-1922)*, Sep 26, 1887, 8.

⁴³ Brooke Kroeger, *Nellie Bly: Daredevil, Reporter, Feminist* (New York: Times Books, 1994), XIII.

not understand the questions the judge was asking her. Prior to her admittance to Blackwell's Island, Bly was taken to Bellevue Hospital, located in the New York City, where many patients were examined prior to being moved to the Island for rehabilitation. She proved to be committed to her undercover story and was sent to Blackwell's Island. Following her experience on Blackwell's Island, Bly travelled the world, created the first successful steel barrel in the United States, owned and operated factories, reported from the Eastern Front in WWI, and established an advice column for unwed mothers.⁴⁴ Through the variety of work she did, it is clear that Bly was an adventurer and trailblazer, particularly when it came to revealing truths and injustices.

At the time of her institutionalization on Blackwell's Island, Bly estimated that there were 1,600 women in the insane asylum, based on her conversations with one physician.⁴⁵ Bly explained her "delicate mission," "I was asked by the *World* if I could have myself committed to one of the asylums in New York, with a view to writing a plain and unvarnished narrative of the treatment of patients therein and methods of management."⁴⁶ Bly intended to document her experience as a "patient" to better understand the treatment of patients in these institutions. In doing this, she set out on her own moral mission, to ensure that the treatment of patients met her own standards. In her introduction she noted, "I am happy to be able to state as a result of my visit to the asylum and the exposure consequent thereon, that the city of New York has appropriated \$1,000,000 more per annum than ever before for the care of the insane."⁴⁷ The care of the population in the asylum was not to her moral standards, and thus needed to be documented and exposed.

⁴⁴ Ibid.

⁴⁵ Bly, *Ten Days in a Mad-house*, 108.

⁴⁶ Ibid., 5.

⁴⁷ Ibid., 3-4.

Bly encountered a diverse group of patients with whom she interacted and about whom she learned. The patients she encountered were generally older women and many did not speak English, reflecting similarities between her experience and the 1846-48 Bellevue Hospital data. Foreigners were not provided with proper care because they could not explain how they ended up at the asylum. There were women who Bly deemed sane much like herself and there were women who were not mentally ill, but rather physically ill according to Bly's understanding of their situation. Upon her arrival Bly spoke to another patient, Miss Tillie Mayard, who explained what they must do now that they had been sent to the asylum, "but as we have been sent here we will have to be quiet until we find some means of escape. There will be few, though, if all the doctors, as Dr. Field, refuse to listen to me or give me a chance to prove my sanity."⁴⁸ Mayard wanted to prove her sanity by explaining how she ended up in the asylum to the doctor. Bly believed that if patients were given the opportunity they could demonstrate their sanity by speaking logically with the doctors.⁴⁹ Patients in the asylum did not feel as though the institution acted in their best interests – and they were most likely right. Ultimately, institutions prohibited patients from participating in society.

Bly notes that foreigners were in a particularly difficult situation upon entering the asylum as they could not speak for themselves. In one case, another patient who arrived with Bly, Mrs. Louise Schanz was forced into the asylum because she did not get a chance to make herself understood, as there were no German translators for her to speak with.⁵⁰ Bly was shocked that there were no translators in the institution to assist with non-English speaking patients. This

⁴⁸ Ibid., 77.

⁴⁹ Ibid.

⁵⁰ Ibid., 80.

inability of patients to speak for themselves forced them to become dependent upon the institution even if that was not their intention.

The institution, itself, was a contributing factor to creating insanity according to Bly. She stated:

What, excepting torture, would produce insanity quicker than this treatment? Here is a class of women sent to be cured. I would like the expert physicians who are condemning me for my action, which has proven their ability, to take a perfectly sane and healthy woman, shut her up and make her sit from 6 A.M. until 8 P.M. on straight back benches, do not allow her to talk or move during these hours, give her no reading and let her know nothing of the world or its doings, give her bad food and harsh treatment, and see how long it will take to make her insane. Two months would make her a mental and physical wreck.⁵¹

Bly saw that institutionalization did not result in benefits for the patients. The lack of activity, poor conditions, and maltreatment did not produce a cure for anyone, let alone the legitimately insane. As a sane woman investigating the asylum, Bly found herself relating more to the patients than the nurses or doctors who would be on par with her social status had she not been undercover, which demonstrates how the asylum contributed to fostering poor physical and mental health of patients.

Giving a Voice to the Silenced: Formal Reports and Family Testimonials

Bly was not the only person at this time who exposed institutional abuses. In 1887, a report was created by the Standing Committee on the Insane of the New York State Board of Charities, investigating the New York City Asylum for the Insane on Wards Island. Wards Island, like Blackwell's Island, housed institutions and hospitals for the socially unfit, ill, and destitute. The report found that the conditions in which patients lived while being reformed and

⁵¹ Bly, *Ten Days in a Mad-house*, 140.

treated for lunacy were not proper. *The Sanitarian* published an abstract on the report titled, “Disposal of the Insane,” to reflect that these reform institutions were dumping grounds for those who did not conform to societal standards. According to this report, the building in which the asylum was housed had the capacity for 1,000 patients, but at the time of the investigation, there were 2,000 present.⁵² Clearly, the asylum was overcrowded and not capable of properly housing so many patients. The issue of overpopulation, coupled with understaffing, made Ward’s Island look and feel like Blackwell’s Island.

In one case on Blackwell’s Island, a woman was beaten to death by her insane roommate in a ward of two hundred women in which there was only one nurse.⁵³ There was not enough support for the patients. The large population institutionalized leads to questions about the legitimacy of placing women in these supposed reformatories.

The “Disposal of the Insane” report also takes special note of immigrants in the institution. According to the report, two thirds of the population in the City Asylum for the Insane on Ward’s Island were foreign born.⁵⁴ As noted by Bly, a large portion of foreigners were often disposed to lunacy because of the language barriers.⁵⁵ This report appears to echo Bly’s account of the asylum conditions and population.

In addition to formal reports and Bly’s accounts, several articles from the 1880s document reports from family members of women institutionalized describing the treatment. One article from the *New York Tribune* shared the testimony of a sailor, who stated that his wife was beaten by her nurses on Blackwell’s Island.⁵⁶ According to the sailor, his wife, Catherine Carr

⁵² Oscar Craig, John J. Milhau, and Edward W. Foster, “Disposal of the Insane,” *The Sanitarian (1873-1904)*, no. 215, 1887, 289.

⁵³ “An Insane Woman Killed,” *New York Times (1857-1922)*, Jan 29, 1880, 8.

⁵⁴ *Ibid.*

⁵⁵ Bly, *Ten Days in a Mad-house*, 80.

⁵⁶ “Charges of Cruelty in an Asylum,” *New - York Tribune (1866-1899)*, Jun 24, 1890, 12.

was supposed to be treated for epilepsy which often caused violent outbursts. She had fights with both the nursing staff and other patients. On one occasion, when she attacked a nurse, she got her teeth pulled out.⁵⁷ The family of another patient, Emelia Schmidt, made similar claims. Her husband said that she had looked seriously emaciated upon her return from Blackwell's Island.⁵⁸ In this article, Emelia's husband blamed her institutionalization for her death, since upon release she was injured and weakened.

An account from a former doctor on Ward's and Blackwell's Islands echoes the concerns brought up by Bly, family members, and investigative reports. Dr. Louise G. Rabinovitch claims that doctors would neglect their patients and would even provide them with lethal doses of poison to keep them sedated and in at least one instance led to death.⁵⁹ The treatment by doctors could have trickled down and influenced the way the nurses treated their patients.

According to Bly's account, formal inspections, and the testimonies from family members of patients, the experience of reform and treatment in the institutions was an unjust system in which women could not advocate for themselves and were forced to live in disturbing conditions. The institutionalization of women led to their dependency on the almshouse and did not create the moral reform and uplift sought out. If women were dependent on the institution and under the city's watchful eye, they could not influence the outside world, nor disrupt the homogeneity that was so greatly sought after in the nineteenth century period of moral reform.

The Patients: Were They Even Insane?

⁵⁷ Ibid.

⁵⁸ "Charging Her Death to the Nurses," *New - York Tribune (1866-1899)*, 5.

⁵⁹ "Doctors Left Them to Die," *New York Times (1857-1922)*, Jun 09, 1894, 9.

A patient institutionalized for some reason – whether it was her social status, occupation, age, or another reason – did not conform to societal standards. These women were disposable and could be treated poorly by both the nurses and doctors supposedly “curing” them. The insane asylum ended up breeding insanity rather than curing it. Further, these patients represented what could happen to nurses and wealthy visitors if they fell out of favor in a patriarchal society. The institutions that were supposed to cure were really used for isolation. Patients were isolated from civil society because they did not contribute to the progression of society and did not conform to the standards of morality, child-rearing, and productivity.

As the lowest regarded figures in this hierarchy, patients were at the mercy of nurses who were stuck in the middle of an unforgiving system. In the next chapter, I will examine the nurses that Bly claimed were partially responsible for breeding insanity in the institution. The nurses strived to differentiate themselves from the patients in their charge in order to advance themselves socially.

CHAPTER TWO

Stuck in the Middle: The Physical, Emotional, and Social Restraints on Blackwell's Island Nurses

“The A of a nurse ought to be to know what a sick human being is. The B to know how to behave to a sick human being. The C to know that her patient is a sick human being and not an animal.”
 – Florence Nightingale⁶⁰

With the surge of patients being admitted to Blackwell's Island and the popularization of the nursing profession by women like Florence Nightingale, nurses became a key component to the female hierarchal structure forming on the Island in the nineteenth century. Nurses were idealized as moral, patient, and always kind – but the shortage of nurses, immense emotional labor, and opportunities to retain more power created a very different type of nurse. The nursing profession was respected, but the women performing these tasks did not live up to the idealized version that society created.

Nurses had the most contact with patients, as they were the administrators and caretakers. They were supposed to embody the ideal qualities of a nineteenth century woman, particularly in their moral standards. However, the ways in which nurses performed their moralizing mission varied, as many nurses used the opportunity to oversee patients to attain personal power.

Professional Standards for Institutional Nursing

In his book *The Almshouse, Construction and Management*, Alexander Johnson outlines the role of institutional nurses and their relationships with their supervisors and patients.⁶¹

⁶⁰ Florence Nightingale, *Notes on Nursing, What It is and What it is Not*, 1859 (New York: Spring Publishing, 2010), 99.

⁶¹ Alexander Johnson, *The Almshouse, Construction, and Management* (New York Charities Publication Committees, 1911).

Johnson's book presents an in depth look at how institutions were supposed to be run at this time. In reference to the qualifications of nurses in the Almshouse Johnson states, "As a general rule it may be said that they should be of higher grade, both intellectually and morally, than people engaged in similar work which is non-institutional."⁶² Moral superiority was an unofficial part of an institutional nurse's job description. This was in part because the nurse would serve as an example to the patients. Johnson further explains the need for specific qualities in nurses. "They must be of kindly and cheerful dispositions and must possess a full share of tact. The most efficient employe, if of an irritable or over-quick temper, is out of place among feeble and defective people."⁶³ As Johnson noted, nursing was a task that required patience and strong morals. The nurses needed to engage in behavior that would speak to their virtues as exemplar women in New York society.

Writing in the very beginning of the twentieth century, it was possible that Johnson's characterization of the ideal nurse was inspired by Florence Nightingale. Symbolically, nineteenth century nurse Florence Nightingale became a heroic figure for many women. In the midst of the Crimean War, Nightingale was able to showcase her skills as a nurse and leader. The hospital conditions in Crimea were poor and Nightingale faced many obstacles, but she transformed a hospital and reduced the death rate from 42% to 2%.⁶⁴ Nightingale's work and training encouraged formal nursing education. Images created of Nightingale reflect the idealized nurse (Image 1). In this image, Nightingale is surrounded by critically injured patients. With one hand she is comforting a man who is bandaged and with the other she is holding a cup possibly

⁶² Ibid, 52.

⁶³ Ibid., 53.

⁶⁴ J.M. Mellish, *A Basic History of Nursing* (Durban, South Africa: Butterworths, 1984), 85.

containing medication. This demonstrates the dual nature of the idealized nurse who cared personally and had proper medical training.



Image 1: Florence Nightingale tending to wounded patients demonstrating the key characteristics for successful nursing.⁶⁵

In 1859, Nightingale wrote *Notes on Nursing: What it is and What it is Not* with the goal of giving thoughtful advice to nurses and care-takers.⁶⁶ Nightingale's work created a standard for how a nurse should behave and perform her tasks. She expressed her dissatisfaction with the term nursing, as she believed it should cover much more. She stated, "I use the word nursing for

⁶⁵ "Florence Nightingale," *The National Library of Medicine*, B029443, <https://collections.nlm.nih.gov/catalog/nlm:nlmuid-101407883-img>.

⁶⁶ Florence Nightingale, *Notes on Nursing*, 10.

want of a better. It has been limited to signify little more than the administration of medicines and the application of poultices. It ought to signify the proper use of fresh air, light, warmth, cleanliness, quiet, and the proper selection and administration of diet – all at the least expense of vital power to the patient.”⁶⁷ According to Nightingale, nurses should have been involved in all aspects of their patients’ care to verify that the treatment being administered was the most beneficial.

With Nightingale’s rising fame, the virtues of nursing became more widely known. Nursing required a great deal of emotional work, self-discipline, and a commitment to administrative tasks.⁶⁸ In an annual report by the State Charities Aid Association in New York from the 1880s, a quotation from a nursing school graduation speaker was cited,

Of all the vocations which modern society leaves open to women, there is none so distinctively feminine as nursing. Its pursuit involves a daily cultivation and expression of the noblest and loveliest traits of character. The most bitter cynics, even while maligning women in almost all other departments of life, have still felt compelled to speak gently of her in the capacity of nurse.⁶⁹

This quote confirms the virtues of the nursing profession and its value to society. It also emphasized the gendered aspect of a nursing career. While nursing was considered “distinctly feminine,” it also elevated women in the minds of men. Nursing gave women the opportunity to participate more fully in society. However, the nurses’ treatment of patients on Blackwell’s Island reveals how these perceptions and standards did not come to fruition.

New Occupation, New Opportunity?

⁶⁷ Nightingale, *Notes on Nursing*, 3.

⁶⁸ Philip Arthur Kalisch, *American Nursing: A History* (Philadelphia: Lippincott Williams & Wilkins, 2004), 6.

⁶⁹ State Charities Aid Association (N.Y.), “Annual Report” (New York: Hathitrust, 1880-1888), 10-11.

Due to the influence of famous figures like Nightingale and expanding nursing schools, the nursing occupation became increasingly publicized in the nineteenth century. In 1873, The New York Training School at Bellevue Hospital was established.⁷⁰ Following the Industrial Revolution the nursing occupation became a skilled profession, and thus elevated the status of those employed as nurses.⁷¹ Wars, formalized education, stricter qualifications, technological advances, and increased population led to significant changes in the occupation, most importantly giving women an opportunity to gain independence.⁷²

The concepts of care and domesticity were intrinsically linked with women's work.⁷³ However, nursing took this caring outside the realm of the home and gave the women who took part in nursing new power. According to nurse and author Patricia D'Antonio, "Nineteenth-century sick nursing existed at the uneasy intersection of class interests, knowledge, and identities."⁷⁴ Nurses were carving out their own space within an unstable system. According to Ann Preston, a female physician, while all women did not have the same social standing, they needed to have the same knowledge in order to properly care for patients.⁷⁵ The knowledge gained in the nursing sphere had an equalizing effect.

There was excitement associated with sending these newly trained women out into the workforce to better society. Articles in popular newspapers like the *New York Tribune* wrote about this new phenomenon. One article, from the fall of 1887, shared the following "The Training School for Nurses of the Charity Maternity and Infants' Hospitals on Blackwell's and

⁷⁰ Deborah Dolan Hunt, *Fast Facts about the Nursing Profession* (New York: Springer Publishing Company, 2017), 54.

⁷¹ *Ibid.*, 57.

⁷² *Ibid.*, 61.

⁷³ Patricia D'Antonio et. al, *Nurses' Work: Across Time and Place* (New York: Springer Pub., 2007), 3.

⁷⁴ Patricia D'Antonio, *American Nursing: A History of Knowledge, Authority, and the Meaning of Work* (Baltimore: Johns Hopkins University Press, 2010), 7.

⁷⁵ Ann Preston, "Nursing the Sick and the Training of Nurses," *Friends' Review; a Religious, Literary and Miscellaneous Journal (1847-1894)*, vol. 16, no. 42, Jun 20, 1863, 661.

Randall's Island held its twelfth annual commencement exercises yesterday, and sixteen young women were sent out fully equipped for their duties in caring for the sick."⁷⁶ The nursing profession was being celebrated publicly and the women graduating had obtained legitimate skills to advance both professionally and socially.

By writing about nurses in such a heroic manner and applauding their graduation, these newspaper articles further solidified the independence and respect that women were able to obtain as nurses. Several articles were published at the end of the nineteenth century commemorating the addition of more nurses to the workforce. For example, one article in the *New York Tribune* from 1883 referencing the nurses on Blackwell's Island stated, "The New York public cannot highly appreciate the services of these young women."⁷⁷ Nursing was an acceptable profession and respectable life choice for women because of the way it was celebrated by society, in part, due to the media's attention to it.

The nursing occupation provided new opportunities for women, but it was also a laborious task and women continued to be subordinates to men. As one doctor noted, "I do not believe in the success of training-school nurses at Bellevue. The patients are of a class so difficult to deal with, and the service so laborious, that the conscientious, intelligent women you are looking for will lose heart and hope long before the two years are over."⁷⁸ Many nurses were trained at Bellevue Hospital, and experienced similar difficulties on Blackwell's Island. The doctor's sentiments were echoed within society as concern for the nurses in these institutions proliferated, ultimately leading to understaffing. It was no secret that nursing was incredibly demanding, requiring emotional labor, administrative work, and understanding unstable power dynamics.

⁷⁶ "Sending Out Trained Nurses," NY Tribune (Oct 13. 1887), 5.

⁷⁷ "The Riverside Hospital," (1883, Jul 15), *New - York Tribune (1866-1899)*.

⁷⁸ Franklin H. North, "A New Profession for Women," *Century Illustrated Magazine*, vol. XXC, no.1, 11, 1882, 38.

Nurses had to balance doctor's orders, their own judgment, and values, when these components were often in conflict.⁷⁹ However, nurses continued to work in these institutions and not all were as horrific as described in Bly's investigation, as she herself noted a night nurse who she believed was "very kind and patient to the poor, afflicted people."⁸⁰ Nursing gave women purpose and created the potential for elevating their societal position.

Despite the new independence and opportunities that came along with the profession of nursing, nurses were still subject to doctor's orders and vulnerable. Nellie Bly described a common occurrence in which a male doctor would continuously flirt with a nurse. She stated, "he gave the nurse more attention than he did me, and asked her six questions to every one of me."⁸¹ Disguised as a patient, Nellie Bly was able to see the ways in which doctors manipulated their position of power over nurses and treated them in an unprofessional manner. Additionally, an 1887 article written in the *New York Tribune* shared the story of nurses being sexually harassed by doctors on Blackwell's Island. It stated, "Dr. A.E. MacDonald has not yet reached a decision in the cases of Drs. Smallwood and Harris of Blackwell's Island, who are charged with intimacy with two of the female nurses of the asylum."⁸² Doctors harassing nurses and becoming intimate with them demonstrates the ways in which the opportunities nursing offered also came with significant downsides. As nurses were idealized, they were also sexualized by their male superiors who took advantage of them, ultimately leading to behavior that was contrary to the standards laid out by Alexander Johnson.

⁷⁹ Kalisch, *American Nursing: A History*, 5.

⁸⁰ Bly, *Ten Days in a Mad-house*, 133.

⁸¹ *Ibid.*, 86.

⁸² "The Accused Blackwell's Island Doctors," *New - York Tribune (1866-1899)*, Aug 19, 1887, 2.

The Realities of Nursing on Blackwell's Island

The idealized character of nurses in these institutions and their actual behavior differed greatly. One of the most horrifying things that Bly found in her investigation was the behavior of several nurses. Bly shared many upsetting anecdotes about the way in which nurses interacted with their patients. Nurses were in a position of power relative to the patients they were supposed to be helping. While serving doctors and dealing with class divides, these nurses were able to gain power by abusing patients and disregarding the emotional work required to be a successful nurse according to Nightingale.

Described by Patricia D'Antonio, nursing in the nineteenth century was, "messy, chaotic, and unpredictable."⁸³ The work was intimate and required skill. From cleaning up vomit and urine to knowing how to administer enemas, nurses had a lot of responsibility to both their patients and to the doctors.⁸⁴ As noted by Alexander Johnson, nurses had to have a calm temperament that allowed them to deal with the most sickly and difficult patients.⁸⁵

The Almshouse Ledgers from 1882 include the admission forms that nurses filled out upon the arrival of new patients. These forms asked for familial history, travel history, and most importantly, asked the nurses to make an assessment about the viability of a patient's future. In this regard, patients could be deemed "permanently dependent" or "future independent."⁸⁶ Within their administrative role, nurses were required to make quick judgments about patients. These administrative tasks dehumanized patients, making them just another form to fill out. This task could have contributed to the lack of respect and poor behavior that nurses exhibited towards patients.

⁸³ D'Antonio, *American Nursing*, 3.

⁸⁴ Ibid.

⁸⁵ Alexander Johnson, *The Almshouse, Construction, and Management.*, 52.

⁸⁶ "Almshouse Ledgers, 1882" Roll No. 49, Vol. 239 (cont.) 240-241 (part), New York Department of Records.

Bly's firsthand account shows that the nurses were not in a position to be moral examples, as their own conduct was questionable. In one instance, a particularly cruel nurse, Miss Grupe, attempted to rouse a patient to attack a doctor, out of boredom. Bly described the scene:

After the Irish girl had been there an hour or so, Dr. Dent came in, and as he walked down the hall, Miss Grupe whispered to the demented girl, "Here is the devil coming, go for him." Surprised that she would give a mad woman such instructions, I fully expected to see the frenzied creature rush at the doctor. Luckily, she did not, but commenced to repeat her refrain of "Oh, Lucifer. After the doctor left, Miss Grupe again tried to excite the woman by saying the pictured minstrel on the wall was the devil, and the poor creature began to scream, "You divil, I'll give it to you," so that two nurses had to sit on her to keep her down. The attendants seemed to find amusement and pleasure in exciting the violent patients to do their worst."⁸⁷

Miss Grupe took advantage of the patient's vulnerable state of mind for her own entertainment and pleasure. The upsetting behavior demonstrated by Miss Grupe was the opposite of the nursing virtues extolled by Johnson.

The attitude of many nurses treating the insane and impoverished on Blackwell's Island can be summed up in this quote that Bly noted from a nurse: "This is charity, and you should be thankful for what you get."⁸⁸ Charity in this case was whatever was provided for the patients and nothing more. The patients were expected to be grateful for what little was allotted to them because otherwise they could expect nothing. Bly believed that, "should the building burn, the jailers or nurses would never think of releasing their crazy patients."⁸⁹ Society, and nurses in particular, considered the patients they treated so far below them that they did not attempt to relate to them, leading to the hierarchal structure between the two groups.

⁸⁷ Bly, *Ten Days in a Mad-house*, 144-145.

⁸⁸ *Ibid.*, 96.

⁸⁹ *Ibid.*, 97.

The attitudes adopted by nurses were publicized as newspaper articles were published in the late nineteenth century detailing the harsh treatment of patients. In 1888, an article entitled “Charging Her Death to the Nurses: An Insane Patient on Blackwell’s Island Who Said She Was Beaten and Abused” was published in the *New York Tribune*.⁹⁰ It detailed the death of a woman whose injuries from being poorly treated in the asylum led to her death upon her release. Additionally, she had lost a significant amount of weight. Her husband as well as other family members were concerned about the state of her well-being. Another article, “Charges of Cruelty in an Asylum: A Sailor Says His Wife is Beaten by Her Nurses on Blackwell’s Island” published in 1890, echoes the previous story. The husband shared, “On Saturday he went to the island to see his wife who is a patient there. He found her frightfully bruised and battered, her face covered with scratches, and several teeth missing. She declared that her nurse had inflicted these injuries.”⁹¹ Stories like this corroborate the harsh treatment that Nellie Bly details in her investigative report. However, these incidents begin to make sense as more was revealed about the nurses and who they actually were, rather than the idealized version of them that was being circulated in newspapers and literature.

For example, Emma Goldman was an infamous character in American history for her revolutionary spirit, feminism, and anarchist goals. Goldman was also a nurse on Blackwell’s Island in the late nineteenth century due to staff shortages. From the period between 1893 and 1906, Emma Goldman was employed as a nurse, following her time as an inmate in Blackwell’s Island penitentiary.⁹² During her time as an inmate in the prison, Goldman became incredibly ill

⁹⁰ “Charging Her Death to the Nurses,” *New York Tribune*, March 2, 1888, 5.

⁹¹ “Charges of Cruelty in an Asylum,” *New - York Tribune (1866-1899)*, Jun 24, 1890, 12.

⁹² Cynthia Anne Connolly, “I Am a Trained Nurse: The Nursing Identity of Anarchist and Radical Emma Goldman” (*Nursing History Review*, Volume 18, Issue 1), 84.

and was then sent to Charity Hospital.⁹³ Once she finished her treatment, one of her physicians invited her to stay as a nurse. Oftentimes, due to the nursing shortage, prisoners on Blackwell's Island were offered nursing positions.⁹⁴ The idea of former prisoners serving as nurses did not adhere to the expectations of morality, which could partially explain some of the poor treatment that Nellie Bly investigated.

In terms of education, prior to her imprisonment, Goldman did not have any nursing experience. She was placed in charge of a ward of sixteen women with a variety of issues. Some were pregnant, others were drug addicts, and some were recovering from surgery.⁹⁵ Goldman explained her training and work as a nurse, "The hours were long and strenuous, the groans of patients nerve-racking; but I loved my job."⁹⁶ Goldman loved being a nurse, but her experience reveals the lack of training she received and how a shortage of nurses lowered the standards for the occupation. Additionally, while Goldman, a former prisoner, handled her new position well, her description shows that it was a difficult occupation that not all could cope with in the same way she was able to.

There was a clear contradiction between the ideal role of nurses and how they behaved in reality. Keeping in mind the proclaimed goals of the almshouse as a reformatory institution, the idealized characteristics of nurses make sense, while their actual behavior in the hospitals demonstrated the emerging power dynamics in this setting. In the hierarchy of the almshouse, nurses were superior to their patients and able to exercise their power in such a way to reflect the unbalanced dynamics. The moralization mission quickly diminished as the women providing care and supposedly setting an example succumbed to the pleasures of power.

⁹³ Ibid., 87.

⁹⁴ Ibid.

⁹⁵ Ibid.

⁹⁶ Emma Goldman, *Living My Life* (New York: A.A. Knopf, 1931), 137.

Making Their Own Space: Why Did Nurses Mistreat Patients?

Media and the prospect of independence drew many women to careers in nursing. Nurses were lauded as brave and kind, which in some cases they were. However, nursing was a tough occupation, especially in the isolating environment on Blackwell's Island. The nurses were struggling like their patients, as women in a male dominated capitalist society. The harsh experiences with which nurses had to deal and their own troubled backgrounds can explain, in part, their poor treatment of patients.

Many nurses were not prepared for the emotional, physical, and mental labor. The stress of their responsibilities was one reason why nurses were quick to lash out at patients or use patients to cure boredom. Additionally, while the nursing profession did provide social mobility and independence, these women were still under the direction of doctors and would never attain the wealth that the charitable visitors who entered the institution had. The nurses found superiority in comparison to their patients, but these were the only people over whom the nurses could exert their control over. Due to their unstable position in society, nurses were determined to differentiate themselves from their patients, even if this meant not fulfilling their nursing duties and treating patients cruelly.

Nurses solidified their middle position in the institutional hierarchy by asserting their dominance over patients. However, they continued to be subordinate to charitable visitors because of a lack of wealth and status. The harassment that they were exposed to by doctors exemplifies their lack of power in this regard. In the following chapter, I will examine how the charitable visitors solidified their spot at the top of the hierarchy and what Blackwell's Island meant to them.

CHAPTER 3

View from the Top: Charitable Visitors

“She has a fount of compassion all ready to gush for the “poor prisoners” and the “poor patients,” and is disappointed to find there are none in sight.” – Iza Duffus Hardy⁹⁷

At the top of the institutional hierarchy were the wealthy visitors. These were the people who had the opportunity to witness charity in action on Blackwell’s Island. They completed tours of the various institutions on the Island to observe moral uplift. For many wealthy women, these visits demonstrated their generosity and morality. Their charitable traits indicated that wealthy women had successfully conformed to societal standards, and thus were models for patients and nurses to emulate.

There were three types of visitors who entered the almshouse as spectators: (1) friends or relatives of inmates, (2) citizens of the county, and (3) visitors with specific connections to public service.⁹⁸ The third category was the most important because these individuals could provide financial support and advance the image of institutions as reformatories.⁹⁹ Charitable individuals and groups supposedly wanted to ensure that the institutions were fulfilling their reform and moral missions. However, the question arose of whether they were being shown the true almshouse experience. The visits were planned, and visitors were escorted through the institutions by the superintendent or the matron.¹⁰⁰ These visitors did not see what Nellie Bly and

⁹⁷ Iza Duffus Hardy, “A Trip to Blackwell’s Island,” *Tinsleys’ Magazine (1867-1892)* vol. 33, 1883, 475.

⁹⁸ Alexander Johnson, *The Almshouse, Construction, and Management*, 54.

⁹⁹ *Ibid.* This group included: (1) county commissioners, (2) circuit judges, (3) members of country board of charities, (4) inspectors of the state board of charities or of the state board of health, (5) representatives of the press, (6) members of charitable societies or committees, (7) ministers of churches, and (8) anyone else who took a strong interest in caring for the poor.

¹⁰⁰ *Ibid.*, 54.

various formal reports documented. These charitable tours satisfied visitors' curiosity, rather than allowing them to investigate what was happening on the Island.¹⁰¹

Charity, Capitalism, and a Wealthy Woman's Place

Sharp class divisions were a common feature of the social landscape and in the nineteenth century they were magnified. Emerging residential patterns demonstrate how the rich created physical distance from the poor. The wealthy New York City elites moved uptown or into the country, while the lower classes inhabited the Lower East Side and more crowded areas.¹⁰²

Wealthy New York City residents sought out areas where they found people like themselves.¹⁰³ This residential separation between classes highlights the isolation created around those who did not conform to societal standards of proper behavior and morals.

The location of Blackwell's Island, separated from New York City by water, showcases this physical distancing to a further extent. As seen in Image 2, Blackwell's Island was its own entity without any direct ties to the city. It housed a lunatic asylum, workhouses, almshouses, a penitentiary, and a hospital. This was a place for social outcasts who were not believed to be making valuable contributions to society. The isolation of Blackwell's Island made it an easy place to discard those who did not fit into the idealized vision of capitalist society taking hold in the nineteenth century.

¹⁰¹ Hardy, "A Trip to Blackwell's Island," 475.

¹⁰² Stansell, *City of Women: Sex and Class in New York City*, 9.

¹⁰³ *Ibid.*



Image 2: A map of Blackwell's Island. This map demonstrates the space between the Island and New York City, revealing its purpose as a distancing mechanism between the social outcasts and the rest of society.¹⁰⁴

The extreme differences between the rich and the poor led to charity work focusing on establishing homogeneity among the lower classes to fit into society properly. According to Christine Stansell, prior to 1800 there was no discussion about the source of poverty, and the need for charity.¹⁰⁵ The poor were simply tolerated, not helped, nor condemned. However, as the nineteenth century progressed, wealthy philanthropists began to see the poor as a hindrance on society.¹⁰⁶ Poverty-stricken individuals were blamed for their own misfortunes, changing the landscape for charitable endeavors.¹⁰⁷ Those in need of charity were characterized as “depraved” and in need of saving, but ultimately, they did not conform to the ideals of capitalism and progress.¹⁰⁸

¹⁰⁴ Thomas McCarthy, “Before Riker's, Blackwell's Island Was DOC's Island Home,” *Blackwell's Island Part 2*, NYC DOC, www.correctionhistory.org/html/chronicl/nycdoc/html/blakwel2.html.

¹⁰⁵ Stansell, *City of Women: Sex and Class in New York City*, 19.

¹⁰⁶ *Ibid.*

¹⁰⁷ *Ibid.*

¹⁰⁸ *Ibid.*, 35.

As charity became more popular throughout the nineteenth century, taking care of the poor population often fell upon the shoulders of the wealthy, as they had the greatest means of support.¹⁰⁹ Newspapers were filled with stories about charity balls thrown by the elite to benefit charitable institutions like women's hospitals.¹¹⁰ Charity was embedded in the fabric of high society. However, underlying these events, it was clear that the uplift of those in need was not the focus. As one article from 1872 shared:

One of the landmarks in this giddy whirl is the "Charity Ball", which occurs to-night at the Academy of Music, with every promise of a brilliant success. The weather is propitious; the boxes are all taken by distinguished people; everybody has bought tickets, the decorations, silvery drapery around the stage, and Charity illuminated are completed; and dresses that have been dreamed of for weeks have entered the visible world.¹¹¹

While these events did contribute to raising funds for charity, they were also used as a guise to further one's social status and display one's wealth.

In the nineteenth century, New York City society was focusing on progress, production, and wealth.¹¹² The economy was flourishing, and the merchant class was thriving. While men were heavily entrenched in the capitalist wave, upper class women were still limited to the domestic realm. Wealthy women gained their riches through inheritance or marriage, and therefore were not well-respected.¹¹³

However, women were able to gain respect and leave the domestic sphere by participating in charitable endeavors. At Blackwell's Island, they solidified a prominent place in society by asserting their dominance above nurses and patients. Just as nursing was an opportunity for lower class women to advance socially, participating in charity gave wealthier women a chance

¹⁰⁹ Ibid., 30.

¹¹⁰ "Giving to the Poor," *Chicago Daily Tribune (1872-1922)*, Jan 14, 1876, 2.

¹¹¹ From Our, Special C., and Fancho, "New York," *Chicago Tribune (1860-1872)*, Feb 07, 1872, 4.

¹¹² Stansell, *City of Women: Sex and Class in New York City*, 4.

¹¹³ "Wealthy Women of America," *The Cosmopolitan; a Monthly Illustrated Magazine (1886-1907)*, vol. 7, no. 6, 10, 1889, 593.

to satisfy curiosities and exit the domestic sphere. Women formed committees to plan charity events and gain their own notoriety.¹¹⁴ One example was a wealthy widow, Mrs. S.B. Nelson who had a habit of visiting charitable institutions and gave generously to charities.¹¹⁵ An article was written about her in 1885, because one of her charitable cases had fallen in love with her following her visit to Blackwell's Island, demonstrating the media's interest in these women and the publicity they garnered.

Appealing to public charity for women on the Blackwell's Island was a common occurrence. Letters to editors of newspapers, like the *New York Tribune*, would include appeals for charity. One letter, written in 1888 stated:

Blackwell's Island is a bleak place, swept by the north wind and by freezing blasts from the Bay. The city, with so many calls upon its funds, can only supply the old women but a scanty wardrobe. It consists of shoes, cotton stockings, two skirts of a material seemingly a mixture much cotton and little wool, and a dress of stout cotton goods.¹¹⁶

Such public pleas for assistance made the opportunity to showcase generosity easy. Being charitable was a marker of moral superiority in nineteenth century society, and thus adventuring into places like Blackwell's Island strengthened a wealthy woman's character.

The Wealthy Visitor's Experience in the Almshouse

Scheduling a visit to Blackwell's Island was not an easy task as it became a popular charity destination. As one reporter for the *Chicago Daily Tribune* noted, "It has always been difficult for New Yorkers, even, to obtain a pass to visit the different Institutions on the Islands (Blackwell's, Ward's, and Randall's), unless they had some notoriety or popularity to insure

¹¹⁴ "The Charity Ball," *The Atlanta Constitution (1881-1945)*, Mar 20, 1885, 7.

¹¹⁵ "Annoying His Benefactress," *New York Times (1857-1922)*, May 22, 1885, 8.

¹¹⁶ Bemevola, "One More Appeal For Charity", *New York Tribune*, Jan. 14, 1888, 7.

them a permit.”¹¹⁷ Any wealthy female visitor must have had some sort of clout to retain the opportunity to visit.

Charitable visits to the poor were social outings for many wealthy women because of the exclusivity and press associated with them. As one article from 1894 shared, “Women who lead New York Society wear their smartest clothes for visiting the slums on Christmas day.”¹¹⁸ Women had to dress their best because this was their opportunity to go into the public eye and establish their independence outside the domestic sphere. Being charitable and generous situated wealthy women properly in society, but they were also liberated from the monotony of domestic life.

In November 1883, Iza Duffus Hardy had the opportunity to visit Blackwell’s Island with her companions: the Empress, Jack, and Jill. Hardy was a novelist and the daughter of an English civil servant. In the 1880s, following the death of her parents, she travelled across America for inspiration for her novels, leading to her visit to Blackwell’s Island.¹¹⁹ In her account, she described the reactions of her companions, visiting a hospital, “The Empress declares she is afraid of fever or smallpox in hospitals. Jill says she hates the sight of sick people. Jack replies that we will need not enter the “infectious” wards, and that this hospital is a very interesting sight.”¹²⁰ Fear and curiosity inspired these tours. Blackwell’s Island was quickly becoming a popular place to visit for those who would never be subjected to such a place in their daily lives due to their wealth and security.

¹¹⁷ Beulah, “Outcasts and Lunatics,” *Chicago Daily Tribune (1872-1922)*, Feb 16, 1874, 8.

¹¹⁸ “Woman and Home,” *Los Angeles Times (1886-1922)*, Dec 23, 1894, 20.

¹¹⁹ Troy J. Bassett, “Iza Duffus Hardy (1850-1922),” *A Database of Victorian Fiction, 1837-1901*, At the Circulating Library Author Information, 30 June 2018, www.victorianresearch.org/atcl/show_author.php?aid=490.

¹²⁰ Hardy, “A Trip to Blackwell’s Island,” 475.

Despite Hardy's companions' concerns they entered the asylum to find a place in which they believed the inhabitants should be grateful. However, it was a place which they would never hope to find themselves. The concept of being grateful for charity that the nurses expressed was also conveyed by the visitors as they viewed the patients to be so below them that poor conditions were expected for such types of people. Hardy's experience contrasts with what Bly recounted in terms of the treatment of patients, but not necessarily the poor conditions in which patients found themselves. Hardy explained her interactions with the patients of the asylum:

They were mostly poorly dressed, all evidently according to their own fancy; it is clear that every possible latitude is allowed for the gratification of their whims, and the kindness with which they are treated needs no further proof than the hearty goodwill and pleasure with which one and all of those who speak to our party greet the doctors, and the gentle and cordial manner of the latter with patients.¹²¹

The visitors saw the façade of the almshouse that the moralization mission emphasized. Of course, the staff would not subject the patients to cruelty when those providing charity visited.

Consistent with the formal reports and Bly's experience, the large foreign-born population was evident during Hardy's trip as well. She described an interaction with one of the patients, "A German woman comes up and plunges into a voluble discourse in her native tongue, undiscouraged by the fact that we can neither understand nor answer her."¹²² Hardy's tone indicates that she believed this woman was insane, simply because she could not understand her. Her description of the interaction demonstrates the seemingly common sentiment that non-English language speakers were easily condemned to insanity.

In addition to learning about the populations that were housed in the institution, these tours provided several opportunities for visitors like Hardy. First, they were able to uplift themselves

¹²¹ Ibid., 478.

¹²² Ibid., 479.

by noting their contribution to “charity.” Second, they found themselves on morally superior ground as their lives would never descend to the low social levels of the inhabitants of Blackwell’s Island. It was possible that these visitors genuinely cared about the well-being of the impoverished populations and wanted to ensure their safety. Hardy and her companions wanted to make sure that charity was being properly doled out and that was what they saw since they did not further inspect their surroundings. A façade of the almshouse was presented to these visitors, but other charitable visitors who were more discrete could investigate beyond a scheduled tour.

For example, a group of women from New York visited different almshouses, with the specific intention of improving the living conditions of patients. One article from 1873, shared the success of the “Ladies Visitation Among the Almshouse.”¹²³ The article stated:

The annual meeting, a few days since, of the “State Charities Aid Society,” gave in its ample reports a striking proof of what a few earnest women from the fortunate classes can accomplish in services of humanity. The movement began with a few ladies who had been engaged during the war in sanitary labors for the sick and wounded soldiers. They conceived the idea of making use of the benevolent organization which they formed, for the purpose of lightening the condition of a yet more unfortunate class of the population – the inmates of our public institutions of charity.¹²⁴

It also noted the unique character of this group of women as they genuinely cared. They wanted to reform abuses and create uplift, which in turn gave them purpose. The article described their work on the Islands and Bellevue:

During the past year, the ladies have been freely visiting, though with great judgment and discretion, in Randall’s island, and in the great pauper hospital of Bellevue. The Blackwell’s Island institutions have not been touched by them. The results in Bellevue have been very happy. Many abuses have been detected which women alone would be apt to discover, or which were due to the employment of pauper labor. Indeed, the current expression on Blackwell’s Island has been that “the ladies have smoked out Bellevue,” and it was hoped that the same process would be applied to the Island institutions.

¹²³“Ladies’ Visitation among the Almshouses,” *New York Times (1857-1922)*, Mar 05, 1873, 4.

¹²⁴ Ibid.

These women had a similar goal to Nellie Bly's, to expose abuses, but they took it a step further and improved the conditions in these institutions. However, these women were not the norm in the nineteenth century, and the focus of charity was still about the façade of generosity and social grace.

Appearances were a key component to ensuring the continued charity and longevity of the almshouse. As long as institutions appeared to be focused on moralization, charity would continue. Additionally, the poor conditions of the almshouse were a reminder to visitors of the blessings in their own lives. Wealthy visitors publicly touring the institutions often benefitted from their visits more than the patients did, as was Hardy's case. These visitors were able to demonstrate care in conjunction with superiority.

The True Nature of the Institution: What Lay Beyond Hardy's View?

Hardy's visit was a scheduled tour, but other visits were legitimate formal inspections that proved the moral appearance of the almshouse was not as it seemed. Written in 1888 an article entitled "Finding Much to Condemn" outlined the results of visits to Blackwell's Island and other charitable institutions in the city. In reference to the almshouse it specifically found that, "The almshouse is still badly overcrowded, about 150 inmates being required to sleep on the floor. The roof is in bad condition, rain drips into the upper rooms and the water supply is insufficient."¹²⁵ Overcrowding and poor construction were the realities of the institutions but did not fit into the idea of charitable uplift, so they were ignored by and hidden from wealthy visitors.

¹²⁵ "Finding Much to Condemn," *New York Times* (1857-1922), Jan 11, 1888, 3.

Abuses on Blackwell's Island were apparent, despite Hardy's insistence that the patients were treated relatively well. In 1887, just four years after Hardy's visit, an investigation by Mrs. Josephine Shaw Lowell for the State Commissioners found that Blackwell's Island was of "shocking character" and requested urgent action to be taken.¹²⁶ The conditions were described:

At present, the unfortunate poor who are sent there for a home, are huddled up with criminals sentenced for short terms. The workhouses are habitually overcrowded, men and women have to sleep on the floors, the number of officers is inadequate, and children and young girls are forced into companionship with criminals and with the most evil and degraded of the slums of the metropolis. The real situation could hardly be worse, nor more disgraceful to the city.¹²⁷

Women were at risk on Blackwell's Island and it was a real possibility that institutionalization was making their lives worse rather than improving them. This formal report from Mrs. Josephine Shaw Lowell reveals what Hardy either did not see or ignored. The realities of Blackwell's Island were so degrading that one may not have wanted to write about it, especially if Hardy's goal was to further her own status as a charitable and empathetic woman.

The horrors of these institutions could be hidden from visitors like Hardy, but when thorough inspections were done the apparent flaws surfaced. It was clear that Hardy did not have the same standards for the patients as she did for herself. These women did not compare to her, so why would they receive the same living conditions and treatment? What Hardy found in her visit was acceptable in her view of how the institutionalized should be treated, but as formal inspections reveal even her low expectations were not met.

The Distance: Why Visit Blackwell's Island?

¹²⁶ "Current Events," *New York Evangelist (1830-1902)*, vol. 58, no. 35, Sep 01, 1887, 8.

¹²⁷ *Ibid.*

Charity was a fundamental part of society in the nineteenth century. It provided the façade of moral uplift, isolated those who were different, and provided wealthy women opportunities outside the domestic sphere and the chance to carve out their own space in the public domain. However, this use of charity often did not benefit the patients. As numerous reports note, the abuses on Blackwell's Island were deplorable and discreet visits did the most to improve conditions.

Both Iza Duffus Hardy and Nellie Bly were women of relative means in the nineteenth century, and approached their respective visits to Blackwell's Island very differently. However, both used it as a means of advancement for themselves. Nellie Bly went undercover as a patient and exposed the horrific nature of abuses that took place in the asylum on Blackwell's Island. In doing this, she helped suspend many of these abuses, but she also solidified her status as a prominent investigative journalist. On the other hand, Iza Duffus Hardy entered Blackwell's Island as a wealthy philanthropist, with other visitors like her. She expressed fear over the differences between herself and the patients. However, she felt that the treatment of patients was suitable for their status. She too wrote about her experience, but it did not invoke outrage. Instead she placated audiences, demonstrating the low standards for patients in these supposedly uplifting institutions.

Did Nellie Bly simply care more than Hardy? This is a possibility, but it should also be noted that Hardy did not have the opportunity to see what Bly did, and perhaps if she had, she would have acted in the same way that Bly and the "Ladies Visitation to the Almshouse" did. Bly's mission from the beginning of her visit was to find abuses, while Hardy was focusing on charitable ideals. Their respective goals explain why they wrote so differently about visiting Blackwell's Island.

Visiting an institution had several benefits for the wealthy individual. It solidified a person's charitable character, while also reminding them of their upper class status. These visits did not assist the patients unless they were done secretively. Wealthy visitors were supposed to exemplify morality and the best qualities in women, but their charitable adventures were not selfless endeavors.

CONCLUSION

Institutionalization on Blackwell's Island in the nineteenth century was used to maintain patriarchal standards of virtue for women. Charity, morals, and capitalism came together on Blackwell's Island to serve the social ideals established at the time. The supposed purpose of the almshouse was to uplift those in need, but ultimately it was the nurses and wealthy visitors that attained the greatest benefits as they conformed to the female archetype. By revealing the poor treatment of the patients, the nurses lack of care, and the selfish motivations of wealthy visitors, I show how the almshouse failed to live up to its moralization mission and furthered the patriarchal vision of female ideals.

I argue that the hierarchy established on the basis of charity empowered certain groups of women, while weakening another. Patients were hindered by the almshouse and forced to become dependent upon it. They were at the mercy of doctors and nurses who often did not respect them or treat them with dignity. They were trapped in a system that did not have their greater needs in mind. According to the rules of society, the undesirable characteristics of patients – whether it be their age, occupation, or immigration status, required their removal from civil society. This reveals society's fear of difference and need for homogeneity.

Nurses gained independence and power through their occupation. They were praised by many as selfless care-givers, and considered skilled workers. However, often times, they used their position to abuse patients and showcase their own power. Their social status was boosted, but they were still confined to the general patriarchal rules that governed society in the nineteenth century. They were often harassed by doctors and they would never surpass the wealthy visitors who came to showcase their morality.

Charitable visitors found purpose and independence through institutional exploration, while men dominated capitalist society. Generosity, through monetary means and one's time, was a key characteristic of an ideal woman. Wealthy women gained respect through these charitable visits. Additionally, they solidified a place for themselves outside the domestic sphere. And in the rare case of Nellie Bly, they could truly make a societal impact, attaining a larger purpose.

The interactions among these three groups of women on Blackwell's Island reveal the complexities of gender and class in nineteenth century New York society. In order to attain their own independence and power, women did not work together across class lines, but instead focused on uplifting themselves individually. In a largely patriarchal system, women were pitted against each other through class conflict. The differentiations between classes only became more apparent and created new power dynamics in which some women were uplifted, while others were forced to the sidelines.

Nineteenth century misogynist tropes emphasized the "deviousness" of women and their largely "dependent status."¹²⁸ In order to combat these stereotypes and adhere to patriarchal norms, nurses and visitors ventured outside the domestic sphere and attempted to show piety through their work. They could not be considered "devious" when they were showcasing charity and goodness through care and compassion for those less fortunate. On the other hand, patients, who had little means to change perceptions of themselves, were further defined by these terms. Moral depravity and dependence were both popular reasons for institutionalization.¹²⁹ While nurses and visitors distanced themselves from these concepts, patients were consumed by them and fell victim to the almshouse, a cog in the patriarchal machine.

¹²⁸ Stansell, *City of Women: Sex and Class in New York*, 21.

¹²⁹ Michael B. Katz, *Poverty and Policy in American History*, 61.

While the hierarchy among these women would make it appear that they were different, all of them were being oppressed under the rules. However, the ways in which they dealt with this patriarchal system differed based on their respective social classes. Nurses and wealthy women had the opportunity to combat the view of women as weak, but patients were not afforded the same chance. Thus, the institution solidified the position of each type of woman, isolating those who could not conform, and uplifting those who could, reinforcing the importance of patriarchal ideals in the nineteenth century.

Bibliography

Primary Sources

- “Almshouse Ledgers, 1882.” Roll No. 49, Vol. 239 (cont.) 240-241 (part). NYC Department of Records & Information Services, National Archives: National Historical Publications and Records Commission.
- “An Insane Woman Killed.” *New York Times (1857-1922)*, Jan 29, 1880, pp. 8.
- “Annoying His Benefactress.” *New York Times (1857-1922)*, May 22, 1885, pp. 8.
- Benevola. “One More Appeal For Charity.” *New York Tribune*, Jan. 14, 1888, 7.
- Beulah. “Outcasts and Lunatics.” *Chicago Daily Tribune (1872-1922)*, Feb 16, 1874, pp. 8.
- Bly, Nellie. *Ten Days in a Mad-House*. New York: Munro, 1887.
- Craig, Oscar, John J. Milhau, and Edward W. Foster. “Disposal of the Insane.” *The Sanitarian (1873-1904)*, no. 215, 1887, pp. 289.
- “Charges of Cruelty in an Asylum.” *New - York Tribune (1866-1899)*, Jun 24, 1890, pp. 12.
- “Charging Her Death to the Nurses.” *New - York Tribune (1866-1899)*, Mar 02, 1888, pp. 5.
- “Current Events.” *New York Evangelist (1830-1902)*, vol. 58, no. 35, Sep 01, 1887, pp. 8.
- “Doctors Left Them to Die.” *New York Times (1857-1922)*, Jun 09, 1894, pp. 9.
- “Finding Much to Condemn.” *New York Times (1857-1922)*, Jan 11, 1888, pp. 3.
- From Our, Special C., and Fanchu. “New York.” *Chicago Tribune (1860-1872)*, Feb 07, 1872, pp. 4.
- “Giving to the Poor.” *Chicago Daily Tribune (1872-1922)*, Jan 14, 1876, pp. 2.
- Goldman, Emma. *Living My Life*. New York: A.A. Knopf, 1931.
- Hardy, Iza Duffus. “A Trip to Blackwell’s Island” *Tinsleys’ Magazine (1867-1892)*, vol. 33, 1883.
- “In and About the City.” *New York Times (1857-1922)*, Sep 26, 1887, pp. 8.
- Johnson, Alexander. *The Almshouse Construction, and Management*. New York Charities Publication Committees, 1911.

“Ladies' Visitation among the Almshouses.” *New York Times (1857-1922)*, Mar 05, 1873, pp. 4.

Nightingale, Florence. *Notes on Nursing, What it is and What it is Not, 1859*. New York: Spring Publishing Co., 2010.

North, Franklin H. “A New Profession For Women.” *Century Illustrated Magazine*, vol. XXC, no.1, 11, 1882), 38.

Porter, Edwin S., Camera, Inc Thomas A. Edison, and Paper Print Collection. *Panorama of Blackwell's Island, N.Y.* United States: Thomas A. Edison, Inc, 1903. Video. Available on: <https://www.loc.gov/item/00694366/>

Preston, Ann. “Nursing the Sick and the Training of Nurses.” *Friends' Review; a Religious, Literary and Miscellaneous Journal (1847-1894)*, vol. 16, no. 42, Jun 20, 1863, pp. 661.

Ed. Shrou, Anelise. “The Almshouse Records.” *Digital Almshouse Project*. Glucksman Ireland House, 2013. Available on: <https://www.nyuirish.net/almshouse/the-almshouse-records/>

State Charities Aid Association (N.Y.). “Annual Report.” New York: HathiTrust, 1880-1888.

“Sending Out Trained Nurses.” *NY Tribune*, October 13, 1887.

The American Journal of Insanity. Baltimore: Utica State Hospital Press, 1844-1941.

“The Accused Blackwell’s Island Doctors.” *New - York Tribune (1866-1899)*, Aug 19, 1887, pp. 2.

“The Charity Ball.” *The Atlanta Constitution (1881-1945)*, Mar 20, 1885, pp. 7.

“The Riverside Hospital.” *New - York Tribune (1866-1899)*, July 15, 1883.

“Wealthy Women of America.” *The Cosmopolitan; a Monthly Illustrated Magazine (1886-1907)*, vol. 7, no. 6, 10, 1889, pp. 593.

“Woman and Home.” *Los Angeles Times (1886-1922)*, Dec 23, 1894, pp. 20.

Secondary Sources

“Almshouse Ledgers.” *Almshouse Ledgers*. NYC Department of Records & Information Services. Available on: www.archives.nyc/almshouse.

Baroque, Monique. “Women and Work in the Philadelphia Almshouse, 1790-1840.” *Journal of the Early Republic*, Vol. 32, No. 3, 2012.

Bartlett, Peter. “The Asylum and the Poor Law: The Productive Alliance.” Ed. Melling, Joseph

- and Bill Forsythe. *Insanity, Institutions and Society, 1800-1914: A Social History of Madness and Comparative Perspective*. London; New York: Routledge, 1999.
- Bassett, Troy J. "Iza Duffus Hardy (1850-1922)." *A Database of Victorian Fiction, 1837-1901*, At the Circulating Library Author Information, 30 June 2018, Available on: www.victorianresearch.org/atcl/show_author.php?aid=490.
- Chesler, Phyllis. *Women and Madness*. Garden City, N.Y.: Doubleday, 1972.
- Connolly, Cynthia Anne. "'I am a Trained Nurse': The Nursing Identity of Anarchist and Radical Emma Goldman." *Nursing History Review*, 1/2010, ISSN: 1062-8061-Volume 18, Issue 1, p. 84.
- D'Antonio, Patricia et. al. *Nurses' Work: Issues Across Time and Place*. New York: Springer Pub., 2007.
- D'Antonio, Patricia. *American Nursing: A History of Knowledge, Authority, and the Meaning of Work*. Baltimore: Johns Hopkins University Press, 2010.
- Hunt, Deborah Dolan. *Fast Facts About the Nursing Profession: Historical Perspective in a Nutshell*. New York, NY: Springer Publish Company, LLC, 2017.
- Kalisch, Philip Arthur. *American Nursing: A History*. Philadelphia: Lippincott Williams & Wilkins, 2004.
- Katz, Michael. *In the Shadow of the Poorhouse: A Social History of Welfare in America*. New York: BasicBooks, 1996.
- Katz, Michael. *Poverty and Policy in American History*. New York: Academic Press, 1983.
- Kroeger, Brooke. *Nellie Bly: Daredevil, Reporter, Feminist*. New York: Times Books, 1994.
- Mellish, J.M. *A Basic History of Nursing*. Durban, South Africa: Butterworths, 1984.
- Mohl, Raymond A. *Poverty in New York, 1793: 1825*. New York: Oxford University Press, 1971.
- Sengupta, Gunja. *From Slavery to Poverty: The Racial Origins of Welfare in New York, 1840-1918*. New York: NYU Press, 2009.
- Stansell, Christine. *City of Women: Sex and Class in New York, 1789-1860*. New York: Knopf: Distributed by Random House, 1986.

Images

McCarthy, Thomas. "Before Riker's, Blackwell's Island Was DOC's Island Home." *Blackwell's Island Part 2*, NYC DOC , Available on:
www.correctionhistory.org/html/chronicl/nycdoc/html/blakwel2.html.

"Florence Nightingale." The National Library of Medicine. B029443.
Available on: <https://collections.nlm.nih.gov/catalog/nlm:nlmuid-101407883-img>