

The Bethania Mental Hospital of Russia, 1910-1927

Helmut T. Huebert, *Winnipeg*

The Bethania Mental Hospital was a mental care institution established by the Mennonites of Russia in 1910; it was the first and only mental health institution established by Mennonites in Russia, and even all of Europe. Historian P. M. Friesen saw it as an example of mercy and righteousness in the light of the gospel.¹

An early mention of Mennonite care for the handicapped in Russia was made by the Mennonite Teachers' Society (*Mennonitischen Lehrerstandes*) in 1904. It was said that

the representatives of the Mennonite conferences are firmly of the conviction that the poor epileptics, mentally deficient, and physically sick in our churches, to whom for a long time no attention has been paid, finally have to have something done for them. But this can only be successful with a special institution, where side-by-side with a medical specialist there must also be a believing minister.²

From that time on, this was discussed at various conferences, with minister and teacher David Epp of Ekaterinoslav showing special interest.³ Originally, it was hoped that all German-speaking colonists

would participate; then it was narrowed down to Mennonites and Lutherans.⁴ It soon became evident that the Mennonites were the only ones actually prepared to go ahead with the project; so it was that the General Conference (*Allgemeine Bundeskonferenz*) of all the Mennonite churches in Russia was assigned full responsibility.⁵ It was decided that the institution would be financed only by voluntary donations; the ministers and elders promised to encourage members to give, and to have special offerings twice a year.⁶ The name "Bethania" was chosen to signify that it was to be "a quiet place of peace in which the Lord Jesus would gladly dwell and where many would find physical and spiritual help."⁷

A Bethania Commission was established that took responsibility for further development, including general operative principles and a Building Commission. Many of the members of the commissions were either industrialists or estate owners, with a sprinkling of ministers. While funds for the project came from many individuals and churches, the bulk of support actually came from the wealthy members of the commissions. On 1 December 1910, the Bethania Commission consisted of Jakob Jakob Sudermann (Apanlee), Chair; Peter Abraham Koop (Einlage), Vice-Chair; Johann Gerhard Lepp (Schoenwiese), treasurer; Abraham Peter Lepp (Schoenwiese), secretary; and Elder Johann Peter Klassen (Neu-Schoenwiese), Heinrich Jakob Braun (Neu-Halbstadt), Abram Abram Bergmann (Bergmannsthal), and Heinrich Jakob Heinrichs (Kuprijanovka).⁸

The development of Bethania was patterned after Bodelschwing's Bethel Institute in Bielefeld, Germany. This facility offered health care and other advantages to the poor, was concerned with inherited defects, the handicapped, and the "weak ones in body and spirit." Some of the personnel who later served at Bethania received training here. Dr. Isaak Thiessen, later the medical director of Bethania, served there for several years⁹.

Bethania was established on land belonging to the former village of Alt-Kronsweide, along the Dniepr River.¹⁰ Building plans were soon implemented with the "Bethel" unit for women opening on 15 March 1911, and the "Salem" unit for 16 men opening on 20 August 1911.¹¹ Of the 53 patients cared for between 15 August 1911 and 1 December 1912 were 11 acute and 20 chronic mental cases, 8 epileptics, 12 idiots (by definition with IQ under 25, or behavior pattern of a two-year-old), and two with organic nervous disorders. Of these, two were discharged as healed, three were improved, six unchanged, and three died. Eleven patients had no prior schooling, thirty-four had *Dorfschule*, seven had *Zentralschule*, and one had university education.¹² About one third of the patients were admitted without charge, while the others paid 20 rubles per month. Those who did not have sufficient means had to have

a letter substantiating this fact from their church or village; the church or village would then be charged for the upkeep of the patient. People of all faiths were admitted, but Mennonites were given preference.

The actual function of Bethania was at first under the purview of the Bethania Commission, but then also involved medical and other personnel. One of the criteria for medical appointments was that the doctors would work in conjunction with, and adhere to, the principles of the Mennonite faith. Dr. Wilhelm Stieda of Riga was the first appointee as chief of medical staff and presumably met these criteria. His reports regarding the medical status to the end of 1913 certainly would bear this out. Dr. Isaak Thiessen was first approached as a possible staff member. He asked for, and received, help for several years of his studies at Bodelschwingh's Bethel Institute in Bielefeld, then returned to Bethania as assistant to Dr. Stieda in 1913. The exact terms of reference are not known, but it seems that Dr. Thiessen was likely appointed the chief-of-staff from 1914 until Bethania ceased to function in 1927. Peter Schellenberg was the first and very beloved *Hausvater*. Unfortunately, he was murdered during a robbery on 6 February 1912.¹³ His home was then used to house some of the overflow patients. Schellenberg was replaced by Jakob K. Janzen, who together with his wife had a very positive influence. Janzen continued in his position until 1920 and was followed by Johann P. Wiebe. A large number of nurses and other volunteers were involved in the care offered at Bethania. In 1913, Frida Haggist of Brombach and Justine Funk were head nurses. Some nurses were trained in Bielefeld, but a number were also interns from the medical school in Halbstadt.

One of the actual treatments given to the patients seemed to consist of hot and cold baths. Various medications were also given, sleeping pills and nerve pills, although this was obviously not an important feature; one year the total budget for medicines was only 1,000 rubles. Very strict orders were given never to strike a patient, and patients were never to be locked into individual cells. Some judgment was probably used in special situations; when a patient tried to strangle Mrs. Janzen, he was put into a straight-jacket, then given hot and cold baths. Supervision of patients, day and night, was part of the protocol. Occupational therapy in the form of working in the hospital bakery, or garden, or on the 200 dessiatine farm, was part of treatment. Schooling in the form of the four basics was also provided: reading, writing, arithmetic, and Bible stories. At no point is specific mention made of the use of psychotherapy by any of the physicians.

It soon became apparent that the facilities of Bethania needed to be expanded. At one point, the waiting list for admission totalled 53 patients, of whom some had been on the list for two years. In March of 1912, 22 more beds were added to each division, providing a total of

76 rooms. Most of the additional beds would actually have been in the central administrative building.

From 1 December 1912 to 1 December 1913, a total of 88 patients had been treated--52 men and 36 women, with a wide age spread: under 10 years, 2; ages 10 to 20, 19; 20 to 30, 17; 30 to 40, 26; 40 to 50, 8; 50 to 60, 10; 60 to 70 - 3; and 3 over 70. Sixty-one were single patients, twenty-one were married, and six were widowed.

Finances were often an important factor in the reporting about Bethania. Total income (including building fund) by 1 July 1912 was 219,630 rubles. The budget for the year 1912 to 1913 was 37,956.67 rubles. One estate owner, W. W. Schroeder, contributed 40,000 rubles in honor of his wife and daughter. In their homes, two pleasantly furnished rooms were to be kept available for indigent patients. Gifts to Bethania were often in kind.

The onset of World War I in 1914 stopped the rapid development of Bethania, and certainly would have broken its connections with Bodelschwingh's Bethel. The Russian Revolution did not spare Bethania; gangs of robbers quite freely sacked the place, and endangered both patients and staff. With difficulty, the institution continued to function into the 1920s. A report of 1925 summarized much of the activity of Bethania in its first 15 years.¹⁴ There had been 991 patients, of whom 203 had died. The typhus epidemic of 1921 had been especially difficult, both on patients and staff. Five different doctors had served, including Isaak Thiessen, Peter Sawatzky for a time in 1918, Anna Martins from the Crimea, and Dr. E Tavonius of Muntau, as well as 78 male nurses, 86 female nurses, and 353 other staff. A total of 204 patients had been treated in the year 1925, of which 101 were Russian, 87 German (mostly Mennonite), and 16 Jewish.

After the Revolution, Bethania was taken over by the province Ekaterinoslav, and then in 1925 by the federal government. Even so, 4868 rubles were received from Mennonite congregations in 1925. With the building of the Dneprostroy Power Dam, Einlage (Kitchkas) and Bethania had to be evacuated. Dr. E. Tavonius and Dr. Isaak Thiessen suggested that the Mennonite constituency should appeal to the government to transfer the Bethania patients to Halbstadt, where there was a medical school.¹⁵ However, this did not happen.¹⁶ On 9 May 1927, all the patients, including 33 Mennonites, were transferred to a mental hospital in Igren. None of the Mennonite personnel went with them.

Hausvater Jakob Wiebe penned the last report to be heard from Bethania on 11 May 1927: "What we did not think was possible, which was against all our perceptions, against which we struggled with all our resources, has happened. Bethania no longer exists. We, our people, our patients, no longer have Bethania. It has really happened."¹⁷ And thus closed an important chapter in Russian Mennonite life.

Notes

The story of Bethania Mental Hospital of South Russia is well outlined in a number of articles. No attempt has been made to specifically pinpoint each fact covered in these sources. It would entail a needless repetition of material already well documented. The main sources referred to are:

1. *The Story of Bethania*. (Winnipeg, MB: Mennonite Benevolent Society and Bethania Mennonite Personal Care Home Inc, October 1996). This book includes a description and history of Bethania of South Russia, 1911-1927.
2. Cornelius Krahn, *The Mennonite Encyclopedia, Vol. I*, 301-302. The original idea and purpose of the institution is well presented. This article has been updated and included in the *Global Anabaptist Mennonite Encyclopedia Online*.
3. Numerous pictures and descriptions of Bethania are in the two most commonly used books of illustrations from Russia: Gerhard Lohrenz, *Heritage Remembered*, 81, 82, 83; and Walter Quiring and Helen Bartel, *Als Ihre Zeit Erfuellt War*, 49, 50.

End Notes

- ¹ Friesen, P. M., *Die Alt-Evangelische Mennoniten Bruederschaft in Russland (1789-1910)*, (Raduga: Halbstadt, Taurien, 1911), pp 546, 660, 661.
- ² Bethania Report, *Mennonitisches Jahrbuch* (1909) p. 89.
- ³ *Ibid.*, 89.
- ⁴ *Ibid.*, 89.
- ⁵ *Ibid.*, 89-90.
- ⁶ *Ibid.*, 90.
- ⁷ *Ibid.*, 90-91.
- ⁸ *Ibid.*, 91.
- ⁹ *Ibid.*, 91.
- ¹⁰ Heinrich Bergen, *Chortitza Colony Atlas* (Saskatoon: 2004), map 27a, 29.
- ¹¹ *Mennonitisches Jahrbuch*. There were annual reports about Bethania in 1909, 1911, 1912, and 1913. Medical reports were written by Dr. Wilhelm Strieda in 1912 and 1913. The present note is from the report of 1911-1912, pp. 93, 94.
- ¹² *Ibid.*, 100.
- ¹³ *Odessaer Zeitung*, 8 February/March 2, 1912.
- ¹⁴ *Unser Blatt*, February 1926, p 95. The report was written by Johann P. Wiebe, the manager (*hausvater*) at the time.
- ¹⁵ Erich Tavonius, and Isaak Thiessen, Letter to *Unser Blatt, Mennonitische Rundschau*. 8 June 1927, pp. 5, 8.
- ¹⁶ Erich Tavonius, and Isaak Thiessen, Report from Molotschansk in *Unser Blatt*, March 1927, pp. 178-179, includes news about Bethania.
- ¹⁷ Jakob Wiebe, "The Last News from Bethania". Report written 11 May 1927, published in *Unser Blatt* July 1927, p. 304. Numerous additional reports about Bethania can be found in the Mennonite press and the *Odessaer Zeitung* of the time. The principal items of concern seemed to be the membership of the overseeing board, the date of commission meetings, the budget, and building projects, with little mention of the actual psychological treatment given to patients.