OVERVIEW: This nomination proposes to designate the property at 4501 Poplar Street and list it on the Philadelphia Register of Historic Places. The property, which has been subdivided from the main parcel, includes two subsidiary buildings of the Stephen Smith Home, formerly the Home for the Aged and Infirm Colored Persons. Both buildings are abandoned, in very poor condition, and slated for demolition. One was constructed in 1901, the other in 1961. The institution’s main historic buildings were previously demolished.

The nomination contends that the Stephen Smith Home satisfies Criteria for Designation A and J. Under Criteria A and J, the nomination argues that the property housed an important Philadelphia institution that was among the earliest in the United States to provide residential care to elderly African Americans. Additionally, under Criterion A, the nomination contends that the property is significant for its association with Hobart Calvin Jackson, the longtime administrator of the Home for the Aged and Infirm Colored Persons and a national leader in the administration of elderly care. The nomination makes no claims about architecture or style.

In 2015, the staff of the Historical Commission reviewed and rejected as incorrect and incomplete a nomination for the same two buildings. The staff concluded at that time that, although the Home for the Aged and Infirm Colored Persons was undoubtedly historical significant, the two subsidiary buildings proposed for designation, which were constructed later than the institution’s primary buildings and which were abandoned, in very poor condition, and slated for demolition, could not adequately represent the history of the site and did not merit designation as historic.

STAFF RECOMMENDATION: The current nomination is more robust than the nomination rejected in 2015, but it still depends solely on two subsidiary buildings in poor condition to represent the significance of an important institution. The staff offers no recommendation.
1. **ADDRESS OF HISTORIC RESOURCE** *(must comply with an Office of Property Assessment address)*
   - Street address: 4501 Poplar Street
   - Postal code: 19131

2. **NAME OF HISTORIC RESOURCE**
   - Historic Name: The Infirmary of the Home for Aged & Infirm Colored Persons
   - Current Name: The Stephen Smith Home

3. **TYPE OF HISTORIC RESOURCE**
   - Building
   - Structure
   - Site
   - Object

4. **PROPERTY INFORMATION**
   - Condition: [ ] excellent  [ ] good  [ ] fair  [ ] poor  [ ] ruins
   - Occupancy: [ ] occupied  [x] vacant  [ ] under construction  [ ] unknown
   - Current use: NA

5. **BOUNDARY DESCRIPTION**
   *Please attach a narrative description and site/plot plan of the resource’s boundaries.*

6. **DESCRIPTION**
   *Please attach a narrative description and photographs of the resource’s physical appearance, site, setting, and surroundings.*

7. **SIGNIFICANCE**
   *Please attach a narrative Statement of Significance citing the Criteria for Designation the resource satisfies.*
   - Period of Significance (from year to year): 1901-1978
   - Date(s) of construction: Infirmary (1901), Infirmary Addition (1961)
   - Architects: Edwin F. Bertolett (1901), and Bellante and Clauss, Architects (1961)
   - Builders: J.E. & A.L. Pennock
   - Original owner: The Home for Aged & Infirm Colored Persons
   - Significant person: NA
CRITERIA FOR DESIGNATION:
The historic resource satisfies the following criteria for designation (check all that apply):
☒ (a) Has significant character, interest or value as part of the development, heritage or cultural characteristics of the City, Commonwealth or Nation or is associated with the life of a person significant in the past; or,
☐ (b) Is associated with an event of importance to the history of the City, Commonwealth or Nation; or,
☐ (c) Reflects the environment in an era characterized by a distinctive architectural style; or,
☐ (d) Embodies distinguishing characteristics of an architectural style or engineering specimen; or,
☐ (e) Is the work of a designer, architect, landscape architect or designer, or engineer whose work has significantly influenced the historical, architectural, economic, social, or cultural development of the City, Commonwealth or Nation; or,
☐ (f) Contains elements of design, detail, materials or craftsmanship which represent a significant innovation; or,
☐ (g) Is part of or related to a square, park or other distinctive area which should be preserved according to an historic, cultural or architectural motif; or,
☐ (h) Owing to its unique location or singular physical characteristic, represents an established and familiar visual feature of the neighborhood, community or City; or,
☐ (i) Has yielded, or may be likely to yield, information important in pre-history or history; or
☒ (j) Exemplifies the cultural, political, economic, social or historical heritage of the community.

8. MAJOR BIBLIOGRAPHICAL REFERENCES
Please attach a bibliography.

9. NOMINATOR
Organization: University City Historical Society
Author: Oscar Beisert, Architectural Historian
Keeping Society of Philadelphia
Address: 1315 Walnut Street, Suite 320
Philadelphia, Pennsylvania 19107
Telephone: 717.602.5002
Email: keeper@keepingphiladelphia.org
Nominator ☒ is ☐ is not the property owner.

PHC USE ONLY
Date of Receipt: _______________________________________________________________________
☒ Correct-Complete ☐ Incorrect-Incomplete Date: October 28, 2021
Date of Notice Issuance: October 28, 2021
Property Owner at Time of Notice:
Name: Miron Poplar Realty LP
Address: 4400 W. Girard Ave.

City: Philadelphia State: PA Postal Code: 19104
Date(s) Reviewed by the Committee on Historic Designation: _________________________________
Date(s) Reviewed by the Historical Commission: __________________________________________
Date of Final Action: ____________________________________________________________
☒ Designated ☐ Rejected 12/7/18
Nomination

for the

Philadelphia Register of Historic Places

Figure 1. The east and south elevations of the Infirmary and Infirmary Addition. Source: Oscar Beisert, 2021.

The Infirmary

of the

Home for the Aged & Infirm Colored Persons

later known as

The Stephen Smith Home

4501 Poplar Street

Mill Creek, West Philadelphia

Philadelphia, Pennsylvania
5. BOUNDARY DESCRIPTION
The boundary for the subject designation is as follows:

Beginning at a point on the Southwest side of Belmont Ave (100 feet wide), at which point (a measured 165 feet) from a point of intersection of the said Southwest side of Belmont Ave (100 feet wide) and the southeast side of Girard Ave (80 feet wide) to an iron pin. Thence extending South 83° 40’ 31” West a distance of 155.417 feet to a cut cross in the concrete. Thence North 06° 19’ 29” West at a distance of 89.524 feet. Thence North 68° 39’ 09” West at a distance 21.230 feet (along the face of a wall) to a corner of the building. Thence South 21° 20’ 51” West at a distance of 11.723 feet to a corner of the building.

Thence passing through the division line of building South 83° 40’ 31” West 87.098 feet to a point in a brick wall. Thence South 06° 19’ 29” East at a distance of 93.186 feet along the face of aforementioned wall to a point. Thence South 83° 40’ 31” West at a distance of 66.511 feet (this line passing through an abandoned building to be demolished, 3.85 feet from a Northwest corner).

Thence south 06° 19’ 29” East at a distance of 151.813 feet along an alley to the point of intersection with Poplar Street (40 feet wide). Thence North 83° 40’ 31” East at a distance of 129.521 feet to a point.

Thence North 06° 19’ 29” West at a distance of 35 feet to a point. Thence North 83° 40’ 31” East at a distance of 58.75 feet to a point. Thence North 06° 19; 29” West at a distance of 121 feet to a point on the property line of Parcel 2 a point which is a distance of 10.417 feet measured North 83° 40’ 31” East from the cut cross in the concrete which is the first mentioned point and place of beginning.

BRT No. 775087000
Philadelphia Deed Registry No. 065N180034
Figure 3. Top: Looking west at the Stephen Smith Home. Source: Pictometry, Atlas, City of Philadelphia. Figure 4. Bottom: Looking north at the Stephen Smith Home. Source: Pictometry, Atlas, City of Philadelphia.
6. Physical Description
The Infirmary of the Home for the Aged and Infirm Colored Persons (HAICP), now known as the Stephen Smith Home, is the oldest extant portion of this historic institutional complex, which stands at the southwest corner of Girard and Belmont Avenues in the Mill Creek neighborhood of West Philadelphia. Officially located at 4501 Poplar Street, the subject building was constructed in two phases: the Infirmary in 1901 (1901 Infirmary) and the Infirmary Addition in 1961 (1961 Infirmary Addition). The Stephen Smith Home also includes two later buildings that front on Girard and Belmont Avenues that are situated on a separate parcel. Once the site of the original building for the HAICP—known as the Smith and Lang Buildings, a gravel parking lot separates the Infirmary from the remainder of the complex.
The Infirmary (1901)
The 1901 Infirmary is a three-story masonry building with a brownstone façade that was designed by Edwin F. Bertolett. Measuring 55 by 38 feet, the subject building features a two-part roof system, including a rectangular, gable roof at the east and a square, hipped roof to the southwest, both of which are clad in asphalt shingles. Facing Belmont Avenue, the primary (east) elevation is two bays wide with seven apertures. The first floor is dominated by two large round-arched openings, delineated by voussoirs within the archway. The openings feature large mullion
windows, including two double hung windows per opening with a two-part demi lune fanlight. The second and third floors have two single windows per floor, which are sheathed in plywood. A low-slung Dutch or Flemish gable rises above the third floor, featuring two steps on each side leading to a curved parapet that is topped by a decorative finial. The parapet is trimmed with a brownstone capping. At the center of the gable is a round opening that is delineated by a brownstone surround, though the aperture has been infilled.

Figure 8. The primary (east) and north elevations of the 1901 Infirmary. Source: Oscar Beisert, 2021.

The north façade of the subject building faces a gravel parking lot, formerly the site of the original building of the HAICP. From this elevation, the L-shape of the 1901 Infirmary is apparent, the rear component being one bay wider than the front portion. The stepped north elevation features a total of sixteen apertures, including eight doors and eight windows on this side. The first floor openings feature round-arched openings like those on the primary (east) elevation, delineated by distinctive brownstone lintels. The corner that forms the L-shape contains decorative iron fire escapes at the second and third floors. A brownstone chimney stack rises from the interior of the roof structure near the northwest corner of the Infirmary.

The west elevation of the subject building is where the 1961 Infirmary Addition was attached to the original structure.
The south elevation of the 1901 Infirmary faces Poplar Street with a symmetrical fenestration of fifteen apertures, including one door and fourteen windows. Delineated by brownstone voussoirs, the first floor continues the theme of round-arched openings with a central doorway flanked by windows. The door has been replaced and partly infilled, though the original two-part demi lune fanlight remains. The flanking apertures feature large mullion windows, including two double hung windows per opening with a two-part demi lune fanlight. The second and third floors each feature six windows, the central two are coupled with connected stone sills. The flanking pairs of windows are slightly larger, separated with more space than the central windows. All the windows on the second and third floors features lightly colored stone sills and brownstone headers.
**INFIRMARY ADDITION (1961)**

Extending from the west elevation of the original Infirmary, the 1961 Infirmary Addition is a three-story reinforced concrete structure with a buff brick façade that was designed in the *bris soliel* style in 1961 designed by Bellante and Clauss.¹ While the building is largely rectangular in shape, the west elevation features two four-story towers that extend from the main body of the building.

to the north and south, built for a stairway and an elevator shaft respectively. Above the windows on each level is a cantilever concrete awning. Additionally, the subject building features a double-loaded corridor, serving sets of patients’ rooms with common bathrooms. The western portion of the building also featured a nurses’ station and office.

The north side of the 1961 Infirmary Addition faces the parking lot of the building where the Smith and Lang Buildings once stood. The north elevation features a stairway tower with a large vertical window that extends from the first floor to the third, being delineated by decorative metal pieces at each level. Access to the tower is gained by a set of double metal doors shaded by a concrete awning. The north elevation is largely defined by a fenestration of seventy-three double hung single pane windows. The first floor of the north elevation features three sections of windows, being divided into groups of seven, eight, and four ribbon windows further delineated by mullions. A vehicle opening penetrates the building being at the center of the four windows at the west. The second and third feature identical fenestrations.

Like the north, the south elevation is defined by a fenestration of eighty-five double hung, single pane windows. The first-floor features sets of three, seven, eight, and four windows. The vehicle tunnel continues to this elevation. The first-floor fenestration is repeated on the second and third floors, being delineated by character-defining concrete awnings. At the eastern side of this elevation, there is a four-story tower with roof access.

The west elevation of the of the Infirmary Addition is largely obscured by the original Infirmary, though the corner windows and stair tower are visible from this elevation. The east elevation is defined by a fenestration of twelve windows, including four on each floor. The openings feature double hung single pane units.
Figure 13. The south and east elevations of the Infirmary Addition. Source: Oscar Beisert, 2021.
7. STATEMENT OF SIGNIFICANCE
The Infirmary of the Home for Aged and Infirm Colored Persons (HAICP), later known as the Stephen Smith Home, at 4501 Poplar Street in the Mill Creek neighborhood of West Philadelphia comprises a significant historic resource that merits designation by the Philadelphia Historical Commission and inclusion on the Philadelphia Register of Historic Places. The subject property satisfies the following Criteria for Designation, as enumerated in Section 14-1004 of the Philadelphia Code:

a) Has significant character, interest, or value as part of the development, heritage, or cultural characteristics of the City, Commonwealth, or Nation and is associated with the life of a person significant in the past; and

j) Exemplifies the cultural, political, economic, social, or historical heritage of the community.

The period of significance for the Infirmary is from 1901 the time of its construction, to 1978 the year in which longtime HAICP administrator Hobart C. Jackson died.
CRITERIA A & J

The Infirmary is an historic and representative vestige of the legacy, “service and struggles” of the HAICP, a Philadelphia institution that was among the earliest in the United States founded for the residential care of elderly African Americans.2 Established at the close of the Civil War by Stephen Smith (1797-1873), a prominent Black lumber merchant, abolitionist, and philanthropist, HAICP was an integral component of the growing, though thoroughly insufficient, effort to create a more equitable society for both free-born and formerly enslaved African American Philadelphians. The leaders and board members were both prominent African Americans, like William Still (1821-1902), abolitionist and businessman—who served as vice president from 1873 to 1887 and president from 1887 to 1901, and white Quakers like Dillwyn Parrish (1809-1886), a prominent abolitionist and pharmacist. While the HAICP was founded nearly four decades earlier, the Infirmary, completed in 1901, was connected to the Lang Building of the main Smith Building by a pedestrian bridge, providing medical care to its residents. The subject building was designed by Edwin F. Bertolett, “a little-known civil engineer, based in Philadelphia, who completed several projects in Norristown, Pottstown, and Montgomery County.”3

The development of a detached Infirmary is reflective of medical trends, as well as institutional progress, of the period. Because hospitals were still racially segregated, and there were few medical facilities serving African Americans, the presence of a substantial infirmary at HAICP represents the development of a critical resource for the community. While never properly funded nor of a governmental scale, HAICP was still always a step above a purely residential charitable endeavor devoted to more than solely to providing accommodations. The institution’s commitment extended to providing medical care for its aged and infirm occupants.

From the time of its founding, HAICP had official attending physicians, a fact made evident through an 1886 publication on aged homes which listed David Rosell, M.D. (1837-1878), an African American allopath, and prominent Quaker James Tyson, M.D. (1841-1919), a pathologist.

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2 “Home for Aged celebrates centenary of Struggle and Service,” The Philadelphia Inquirer, 19 April 1964, 252.
as physicians.\(^4\) Dr. Rosell served HAICP from 1866 to 1877, his appointment being discontinued “owing to the desire of some of the Board of Managers of adopting homeopathy.” HAICP subscribed to homeopathy from 1877 until 1885, during which time Jessie Thatcher, M.D., a homeopathic doctor, served the institution. HAICP dispensed with homeopathy and Dr. Thatcher in 1885, when “the home’s homeopath was indirectly tarnished during an investigation of cruelty allegedly perpetrated by the matron” of the institution.\(^5\) Returning to allopath, HAICP appointed Samuel Coates Henszey, M.D. (1829-1907) as the head physician in 1885.\(^6\) A graduate of the University of Pennsylvania’s Department of Medicine in 1870, Dr. Henszey practiced medicine for more than thirty years in West Philadelphia.\(^7\) He served HAICP from 1885 to 1901, when the Infirmary was completed, along with William Evans, M.D. (1862-1945).\(^8\) Dr. Evans also graduated from the University of Pennsylvania and was a physician to the Pennsylvania Industrial Home for Blind Women, the Western Home for Poor Children, and HAICP, the vice-chairman of the committee on management of the West Branch of the Y.M.C.A., a Fellow of the College of Physicians, and a member of the Philadelphia County Medical Society, the Pennsylvania State Medical Association, and the Philadelphia Psychiatric Society.\(^9\) Medical care was also provided by doctors like William Still’s daughter, Caroline Still Anderson, M.D. (1848-1919), an educator, physician, social activist, and co-founder of the Berean Manual Training and Industrial School.\(^10\)

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\(^8\) “Dr. Wm. Evans, Physician, Dies,” *The Philadelphia Inquirer*, 20 March 1945, 13.


Figure 18. Top: 1895 Philadelphia Atlas by G.W. Bromley. Source: Greater Philadelphia GeoHistory Network.
Figure 19. Center: 1910 Philadelphia Atlas by G.W. Bromley. Source: Greater Philadelphia GeoHistory Network.
In an interview with Steven Pietzmen, M.D., Medical Historian, in July 2021, he illuminated the historic context of the subject building and its period of development:

“By 1900, even for frail elderly persons, medicine and surgery had advanced to a degree that equipment and dedicated space was required. We now may decry the ‘medicalization’ of old age as such, and no doubt physicians and patients in 1900 understood the limits; but even old persons can get better from acute illnesses, or flare-ups of the chronic, with the help of good nursing care if nothing else. Understanding of germ theory over the previous twenty years clarified ideas of contagion, so it seemed wise to remove a person with a febrile illness from easy contact with other people in a residence, especially older and infirm people. A separate building accomplished this end, and of course provided more space.”

This insight speaks to Dr. Evans’ comment in Thirty-Eighth Annual Report of the Board of Managers of the Home for Aged and Infirm Colored Persons on the new infirmary building, “as a place where the sick can be more efficiently nursed and enjoy the benefits of quiet isolation.”

HAICP’s decision to commission a purpose-built infirmary was a significant development, especially in a community with limited medical resources. As previously stated, it is important is

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11 Steven Peitzman, M.D., Medical Historian. Written interview. 17 July 2021.
to remember that medical facilities were still segregated at this time, and there were few that served the African American community. By the time the subject building was constructed, Philadelphia was home to the Frederick Douglas Memorial Hospital and Mercy Hospital, both of which were always on the backstep due to their unconquerable missions in a society wherein basic medical services were not available to most people without means, especially African Americans. The original Infirmary building served HAICP through the 1950s, and, by then, the institution was subject to many financial and managerial struggles.
To modernize, plans to enlarge the subject building were underway by 1960, at which time fundraisers were held to greatly enlarge the facility. The Federal government had already contributed $150,000. The “$500,000, 50-bed infirmary” addition was completed in 1961.

Philadelphia had always featured one of the largest African American communities in the nation, which included a significant elderly sector. One year prior to the construction of the Infirmary in 1900, the African American population in Philadelphia was recorded at 62,613, of which 2,129 were between the ages of 55 and 64; 1,331 were over the age of 65; and 278 were of an unknown age. Those Black Philadelphians recorded reportedly resided in 12,200 total homes, only 189 of which were owned by the occupant without encumbrances; 198 owned with encumbrances; and 29 owned, though the status of encumbrances was not known. This meant that only .034 percent of Black Philadelphians had equity in their own dwelling, meaning that nearly every person in the community was economically and socially vulnerable to their respective property owners and landlords. This was especially true for the aged and infirm. Even if all 189 homes were owned outright by persons 65 years of age or older, that represents a paltry fourteen percent of that elderly population of Philadelphia at that time.

Home ownership ensured a potential asset and/or a place to live during retirement; however, this served a very small percentage of Black Philadelphia in 1900. As a result, elderly African Americans relied on their extended family for care. This identifies the crucial importance of HAICP as a service to the community, especially when all but .034 percent of elderly African Americans would expect to pay rent for the entirety of their lives. Between 1864 and 1899, HAICP provided a home to roughly 590 aged and infirm African Americans—131 men and 459 women, all of whom were presumably over the age of 60 years, disabled, and lacking in resources to provide for their own housing and nourishment. In 1899, the home had approximately 137 residents—28 men and 109 women. Even with the enlargement of the institution over time, the number of residents remained relatively stagnant. By 1915, there had been a total of 913 residents since its opening, including 215 men and 698 women, at which time HAICP was home to 140 residents—30 men and 110 women. Nearly ten years later, these numbers had risen gradually to 1,226 total residents—259 men and 967 women—with a continued occupancy of 140—30 men and 110 women. These numbers would remain relatively stagnant until the 1960s.

14 The Philadelphia Inquirer Magazine, 10 April 1964.
Again, at the time of its construction, the Infirmary served one of the few institutions dedicated to providing residential care to elderly African Americans in Philadelphia and even in the larger context of Pennsylvania. HAICP was described by W.E.B. Du Bois, in his book *The Philadelphia Negro*, in 1899, as one of the thirteen chief institutions of the city for African Americans, along with the Douglass Hospital and Training School, the Woman’s Exchange and Girls’ Home, three cemetery companies, the Home for the Homeless, the Institute for Colored Youth, the House of Industry, the Raspberry Street schools, the Jones’ School for Girls, the Y.M.C.A., and the University Extension Center. At the time of the Infirmary’s construction, HAICP was the primary, if not the only, old age home for African Americans in Philadelphia. A much smaller old age home that admitted African Americans was the Julia White Priscilla Home, which was established in the early twentieth century at La Mott, Pennsylvania. In 1929, there were 1,268 “Homes for the Aged in the United States,” though only 1,034 were reporting to the Federal government. Of these, there were around fifty-two established for the African Americans, four institutions of which were in Pennsylvania. Philadelphia was the home of two: HAICP and the Shiloh Home for Aged and Infirm Colored Persons at 1122 Lombard Street. In 1937, thirty-six years after the Infirmary was built, a study of the old age homes in Pennsylvania identified 146 such institutions across the Commonwealth, still with only four serving African Americans including HAICP and the Shiloh Home. This was a deplorable truth as the African American population in Philadelphia surged to 250,000 in 1940, at which time facilities providing care for the elderly remained largely segregated by race. While social services provided by the United States Federal government did dramatically increase during the Roosevelt Administration in 1930s, the limited number of charitable institutions described represents the context of elderly care for African Americans as late as the Second World War.

Not only does the subject building inform the timeline of providing social services to African Americans in Philadelphia, but the Infirmary also represents an advancement of critical, nevertheless insufficient, steps to provide combined residential care and medical services to a marginalized community that had long suffered intense abuse and prejudice in American society. While the subject building may not be old enough to represent the entire history of its associated institution, the Infirmary, as a purpose-built medical structure, is a significant vestige of HAICP.

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C-Riter A

In addition to the larger history of the community, the original Infirmary and the 1961 Infirmary Addition is associated with Hobart Calvin Jackson (1916-1978), the longtime administrator of HAICP and a national leader in the administration of old age homes—“considered by many to be the foremost advocate for the aging in the country.”27 The 1961 Infirmary Addition was planned and constructed as a major boon to the institution under Jackson’s leadership, during which time the housing capacity doubled. While largely unknown today, he was a significant Black professional during the mid-twentieth century in Philadelphia, who gained national prominence as an administrator and advocate for the elderly in Philadelphia, the Commonwealth of Pennsylvania, and the United States.28

HISTORIC CONTEXT: A BRIEF BIOGRAPHY OF HOBART CALVIN JACKSON

The son of William F. Jackson and Angeline L. Nichols, Hobart C. Jackson was a native of Lyerly Chato, Georgia.29 Early in his life, the Jacksons moved from Georgia to Chattanooga, Tennessee, where the larger family lived for the remainder of their lives. However, Hobart C. Jackson lived in many different places in his formative years, including Atlanta, Georgia, where he was employed by Atlanta University, and in Oklahoma City, Oklahoma, where he married Elaine L. Bethel.30 In the late 1940s, Hobart C. Jackson arrived at Philadelphia, where he became a business manager at the Frederick Douglass Memorial Hospital. When the Mercy-Douglass Hospital was

formed, he became its first Director of Public Relations.\textsuperscript{31} By 1951, Hobart C. Jackson had leveraged his position at Mercy-Douglass to become the administrator of HAICP. Jackson had a significant career “in hospital and nursing home administration” in the 1950s, 1960s, and 1970s. As administrator, he expanded the institution into what was known as the Stephen Smith Geriatric Center, a later name for the HAICP.\textsuperscript{32} Jackson raised substantial funds, which led to the enlargement of the subject building in 1961.\textsuperscript{33} After this accomplishment, he raised an even larger sum for the construction of the Stephen Smith Towers, a concept that began as early as 1964 and was finally completed between 1966 and 1967.\textsuperscript{34} This development doubled the capacity of HAICP.\textsuperscript{35} These were significant achievements for an institution that served the African American population in the 1960s.

Attesting to his prominence in the field, he served on numerous boards and committees at the local, state, and national levels, being appointed by mayors, governors, and presidents.\textsuperscript{36} By 1952, he was highly active in the United Negro College Fund, of which he was co-chair.\textsuperscript{37} That same year he was appointed by Mayor Joseph S. Clark, Jr. to serve a two-year term on the board of trustees of the Home for the Indigent of Philadelphia.\textsuperscript{38} In 1960, he was appointed by Governor David L. Lawrence to the Pennsylvania State Board of Public Welfare, which he served for many years. In 1968, he was appointed by President Lyndon Baines Johnson to serve on the National Advisory Council on Nursing Home Administration, which advised the Secretary of Health, Education and Welfare (HEW). The National Advisory Council was created to devise “requirements for licensing nursing home administrators” for those institutions offering care to patients “subsidized with Federal funds.”\textsuperscript{39} Under the Nixon Administration, he participated in the White House Conference On Aging in 1971.\textsuperscript{40} He was a co-founder of the National Caucus on the Black Aged, and active in the administration of the American Association of Homes for the Aging and the Mercy-Douglass Memorial Hospital.

Hobart C. Jackson, Sr., was a significant Philadelphian of the past, who contributed to the development and progress of old age homes in Philadelphia, the Commonwealth of Pennsylvania, and the United States.

\textsuperscript{31} Hobart C. and Elaine B. Jackson Papers, 1945-1995, Amistad Research Center, Tulane University.
\textsuperscript{32} “H.C. Jackson of Smith center,” The Philadelphia Inquirer, 13 May 1978, 9.
\textsuperscript{33} “Home for Aged celebrates centenary of Struggle and Service,” The Philadelphia Inquirer, 19 April 1964, 252.
\textsuperscript{35} “Home for Aged celebrates centenary of Struggle and Service,” The Philadelphia Inquirer, 19 April 1964, 252.
\textsuperscript{36} “H.C. Jackson of Smith center,” The Philadelphia Inquirer, 13 May 1978, 9.
\textsuperscript{37} “Workers to Aid In College Drive,” The Philadelphia Inquirer, 6 April 1952, 130.
\textsuperscript{38} Indigent Home Trustees Named, The Philadelphia Inquirer, 25 May 1952, 8.
\textsuperscript{39} “Spot Goes To Jackson,” The Pittsburgh Courier, 20 July 1968, 2.
\textsuperscript{40} Hobart C. and Elaine B. Jackson Papers, 1945-1995, Amistad Research Center, Tulane University.
Organized on September 14, 1864, the Home for Aged and Infirm Colored Persons (HAICP) of Philadelphia began with the procurement of “a small, obscure, three-story dwelling on Front Street (340 South Front Street)—purchased at a cost of $5,000 and accommodating twenty-five inmates.” The founding leaders of the HAICP included both African American and white Quaker Philadelphians commonly associated with providing basic charitable services to the Black community. Though these efforts were insufficient and flawed, the volunteers and employees of HAICP were part of a larger progressive movement led by local luminaries of the mid-nineteenth century that included Black politician, William J. Alston (1800-1876); prominent Quaker activist, Marcellus Balderston (1842-1935); the Black abolitionist and businessman, William Still; Black businessman Jacob Clement White, Sr. (1806-1872), among others. From the time of its establishment, HAICP included the following professional oversight: ministers, auditors, a matron, physicians, lawyers, and a collector. The earliest physicians included David Roseli, M.D., and James Tyson, M.D. The First Annual Meeting took place on January 12, 1865. Susan Silvey, the first resident, was admitted on March 7, 1865. The last resident to enter HAICP at Front Street was

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Rachel Warne. HAICP was officially incorporated on December 2, 1867, which would ultimately lead to the removal to the present site in West Philadelphia.  

Comprised of two legal parcels today, the hallowed ground upon which the property at the southwest corner of Belmont and Girard Avenues was first slated for the care of aged and infirm African Americans in 1869, when “Stephen Smith encouraged by his wife Harriet Smith, donated about one acre of land and in two years presented grounds rents valued at $28,000,” which led to the construction of the original Smith Building. Stephen Smith, along with his wife Harriet Lucinda Lee Smith (1797-1880), enabled the establishment of HAICP and its campus at the subject property in West Philadelphia. It was then adjacent to the former Olive Cemetery, established as an African American burial ground in 1849. Smith “saved the Olive cemetery [sic],” “when it was under the sheriff’s hammer” in 1857; however, it was later sold by HAICP and subsequently partially removed. The cornerstone of the original building was laid on October 13, 1870, and later dedicated on June 29, 1871. The residents were in house by August 7, 1871. Additional buildings followed, the chronology of which is as follows: the Lang Building (ca.1883-84); the original Infirmary “fireproof addition” to the Smith Building at the south; the Boiler House (1888); the Parker Annex (1893-94)—including a chapel; and the Infirmary (1901). The Smith Building

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44 Papers Read before the Lancaster County Historical Society, Friday, January 7, 1921. (Lancaster, Pennsylvania: 1921), 186-87.
was originally the only building, and, as late as 1885, included a lecture room and dining hall on the first floor, as well as individual rooms on each floor. The Lang Building included a kitchen on the first floor, as well as an infirmary on the floors above. The Parker Annex included additional rooms for residents, as well as space for a chapel and other common space. The Infirmary was connected to the Lang and Smith Buildings by a pedestrian bridge. The institution would use these buildings, largely unchanged, until the Infirmary was expanded in 1960-61.

Figure 33. Top: The primary (east) elevation of the Smith Building in the early 1870s just after it was completed. Source: Thirty-Seventh Annual Report of the Board of Managers of the Home for Aged and Infirm Colored Persons. (Philadelphia: Press of the Leeds & Biddle Co., 1901). Figure 34. Bottom: The east and primary (north) elevations of the Parker Annex with the Smith Building to the south (on left) and the spires of Our Mother of Sorrows Roman Catholic Church to the west (on right in the background). Source: Thirteenth Annual Report of the Board of Managers of the Home for Aged and Infirm Colored Persons. (Philadelphia: Castle & Heilman, Printers, 1894), 7.

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After several years of deterioration, HAICP advanced with the installment Hobart C. Jackson, Sr. as its administrator. Under Jackson’s leadership, HAICP was officially renamed the Stephen Smith Home in 1957, though the author will continue to refer to the institution as HAICP for the purpose of clarity. In the 1960s, HAICP underwent two building campaigns to modernize its campus. Between 1960 and 1961, “a $500,000, 50-bed infirmary was completed for handicapped, disabled and chronically-ill residents,” as an addition to the subject building.48 On the occasion of HAICP’s centennial, it was announced that the Stephen Smith Towers would be built upon the site, projected to be “a million-dollar, 10-floor apartment building which will house 160 independent aged persons,” on designs by Stonorov and Haws and Suer, Livingston & Demas, Associated

Architects. By 1966, the plans changed to an 11-story building with 140 units at a cost of $1.5 million. The project was financed by a loan of $1.4 million from the U.S. Department of Housing and Urban Development. The groundbreaking ceremony took place on Saturday, April 30, 1966. Constructed by Carnell Construction Co., the Stephen Smith Towers created 160 units of “independent aged persons.” Roughly ten years later, the state approved loans for two facilities in 1977, one of which included the expansion of the Stephen Smith Home. This ultimately led to the demolition of the Parker Annex and construction of a larger building in its place. Connecting to the north elevation of the original Smith Building, the North Addition spanned the frontage of the property along Girard Avenue, and still stands today. At the time of its construction, it “received approval for a $2,812,939 loan for a $3,942,000 project that will enlarge its capacity from 188 to 228.” With the demolition of the Parker Annex, the construction of the new facility included incorporation of several stained-glass windows from the old chapel.

![Image](image-url)

Figure 37. “Home for Aged celebrates centenary of Struggle and Service,” The Philadelphia Inquirer, 19 April 1964, 252

Figure 38. A site plan of HAICP in 1985. Source: Zoning Archives, City of Philadelphia.

Unfortunately, many of the buildings that comprised the historic campus were demolished over time. After the Parker Annex was demolished, the Boiler House was demolished in 1985. The Smith Building and the Lang Building were both demolished in 2009.

49 “Home for Aged celebrates centenary of Struggle and Service,” The Philadelphia Inquirer, 19 April 1964, 252.
52 “Home for Aged celebrates centenary of Struggle and Service,” The Philadelphia Inquirer, 19 April 1964, 252.
53 “The state approves multimillion dollar loans to two nursing homes.” The Philadelphia Inquirer, 1 November 1976, 12.
Figures 41. Top: The Leamy Mansion, which became a building of Episcopal Hospital in 1852. Source: The Library Company of Philadelphia. Figure 42. Bottom: Episcopal Hospital after the once iconic and immense institutional pile (now largely demolished) was complete. The Leamy Mansion was located to the east of these buildings and is either out of view or has already been demolished. Source: The Historical Society of Pennsylvania.

**Historic Context: The Physical Development of Charitable Institutions and Old Age Homes in Philadelphia**

The development of the subject property to accommodate HAICP represents a significant movement and pattern in the establishment of charitable institutions across the City of Philadelphia. While the major entities like the Pennsylvania Hospital and The Asylum for the Relief of Persons Deprived of Use of Their Reason (later known as Friend’s Hospital) had large institutional facilities in the eighteenth and early-nineteenth centuries, other charities evolved over time, starting in old houses and/or single institutional buildings like HAICP.
Historic Context: The Development of Old Age Homes in Philadelphia

Prior to the development of the federal programs, such as Social Security, private pensions, and retirement plans, the elderly in American society relied upon their families for care and living spaces. This arrangement speaks to a time when greater portions of the population did not live as long, and those who did were supported by extended family structures. As the population of Philadelphia and the United States grew in the nineteenth century and economic conditions particularly for working class people became somewhat precarious with various economic cycles of panics or recessions, the number of elderly people who could not earn a living wage and did not have family members able to support them grew substantially. For people in these conditions the only option was living in the Philadelphia Almshouse at Blockley in West Philadelphia (Figure 43).54

Almshouses were a fixture of every American city in the eighteenth and nineteenth centuries. While they provided the basic sustenance to keep people alive and off the streets, the conditions for living were, at best, less than ideal. This ultimately led to the forcing people to find whatever means possible to avoid that fate. In many cases, almshouses were truly horrible facilities for the sound elderly because they were mixed in with a general population of people with mental, physical, and social disabilities that then had little to no forms of treatment. As the population of the Blockley Almshouse grew, various informal charitable individuals, groups, and organizations volunteered to assist with providing care to the “inmates”—as they were called. During these exchanges many visitors were horrified at the living conditions. Those jarring experiences prompted many to form private charitable organizations to provide a more humane options to the Almshouse. Several of Philadelphia’s nineteenth-century old age homes were born out of such exchanges.55

55 For example, see the following: Carole Haber, “The Old Folks at Home: Development of Institutionalized Care for the Aged in Nineteenth-Century Philadelphia,” Pennsylvania Magazine of History and Biography 51 (1977): 240.
The rapid growth of the elderly population in the United States during the nineteenth century led to a growth of old age homes. The “over-sixty” segment of the American population grew by more than one million people per decade beginning in 1850. In 1920 there were 4.9 million Americans over the age of sixty. Philadelphia responded well to the needs this situation created. By 1903, charitable organizations and institutions in Philadelphia had established approximately sixty-two old age homes, which, in comparison to other large American cities, meant that Philadelphia was the leader in this field of charitable development and progress. At that time, New York City had approximately only forty old age homes and Chicago had nine. By 1923, Boston had approximately seventeen such facilities. Philadelphia far outranked most other cities in establishing and providing a housing standard along with accommodations for the elderly during the first decades of the twentieth century.

Based on a study completed by Theresa R. Snyder, of the sixty-two Philadelphia old age homes in 1903, only 14.5% were founded prior to 1865, which appears to be the reasoning for the timeframe of 1870 to 1929 for her dissertation, this being the primary period when the old age home growth in Philadelphia and when it became a staple of society. Snyder’s work on the history of old age homes in examined all aspects of the institution as a type and included a study of extant buildings that once served as these facilities. Including The Penn Widows’ Asylum (1852), the Forrest Home

58 Haber, “The Old Folks at Home,” 240–257.
(1873) (Figure 47), Hayes Mechanic’s Home (1858), the Friends Boarding Home of the Concord Quarterly Meeting (1891), the Presbyterian Home for Aged Couples and Aged Men (1885), The Home for Aged and Infirm Colored Persons (1864) (Figure 50), the Lutheran Home of Germantown (1858) (Figure 48), the Leamy Home (1903) (Figure 46), the Home for Aged Couples (1876), and the Home for the Aged (1888).

Figure 45. HAICP’s chapel in the Parker Annex. Source: Historical Society of Pennsylvania.

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CREDITS
Sponsored by the University City Historical Society, this nomination was compiled in partnership with volunteers of the Keeping Society of Philadelphia with Oscar Beisert, Architectural Historian and Historic Preservationist, as the primary author with assistance from J.M. Duffin, Archivist and Historian, Kelly E. Wiles, Architectural Historian, and Todd Margasak.

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Figure 46. HAICP’s dining room in the Parker Annex. Source: Historical Society of Pennsylvania.