

CHAPTER 1

Central State Mental Hospital

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“Basement dungeons are dark, humid, and foul, unfit for life of any kind, filled with maniacs who raved and howled like tortured beasts.” These are the words superintendent Dr. Everts wrote to the governor of Indiana in 1870 regarding the appalling and wretched conditions of his understaffed and poorly maintained mental institution. His pleas for aid went unheeded, and thus began the twisted and inhumane nightmare of Central State Mental Hospital.

Central State began its existence as a hospital for the insane in 1848. It opened with only one building on a campus of more than one hundred wooded acres on the outskirts of Indianapolis. As the only mental facility in the state until 1905, Central State expanded soon after it opened to include male and female dormitories, an administration building, a chapel, an amusement hall with billiards and bowling, a bakery, a firehouse, and many other buildings the facility would need to house and treat hundreds of patients and workers.

These later buildings were built with an eye towards beauty. The grounds included garden paths, benches, groves of trees, and picnic areas. With its parklike setting, ornate Victorian buildings, train station, gardens, and fountains, a nineteenth-century visitor strolling the grounds might find the rolling hills and trees calming and peaceful, totally unaware of the horror that flailed and strained in the darkness, just beneath his feet.

The treatment of mental illness was in its infancy during the early years of Central State. It was barely understood and hard to diagnose. The term “insane” was freely applied to those who were considered

“simple” or “depressed,” as well as to those who suffered from schizophrenia and dementia. This resulted in the mentally retarded being treated similarly to those who were considered criminally insane. Doctors were unsure of treatment, and the hospital aids were poorly trained. Proper drugs and therapy had not yet been invented, and the only known “treatment” was restraint and punishment.

The worst of the patients, those who screamed relentlessly or were hostile to the staff or other patients, were confined to the dungeons. The tiny, dank dungeon rooms were scattered through the five miles of underground tunnels, which snaked like a labyrinth under the property. The tunnels were originally intended as a safety measure for the staff. If a riot or disturbance broke out in one building, they could dash into the tunnels and get to a safer place quickly. Some of the Victorian doctors and attendants had another use for them as well. They believed that the mentally ill could control their actions and were to blame for their own deviant behavior; therefore, when they became uncontrollable, they were punished. The worst patients were chained to the dungeon walls with shackles and left in the darkness, sometimes for days at a time, with nothing but their own madness. Although no one would confirm it, it was widely rumored that, when renovating the tunnels in the 1950s, workers uncovered old shackles and chains bolted into the tunnel walls.

The punishment did not end there. Patients in the “normal” wards had their own treatment to deal with. Some slept on beds of straw in buildings with leaky roofs and moldy walls. Those lucky enough to sleep in beds were often restrained with leather straps attached to the steel bedposts. Attendants were known to strike patients, withhold food, lock them in closets, and restrict them from communicating with each other. Sometimes window wells were used as outdoor cages, complete with bars over the top so that patients could be outside but still confined.

Over time, reform-minded superintendents and community activists successfully lobbied for more funding, drawing attention to the patient abuse. Public awareness, as well as strides in treatment, forced sweeping changes, and conditions began to improve. Social activities and vocational rehabilitation were introduced. Life at Central State improved for the majority of those within its walls.

However, the allegations of patient abuse and neglect continued through the years.

These stories combined with a lack of funding, overcrowding, and outdated facilities resulted in Central State's closure in 1994, ending 146 years of service. It was purchased by the city of Indianapolis and now houses a fire department, several offices, softball and soccer fields, and the barn for the Indianapolis Metropolitan Police Department's mounted patrol.

Yet the saga of Central State does not end with its closure, and some even say that the story just begins there. The energy, anguish, and horrors of those who were abused there, as well as those who spent their lives there in the scarlet fog of insane fury, combine to make Central State one of the most haunted areas in Indianapolis. Many people who drive past it on West Washington Street glance fearfully out their car windows at its menacing black iron fence. Children who live in the adjoining neighborhoods give it wide berth during their nightly play. When darkness creeps across its lawn, marking the setting sun, the ghosts of Central State come alive.

Manifestations and unexplained sounds are reported throughout the grounds of the hospital. Reports of ghostly sightings have been received from administrative workers, groundskeepers, and even residents of the adjoining neighborhoods. Mysterious people have been seen wandering the grounds but, when approached, disappear. More than once, calls have been made to 911 to report that patients appeared to be hanging off the fences of the property, arms outstretched and begging for help. These calls came years after the mental facility had been closed.

Security guards have been called when lights have been seen flickering on and off and "people" are moving around in the empty buildings after closing. When they enter the empty dormitories, many guards have reported seeing robed patients running down the hallways, only to disappear into solid walls. Personnel working late in the administration building have seen both ghostly nurses and patients in the hallways.

Moaning sounds, the rattle of chains, and whispers have all been heard coming from the underground tunnels. On the grounds, under a grove of trees, a long-ago patient was stoned to death by another

patient. Those who dare to walk past this area at night can still hear his screams. One poor soul who has eternal hopes of escape has been seen repeatedly dashing through the gates and out onto Washington Street. He appears to be wearing a white hospital gown and has been seen by both those inside the property and homeowners who live nearby.

The old power house has its share of occurrences, too. A woman's screams have been heard coming from the basement, shadows have been seen darting along the walls, and equipment has turned off and on of its own accord. Especially disturbing is the experience of a worker who fell asleep there and awoke as he was being choked by something unseen. He leapt up and found his neck imprinted with deep red marks.

If tortured, abused patients weren't enough reason for Central State to be populated by ghosts, perhaps the problem is accentuated by the numerous unmarked graves on the property. In July 2003, *The Indianapolis Star* newspaper reported on the graves and how they might affect the usage of the property. Records and fieldwork suggest that the northwest corner where Vermont Street meets Tibbs Avenue is likely the site of a significant cemetery. More human remains were found along the western edge of the property and also around the old pathology building, where hundreds of autopsies were conducted. No one is sure how many unmarked graves may be located on the property. Could those who lay forgotten in the soil, whose remains have been disturbed by stray dogs and gardeners, be responsible for the unrest that surrounds this area?

We first visited the infamous abandoned Central State Mental Hospital in search of possible paranormal activity on a cold November night just after sunset. After studying plans of the buildings, we chose the administration building as our central command center. We unpacked the equipment, coordinated walkie-talkie frequencies, and waited for our guide to unlock the buildings to be investigated.

First stop on our investigation schedule—the dormitories. Numerous paranormal activities had been reported from the dormitories, and we were excited to see what evidence we might be able to turn up. Our guide led us into the drab institutional gray cement-block building and within minutes of stepping onto the first floor, the hairs on the backs of our necks began to stand on end. The first room we entered was a large recreational area with a glassed-in observation

room along the back wall. There was no power in the building so it was dark, cold, and completely silent. The recreation room had olive green industrial couches and a scattering of overturned chairs. Eerily, there were still banners and cards reading “Happy Birthday” on the yellowed walls, with long ago deflated balloons scattered around the dusty floor.

We began taking equipment readings and snapping preliminary digital photos. The area felt unusually cold, even for a Midwestern November. Our digital thermometers were picking up several cold spots, one registering an eight-degree drop and the other a remarkable eighteen-degree drop. Severe temperature drops or cold spots can signal the possible presence of a paranormal entity. There was something or things in the room with us.

We tried to be very quiet, hoping to pick up any unusual sounds. From behind the glass observation area came the very faint rustle of paper and then a small bang as something hit the floor. Everyone turned as one, holding their breath, straining their eyes in the dark. We snapped a series of digital photos in that direction. When the photos were displayed on the viewfinder, several large orbs and a sprinkling of smaller orbs were visible inside the glass room and on the walls surrounding the enclosure. The group decided to separate and do in-depth investigating throughout the floor. A few people stayed in the recreation room, and we, along with two others, headed off down the hallway to the small patient rooms that were on both sides of the long hall.

These cells were tiny, just room enough for a single bed, a sink, and a small dresser. Some rooms still had bed frames or dilapidated cheap wooden dressers. As exciting as the thought of seeing an apparition was, the reality of sitting in the dark in an abandoned insane patient’s room was really scary. But we did it. We closed the metal door with its small glass window and sat in the dark, dank five-by-five-foot cell. We set up the tape recorder and EMF meter. After turning the tape recorder on, we started asking a series of questions, trying to get a response from any spirit that might be around. Suddenly, the EMF meter made a sharp, quick, shrill beep, which scared the daylight out of us and caused our hearts to race. The meter signals when an electromagnetic force has been detected. A

spirit can try to use electromagnetic forces when trying to manifest. What was trying to be seen?

Meanwhile, the other group was getting some fantastic pictures in the recreation room. Orbs and light anomalies were caught in several different locations in the large room. They did some EVP as well and played the tape back after asking their questions. After several minutes of silence, a whispered, drawn out “no” could be heard, followed by more silence and then what sounded like, “We [or maybe you] shouldn’t be here”. Spooky!

After the initial EMF blare, nothing materialized and nothing moved or made its presence known in any other way. But the room made us uneasy, more from imagining what it must have been like to be locked in this tiny room year after year than from any ghostly activity. We were more than ready to go back to the recreation room with the others. As we were coming into the room, a small movement behind the observation glass caught our eyes, and we both took a quick shot with our digital cameras. It could have been a trick of the shadows, but the blurry outline of a figure, perhaps a nurse, appeared on the LCD screen of one of the cameras! We all concluded the dormitory was a very active place but it was getting late and we had many more buildings to investigate. We reluctantly left that building, vowing to come back when we could spend a whole night there, and moved on to the infamous tunnels.

Our guide led us to a nondescript building where we had to climb down filthy, water-soaked concrete steps to the dirt-floor basement. He unlocked an old rusted door and said, “Here we go! Ready to travel underground through miles of tunnels with no escape if any maniacal ghosts come after us?” He was a funny guy. We turned our flashlights on and proceeded single file, stooping several times to clear the low ceiling. We took initial photos, which produced hundreds and hundreds of orbs. This was a dirt floor in an abandoned tunnel; most of these orbs could be attributed to dust, but seeing a picture of hundreds of orbs blocking the path makes a person pause for a second.

We trekked on and on for what seemed like miles, but in reality we were just going between buildings. One of our investigation team members touched something and asked the guide, “What’s this rope that runs horizontally across the tunnel’s wall?” Our guide stopped and



Orbs seen in the underground tunnels of the Central State Mental Hospital

grinned at us. He explained that rope was strung all through the miles of tunnels in case of a power failure or riot. If the staff needed a quick getaway route, they could go to the tunnels, follow the rope, and find their way in the dark to a safe place. As we moved down the tunnel, no shackles were found in the walls but those bringing up the rear kept urging us to go faster. When we finally came out of the tunnel and up into the night air near the area of unmarked graves, they said that all through the tunnel they felt something was following right behind them, something that would occasionally blow cold air past their ears.

During its many years of service, Central State lost many of its patients and workers, and a cemetery was needed on the grounds. But sometime in the early 1970s, it was reported that the graves were moved in order to make room for the construction of additional buildings. Those buildings were never built, and it's thought that only the gravestones were removed and the graves still remain in their original location.

As we walked to the far northwest corner of the property, it was clear where the graveyard had been. Even without grave markers, it

was obvious this ground had once been used for burials. The ground heaved at regular intervals and subtly dipped, marking row upon row of graves. The undulations were obviously manmade. On the night we were there, moles had been busy tunneling through the soft earth. The grass felt soggy beneath our feet, making the walk difficult. We stopped occasionally to take some digital photographs, careful not to exhale at the wrong moment and record a mist caused by our own breath. Almost every photo contained an orb. Our infrared thermometer showed a steady temperature, no sudden dips or spikes.

In the middle of the cemetery area, we attempted to capture some EVP on a handheld tape recorder, but the noise from the adjacent traffic drowned out any ghostly sounds we may have recorded. As we turned off the recorder and began to make our way to the power house, one of the members of our group found what appeared to be a human bone lying in the dirt beside a small mound, upheaved by whatever animal had been tunneling there. It was ivory colored and small, and although none of us had any medical training, we all agreed it looked like a finger or toe bone. We placed it back in the dirt and covered it again, hoping it was somewhere near where it belonged.

The power house is a large, boxy, brick building once used to supply steam heat to the facility's buildings. Train tracks ran directly behind the building, and cars filled with coal were unloaded onto conveyer belts that would whisk it to the basement where it would be burned to produce steam. Trains stopped running on these tracks when the buildings converted to electric heat, but some night watchmen still tell of hearing the rumble of an approaching train and the sudden sound of a conveyer belt clicking on and whirring to life.

In the power house, we set up motion detectors on three different levels of the building and left meters running in strategic spots. The large building now holds mountains of salt used to melt snow and ice on the property. The salt, coupled with dust, made it hard to breath. After getting the equipment in place, the team sat silently in the dark, waiting to hear any sounds. After twenty minutes, nothing had been heard. We started joking to ourselves that the power house was a bust when the sharp blare of the motion detector went off somewhere below us. Hearts racing, two members of the team went to investigate. They could find nothing that might have set off the detector.

This event remains a mystery. No additional activity was noted in this building, so we decided to move on. After exiting, a member said, “I forgot my compass.” He ran back into the building alone. After several minutes he reappeared, pale and shaking. He said, “Did you guys hear a train?” None of us had. He said, “Once I got inside and began walking down the metal stairs to the lower level, I swear the faint sound of a train came from behind those big mountains of salt. It started out very faint but began to get louder and louder. That’s when I decided to leave and forget the compass.” We stepped back into the building but nothing but silence greeted us.

We moved on to the carpentry building. As we approached, a female investigator with psychic ability remarked that she was beginning to feel apprehensive about entering this building. When questioned, she couldn’t quite tell us what she was afraid of; she just knew she did not like this place. But she entered anyway, lagging behind. The first floor consisted of one large room, filled with junk, spider webs, and old parts of machinery scattered here and there. We picked our way through the debris, exploring what the machinery might have been used for, when the sound of wood falling on concrete came from below—one sharp, loud bang. We all stood still, listening. When the sound didn’t occur again, we raced each other to the stairs leading to the basement.



Photographs of Central State Mental Hospital’s old power house reveal orbs as well.

Once down into the long-unused basement, we took our flashlights and looked around for the source of the bang. There were so many things lying on the concrete floor we couldn't be sure what had made the sound. We decided to split up and do some investigating of the basement. It was here in the carpentry building that night watchmen had told of hearing dreadful screams throughout the night. One group headed to the west side, and we headed east. Our group had just gotten into place, taking readings and pictures when the sensitive investigator approached us. She said, "I'm not feeling well. I feel dizzy, hot, and like I am going to pass out." Then suddenly, her knees buckled and she turned a sickly shade of white. When she said, "I can't breathe," two guys rushed to grab her and take her upstairs.

At the same time, we began to feel slightly woozy. We often joke that we are the "antisensitives." We wish we were sensitive, but hard as we try, it just doesn't come to us. So, if we were feeling it, there must be something going on. We took photos and readings, and nothing was showing up. With several members of the team getting physical reactions to the building, we were intrigued as to what might be causing it, but further investigation of this building would have to wait until another time. It was well after midnight, and it was time to go.

We have since returned to Central State several times, visiting different buildings and experimenting with new equipment. The paranormal activity there never disappoints us. A casual walk along the unmarked cemetery turned up several orb pictures. EVP captured in the old autopsy building, which now houses the Indiana Medical Museum, revealed an unexplained whooping sound from a frustrated spirit. During a nocturnal visit to the old dance hall, a musty, discolored crepe-paper streamer floated gracefully, and inexplicably, in the air several minutes before finally plunging to the floor in front of us. Cold spots, sudden unexplainable gusts of wind, and faint whispers are common occurrences.

We continue to receive reports of escaping patients, figures among the trees, and ghostly moans. Whatever the reason, the buildings and grounds of Central State resonate with the sights and sounds of those long past. Nurses and patients continue to walk its hallways, and tormented souls taunt those brave enough to descend into its labyrinths, screaming for their final release.