

THE CHOSEN ONES:
**A REVISIONIST HISTORY OF PATERNALISM, ADMISSIONS, AND MATERNAL AGENCY AT THE LONDON
FOUNDLING HOSPITAL (1739-1869)**

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ABSTRACT:

This dissertation studies the evolution of the London Foundling Hospital's (LFH) admissions process over 130 years (1741-1869), examining archival documents to unveil the dynamics of the institution's operations and the societal forces influencing its policies. The first chapter challenges prevailing narratives of the LFH's founding, debunking the notion of its militaristic origins and highlighting the paternalistic motivation of its early leaders. The second chapter introduces the concept of "institutional paternalism," arguing that the LFH was driven by paternalistic impulses, with implications for understanding charitable institutions more broadly. The third chapter traces the evolution of the LFH's admissions policy, a subject that has never been rigorously explored before. It reveals significant shifts in societal attitudes towards motherhood and philanthropy and the institution's pivotal role within this landscape. The final chapter explores the LFH's transition towards aiding 'respectable' women rather than simply those in dire need and investigates the intersection of institutional power and maternal agency, showcasing the resilience of marginalized women in negotiating the boundaries of Victorian morality. Each chapter is contextualized with a review of relevant historiography, providing essential background for the analysis.

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Introduction

In the bustling streets of nineteenth-century London, amid the chaotic rhythm of daily life, lie forgotten narratives waiting to be uncovered. Among them are the tales of single mothers who sought assistance from the London Foundling Hospital (LFH). Confronted with the double weight of poverty and societal stigma, they found it impossible to raise their children alone after the father of the child absconded.

A poor, unmarried woman in Victorian London faced great challenges if she became pregnant and was deserted by the father. If she kept the baby, she would have struggled to provide for it on a meagre woman's wage. At any rate, it is highly likely that she would have been dismissed from employment once it was discovered that she bore a child out of wedlock, reducing her to utter destitution. Her marriage prospects would also be diminished. If she attempted illegal abortion, she risked death or prosecution for infanticide. The LFH helped these vulnerable mothers by taking the infant into their care. As demand for care exceeded supply, LFH directors selected whose babies they would accept.

Initially, intrigued by the mothers' emergence from obscurity, I embarked on a journey to illuminate their experiences. One avenue involved examining the applications submitted by mothers, utilizing the extensive collection of nineteenth-century LFH petitions housed at the London Metropolitan Archive (LMA). These archival treasures offer a wealth of firsthand accounts but necessitate complementary historical tools and strategies for interpretation. Like many archival materials, the petitions were influenced or dictated by the receivers' expectations and the mothers who applied for help were judged (and commented on) by predominantly middle-class Hospital functionaries. To truly capture the breadth of experience, we must read these documents "against the grain," uncovering the suppressed perspectives that lay beneath the visible narrative.¹

Yet, as I probed deeper into the wide array of nineteenth-century LMA archival records and historical accounts, I realized that to accurately comprehend the experience of LFH mothers, I must transcend the confines of individual narratives and contextualize their struggles within the

¹ "Reading against the grain" is a concept coined by Walter Benjamin, who urged historians to write "against the grain" because marginalized populations left behind few evidentiary trails. Benjamin argued it is the responsibility of historians to navigate and overcome this limitation.

broader framework of societal structures and power dynamics. This broader perspective sheds light on how the LFH and its applicants navigated the social and intellectual landscape that was moulded by the time and place they inhabited. Each successive generation of Hospital Governors had discernible characteristics and attitudes.² This realization led me to explore the genesis of the Hospital in the eighteenth century, when the admission rules in the first sixty years of the charity's operation were starkly different from what followed. Here, amidst the altruistic endeavors of its founders, I discovered a multifaceted exchange of paternalism and the quest for social order in admission policies. The first-come-first-served policy at the inception of the Hospital would undergo many changes over the decades, culminating in a stringent petitioning process that admitted only illegitimate children from well-meaning women who had fallen upon hard times, and these changes can tell us much about the priorities of the people running the charity at the time.

With the dawn of the Victorian era came new challenges: industrialization and urbanization cast a long shadow over the lives of marginalized women, exacerbating their vulnerability and, at the same time, fostering new forms of resistance and resilience. As the winds of change swept across London, developments within the walls of the LFH began to mirror shifting societal norms and ideas. Victorian standards encompassed a strict adherence to moral rectitude, respectability, and traditional gender roles within the family unit. Influenced by religion, particularly evangelical Anglicanism, society's middle-class emphasized social hierarchy and sexual morality. The evolution of the LFH admissions process was a reflection of these broader changes, and it sheds light on both maternal agency and philanthropic endeavour. Tracing the evolution of the essential purpose of the Hospital, its *institutional paternalism*, and the admission policy over 130 years, reveals the intricate, operational mechanisms of the Hospital, while also unveiling the web of social forces that shaped its policies and practices.

There is a substantial body of scholarship on the LFH, ranging from the early, rather celebratory works to more recent studies that offer nuanced critiques and contextual analyses. Early scholarship, such as the works by Ruth K. McClure, often focused on the philanthropic achievements of the hospital, highlighting its role in rescuing and reforming destitute children.

² Following Helen Berry, 'Governors' is capitalized in this dissertation as it emphasizes their formal title, distinguishes their specific role within the London Foundling Hospital, and underscores their historical and institutional significance, adding clarity and consistency to the narrative.

More recent studies, such as those by Alysa Levene and Jessica Sheetz-Nguyen, have expanded the scope to include the Hospital's social, economic, and cultural impacts. These scholars have examined topics like the institution's financial strategies, the experiences of the foundlings, and the broader societal implications of the LFH's practices. So, while there is robust scholarship on the LFH, this dissertation builds on that scholarship by evaluating admissions policy over much a longer sweep of time than most recent studies undertake, offering a comprehensive analysis of how these policies evolved and their impact on the lives of the children and mothers involved.

Research for this dissertation was collected through a combination of direct archival work and remote assistance. The first two research trips to the London Metropolitan Archives (LMA) in the UK were successful in assembling key petition documents crucial to the study. However, a broken ankle and the outbreak of Covid-19 significantly limited access to the archives, necessitating alternative approaches. Moreover, mid-PhD, the LMA announced the digitization of a substantial portion of their collection, including all petitions, making them inaccessible for the last three years of research. Despite these challenges, I managed to continue my research with the help of a remote researcher hired with grant money. Using detailed archival catalogues, the researcher in London retrieved and photographed the required sources for me, ensuring continuity of the research despite the disruptions. I then made one final archival trip to London to cross-reference and complete the collection of primary sources necessary for the dissertation.

The first chapter critically surveys the historiography revolving around the Fiscal-Military-State thesis as it pertains to the LFH, challenging narratives which perpetuate the myth that the LFH was primarily established to bolster Britain's military might. By presenting compelling evidence to the contrary, I aim to rectify a fundamental misrepresentation of the LFH's mission. The second chapter highlights the paternalistic attitudes and actions of the eighteenth-century LFH Governors and, in doing so, highlights their genuine concern for the welfare of the children under their care, drawing upon David Roberts' theoretical framework of paternalism. Emphasizing the benevolent intentions of the founders and their successors, articulating a new term, "institutional paternalism," I contend that Thomas Coram and the Governors were motivated primarily by paternalistic impulses. As well as reading their recorded words, an analysis of the institutional practices and policies shapes our understanding of the underlying beliefs of those who ran the charity. While *institutional paternalism* originated from

my study of the LFH, it has potential relevance to analogous charitable institutions, meriting consideration in further studies.

The third chapter traces the evolution of the LFH's admissions policy from the eighteenth century. Major changes in that policy reflected successive attempts to pursue or retreat from the leaders' paternalist goals, with the early years giving way to a more ambitious approach during the General Reception, when Parliament financed the Hospital on condition that it admit all children in need. When this project failed, a more cautious line was adopted, leading to an forging of new ideas in the 1790s. The Hospital's leaders moved away from the charity's original tenets and applied strict requirements which placed greater emphasis on the behaviour and circumstances of the mothers than the welfare of the children. This development was presaged by decisions made in the 1790s, but the fourth chapter shows that it was only fully established during the first few decades of the nineteenth century. This period witnessed profound shifts in societal attitudes towards female virtue, motherhood, and philanthropic practices, offering insights into the broader social dynamics of the era. The benevolent façade of the LFH belied a harsh reality: as demand for care exceeded supply, the institution's administrators assumed the role of arbiters, choosing which infants would be granted sanctuary or, more to the point, selecting the *mothers* who were deemed most eligible for assistance.

The fourth chapter continues to track the progression of the Hospital's admissions policy. The more rigorous and systematic process indicates that the concept of *institutional paternalism*, with its suggestion of rules and bureaucratic integrity, changed over time. However, the policy that emerged was narrow and unbending, taking in only illegitimate children and aiding 'respectable' women rather than assisting those facing the most urgent need. This tendency underscores the infiltration of an emerging ethos of respectability, undermining the LFH's dedication to its foundational principles. Using the theories of Michel Foucault, Erving Goffman, and Natalie Zemon Davis, I investigate the intersection of institutional power and maternal agency within the LFH, highlighting the ways in which petitioning mothers navigated the new constraints of the Victorian charity. By presenting individual case studies and analyzing the narratives crafted by these women, this last chapter serves as a testament to the resilience and resourcefulness of marginalized women in shaping their own destinies.

Finally, since the work covers such a large span of time, each chapter is preceded by a review of relevant historiography, providing essential context for the ensuing analysis.

Notwithstanding, this dissertation is based less on secondary sources than on the vast resource that is the LFH archive. Leading figures, from Thomas Coram to John Brownlow, left commentaries that provide insights into the *attitudes* of the men who founded and ran the Hospital, and the charity was sufficiently prominent to attract the attention of numerous observers who also recorded their impressions. Much of the evidence related to admissions and apprenticeship is to be found in the Minutes of the General Committee and the *outcomes* of its decisions can be seen in such as the General Registers, the Admission Book, and the Apprenticeship Register. The Hospital's children were voiceless, but the applicants, exclusively mothers by 1815, left abundant evidence in their petitions as to why their children should be admitted to the charity – evidence that necessarily has to be interrogated. These petitions, it will be suggested, speak volumes about the lives of the working-class women in Georgian and Victorian London. They are the principal source in my attempt to show, a little tentatively perhaps, that even desperate mothers forced to surrender their children exercised some agency, shaping their experiences and outcomes within the confines of their circumstances.

Chapter One

Where Did the Boys Go?: Thwarting the Fiscal-Military State Thesis for the London Foundling Hospital

Recent decades have seen a notable shift towards the study of imperial history. This provides a platform to address the experiences of racial and ethnic minorities. This is significant not only in multiracial Britain, of course, but also in North America, where interest in British domestic history is diminishing and attention has moved to a colonial legacy that included developments – westward expansion and southern slavery – that had enormous repercussions in subsequent history. Whereas an older approach to modernity considered the agrarian origins of British capitalism, situating them within changes in the use and ownership of rural lands, the work of a new generation of historians emphasizes imperialism as a pathway to global pre-eminence. John Brewer and Linda Colley especially have explained how Britain came to govern an overseas empire. Their perspectives offer valuable insights into the dynamics of imperial history.³

Brewer's fiscal-military state thesis – to be explored shortly – asserts that eighteenth-century Britain was a modernized state, proficient in taxation and administration. Despite his limited interest in the empire, Brewer's theory has greatly influenced the framework of imperial history. It has highlighted the British state's adeptness at warfare as critical to imperial expansion. Linda Colley's works demonstrate Britain's role in war and empire and its extensive global influence. Brewer's and Colley's books are clearly relevant to any examination of the thesis that the London Foundling Hospital (LFH) was intended to promote imperialist endeavours.

British mercantilism served as the economic foundation that fortified and expanded Britain's empire, fostering trade relationships among its colonies and strengthening its global economic dominance. Famously, the doctrine had repercussions for foreign trade, but for the argument here one must look at its multifarious domestic repercussions. If mercantilism

³ Linda Colley, *Britons: Forging the Nation, 1707-1837* (New Haven and London: Yale University Press, 1992). John Brewer, *The Sinews of Power: war, money and the English state, 1688-1783* (London: Routledge, 1994).

allocated distinct roles to the colonies, it also established the parts that Britons themselves would play, as producers of the goods to be exported to the Empire or as the administrators, soldiers, and sailors who would defend the Empire and protect the trade routes between the colonies and the mother country.

If the LFH operated within a mercantilist framework, its objective would be to furnish resources for the nation's benefit. Mercantilist goals certainly did influence philanthropic efforts during the mid-eighteenth century, when Britons were preoccupied with the global competition posed by France, a state boasting a population four times larger. Mercantilist projects tended to cast children's charities into the role of producing "useful citizens," a concept featured in a number of Hospital documents, which seemingly prompted the apprenticeship of Foundlings in the merchant marine in the 1750s and then in husbandry in the 1760s. I acknowledge this essentially *economic* explanation but aim to refute the related idea that the Hospital had a *military* purpose, to ensure the survival of potential soldiers and sailors. The latter argument paints the founder and later leaders of the Hospital in a jingoistic light that understates the beneficent qualities required to get the institution up and running in the first place (and then to maintain it for over 200 years). Such issues have spurred the questions that frame this thesis: Why did these well-off, elite British men, who became the London Foundling Hospital's "Governors," spend so much time and money on this children's charity? Were they inspired by paternalist philanthropy and religion, or were their intentions more militaristic (preserving poor children to become soldiers), and, in this way, bent on promoting British imperialism? Or were their motivations a jumbled mix of all of the above?

After a thorough investigation of the primary sources for the founding of the institution and the years that followed, this chapter concludes that some historians have been too quick to paint Coram and the LFH Governors as primarily nationalists or imperialists. Coram and the other founders were motivated mainly by paternalism, and one must challenge, in particular, the idea that the charity was established to defend and stock the Empire. This is not to say that different motives did not co-exist, even in the mind of a single individual. As Hayden White has shown, one of the primary risks associated with comparing tropes in history is selective emphasis

on certain aspects, while ignoring others.⁴ An exclusive focus on paternalism as a counter to the fiscal-military state thesis would distort the historical account, masking and simplifying the unique traits of each individual. There are multiple lenses through which to view the motivation of the founding Governors. It is crucial for scholars to handle tropes critically, recognizing the complexities and nuances that make every historical person and event unique. Clearly the mix of motives varied through time and, in particular, the military motive grew stronger in wartime. Whether (or when) this waxing of the military motive shaped Hospital policy is another matter.

In a nutshell, the paternalist, economic, and military perspectives were by no means incompatible; for some Hospital leaders, they could have been mutually reinforcing. Perhaps the mercantilist outlook so boosted philanthropy that a *recharged paternalism* surfaced in the profusion of charities in the eighteenth century.⁵ For the majority of the founders of the LFH, however, it was Christian benevolence – paternalism – that drove their involvement.

This chapter will review the historiographical trends that embrace the popular historical theory of Britain as a fiscal-military state and that stress the patriotic zeal of the Hospital's founders. Then it will use statistical data extracted from the Hospital's archive to rebut the claim that the Hospital was established to help man Britain's military.

Historiography

Barristers Reginald H. Nichols and Francis A. Wray's *The History of the Foundling Hospital* (1935) was written when Nichols was the Secretary of the charity. It is evident that the authors were writing under the zeitgeist of the day: through a pro-Empire lens. The hindsight bias is apparent as they project grand ideas about Empire onto the Hospital's history.⁶ For instance, while most writers claimed it was the sight of poor dead and dying children on London's streets that moved Coram to begin his campaign for the Hospital, Nichols and Wray give this story a jingoistic flavour: "During his long journeys to London the sight of infants

⁴ Hayden White, *Metahistory: The Historical Imagination in Nineteenth-Century Europe* (Baltimore: John Hopkins University Press, 1973), 30-37, 53, 177, 230, 328, 429-431.

⁵ The definition of "paternalism" will be sharpened, appraised, and built upon in the next chapter.

⁶ On the danger of "hindsight bias," see N.J. Roese & K. D. Vohs, "Hindsight Bias," *Perspectives on Psychological Science* 7, no. 5 (2012), 411-426.

abandoned by the wayside became to him as frequent as it was shocking. To a man with his vision of a colonial Empire for Britain this heartless waste of the country's human resources must have seemed both disgraceful and unnecessary."⁷ This alleged disquiet about wasting the country's resources, redolent of mercantilism, suggests an economic motive, and perhaps a military concern, as much as compassion or shock at the sight of human suffering.

A more imperialistic interpretation of Coram comes where Nichols and Wray claim that upon Coram's return to England from the Americas in 1704, "he began to take part in activities which might justify for him the title of being one of the first Empire-builders" and that in 1732, when Coram became a trustee for the settlement of Georgia, he "took a deep interest in the colonization of the province."⁸ Yet Coram's twentieth-century biographer, Dame Gillian Wagner, demonstrates how he:

...had been angered by the way in which [the indigenous people] had been cheated out of their lands by the British and New Englanders...and wanted to make amends...He had always had a concern for the native Indians in America...⁹

This sympathy for the indigenous people of America as evidenced in Coram's letters, is never even hinted at in Nichols's and Wray's seminal text, leaving the reader to interpret him simply as a typical British colonizer, leaving out a large part of the picture painted by his biographer. Similarly, Ruth McClure's definitive history of the London Foundling Hospital in the eighteenth century, *Coram's Children* (1981), attributes Coram's advocacy of a new American colony to his wish to promote "the welfare of discharged soldiers" who would be settled there.¹⁰ There is no suggestion in McClure's account of the founding of the Hospital that Coram and his allies thought about military preparedness, defence of empire, or the fiscal-military state, or that they

⁷ R. H. Nichols and F. A. Wray, *The History of the Foundling Hospital* (Oxford: Oxford University Press, 1935), 13.

⁸ *Ibid.*, 11.

⁹ Gillian Wagner, *Thomas Coram, Gent. 1668-1751* (Woodbridge: The Boydell Press, 2004), 187.

¹⁰ Ruth McClure, *Coram's Children: the London Foundling Hospital in the Eighteenth Century* (New Haven: Yale University Press, 1981), 18-19.

were motivated by anything other than “humanitarianism” and “a tradition of benevolence.”¹¹ For McClure and Wagner, as well as this study, the Hospital was primarily a philanthropic institution devoted more to the protection of children than to the interests of Britain.

Nichols and Wray use only *one* source from the Hospital’s archive – the General Committee minutes. The authors make significant errors through failing to cross-reference the minutes with other sources like the petitions, the Hospital’s Admission Book, or any of the surviving correspondence. Nonetheless, Nichols and Wray are quoted by historians with confidence, oblivious to the “imperial” bias of their work and the intellectual currents of its time. In the preface, Nichols and Wray state that their work is “novel” because they “carefully collated” the huge range of archival sources housed then at the Hospital and they would “preserve” the language of the original documents. This Rankean historical positivism – the idea that the documents would speak for themselves, overlooking how the authors carefully selected which sources they would quote – gives their work an air of authority. It is probably one of the reasons it is so heavily cited, and Nichols and Wray were likely right when they wrote “that this method would prove of greater interest to the reader than a paraphrased, consecutive story.”¹² But historians must be circumspect in their reading of these authors’ interpretative remarks.

Britain seemed to reach its geopolitical apogee in 1763 with the signing of the Treaty of Paris. British power had triumphed in North America, the Caribbean, and India. Interest in Britain’s rise as an imperial power, coupled with Global History’s upswing, prompted historians to re-ask the age-old question: how did Britain, in just two or three generations after the Glorious Revolution, become one of the biggest commercial, imperial, military (mainly naval) and, in the end, territorial European powers? In *The Sinews of Power* (1989), covering the years 1688-1783, John Brewer maintains that, to answer this question, we must rid ourselves of the Whig tradition of seeing Britain as a hands-off “weak state,” and instead see a fine-tuned military, administrative and fiscal apparatus, unmatched by the rest of Europe. The ability of government routinely to raise money to supply troops made “the difference between victory and humiliation.”¹³ The British administration became a real bureaucracy in the Weberian sense:

¹¹ Ibid., vii, 23, 34, 35-6.

¹² Nichols and Wray, *The History of the Foundling Hospital*, vii.

¹³ Brewer, *Sinews of Power*, xvi.

hierarchical, professionalized, relatively qualified, and well-paid.¹⁴ This new and unparalleled form of bureaucracy Brewer calls the “fiscal-military state” (FMS).¹⁵ The people who enabled the Royal Navy’s military might were those who kept the seamen fed, clothed, and paid: the many faceless clerks (Brewer’s “pale and shadowy figures”). “[W]hat emerged was a public fiscal-military apparatus” which reached far down into society.¹⁶ It must be asked whether one particular component of society, charities, and communities like the LFH, played a role in that fiscal-military apparatus. Could the LFH, by preserving the lives of future soldiers and seamen, be seen as part of this effort to prepare Britain for international competition?

This study will show that thoughts of international competition were not evident in the motivation of the Hospital’s founders; any inference that the Hospital functioned as an auxiliary of the FMS is unwarranted. Brewer’s conception of the FMS has made its way into modern narratives of the founding of the Hospital, with Helen Berry’s *Orphans of Empire* (2019) achieving particular success and doing much to disseminate the common fallacy that the Hospital’s purpose was more military than philanthropic. Berry states that founder Thomas Coram was “wedded to the creation of a fiscal-military state” and cites Brewer’s book for her argument that the Hospital’s founders were “fiscal-military state minded.”¹⁷ Berry uses the only first-hand account by a former Foundling brought to the Hospital in the eighteenth century, George King, who eventually fought in the battle of Trafalgar, five years after leaving the Hospital. King’s autobiography frames the entire work and its use in this way implies that the Foundlings were saved to serve the needs of the burgeoning empire, hence the title. King is used as a synecdoche, a figuration standing for the whole structure and purpose of the LFH, riveting it to the fiscal-military state.

Berry’s *Orphans* has many merits, standing out for its child-centred approach and appealing prose. However, when it comes to motives, Berry fails to substantiate her claims. For example, Berry states that Parliament’s 1756 decision to fund the Hospital arose directly from

¹⁴ Ibid., 56.

¹⁵ The most recent state-centred history that concentrates on the FMS thesis is the collection of essays in Lawrence Stone (ed.), *An Imperial State at War: Britain from 1689 to 1815* (London: Routledge, 2013). See also N.A.M. Rodger, “From the ‘military revolution’ to the ‘fiscal-naval state,’” *Journal for Maritime Research* 13: 2 (2011).

¹⁶ Brewer, *Sinews of Power*, 111.

¹⁷ Helen Berry, *Orphans of Empire: The fate of London’s foundlings* (Oxford: Oxford University Press, 2019), 4, 31. The latter page refers to a “twofold mission” involving both “saving souls” and “increasing national prosperity” – but this related to “the British imperial project” and not to the London Foundling Hospital.

concerns about manning the empire, but she neither cites a document nor quotes a scholar, and she fails to address the motives of the Governors, as opposed to Parliament (see below).¹⁸ Nonetheless, this conception of the nationalistic motives for establishing and then extending the Hospital has become a commonplace. Later, I will look closely at Berry's interpretation in order to present a different idea of the Governors' motives.

Jerry White and John Ramsland preceded Berry in attributing patriotic or imperialist motives to the Hospital's leaders. In White's panoptic survey of the Georgian capital, *London, A Great and Monstrous Thing: London in the Eighteenth Century* (2012), Defoe's phrase "a great and monstrous thing" epitomizes London, "a city of extremes."¹⁹ White's text is a social history that explores the transformation of London during the 1700s and looks at various aspects of urban life, including the social, cultural, economic, and political changes that shaped the city. White uses a diverse selection of sources to paint a vivid picture of the experiences of Londoners from different walks of life, highlighting the contrasts between wealth and poverty, order and chaos, and tradition and innovation. However, he, like Berry, seems to fall into the fiscal-military state camp when it comes to the purpose of the LFH. When discussing the Hospital's apprenticeship program he states, "saving a life *for the nation* was of no use if it were to wilt, even perish, at the first step" and that "children saved *for the nation* would not remain workless or impose a future burden on the ratepayers."²⁰ John Ramsland uses similar language, framing his evidence with fiscal-military state tones. In "'Cultivating a Respectful and Modest Demeanour': Children and the Foundling, 1800-1926" (1993), Ramsland concludes that "the Hospital was intended to serve society and the British Empire as efficiently as possible while providing humane care for the unfortunate."²¹ The idea that more than one motive was involved is well expressed here, but Ramsland appears to prioritize the intention to serve the British Empire and to subscribe to the thesis of a fiscal-military state. He continues in similar vein when discussing the boys' uniforms:

¹⁸ Ibid., 90-92.

¹⁹ Jerry White, *A Great and Monstrous Thing: London in the Eighteenth Century* (London: Bodley Head, 2012), xxi.

²⁰ Ibid., 484. Emphasis added.

²¹ John Ramsland, "'Cultivating a Respectful and Modest Demeanour': Children and the Foundling, 1800-1926," *The London Journal* 18, no. 2 (1993), 95, 110.

From the beginning, the inmates [boys] of the Foundling wore brown uniforms trimmed with red. Brown, as McClure pointed out, had been a medieval symbol of poverty and humility. While retaining these colors, the nineteenth century boys' uniform took on a smart, regimental appearance...Clearly, such uniforms could be considered as emblems of occupational destinies as soldiers of the empire...A formal experiment in child socialization was pursued until at least 1926 to serve both the Empire's needs and those of the more privileged classes...²²

It is a big leap from plain uniforms, which all charities used, to "regimental appearance" signifying "occupational destinies as soldiers of the empire." In reality, the Royal Navy has always worn blue and brown did not become the army's colour until uniforms changed to khaki in January 1902.²³ As shown below, except briefly during the Napoleonic Wars, Foundling boys did not enter the military directly until the 1850s.

Linda Colley is more guarded in her assessment. Her often-cited text, *Britons: Forging the Nation, 1707-1837* (1992), explores the ties between nation and identity. Her thesis is that British identity was understood through the dichotomy of the self and the 'other,' suggesting that Britons "came to define themselves as a single people not because of any political or cultural consensus at home, but rather in reaction to the Other beyond their shores."²⁴ It is no surprise, then, that Colley's thesis has an imperial, fiscal-military state feel. Indeed, it is Colley's "Land, Trade, War and Empire" section that features her examination of the LFH. She tends to endorse the economic-nationalistic argument, writing that, "The hospital's avowed aim was mercantilist...to rescue young lives that would otherwise be wasted and render them useful to the state. Once grown...the boys went to sea or worked in husbandry."²⁵ There is a hint of philanthropic motivation, but Colley, at best, seems to balance nationalist and humanitarian motives equally, whereas this dissertation's evidence favours the humanitarian considerations and finds Coram's intentions much less commercial and nationalistic. I will show that, except briefly, most eighteenth-century Foundling boys actually went into trades, not to husbandry or to sea.

²² Ibid., 95-96.

²³ A. E. Haswell Miller, *Vanished Armies: a record of military uniform observed and drawn in various European countries during the years 1908-14* (Oxford and New York: Shire Publications, 2009), 9-18.

²⁴ Colley, *Britons*, 6.

²⁵ Ibid., 58.

Colley goes on to show that, in the decades after Culloden (1746), lots of “patriotic initiatives” caused a “marked increase in the number of voluntary societies established for patriotic purposes.”²⁶ In line with Donna Andrew’s research on British philanthropy (described in the next, “Paternalism” chapter), she suggests that the Jacobite revolts and the wars with a more densely populated France spurred fears that Britain lacked manpower and needed to boost its population to secure the nation.²⁷ She links the mid-century founding of many charitable maternity hospitals “designed to cut the mortality rate among the childbearing and infant poor” to the need for more manpower. Like Helen Berry, she links Parliament’s decision to fund the Hospital in 1756 to the outbreak of the Seven Years War, claiming that population and manpower concerns made it “no accident” that “Parliament began to subsidize the work of Coram’s Foundling Hospital” in order to “enhance the nation’s cannon-fodder.”²⁸ This dissertation will show that, regardless of Parliament’s objective, this was not the LFH Governors’ primary motivation. In fact, neither ‘the nation’, ‘the state,’ nor the ‘war with France’ is mentioned in the General Committee minutes recorded for the decision to apply for government funding in 1755 and 1756 (see below).

Although a depiction of Coram as a man of charity and compassion might be thought to resemble the work of Victorian sentimentalists, hagiographers who created the popular images of the likes of Florence Nightingale and David Livingstone, if the evidence points to such characterization, so be it. Perhaps a more estimable contribution was made by Anglo-Dutch economic historian Charles Wilson, who highlighted the role of Christian benevolence in the charitable endeavours of the eighteenth century. In the 1950s, Wilson questioned the assumption that post-Restoration business elites were resolute in their efforts to dominate global markets over France and Holland and thus put their economic aspirations above all else. Instead, Wilson contends, historians have “underestimated the gravity and oversimplified the complexity of the great debate of the poor,” a debate prompted when, between the Restoration and the conclusion of the Seven Years War, England confronted a crisis of destitution that afflicted anywhere from a quarter to half of the population.²⁹ One of Wilson’s key arguments centers around the notion that

²⁶ Ibid., 85.

²⁷ Ibid., 86. Donna Andrew, *Philanthropy and Police: London Charity in the Eighteenth Century* (Princeton: Princeton University Press, 1989), 7.

²⁸ Colley, *Britons*, 87.

²⁹ Charles Wilson, “The Other Face of Mercantilism,” *Transactions of the Royal Historical Society* 9 (1959), 87-88.

this crisis revealed a compassionate aspect to mercantilism: as the population boomed and urban society expanded, and parochial charity experienced a relative decline, various humanitarian initiatives emerged to assist the poor, including new philanthropic societies genuinely committed to mitigating poverty as well as mobilizing the workforce.³⁰ As Wilson notes, philanthropic objectives encompassed saving infants and souls, mobilizing labour, curbing crime, and addressing anti-social behaviour, but these are not necessarily directly linked to imperial aspirations (although Wilson was writing before the “imperial turn”). The latter left barely a trace in the archive of the Hospital; those who emphasize the Governors’ nationalistic aims have been unable to quote supportive evidence in the primary sources. As for the ‘political economy’ concerns of the founders, these are difficult to prove, despite their occasional reference to the wish to create “useful” citizens. What mattered most was the Christian benevolence of the paternalistic founders of the LFH, the motivation that, as the next chapter shows, is manifest in the papers bequeathed by the Hospital’s founders and early leaders.

Challenging the Fiscal Military State Interpretation of Thomas Coram

John Brewer’s analysis is mistakenly appropriated to foster unsupported claims about the motives behind the founding of the London Foundling Hospital. I track the founders’ motivations, in so far as they can be ascertained, along with the outcomes (effects) – the realization (or not) of those motives – after the Hospital was established.

It is beyond the scope of this study to attempt a comprehensive assessment of the roles of the Governors of the LFH. (A 2025 PhD thesis by Janette Bright of the Institute of Historical Research, University of London will examine many of the individual founding Governors). Nonetheless, as this dissertation took shape in objection to Berry’s claim that Coram was imperially minded and motivated, it is pertinent to investigate his motives for opening the charity. Coram’s motivation emerges from a number of sources.

There is minimal evidence of Coram’s interest in the military benefits of his initiative. In all his three attempts to secure the Charter for the Hospital, including in the third, successful

³⁰ Charles Wilson, *England's Apprenticeship, 1603-1763* (London: Longman, 1971), 352.

petition, Coram claimed he was writing on “behalf of great numbers of Helpless Infants daily exposed to Destruction.”³¹ Such expressions suggest a paternalist motivation consistent with the full picture of Coram the paternalist drawn in the next chapter. The point to be made *here* is that Coram focused on rescuing “poor miserable Infant Children” and preventing “the enormous Abuses and Mischiefs to which they are exposed”³² – and, for the most part, said nothing about producing soldiers and sailors for service in the Empire until the *third* petition, when he realized he had to appeal to the government’s militaristic sentiments. Brief references to the hope that the children would go on “to become useful Members”³³ of the community cannot be considered evidence of a commitment to the military needs of the state. Only in the third petition, in 1739, was there a suggestion of military service, when he added,

...that a Foundation of this kind Established under good Management would not only save the lives of Many of your Majesties Subjects but be a Meanes of rendering them useful to the Publick either in the Sea or Land Service...³⁴

Coram had already convinced most of the signatories to sign his petitions on humanitarian grounds, before, frustrated with the state’s lack of response, he felt compelled to posit the possible military utility of the preserved children. Coram’s strategy was wise; only after he incorporated the boys’ destinies to “Sea or Land Service” did the King grant his signature.³⁵ Coram’s use of such language reflected his understanding that the state was concerned with

³¹ An Account of the Hospital... in which is the Charter, Act Of Parliament, By-Laws and Regulations, London Metropolitan Archive, A/FH/A/01/005/001. The Charter Act of Parliament, By-Laws and Regulations Of The Hospital..., London Metropolitan Archive, A/FH/A/01/005/003. Nichols and Wray confirm that the Charter was penned by Coram himself: “The authors of this recent history of the Hospital, who have studied the copy of this petition, which is in the Hospital’s library, believe that the phraseology indicates that “the petition was Coram’s own work not written for him by his more clerkly friends.” Nichols and Wray, *The History of the Foundling Hospital*, 14.

³² Memorials and Petitions of Captain Coram and others for the Establishment of the Hospital, A/FH/A/01/003, The Ladies Petition of 1735.

³³ Ibid..

³⁴ Coram’s original Charter, “The Royal Charter for the Foundling Hospital,” A/FH/A/01/005/003.

³⁵ Wagner, *Thomas Coram*, 127.

manning its forces in its continual wars with France.³⁶ Away from the political context, in his personal letter to Massachusetts-based Deacon Benjamin Colman, when describing his foundling project, Coram did not talk about the usefulness of the children, but wrote only that he hoped “to live to see the accomplishment of the Designe of Re[s]cuing poor Miserable Exposed Newborn Infants or Foundlings from the Cruelties of their own Parents or Barberous [sic] Nurses.”³⁷ In November 1739, mission accomplished, Coram’s public reference to the King spoke of his “Zeal for the Service of his Majesty, in preserving the Lives of great Numbers of his innocent Subjects” – but the next words indicated that, by the latter, he meant not potential soldiers but the “tender Infants” exposed by their parents.³⁸ Coram’s motivation was clearly humanitarian in nature.

Nichols and Wray describe how the Hospital presented the prospect of sea service in an advertisement placed seven years after the Hospital opened: “It had been publicly advertised in November 1748 that the boys were intended for sea service and husbandry.”³⁹ The advertisement and the decision to place it appear in the General Committee minutes, although the first line is illegible:

... Published five times in the Daily Advertizer to begin on Monday next, three times in the Whitehall Evening Post, and three times in the London Evening Post:

Foundling Hospital November the 30th [inst] 1748

The General Committee for managing the Affairs of the said Hospital give [sic] Notice, That the Boys belonging to the same are Intended for Sea Service or Husbandry when they are of proper Ages and in the meantime the Committee are desirous that they should be employed in some work or manufacture...⁴⁰

³⁶ As Nick Rogers pointed out in 2007, “Britain was at war one in every two years during the long 18th century (1690–1815), two in every three from 1740 onwards...” Nicholas Rogers, “Review of *London’s Marginal Histories*,” *Labour/Le Travail* 60, (2007), 226.

³⁷ Letter from Thomas Coram to Benjamin Colman, 22 Sept. 1738, in *Proceedings of the Massachusetts Historical Society*, LVI, 43. Cited in H.B. Fant, “Picturesque Thomas Coram, Projector of Two Georgias and Father of the London Foundling Hospital,” *The Georgia Historical Quarterly* 32, no. 2 (1948), 100.

³⁸ “The Monthly Chronologer,” *The London Magazine*, November 1739, 627-628. First LFH General Meeting, 20 November 1739.

³⁹ Nichols and Wray, *The History of the Foundling Hospital*, 130.

⁴⁰ Minutes of the General Committee, A/FH/K/02/002, 30 November 1748.

There is no denying that there were occasions where the Hospital stipulated that they *planned* to ready the boys for sea service. But it is a not uncommon tactic to use popular, collective discourse to secure a favourable outcome. As Helen Berry points out, when Coram was petitioning George II in 1737, he used “powerful rhetoric, [and] played upon the elite’s worst fears about the widespread moral and social degradation among the urban poor.”⁴¹ Tapping into this fear and, as has been suggested, playing on the military ambitions of the state, Coram pressed all the right buttons to secure his hospital, after many years of push-back. It is difficult to disentangle what a historical actor says from what is meant. As Gareth Stedman Jones remarks, one cannot decode political language to reach an accurate “material expression of interest” since the discursive structure of political language “conceives and defines interest in the first place.”⁴²

No historian has offered clear-cut evidence that the Foundlings were intended to become fighters for the nation. If the Hospital’s “main purpose” was to supply “manpower for the armed forces abroad in order to further Britain’s imperial mission,” as Berry states, one would expect a large proportion of Foundling boys to have joined the military.⁴³ Whether this was the intention for some, many, or all of the Governors, one can never be certain. But one can measure *effects*. Male “orphans of empire” would have ended up in the Army or Navy, the two main institutions used to defend the Empire. Therefore, one way to determine whether talk of “Sea or Land Service” was mostly discourse to get King, Parliament, and the public on-board with the controversial new charity, or, alternatively, whether the governing body of the Hospital, as a whole, wanted the boys to end up in military service, is to enumerate the destinations of the boys once they left the Hospital.

⁴¹ Berry, *Orphans of Empire*, 38.

⁴² Gareth Stedman Jones, *Languages of Class: Studies in English Working Class History, 1832-1982* (Cambridge: Cambridge University Press, 1983), 22, 24.

⁴³ Berry, *Orphans of Empire*, 4.

Apprenticeships for LFH Boys

The principal primary source for an assessment of the boys' destinations is the London Foundling Hospital Apprenticeship Registers, which began with the first LFH apprenticeships in 1751. This document included the following details: the name, address, and profession of most masters (and the occasional mistress) of apprenticed Foundlings, and basic information about the nature of the work (for example, "to be employed in Household Business") in which the child was to be trained. If the child subsequently moved to another placement, this, too, was recorded in the Apprenticeship Register, though less reliably. Other sources serve as a cross-reference, such as the Hospital's indentures, signed by both masters and children. These were legal documents which outlined the terms of apprenticeship. Also, the Admission Book from 1794 contained minimal information about apprenticeships, generally only the date, which has been cross-referenced with the findings in the Apprenticeship Registers.⁴⁴

The destinations of the London Foundling Hospital boy 'leavers' have been analyzed by examining nine distinct five-year blocks or cohorts, involving a mix of peace and war years. The selected blocks of years are:

1. 1751-1755 Peace
2. 1758-1762 War (Seven Years War)
3. 1770-1774 Peace
4. 1778-1782 War (American War of Independence)
5. 1786-1790 Peace
6. 1793-1797 War (French Revolutionary Wars)
7. 1809-1813 War (Napoleonic Wars)
8. 1833-1837 Peace
9. 1854-1858 War (Crimean War and Indian Mutiny)

⁴⁴ The General Registers (A/FH/A/09/002/001-006, 1741-1950) recorded the admissions of the children, but, unlike the Admission Book, they contain no information about apprenticeships.

The first cohort was largely apprenticed to the merchant marine. The boys who entered the Hospital when it opened in 1741 began to leave it ten years later, in 1751. John Bowles (aged 10), first brought to the Hospital on March 5th 1741, became a servant at Canterbury in Kent in July-August 1751 and the second leaver, James Abercorn (also 10), went to work under his new master's "husbandman" in Devon.⁴⁵ Thereafter, for the next five years, a considerable majority of boys were apprenticed to be merchant seamen. In the 1751-1755 block of years, 24 (77%) of the 31 boy leavers entered the merchant marine (see Figure 1), and in 1756, seven of the nine boy leavers also went there. Most were 12 to 13 years old although the ages ranged from 10 to 13.⁴⁶ Their masters were generally described in the Apprenticeship Register as "Mariner," a small number were merchants, and two boys went to a shipbuilder at Rotherhithe, but all of these boys were "to be employed in the Sea Service."⁴⁷ The General Committee decreed in February 1752 that every apprenticed boy "shall be Bound" to serve until the age of 24 (and every girl until 21, or earlier if she married), according to the terms of the Elizabethan poor law (1601) regarding parish apprentices, and that "wages for the last three years" (21-24) – £5 per annum was the amount settled upon – would be paid to every male apprentice.⁴⁸

⁴⁵ Minutes of the General Committee, A/FH/K/02/003, 24 July, 7, 21 August, 24 December 1751, 8 January 1752. It is possible that Abercorn did not leave until January 1752.

⁴⁶ All ages are approximate because until 1816 admission dates and not dates of birth were recorded.

⁴⁷ Apprenticeship Register, A/FH/A/12/003/001, 1-5. Of course, some did not remain in "the Sea Service" for long; Charles Hillhouse, for example, went to sea in June 1755 but, having fallen prey to "a Disorder" which made him "incapable of going to Sea," he was reassigned to a biscuit-maker in Wapping in 1756. Minutes of the General Committee, A/FH/K/02/005, 7 April 1756.

⁴⁸ Ibid., A/FH/K/02/003, 19 February 1752. The end-of-term age for boys was changed from 24 to 21 in 1767 in accordance with the Hanway Act of that year; before 1767, James Abercorn was the only boy whose term ended at 21. Apprenticeship Register, A/FH/A/12/003/001, 83, 15 July 1767. James Stephen Taylor, *Jonas Hanway, Founder of the Marine Society: Charity and Policy in Eighteenth-Century Britain* (London and Berkeley: Scolar Press, 1985), 112 ("Hanway's Acts").

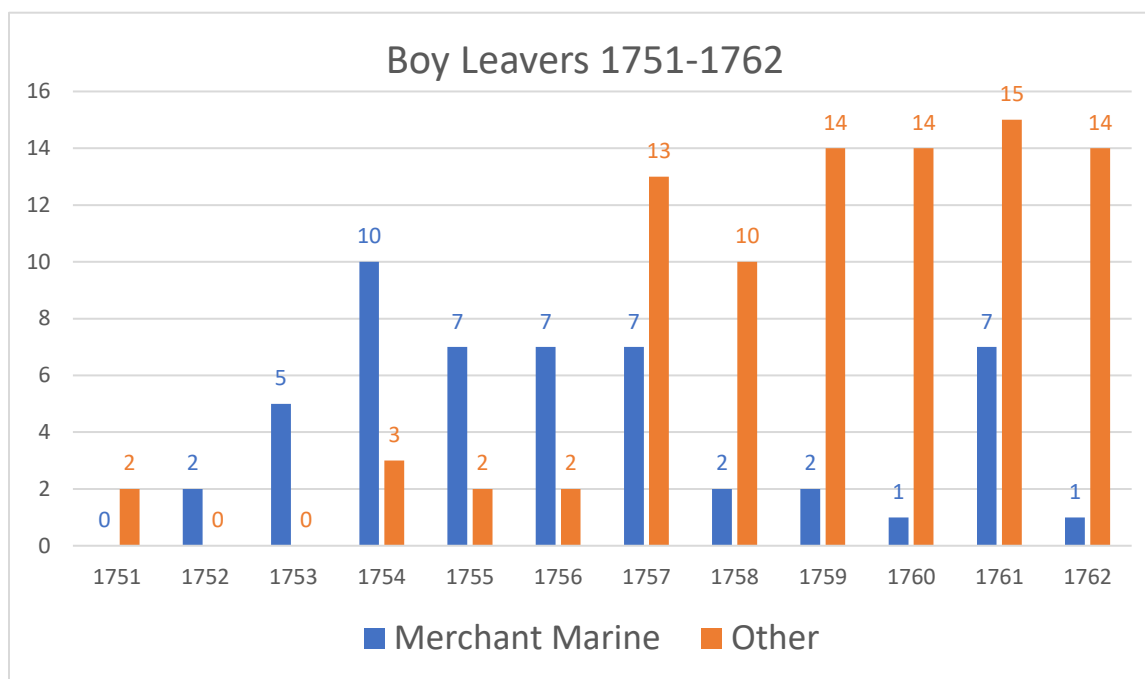


Figure 1: Boy Leavers, 1751-1762 [Cohorts 1 and 2]

Evidently, the Hospital's priority in the 1750s was to create apprenticeships in the merchant marine, which suggests that its leaders were possibly influenced by the economic aspect of mercantilism, and it is possible though by no means certain, that those who sent boys into the merchant marine also had imperial interests in mind. There is no evidence that the Hospital tried to place boys with the Royal Navy. One could argue that a technical difficulty possibly contributed to this turn of events. In March 1756, Lord Harry Paulet applied to take ten boys for the *merchant* marine, but the reason for the Hospital's rejection of this approach possibly sheds light on the failure to send anyone to the Royal Navy. In response to Paulet's application, the General Committee resolved,

That it is the Opinion of this Committee that according to the Act of Parliament for confirming & enlarging the Powers given to this Hospital by His Majesty's Charter, no Children can be placed out but by Indentures of Apprenticeship.⁴⁹

Why Paulet could not satisfy this requirement is beside the point: the Royal Navy did not offer apprenticeships; indentures of apprenticeship were not agreed between the Navy and its boy recruits or their parents. More than half a century would pass before Foundling boys would go directly to the Navy and then it would mean forgoing apprenticeships; indentures of apprenticeship were not signed by the Hospital or the boys who joined up in 1809-13. Why what was done in 1809 could not have been done in the 1750s raises the question of *will*: the Hospital was not prepared in 1756 to sacrifice a principle that it gave up in 1809.⁵⁰

In 1751 and 1752, the years when the fates of the first leavers were decided, the impressively detailed minutes of the Admiralty and the Hospital's General Committee contain no reference to communication between the two bodies.⁵¹ Indeed, the minutes of the General Committee give no indication of an interest in sending boys to the Royal Navy during the entire period between 1751 and 1757. Instead, on July 24th 1751, the Hospital made its only attempt to reach agreement at an institutional level when it approached the East India Company (EIC) to ask if boys could be placed with its merchant fleet:

To The Directors of the Hon[our]able East India Company.
Gentlemen

The General Committee for managing the Affairs of the Hospital for ye Maintenance & Education of Exposed & deserted Young Children take the liberty to acquaint you, That they have under their care a great number of Boys, most of whom are intended to be brought up to the Sea Service, for the general Benefit of this Nation. They therefore would be glad to send three or four of the said Boys in

⁴⁹ Minutes of the General Committee, A/FH/K/02/005, 24 March 1756. Stephen Taylor, in claiming that Lord Harry Paulet was allowed to take ten boys for the merchant marine in March 1756, failed to notice that the General Committee vetoed the initiative on 24 March 1756. Taylor, *Jonas Hanway*, 69.

⁵⁰ The perception that the merchant marine and the Royal Navy were complementary – the latter recruited men from the civilian service, often by impressment, the Navy protected merchant convoys in wartime, and merchant vessels supplied the Royal Navy – did not alter the fact that they were two distinct entities.

⁵¹ Minute Book of the Board of Admiralty, National Archives, ADM 3/62 (June 1750-January 1753). Minutes of the General Committee, A/FH/K/02/003 (1749-52) and 004 (1752-55).

the first Ships that shall sail for the East Indies; and desire the Directors of the said Company will be pleased to recommend to their Captains the taking them [sic].⁵²

The EIC Court of Directors rebuffed the offer, pointing out that the manning of “the East India Ships” was “entirely managed” by the owners whose vessels the Company hired.⁵³ As a result, the Hospital looked, successfully, to other mariners in the following years.

That no boy who left the Hospital in the 1750s joined either the Royal Navy or the Army must be considered problematical for those who have contended that one of the main purposes of the Hospital was to ensure a ready supply of recruits for the armed forces.⁵⁴ Towards the end of *Orphans*, Berry does concede that most Foundling boys did not in fact serve in the military. In an impressive analysis of the eighteenth-century Apprenticeship Register (involving about 6,000 children), she recognizes that these children were not actually sent to soldiering or the Navy. Instead, she finds, almost all were apprenticed within England, to a wide variety of industries, with many in close proximity to the Hospital (in London and Middlesex). Her chapter entitled “Finding Work,” lists, in great detail, where both male and female Foundlings went from 1767 to 1771. The large majority of these came in during the General Reception (1756-60), when thousands of children poured into the Hospital. Berry found that “nearly half of all first apprenticeships issued (affecting 1,562 boys and 1,076 girls) were to various kinds of manufacturing and trade. Of these, over a third of the children were sent to work in clothing and textile manufacture.”⁵⁵ Interestingly, there is no discussion anywhere in the “Finding Work” chapter of *Orphans* that considers the 1750s phenomenon of sending Foundlings to the merchant marine.

Berry does confront the problem she created for herself:

⁵² Ibid., A/FH/K/02/003, 24 July 1751.

⁵³ Ibid., 27 November 1751.

⁵⁴ In the epilogue of *Orphans of Empire*, Berry briefly mentions the concept of the “internal empire” in an attempt to show how imperial ambitions shaped domestic policies within the British Isles, akin to those in overseas colonies, but this idea is not explored in depth. Berry, *Orphans of Empire*, 277.

⁵⁵ Ibid., 169.

Considering the original enterprise of the Foundling Hospital's founder and Governors, and many of their patrons, was to provide manpower for soldiering and sea service, it is perhaps surprising that relatively few foundling apprenticeships were issued to merchants, mariners, or captains.⁵⁶

She does not resolve this tension between her findings and her thesis, but cites the example of foundling John East, who was "sent to sea" via apprenticeship to merchant James Menbey at age 10:

the kind of useful labour envisaged by the Foundling Hospital's founder and benefactors, although as we have now seen, his experience was far from typical considering how few foundlings, boys especially, went to sea compared to those who were sent to rural areas to toil on the land.⁵⁷

Perhaps, then, Berry's thesis simply needed some qualification regarding the *discourse* the founding Governors used to get the public and patrons on board with their new charity (both financially and politically), contrasted with what they *did* once the Hospital was up and running. There is no explanation of the non-military outcomes of the first apprenticeships in the 1750s, as well as during the Seven Years War period.

The contrast between the Hospital and the Marine Society is instructive. The latter, formed in 1756, initially recruited older boys for service in the Royal Navy. Berry connects the LFH to the Marine Society citing Jonas Hanway, who was a governor of both institutions. It is hard to imagine that, with war against France beginning in 1756, and Hanway leading the Marine Society's extraordinarily fruitful recruitment drive, there was no interest at the LFH in helping to supply the recruits that the country needed. But there is no extant evidence of such interest and it was not sufficient to alter the fact that, unlike the Marine Society, the Hospital did *not* provide military recruits, despite the fact Parliament likely awarded the Hospital funding from 1756-60 with the intention that the Hospital would augment Britain's military forces. This parliamentary

⁵⁶ Ibid., 173

⁵⁷ Ibid..

grant, Hanway's tenure as Governor, and the Seven Years' War all began in 1756, yet significant numbers of Foundlings *stopped* going to the merchant marine in 1757, when it dropped off (except in 1761; see cohort 2, 1758-62, in Figure 1 above.) And, as mentioned above, no Foundlings went into the Royal Navy until near the end of the Napoleonic Wars, a fact that might have peeved King George II and his ministers.

Since Hanway was only Governor for the last year and a half in which the Hospital actually sent boys to the merchant marine, the link between him and any suggestion of naval ambitions at the LFH is weak. In fact, the Hospital's apprenticeship records indicate that Foundlings were "sent wherever there were labour shortages"⁵⁸ – including the Yorkshire countryside, where many, especially in the 1760s, went into husbandry; they helped fill farm-labour gaps created by the industrial revolution's draw of rural people into flourishing textile towns. Again, this placement may have reflected the economic perspective of mercantilists but it says nothing about military concerns. Foundlings were also apprenticed into both traditional and factory manufacturing as well as domestic service. Thus, as historian Jane Humphries points out in her review of *Orphans*, "foundlings were more likely to become cogs in the economic wheels of Empire than to feature on its frontiers or sail on its oceans."⁵⁹

It was not as if young boys were never recruited by the British military. The Army had traditionally taken some as drummers, fifers, and drivers (who cared for the horses). There was a significant escalation when the Act of Enlistment under Queen Anne in 1702 caused "vast numbers of boys" to be sent to the Army by their parishes. The Royal Military Academy was founded at Woolwich in 1741 to train young soldiers, who began at "12 to 14 years old," and in the war-torn middle decades of the century, though overall numbers are not available, Britain probably enlisted more boys than any other European country, according to A.W. Cockerill's estimation.⁶⁰ Similarly, boys had always gone to sea, and the Royal Navy officially endorsed the practice just a few years before the start of the Seven Years War: "'Boy' became an official rating in 1749," naval historian Grant Uden has written. "The term covered youngsters from about twelve to seventeen years of age who were either going to be trained as seamen or were bound

⁵⁸ Ibid., 174.

⁵⁹ Jane Humphries, "Review of *Orphans of Empire: The Fate of London's Foundlings*, by Helen Berry," *Journal of Interdisciplinary History* 51, no. 1 (2020), 140.

⁶⁰ Art W. Cockerill, *Sons of the Brave: the Story of Boy Soldiers* (London: Leo Cooper in association with Secker & Warburg, 1984), 36-7, 49-50.

for the quarterdeck as officers. Many served as officers' servants."⁶¹ Roland Pietsch argues that the Navy did not sustain a strong interest in young recruits, that "there was no centrally co-ordinated recruitment of boys by the Navy."⁶² But vacancies as boy-servants of Navy officers existed in substantial numbers, the age limit was 13, and some captains took even younger boys.⁶³ Even in peacetime, the Navy was a voracious employer. N.A.M. Rodger has shown that "nearly a fifth of the total British naval expenditure over the long eighteenth century was incurred in peacetime."⁶⁴ The fact that *no* Foundling boy went to the military in the early years suggests that the Hospital entertained no such ambition.

Art Cockerill, referring to mid-eighteenth-century boy soldiers, pictured "young infantry drummers in their three-cornered hats, red coats and facings, white breeches, and toting brightly-painted drums." In the Inniskillings in the 1750s, the drummers were "expensively outfitted and accoutred: caps, cloaks, breeches, boots, breastplate and cruppers, gloves... Dressed in yellow coats with a scarlet lining ornamented with silver lace and a blue striped cuff, waistbands and scarlet breeches, the drummers were a striking sight..."⁶⁵ These colourful images should be borne in mind when considering an item in the Foundling Museum's *Fighting Talk* exhibition of 2021-2022, where a boy's mainly brown wool-serge uniform was displayed with the comment that it "is quite military in style, reflecting that one of the arguments for establishing the London Foundling Hospital is to save the boys to fight for their country." Thus, the boys' uniform, which does have similarities to twentieth-century khaki, was used to suggest a military connection in a time when the Army's uniforms could hardly have been more different from the Foundlings' plain and unadorned attire. In reality, Hospital boys did not go to the Army until over a century after the Hospital opened.

As John Brewer points out, between 1680 and 1780 the British army and navy trebled in size, partly as a result of fighting five major wars. "In peacetime it was presumed that war was

⁶¹ Grant Uden, *British Ships and Seamen, Book Two: The Seamen* (London: MacMillan, 1969), 41.

⁶² Roland W. W. Pietsch, "Ships' Boys and Charity in the Mid-Eighteenth Century: The London Marine Society, 1756-1772" (Unpublished PhD thesis, University of London, 2003), 32.

⁶³ *Ibid.*, 152.

⁶⁴ Rodger, "From the 'military revolution' to the 'fiscal-naval state'," 123. Rodger calculates that a total of £112,329,347 over the 52 peacetime years between 1689 and 1815 was spent, out of a total of £606,609,397 (calculated from House of Commons Sessional Papers 1868-89 (366), XXV, 1177-9).

⁶⁵ Cockerill, *Sons of the Brave*, 47, 55.

imminent or, at the very least, that the government should act as if it were so.”⁶⁶ Even so, the fifty boys who “went to sea” only did so via the merchant marine from 1751 to 1762. And the idea that the merchant marine was a suitable destination for the Foundlings was remarkably short-lived. With the outbreak of the Seven Years War in 1756, one might expect that the number of boys going to the merchant fleet (or the Royal Navy) would have grown – that wartime priorities would have prompted increasing demand for seamen and stimulated recruitment to the merchant marine when, in 1757-58, its pay rates reached a new peak of 70 shillings a month.⁶⁷ Instead, in 1758-62 (cohort 2), war years, only 13 (16%) of the 81 boy leavers went to merchant ships (see Figure 1); 68 (84%) went to other forms of

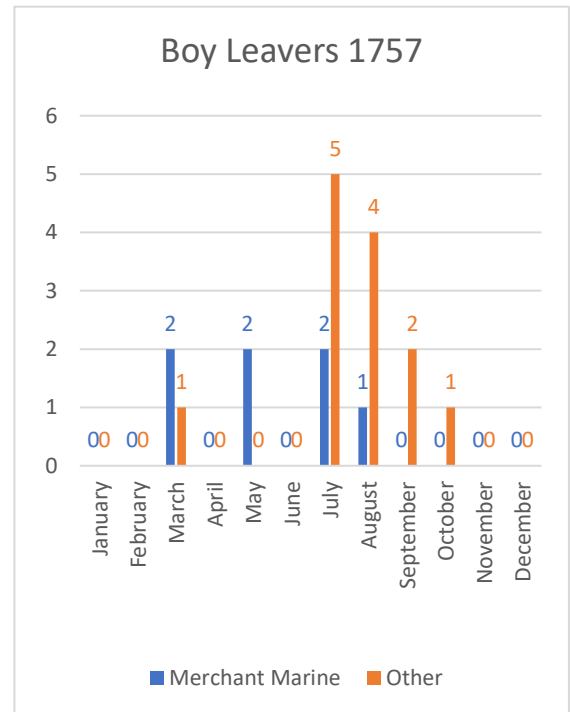


Figure 2: Boy Leavers, 1757

employment, training as watchmakers, peruke-makers, bakers, gardeners and farmers, bookbinders, stocking pressers, cheesemongers, trunk-makers, goldsmiths, jewellers, shoemakers, clothiers, comb-makers, blacksmiths, weavers, brickmakers, pastry cooks, chandlers, button-makers, tailors and milliners, vintners, butchers, and shopkeepers – a vast array of occupations firmly based on dry land and far indeed from any form of military service. As it turns out, the so-called “Orphans of Empire” made wigs and shoes and sold wine and cheese.

The turning point, from majority merchant marine to majority other trades, came in 1757. Specifically, in July, as shown in Figure 2, after which the number entering the merchant service was miniscule – except in 1761, when seven went there and 15 (68%) entered other occupations.⁶⁸ The Hospital’s records contain no explanation of the turning away from the

⁶⁶ Brewer, *Sinews of Power*, 23.

⁶⁷ Michael Duffy, “The Foundations of British Naval Power,” in Michael Duffy, ed., *The Military Revolution and the State 1500-1800* (Exeter: University of Exeter, 1980), 68.

⁶⁸ It is possible that one of these boys, Solomon Conby, joined the Royal Navy. He was apprenticed to a lieutenant “in his Majesty’s Navy” on 25 November 1761, but the Royal Navy did not grant *apprenticeships* and the rest of the description (“to be employed in the Sea Service” – not his Majesty’s Navy – and “to have of his Master £5 a year for

merchant marine in 1757. The minutes of the General Committee (and those of the General Court) contain no evidence of any discussion of the question. Explanation of the change must, therefore, be tentative and speculative.

It seems likely that the beginning of the General Reception on June 2nd 1756, when the Hospital accepted every baby brought to its doors, played a role. The annual intake of babies went from 92 per annum (averaged over the Hospital's first fifteen years) to 117 on June 2nd 1756, 1,738 between June 2nd and December 31st 1756, and 3,835 in 1757.⁶⁹ The massive number of children who, in the near future, would have to be placed in jobs forced the Governors to expand their search for apprenticeships. Even if this pressure was not felt immediately after 1756 – only one child who was part of the expanded intake left before 1760⁷⁰ – the dimensions of the future problem must have been evident. The departing Foundlings would have to be found careers in all walks of society. This does not explain the *absolute* decline in the number entering the merchant marine, but the shift in mental outlook, an acceptance of the need to look beyond that destination, is not difficult to imagine.⁷¹

It is possible that the broadening of the education provided at the Hospital influenced the Governors' thinking. Literate and numerate boys might pursue careers considered more estimable than one in the merchant marine, which drew a large part of its personnel from the lowest elements in society. On the other hand, it may be doubted whether the limited instruction at that time sufficed for this effect. It was only a little earlier, in July 1754, that the General Committee had resolved to teach the children to read but it decided against teaching them to write until two years later (when, unprecedented for the time, the Governors hired a schoolmistress for girls over six years of age in order "to teach them to read and write..." The salary was £10 per annum).⁷²

each of the last 3 years' until 24)" is suggestive of the merchant marine. Apprenticeship Register, A/FH/A/12/003/001, 252.

⁶⁹ Nichols and Wray, *The History of the Foundling Hospital*, 46, 52-54. The total for June to December 1756 (1,738) exceeded that of the previous 15 years (1,384).

⁷⁰ Rowland White, no. 5,541, admitted on 24 August 1757, went to a shoemaker on 31 March 1759.

⁷¹ Gillian Wagner is clear on how the General Reception forced the Governors to look to other forms of apprenticeship, alternatives to going to sea, but does not relate this to the change in 1757. Wagner, *Thomas Coram*, 194.

⁷² Minutes of the General Committee, A/FH/K/02/004, 24 July 1754. Sub-Committee Minutes, A/FH/A/03/005/002, 1756. Nichols and Wray, *The History of the Foundling Hospital*, 136.

The impact of the Marine Society, established in 1756, seems an even less likely explanation of the turn away from merchant marine careers. Jonas Hanway formed the Marine Society to recruit and clothe young men for the Royal Navy in the worldwide struggle with France and her allies – “My voice is for war; *for war in earnest*” – in the Seven Years War. He wanted to send boys into the Navy as officers’ servants so that their elders, the existing servants, could be moved more quickly into training as rated seamen.⁷³ The Society proceeded to recruit thousands of boys to serve on “the king’s ships,” beginning with 371 in 1756, 1,774 in 1757, 831 in 1758, and 709 in 1759.⁷⁴ Had it recruited for the merchant fleet as well, the latter would have had an alternative source of recruits, potentially affecting the prospects of the Foundling’s boys – but it was only after the War (in 1764, but on a more sustained basis from 1769) that the Society sent boys to “the merchant service in general” to be apprenticed as merchant seamen.⁷⁵ Despite Britain’s continual involvement in war, during the Seven Years’ War, and the formation of a new charity to help fuel Britain’s imperial ambitions, the Hospital was not similarly engaged. The 1750s saw no military outcomes for the Foundling boys and the Hospital abandoned the practice of sending boys to the merchant marine before the end of the War. This lends little support to the idea that the Hospital was a feeder-institution for forces dedicated to defending and expanding the Empire.

One can ask if the General Reception of 1756-60, an astonishing departure in Hospital procedure, was motivated in any way by the desire to ensure a supply of recruits to Britain’s military. Berry suggested that it was – the Hospital “petitioned parliament for a public subsidy to enable them to meet public anxiety that the nation would be unable to muster enough able-

⁷³ [Jonas Hanway], *A letter from a Member of the Marine Society. Shewing the Piety, Generosity, and Utility of their Design, with respect to the Sea-Service, at this important Crisis. Addressed To All True Friends Of Their Country* (London, 1757), 4-5, 7-8. The Royal Navy’s manpower needs at this time are well described in Pietsch, “Ships’ Boys and Youth Culture in Eighteenth-Century Britain,” 24-25, and the idea that the boy-servants themselves were “trainee sailors” is developed in *ibid.*, 239-48.

⁷⁴ Anonymous, *The Origins, Progress, and Present State of the Marine Society* (London: Marine Society, 1770), 12. Pietsch found that the Marine Society sent 1,580 boys to the Royal Navy in its first year (1756-57), 2,797 by the end of its second, and 4,787 by the end of 1762, but he thinks that there was some double-counting. Roland Pietsch, “Ships’ Boys and Youth Culture in Eighteenth-Century Britain: The Navy Recruits of the London Marine Society,” *The Northern Mariner* 14:4 (2004): 123, 125, 133.

⁷⁵ Anonymous, *The Origins, Progress, and Present State of the Marine Society*, 15. Pietsch, “Ships’ Boys and Charity in the Mid-Eighteenth Century,” 259-61.

bodied troops to fight the French” – but failed to cite her sources for the claim.⁷⁶ On October 1st 1755, the General Court initiated the Hospital’s application to Parliament for funds: it resolved that “it be referred to the Genl. Committee to consider of [*sic*] some Methods to make this Charity more extensive; and to make such Applications for that Purpose as they shall think proper.”⁷⁷ The declared objective was “to make this Charity more extensive,” but the motivation behind the idea to expand was not spelt out. The General Committee, meeting on January 28th 1756, set up “a Special Committee” to consider the issue.⁷⁸ Then the minutes for the General Committee of February 11th included its Humble Petition to “the Hon[our]able The Commons of Great Britain assembled.” This second document *did* shed light on the question of motivation. The Hospital, it said, had “maintained & educated the Children under their Care, with the utmost Frugality, in such a Manner that they might become useful Servants to the Publick, and have placed out some of the Boys to the Sea Service, and the Girls as Servants in private Families.”⁷⁹ But it must be pointed out that this document was designed to appeal to the presumed priorities of MPs, to persuade them to provide funding – and one might argue, perhaps tendentiously, that military motivation is no more evident in sending “some of the Boys to the Sea” (the merchant marine exclusively at this time) than the placing of “the Girls as Servants in private Families.” Seeing that Coram managed to get the Charter granted by convincing the Hanoverian regime of the Hospital’s military potential, perhaps the Governors used a similar strategy to persuade Parliament and George II’s ministry to fund the project in 1756. Same audience, same appeal, and yet the same contrary outcome: no Foundling boys went to the military.

Other evidence from the same meeting in February 1756 points to alternative motives. The contention that “many proper Objects have, from Time to Time, been brought to your Petitioners, the greatest part of which they, from the Insufficiency of their Income, could not admit, to their great Concern, and the Detriment of the Publick” indicates that the “great Concern” about the petitioners was the number of children (“proper Objects”) they had had to turn away.⁸⁰ On March 31st 1756, after approving the application for Parliamentary funding of “the further Extension of

⁷⁶ Berry, *Orphans of Empire*, 90. In a later passage, Berry attributed to *Parliament* the “express intention of building up Britain’s military forces at a time of national crisis.” *Ibid.*, 174.

⁷⁷ Minutes of the General Court, A/FH/K/01/001, 1 October 1755.

⁷⁸ Minutes of the General Committee, A/FH/K/02/005, 28 January 1756.

⁷⁹ *Ibid.*, 11 February 1756.

⁸⁰ *Ibid.*.

this Charity,” the General Court considered the Hospital’s accounts for 1755. The income for the year was £7439.11.10, of which £27.4.11 remained unspent, with £13.17.4 of that sum remaining in the Treasurer’s hands and £13.7.7 in the bank, indicating that the Hospital was fully stretched but solvent.⁸¹ There followed in the minutes a brief history of the Hospital, a sort of manifesto, where the financial prognosis was less positive. The Hospital’s income was deemed “very insufficient to answer the present necessary Expenses.” As part of the income “depends on casual Benefactions, the Gov[erno]rs think it prudential, in the present Circumstances of the Hospital, to limit the Number of Child[re]n taken in.”⁸² Nichols and Wray, in their history of the Hospital, attributed the application to Parliament to the Hospital’s lacking sufficient funds to admit “all children offered to them,” which had “always been the goal of the majority of Governors,” but the authors do not relate this move to the need to furnish military recruits, and Ruth McClure wrote in the same vein.⁸³ The Governors concluded:

However as the good Consequences which must accrue to the Publick by taking in greater Numbers are so apparent, it is hoped the Legislature, as well as the Charitable and the Benevolent, will give their generous Assistance to enable this Hospital to be a general Receptacle of all Children which may be abandoned and deserted. In the mean time, Children who are brought to be received have their Fortune determined by Lot, to prevent any Partiality in their Admittance. Experience has shewn that distressed & helpless Objects are very numerous; and that many thousand Lives may be preserved for National Utility if this Charity by a True publick Spirit be properly extended.⁸⁴

This passage seems to evince more interest in “the good Consequences which must accrue to the Publick” and the consideration that “many thousand Lives may be preserved for National Utility” than sympathy for the plight of “distressed & helpless Objects” – but, again, the

⁸¹ Minutes of the General Court, A/FH/K/01/001, 31 March 1756.

⁸² Ibid.. The Hospital, acknowledging the inadequacy of its finances, later spoke of the “risk” posed to “the permanent welfare of the institution” by its “premature exertions,” its taking in more children than it could afford. *An Account of the Foundling Hospital in London, for the Maintenance and Education of Exposed and Deserted Young Children* (London: Foundling Hospital, 1826), 26-7.

⁸³ Nichols and Wray, *The History of the Foundling Hospital*, 47. McClure, *Coram’s Children*, 79.

⁸⁴ Minutes of the General Court, A/FH/K/01/001, 31 March 1756.

invocation of “a True publick Spirit” smacks of an attempt to *persuade others*, the MPs, and the failure to mention military implications (at a time when war was imminent and, in fact, already under way in North America) is a striking omission. Ruth McClure attributed such thinking, brought on by the pressures of wartime, to the MPs who received the petition but not to the Governors who presented it; indeed, she emphasised the *paternalism* that the Governors shared with other public-spirited people: “We should not, however, discount the humanitarian impulse that motivated many sensitive men and women in the years from 1756 to 1758.”⁸⁵

The language of Parliament on April 6th 1756, when the principle of the grant was approved, leans heavily on the idea of “lasting & general Utility” and “general Utility & Effect,” and the King, through the Chancellor of the Exchequer, asked the House “to make some Provision for the better carrying on so useful a Charity.”⁸⁶ The Governors had read their audience well or, alternatively, perhaps the emphasis on utility suggests the *economic* aspect of mercantilism. On May 3, the Commons duly granted a sum “not exceeding ten thousand pounds” so that the Hospital and its projected subsidiaries could receive *all* of England’s exposed and deserted children below “a certain age” (set initially, on May 21, at only two months) brought between June 1 and December 31 of that year.⁸⁷

It is notable that the figure most associated with the fiscal-military state, Jonas Hanway, who would soon establish the Marine Society to provide recruits to the Royal Navy, played no part in the General Reception decision of 1756. He was not made a Governor of the Hospital until May 12, when he was also elected to the General Committee.⁸⁸ Helen Berry’s claim that “Hanway’s arrival as a governor coincided with a rapid scaling up of the Foundling Hospital’s activities ... during the period that became known as the General Reception” seems to imply a causal connection that could not have existed.⁸⁹ Equally, Berry’s idea that the “strong ties between the Foundling Hospital and the Marine Society via Jonas Hanway meant that some

⁸⁵ McClure, *Coram’s Children*, 79-80.

⁸⁶ Minutes of the General Committee, A/FH/K/02/005, 21 April 1756. The Journals of the House of Commons, Vol. XXVII, 29 Geo. II, 567, 6 April 1756.

⁸⁷ Minutes of the General Committee, A/FH/K/02/005, 5, 21 May 1756. The Journals of the House of Commons, Vol. XXVII, 29 Geo. II, 592, 3 May 1756. The resolution bore the date 30 April but was not passed until May 3. (This distinction explains why McClure, who used the Journal, said 3 May and Nichols and Wray, using the General Committee minutes, said 30 April).

⁸⁸ Minutes of the General Court, A/FH/K/01/001, 12 May 1756.

⁸⁹ Berry, *Orphans of Empire*, 91.

attempt was made to put foundling boys to sea” overlooks how few went to sea after 1757.⁹⁰ As will be seen below, the years of Hanway’s prolific service to the Hospital – he attended frequently until 1774 and was a Vice President of the Hospital from 1772 until his death in 1786 – brought no increase in the movement of Foundlings into the armed services.

Linda Colley’s most recent work, *The Gun, the Ship and the Pen: Warfare, Constitutions, and the Making of the Modern World* (2021), highlights the transformative impact of “hybrid war” – war at sea and on land – on states around the world. She claims that the first hybrid war that spread its tentacles across Europe and far beyond, the Seven Years War, caused rulers to look to constitutions as a means to induce citizens to pay the taxes (and supply the men) required to wage war. In short order, subjects, from below, wanted constitutions that would constrain the warmongering of ambitious monarchs whose peoples paid the high costs of war.⁹¹ Thus John Brewer is not alone in seeing that warfare and imperialism posed questions about what a state needed to survive and thrive in a competitive world dominated by actual and potential enemies. It is all the more striking, then, that amidst the ferment of ideas, in the furnace in which the future of the Empire was forged, evidence that the LFH had a military objective is so fleeting and insubstantial as to raise doubts that such motivation ever existed at all. From Colley’s research, one would expect the Seven Years War to have considerable repercussions for children apprenticed out from the Hospital, but, in fact, it had little if any impact on their career-destinations. While military motives may have infused some of the Governors’ thinking, they had no obvious impact on Hospital policy.

Demobilisation at the end of the Seven Years War meant that there was little recruitment to either Royal Navy or merchant marine; the Royal Navy was cut from 76,000 in 1763 to only 17,500 in 1764, and many of the paid off seamen went to the merchant fleet, which therefore required fewer new recruits.⁹² This was reflected in the apprenticeship statistics for the peace block of 1770-1774 (cohort 3). 1770 was the last year in which the General Reception had a major effect on the number of Foundlings placed in employment (166 boys departed in 1770, compared with 16 in 1759 and 24 in 1771). Only two of the boy leavers in 1770 entered the

⁹⁰ Ibid., 152-53.

⁹¹ Linda Colley, *The Gun, the Ship and the Pen: Warfare, Constitutions, and the Making of the Modern World* (London: Profile Books, 2021).

⁹² Duffy, “The Foundations of British Naval Power,” 56.

merchant marine directly, John Buckland and John Pell (both “Till 21 years old to be employed in the Sea Service”) going to civilian employers in Yorkshire, presumably from the branch hospital at Ackworth. Two others, Thomas Harcourt and Theophilus Deal, joined “the Sea Service” (merchant) *later*, in 1771 and 1773 respectively, after brief placements elsewhere. Another, Thomas Gravesend, also tried life on land before joining the *Royal Navy*: in April 1771, he was sent to “the Honorable Charles Phipps of His Majesty's Ship *Modeste* ... bound to the East Indies to serve the remainder of His Time at Sea.”⁹³ Gravesend and also George Howell and Charles Mellish (some years later, see below) joined the *Royal Navy* in their second placements; all three were sent there by the Hospital, denoting some degree of interest in despatching boys to the Navy – but the fact that the Hospital initially sent them elsewhere implies the absence of a compelling imperative to supply naval recruits. Back in May 1760, “just after the battle of *Minden*,” the Hospital had admitted soldiers’ orphans without “any Friends who can support them,” electing to take them “in favor of the helpless remains of Men who have dyed [sic] in defence of their Country. Several were admitted immediately, and others on the July following.”⁹⁴ While one could argue that the Hospital might *take in* orphans of Empire, it did not *make* orphans of Empire.

The rest of the period 1770-1774 saw little interest even in the merchant marine. Roger Phillips and George Mace (the latter after a few months in tailoring) entered the merchant marine in February and October 1771, out of 24 boy leavers that year; no boy went to sea in 1772 (out of 12) or 1773 (out of 16), but Henry Carr joined the merchant marine four years later in 1777. Thirty-three boys left in 1774, but none of them went to sea until William Thursby, who went first to do “Household Work” (in January 1774), joined a “Mariner” in Durham in April 1775 “to serve the remainder of his time in the Sea Service.”⁹⁵ In sum, in the peace years 1770-1774, out of more

⁹³ Apprenticeship Register, A/FH/A/12/003/002, 4, 11, 13, 16, 31.

⁹⁴ Minutes of the General Committee, A/FH/K/02/007, 265-266, Letter from Lord Barrington, then Secretary at War, 7 May 1760.

⁹⁵ Apprenticeship Register, A/FH/A/12/003/002, 66-67.

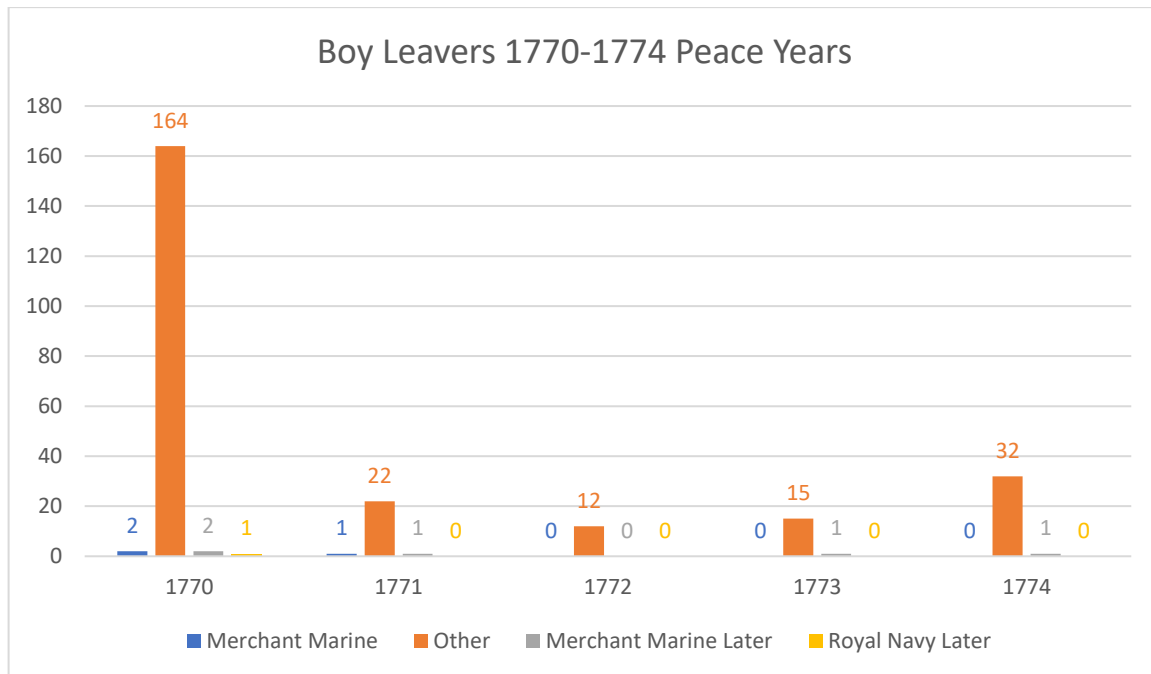


Figure 3: Boys Leavers, 1770-1774 [Cohort 3]

than 200 boys, three joined the merchant marine straight from the Hospital, five joined later, another went later to the Royal Navy after a failed initial apprenticeship, and no boy entered the Army.

The following decades brought the warfare that might have sparked an interest in military careers for the Foundlings but did not yield such an outcome for many years. By 1780, in addition to fighting the American Revolutionary War, Britain “was at war with France, Spain and Holland, and beleaguered by the several neutral powers who resented her interference with their shipping.”⁹⁶ And yet, in the war-years block 1778-1782 (at the height of the American War of Independence), only eight boys joined the merchant fleet and 43 entered other civilian occupations out of a total of 51 boy leavers in cohort 4 (Figure 4).

⁹⁶ Brewer, *Sinews of Power*, 144.

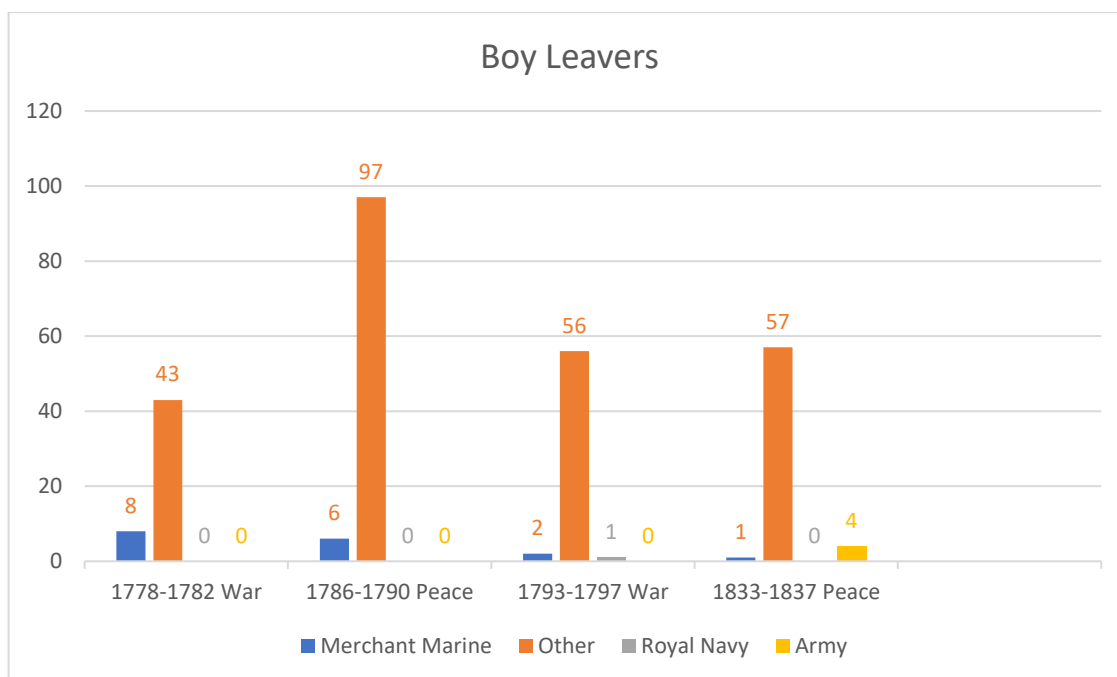


Figure 4: Four Blocks of Boy Leavers [Cohorts 4-6, 8]

While two of those who went to sea were fully grown, at 18 and 20 years old, the others ranged from eight to twelve years of age and, presumably, became personal servants and cabin boys.⁹⁷ In the entire length of the American War, from 1775 until 1783, no Foundling entered the Army and only one joined the Royal Navy: in 1777, eight-year-old George Howell, after 18 months in domestic service, was assigned to an officer “on Board His Majesty’s Ship Superbe to be employed in the Sea Service the remainder of his Time,” presumably as a personal attendant, after his first apprenticeship went awry.⁹⁸ Clearly, exceptionally young Foundlings *could* have gone to the Royal Navy, but it was a very rare occurrence.

In 1786-1790, peace years, out of over 100 boys in cohort 5, just one (Edward Craggs) went directly “to be instructed in the Sea Service,” another (Caleb Hughes) went to a mariner in Jersey though not necessarily as a seaman, four (George Green, Francis Smith, George Ormond, and John Phillips, who left the Hospital in 1790 but did not go to sea until 1797) joined the

⁹⁷ Apprenticeship Register, A/FH/A/12/003/002, 81 (Barnard, Parrot), 82 (Anderson, Williams), 85 (Onslow, Barningham) and 88 (Maitland, Marriot). All ages are estimates based on the admission dates; they could be underestimated by up to 12 months.

⁹⁸ *Ibid.*, 79.

merchant marine later, and none went to the Royal Navy or the Army (Figure 4).⁹⁹ The Hospital's leaders did attempt, ineffectually, to send boys to the Navy: in May 1790, on the initiative of Committee members John Holliday and Thomas Bernard (the future Treasurer), the General Committee resolved, "That twenty Boys from the Age of 12 to 14 be offered to the Board of Admiralty to be employed in the Sea Service, in the Dock yards, or otherwise, as Apprentices until the Boys respectively attain 21..."¹⁰⁰ The Admiralty replied that it was "not authorized to direct any of the Officers of the Kings [sic] Ships to take Apprentices" -- a response strikingly similar to that of the East India Company in 1751 - and, although the offer was communicated to Vice Admiral Roddam and his officers at Portsmouth, there was no subsequent increase in the number of Foundling boys going to the Navy.¹⁰¹ Between May 1790 and the end of 1792, even as war loomed, not a single Foundling boy was sent to the Royal Navy and only one, Thomas Hobson, went directly to the merchant marine.¹⁰²

Although Britain and Revolutionary France were at war from February 1st 1793, bringing the manpower of the Royal Navy from 69,868 in 1793 to 128,930 in 1799, the swelling demand for personnel made little or no difference to the Foundlings' career placements.¹⁰³ Out of 59 boy leavers in 1793-1797 (cohort 6), *none* went directly to either the merchant marine or the Royal Navy. John Perry was a shoemaker until he joined the merchant marine in February 1794, Henry Paget spent several years (1794-1797) on land before he followed suit, and one brave boy, Charles Mellish, joined the Royal Navy in December 1795, six months after leaving the domestic service apprenticeship the Hospital originally secured for him.¹⁰⁴

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⁹⁹ Ibid., 95 *et seq.*

¹⁰⁰ Minutes of the General Committee, A/FH/K/02/019, 19 May 1790.

¹⁰¹ Ibid., 26 May 1790.

¹⁰² Apprenticeship Register, A/FH/A/12/003/002, 116, 33 May 1792 (Thomas Hobson). Two others joined the merchant marine in subsequent placements. Ibid., 112, 118.

¹⁰³ Statistics from Christopher Lloyd, *The British Seaman* (London: Paladin, 1968), 263. See also Duffy, "The Foundations of British Naval Power," 82.

¹⁰⁴ Apprenticeship Register, A/FH/A/12/003/002, 119 *et seq.* "Assigned by fresh Indentures 30th Dec. 1795 to James Cotterall [sic] of his Majesty's Ship to be employed in the Sea Service for rem[ainder] of time."

A brief departure from the statistical analysis is in order at this point. In her 2020 book entitled *Children at Sea: Lives Shaped by the Waves*, Vyvyen Brendon writes about Foundling George King (born in 1787) who spent almost three decades in the Royal Navy.¹⁰⁵ The title of her chapter “George King 1787-1855: A Foundling at Sea” is footnoted:

Two years after completing this chapter and just before sending my book to the publishers I discovered that Professor Helen Berry had drawn heavily on George King’s manuscript memoir and her excellent monograph *Orphans of Empire: the Fate of London’s Foundlings* (OUP, April 2019). However, she uses the material as a ‘single, precious thread’ running through her study, the emphasis of which is on the foundling experience. George King’s story is so remarkable that it’s worth telling as a whole, in uninterrupted form, as a rare example of an autobiography written by a common sailor.¹⁰⁶

Like Helen Berry, Brendon uses George King as a poster boy for the Foundling-turned-sailor. She discusses King’s early life and describes the years leading up to his apprenticeship: “George King was approaching his departure from the hospital, though not for the sea service which had once been the most common destination for foundlings.”¹⁰⁷ While sea service was only briefly the “most common destination” for Foundlings, and never the Royal Navy, where King ended up, it is worthwhile to see how this Foundling, espoused as the epitome of the Hospital’s “Orphans of Empire,” indeed made his way into the Royal Navy.

George King was LFH child number 18,053. In September 1800, aged 13, he was apprenticed to John Browne, a confectioner and grocer in the City. King so enjoyed learning the art of confectionery that he resolved to pursue a career in the trade; however, one fateful day in 1803, he was forced to flee his master, altering the entire course of his life:

unluckily one Morning I had overslept myself and did not arrive on Fish Street Hill until twenty minutes after Eight. On my entering the shop I was accosted by the Man who served behind the counter named James Elliott with these words

¹⁰⁵ Vyvyen Brendon, *Children at Sea: Lives Shaped by the Waves* (Barnsley: Pen & Sword Books, 2020), 52-84.

¹⁰⁶ *Ibid.*, 223n1.

¹⁰⁷ *Ibid.*, 56.

‘pray young Gentleman what is the reason you were not here at seven?’ I made a reply that I was not Called as usual and had overslept myself when he jumped over the counter and begun to beat me. The different Porters looking on one in the name of William Love Spurred me on to attack him and on finding I had 1 backer I immediately pitched into him and we had a Regular turn too which lasted about twenty minutes on the Close of the fray he ordered me to go and Clean the Counting House which order I immediately obeyed swept it clean and polished the desks about half past nine one of my Masters sons arrived from the other House when the shopman stated the circumstances to him that had just happened at this time I was in the Confectionery doing my proper work on the arrival of Mr. Brown Sen[i]o[r] at Eleven o’Clock I was ordered into the Counting House and after he hearing the whole of the Circumstance ordered me immediately to go on my Knees and beg Mr Elliotts pardon for so he was styled I refused to do any such thing he being a servant the same as myself but I stated at the same time had I said anything injurious to any of his family I would willingly have done it on the fourteenth of July I was ordered to clean my self and proceed to Guildhall with my Master who requested to see the City Chamberlain with a view of punishing me but on our arrival my Master was informed that the City Chamberlain would not be there until Friday morning following so we arrived home again this being Wednesday.¹⁰⁸

With the peril of Bridewell House of Correction hanging over him, King went back to the Hospital shortly after the mishap with his master. While there, he came across another Foundling friend, James Gardner, who after six months had “run away from his Apprenticeship” and gone to sea on a merchant ship.¹⁰⁹ Gardner invited him onto the merchant ship he was headed to, at Chatham in Kent, offering King a way out of his predicament. King agreed but “went to Bed sorrowfull.”¹¹⁰ Interestingly, both King and Gardner seemed to feel welcome at the LFH, even though both had absconded from the apprenticeships that the Hospital set up for them.

Along their way to Chatham, King lost his companion. Gardner told him he was off to collect some wages owed to him, but “promised me as soon as paid he would meet me at the Sun Tavern Tap in Chatham.”¹¹¹ On his rainy journey to Chatham, King “accidently met with a

¹⁰⁸ Autobiography of George King: Diary of the Incidents of the life of the Undermentioned for Forty one years, A/FH/M/02/17, 16-19 (seen in transcription, page numbers from original manuscript). Brendon used the transcript held by the Foundling Museum. Brendon, *Children at Sea*, 224 n5. Berry gave a National Maritime Museum reference (MRF/85) in her bibliography, but she acknowledged that it was the Foundling Museum’s transcript that she quoted from. Berry, *Orphans of Empire*, 293, 329.

¹⁰⁹ George King, Autobiography, 19.

¹¹⁰ Ibid., 21.

¹¹¹ Ibid., 25.

Seafaring Man” and they decided to travel together. King finally arrived at the tavern where he was to meet up again with Gardner. His friend had not arrived, but the landlord kindly said he could stay on and wait for him. Every day, King went out to meet the London coaches, hoping to find his friend, but after four days King decided to take the road back to London to look for him.¹¹² King would never find out where Gardner ended up because, at this stage, he was drugged and pressganged into the Royal Navy, a sudden turn of events that owed nothing to any intention to seek a military career. He reports:

I passed over Rochester bridge and going up Stroud Hill I met with a party of men who was [*sic*] on the opposite side of the road. They immediately on our nearer approach accosted me with “what ship?” My reply was “No ship”. They immediately swore that I had run from the Adamant at Chatham and accordingly they secured me with handcuffs and took me back to the sign of the Cook at Chatham and when entered they took the cuffs off me and endeavoured to persuade me that I had run away from that ship but I soon undeceived them by producing my Indentures from the Coopers Company. They then questioned me as to how I came down there to which I informed them that I had run away. They then stated to me that they would put me in prison and write to my master which I begged and prayed that they would not do the like saying that I wished to go to sea and that same time they asked me if I would drink a cup of grog which I assented to and in the meantime they destroyed my Indentures and in a few hours afterwards I found myself on board of His Majestys Ship Polyphemus [*sic*].¹¹³

King’s bad luck saw his life take a course that he did not choose, but would appeal to him once he realized service in the Royal Navy would secure him decent wages. He would be brought on not as a mere landsman but as a “Marine” who was “part of the complement,”¹¹⁴ perhaps because of his rare ability to read and write, thanks to the schooling gained at the Hospital.

Thus, George King began a career that took him to Trafalgar and ports and battles around the world. He is now seen by many as an exemplar of the idea that the Hospital produced

¹¹² Ibid., 26, 29-30.

¹¹³ Ibid., 31-32.

¹¹⁴ Brendon, *Children at Sea*, 62.

fighting men who served the British Empire. Indeed, Helen Berry depicts the young King's seeing the local militia drilling at the Hospital as a formative experience:

In keeping with the Hospital's mission to raise good citizens for the nation, imperialist ideas about the desirability of sea service or the army were imparted early. We know that George King witnessed this first hand for himself from his recollection that the Hospital grounds were used by the Bloomsbury and Inns of Court militia for drill practice.¹¹⁵

But Berry did not appear to notice that he expressed no wish to take part in the drill or that none of his opinions that bore the least resemblance to an imperialist idea.

On the subject of drilling, it is true that in April 1756, "Mr Whatley having moved to [sic] this Committee that the Boys of this Hospital be learnt [sic] to exercise in a military manner," it was "referred to the Sub Committee to carry the same into Execution, whenever they think proper."¹¹⁶ But a link between an exercise regime for boys and the training of future soldiers is not proven, a point that emerges more clearly when the question arose again almost a century later. In 1840, the Hospital discussed the matter "Of the Exercising and Recreation of the Children." The minutes state that the children need "bodily exercise," so they should be allowed "to walk out of the Hospital in fine weather once every week ... and further, that a competent person should be engaged to drill them three days in the week, one hour each day..."¹¹⁷ Consequently, they appointed a Drill Master for "improving the physique of both boys and girls."¹¹⁸ Inclusion of the girls points towards exercise as the purpose, and this study has unearthed no suggestion that the initiative reflected any interest in military careers for the boys. Rather, the minutes of the Select Committee established on 12 June 1840 show discussion of the benefits of exercise and discipline more generally:

¹¹⁵ Berry, *Orphans of Empire*, 128. George King, *Autobiography*, 4-5.

¹¹⁶ Sub-Committee Minutes, A/FH/A/03/005/002, 7 April 1756.

¹¹⁷ Foundling Hospital: Report of a Special Committee, A/FH/A/06/020/006, 8 May 1840.

¹¹⁸ Nichols and Wray, *The History of the Foundling Hospital*, 317.

That the children be permitted to walk out of the Hospital weekly or oftener at the discretion of the Treasurer & under the special charge of the Masters & Mistresses.

That a competent person be engaged to drill the Children three days in the week one hour each day, and that they be instructed in gymnastic games of a simple kind.¹¹⁹

Soldiers did sometimes drill at the Hospital. In June 1780, “several of the inhabitants near the Foundling Hospital” were “inconvenienced” on account of having “to lodge the Guards who have been lately stationed in their Houses...”¹²⁰ Then, at the end of the century, the Hospital was used for home defense exercises, as George King witnessed:

Leave was granted to the Gentleman of Bloomsbury Association, a body organized for home defence, to use the southern end of the Western Colonnade in February 1798, and again in June 1798, to exercise in the grounds for two additional days at 6 a.m., and this was a development of an arrangement between the Governors and local Volunteer Corps which lasted throughout the Napoleonic Wars.¹²¹

When, in 1803, the Loyal North Britons “asked leave to muster, 400 strong, in the grounds once a week,” permission was refused “as the Bloomsbury and Inns Court Association were 800-strong and drilled constantly night and morning.”¹²² Despite all this martial activity on the LFH grounds, no Foundling went directly to the military in the 1790s, and even in the following decade, when some began to join the Navy, no boy was inspired by the sight and sound of marching men to join the Army.

King eventually tired of battling the many physical ailments common to seamen (yellow fever, dysentery, severe pains in his shin bones, typhus fever, and so on).¹²³ He married in Cork

¹¹⁹ Minutes of Select Committees of the Foundling Hospital, A/FH/A/03/014/002, 12 June 1840.

¹²⁰ Nichols and Wray, *The History of the Foundling Hospital*, 302.

¹²¹ *Ibid.*, 304.

¹²² *Ibid.*, 305.

¹²³ George King, *Autobiography*, 28 (yellow fever), 42 (dysentery), 46 (typhus fever), 49 (shin pains).

in 1825 but returned to sea three years later and remained in the Navy until 1831, when he was finally paid off. Now a widower, and stricken with wanderlust, he found occasional employment on merchant ships, one of which brought him to South Carolina, where he had a short career as a teacher, an exotic interlude. In March 1833, he “threw his hammock overboard, gave away his blanket and rug and, after being paid for the voyage, took ‘a parting glass’ with his shipmates, telling them that his sea career of twenty-seven years was over.”¹²⁴ He eked out a desperate living, dependent on goodwill and credit, agricultural work in the hay meadows of Middlesex and hop farms in Kent, and casual dockyard employment in London, to supplement his pension. The prodigious drinker’s quest for grog ended in July 1857 at the age of seventy. He had finished his life at Greenwich Hospital, an institution for distressed former seamen but in other respects similar to the one he was brought to as an infant: he was expected to wear a uniform, eat plain food, perform menial tasks, and follow the rules. In fact, in 1860, the Royal Commission found that Greenwich offered its inhabitants “a dull and dreary monastic existence,” which lacked “everything that enlivens and endears a home,”¹²⁵ criticism that rings true of the LFH as well.

Berry weaves King’s recollections as “a single, precious thread” throughout her book, while “other foundling voices join his in smaller, broken whispers.”¹²⁶ All of the Foundlings who featured in George King’s story passed, like the press-ganged King himself, into the Army or the navy (Royal or merchant) only in a second or subsequent placement. Henry Rivington, baptised on the same day as King in November 1787 and King’s closest childhood friend, went first to a “Pocket Book Maker” in Clerkenwell “to be instructed in his business” in June 1801 and, as with King, the Apprenticeship Register’s silence regarding his later move into the Army’s Tenth Regiment of Foot (according to King) suggests that the Hospital had no role in that outcome. Similarly, William South, King’s contemporary in the Royal Navy, went first to a tailor and “Breeches Maker” and then to a Chancery Lane stationer, and his joining the Navy was not noticed in the Apprenticeship Register. The Hospital did have a role in sending James Gardner, the boy who persuaded King to join him, to sea, but only after his being first apprenticed to a leather case maker (or “bookbinder,” as King recalled) in February 1799. On May 22nd 1800 he was “Assigned by new Indentures” to Captain Johnson Walmsly, a mariner in

¹²⁴ Brendon, *Children at Sea*, 78.

¹²⁵ Quoted in *ibid.*, 82.

¹²⁶ Berry, *Orphans of Empire*, ix.

Northumberland.¹²⁷ None of these boys' stories suggest that they were groomed for military life by the Hospital.

Although Britain's rise in the eighteenth century to be the world's leading commercial power had far-reaching effects throughout British society, no historian has demonstrated the impact on the *London Foundling Hospital*. In *Orphans of Empire*, Helen Berry claims that "Thomas Coram's world-view was shaped as a footsoldier of empire ... who was used to undertaking huge and ambitious projects in the interests of the British state."¹²⁸ He allegedly viewed the Hospital as an institution that might serve the state and its imperial mission. Much of Berry's founded-for-empire argument is based on George King's story. Yet, King was born in 1787, forty-six years after the Hospital opened its doors. Nonetheless, in her thesis the two narratives intertwine:

George was an 'orphan of empire', someone whose parents had died or who had abandoned him (thereby effectively orphaning him, since very few children left at the Foundling Hospital were ever reunited with their birth families). George's precarious life as a pauper infant was 'saved for the nation' via a publicly sponsored charity whose main purpose was to boost the workforce at home and manpower for the armed forces abroad in order to further Britain's imperial mission.¹²⁹

King did go to the Royal Navy and fought at Trafalgar, but his story can tell us nothing about the nature or purpose of the Hospital, especially the "main purpose" of its establishment. He cannot be taken as representative of the experience of 18,539 children brought into the Hospital's care in the eighteenth century, long before Foundlings went directly into the Navy. *Orphans of Empire* consistently links the LFH with the Empire. Some Governors and patrons indeed had ties to the slave trade, and empire trade more generally, and Berry alerts her readers well to the prevalence

¹²⁷ Apprenticeship Register, A/FH/A/12/003/002, 133 (Gardner), 135 (South), 136 (King), and 137 (Rivington). George King, *Autobiography*, 15 (Rivington), 19 (Gardner).

¹²⁸ Berry, *Orphans of Empire*, 28. Just as the "Foundling Hospital" was a misnomer in that it never truly took in foundlings, most infants admitted to the Hospital were not actually orphans, but a mixture of the babies born of poor married couples and (mostly) unmarried mothers, but also some children of widowed fathers and children of soldiers, as well as orphans without parents. Berry, in fact, came up with the phrase "orphans of empire" in reference to King and pluralized it for her title (he never used the term himself).

¹²⁹ *Ibid.*, 4.

of “objectionable” views, including “unapologetically imperialist attitudes towards other races and creeds, and a paternal form of patriarchy that endowed men with God-given authority over women, children, servants, and even African slaves.”¹³⁰ But Berry’s arguments about Coram and the imperial purposes for establishing the charity at the outset hinge on a lad who passed through the Hospital six decades after it opened.¹³¹ In using George King’s autobiography to tie Coram’s “darling project” into an imperial narrative, Berry diverts readers from the institution’s vital functions: it clothed, fed, educated, medically looked after, and – as the Paternalism chapter will soon show – *cared* for its children. The Hospital nurtured thousands of children who would otherwise have lacked these necessities of life. One should be skeptical when those running the Hospital are pushed under a narrowly focused imperialism lens.

* * * * *

If the eighteenth century saw remarkably little interest in military careers for the Foundling’s boys, the picture was to be transformed a few years into the nineteenth century. This change, coming so much later, sheds little light on the intentions of the founders before and after the opening in 1741 and the dramatic occurrences after 1800 highlight the *absence* of such developments in the previous century, regardless of peace or war.

The long war with Napoleonic France that broke out in May 1803, after the brief interlude of the Peace of Amiens, did have an impact on the career choices of the Hospital’s boys. Precise measurement of that impact is far from easy, for the Apprenticeship Register and the Admission Book (“Remarks” column) did not always make clear whether a boy was destined for the merchant service or the Royal Navy. And the Admission Book identified only the children’s *first* employment after leaving the Hospital. Nevertheless, one major development is indisputable: for the first time, a sizeable number of boys entered the Royal Navy directly from the Hospital.

¹³⁰ Ibid., 85.

¹³¹ Statistics gathered in January 1767, 26 years after the Hospital’s opening, show that 16,511 children were admitted to the Hospital prior to that date, some 11,140 having died (67.5%). Thus over 5000 foundlings, made up of roughly half girls and half boys, passed through the Hospital and were apprenticed. The gender parity is notable given that one would assume a hospital established to help fill barracks would have taken in more boys than girls.

With hindsight, historians have reflected on how the Battle of Trafalgar ushered in a century of British naval dominance, but the country's leadership knew that dominance would not flow automatically out of the great victory of October 21st 1805. As James Davey has written, the naval war after 1805 was very much alive; "in fact it grew in scale and intensity" and "constant vigilance" was required to stave off a threat of invasion that was felt "until at least 1810."¹³² After 1805, the Navy "continued to increase in size;" many enlisted in an institution which was synonymous with glory and triumph, its leaders (not just the dead Nelson) hailed as "national heroes and icons."¹³³ The Royal Navy's seaborne strength, 49,430 men in 1803, in 1810 peaked at 142,098.¹³⁴ However, the Navy's recruitment efforts did not immediately involve a keenness to take boys from the London Foundling Hospital. Although, in the end, the Navy would want more George Kings and William Souths, the change began slowly. No Foundlings went directly to sea in 1804 or 1805, and the three who became seamen in 1806 all joined merchant ships.¹³⁵ John Hunt was apprenticed in 1807, but in August 1808, now 12, "New Indentures" placed him with a London shipowner to be "instructed in the Sea Service," meaning the *merchant* marine. In July or August 1807, four boys were "Sent to Marine Society."¹³⁶ This is problematical because the Marine Society sent boys to both merchant marine and Royal Navy, and the Admission Book, inscribed simply "Sent to Sea," sheds no further light on the subject; a Committee minute later indicated that one of the four, Richard Tibbett, was apprenticed "under the Marine Society" to civilian employers.¹³⁷ William Curtis in 1808 and John Deighton in 1809 both went to the Marine Society, but in neither case was their ultimate destination - merchant or Royal - specified. Peter Hosch entered domestic service ("Household Business") in 1808 but joined a merchant

¹³² James Davey, *In Nelson's Wake: The Navy and the Napoleonic Wars* (New Haven and London: Yale University Press, 2015), 10-11, 312-13.

¹³³ Davey, *In Nelson's Wake*, 12, 16-17.

¹³⁴ Lloyd, *The British Seaman*, 263.

¹³⁵ Apprenticeship Register, A/FH/A/12/003/002, 144, Wainwright (10), Griffiths (11), and Peters (13).

¹³⁶ *Ibid.*, 146-47, Hunt, Plumer, Tibbett, Calcott, and Drummond. John Hunt was later press-ganged into the Royal Navy, where he was injured and compelled to return to the Hospital at some point after 1808. The Hospital gave Hunt temporary lodgings and helped him out of the Invalid Fund in 1815. Minutes of the General Committee, A/FH/K/02/033, 18 October 1815; also described in Morris Lievesley, "Manuscript notebook: reminiscences of behaviour of governors, staff and pupils at the Foundling Hospital during period of office, 1799-1849 and before that date," A/FH/F/14/001/001 (handwritten) and A/FH/F/14/001/002 (typed), 18.

¹³⁷ Admission Book, A/FH/A/09/020/001. The Admission Book was not paginated; the four boys are listed by admission date, between 28 February 1795 (Calcott), and 4 June 1796 (Tibbett). Minutes of the General Committee, A/FH/K/02/033, 1 November 1815 (Tibbett).

ship in 1811.¹³⁸ Remarkably, Peter Hosch was the *only* boy who entered the merchant marine during the years 1809-13, setting aside for the moment those whose destination is in doubt.

In 1809, the Royal Navy began to reign supreme at the LFH. An 1808 leaver, John Mayo (13), moving on from another placement, was one of four boys who “Volunteered into his Majesty’s Naval Service” on February 7th 1809, the others being William Garrett (aged 11), William Hester (aged 12), and Lewis Capet (aged 13).¹³⁹ The expression used here, and the reference in the minutes to their “having voluntarily offered” to go to the Navy, suggests that the initiative lay with the boys, as opposed to the Hospital or the Admiralty.¹⁴⁰ Routes to the Navy were several. Boys were sent directly to the Navy at the child’s behest, or as a punishment, or a last resort when other apprenticeships failed. The records show that some placements were less voluntary than others, that, as Berry aptly noted, “putting boys to sea became more of a penance for miscreants than a source of regular employment for former foundlings.”¹⁴¹ Thomas Vernon, Horatio Nelson, and Henry Hyde “Volunteered on the 16th August 1809 into his Majesty’s Naval Service.”¹⁴² Again, “Volunteered,” in contrast to the “Assigned” which featured commonly in the Apprenticeship Register, might imply that the boys decided – but the minutes tell a more convoluted and opaque story: Vernon, Nelson, Hyde, and another boy, John Vicars, “having been guilty of desertion from the Hospital,” on August 16 the Committee resolved “that the said Boys be sent to the Marine Society” and on the *same day* the Register has them volunteering into the Royal Navy. Why they “deserted” and who or what caused three of them to go to the Navy (Vicars went to domestic service in Kent) is not explained, but the Hospital was apparently sending boys to sea as a punishment.¹⁴³

As maritime historian Roland Pietsch has shown, being sent to the Navy was often used as a discipline for ‘bad boys.’ He claims that the Navy was the “institution to which other boys were

¹³⁸ Apprenticeship Register, A/FH/A/12/003/002, 149-50. Admission Book, A/FH/A/09/020/001, 30 April 1796 (Curtis). Minutes of the General Committee, A/FH/K/02/029, 4 January 1809 (Deighton). John Deighton had an unusual background. In the Admission Book, the petitioner’s name was not his mother’s, rather he is simply described as ‘Soldiers Child’ (sic), and he was 4 years old. Admission Book, A/FH/A/09/020/001, 20 July 1797.

¹³⁹ Apprenticeship Register, A/FH/A/12/003/002, 150. Admission Book, A/FH/A/09/020/001, 21 March 1795 (Capet), 30 May 1795 (Mayo), 30 April 1796 (Hester), 24 April 1797 (Garrett). Capet did not remain for long: he was indentured to a nail-cutter on 23 April 1809. Apprenticeship Indentures, A/FH/A/12/004/102 (Capet).

¹⁴⁰ Minutes of the General Committee, A/FH/K/02/030, 1, 8, 15 February 1809.

¹⁴¹ Berry, *Orphans of Empire*, 174.

¹⁴² Apprenticeship Register, A/FH/A/12/003/002, 151.

¹⁴³ Minutes of the General Committee, A/FH/K/02/030, 16, 23 August 1809. Apprenticeship Register, A/FH/A/12/003/002, 140 (Vicars).

sent exactly because it was expected that the navy would put them under a stricter discipline.”¹⁴⁴ Clearly, many of the LFH Governors agreed when, in March of 1813, a couple of Foundling boys stole bread from the Hospital store and, “[a]fter an investigation by the Committee, it was ordered that the two of the boys should be sent to serve on board the naval tender stationed at the Tower, while two others were severely flogged and two slightly flogged. One boy who “had properly communicated his knowledge to the Steward’s boy” was excused punishment.¹⁴⁵ Five years later, the Committee meeting minutes describe a more turbulent episode, when the sad fate of a former Foundling was related. Richard Tibbett(s) is noticed above as having joined the merchant marine as a young boy, but by 1818 he had been ashore for nearly four years and had become unhinged. The Secretary reported,

...that in the afternoon of Sunday last he received Notice of Richard Tibbetts having endeavoured to destroy himself, and that a great number of persons were assembled around him in Britannia Street Grays Inn Road, to whom he represented that he was a Foundling and left to starve by the Governors. Under the apprehension that the people might be induced to proceed to the Foundling with Tibbetts (who having cut his throat and otherwise mangled himself exhibited a shocking spectacle) he, the Secretary, placed him under the care of Hutt, the Police Officer, by whom he was taken before Mr Raynsford [the magistrate] at Hatton Garden on Monday Evening, when the Secretary attended on the part of the Hospital... [Raynsford] had with a view to the present security of Richard Tibbetts placed him in custody in Cold Bath Fields. Resolved, That ... [the Secretary] be desired to take immediate steps to find him a situation on board a Ship, and that he be authorized to expend any Sum not exceeding Five Pounds in [sic] the outfit of Richard Tibbetts, when such situation shall be procured.¹⁴⁶

The Secretary then reported that, “after having made the necessary enquiries of the Committee for assisting distressed Seamen, he proceeded with Richard Tibbetts to the receiving Ship

¹⁴⁴ Pietsch, “Ships’ Boys and Youth Culture in Eighteenth-Century Britain,” 19.

¹⁴⁵ Nichols and Wray, *The History of the Foundling Hospital*, 308.

¹⁴⁶ Minutes of the General Committee, A/FH/K/02/034, 21 January 1818. A revised version is in Nichols and Wray, *The History of the Foundling Hospital*, 309.

“Abundance” off the Tower...”¹⁴⁷ Tibbetts’s alarming behaviour got him into the Royal Navy, and it seems likely that the decision was made by the magistrate or the General Committee rather than by the young man himself.

Individual boys were treated variously. Some years before this, a misbehaving apprentice, George Clarke, seemed to garner more sympathy than Tibbetts. On August 6th 1800, the Committee decided that Clarke’s master, Sir Richard Pearson, who was “complaining of the Conduct of his Apprentice” and asking the Governors for “permission to send him on Board a Flag Ship in his Majesty’s service,” could *not* send “his Apprentice to Sea without the Boy’s consent; but that if he will recommend a proper Situation on Land for him the Committee will not have any objection in Assigning him over.”¹⁴⁸ This does seem to suggest, as with the boys who “voluntarily offered” in 1809, that boys were able to decide, but the Clarke case was unusually clear in its insistence that “the Boy’s consent” was necessary. Shortly before, in December 1799, John Dickens wanted to leave the apprenticeship the Hospital had secured for him some years earlier:

John Dickins Apprentice to the Revd Edmund Cartwright aged eighteen Years having attended the Committee and expressed his desire of going to Sea under the Protection of Capt. Sir Charles Hamilton of the Royal Navy, and Mr. Cartwright being desirous to Cancel his Indentures.¹⁴⁹

What had happened between Dickens and Cartwright is not known, but it appears that Dickens not only made the decision to enlist but also found a berth; he duly joined the Royal Navy.¹⁵⁰ So, the archive offers examples of Foundling boys being sent to sea as punishment *and* instances of their *wanting* to go to sea and asking the Hospital to put them in such placements.

¹⁴⁷ Minutes of the General Committee, A/FH/K/02/034, 28 January 1818. *HMS Abundance* was a Royal Navy transport vessel from 1799 until 1823.

¹⁴⁸ *Ibid.*, A/FH/K/02/024, 6 August 1800.

¹⁴⁹ *Ibid.*, A/FH/K/02/023, 18 December 1799. In every other source, the name was spelt “Dickens.”

¹⁵⁰ Dickens was reassigned to a civilian employer, “to be instructed in his Business,” in May 1802. Apprenticeship Register, A/FH/A/12/003/002, 132.

Returning now to the story of 1809-13, this was the single period when the Royal Navy was a significant destination for Foundling boys. It took three (William Jones, Thomas Peel, and Edward Hodges) from the Hospital on March 28th 1810 and just three weeks later, on April 18, three more (Samuel Scatcherd, John Morrison, and John Jackson) enlisted.¹⁵¹ Asher Goldsmid, at 11, “Volunteered into his Majesty’s Naval Service on the 6th Sept 1810.”¹⁵² George Parsons, William Herries, John Arnold, and John Jones, “Volunteered into his Majesty’s Naval Service on the August 21st 1811.”¹⁵³ William Salt, John Shaw, and John Lancaster followed suit on November 25th 1812. Thomas Kinder, Thomas Abbott, Robert Eiley, and John Pigott enlisted on March 17th 1813, and William Hamilton, Thomas Brown, John Rose, and John Thomas “Volunteered into his Majesty’s Naval Service on the 15th Dec. 1813.”¹⁵⁴ Perhaps, at this late stage in the Napoleonic Wars, some Foundling boys were finally living up to the name “Orphans for Empire.”

As before, it is difficult in some cases to distinguish whether Foundlings went to the merchant marine or to the Royal Navy. John Proctor’s first placement (October 26th 1809) ended when he joined the Marine Society (date not given) in his second. Charles Pratt Living (who originally had gone to train as a shoemaker) and Joseph Lamb both entered the Marine Society in November 1810. But the records do not show if any of these boys were destined for the Royal Navy. John Warren, John Dyer, and John Poole were simply sent to “Sea” (“Unspecified Sea” in Figure 5).¹⁵⁵ For the purposes of this study, it is enough to note that the first confirmed cases of Foundlings being sent to the Royal Navy as a way to “be Useful to the Publick” occurred a full seventy years after Thomas Coram, allegedly “wedded to the creation of a fiscal-military state,” secured the Charter to establish the Hospital.¹⁵⁶

¹⁵¹ *Ibid.*, 153.

¹⁵² *Ibid.*, 154.

¹⁵³ *Ibid.*, 158.

¹⁵⁴ *Ibid.*, 160-61.

¹⁵⁵ *Ibid.*, 151 (Proctor), 154 (Living), 159 (Lamb). Admission Book, A/FH/A09/020/001, entries for Dyer (“Sea”), Poole (“Sea”), and Warren (“Sent to Sea”). Apprenticeship Indentures, A/FH/A/12/004/106 (Living).

¹⁵⁶ Berry, *Orphans of Empire*, 31.

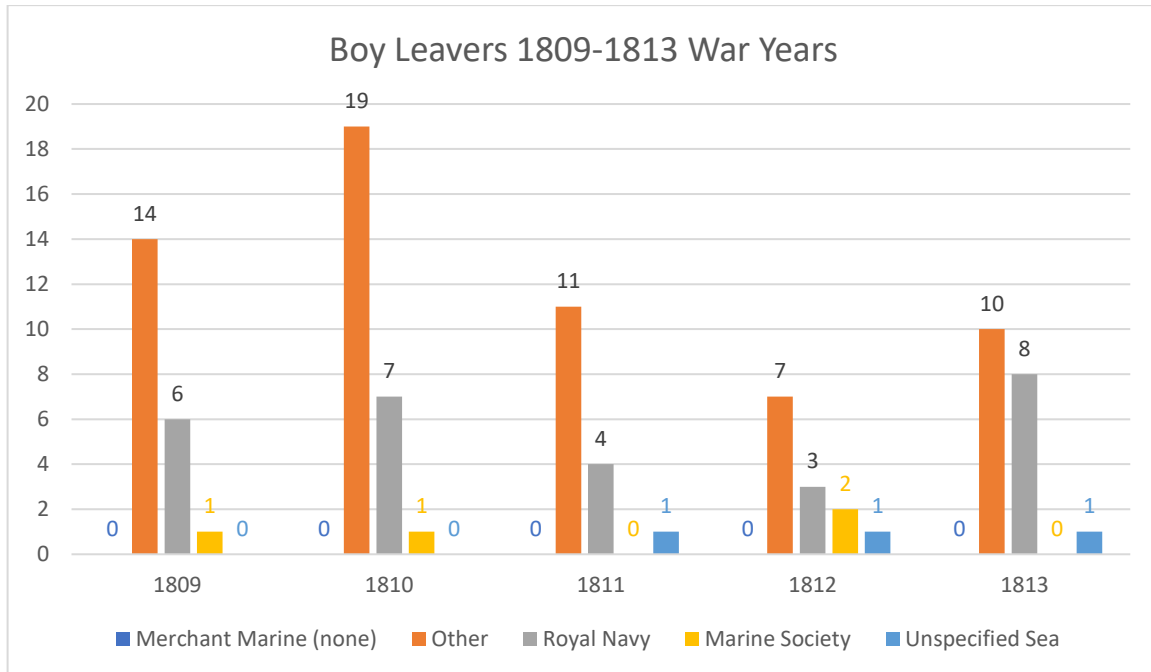


Figure 5: *Boy Leavers, 1809-1813 [Cohort 7]*

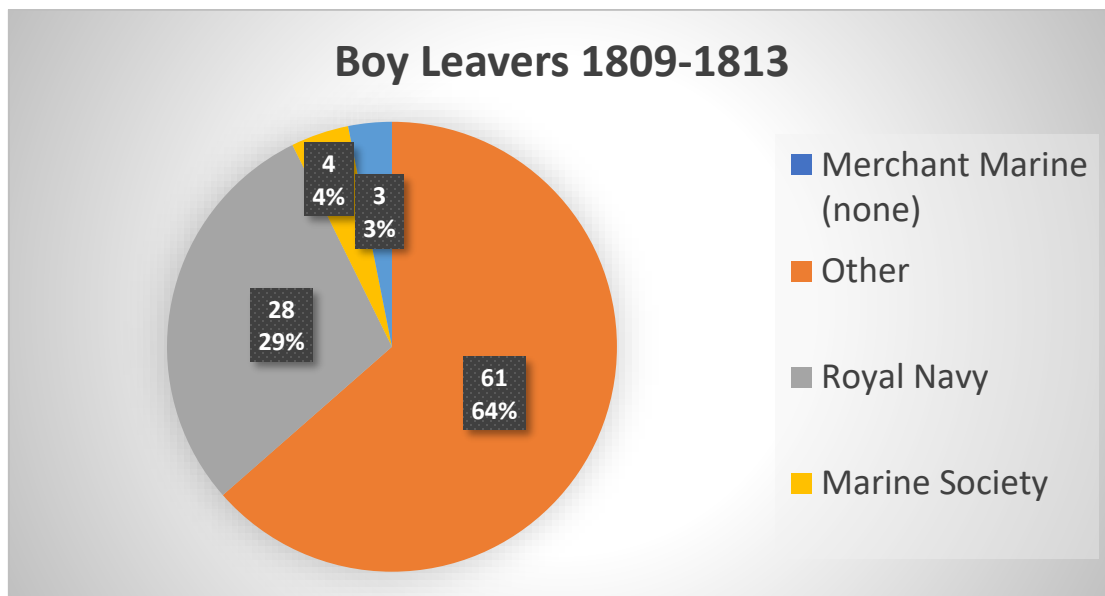


Figure 6: *Boy Leavers, 1809-1813 [Cohort 7]*

Between 1809 and 1813, 29 Foundling boys enlisted in the Royal Navy – 28 of the leavers of 1809-13, all going there straight from the Hospital, and one boy (Mayo) who went first to another placement in 1808. Though this was a minority of boy leavers, the surge towards the

Royal Navy was spectacular. This was no realisation of an underlying, latent commitment to the defence of Britain, after seven decades. Rather, the explanation of the change seems more likely to lie in the needs of the moment, the struggle against Napoleon. The shift did not survive the passing of that exceptional moment. In addition, it must be kept in perspective: by one estimate, between 1793 and 1815 the Marine Society sent 22,973 boys to the Navy.¹⁵⁷ The Marine Society was an institution forged to fill Royal Naval berths, but the London Foundling Hospital's contribution to Britain's naval strength was belated, transitory, and paltry.

Disentangling the Fiscal-Military State Thesis from the LFH

I will now step back from the chronological treatment of boys' careers to reflect on how the idea that the London Foundling Hospital was part of a fiscal-military state machine is perpetuated. An exhibition resulting from the publication of Berry's *Orphans of Empire* trumpeted the argument this dissertation rebuts and brought it to the attention of a wider public.

The Foundling Museum is an institution dedicated to the history of the LFH, inherently making it an authority on that history. Eileen Hooper Greenhill's 1992 work, *Museums and the Shaping of Knowledge*, studies the relationship between material culture research and British museology. Utilizing Foucauldian categories (the various stages of the structure of Western knowledge), Hooper-Greenhill examines the ways museums present visual culture objects with respect to their role as educational institutions. She constructs her arguments from postmodernism, feminism, educational theories, museum studies, and cultural studies. Her scrutiny of the National Portrait Gallery in London presents many valuable ideas relevant to this study, as they highlight how the power of museums – and the stories they tell – help form British national identity.

Museums produce discourses regarding the cultural significance of their collections via their selection, reception, classification, cataloguing and exhibition of objects. These constructed narratives mould collective memory and contribute to the ways in which societies deal with the past in the present. Moreover, these narratives help shape social, moral, political, and ideological

¹⁵⁷ Lloyd, *The British Seaman*, 171.

values. Thus, museums are not simply institutions of power, but also instruments of power.¹⁵⁸ Therefore, it is essential to ponder how the narrative discourse used in the Foundling Museum's *Fighting Talk* exhibition (October 15th 2021 to February 27th 2022) represented the Foundlings in this space of authority. The website for the exhibition claimed:

Through the lens of [George King's] extraordinary autobiography we looked at the origins of the Foundling Hospital – the UK's first children's charity – and the contribution it made to Britain's military and workforce in the 1700s. Using new research we expanded the story of the Museum towards a more inclusive global history, examining the realities of foundling apprenticeships and the impact that their labour had on Britain's transformation into a global super-power, and hopefully bringing you [sic] a new perspective to your understanding of Georgian society and the lives of its working-class citizens.

There are several problems here. Firstly, an argument could be made that the first children's charity in the UK was actually Christ's Hospital, established under King Edward VI in 1552, and not the LFH, which began 187 years later.¹⁵⁹ Secondly, this description aspired to use George King's account as the "lens" to "look at the origins of the Foundling Hospital," but one of the first plaques in the exhibition stressed that King's "vivid 'below decks' account of the battle [of Trafalgar] forms the centrepiece of the exhibition,"¹⁶⁰ seeming to link the Hospital's establishment in 1739 to the Royal Navy and imperial warfare of 1805. The same plaque made this link even clearer in its next paragraph: "George's story, like countless others, is deeply entwined with the wider history of the British Empire. A man of his time, George's views on Empire are revealed in his patriotism and pride in the Royal Navy..."¹⁶¹ It is true that "countless others" who served in the military were "deeply entwined" with the British Empire, but, considering the exhibition took place in the Foundling Museum, one could interpret this claim as applying to Foundlings, who, in fact, did not enter the military from the Hospital in the first half-

¹⁵⁸ Eileen Hooper-Greenhill, *Museums and the Shaping of Knowledge* (London: Routledge, 1992).

¹⁵⁹ Christ's Hospital was a charity that provided training and education to underprivileged children, financed by city businesses and the Church.

¹⁶⁰ *Fighting Talk* Exhibition, 2021-22, Foundling Museum, London, UK.

¹⁶¹ Ibid..

century of its existence. Also, King's "pride in the Royal Navy" is dubious upon reading his entire autobiography. To this reader, his love for confectionery and grog comes through more strongly than his pride in being part of the organization he was forced into by mere happenstance. Without doubt, the exhibition reflected the questionable fiscal-military-state-infused thesis in Berry's *Orphans of Empire*.

To its credit, the *Fighting Talk* exhibition confronted some of the problems linked to colonialism (e.g. slavery) and revealed the precarious nature of a former Foundling's life, with King forced to leave secure employment and then press-ganged with the help of "a cup of Grog." The exhibition also featured a striking apprenticeships map, created out of the same Apprenticeship Register this chapter has used, which "unexpectedly reveals many apprenticeships to rural places for agricultural work."¹⁶² However, one plaque on display, discussing Foundling William South, contradicted my finding that Foundlings only directly entered the Navy from 1809: "Unlike George [King], William joins the Navy directly from the Foundling Hospital. He is an officer's domestic servant, not an ordinary seaman."¹⁶³ In fact, William South went first to a tailor and "Breeches Maker" and then to a Chancery Lane stationer *before* joining the Navy.¹⁶⁴ William South did not enter the Navy directly and any suggestion that he did belies the important truth that Foundlings did not join the Navy from the Hospital at this time. This error compounds the problem created by the focus on King, the would-be confectioner, that the exhibition mistakenly ties the Hospital's history to British imperial and naval history. King's and South's stories, as misconstrued here, effectively support the spurious link between the LFH and the British Navy.

Finally, contemporary museum education venerates learning from 'real' objects at the museum as opposed to studying secondary source material, but some of the 'real' objects presented in the museum were themselves constructions. Earlier, this chapter noted how *Fighting Talk* linked the children's plain uniform to military garb, and it is appropriate to return here to that point. One plaque read: "George is issued with a uniform on returning from foster care. The boys' uniform is quite military in style, reflecting that *one of the arguments for establishing the Foundling Hospital is to save the boys to fight for their country*. The LFH uniform hardly

¹⁶² Ibid..

¹⁶³ Ibid..

¹⁶⁴ Apprenticeship Register, A/FH/A/12/003/002, 135 (South to tailor).

changes at all over nearly three centuries.”¹⁶⁵ The clothing on display includes a brown jacket with gold buttons and a red waistcoat, which do not resemble the military uniforms of the eighteenth century (see Appendix A for an image of the plaque and a photograph of the uniform on display). So, while the curators did subtly admit that the military goal was but “one argument,” their “military style” claim about the uniform is anachronistic. Moreover, as King and others went to the *Navy* and no Foundlings went to the Army until the 1850s, this argument would only apply if the uniform donned was naval blue and white.¹⁶⁶ Since most live-in charitable institutions had their inhabitants wear plain-coloured uniforms, perhaps the Foundling boys’ outfits simply reflected the institutional style of the day and there is no wider significance.

Museum presentations are often subtly persuasive in insinuating ways. As Hooper-Greenhill points out in her work on museums and their discourses, “The public display of these collections makes a visual narrative which naturalizes these underpinning assumptions and which gives them the character of inevitability and common sense.”¹⁶⁷ Reviews of the exhibition reproduce what many of the plaques considered here highlighted. For instance, Laura Porter asserts that the LFH was “the UK’s first children’s charity” and that the “military-style” of the uniform worn by the children “reflected the fact that many boys went on to fight for their country (the girls were trained for domestic service).” Then she drives home Berry’s thesis: “...we can see the contribution the Foundling Hospital made to Britain’s military and workforce in the 1700s and a new perspective to our understanding of Georgian society and the lives of its working-class citizens.”¹⁶⁸ The article goes on to discuss King’s participation in the Battle of Trafalgar and his other naval exploits, zeroing in on the imperial components of the exhibition. Reviews of this nature, more accessible to the public than any academic work, are reproducing the arguments that this study has disproved. But for now, back to what the Foundling boys did after they left the Hospital.

¹⁶⁵ *Fighting Talk* Exhibition. Emphasis added.

¹⁶⁶ See https://commons.wikimedia.org/wiki/File:Timeline_of_the_Royal_Navy_uniforms_%281787-1833%29.jpg for images of the British Naval uniforms over time.

¹⁶⁷ Hooper-Greenhill, *Museums*, 23.

¹⁶⁸ <https://londontopia.net/columns/lauras-london/foundling-museum-fighting-talk-one-mans-journey-from-abandonment-to-traffic/>

The Evolution of Boys' Apprenticeships in the Nineteenth Century

In 1814 and 1815, no Foundling boy entered either branch of the Navy directly and there is no evidence that anyone enlisted after working elsewhere. Soon, indeed, the Royal Navy's recruitment drive would be thrown into reverse, as victory was followed by demobilization: the strength of the Royal Navy was reduced to only 22,944 men within two years of Waterloo.¹⁶⁹ "Once again peace led to a mass payoff and seamen were said to make up the largest body of London's beggars."¹⁷⁰ Foundlings affected by demobilization had an alternative to the streets of London, namely a return to the Hospital to seek assistance. On September 13th 1815, for example, the General Committee considered the cases of three 1813 leavers, Thomas Brown, John Pigott, and William Hamilton, who were "returned from the Sea Service"; the Committee's decision to bring them to the Marine Society was nullified when the Admiralty authorized the Hospital to send all three "onboard H.M. Ship 'Iris' in the Thames" and they were "duly delivered."¹⁷¹ A week later, the minutes show that two others, Thomas Peele and John Jackson, had been "paid off by His Majesty's Navy" and the Committee resolved to approach the Navy "with a view to their being admitted into a Seagoing Ship" – but this recourse was stymied when the boys insisted that they "would not under any circumstances go onboard a Man of War."¹⁷² The following June, Thomas Abbott, who had enlisted with Pigott in 1813, was "discharged & paid off" from the Royal Navy; when the Admiralty ordered him to board "any of his Majesty's ships," he "refused to go."¹⁷³

It is likely that the feelings of the boys had a role in the Hospital's ceasing to be a provider of naval recruits. Those who "refused to go" may have chafed at the hardships of life in the Navy and the returnees possibly brought home to the Hospital's leaders the hazards and instability of careers at sea, and, of course, with peace the Admiralty no longer needed so many recruits.

¹⁶⁹ Lloyd, *The British Seaman*, 243-44. Alfred Course showed that the merchant marine suffered similar reduction. Alfred George Course, *The Merchant Navy: A Social History* (London: Frederick Muller, 1963), 198.

¹⁷⁰ Stephen Taylor, *Sons of the Waves: The Common Seaman in the Heroic Age of Sail* (New Haven and London: Yale University Press, 2020), 370-71.

¹⁷¹ Minutes of the General Committee, A/FH/K/02/033, 13 and 27 September 1815.

¹⁷² *Ibid.*, 4 October 1815.

¹⁷³ *Ibid.*, 5, 12 June 1816.

Whatever the reason, no Foundling entered the Royal Navy directly for the next 38 years (1813-1851).¹⁷⁴

Lawrence Stone notes that, by 1814, Britain had 250,000 men in the Army, but the London Foundling Hospital made no contribution to this figure.¹⁷⁵ Throughout the wars with France, from 1793 until 1815, not a single Foundling was sent to the Army, compounding the fact that none entered the Army in any of the eighteenth-century blocks of years examined in this study. This was not just because of the youth of the Foundlings when they were apprenticed. It has been estimated that “4,000 boys under 17 years of age and as young as 10 were with their units on the field” in 1815.¹⁷⁶ The Army now recruited from other institutions, notably the Royal Hibernian Military School (1770) and the Royal Military Asylum (1803), both set up to educate military orphans.¹⁷⁷ These orphanages “provided the army with a steady flow of boy soldier recruits” during the Napoleonic Wars; they developed into “military kindergartens” which colonels of regiments came to regard as “seedling beds from which a steady stock was to be drawn.”¹⁷⁸ *These* were the institutions from which orphans of Empire embarked on military careers.

The period between 1815 and 1854 was an age of peace for Britain, with only minor exceptions, mainly the recurrent difficulties in India and Afghanistan. Both the Army and the Royal Navy were much reduced in numbers and, not surprisingly, neither looked to recruit boys from the LFH. The Admission Book for these years has no reference to military outcomes until two boys received in March 1839 had their Army enlistment added to the record in 1853.¹⁷⁹ Twice yearly, the General Committee minutes included long apprenticeship lists and during all of the years 1814 to 1852 no boy was listed as going to the military, although a handful ended up there.

¹⁷⁴ Accounts of the harshness and injustices of life in the Royal Navy are legion, but Grant Uden provides a useful summary. Uden, *British Ships and Seamen*, 48-55.

¹⁷⁵ Lawrence Stone ed., *An Imperial State at War: Britain from 1689 to 1815* (London: Routledge, 2013), 24.

¹⁷⁶ A.W. Cockerill, *The Charity of Mars: A History of the Royal Military Asylum, 1803-1892* (Coburg, Ontario: Black Cat Press, 2002), 29. Cockerill, *Sons of the Brave*, 93.

¹⁷⁷ Cockerill, *The Charity of Mars*, 67-69.

¹⁷⁸ Cockerill, *Sons of the Brave*, 95. Cockerill calculated that in the years between 1803 and 1892 47% of RMA boys joined the Army. Cockerill, *The Charity of Mars*, 179.

¹⁷⁹ Admission Book, A/FH/A/09/020/001, Daniel Sharp and John Rabnett, “Army 26 Aug. 1853.” Two older boys went to the Navy in 1851 (Samuel Edwards) and 1852 (Richard Hopkins), but their destinations were not recorded in the Admission Book. *Ibid.*, 29 October 1835 and 14 April 1837, dates of birth of Hopkins and Edwards. Apprenticeship Register, A/FH/A/12/003/003, 2. Minutes of the General Committee, A/FH/K/02/052, 6 April, 5 October 1850, 11 February, 12 June 1852. A/FH/A/006/007/085/135, Report by Twiddy, [December] 1853.

In the block of years chosen to represent this era of peace, the Apprenticeship Register confirmed the indifference to military outcomes: between 1833 and 1837, no boy went directly to the military, although four boys who left in 1833-37 subsequently joined the Army. The entry for Hugh Hake had him going into the “Counting House” of a “Dairyman” on November 26th 1836; John Francis went to a tailor “to be instructed in his business” on August 31st 1837; and John Dennis entered domestic service (“Household Business”) with a surgeon on November 27th 1837 – but in all three cases the single word “Soldier” was added to the register *later*. The usual form of words – “Assigned by new Indentures” – was not used, so it is not clear if the Hospital had a part in these proceedings.¹⁸⁰ John Tomlinson was described as “a Private in the 62nd Regiment” in the General Committee minutes for March 3rd 1841.¹⁸¹ He was apprenticed to a Holborn furrier on August 23rd 1836, but he evidently enlisted in the Army at some point in the next five years, again with no sign of involvement by the Hospital.¹⁸² When they left the Hospital, all four of these boys were at least 14 years old, the standard age of apprenticeship for boys after 1815.

Curiously, no boy went directly to the merchant marine for more than four decades. The Apprenticeship Register for 1833-37 contains a single example of a boy who went to sea: John Furse went into domestic service in December 1837, but he was “Assigned 3 Dec. 1839” to a “Mariner” in distant Cornwall, to be instructed “in his business.”¹⁸³ A sizeable number went in the mid-1830s to be fishermen, mostly in Essex, but a fisherman (a “smack owner”) is not a merchant and these boys cannot be seen as entrants into the merchant marine.¹⁸⁴

The picture was to change radically in the 1850s, when numerous boys started entering the military again, but this development had nothing to do with ideas about the Hospital’s usefulness to Britain and the Empire. In 1847, Brownlow established the Foundling Hospital Boys Band. He seemingly did so with no intention to equip boys for military careers: he told the Governors that the band would improve the “moral discipline” of the Hospital, that bands in other institutions had had “a softening influence upon the temper and conduct of the children, besides opening to them additional means of mental recreation.” The prospect of “profitable employment in

¹⁸⁰ Apprenticeship Register, A/FH/A/12/003/002, 210.

¹⁸¹ Minutes of the General Committee, A/FH/K/02/046, 3 March 1841.

¹⁸² Admission Book, A/FH/A/09/020/001, 28 May 1819. Apprenticeship Register, A/FH/A/12/003/002, 208.

¹⁸³ *Ibid.*, 210.

¹⁸⁴ *Ibid.*, 201-07.

afterlife” arose, he felt, from the fact that musicianship would give the boys “a double means of living. We are becoming (if we are not so already) a *musical* people, and it is a fact that instrumental performers, engaged at concerts and elsewhere, are all (the principals excepted) filling other occupations during the day.”¹⁸⁵

In short order, however, the Band was producing trained musicians who were wanted for ships’ bands in the Royal Navy and regimental bands in the Army. The two who joined the Royal Navy in 1851-52, Samuel Edwards (clarinet, “Entered HM Naval Service on Monday the 23rd Sept. 1851, on board the Flag Ship London”) and Richard Hopkins (clavicorn, retained by the Hospital for further music instruction until June 1852, when he was sent to *HMS Monarch*), proved to be the first of many.¹⁸⁶ For the first time in its history, the Hospital sent boys directly to the Army: three Band members were recruited into the band of the 38th Regiment of Foot in August 1853, Daniel Sharp and John Rabnett, both 14, and Augustus Browne, who had gone in 1852 to be a furrier before switching to the Army at 14 years and 11 months. Four Foundling boys went together to a Royal Navy ship, the *Princess Royal*, at Portsmouth on February 14th 1854. Samuel Dalton and George Diplock, the first directly, the second after some months with a pawnbroker, joined the band of the 18th Regiment (Royal Irish) on March 15th 1854.¹⁸⁷ Dalton was 14 years and 4 months old and 4 feet 10¼ inches tall, and he weighed 7 stone 2 pounds (100 pounds). Henry Graham, whom Brownlow sought to send with Dalton, was a full year younger at 13 years and 4 months and he stood at only 4 feet 6½ inches, a “very thin but a healthy boy,” weighing just 5 stone 2 pounds (72lbs). Offering them to a regiment in February 1854, Brownlow wrote that, “These two boys are desirous of entering and our medical man does not see any reason why they should not do for the service.” The Army found that Graham was “below the prescribed Age for admitting Boys into the Army; therefore, his Enlistment cannot be sanctioned until he has completed his 14th Year.” Dalton was paired with Diplock (almost 15

¹⁸⁵ John Brownlow, A Letter to the Treasurer of the Foundling Hospital on the Expediency of Forming an Instrument Band, from amongst the Boys of the Hospital, 5 February 1847, in A/FH/A/06/020/008, 15-16.

¹⁸⁶ Apprenticeship Register, A/FH/A/12/003/003, 2, Edwards. Minutes of the General Committee, A/FH/K/02/052, 12 June 1852, Hopkins. Reports, A/FH/A/006/007/085/135, Report by Twiddy, [December] 1853.

¹⁸⁷ Minutes of the General Committee, A/FH/K/02/052, 13 August 1853. Letterbook, A/FH/A/06/002/012, 26, Brownlow to Lt. Col. Sparks, 15 August 1853; the boys “are most anxious to enter the Service.” Apprenticeship Register, A/FH/A/12/003/003, 3, 8, 9.

years old) instead and Graham remained at the Hospital.¹⁸⁸ This tale demonstrates that it was indeed possible for Foundling boys to enter the Army upon leaving the Hospital, but there was no sign that the Governors (or possibly the Army, or the boys) wished to pursue this course at any point in the Hospital's first hundred years of operation.

Once the boys' band was up and running, the Hospital's leaders were fully aware of the opportunities and, as Brownlow showed with Graham and Dalton, were keen to promote them. In August 1853, on behalf of the General Committee, Brownlow told the Admiralty that "from time to time several of the Boys of this Establishment are desirous of entering Her Majesty's Naval Service" and asked that this should be facilitated.¹⁸⁹ On March 4th 1854, the General Committee resolved that, "The establishment of a Juvenile Band from amongst the Boys of this Hospital having been attended with important advantages in affording opportunities of placing them in Her Majesty's Naval Service as well as in the Army, and its being the opinion of this Committee that it is expedient to extend these advantages as much as possible."¹⁹⁰ Keen to join the military bands, as Brownlow noted, the boy musicians embraced the idea that a way into the adult world had been opened to them. But there was no hint of the bugler's call to arms: the talk was of expediency and advantages – viable careers – and not of duty to queen and country.

¹⁸⁸ A/FH/A/006/007/086/128, Report by Reine (Steward), 24 February 1854; *ibid.*, /129, Boys who wish to enter the Army or Navy [1854]. Letterbook, A/FH/A/06/002/012, 110, Brownlow to Kennedy, 24 February 1854. Secretary's Correspondence, A/FH/A/06/001/112/010, Kennedy to Brownlow, 3 March 1854. Graham was apprenticed two years later to a gas fitter. Apprenticeship Register, A/FH/A/12/003/003, 12.

¹⁸⁹ Letterbook, A/FH/A/06/002/012, 21, Brownlow to the Secretary of the Lords Commissioners of the Admiralty, 4 August 1853.

¹⁹⁰ Minutes of the General Committee, A/FH/K/02/053, 4 March 1854.

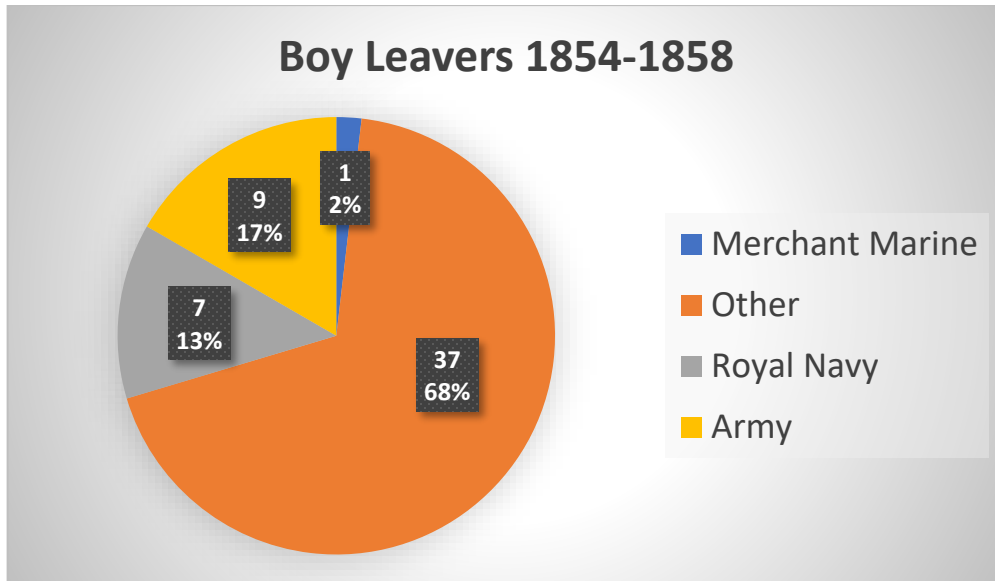


Figure 7: Boy Leavers, 1854-1858 [Cohort 9]¹⁹¹

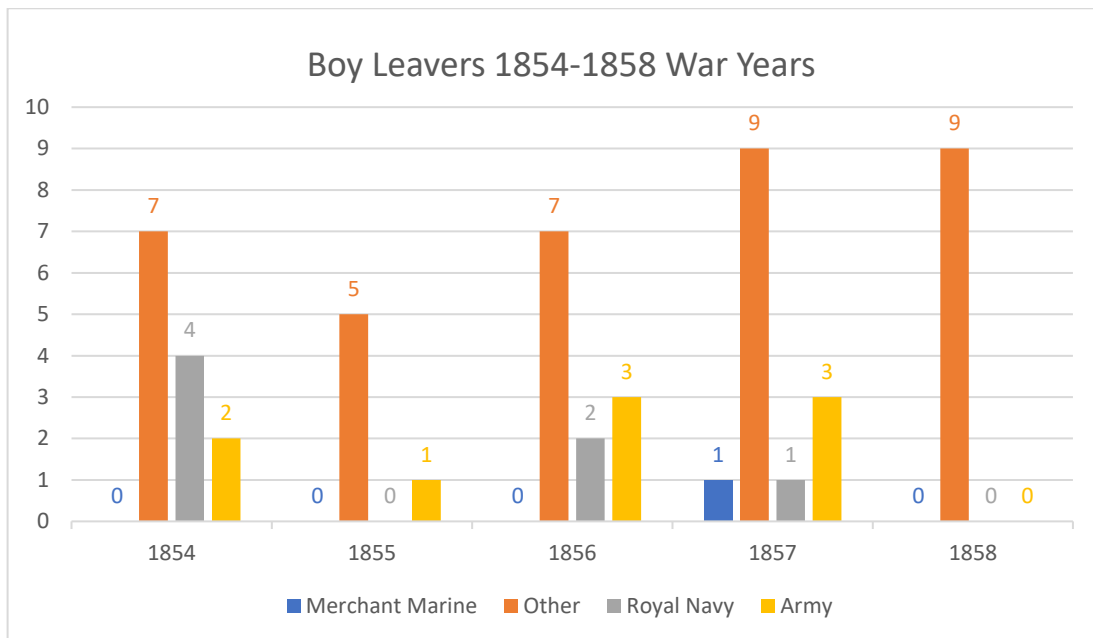


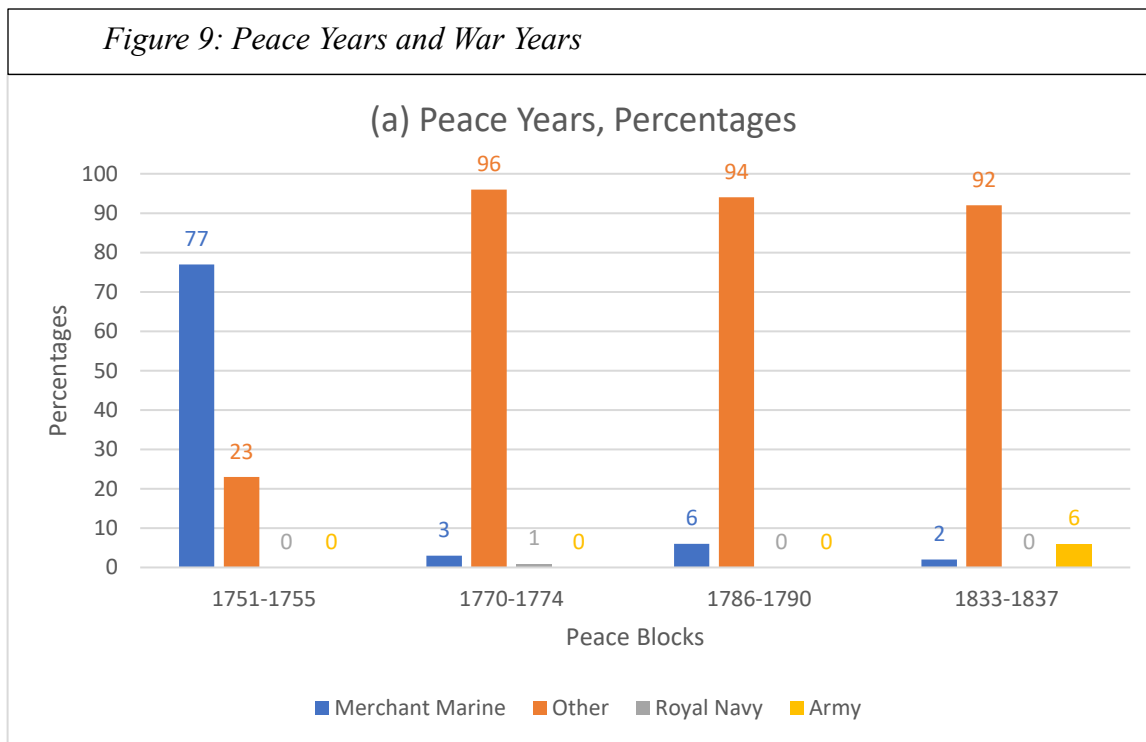
Figure 8: Boy Leavers, 1854-1858 [Cohort 9]¹⁹²

¹⁹¹ The three boys who entered the Marines in 1856 (2) and 1857 (1) have been allocated to the Royal Navy, of which the Royal Marines were a part.

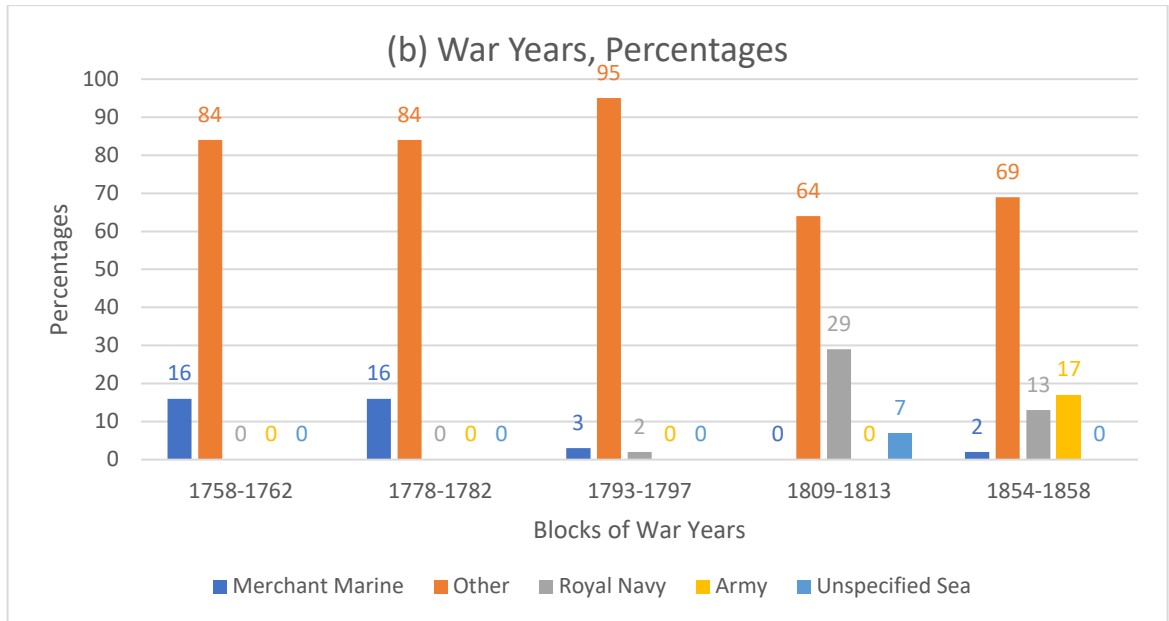
¹⁹² The three who entered the Marines have been allocated to the Royal Navy.

The Secretary acknowledged the transformation. In May 1855, Brownlow’s report on the “Objects of the Charity” stated that, “The Girls at the age of 15 are invariably placed out as Servants and the Boys at the age of 14 generally as Mechanics, but lately many of them [the boys] have Volunteered into Her Majesty’s Service as Soldiers & Sailors...” In April 1856, the report differed slightly: “The Girls at the age of 15 are generally placed out as Servants and the Boys at the age of 14 as mechanics or in Her Majesty’s Service as Soldiers & Sailors.”¹⁹³ The implication of an equality between the civilian and military vocations is misleading, but the report in 1856 shows the direction of travel: boys were now entering the military in significant numbers.

* * * * *



¹⁹³ Letterbook, A/FH/A/06/002/012, 239, 347, “Objects of the Charity,” May 1855 and April 1856.



The statistics for the boy leavers, expressed as percentages, are presented above for the blocks of years chosen for this study, with the peace blocks (a) separated from the war blocks (b). The war-years blocks tell a compelling story. The second half of the eighteenth century saw Britain involved in three major wars, the Seven Years War of 1756-63, the American War of Independence of 1775-83, and the French Revolutionary Wars of 1793-1802. Given this, the fact that the Hospital provided almost no recruits to the armed forces in these years is remarkable, vitiating Helen Berry's contention that the Hospital was intended to bolster those forces and further Britain's imperial mission.¹⁹⁴ If the second part of this sentence accurately describes one of the founders' goals (which has been questioned by this study), it was a goal which was unmet, and there was no apparent *attempt* to achieve it. In the nineteenth century, the enlistment of Foundling boys in the armed forces confirms that the occurrence was not inconceivable, but a development beginning almost seventy years after the Hospital opened cannot be seen as the fulfilment of an original intention. Rather, the enlistment of numerous boys in the Royal Navy stemmed from the exigencies of the war with Napoleon, and was discontinued with his defeat. The second surge, in the 1850s, coincided with two intense conflicts, when the needs of wartime

¹⁹⁴ Berry, *Orphans of Empire*, 4.

stimulated the Army's and Navy's hunger for young men, but it was another contingent circumstance, the founding of the Hospital Band, which prompted the change in the first place and ensured that it persisted long after the return to peace.

The warfare of the 1850s, when the Indian Mutiny of 1857-58 followed the Crimean War of 1854-56, caused an expansion of Britain's armed services, but the surge in enlistment of Foundling boys began when Britain was still at peace and was destined to continue after these conflicts ended. For many decades afterwards, until the 1920s, the Army in particular was a major destination for the Hospital's band boys. Finally, over a century after the first Foundlings departed, the Governors consistently chose military careers for the boys and the Hospital became a feeder-institution of the British Army.¹⁹⁵ This transformative change was the unforeseen result of the creation of the boys' band, perhaps justifying Nichols and Wray in their conclusion that, "It may, perhaps, be said that the formation of the Foundling Boys' Band was the most important development of the activities of the children during the nineteenth century."¹⁹⁶

What happened between 1809 and 1813, and again between 1853 and 1858, speaks volumes, simply because the contrast is so striking, about what did *not* happen in the first seven decades of the Hospital's existence. The four peace-years blocks (Figure 9 (a)) reinforce this picture. For over a century, from 1751 until the 1850s, when the Band altered the dynamic, the peace years studied here saw little interest in military careers. No boys entered the military directly during these years and only a handful did so in second placements: one 1770 leaver later joined the Navy and four 1836-37 leavers went on to become soldiers. The first peace block (1751-1755) was very different from the others, with its strong focus on careers in the merchant marine, but this was a fleeting phenomenon, and it did not involve strengthening the armed forces. Being involuntarily press-ganged into the Royal Navy befell less than a handful of Foundlings, including George King, a young man who had shown more devotion to confectionery than to "Britain's imperial mission." Needless to say, this was not an outcome he sought and King's seizure reveals nothing about what the LFH willed for him or any other boy.

The Hospital's leaders were not motivated by imperial aims in the way that some histories have argued. It must be acknowledged that the Hospital's *usefulness*, for economic and military

¹⁹⁵ Education of the Children in the Foundling Hospital 19th century: Foundling Museum/U3A Shared Learning Project, 2010. *Foundlings at War* (iBook, 2014), 36.

¹⁹⁶ Nichols and Wray, *History of the Foundling Hospital*, 321.

ends, figured in the mixture of motives entertained by at least some of the founders and early leaders, and it is highly likely that Jonas Hanway was not the only Governor who had an interest in promoting Britain's military capability. But compassion for suffering children was the dominant factor in the language of the primary sources, especially those produced by Thomas Coram. And in subsequent decades neither the activism of Hanway nor the pressures of war gave rise to a military role for the Hospital.

When outcomes are considered, the course that the Governors actually followed, I can state conclusively that its military ramifications had no relevance to the proceedings, policies and any manifestation of *purpose* of the London Foundling Hospital. The boys did not go out to serve the Empire, except very briefly as merchant seamen. The current historiographic and popular understanding detracts from the simple truth that the Hospital was founded and run by men of compassion and Christian benevolence. The next chapter will elucidate the strength of their paternalism and present a new concept, "institutional paternalism," that better encapsulates this motivation of the Governors.

Chapter Two

Institutional Paternalism at the London Foundling Hospital

The London Foundling Hospital was a benevolent institution offering care and support to children who would otherwise have had little hope of survival. Its early years were marked by a sense of paternalism in the classic sense, even though it was large, structured, businesslike, and urban, unlike the relatively small and fleeting amateur charities of traditional English paternalism, as discussed in David Roberts' seminal work.¹⁹⁷ This paternalistic attitude was reflected in the language used to describe the Hospital's mission, which was to "provide for the maintenance and education of exposed and deserted young children," as well as in the actions of the Governors. Nevertheless, in the eighteenth century, their conduct was often erratic; the rules of the Hospital could be bent or overlooked on a Governor's whim; there were lots of 'exceptions.' The Hospital's upper administration cemented in the nineteenth century when the Governors increasingly adhered to systematic, bureaucratic procedures, including orderly and predictable admission practices.

The ideology of paternalism that underpinned the Hospital's undertaking was shaped by the social and cultural context of the time. Paternalism was a defining characteristic of English social relations, a product of a historically specific class structure. The Hospital was founded by mostly wealthy philanthropists who saw it as their duty to provide for the less fortunate members of society. Although other writers take a different line, the LFH can be viewed as a manifestation of the paternalistic attitudes prevalent in eighteenth-century England.¹⁹⁸ To distinguish between the paternalism of the shires and that of a major urban charity like the LFH, this study will present the concept of "institutional paternalism," the ethos of the Hospital from the beginning,

¹⁹⁷ David Roberts, *Paternalism in Early Victorian England* (London and New York: Routledge, 1979).

¹⁹⁸ Paternalism is not without its critics, however. Abuses occurred in children's agencies, when children were often subject to harsh discipline and neglect. Others have argued that the ideology of paternalism was a form of oppression which reinforced the existing power structures in society and denied agency to those who were dependent on others for their welfare. For example, Michel Foucault, bell hooks, Gayatri Chakravorty Spivak, and Antonio Gramsci critique paternalism as a mechanism that upholds power structures and limits the autonomy of marginalized groups. Nevertheless, the LFH remained a significant institution of philanthropy and care in England for over two centuries.

although it transforms into a much more bureaucratic and selective paternalism after 1800, when it begins to adapt to the changing social milieu.

The first chapter of this dissertation demonstrated that, for some historians, the ‘feeding the empire’ idea has trumped the ‘saves lives/souls’ motive for the LFH’s founding. It started to make a case that the latter reading was actually more cogent; that the paternalist ideals and actions of the LFH Governors showed how they cared for the children to a greater degree than some historians acknowledge. This chapter will elaborate on this point and illuminate the ways in which the Georgian-Victorian institution acted as surrogate parents to the children in their care. Initially, it will present instances of Thomas Coram’s paternalism to challenge Helen Berry’s claim that the founder adhered to the Fiscal-Military State thesis, as outlined in the first chapter. It will then explore how other Hospital leaders also exhibited paternalistic tendencies, shedding light on the multifaceted nature of their motivations, and offering an alternative perspective to the notion of using children in charities as pawns for national purposes; however, there are some risks to this method.

It is important, in discussing paternalism, to recall Hayden White’s word of caution, noticed in Chapter 1, regarding oversimplification in analysis of causation. To focus on paternalism alone is to risk underestimating the importance of other factors, overlooking both the likelihood that diverse motives were present within the institution and, indeed, within individuals, and the possibility that some motives were more important at certain times than at others. Such considerations must be kept in mind when making comparisons. However, this chapter, unlike the first, is not intended as a comparative treatment. It will concentrate on the evidence of paternalism, while mindful that paternalism was not the only factor that influenced the men who created and shaped the LFH.

Before the deep dive into the history, it is important to qualify terms. While definitions for “paternalism” vary widely, this dissertation takes paternalism to mean an attitude “typical of or like a father.”¹⁹⁹ In this way, paternalism applies the model of family relations (fatherly protection, tutelage, and control) to relationships between classes of people understood as unequal, in this study encompassing the asymmetrical set of obligations and rights between

¹⁹⁹ Cambridge Advanced Learner's Dictionary & Thesaurus © Cambridge University Press. (<https://dictionary.cambridge.org/dictionary/english/paternal>).

Hospital Governors and the mothers and children.²⁰⁰ There was asymmetry in power because the mothers felt compelled to seek assistance from the Hospital. Many faced destitution if they tried to keep their children; as Tim Hitchcock put it, “if you were poor there was not much chance of [surviving] being a single mother in eighteenth-century London.”²⁰¹ Even if better off, unwed mothers felt that the stigma of illegitimacy gave them no choice but to give up their baby.²⁰²

Later, a new phrase – “institutional paternalism” – will be presented and, building on the work of previous scholars, posited as a specific kind of paternalism that was developed by the Governors of the LFH (and could potentially be applied in certain ways to other charitable institutions that exhibit the same features). This dissertation shows how the LFH was the embodiment of paternalism – a prime example, even if, perhaps, it was only truly unique in its longevity, surviving from the age of mercantilism through to the era of *laissez-faire* and beyond, from the time of the Elizabethan Poor Law to long after the New Poor Law of 1834. Because this work covers such a long span of time (1730s to the 1860s), it reveals the evolution of paternalism alongside the corresponding shifts in Hospital policies, and it asks how much the great changes in admission procedures were ‘paternally influenced.’

Although, traditionally, paternalism has been perceived as a parochial philosophy, its popular discourse seeped into the LFH’s urban world. As shown below, most Governors were middle-class people who had imbibed traditional-elite paternalism as part of the dominant discourse and absorbed its views about the duties of a gentleman and of property. London was in fact *not* anti-paternalist, for it was not immune to the paternalistic zeitgeist of the age. Prosperous residents’ acceptance of responsibility for entirely dependent Foundlings meant that paternalistic thinking was invoked at the LFH.

As the previous chapter refuted the idea that Coram’s motives for starting the charity were mainly imperial, this chapter will offer an alternative interpretation of Coram, namely that he was a benevolent paternalist, and it will show that future operations at the Hospital were often paternalistic, from the time of Coram to the 1860s. However, it will become clear that this

²⁰⁰ Michael J. Jarvis, “The Binds of the Anxious Mariner: Patriarchy, Paternalism, and the Maritime Culture of Eighteenth-Century Bermuda,” *Journal of Early Modern History* 14, 1 (2010), 79 (fn 6).

²⁰¹ Tim Hitchcock, “‘Unlawfully Begotten on Her Body’: Illegitimacy and the Parish Poor in St Luke’s Chelsea,” in Tim Hitchcock, Peter King and Pamela Sharpe, (eds.), *Chronicling Poverty: the Voices and Strategies of the English Poor, 1640-1840* (Basingstoke and London: MacMillan, 1997), 77–78.

²⁰² And, obviously, in the case of children who were accepted into the institution, they had no agency in the choice.

interpretation requires an extension of the concept of paternalism developed by David Roberts. The Victorian population boom was characterized both by a sense of progress and by continuing crises and moral questioning, which changed the nature of paternalistic charity, even when much of society adhered to older paternalist rhetoric.

Roberts (1979) begins his text by stating, “In early Victorian England, no social outlook had deeper roots and wider appeal than that which twentieth-century historians call paternalism.”²⁰³ In his 2002 book, he adds, “although the emergence of a *laissez-faire* vision was a decisive and significant event it was not revolutionary: paternalism continued a strong part of the social outlook after 1830...”²⁰⁴ At the turn of the nineteenth century, paternalism – expressed in sermons, pamphlets, novels and speeches, the guidance of bishops, the rulings of judges, and the declarations of editors – addressed the dreadful conditions suffered by men, women, and children in the factories, mines, and slum housing of the Industrial Revolution. London, though not one of the new industrial cities, also grew rapidly and saw widespread and harrowing poverty. The LFH was one of the charities that rose to the challenge. It did so with an institutional paternalism that was hardened in a number of ways (shown in the next two chapters).

Paternalism was sometimes more rhetoric than reality. Roberts points to a mixed picture: many landowners were “niggardly” and selfish, but others “fulfilled faithfully the paternal duties of land.”²⁰⁵ He claims, moreover, that paternalism went into rapid decline from 1844, “its apogee,” both as literary fashion and as a factor in politics.²⁰⁶ Paternalism and its rhetoric allegedly gave way to the idea of *laissez-faire*, which became embedded in the Victorian consciousness. Martin Daunton has shown, however, that paternalism remained an active force in mid-nineteenth century Britain.²⁰⁷ A comprehensive assessment of the wider relevance of paternalism is beyond the scope of this dissertation, but it will be shown that paternalism still prevailed at the LFH: the Hospital’s durability and vitality will be presented as evidence of the continuing strength of paternalism. The LFH emerged as a stronghold of paternalism even as the

²⁰³ Roberts, *Paternalism*, x.

²⁰⁴ Roberts, *The Social Conscience of the Early Victorians* (Stanford: Stanford University Press, 2002), 1.

²⁰⁵ Roberts, *Paternalism*, 130, 134, 142-43.

²⁰⁶ *Ibid.*, 244.

²⁰⁷ Martin Daunton, *Progress and Poverty: An Economic and Social History of Britain 1700-1850* (Oxford: Oxford University Press, 1995).

current *zeitgeist*, reflecting *laissez-faire* ideas, aimed at resolving social issues through economic expansion and failed to hone paternalistic thinking into philanthropic action.

Historiography

I will now give a brief overview of the historiography in order to situate this argument in the broad context of previous work. D. S. Allin shows how, in the eighteenth-century, “Charity, Humanity, Patriotism and Oeconomy [might] be made to go Hand-in-Hand” since both the individual and the nation would “benefit from well thought out schemes and that this mixture of philanthropic, economic, and patriotic motives seems to have inspired many of the new charities of the eighteenth century, including that of the Foundling Hospital itself.”²⁰⁸ Although the balance between “Charity” and “Patriotism” is not spelt out, Allin agrees with the main contention of this study: most of those who subscribed to the London Foundling Hospital, or to any of the new charities founded in the eighteenth century, were motivated by a wish to alleviate the suffering of others.²⁰⁹ There is no question that Coram, like other prominent philanthropists of the age, was inspired by patriotic, religious, and humanitarian motives, but this dissertation will show that Coram’s motives are better placed under a paternalist umbrella, rather than an imperial one.

Gillian Wagner’s biography of Thomas Coram was published in 2004, coinciding with the opening of the Foundling Museum. Wagner asserts that Coram emerges as “a man of startling integrity in an age of corruption, a man prepared to use his own limited resources to gain his objects, with little expectation of personal reward apart from the satisfaction of having contributed to the public good.”²¹⁰ Wagner shows that, as well as founding the Hospital, Coram was closely involved in philanthropic endeavours in the American colonies. In her accounting for all of these activities, Wagner’s perception of Coram is more paternalist than imperial. For

²⁰⁸ D.S. Allin, “The Early Years of the Foundling Hospital, 1739/41-1773,” (Unpublished thesis, 2010), 42.

²⁰⁹ Allin, “Early Years,” 33.

²¹⁰ Wagner, *Thomas Coram*, op. cit., 4.

Wagner, Coram's "remarkable disinterested selflessness and generosity of spirit shone through" his public life and his correspondence.²¹¹

Claire Phillips' article (2019) discusses how Foundlings were cared for from 1741 until 1834 and argues that the children admitted to the LFH were given opportunities in life that they might not otherwise have obtained.²¹² She chronicles the children's journeys through the Hospital, from admission to their eventual discharge (through death or apprenticeship) or, more rarely, their continued residence at the institution. In line with the findings here, Phillips shows how the Hospital strove to give the Foundlings more dignity than workhouse or street children had, despite their equally humble origins. Indeed, by ensuring that most of the Foundlings' formative years were spent in a rural, familial atmosphere (with a wet nurse), and by working to keep the children healthy, fed, clothed, educated, and apprenticed, the Hospital was not only well-intentioned, but also effectively run. It constantly "aimed to achieve a better [future] for its children."²¹³ This chapter will expand on the Governors' concern for the children's well-being, demonstrating the lengths they went to to ensure that the Foundlings obtained the same advantages that parents would want to secure for their own children. In other words, it will be shown that the paternalism that this study attributes to the *purpose* of the Hospital infused many of its everyday practices.

Michael Ignatieff's book *A Just Measure of Pain: The Penitentiary in the Industrial Revolution, 1750-1850* (1978) questions the role of humanitarian motives in British social reform. Ignatieff uses, instead, an explanatory model based on social control, a sociological concept introduced into historical studies in the 1970s. Simply put, social control specifies what 'ought' to be in society. It also defines deviance, or what ought *not* to be; in other words, social control and its discourses establish the norm. This happened in conjunction with the state's growing concern about population growth and the threat apparently posed by the alienated poor. For Ignatieff, these changes meant that philanthropy could no longer be considered as a neutral vocation for disinterested humanitarians; philanthropy became instead a political act "to address

²¹¹ Ibid..

²¹² Claire Phillips, "Child Abandonment in England, 1741–1834: The Case of the London Foundling Hospital," *Genealogy* 3, no. 35 (2019), 1.

²¹³ Ibid..

the needs of those who rule.”²¹⁴ While this study accepts these assertions about social control, it does not question the humanitarian, or paternalistic, impulse to help children. As Ignatieff admits, “it would be denigrating to the obvious moral concern of the reformers to interpret [it] as a calculated political gesture.”²¹⁵

Ignatieff’s analysis of a larger strategy by the dominant classes to exert social control over the poor and disadvantaged has no relevance to the changes that occurred at the LFH. Despite Ignatieff’s claim that penitentiaries, factories, schools, asylums, and workhouses all “marched to the same disciplinary cadence,” the LFH actually had the capacity to remain true to its paternalist purpose at the same time as adjusting its admissions policy to reflect a changing moral atmosphere.²¹⁶ In society generally, paternalism (previously able to keep order in a stable, hierarchical society of small, face-to-face communities) proved unable to cope with the new social context that, in the eighteenth and nineteenth centuries, saw population explosion, urban growth, and the emergence of a national market economy characterized by class antagonism and the cash-nexus. However, those running the LFH had a small, well-controlled space to continue practising and embedding paternalistic ideals into their policies, even if their paternalism changed and a more rigorous and disciplined form (institutional paternalism) emerged.

Donna Andrew’s influential work, *Philanthropy and Police* (1989), shows how England’s accumulation of global-military, commercial, and colonial power shaped the establishment and promotion of charity at home, in the long run influencing the paternalist attitudes developed in the Victorian era. She shows that, in the period 1770-1820, philanthropists moved to favouring the moral reform of those in need of assistance, in response to the unnerving impact of urbanization and the loss of the American colonies. Andrew contends that the successful development of maternity hospitals for the poor, charities assisting orphaned girls to survive and marry, and homes for penitent prostitutes must be attributed to benefactors’ shared religious and political conviction that unfortunate London women should be encouraged to live virtuously, find suitable husbands, produce children, and fulfil their “natural obligation to the nation.”²¹⁷ I

²¹⁴ Michael Ignatieff, *A Just Measure of Pain: The Penitentiary in the Industrial Revolution, 1750-1850* (New York: Pantheon Books, 1978), 153.

²¹⁵ *Ibid.*, 164.

²¹⁶ *Ibid.*, 215.

²¹⁷ Andrew, *Philanthropy and Police*, op. cit., 120-21.

would add that the move to moral reform also stemmed from the infiltration of a didactic, melodramatic fallen-women discourse into the zeitgeist of the era.

Andrew maintains that benefactors' growing preference for active over testamentary giving – the desire to exercise their discretion and assure that their money was well-spent – derived from modifications to an older moral economy. This will be demonstrated by looking at the administrative changes to the Hospital in the late eighteenth and early nineteenth centuries. It will be argued that a woman's respectability became so important that it began to impinge upon, then later subvert, Coram's main motive to save children's lives.

The aforementioned works highlight how difficult it is to measure motive. Andrew and others are excellent on the ideologies of charitable endowment, but it is famously difficult to show the connection between moral exhortation and practical action. The first chapter uses quantitative data as much as possible to support qualitative claims about the leaders' motives. This chapter relies heavily on the primary sources created by the institution itself; the words of Coram and his successors were redolent of the spirit of paternalism.

Thomas Coram's Paternal Beneficence

The London Foundling Hospital may have been managed by a group of Governors who made decisions about its policies and operations, but it was Thomas Coram alone who not only ensured the Hospital was founded, using his own time and money, but who became a revered icon for many of those connected to the Hospital for more than two centuries of its existence.²¹⁸ For decades after his death, Governors and administrators would claim that the decisions or amendments they advanced were in line with the founder's intentions or the "spirit of the Charter," although his ideas were often taken out of context or distorted to suit some new aim (including the occasional promotion of the fiscal-military state).

Coram and his petitioners, I have argued, were motivated more by benevolent paternalism than by any desire to promote the military and imperial interests of their country. It is necessary

²¹⁸ Coram worked tirelessly for over a decade to secure enough support for a Charter. Then he paid over £200 in legal fees to inaugurate the Charter (and it was "hard to raise"). In 1740, £200 would be the equivalent to £23,000 today. See Wagner, *Thomas Coram*, 110.

here to scrutinize more closely the paternalism of Coram and other founding Governors to demonstrate its importance in their motivation and to assess its significance in relation to the general phenomenon of paternalism in the eighteenth and nineteenth centuries. So, it is important to look at Coram's efforts to get the Hospital off the ground and his love of children and how this motivated him to complete his "darling project," as well as some of his dealings in America before the idea of the LFH reached fruition. It will become clear that Coram's brand of paternalism was extraordinary, for he was willing to break with societal mores, expectations, and conventions in order to achieve his philanthropic aspirations, even when that risked his own wealth and status. The reader will feel that some of the language used in this section sounds like the partiality of hagiography, but the evidence of Coram's humanity and benevolence is abundant and incontestable.

By the 1720s, Coram was semi-retired, residing in Rotherhithe, Kent, then a coastal hamlet. From there he would need to travel into the City on business and, as noted by Dr. Richard Brocklesby (1722–1797), a friend who appreciated Coram's paternalist empathy, these journeys "afforded him frequent occasions of seeing young children exposed, sometimes alive, sometimes dead, and sometimes dying, which affected him extremely" as he "naturally [had] the most tender feeling for the sufferings of his fellow creatures."²¹⁹ Coram decided that London was in need of a hospital, similar to those on the continent, where foundling children could be boarded and educated. There were dedicated institutions in a number of the other main cities of Europe, including the Ospedale degli Innocenti set up in Florence in 1419 and the Hôpital des Enfants-Trouvés in Paris, established in 1670. Such organizations were mostly religious in nature, notably Catholic. Since the dissolution of the monasteries, England's religious charitable traditions had dissipated. In Coram's time, there were no charities to help illegitimate children whose parents could not afford to raise them or could not endure the shame of having them.

As he embarked on his project, Coram was relatively elderly (he turned sixty in 1728), by no means well connected, and without an official position. Unknown to the aristocratic leaders of British society, he proved unable, at first, to secure their support. Refusing to give up, he decided to appeal to respectable ladies, hoping to tap into their emotions. Gillian Wagner believes that he

²¹⁹ John Brownlow, *The History and Objects of the Foundling Hospital: With a Memoir of the Founder* (London: C. Jacques, 1865), 110.

chose to approach those who had stable marriages, women who might be seen as paradigms of feminine virtue and propriety.²²⁰ This was key since society revered feminine modesty and chastity. By securing the signatures of these ladies, Coram effectively countered the argument that the Hospital would encourage immoral behaviour.

The initiative Coram showed in approaching these ladies was exceptional since he, a former shipbuilder with a colonial wife, would have met none of them socially or through business. In 1729, the Duchess of Somerset signed Coram's petition. Her sponsorship was the catalyst for more signatures from her peers, so that the first petition to the King, in 1735, came from twenty-one "Ladies of Quality & Distinction." This appeal to the ladies of "distinction" indicated that, though "a little rough," Coram had the deftness and diplomacy needed to cultivate the social elite.²²¹ The petition he persuaded the ladies to endorse, though it acknowledged that the Hospital would provide the state with "useful" hands and society with "good servants," dwelt largely on the plight of abused children. The petitioners were "deeply touched with Compassion for the Sufferings and lamentable Condition of such poor abandoned Infants":

That many Ladies of Quality and Distinction being deeply touched with concern for the frequent Murders committed on poor miserable Infant Children at their Birth by their Cruel Parents to hide their Shame. And for the Inhuman Custom of exposing New-born Children to perish in the Streets or the putting out such unhappy Foundlings to wicked and barbarous Nurses who undertaking to bring them up for a small and trifling Sum of Money, do often suffer them to Starve for want of due Sustenance and Care or if permitted to live either turn them into the Streets to beg or steal, or hire them out to Vicious Persons, by whom they are trained up in that infamous way of Living, whereby Thefts, Robberys and Murders do grievously abound, and some of those miserable Infants are Blinded or Maimed, or Distorted in their Limbs in Order to move Pity and Compassion, and thereby become fitter Instruments of gain to those vile Merciless Wretches.

²²⁰ Wagner, *Thomas Coram*, 82

²²¹ "He had an Honesty, that tho' a little rough, carried such apparent Marks of its being genuine..." [Richard Brocklesby], *Private Virtue and Publick Spirit display'd. In a Succinct Essay on the Character of Capt. Thomas Coram, Who Deceased the 29th of March, and was Interr'd in the Chapel of the Foundling Hospital, (A Charity Established by his Solicitation) April 24, 1751* (London: Roberts, 1751), 5. Interestingly, a parallel can be drawn here between Coram and the mothers of the Foundling children as the last chapter will observe how the power of discourse was applied by lower-class women to achieve their own objective: saving their children by securing them a place at the LFH.

That in order to redress such deplorable Grievances and prevent as well the effusion of so much innocent blood... and to enable them by an early and effectual Care of their Education to become useful Members of the Commonwealth, The said Ladies in their tender Compassion for the Sufferings and lamentable Condition of such poor Abandoned helpless Infants as well as the enormous Abuses and Mischiefs to which they are exposed ... [declare that] they are desirous to encourage and willing to Contribute towards the Erecting [of] an Hospital ... for the Reception, Maintenance and proper Education of such abandoned helpless Infants...²²²

These assertions tapped into the parental instincts of the ladies, appealing to their natural horror at the suffering of infants. Thus, Coram built up a network of patronage from ladies whose husbands were monied and politically influential.²²³

Coram eventually secured a second petition, signed by fifty-two gentlemen, among them his old friends from the Navy Office, and then, to give it more weight, won the signature of two noblemen.²²⁴ Coram's third and final petition in 1739 included the names of 25 Dukes, 31 Earls, 38 knights, and 26 other members of the peerage. The list included the entire Privy Council, headed by the Prince of Wales, and the names of Robert Walpole, the Prime Minister, and Arthur Onslow, Speaker of the House of Commons, as well as many merchant friends. The two archbishops and the Bishop of London were named, presumably because they were members of the Privy Council, but no other clergy figured.²²⁵

Coram's success was an enormous feat as he had to traverse class lines to achieve it. A contemporary, Edmund Burke, wrote in 1756 that "pity, benevolence, [and] friendship are almost unknown in high places" and that "the enormous luxury of the rich made them ignorant of how to help the poor."²²⁶ Coram (and paternalism generally) showed that such uncharitable thinking

²²² Memorials and Petitions of Captain Coram and others for the Establishment of the Hospital, A/FH/A/01/003, The Ladies Petition of 1735. See also *An Account of the Hospital for the Maintenance and Education of Exposed and Deserted Young Children: In which is the Charter, Act of Parliament, By-laws and Regulations of the Said Corporation By Order of the Governors of the said Hospital* (London: Foundling Hospital, 1749), iii-iv.

²²³ Wagner, *Thomas Coram*, 88.

²²⁴ Viscount Wallingford, MP for Banbury, and the Earl of Derby. He added doctors and 120 other names of distinguished men to his list between 1735 and 1737 (see Appendix B).

²²⁵ Wagner, *Thomas Coram*, 65, 88, 123.

²²⁶ Cited in Roberts, *Paternalism*, 19.

could be overcome, but his efforts were all the more remarkable because he expected no reward other than the benefit of children.²²⁷ This opinion is similar to that of eminent people in Coram's own time. For instance, Robert Walpole's brother, Horatio, once implored the Prime Minister to speak to Coram, stating he was "the honestest and most disinterested and most knowing person ... that I have ever talked with."²²⁸

Some idea of Coram's personality, and his personal history and circumstances, can help to explain the intensity of his feelings, and the strength of the paternalism that drove his quest to rescue helpless children. Perhaps this was due, in part, to the fact that his only sibling, William, died when he was a baby, a loss that may have strengthened his resolve to prevent the destruction of infants.²²⁹ Interestingly, many of the Hospital's original leaders, including Coram, William Hogarth, and George Frideric Handel, were childless, and all three apparently felt a special sympathy for children, particularly orphans and foundlings. Both Hogarth and Coram were brought up in poverty, experiencing the same lamentable condition as afflicted many of the babies brought to them, and it is possible that this memory of suffering also contributed to their paternalistic concern for children.

Coram's love for children is unequivocal in a range of sources. He liked to give children treats like fruit and sweets. He spent Christmas 1733 in Dover and arranged a house for clergymen, women, and children to occupy while they waited for their emigrant ship to arrive in port. There he met Henry Newman, Secretary to the SPCK, and informed him, "I carry the Children a few apples, and sometimes give them a few plumbs, a pound of Malaga Raisins which costs 3d. fills them with above 5 pounds worth of Love for me. They shew it in a Dawn of Joy in their faces as soon as they see me coming."²³⁰ In the years before his death, Coram still enjoyed seeing the joy in children's faces. Thomas Collingwood, later Secretary at the Hospital, claimed that the founder was "often to be seen sitting in the arcade of the hospital, dressed in his well worn red coat, distributing with tears in his Eyes Gingerbread to the Children, himself being at

²²⁷ Wagner, *Thomas Coram*, 126.

²²⁸ Letter of Horatio Walpole to Sir Robert Walpole, from the Hague, 18 /29 April 1735, in William Coxe, *Memoirs of the Life and Administration of Sir Robert Walpole, Earl of Orford*, Vol. 3 (London: Wentworth Press, 2016), 243. Also quoted in Wagner, *Thomas Coram*, 3.

²²⁹ *Ibid.*, 61.

²³⁰ *Ibid.*, 96.

the time supported by a subscription.”²³¹ Lacking his own, affection from others’ children delighted him and may have sustained him in his determination to secure a home for the children who needed it most.

Coram, it may be imagined, was delighted that all his efforts were not in vain. On October 17th 1739, he received the Royal Charter from King George II to institute the London Foundling Hospital after almost two decades of striving. As his friend Dr. Broklesby later noted, “this laudable, this invincible obstinacy, carried him through seventeen years of labour, which scarce any other man would have supported for seventeen months...”²³² At the first General Meeting at Somerset House on November 20th 1739, the nobility and gentry that now made up the “Governors and Guardians of the Hospital” gathered to appoint their first Secretary and Committee. Before reading out the Charter to the group, Coram gave an address to the new Hospital’s President that, in strongly paternalist terms, stated that his main goal was to save “tender Infants”:

My Lord Duke of Bedford,

It is with inexpressible Pleasure I now present your Grace, at the Head of this noble and honourable Corporation, with his Majesty’s Royal Charter for establishing an Hospital for expos’d Children, free of all Expence, thro’ the Assistance of some compassionate great Ladies, and other good Persons. I can, my Lord, sincerely aver, that nothing would have induc’d me to embark in a Design so full of Difficulties and Discouragements, but a Zeal for the Service of his Majesty, in preserving the Lives of great Numbers of his innocent Subjects. The long and melancholy Experience of this Nation, has too demonstrably shewn with what Barbarity tender Infants have been expos’d and destroy’d, for Want of proper Means of preventing the Disgrace, and succouring the Necessities of their Parents.

The Charter will disclose the extensive Nature and End of this Charity, in much stronger Terms than I can possibly describe them; so that I have only to thank your Grace, and many other noble Personages, for all that favourable Protection which hath given Life and Spirit to my Endeavours.

My Lord, altho’ my declining Years will not permit me to hope for seeing the full Accomplishment of my Wishes; yet I can now rest satisfied, and it is what I esteem an ample Reward of more than seventeen Years expensive Labour, and

²³¹ Lievesley, “Manuscript notebook,” A/FH/F/14/001/001 (handwritten) and A/FH/F/14/001/002 (typed).

²³² Quoted in Brownlow, *History and Objects*, 116.

steady Application, that I see your Grace at the Head of this charitable Trust, assisted by so many noble and honourable Governors. Under such powerful Influences and Directions, I am confident of the final Success of my Endeavours; and that the Publick will one Day reap the happy and lasting Fruits of your Grace's and this Corporation's Measures; and as long as my Life and poor Abilities endure, I shall not abate of my zealous Wishes, and most active Services for the Good and Prosperity of this truly noble and honourable Corporation.²³³

Not only is the humanitarian desire to save lives apparent in this speech, absences are also noteworthy. Firstly, there is not a single reference to empire, the military, or manpower, bolstering the contentions made in Chapter 1. Secondly, key to the upcoming "Unlocking the Doors" chapter, there is no reference to the children's parents, or to the children's legitimacy (or lack thereof), nor is there any mention of saving or reforming the mothers, a mission that would become so important in the next century.

These accounts suggest that Coram may have felt like a father to the numerous children who passed through the gates of the Hospital. What sets Coram apart from other paternalists of his day was the fact that he did not expect reverence, deference, or even thanks from those he helped, as many paternalists undoubtedly did. He paid little attention to his private finances, nor was he concerned with the status or credentials of the parents who handed over their children to his charity. Coram seldom – if ever – sought his own personal advancement, but worked altruistically for what he believed to be a public good, a trait Gillian Wagner deems "a rare attribute in eighteenth-century Britain."²³⁴ The paternalistic side of Coram that "rescued children from misery by his care and compassion" was so endearing, his friends took care of him in his old age. Among the subscribers were the Prince of Wales and a long list of LFH Governors.²³⁵

Some time after a dispute ended Coram's participation in the business of the Hospital in May 1742, the founder wrote a letter to Dr. Hans Sloane respectfully asking him to visit a particular girl as well as another child with eye problems, demonstrating the paternalistic interest

²³³ "The Monthly Chronologer," *The London Magazine*, November 1739, 627-628. First LFH General Meeting, 20 November 1739. Also in [Brocklesby], *Private Virtue*, 17-19.

²³⁴ Wagner, *Thomas Coram*, 77.

²³⁵ *Ibid.*, 117. Nathan Drake, *Essays, Biographical, Critical and Historical, Illustrative of the Tatler, Spectator, and Guardian* (London: Suttaby, Evance and Fox, 1814), Vol. 2, 337.

he took in all facets of the children's welfare even when he was no longer a key administrator. What is more, in his mid-seventies, Coram rightly believed that the Hospital was too small to accommodate all who needed it and started making plans for a second foundling hospital to be built in London. Finally, though fatally unwell and making arrangements for his likely death, he planned to visit the Princess of Wales to appeal to her for the creation of a vagabond hospital.²³⁶

Coram's brusque manner may have alienated others – historians have not been able to discover the root cause of the rift – but subsequent commentators refused to judge him harshly. Morris Lievesley, Hospital Secretary from 1799 to 1849, viewed Coram's ousting as a travesty:

It is scarcely possible to believe that Gentlemen of Education assembled within the walls of the Hospital to carry out works of charity should lose sight of that object and permit the most hateful passions of hate and jealousy to infuriate their minds, alike injurious to their moral character and the best interest of the Institution. Coram the great the good founder was driven out of his own temple of mercy by Cabal...The real interests of the Charity were neglected and forgotten.²³⁷

Brownlow, a few decades later, concurs:

Captain Coram was not a mere theorist. All his schemes were of a practical nature. He first made himself thoroughly master of his subject, and then set about convincing those whose assistance he deemed necessary for their accomplishment. The difficulty he had to encounter was the want of that energy of character in others, which was so remarkable in himself. This retarded the progress of many of the projects he had set on foot for the benefit of mankind.²³⁸

... he saw this calamity in its proper light, and, like an honest and worthy man, thought it would do honour to the nation to show a public spirit of compassion for children thus deserted, through the indigence or cruelty of their parents, and... because this was already done in other countries.²³⁹

²³⁶ Ibid., 167-68, 181.

²³⁷ Lievesley, "Manuscript Notebook," A/FH/F/14/001/002 (typed), 1.

²³⁸ Brownlow, *History and Objects*, 100-101.

²³⁹ Ibid., 115.

Coram's altruism, philanthropic spirit, and paternalism were also evident across a range of matters concerning North America, for his interest in North American philanthropic schemes did not end with his return from New England in 1704. Between 1713 and 1738, he supported the creation of new colonies. Although this betrays a colonialist mentality, Coram was not just motivated by a wish to promote British imperialism. His priority was the settlement of unemployed men, former soldiers, and Protestant refugees from Europe. In a separate venture, the settlement of Georgia in the south, he wished to resettle debtors and other convicts, unemployed persons, and the newly expelled Protestants of Salzburg.²⁴⁰ His involvement there ceased when others refused to join him in advocating the right of women to inherit land.²⁴¹

Coram's passion for justice saw him helping to have the wages of a deceased New England carpenter paid to his family: "I do not desire nor Expect any thanks," he wrote, "the favour is Small and I believe every one ought in duty to do any good they can."²⁴² When the military government of Nova Scotia seized produce from local inhabitants, Coram's protest exuded the essence of genuine humanitarianism: "I thank God I have more love towards Mankind than to have any hand in Introducing Slavery upon Children unborn."²⁴³ While eighteenth-century paternalism was typically authoritarian and self-righteous, the deference and praise many paternalists of his time would anticipate was not expected or desired by Coram. He took the 'duty' component of paternalism much more seriously than most of his contemporaries and, unlike other paternalists, he did not see social class as something that carried weight when it came to moral matters. If Coram perceived injustice, he would work to correct it; he did not care how his actions would affect his own relationships or social standing.

Coram was the first to be buried in the Hospital's chapel. Fortuitously, the chapel's construction was completed in the week before Coram's death in 1751.²⁴⁴ Brownlow indicates

²⁴⁰ Wagner, *Thomas Coram*, 92, 94.

²⁴¹ *Ibid.*, 2, 94, 97-99. Fant, "Picturesque Thomas Coram," 94.

²⁴² Wagner, *Thomas Coram*, 117-18.

²⁴³ Fant cites Letter of T. Coram to B. Colman, from London, 2 March 1736-37, in *Proc. Of the Mass. Hist. Soc.*, LVI 34. Fant, "Picturesque Thomas Coram," 96-97.

²⁴⁴ Wagner, *Thomas Coram*, 184.

that his interment therein was Coram's last request and nicely elucidates how the tribute acknowledged the "pious and charitable actions" for which he was remembered:

This singular and memorable man exchanged this life for a better, and passed from doing to enjoying good, on Friday, March 29th, 1751, in the four-score and fourth year of his age, making it his last request, that his corpse might be interred in the Chapel of the Foundling Hospital, which shows he had that excellent foundation at his heart, when all things that regarded this world besides were out of his thoughts a circumstance that demonstrates the steadiness of his affection, and the happiness he had of what he had done for this place, when he was on the point of going where pious and charitable actions afford the highest recommendations--where his merit in that and other respects will be fully known and fully rewarded."²⁴⁵

Coram was dedicated to making a better world for a wide array of people who had encountered misfortune in their lives. Rescuing needy children had been pivotal to his existence for so long that it made many of his contemporaries and later biographers claim that he cared for the Foundling babies as though they were his own.²⁴⁶ As Wagner and McClure point out, Hogarth's portrait of Coram hung in the girls' dining hall of the Hospital and many of the children thought of him as their father – a fitting tribute to one whose paternalism did so much to shape their lives.²⁴⁷ One can imagine that Coram would have taken great pleasure in this fact.

As Ruth McClure puts it, Coram "empathized with the underdog in every situation."²⁴⁸ His philosophy was that everyone should do any good they can and not expect thanks for their actions. These were the sentiments of a humanitarian and are not generally associated with the cheerleaders of war and empire. Coram marched to a different beat and, despite occasional references to "utility," for he was not a one-dimensional character, and he knew how to win over

²⁴⁵ Brownlow, *History and Objects*, 125.

²⁴⁶ Wagner, *Thomas Coram*, 160-161.

²⁴⁷ *Ibid.*, 196. Ruth McClure begins her book: "A legend of the London Foundling Hospital relates that the children, accustomed to seeing daily Hogarth's great portrait of its founder, believed that when they prayed 'Our Father, who art in Heaven', they were addressing Captain Thomas Coram." McClure, *Coram's Children*, 3.

²⁴⁸ *Ibid.*, 36.

an audience, it was a sense of Christian duty – his paternalism – that inspired his extraordinary efforts.

Early Paternalistic Initiatives by Other Distinctive Governors

The views of other founders and their immediate successors are not knowable with any degree of certainty, although Janette Bright's upcoming PhD thesis should shed more light on them. Until then, although written evidence is scarce, an appreciation of the others' paternalism may be gained from a brief look at the contributions of a handful of the Governors who managed and supported the Hospital.²⁴⁹ McClure claims that there were only about a dozen active Governors at any given time.²⁵⁰

One of the best-known and most active founding Governors was William Hogarth, English painter, engraver, pictorial satirist, social critic, editorial cartoonist, and occasional writer on art. He, as Brownlow wrote, "was foremost amongst those who first cordially co-operated in forwarding the views of the Founder of the Hospital."²⁵¹ In 1740, Hogarth donated to the LFH £120 of his personal funds and his iconic portrait of Coram. This portrait, depicting Coram's warmth and benevolence in his weathered face, was a symbol of their friendship and solidarity.²⁵² Hogarth served on both the Court of Governors and the General Committee and designed the artwork for most of the Hospital's administrative texts – including the coat of arms. It seems highly likely that the practice of artists donating pieces to the Hospital, the basis of the great collection that survives to this day, was inspired by Hogarth. He and his wife, Jane, personally supervised and inspected the fostered-out children in Chiswick. Brownlow reports on the Hogarths taking up this duty:

²⁴⁹ For an extensive look at some of the dispositions and behaviours of the other Governors, see Janette Bright, "The London Foundling Hospital: Risk, Reputation and Trust in an Eighteenth-Century Institution," (PhD diss., Institute of Historical Research, School of Advanced Study, University of London, Forthcoming).

²⁵⁰ McClure, *Coram's Children*, 133.

²⁵¹ Brownlow, *History and Objects*, 56.

²⁵² "William Hogarth," Coram Story, London Foundling Hospital, last modified 2024, <https://coramstory.org.uk/explore/content/article/william-hogarth>.

In or about the year 1760, the Governors, at the request of Hogarth, sent several of these infants to Chiswick, where the painter resided, he engaging, along with Mrs. Hogarth, to see them properly taken care of. It is impossible to revert to the life of Hogarth, so full of labour in his art...without feeling some degree of admiration for one, who amidst all this, should be found engaged in so humble a charity as that of watching over the destiny of parentless and helpless foundlings.²⁵³

Hogarth dedicated over 25 years to supporting the Hospital in various roles, using his artistic skills and influence to further the cause.

The President of the Royal Society, Martin Folkes, and architect Theodore Jacobsen “were in and out of the house in Hatton Garden on almost a daily basis”²⁵⁴ and Jacobsen was a regular at the General Committee for over a decade. Eminent medical men gave advice and may have treated children; the contributions of Doctors Hans Sloane, Richard Mead, and William Cadogan are described below. Other Governors were leading lawyers and businessmen – the likes of Taylor White, George Whatley, and Thomas Collingwood – whose services were recognized by their appointment to major office within the Hospital. These are just a few examples of the many Governors who dedicated their time, money, efforts, and pens to the LFH and the well-being of the children. The fact that numerous Governors expressed a wish to be buried in the LFH chapel alongside Coram (as opposed to with their own families) demonstrates that this charity was close to their hearts. Brownlow, describing this phenomenon, duly acknowledged their “zeal in the cause of the Charity.”²⁵⁵ Now, using the LFH as a lens, I observe how nineteenth-century conditions coarsened paternalism, rendering it more righteous and far less kind.

²⁵³ John Brownlow, *History and Design of the Foundling Hospital: With a Memoir of the Founder* (London: C. Jacques, 1858), 67-68.

²⁵⁴ Wagner, *Thomas Coram*, 158.

²⁵⁵ Brownlow, *History and Design*, 77-78.

David Roberts' Theory of Paternalism

It is the contention of this dissertation that those who founded and governed the London Foundling Hospital were motivated primarily by a benevolent desire to rescue vulnerable children. The historiographical section above presented a brief outline of David Roberts' conception of paternalism, but it is necessary to return to his ideas and to deal, in particular, with the disquieting fact that he seems not to have viewed the LFH as an example of paternalism. If, as this study holds, the Hospital was a paternalist institution, it is rather surprising that Roberts did not mention it in his definitive account of English paternalism, *Paternalism in Early Victorian England* (1979). Of course, Roberts had a very particular and narrow idea of paternalism and therein lies the explanation of his lack of interest in the LFH.

Roberts presented "A Model of Paternalism" in which everyone, rich and poor, had duties as well as rights, with the "conscientious paternalist of superior rank" adhering to "three principal sets of duties": "ruling, guiding, and helping" – "helping the poor in their afflictions and sufferings."²⁵⁶ It would not be difficult to show that the duties of ruling, guiding, and helping were observed at the Hospital. The reason that the LFH was not included as an example of paternalism by Roberts, or by the host of writers and preachers he cites, was that the paternalism he posits saw the performance of duties "towards those in their community who are bound to them by *personal ties of dependency*."²⁵⁷ "The existence of *well-defined personal relations*" between the classes "formed the cement of paternalism" in rural England. This cement "could not withstand large-scale urbanization."²⁵⁸ Parochial paternalism had no place in the city. The problem was *London*, Daniel Defoe's "great and monstrous thing." Its anonymous masses differed from the small-scale society in which Roberts and his witnesses found the spirit of paternalism.

The paternalism that the writers described and honoured was the paternalism of Old England, where the vast majority lived on the land and in villages, and the landowner and his allies, notably the clergy, had unquestioned dominance:

²⁵⁶ Roberts, *Paternalism*, 4-5.

²⁵⁷ *Ibid.*, 8. Emphasis added.

²⁵⁸ *Ibid.*, 270-71. Emphasis added.

Throughout rural England the governing classes believed that the answer to most social problems lay with the condescending solicitude of the grandees, the neighborly kindness of the gentry, the admonitory and consoling attentions of the clergy, the strict discipline of magistrates, the teaching of the schoolmaster or mistress, and the careful dispensations of the poor law guardians. It was a highly personal, quite unsystematic, and extremely variable social system, often more a matter of ideals than realities.²⁵⁹

[I]n *smallness lay the key to paternalism*. Only in small spheres defined by personal relations, those in which most persons were known to each other, could human beings be held together by the reciprocal bonds of authority and deference and by clearly defined rights and duties... These were the spheres in which property was sovereign, authority and hierarchy secure, and the whole held together organically by personal relations.²⁶⁰

The term that best describes the paternalism delineated in Roberts is “parish paternalism” or “parochial paternalism,” for this conjures up the rural context and the associated *scale* (“small spheres defined by personal relations”).²⁶¹ Given this focus on traditional society, it is no surprise that Roberts writes of “Medieval Roots and Tudor Ideals” and finds “many of the same assumptions, doctrines, and attitudes” – in other words, the same paternalism – shared by the “governing classes of feudal England” and “the early Victorian paternalists” alike.²⁶² Imbued with nostalgia and romance, these paternalists celebrated the society and ideology of the past and their continuing relevance in rural England in the nineteenth century. Clearly, Roberts has a particular genus of paternalism in mind.

The Victorian paternalist writers did not see benevolent fathers among nineteenth-century *Londoners*, nor would they have seen them there in the previous century, when the LFH was established. The mainly bourgeois men who founded and governed the LFH did not have “personal relations” with those they were destined to help at the Hospital; most Londoners were

²⁵⁹ Ibid., 130.

²⁶⁰ Ibid., 270. Emphasis added.

²⁶¹ Ibid., 270.

²⁶² Ibid., 10.

not “known to each other,” and the idea that classes were “held together by the reciprocal bonds of authority and deference” was much weaker than in rural society. Even the several aristocrats who patronized the Hospital, while they may have had almost-feudal relations with their peasantry in the shires, did not have the same connection to their communities in London. Their townhouses were not ornaments of local villages and estates that had been owned by the same patriarchs for generations. The sense of obligation that time and dependency had woven in the rural areas did not exist to the same degree: London’s upper classes could not feel a bond with families and individuals that their forebears had patronized for decades and centuries. The paternalist writers of the 1830s did not look to Londoners to find the attitudes – deference, veneration of land, and acceptance that society was ordered according to God’s will – that they believed still existed in rural England. Strangers to each other, a “great gap” was thought to divide “an indifferent rich from a destitute poor.”²⁶³

The corollary of this was that the Hospital was not regarded as a product of the paternalist spirit of a traditional ruling class. Middle-class Hospital leaders did not inherit their sense of duty from fathers and grandfathers who had a tradition of helping and guiding the lower orders on great estates.²⁶⁴ It is unlikely that the Governors even *knew* more than a few individuals among the thousands gathered in the overcrowded neighbourhoods of the metropolis. The paternalist thinker who looked at London’s toiling and impoverished masses and the London businessmen and professionals who governed the Hospital did not see the rural idyll of Roberts’ imagination.

If paternalist writers (and Roberts) did not see paternalist squires, values, and traditions in big-city London, they would find it equally hard to see in the Hospital itself any likeness to the sort of parish enterprise they were interested in. Put simply, the LFH was too large, and the area from which the mothers came with their babies was much more extensive than any parish. 1,384 babies were accepted before June 1756, 15,000 entered during the General Reception, and the total number accepted by the Hospital (1741-1954) exceeded 25,000.²⁶⁵ The Hospital was one of

²⁶³ Ibid., 82.

²⁶⁴ Among the middle-class leaders who played pivotal roles in Hospital operations were shipbuilder-merchant Thomas Coram, Hospital architect and former merchant Theodore Jacobsen, lawyer George Whatley, judge Taylor White, barrister Thomas Bernard, lawyer Samuel Compton Cox, and Charles Pott, a vinegar manufacturer from Southwark.

²⁶⁵ Jessica Sheetz-Nguyen, *Victorian Women: Unwed Mothers and the London Foundling Hospital* (London: Bloomsbury, 2012), 52, Tables 2.1 and 2.2. Brownlow, *History and Objects*, 9, 14 and John Brownlow, *The History and Objects of the Foundling Hospital: with a memoir of the founder*, 4th ed. (London: C. Jacques, 1881), 41, 46.

several London behemoths. The Magdalen Hospital (1758) for former prostitutes had received 1500 young women by 1769 and 2,415 by 1784.²⁶⁶ After it moved to new premises in 1825, the London Orphan Asylum could accommodate almost as many occupants as the LFH; Brownlow reported on a complement of 250 boys and 120 girls in the early 1830s, and in 1839 the Asylum held a higher number (339 orphans) than the LFH.²⁶⁷ These institutions were of an entirely different order from the puny charities in the rural parishes, where the massing of 1500 penitent prostitutes would have surpassed the expectations of the most ambitious parson.

The LFH, and its sister charities, also differed from the rural charities in terms of its stability and durability. Parochial paternalism – the charitable activities of local landowners and parsons – depended on the wishes and capabilities of those individuals. They inevitably struggled when a zealous founder was superseded by a less engaged or non-resident heir.²⁶⁸ The Hospital survived the departure of its founder in 1742 and his passing in 1751. Its viability was subject to the whims of no individual. It was run with a degree of professionalism that ensured its survival for over two centuries. This meant the creation and continuance of bureaucratic structures and procedures – not subject to the “highly personal, quite unsystematic” ways that Roberts attributes to rural life²⁶⁹ – that characterized institutional paternalism, this study’s preferred description of the paternalism of the LFH and its Governors. In the 1840s, paternalists urged “endless schemes for transforming the older, more circumscribed, variable, and personalized paternalism into a more systematic and institutionalized paternalism” – but Roberts does not concede here that this “new paternalism” was the form that the LFH had embodied, to a degree, for a full century.²⁷⁰

That Roberts echoes the paternalist writers in failing to acknowledge the paternalism of the LFH and other big-city institutions suggests a definitional narrowness that excluded consideration of great charities that might, with greater latitude, have had leading parts in any account of Early Victorian paternalism. Moreover, Roberts’s analysis precludes any idea of the

²⁶⁶ Dan Cruickshank, *The Secret History of Georgian London: How the Wages of Sin Shaped the Capital* (London: Windmill Books, 2010), 298.

²⁶⁷ John Brownlow, *A Guide to the Charitable and Religious Societies, Hospitals, Dispensaries, and other Benevolent Institutions of London* (London: Sampson Low, n.d.), 67. Roy Sloan, *Historyhamper*, “John Brownlow,” <https://www.historyhamper.com/john-brownlow/>.

²⁶⁸ Roberts does not cite this problem specifically, but it is implicit in the idea that a less resident gentry in Sussex was more ungenerous than its forebears of fifty years earlier. Roberts, *Paternalism*, 117.

²⁶⁹ *Ibid.*, 130.

²⁷⁰ *Ibid.*, 132.

full impact of parochial paternalism if the latter can be seen as the *progenitor* of institutional paternalism. Many in the growing middle class of nineteenth-century Britain rejected old orthodoxies, espousing *laissez-faire* economics, an individual morality, and religious voluntarism. But paternalist “assumptions” and “values” remained part of the dominant discourse and “informed social attitudes at all levels of society.”²⁷¹ The bourgeoisie inherited their understanding of what it was to be ‘a gentleman’ and maintained traditional ideas of the latter’s responsibilities. In particular, the ‘duties of property’ – the acceptance that propertied men should protect their dependants – had been assumed for centuries among an older social elite and were *adopted* (they did not have to be *invented*) by the new, urban middle classes. The LFH was the product of a paternalism that emerged in traditional England but thrived in different circumstances, and a different form, in rapidly developing London.

In the 1830s, when still the Treasurer’s Clerk, John Brownlow produced a directory of London’s many charities. His introductory words articulated the spirit of paternalism. In “compiling this record of active benevolence,” he felt he had demonstrated that “the right of the poor to the sympathy and assistance of the rich” was “fully recognized by a large proportion of the community.”

The constitution of society involves the dependence of its several ranks upon each other, in order to the happiness [sic] of the whole; and in proportion as that dependence is mutually acknowledged and cherished, so will the bonds of society be strengthened. If they who have the means of increasing the comforts, and mitigating the sorrows of their poorer brethren, do cheerfully respond to the claim of distress, this must generate the kindest feeling towards them; rank and station will be honoured; property will be respected; the happiness and security of society will be enlarged; and the poor man will not envy the rich that superabundance of wealth, which he liberally imparts to the necessities of others.²⁷²

²⁷¹ Ibid., 1.

²⁷² Brownlow, *Guide to the Charitable and Religious Societies*, v-vi (Preface).

Brownlow's commentary replicated the age-old assumptions of paternalism. But he did not speak of squires and peasants. He was surveying the charities of his city, and London's teeming streets and tenements were not the villages and cottages of Old England.

The paternalism that was part of the intellectual inheritance of its Governors informed the everyday existence of the Hospital. It is clear that the LFH was able to incorporate paternalist ideals into its policies and practices. It navigated the changing landscape of eighteenth and nineteenth century Britain to meet its own goals and objectives, creating the institutional paternalism that will be the subject of the next section.

One key aspect of the Hospital's development was its capacity to forge an independent path. Outside the brief four-year General Reception period, when the state dictated Hospital admissions policy, the charity was fully funded by private donations and subscriptions (and, later, by property income) and the Governors had the power to make all the decisions in their Court and Committee meetings. It was they who created and modified the admission rules and requirements, by-laws, education provision, and apprenticeship. In all this work, Hospital policies were directed according to the values held by the Governors and the principal officers, the values of paternalism.

Institutional Paternalism at the LFH

a) Medical Care of the Foundlings

The London Foundling Hospital went to extraordinary lengths to ensure the survival and good health of its children. The medical care provided by the LFH has been studied extensively, with Alys Levene's groundbreaking account particularly illuminating.²⁷³ Still, it is necessary to review the main features to show that the health of the Foundlings was a principal concern of the benevolent paternalists who formed the leadership. As Ruth McClure observed, "Probably no topic engaged as much of the Committee's attention as the children's health: the variety and

²⁷³ Alys Levene, *Childcare, health and mortality at the London Foundling Hospital 1741-1800: "Left to the mercy of the world"* (Manchester: Manchester University Press, 2007). See also McClure, *Coram's Children*, 205-18.

virulence of the diseases that so often plagued the foundlings disquieted the Governors greatly; how to prevent such illnesses worried them even more.”²⁷⁴

Thomas Coram and the founding Board of Governors recruited the most eminent medical men in London to supervise the Foundlings’ care.²⁷⁵ The fourteenth by-law, adopted in June 1740, outlined staffing, decreed the appointment of four “Physicians” and four “Surgeons” each year, and, when the Hospital opened in 1741, at least four distinguished physicians and two surgeons volunteered their services.²⁷⁶ Throughout the rest of the century, leading doctors continued to respond to the needs of the Foundlings. Two aspects of healthcare in the early days of the Hospital are familiar to all who take an interest in Foundling history, inoculation against smallpox, which is discussed below, and the placing of babies with nurses for their first years of life.

As Alys Levene has written, “It soon became apparent to hospital officials that wet nursing by women outside the hospital walls offered the only realistic chance of foundling children reaching adulthood, and they remained committed to it as a system despite the large-scale logistical problems it sometimes presented.”²⁷⁷ Initially, the General Committee approached the issue somewhat tentatively. In June 1740, it issued a questionnaire posing nine questions regarding the wages, expenses, and other arrangements for wet nurses.²⁷⁸ The College of Physicians was then asked, in July, for its opinion – “Whether it will be most prudent for the Governors of the Hospital to endeavor to provide Wet Nurses for all the Children they take in” – and inquired into the alleged practice among wet nurses of giving “opiates to quiet” restless children, but the Physicians did not pronounce in favour of wet-nursing: instead, they advised against wet nursing for all and recommended it only for those who could not be “brought up by hand.”²⁷⁹ In the event, few accepted children had been weaned – which was probably inevitable once the decision was made (1 October 1740) to restrict entry to those below two months – and

²⁷⁴ Ibid., 205.

²⁷⁵ White, *A Great and Monstrous Thing*, op. cit., 473.

²⁷⁶ Minutes of the General Committee, A/FH/K/02/001, 20 June 1740. Ruth McClure, “Pediatric Practice at the London Foundling Hospital,” *Studies in Eighteenth-Century Culture* 10 (1981), 361.

²⁷⁷ Levene, *Childcare*, 90.

²⁷⁸ Minutes of the General Committee, A/FH/K/02/001, 20 June 1740. Summarised in McClure, *Coram’s Children*, 42. The Committee’s positive declaration that, “As the Preservation of the Children who shall be received into the Hospital must greatly depend on the Care of Nurses,” did not relate to wet-nursing. Minutes of the General Committee, A/FH/K/02/001, 16 July 1740.

²⁷⁹ Ibid., A/FH/K/02/001, 16 July, 20 August 1740.

the vast majority were sent out to be wet nursed. Treasurer Taylor White, effectively the head of the operation, gave a succinct summary: “All children are brought up by Woman’s milk who will suck, the contrary practice have [sic] been found at[t]ended with great danger to the health & safety of the children... There is no Child nursed in the Foundling Hospital. They are sent to Nurse as soon as possible...”²⁸⁰

This decision brought about the creation of an extensive nursing network, principally in the rural areas around London, that the Hospital drew on to place out the children immediately after their admission. The wet nurses, also described as “nurse mothers” or “country mothers” in the primary sources, were expected not only to breastfeed the children but also to nurture and train them until they were returned to the Hospital at four or five years old.²⁸¹ The work created a significant employment opportunity for impoverished women, who sometimes took in more than one Foundling at a time, or a succession of Foundlings. Levene stresses that most nurses integrated the Foundlings into their households, challenging “the common depiction of nurses as careless and blameworthy.”²⁸²

Key to the success of the program was the system of inspectors established by the Governors. The assiduousness of the Hospital’s supervision of the wet nurses and of the inspectors evokes the duties – “ruling, guiding, and helping” – that Roberts attributed to “the conscientious paternalist.”²⁸³ I have already shown how Jane Hogarth worked as an “Inspectress” in her area, but what was her role? All inspectors lived less than five kilometres from their nurses. They oversaw the nurses’ collection and safe transport of the Foundlings to their new homes. They had responsibility for financial matters, submitting expense claims to the Hospital and paying the nurses’ wages (initially 1s. 6d. per week). They monitored the work of the nurses and reported directly (and frequently) to the General Committee, which intervened (often moving children to other hosts) when standards were seen to have fallen. They ensured that the “nurslings” were provided with appropriate accommodation, food, clothing, and medical treatment (the latter two paid for by the Hospital, through the inspector) and were expected to update the Hospital’s Secretary about any difficulties, including instances of neglect (which were rare). The nurses

²⁸⁰ Memorandum by Taylor White, A/FH/M/01/008/233, n.d..

²⁸¹ *Regulations for Managing the Hospital* [n.d.]: Of the Management of the Children, 64.

²⁸² Levene, *Childcare*, 114.

²⁸³ Roberts, *Paternalism*, 4-5.

were rewarded well if they kept the child healthy and the inspectors paid particularly close attention to any evidence of medical problems.²⁸⁴

While the majority of Foundling “nurslings” received remedial care within the nurse’s home, the Hospital treated more severe conditions, including contagious diseases like measles, smallpox, and a variety of fevers. As previously mentioned, the Governors secured the services of some of Britain’s principal physicians. Sir Hans Sloane, made a baronet by George I, donated his salary to another charity, Christ’s Hospital, similarly devoted to children’s well-being, demonstrating a paternalism akin to Coram’s.²⁸⁵ Sloane was a founding Governor of the LFH and, seven years after it opened, in 1748, he wrote a letter to the Vice-President regarding wet-nursing that reveals his intelligence and common-sense approach. This letter, paternalistic in tone, discussed the benefits of breast milk.²⁸⁶ The Hospital acknowledged and adhered to his opinion.²⁸⁷ The same letter also gave advice about how to care for young children’s bones and teeth. He was such an influential doctor and Governor that John Brownlow memorialized him in a book: *Hans Sloane: A Tale Illustrating the History of the Foundling Hospital in London* (1831), a fictional story about a young child abandoned by a cruel uncle.

Among the numerous medical advice manuals, William Cadogan’s “Essay Upon Nursing” stood out as one of the most influential. This concise book, first issued in 1748, went through seven editions by 1760. It was published by the order of the General Committee and dedicated to the LFH Governors. Cadogan began by proposing that the LFH had the potential to make a significant impact on the world:

[I]t can prevent the loss of many lives and save even more by introducing a more sensible and natural approach to nursing... I would earnestly recommend it to every Father to have his Child nursed under his own Eye, to make use of his own Reason and Sense in superintending and directing the Management of it...²⁸⁸

²⁸⁴ *Regulations for Managing the Hospital* [n.d.]: Of the Management of the Children, 64-67.

²⁸⁵ Wagner, *Thomas Coram*, 83.

²⁸⁶ Hans Sloane, “The nursing of children,” Letter to John Milner Esq, 28 October 1748, in John Brownlow, *Memoranda or Chronicles of the Foundling Hospital: Including Memoirs of Captain Coram*, 210–16.

²⁸⁷ *Ibid.*, 216. Memorandum to General Court re Dry Nursing, 29 Mar 1758, in A/FH/M/01/008/049-056.

²⁸⁸ William Cadogan, *An essay upon nursing: and the management of children, from their birth to three years of age* (London: Cox and Berry, 1772), 3, 24. See also *An Account of the Hospital* (1749), xvi.

Somewhat ironically, the father's supervision of the woman's provision of breast-milk was seen as the vital role in ensuring the child's welfare. Indeed, many paternalistic medical men believed they knew women's bodies better than the women themselves.

Sloane's and Cadogan's focus on the importance of a mother's milk for a child's well-being encouraged the Hospital in its determination to overcome the considerable difficulties of the out-nurse policy. Cadogan was clear that, considering the unique circumstances of the Foundlings, the Governors' policy of "sending the Children out to Country Nurses, under the Care of Inspectors" was "undoubtedly the best Method they could take."²⁸⁹ Cadogan consistently commended the Governors for their diligent "due care" in overseeing the nursing of the children, praise which showed how he aligned with their paternalism. In turn, the Hospital reciprocated his admiration, assuring subscribers of their steadfast dedication to the principles outlined in Cadogan's essay.²⁹⁰

The nursing program was so effective it made the Hospital a model for other institutions providing infant care and was seen to help lower infant mortality. Of course, more was involved than wet-nursing – the standard of food, medical care, and accommodation ensured a healthy standard of living for the Foundlings – but Levene has claimed that, "[U]niversal wet nursing for all healthy infants" gave them "their biochemically most appropriate source of nutrition" and was "by far the best option for their ongoing health and survival."²⁹¹ Levene notes it is "unwise" to accept estimated mortality figures for the Foundlings because there are too many variable factors.²⁹² However, she also shows that, upon admission to the Hospital, babies faced significantly higher mortality risks due to their *initial* condition rather than the environment

²⁸⁹ Cadogan, *An essay upon nursing*, 25.

²⁹⁰ Ibid., 25-26, 34. Governors reciprocated in *An Account of the Hospital*, (1749), xvi-xvii.

²⁹¹ Levene, *Childcare*, 146. Between 1757 and 1763 Jonas Hanway visited workhouses across London, collecting statistics about the mortality rate of young children. In *Earnest Appeal* he put the mortality rate of children under 3 around 50% in most large workhouses. Overall, Hanway said the child mortality rates in workhouses was 88%, but this has been challenged in Tim Hitchcock and Robert Shoemaker, *London Lives: poverty, crime and the making of a modern city, 1690-1800* (Cambridge: Cambridge University Press, 2015). Tim Hitchcock and Robert Shoemaker compared the London Foundling Hospital's 72% mortality rate in the first half of the 1750s with the fate of "babies and toddlers" in St Margaret Westminster workhouse, "a place of death" in which only one child out of 56 (in 1746-50) was known to have lived beyond the age of 20 months. Hitchcock and Shoemaker, *London Lives*, 253.

²⁹² Levene, *Childcare*, 52.

within the institution. The Foundlings who *survived* difficult first days exhibited life chances similar to those of their counterparts among the broader population of the city. But those children too debilitated to be placed out had little prospect of survival.²⁹³ The wet-nursing program was both administratively challenging and costly, but the Governors were insistent on it, to their credit, despite the enormous difficulty of staffing it during the General Reception (see below) and also when the Hospital faced financial difficulties before it began to develop a property portfolio in the 1790s.

After the children were returned to the Hospital, the danger to health arose from the ease with which infectious diseases could spread in crowded conditions, a problem compounded by the fact that the returning children came with a variety of new pathogens.²⁹⁴ Smallpox was a huge worry as it mostly affected the young – causing nearly half of the deaths among London’s children²⁹⁵ – and those who survived were sometimes left blinded. The incidence of smallpox at the LFH was quite low when compared to the national whole. Charles Creighton showed that the number of smallpox cases at the LFH (or at nurse) ranged between 0 and 8 from 1766-88 and commented that “all the great epidemics appear to have been of measles, whooping-cough, influenza or scarlatina.”²⁹⁶ This can be attributed to the comprehensive program of inoculation against smallpox, one of the Hospital’s finest achievements.²⁹⁷

Inoculation began soon after the opening of the Hospital. The first group of children were inoculated in March 1744, Dr. Richard Mead supported the practice in his *A Discourse on the Small Pox and Measles* in 1748, and the policy to inoculate the children against smallpox was formally adopted in 1749. Children were occasionally inoculated when out at nurse, but more often it was done upon their return to the Hospital (those children who had already survived smallpox were not inoculated since they were deemed immune). This practice marked a significant departure from the medical norm, which dictated inoculation at the age of seven. The process was lengthy, expensive, and intricate, necessitating strict adherence to a prescribed

²⁹³ Ibid., 52, 58-9, 60-1, 69, 78, 84-6, 104-6.

²⁹⁴ Records from the Hospital infirmary regularly documented recurring ailments like coughs, colds, sore throats, and earaches, alongside frequent mentions of more severe conditions like measles, scarlet fever, and whooping cough.

²⁹⁵ Levene, *Childcare*, 163.

²⁹⁶ Charles Creighton, *A History of Epidemics in Britain*, Volume 2 (Cambridge: Cambridge University Press, 1891), 514.

²⁹⁷ *An Account of the Hospital*, (1749), xi.

regimen before and after the procedure. Nevertheless, the potential consequences of a smallpox outbreak within the Hospital were grave enough to compel the Governors to bear the expense. Levene has noted that at the Hospital, in contrast with the rest of London, “measles was a more sustained threat to life than smallpox, which was muted in its virulence through the practice of inoculation... Smallpox still caused a substantial number of deaths among the foundlings, but the loss among the hospital’s inoculation patients was extremely small.”²⁹⁸ In 1801, after Edward Jenner’s breakthrough discovery in 1796 and its first use in England in 1800, the LFH, a model of excellence in its proactive response to the dangers of infectious disease, transitioned from inoculation to vaccination as a preventive measure.²⁹⁹

However progressive and effective individual measures against disease proved, the main cause of the Hospital’s relative success in health care was possibly the medical examination that each child underwent before admission. The General Committee decreed in July 1740 that,

...in order to know what Children are healthy, the Chief Nurse (with such other Nurse as she shall think fit to call to her assistance) and the Apothecary of the House shall inspect every Child as soon as it is brought to the Hospital, and shall direct which shall be received into the Hospital, and which at present shall be returned or hereafter otherwise disposed of.³⁰⁰

The order specified that any child with “French Pox, Evil [scrofula], Leprosy or Disease of the like Nature” would be rejected; no child with an infectious disease would be admitted. This ruling was confirmed by the announcement of March 4th 1740/1, which featured the same list of diseases, “whereby the Health of other Children may be endangered. For the Discovery whereof, every Child is to be Inspected as soon as it is brought to the Hospital.”³⁰¹ When the Hospital

²⁹⁸ Levene, *Childcare*, 158, 201. For Levene, the Hospital’s commitment to inoculation against smallpox was effective and unusual, possibly unique, popularizing the practice. *Ibid.*, 201-2.

²⁹⁹ Instructions Respecting Vaccination, Published by the National Vaccine Establishment, 1809, A/FH/A/18/010/004.

³⁰⁰ Minutes of the General Committee, A/FH/K/02/001, 16 July 1740. Also in Nichols and Wray, *The History of the Foundling Hospital*, 30. In this context, “nurses” were medical nurses, not wet nurses.

³⁰¹ Minutes of the General Committee, A/FH/K/02/001, 4 March 1740/1 (in the Julian calendar, 1740 lasted until 24 March 1740). McClure, *Coram’s Children*, 205.

opened its doors on March 25th 1741, Doctor Robert Nesbitt and his nurses inspected the babies, rejecting one who was too old and another who appeared to have “the Itch” (scabies).³⁰² Richard Mead, the royal physician, was persuaded by Coram to visit the newly received children and recommended nursing care for two who were sickly.³⁰³ Other, admitted children, including the first boy called Thomas Coram, quickly died; illnesses were not always detected. It was this medical examination that dictated the nature of the balloting that began in 1742: a white-ball baby who failed the medical check lost the place to a healthy red-ball child (see “First Admission and Ballots” section of the next chapter for a full explanation of the ballot-ball system).

The General Reception of 1756-60 had a devastating impact on the Hospital, as shown in the next chapter, but the extent of the crisis, whether measured in premature deaths or in tales of abuse and chaos, wrought by the General Reception is testimony to the successful healthcare policy pursued before and after 1756-60. When the Hospital’s leaders were unable to act with their customary prudence and vigilance, that policy was in abeyance, and the repercussions were so severe that the entire experiment was quickly abandoned, in 1760. This is not to say that the General Reception saw a decline in the paternalistic spirit evinced by the leadership: the General Reception required an immense effort from everyone who worked at the Hospital. As Nichols and Wray observed, “one can pay tribute to the courage of the men in charge of the Hospital at that time in embarking on this practically unlimited undertaking, and admire their faith in the cause they had at heart. Apart from all the questions of policy and administration involved, the actual clerical and routine work must have been stupendous, and yet all books and records were kept in perfect order.”³⁰⁴

In May of 1765, the Governors had to petition Parliament for the outstanding funds promised to the Hospital for the care of the government-funded “Parliamentary children.” In this paternalistically-worded petition, the “proper Care” of the Foundlings is emphasized by the Governors:

³⁰² Nichols and Wray, *The History of the Foundling Hospital*, 38, Minutes of the Daily Committee, 25 March 1741. Also in McClure, *Coram’s Children*, 50.

³⁰³ Minutes of the General Committee, A/FH/K/02/001, 28 March 1741.

³⁰⁴ Nichols and Wray, *The History of the Foundling Hospital*, 53.

The greatest Care hath been taken of these Children in Sickness: proper infirmaries have been provided for them; particular Inventions made use of to keep the same sweet and... temperate Air, in the most unwholesome and inclement Seasons. They have had the Attendance of able Physicians and Surgeons, who have always given their Time to this Charity without Fee or Reward, which benefit could not possibly have been attained unless the Children had been placed in proper Hospitals.

And as proper Care hath been taken of them when sick, the like Care hath been used to keep them healthy, and bring them up strong and hardy—they rise early—they eat plain [sic], coarse, and simple Diet – are allowed Flesh only two or three Times a Week—their Drink is Water—their Cloathing [sic] thin, and they go out uncovered in all Weathers; their Lodging, Schools, and Eating Rooms are kept sweet and clean, as are the Vessels in which their Food is dressed. Of the Children placed out to [apprenticeships], there have been few, if any Complaints, of their Want of Health or Strength; nor is it observed that any Signs of Weakness or Defect of health appear in those who remain in the Hospital, or among those placed out; except natural Infirmities, as Blindness, Lameness, King's Evil, or such as arise from particular Accidents.³⁰⁵

This description and perception of the “greatest Care” taken with sick children, to “bring them up strong and hardy,” coupled with the many reports and examples of correspondence with persons looking after the Foundlings, exemplifies the paternalistic benevolence – or institutional paternalism – that inspired the Governors.³⁰⁶

b) Moral and Religious Instruction

The paternalism of the London Foundling Hospital was infused with an emphasis on Christian teaching, moral instruction, and character formation for the children in its care. They were taught the virtues of industry, honesty, and obedience in order to become respectable adults; this was the paternalistic approach to social control. As Janette Bright (2017) has shown,

³⁰⁵ Ibid., 77-78.

³⁰⁶ For more examples and descriptions of the medical care of the Foundlings, see Nichols and Wray, *The History of the Foundling Hospital*, Chapter 19; McClure, “Pediatric Practice,” 361-371 and *Coram's Children*, Chapter 16; John Ramsland, “The London Foundling Hospital and its Significance as a Child-Saving Institution,” *Australian Social Work* 45, no. 2 (1992), 23-36.

“religious and moral instruction was part of the Foundlings’ formal schooling from the 1740s onwards, not least through the selection of reading material given to the children.”³⁰⁷ Children were taught to read using primers such as hornbooks, which contained biblical texts and moral tales.³⁰⁸ The Hospital’s schoolmasters also used books containing Aesop’s fables, which were designed to impart moral lessons. The children were expected to participate in daily prayers, which were considered an important part of their religious education. In sum, the initial approach to education for Foundlings was heavily influenced by religious and moral considerations. There is no evidence that nationalistic ideas were imparted.

Hospital leaders felt religious education was a means to protect the Foundlings from succumbing to the teachings of the Roman Catholic Church. As Protestants, they believed in giving the children direct access to the Word of God. In 1778, Jonas Hanway, Vice-President of the Hospital, chastised the other Governors for not making printed copies of the Hymn Book available so that the children and other attendees could read the hymns themselves while at worship: “if we mean to encourage the worship of God, in the beauty of holiness, we should endeavour that the People understand what they are saying to him.”³⁰⁹ The General Committee frequently discussed the wording of the prayers and how they should be performed.³¹⁰ Prayer Books were handed out to Foundlings as a reward for demonstrating strong reading skills, in recognition of the child’s achievement, as well as a way of fostering religious faith. Thus, prayer and faith were key components of the Foundlings’ lives. It is no surprise that architect Theodore Jacobsen placed the chapel at the centre of the establishment. John Brownlow reported on the chapel’s role in teaching “the principles of religion and morality”:

Some of the windows of the Chapel are ornamented by the armorial bearings of the Governors and Benefactors, in stained glass, and there is a fine representation of ‘Faith, Hope, and Charity,’ by Wilmshurst, which forms the centre window of the eastern gallery...³¹¹

³⁰⁷ Janette Bright, “Fashioning the Foundlings - Education, Instruction and Apprenticeship at the London Foundling Hospital c.1741-1800,” (Masters thesis, University of London, 2017), 38.

³⁰⁸ *Regulations for Managing the Hospital* [n.d.]: Of the Management of the Children, 68.

³⁰⁹ Jonas Hanway Letter: New Edition of Hymn Book, 9 March 1778, A/FH/M/01/008/151-154.

³¹⁰ Bright, “Fashioning,” 38.

³¹¹ Brownlow, *History and Objects*, 73-74.

The advertisement inviting subscribers set forth, ‘that the Governors being earnestly desirous that the children under their care should be early instructed in the principles of religion and morality, and having no place of public worship to which the children and servants of the Hospital could conveniently resort, have resolved to erect a Chapel adjoining to their Hospital; but that no part of the revenue of the said Hospital which is or shall be given for the support of the children, may be diverted from that use; and in order to defray the expense of erecting the said Chapel, they have opened a subscription for that purpose.’³¹²

Baptism was a part of the admission process and the ritual was carried out within 24 hours of a child’s reception. Typically, on Saturday the children were taken in, on Sunday they were baptized, and by Monday they were taken to the country to be reared by their nurses. Those who brought the child in the early years were asked whether the child was baptized or not, but, in any event, the Governors decided to baptize all the children, perhaps to ensure their souls were protected, and baptism was an expedient way to rename the children. All of the children admitted to the Hospital were baptized into the Church of England, no matter the religious affiliation of their birth parents. Baptism served as a powerful symbol of the program of religious instruction and moral guidance followed by children at the institution.³¹³

This religious and moral upbringing was expected to serve the Foundling well all life long. When the Hospital apprenticed out the children, masters and mistresses (hereafter “masters”) were given printed instructions to hear the children’s prayers morning and evening and to ensure they attended church on Sundays.³¹⁴ This not only saved their souls but also, in a rather paternalistic fashion, reminded the children of their station in life: “As it is of the greatest moment to breed Children in the Fear of God as the best means of keeping them in Proper Subjugation to their Masters, mistresses, and Superiors, and as Praying is the most effectual means to promote such Fear, and to inforce obedience to the Laws of God.”³¹⁵

³¹² Brownlow, *History and Design*, 71.

³¹³ Maria Zytaruk, “Caught in the Archive: Unruly Objects at the Foundling Hospital,” *Studies in Romanticism* 57, no. 1 (Spring 2018), 58. Zytaruk has demonstrated that the Hospital increased its profile by advertising public baptism of the children in local newspapers. Members of the public were also invited to attend sermons preached in the chapel – often with fitting themes like the virtue of charity – and listen to the hymns sung by the children.

³¹⁴ For a primary source that discusses placing out apprentices in the eighteenth century, see *Regulations for Managing the Hospital* [n.d.]: Of the Management of the Children, Part 6, 71.

³¹⁵ Minutes of the General Committee, A/FH/K/02/011, 3 August 1768. Also in McClure, *Coram’s Children*, 228.

c) Disabled and Chronically Ill Foundlings

The humanitarian and rational ideals of the Enlightenment, coupled with a classical paternalistic ideology, led to the micro-management of Foundlings' lives. As a result, the Governors and officers were the closest thing to fathers that many of the Foundlings had. The attentive and constant attention to the welfare of the children was arguably as multifarious and extensive as that given by most parents, as the following examples will show.

The London Foundling Hospital was attentive to the needs of disabled and chronically ill children. The pre-admission health checks often missed ailments, partly because mothers found ways to disguise problems, to give their children better life chances than could be provided at home. Secretary Morris Lievesley reported a case of a "Narcotic" being used on an infant to hide her blindness, but he showed that, thanks to her schoolmasters, the child did *not* end up being "dead weight" on the charity's funds:

Jane Freer was admitted blind by the artifice of the Mother who gave the Child a Narcotic, and being asleep when the Apothecary examined it he omitted to lift up the Eye Lids. In vain the Mother was sought for - the child was considered to be a dead weight upon the funds of the Charity - but not so. When Jane arrived from the Country she was...also blind, and had every assistance from Masters to acquire a knowledge and the practice of Music. When she was 12 years of age she was proficient - She had a good Voice, she could play every Instrument and in fact nothing appeared to be a difficulty in Music... this Child of Genius...Jane contributed greatly in raising the Singing Services of the Chapel to that state of excellence which enabled the Governors to receive nearly £3000 per annum from the Public.³¹⁶

Many Foundlings who grew up with significant disabilities remained at the LFH throughout their lives and engaged in productive work. According to Treasurer Sir Thomas Bernard's 1799 *Account of the Foundling Hospital*, those with "imbecility of body, or mind," were required to

³¹⁶ Lievesley, "Manuscript notebook," A/FH/F/14/001/001 (handwritten), 4.

“remain at the Hospital, as comfortable and useful as their capacities will allow.”³¹⁷ But not every disabled child had the capacity to engage in profitable work. John Brownlow nicely describes this phenomenon:

Perhaps the healthiness of the locality could not be better exemplified than by this fact that several adult foundlings, who, from some organic defect, have from time to time become chargeable to the Hospital for life, and have scarcely ever quitted the walls of the building, have lived to a very advanced period some dying between the ages of seventy and eighty years, and others between eighty and ninety.³¹⁸

Here is another element of institutional paternalism. Children who would not enter the world outside the Hospital were taken care of from cradle to grave.

Blind Foundlings began receiving musical education from 1753 onward.³¹⁹ This training later enabled blind former Foundlings to generate income and lead relatively comfortable lives *outside* the Hospital. Bernard explained that the teaching and performance of music at the Hospital took place as a paternal and charitable gesture aimed at “giving comfort and independence to any of the hospital children whose sight might fail.”³²⁰

Children admitted with a £100 donation did not have to undergo the rigorous admission procedure of regular applicants and several of these children had disabilities. In 1770, the Hospital accepted a club-footed boy named George Grafton.³²¹ Grafton was born with deformities that caused his feet to turn inwards, making walking a challenge for him. In 1778, the Hospital sought the carpenter’s expertise to determine if a “machine” could be created to

³¹⁷ Sir Thomas Bernard, *An Account of the Foundling Hospital in London, for the maintenance and education of exposed and deserted young children*, 2nd ed. (London: Printed for the Foundling Hospital by Thomas Jones, 1799), 35. Imbecility was then a term that applied to body or mind.

³¹⁸ Brownlow, *History and Design*, 45, also in *History and Objects*, 47.

³¹⁹ Bright, “Fashioning,” 40.

³²⁰ Bernard, *An Account of the Foundling Hospital*, 46. Thomas Grenville, one of the blind boys to receive this musical education, will be discussed in more detail near the end of this chapter as he was a recipient of the Benevolent Fund.

³²¹ General Register, A/FH/A/09/002/004, 22 April 1770 (Grafton).

assist Grafton.³²² At the age of 10, Grafton underwent surgery, which proved unsuccessful, further compounding his difficulties. But the Hospital's paternalistic care did not end there. Due to his disability, when he left the Hospital, his master, shoemaker James Badland, was granted a remarkable apprentice premium of £21 – the master said that 20 guineas was “the least he will take” – which was far above the usual £5 or £10.³²³ Grafton completed his apprenticeship and subsequently returned to the Hospital's service to provide shoes for the children.³²⁴

The Governors not only protected the children in reactive ways but also implemented preventive health measures to enhance the Foundlings' overall well-being. In 1787, when the Hospital was desperately looking for ways to get the charity's finances back on track, the General Court considered a motion to develop some of the extensive acreage that had been purchased decades earlier:

Resolved,
That it is the opinion of this Court, that to Erect any Building on the Lands belonging to this Hospital, on which no Buildings are already erected, by which a free & open circulation of wholesome air is now enjoyed by the Children in the said Hospital; would be detrimental to their Health, and contrary to the original Institution of the Charity...³²⁵

The Governors held that their first duty was to help children grow up in the healthiest way possible. Thus, instead of building on the land to generate income and risking exposing the children to “unhealthy air,” they decided to take in fewer children. Eventually, of course, they would have no choice (financially) but to build on the land.

³²² Janette Bright, “Love at the Foundling Hospital: Eleanor Weathers and George Grafton,” Coram Blog Post, #RealStoriesOfCare series, <https://coramstory.org.uk/explore/content/blog/eleanor-and-georges-story-love-at-the-foundling-hospital/>.

³²³ Letters and Memoranda regarding Apprentices, A/FH/A/12/023/001, Steward's report, 29 March 1788. Apprenticeship Register, A/FH/A/12/003/002, 101, apprenticed on 14 May 1788.

³²⁴ Bright, “Love at the Foundling Hospital.”

³²⁵ Minutes of the General Court, A/FH/K/01/003, 27 June 1787; also discussed in McClure, *Coram's Children*, 156-7. The next chapter will highlight the changes in income and what that meant for the admission policy.

Anything discovered to be “injurious” to the children was immediately corrected. This continued into the nineteenth-century. In particular, there was increasingly close supervision of the work of inspectors and nurses, with visits by Hospital officials to the outlying areas. For instance, in the summer of 1815, the General Committee read the following report addressed to Secretary Morris Lievesley “from the Matron upon her visit to the Chertsey” in Surrey, about the children living there with wet nurses:

Inspection, by which it appeared, there were 84 Children under Mr Living.

Viz.

66 fine healthy Children,

8 in good health,

5 weakly,

1 with a diseased finger,

1 deformed in the back,

2 D[itt]o in legs.

1 with bad eyes.

She also reported that the Child Mary Ann Curtis, who has a diseased finger, and Rachel Oliver with bad eyes, had occasioned their respective Nurses, great trouble.

Ordered,

That the Nurses of Mary Ann Curtis and Rachel Oliver have respectively 1/- p. week in addition to their allowance, until further orders. Dr Stanger on the part of the Medical Gentlemen, reported that all the healthy Children of the Hospital (to whom the Bath is not an object of terror) might during the Summer season bathe as often as may be convenient to the business of the Hospital; and that the Medical Gentlemen would feel it a duty to give particular directions with respect to the bathing...³²⁶

The Committee paid the nurses extra for the trouble of caring for two children who caused them “great trouble.” Thus, the Hospital ensured adequate care for those with exceptional needs.

Chertsey featured again many years later. In September 1851, the Governors received an unfavorable report about the nursing in Chertsey. A Hospital delegation discovered many “sickly” children, due to outbreaks of measles, whooping cough, and diarrhea. The report

³²⁶ Minutes of the General Committee, A/FH/K/02/033, 12 July 1815.

highlighted cases where the inspector had chosen inadequate nurses. The cottage of the nurse assigned to “child No. 20,478” was found to be substandard and unclean.³²⁷ Another wet-nurse was deemed unfit, leading to the strong recommendation for the immediate removal of the two children under her care. Furthermore, the report revealed that some children had not received smallpox vaccinations, despite the local apothecary being commissioned for that purpose. Due to the impoverished state of the town, the Committee advised against sending any more children to Chertsey.³²⁸ The following year, another delegation found “a large number of sickly children” there and concluded that “sufficient care has not been observed in all cases either in the selection of the Nurses or the locality... [T]he outlying districts are preferable to the Town of Chertsey.” They recommended removal of four children from “inappropriate wet-nurses” and wondered if “the management of the Surrey Inspection [by a married couple] was capable of improvement.”³²⁹

d) Finding Foundlings Good Apprenticeships

Where necessary, the London Foundling Hospital oversaw the children’s welfare from a distance, both during their infancy while under the care of nurses and after their upbringing at the Hospital, when they departed for apprenticeships. The vast majority of Foundlings, some of them shockingly young, were apprenticed to skilled masters. The Hospital sought to protect them, firstly by placing the children appropriately, matching the child’s nature with the type of work and choosing respectable employers, and then by requiring the latter to sign indentures in which they committed to providing food, clothing, accommodation, training, and (for the last three years of the apprenticeship) payment – and the Hospital was responsible for monitoring the placements to ensure that the employers fulfilled their obligations. This does not mean that the Hospital took effective action on every occasion. Often the problem went undetected, and it cannot be said that justice and equity generally prevailed when a propertied person mistreated a

³²⁷ Ibid., A/FH/K/02/051, 20 September 1851.

³²⁸ Ibid..

³²⁹ Ibid., A/FH/K/02/052, 30 October 1852.

penniless child. Eighteenth century mores were not conducive to fair and balanced resolution of conflict between rich and poor.³³⁰

But the Hospital's role was clear, it was expected to enforce the terms of the indenture, and Helen Berry, whilst fully recognizing that many children were consigned to dreadful fates, rightly talks of "a sense of continuing obligation on the part of the Governors."³³¹ The healthcare measures of the Hospital did not make it an entirely safe place for the children, but the benevolent *intent* of the *policy* was clear. In the same way, while no agency could obviate the sometimes-harsh injustice of eighteenth-century society, the Hospital was dedicated to protecting the apprentices. The *system* was paternalist in relation to both healthcare and apprenticeship, and this is why, for all that there were individual failings and disappointing outcomes, the idea of institutional paternalism is germane.

Oversight was thorough. After being placed in their apprenticeships, the Foundlings continued to be monitored closely by the LFH, which was usually straightforward since the majority of children completed their apprenticeships close to the Hospital in London. The matron and the schoolmaster often visited the apprenticed Foundlings to ensure that everything was going well. Like fathers in traditional families, the Governors and officeholders took complaints about the children. The Hospital's leaders were quick to intervene and, if required, help get the children out of unsafe situations or failed relationships. Discreet inquiries would be made and the Committee might summon the master to appear before it. Then the Committee took what they deemed to be appropriate action, be it mild scolding of the child, reassignment to a different employer, or legal action against an errant master.

The Hospital faced a considerable barrage of complaints about masters, which it seems to have been taken more seriously than complaints against the children.³³² Many complaints singled out masters who made inadequate provision of food and clothing, or subjected apprentices to unsanitary living conditions. Some masters absconded, leaving children to fend for themselves, sometimes forcing them to resort to begging. Others shirked their responsibility to teach the apprentices a trade, a number taught them illicit activities such as theft, and, sadly, some masters

³³⁰ Helen Berry's catalogue of 'Cruelty' includes little by way of effective Hospital response. The 'Kindness' in her chapter name, 'Cruelty and Kindness', referred to the kindness of others. Berry, *Orphans of Empire*, op. cit., chapter 7.

³³¹ Ibid., 212.

³³² McClure, *Coram's Children*, 133.

subjected the children to excessive labour, physical abuse, and even starvation.³³³ Famously litigious, the Hospital was remarkably quick to commence legal proceedings, holding masters accountable for their actions and demonstrating its readiness to go to considerable trouble and expense to protect the children in their care.

Secretary Morris Lievesley reported on the “paternal feeling of the Governors” in relation to Thomas Freeman’s apprenticeship woes:

Thomas Freeman (No, 18,840) was apprenticed to a Gentleman in Nelson Square as Footman. Complaints were made that he was idle and filthy. The family was large... The Indentures were cancelled and he was then assigned to a Surgeon in Wiltshire. Complaints by letter were numerous and the Master proposed that he should be turned over to a Blacksmith. The Blacksmith’s character not being approved of the Master gave notice he would take the boy before the Magistrates for general Misconduct. The Governors directed the Sec[retary] to request a neighbouring attorney to attend the hearing of the Case and an attorney was recommended... the attorney replied I will attend – but it will be of no use as the Master possesses the Ear of all the magistrates. The attorney was right – Tom was sent to the Gaol of the Devizes – but the paternal feeling of the Governors rested not here. They directed their Sec[retary] to state the whole Case to the Prime Minister – who procured under the Royal Sign Manual Toms Pardon who returned to the Hospital and served the remainder of his Term honestly and faithfully with the Sec[retary] who subsequently procured for him a permanent Service with the [?]...as following that he was employed by the Surgeon as groom that being an extensive Country practice particularly as Man Midwife...³³⁴

The Hospital’s continued support, despite many failed apprenticeships, eventually helped Freeman to secure reputable employment as a groom.

Another example of the Hospital’s seeking justice for a Foundling came after the unfortunate “murder” by her master of Foundling Jemima Dixon in 1771. The General Committee ordered the Ackworth branch hospital “to assist in carrying on the prosecution” and added an instruction that the “cruel usage” of another Foundling apprentice, Elizabeth Owen,

³³³ For heart-wrenching examples of some of these abuses, see Berry’s *Orphans of Empire*, Chapter 7; Nichols and Wray’s *The History of the Foundling Hospital*, Chapter XXV; McClure’s *Coram’s Children*, Chapter 10.

³³⁴ Lievesley, “Manuscript notebook,” 8.

should also be prosecuted. The Hospital acted on what seemed to be the lesson of such episodes: “This Committee taking into consideration the Above and other facts of the like nature which they think have been occasioned by improper people applying for to take [sic] Children apprentice with Fees, are of opinion and recommend it to the Committee at Ackworth that for the future no apprentice Fees be given with Children placed out apprentice.”³³⁵ Premiums would no longer be given with apprenticeships because they “attracted the worst kind of persons.” Dixon’s employer was convicted but later reprieved.³³⁶

The question of premiums had long exercised the minds of Governors concerned about the children’s welfare. From the early years, the Governors asserted that no premium should be provided to masters who took apprentices. Immediately after the General Reception, the Governors encountered difficulties in finding placements, given the enormous number of children involved. So, an apprenticeship premium scheme was forced on the Governors by Parliament.³³⁷ Through the Hospital, the government paid apprentice premiums (of between £5 and £10) to masters willing to take children, to speed up their departure. Alone among the Governors, Jonas Hanway supported the measure, arguing that such fees would be financially beneficial.³³⁸ The rest of the Governors opposed the policy and their argument was the essentially paternalist one: that payment of fees would attract “very indigent characters” who might not adequately provide for or train the apprentices.³³⁹ This view won out in the end: the fees were provided for only a limited duration, between 1767 and 1771. In 1771, when all the children who had been state-funded had departed, and the Governors finally got to retake full power over Hospital policy and procedure, they immediately did away with apprenticeship fees for healthy children.

Concern for the children’s safety was again evident when the Governors prosecuted Mr. and Mrs. Adams in March 1770 for “ill using the girl Charlotte King.”³⁴⁰ When Francis Desse’s master had him arrested for planning to run away, the boy was sentenced to hard labour and kept

³³⁵ Minutes of the General Committee, A/FH/K/02/013, 1 May 1771.

³³⁶ Alys Levene, “‘Honesty, Sobriety and Diligence’: Master-apprentice Relations in Eighteenth- and Nineteenth-century England,” *Social History* 33, no. 2 (2008), 197.

³³⁷ Bright, “Fashioning,” 64.

³³⁸ McClure, *Coram’s Children*, 116-117.

³³⁹ Bright, “Fashioning,” 76.

³⁴⁰ Nichols and Wray, *The History of the Foundling Hospital*, 183.

in solitary confinement in Bridewell Prison until the Hospital's schoolmaster persuaded the master to "freely resign him."³⁴¹ In October 1771, the Governors discharged a brewer and a baker for beating their apprentices.³⁴² Additionally, they reprimanded numerous masters who violated the obligations outlined in the indentures by refusing to provide the apprentices with new clothing upon completion of their service or pay the apprentice for their last three years of work.³⁴³

The Governors took multiple measures to prevent ill treatment of apprentices. They withheld a portion of the apprentice fee, during the short time when one was paid, until the second or third year of the apprenticeship, releasing the balance only after ensuring the apprentice was in a satisfactory situation.³⁴⁴ In March 1756, the proprietor of the *Black Dog* in Vauxhall, "having apply'd to the Committee for a Girl out of this Hospital, was told for Answer, That the Committee thought it improper to place out any of the Children to Persons who keep publick Houses."³⁴⁵ Girls were also prohibited from being apprenticed to single men, as well as to married men without formal permission from their wives.³⁴⁶ Likewise, individuals who kept lodgers were excluded from taking on girl apprentices as a precaution against sexual predators.³⁴⁷

The Governors acted to protect the economic and moral welfare of the children. A well-known illustration of the concept of division of labour, described in Adam Smith's *The Wealth of Nations* (1776), was the production of pins: the process involved specialized tasks focusing on different components. But the Hospital decided against putting its girls into pin manufacturing because it would lead to their being poorly paid for excessively long hours, "working from 5 o'clock in the morning 'till 9 or 10 at night."³⁴⁸ Interestingly, ethical concerns proved equally important. The Steward personally inspected a pin factory and reported to the Committee that sending girls to work there would deprive them of the opportunity of "acquiring proper habits and notions of cleanliness or any other requisite of a Female." The Steward noticed that there was no separation between male and female workers, leading to a "promiscuous mixture" of

³⁴¹ Berry, *Orphans of Empire*, 182-83.

³⁴² Nichols and Wray, *The History of the Foundling Hospital*, 270.

³⁴³ McClure, *Coram's Children*, 135.

³⁴⁴ Ibid..

³⁴⁵ Minutes of the General Committee, A/FH/K/02/005, 10 March 1756.

³⁴⁶ Ibid., A/FH/K/02/004, 28 February 1753 and 28 November 1753.

³⁴⁷ Bernard, *An Account of the Foundling Hospital*, 118.

³⁴⁸ Berry, *Orphans of Empire*, 158.

individuals from the “lowest class.” His account convinced the Hospital to exclude Foundling girls from participating in this form of manufacturing.³⁴⁹

Almost a century later, the Hospital continued to attend closely to the well-being of those apprenticed out. It was more attentive than ever under Secretary Brownlow, the embodiment of diligent professionalism. At a time when literacy rates were as high as postal rates were low (the latter thanks to the Uniform Penny Post), correspondence flowed as never before between apprentices or employers and the Hospital.³⁵⁰ Girls in domestic service complained about mistreatment by their mistresses and mistresses found the girls’ attitude and work unsatisfactory. The issue at stake was generally a breakdown of relations between mistress and servant, rather than any suggestion of abuse, but the interventionist response of a paternalist institution was the same. This is not to say that Brownlow and his colleagues immediately leapt to the defence of every girl. His denunciation of the “insolence and general incivility” of Frances Holmes in August 1853 threatened her with imprisonment (and the prospect of a lonely death).³⁵¹ Such acerbity is a reminder that paternalism was authoritarian as well as benevolent, perhaps especially in its harsh Victorian version. But the point is that the Hospital constantly stepped in to resolve problems.

When Frances Holmes failed to mend her way at first (her mistress was “sorry to say her insolence is so intolerable that I feel degraded in being obliged to submit to it before the other servants”),³⁵² Brownlow sent Miss Soley, the Girls’ School Principal, to visit the home and the girl went on to complete the full term of the apprenticeship. Other victims of discontented mistresses had to be moved: Mary Pullen and Sarah James were reassigned to successive employers; and Agnes Harvey, Elizabeth Morgan, and Sophia Foster were helped by the Hospital to emigrate to Australia.³⁵³ The first of two Miss Soley visits to Foundling Laura Mansel’s

³⁴⁹ Ibid., 157-58.

³⁵⁰ “The postage of this letter will take the last penny I have.” Secretary’s Correspondence, A/FH/A/06/001/112/017, Rachel Symonds to [Miss Soley], July 1854.

³⁵¹ Letterbook, A/FH/A/06/002/012, 25, Brownlow to Holmes, 11 August 1853.

³⁵² Secretary’s Correspondence, A/FH/A/06/001/111/008, Harding to Brownlow, 13 December 1853.

³⁵³ Ibid., A/FH/A/06/001/111/008, Haley to Brownlow, 2 April 1853; *ibid.*, A/FH/A/06/001/112/020, Ward to Soley, [n.d.]. Minutes of the General Committee, A/FH/K/02/053, 19 November 1853; *ibid.*, A/FH/K/02/055, 24 April 1858. Apprenticeship Register, A/FH/A/12/003/003, pp. 2 (Harvey) and 4 (Morgan). Testimonials, A/FH/A/12/010/100, No. 60, Sarah James (1853); *ibid.*, A/FH/A/12/010/101, No. 29, Adams, with Ward to Brownlow, 8 April 1854, and No. 51, James, with Ward to Soley, [1854]; *ibid.*, A/FH/A/12/010/102, No. 36, with Lemon to Soley, 1 April 1855; *ibid.*, /103, No. 22 (awarded 10 shillings in 1856).

placement so infuriated the girl that her mistress felt she had to hide the knives. Mansel was offered assisted emigration to Australia but chose instead to move to another placement; Brownlow called her master “a blackguard” after the man refused to “furnish her with an outfit” equal to the one she had arrived with.³⁵⁴ Sarah Nowell and Margaret Sturt, the latter a victim of an evangelical mistress who considered “punishment” a “wholesome medicine” – how “good it is for her to drink the wholesome draught of correction”³⁵⁵ – were moved several times before Brownlow decided that, still unsettled at nearly twenty, they would have to make their own way.³⁵⁶

When Matilda Burney was deemed “very rude, disobedient, negligent & almost wilfully destructive of crockery” by her master, Brownlow warned that she would end up in the parish workhouse; the girl was “realy [sic] penitent” (and “confessed my faults to God”) and urged Brownlow to “tell me if you and dear Miss Soley will forgive me for I have given a firm promise that it should never happen again.”³⁵⁷ Brownlow’s reply was that of a relieved parent: “My greatest delight in this world is to hear of the welfare and good conduct of those who have been brought up in this Hospital... Believe me your Friend, J. Brownlow.”³⁵⁸ More father than “Friend,” it might be thought. Sadly, Matilda relapsed, becoming “idle, careless and impertinent... She has called her mistress a beast & other names.” Miss Soley’s visit was unavailing, two new placements also ended in tears, and, with Brownlow’s help, the exhausted girl willingly left for Melbourne.³⁵⁹

If the paternalism displayed towards these troubled girls was frequently expressed in censorious and exasperated tones, the Hospital’s dealings with the boys who entered the military in the 1850s – boys who did not clash with their employers – were more cordial, resembling the relations normally found between proud parents and loving sons. From their barracks and ships,

³⁵⁴ Secretary’s Correspondence, A/FH/A/06/001/111/011, Morgan to Soley, 7 March 1853. Minutes of the General Committee, A/FH/K/02/053, 28 October 1854. Letterbook, A/FH/A/06/002/012, 178, Brownlow to Simpson, 20 November 1854 (“blackguard”).

³⁵⁵ Secretary’s Correspondence, A/FH/A/06/001/111/007, Gill to Brownlow, 18, 23, 26 August 1853.

³⁵⁶ Letterbook, A/FH/A/06/002/012, 263, Brownlow to Southwell, 1 June 1855; *ibid.*, 368, Brownlow to Freeman, 21 July 1856.

³⁵⁷ Secretary’s Correspondence, A/FH/A/06/001/111/008, Hervey to Soley, 7 May 1853; *ibid.*, A/FH/A/06/001/111/002, Burney to Brownlow, 4 July 1853.

³⁵⁸ Letterbook, A/FH/A/06/002/012, 13, Brownlow to Burney, 7 July 1853.

³⁵⁹ Secretary’s Correspondence, A/FH/A/06/001/111/008, Hervey to Brownlow, 30 September 1853; *ibid.*, A/FH/A/06/001/112/008, Hervey to Soley, 14 March [1854]. Minutes of the General Committee, A/FH/K/02/054, 11 April 1857. Apprenticeship Register, A/FH/A/12/003/003, 6.

many of the new recruits corresponded with Secretary Brownlow, Bandmaster Twiddy, and, perhaps surprisingly, Miss Soley of the Girls' School. The boys showed respect and affection towards those who had brought them up. On one occasion, Augustus Browne told Soley that he hoped to "keep up my Education as much as possible" and "to prove myself worthy of the kindness of my Benefactors."³⁶⁰ Daniel Sharp, exasperated under the tough regime of the Army, came to appreciate the consideration he had received at the Hospital: "I now can see how good you [Brownlow] were to me and all others in that school. Many a time I wish myself back again."³⁶¹ In return, the boys received fatherly advice (Brownlow to Sharp: "I advise you, as a friend, not to commence Life by borrowing money. Do without any little matters [sic] rather than do that. It is sure in the end to lead you into trouble"³⁶²), practical support, including clothing, and financial assistance: Sharp's final letter in 1854 asked Brownlow "to send me a small sum of money for to spend the Christmas holidays with and I would be exceedingly pleased if you send [Foundling John] Rabnett a Christmas box... We have no such merry days here as we did there at the Foundling..."³⁶³ The Hospital paid the cost of the boys' uniforms when their regiment imposed it on the "downhearted" recruits, Brownlow commenting that "their continued good conduct will be a source of happiness to me at all times."³⁶⁴

Britain joined the Crimean War on March 28th 1854 and, over the next two years, ten former Foundlings were brought to the Crimea. Browne was thankful for Brownlow's best wishes on his departure: "I received your farewell letter a short time back, and feel grateful to you for heartily wishing me every success – and do not be doubtful as to my writing to you while in Russia, for what I promise I will perform."³⁶⁵ Browne kept this promise faithfully until he died from dysentery outside Sebastopol on the last day of January 1855.³⁶⁶ Another boy, Richard Lawford, was invalided back to Britain after suffering serious injury on *HMS Princess Royal*,

³⁶⁰ Secretary's Correspondence, A/FH/A/06/001/112/002, Browne to Soley, 7 March 1854. See also *ibid.*, A/FH/A/06/001/112/017, Stalman to Twiddy, 2 March 1854; *ibid.*, A/FH/A/06/001/114/008, Hopkins to Twiddy, 12 April [1854].

³⁶¹ *Ibid.*, A/FH/A/06/001/113/016, Sharp to Brownlow, 11 March 1855.

³⁶² Letterbook, A/FH/A/06/002/012, 39, Brownlow to Sharp, 19 September 1853.

³⁶³ Secretary's Correspondence, A/FH/A/06/001/112/017, Sharp to Brownlow, 18 December 1854.

³⁶⁴ Minutes of the General Committee, A/FH/K/02/053, 15 April 1854. Secretary's Correspondence, A/FH/A/06/001/112/003, Cunningham to Brownlow, 12 April 1854. Letterbook, A/FH/A/06/002/012, 129, Brownlow to Cunningham, 17 April 1854.

³⁶⁵ Secretary's Correspondence, A/FH/A/06/001/112/002, Browne to Brownlow, 10 April 1854.

³⁶⁶ *Ibid.*, A/FH/A/06/001/113/019, Corporal Thomas Williams to the Foundling Hospital, 22 February 1855.

and the Hospital sent him to convalesce in Kent before giving him £30 towards his emigration to Borneo (“the passage & outfit of Richard Lawford to Borneo”).³⁶⁷

Not surprisingly, given their courage and sacrifice, first in Crimea and then against the India Rebellion, these boys were acclaimed in turn by the Hospital: in 1859, a “Day of Thanksgiving” was celebrated “for the signal successes obtained by the whole of the forces serving in India... [I]t is gratifying to the Governors to know that during the war in the Crimea & also in India many Foundlings were engaged in the Service of their Country. Last year 6 of the Boys left us for the Army.”³⁶⁸ This gesture apart, the Hospital, through all of this lengthy correspondence, resembled nothing as much as a normal family, one blessed with proud, indulgent, and caring parents and devoted, grateful children. This was paternalism – *in loco parentis* – in a narrower sense than is usually meant in historical treatises.

The Governors’ concern for the welfare of the Foundlings was deep-seated and steadfast even after the children left the Hospital. The institution offered guidance, medical support, and a secure refuge for mistreated apprentices. It acted against masters who abused their workers or failed to honour their commitments. But the paternalistic disposition to intervene involved more than action in response to abusive relationships and emergencies. Hospital officials stepped in to resolve the full range of difficulties encountered by apprentices, acting like fathers and mothers when their children needed help in their first contacts with the adult world.

Many apprentices came home to visit the LFH. Several of the boys who went to the Crimean War called at the Hospital before or after their journeys. Trafalgar hero George King found solace in regular visits to the Hospital, which he continued to regard as his homebase.³⁶⁹ After the master of Henry Rivington, King’s best friend, went bankrupt, Henry resolved to leave London to join the army, but he first returned to the Hospital “taking with [him] such Fruit as were in Season to distribute amongst the younger Community.”³⁷⁰ It would be a stretch to claim that this incident showed how the LFH’s paternalist spirit was passed down the generations of

³⁶⁷ Ibid., A/FH/A/06/001/113/010, Lawford to Brownlow, 19 August, 29 October 1855. Minutes of the General Committee, A/FH/K/02/054, 13 June 1857, 30 January 1858; *ibid.*, /055, 29 May, 24 July 1858. Letterbook, A/FH/A/06/002/012, 388, Brownlow to Lawford, 26 November 1856.

³⁶⁸ Ibid., A/FH/A/06/002/013, 122, Memorandum to the Bishop of Ripon, [April] 1859.

³⁶⁹ George King, *Autobiography*, *op. cit.*, 10, 16, 19, 44, 47, 65.

³⁷⁰ Ibid., 16.

Foundlings, but an idea of the caring environment created by paternalist adults is suggested by this small instance of kindness and generosity.

e) Rewards and Punishments

Paternalism, as Roberts showed, was authoritarian and hierarchic as well as benevolent – ruling “firmly and resolutely” as well as helping vulnerable dependants.³⁷¹ Like strict fathers, the London Foundling Hospital punished Foundlings who did not behave according to the Governors’ expectations. The Hospital’s publications and meeting minutes offer insights into their conception of appropriate and inappropriate conduct. As emphasized in the Hospital’s 1749 *Regulations*, the children should only engage in “innocent and active” endeavors.³⁷² Uttering profanities or exhibiting improper behaviour was strictly prohibited and subject to punishment, as were games of chance.³⁷³ On June 18th 1755, the Governors added the rule that the Foundlings were not allowed in the courtyard at certain hours and that they had to refrain from begging.³⁷⁴ The Governors clearly desired to envelop the Foundlings in a highly moral environment, a common feature across all types of paternalism.

The children were required to live orderly, regimented lives. They followed a strict timetable which saw them waking, eating, working, learning, playing, and praying at set times; they wore uniforms which allowed for no individual expression; and the boys and girls were kept strictly separate.³⁷⁵ The Hospital left little evidence of how these restrictions were enforced – no scale of punishments has been discovered – but the General Committee minutes frequently mentioned floggings (some cases are noted below) and the idea of punishment was mentioned when the first generation of children were mere infants: in June 1743, the Committee ordered that the children could only be “corrected” under the “Order of the Matron and in her presence.”³⁷⁶ All of these regimented features of daily existence were part and parcel of institutional paternalism.

³⁷¹ Roberts, *Paternalism*, 4-6.

³⁷² Bright, “Fashioning,” 43.

³⁷³ *Ibid.*, 70.

³⁷⁴ *Ibid.*, 43.

³⁷⁵ *Regulations for Managing the Hospital* [n.d.]: Of the Management of the Children, 68-71.

³⁷⁶ Minutes of the General Committee, A/FH/K/02/001, 8 June 1743.

The case of Foundling John Oldfield offers us a window into the ‘parenting mentality’ of the Hospital in the wake of the General Reception. While fleeing from your apprenticeship was punishable by whipping, Oldfield ran away from his apprenticeship back to his nurse more than once. The Committee decided, on one of his last escape attempts, that he would not be “had at the halberds” (beaten with a stick) since he begged the Governors for forgiveness.³⁷⁷ Institutional paternalism could be flexible: although an institution with seemingly strict rules that reflected the general tenor of attitudes to child discipline, the LFH, like parents, exercised sympathy on a case-by-case basis, forgoing typical rules for what they thought was best for the child.

As was common in eighteenth and nineteenth century families, the Foundlings were physically punished for wrongdoing. The Hospital *generally* adhered to set procedures, as shown by the General Committee’s handling of an instance of theft in September 1814. Two boys who “committed Theft twice” were to be “flogged” as “an example to the other Boys”:

Mrs Searell and Mr Caldwell attended the Committee and stated, that Thomas Gall and John Mounsey, since they were reprimanded, had committed Theft twice, viz. in taking Meat from the Kitchen on Thursday, and Pears from the Garden on Sunday Evening, upon which last occasion they absented themselves from Divine Service.

Mrs Searell and Mr Caldwell also reported, that Thos. Jennings was of the Party when the Meat was stolen, and that one of the large flag stones was broken by the Boys on Saturday, & another on Sunday.

Resolved,

That as an example to the other Boys, and to prevent a repetition of such offences, and to preserve a proper subordination out of the School, Thomas Gall and John Mounsey be severely flogged, and Thomas Jennings slightly[,] by the Schoolmaster, in the presence of this Committee.³⁷⁸

On December 7, 1814, the General Committee reported that John Jones and Robert Horne were to be flogged and “six other implicated Boys” castigated for their lesser roles:

³⁷⁷ Sub-Committee Minutes, A/FH/A/03/005/009, cited in Bright, “Fashioning,” 82.

³⁷⁸ Minutes of the General Committee, A/FH/K/02/033, 28 Sept 1814.

Read a report from Mr Woodham the Schoolmaster, stating, that John Jones No. 3, and Robert Horne, both employed in the Storeroom, had stolen Flour and Bread therefrom, and that six other Boys were implicated, by receiving part of the things so stolen.

Resolved

That John Jones No. 3 and Robert Horne be severely flogged by the Schoolmaster in the presence of the Governors; and that it be left to Mr Woodham to chastise the six Boys in such way as he may think proper...³⁷⁹

This example demonstrates that the harsher, physical punishments were to be imposed and supervised by the governing body directly, but that LFH employees were given discretion over less draconian punishments. Making sure that the floggings occurred in the Governors' presence ensured that the punishment was neither too severe nor overly lenient.

Sometimes children were punished unjustly. On July 8th 1844, Secretary Morris Lievesley received a report from then-Treasurer's Clerk John Brownlow that some of the older Hospital boys were causing "tyranny" and "injustice" by bullying the younger boys into taking the blame for their misbehaviour:

Tyranny amongst amongst the Elder Foundling Boys:

This 8th July 1844 Mr Brownlow informed me that two of the younger boys had been severely flogged and imprisoned for a fortnight for theft most artfully contrived and executed – and that it had been discovered the Child had been unjustly punished – Two of the Elder Boys being the guilty Parties and that by threats of violence they had compelled the little ones to take upon themselves the Crime and punishment.³⁸⁰

³⁷⁹ Ibid., 7 December 1814.

³⁸⁰ Lievesley, "Manuscript notebook," 24.

Information about the repercussions for the older boys' deception has not been found, but, clearly, very poor behaviour continued to merit severe punishment, in this case both flogging and imprisonment.

This did change subsequently. Once the protection of children became a subject of heated debate in the middle of the nineteenth century, the Governors matched the contemporary understanding of children's rights, updating their policies according to changing cultural norms, when they ordered the cessation of corporal punishment in 1892. There followed a significant challenge to the new policy and, in the event, a robust assertion of the Governors' authority. In 1895, an anonymous "friend to the little Children" wrote to the Governors to report that a forcibly restrained girl was "subjected to the most degrading punishment with a stick and hairbrush" and then isolated in the schoolroom, in darkness, for an entire day. The writer suggested that the teacher be reprimanded for her unreasonable harshness, otherwise she would "go on in her brutality and make havoc of the girls' characters."³⁸¹ Miss Florence Lexster, the First Assistant Mistress, was found to have instructed female wardens to restrain 12-year-old Phoebe Scott, allegedly guilty of "improper" conduct, while she administered several strikes with the flat side of a hairbrush on the girl's exposed body in front of other Foundlings, "the girl only having a nightdress and vest on."³⁸² Lexster confessed to locking the girl alone in a dark room in the Girls' School, without heating, for two hours during the winter. She also acknowledged that she employed "the same kind of punishment on other girls" despite the ban on physical punishment, but argued that she had done so with "the knowledge and sanction of Miss Ramsay," the Headmistress. The General Committee unanimously decided to request Lexster's resignation.³⁸³

The Hospital had a sense of correct procedure, with punishment variable according to the offence (note the distinction between "severely" and "slightly" flogged in 1814). It gave a role to the General Committee in serious cases, and took disciplinary action against servants guilty of excessive behavior. Such ideas of discriminatory, regulated discipline and punishment are reflective of the concept of institutional paternalism. Everyone at the Hospital was accountable

³⁸¹ Minutes of the General Committee, A/FH/K/02/075, 1 February 1895.

³⁸² Ibid..

³⁸³ Ibid..

for their behaviour, not just the children. This is the hallmark of a well-run institution or, put another way, one of the essential attributes of institutional paternalism.

When Foundling apprentices excelled in their placements, they received pecuniary rewards. Assessments of performance and conduct by Hospital staff highlight the nature of institutional paternalism: it coupled the institutional approach to rules and criteria with a parental notion that highlighted the individual natures of the children. Apprentices were evaluated for their honesty, sobriety, and diligence, as well as their ability to steer clear of negative influences and inappropriate language; these virtues were identified using a schedule of questions put to the employers. Additionally, the Hospital schoolmaster or the matron would often furnish supplementary details about the individuals and their personal circumstances, such as accounts of Foundlings overcoming hardships.³⁸⁴ This demonstrates a dedication on the part of the LFH staff to providing both moral and practical education, highlighting how paternalism adapted to reflect the morals and needs of a particular institution.

f) Supporting Adult Foundlings

If the correspondence between London Foundling Hospital personnel and apprentices occasionally suggested a paternalistic relationship, the same might be said of the Hospital's commitment to the welfare of some who had completed their apprenticeships, terminated formal connection with the institution, and passed into adult life. The Hospital's increasingly methodical support for "decayed" ex-Foundlings was a notable feature of institutional paternalism.³⁸⁵ In other words, the Governors "often provided lifelines to their former charges and a valuable safety net that was not available to poor people who had no connection with the charity... [The Governors] provide[d] practical help if they fell upon hard times in adulthood."³⁸⁶

³⁸⁴ Bright, "Fashioning," 90.

³⁸⁵ The word "decayed" is a borrowing from Handel's will, where he famously pledged £1,000 to sustain "decayed Musicians." The Foundling Museum, Gerald Coke Handel Collection, codicil of 11 April 1759.

³⁸⁶ Berry, *Orphans of Empire*, 232.

In 1841, a group of the Hospital's Governors established the Benevolent Fund. The circular appeal for funds indicates that the proposed beneficiaries were distressed former Foundlings, and their widows and orphans:

FOUNDLING HOSPITAL
1st MAY 1841

SIR,

Several active Governors of this Hospital, influenced by charitable motives, are desirous of establishing a Benevolent Fund for the benefit and advantage of persons of good character, brought up in this Institution, when they shall have ceased to be entitled to assistance from the Funds of the Hospital, -- the objects of the Fund to be as follow : -- To grant Annual Pensions or Weekly Allowances to such aged and infirm Foundlings as shall be found deserving of assistance; to afford temporary relief to the distressed; to grant small loans to be returned by instalments; and to relieve the distressed Widows and Orphans of such Foundlings as the Funds of the Society may allow. A preference at all times to be given to a Foundling or the Widow or Orphans of a Foundling, who shall have been a subscriber to the Fund.

It must be obvious that if such Societies have been found beneficial, as connected with other charitable Institutions, a similar Fund must be peculiarly useful at the Foundling Hospital, for, as the objects of its care are destitute of all natural ties, it is only to such honorable assistance that the deserving Foundling can look in the hour of trial or trouble to rescue him from the workhouse, or from actual want.

I am, Sir,

Your very obedient Servant,

J. BROWNLOW,
Treasurer's Clerk, Hon. Sec. pro. Tem..³⁸⁷

The perceived need to assist those who were “destitute of all natural ties” implies the idea of *in loco parentis* and connotes a particularly tenacious paternalism – a sense of obligation lasting for the full lifetime of the Foundling, and possibly beyond.

Technically, the Benevolent Fund was created by “several active Governors,” not by the Hospital itself, despite the letter-head. It was legally separate lest there be any suggestion that the

³⁸⁷ Appeal for Subscriptions, A/FH/C/01/010, 1 May 1841.

Hospital's funds were being diverted towards a purpose inconsistent with the original Charter and its commitment to helping "exposed and deserted young children."³⁸⁸

Brownlow linked the need for a Benevolent Fund to another aspect of the Hospital's original establishment: the Act of Parliament "expressly provided ... that none of the children shall obtain a parochial settlement" by residing in the Hospital. Most obtained a settlement by becoming apprentices or servants, but some failed to acquire a settlement, perhaps through not completing their apprenticeship, and subsequently fell into hardship.³⁸⁹ The Governors then faced a choice between two alternatives:

namely, to abandon them in their utmost need ... or (what is worse still) to seek out the parish settlement of the mother, an act which, besides being impossible in nine cases out of ten, would defeat the very principle and purpose of the Hospital, and the benign object it has in view as regards the repentant and well-doing mother.³⁹⁰

The Benevolent Fund was therefore a necessity. The appeal was dated May 1, 1841, but the attached subscription list shows that donations began in April 1841.³⁹¹

The creation of the Benevolent Fund in 1841 involved the rejuvenation or consolidation of a policy that was by no means new. Helen Berry has noted a number of instances in which, in the eighteenth century, the Hospital assisted distressed former pupils, doling out small sums and even resorting to public fundraising on behalf of the insane and blind Mercy Draper.³⁹² But such responses were improvised, and nothing like a systematic approach, with a suggestion of *institutional* paternalism, was attempted until the creation of the Invalid Fund in 1809.

³⁸⁸ Brownlow, *History and Objects*, 53.

³⁸⁹ Servants obtained settlement rights under the 1691 Poor Relief Act after a year of service, while apprentices gained settlement upon fulfilling their indenture.

³⁹⁰ Brownlow, *History and Objects*, 52-53.

³⁹¹ Each of the first subscribers gave 5 guineas, with Hue, Pott, and three other Potts heading the list on 21 April 1841.

³⁹² Berry, *Orphans of Empire*, 232-34.

The Invalid Fund was the direct antecedent of the Benevolent Fund. On November 1, 1809, the General Committee appointed a committee “to enquire into the propriety of establishing a Fund for the accommodation of the Invalids of this Institution, and for making some provision for the decayed Servants of the Charity.”³⁹³ However, this Select Committee reported on November 15th 1809 with a more wide-ranging proposal, to support Foundlings who, “by reason of imbecility of body or mind, are incapable of providing for themselves,” a second category of decayed former servants, and, most pertinent here, former Foundlings who had encountered hard times. The Invalid Fund that emerged assisted both former servants and former Foundlings.³⁹⁴ As with the Benevolent Fund, the notion of “a separate Fund” arose in 1809 from uncertainty about the legality of using the general funds of the Hospital.³⁹⁵ The General Committee asked the General Court to devote Chapel collections to the fund, which the Court approved on December 27th 1809, though individual contributions, beginning with Treasurer Samuel Compton Cox’s “very liberal and acceptable Donation” of £50, were also welcomed.³⁹⁶

The first beneficiaries, in 1810, were two former Foundling girls: Mary French, now in late middle age, ill and “destitute” with two children, was granted 4 shillings a week, and Eleanor Grafton, “in great poverty and distress,” was awarded a one-off payment of £8 and two guineas.³⁹⁷ Looking back over the history of the Fund, the General Committee noted in 1845 that the recipients were “confined to the above class of persons [former Foundlings] with the following exceptions,” meaning employees, including four “old nurses,” one of whom, Prudence Blackmore, received 1 guinea plus another 10 shillings to buy “a Sack of Coals to assist her in her washing.” Almost twenty years later, it was noted that she “for many years had had relief from the Invalid Fund.” Other recipients were a former gardener, a former clerk, and a Girls’ School Mistress now “far advanced in Life.”³⁹⁸ The former Steward, W.R. Dobbs, after more than 25 years’ service, was awarded an allowance of £25 per annum in 1839.³⁹⁹ Another

³⁹³ Minutes of the General Committee, A/FH/K/02/048, 22 February 1845. The proceedings in 1845 drew on the minutes recorded in 1809: A/FH/K/02/030, 1 November 1809 et seq..

³⁹⁴ *Ibid.*, A/FH/K/02/048, 22 February 1845.

³⁹⁵ *Ibid.*.

³⁹⁶ *Ibid.*.

³⁹⁷ *Ibid.*.

³⁹⁸ *Ibid.*, A/FH/K/02/033, 31 January, 14 February, 6 March 1816 (Gawler, Girls’ School Mistress). A former Mistress in the Boys’ School, “nearly blind,” was assisted in 1814. *Ibid.*, A/FH/K/02/032, 9, 16 March 1814 (Margaret Coleman, £10 per annum).

³⁹⁹ *Ibid.*, A/FH/K/02/048, 22 February 1845.

exception was the award of £7 to Thomas Briggs, who wrote in July 1814 of his being “in a distressed state with Three small Children.” His late wife had been a Foundling.⁴⁰⁰

The majority of recipients were former Foundlings reduced by infirmity and penury in later life, but the Hospital’s paternalism also embraced a number of young persons whose circumstances differed markedly from the norm. They included Sidney Smith, who fell ill soon after finishing his apprenticeship; the Hospital gave him 40 shillings from the Invalid Fund.⁴⁰¹ John Hunt, who had “lost the use of his right arm” at sea, was “boarded and lodged by the Hospital” at a cost of 18 shillings per week, and then granted a “periodic allowance” of 5 shillings weekly from the Invalid Fund, and assisted with a “change of necessaries,” in October 1815.⁴⁰² Richard Tibbett had recently completed his apprenticeship when he fell into “great distress, having been robbed” on the road of “the whole of his money;” he was given 20 shillings from the Invalid Fund.⁴⁰³ Tibbett was the mentally unstable young man who, as noted above, was later helped into the Royal Navy by Secretary Lievesley.

Thomas Grenville, a blind boy who received extensive musical training at the Hospital, was possibly the most eminent person who received assistance from the Invalid Fund. He entered the LFH on October 3rd 1746. In 1767, he left to be the organist of a church in Ross-on-Wye in Herefordshire before being appointed as the Hospital’s organist in 1773, a position he held until his retirement in 1798. In June 1816, the General Committee considered an anonymous petition which outlined his plight:

The Governors of the Foundling [sic] must well remember Thomas Grenville, who was brought up in that Charity and was afterwards Organist to it for many years; at the time he resigned, he had many Scholars who brought him in a comfortable income, but he has now only one Scholar and being advanced in Age is reduced from a state of ease to great distress. His Wife has had £30 a year left her by an Uncle, which is their sole support for himself, Wife and Daughter, the latter of whom is in very bad health, and incapable of doing any thing to assist the

⁴⁰⁰ Ibid., A/FH/K/02/033, 27 July 1814. Other beneficiaries were the widows of former Foundlings. See, for example, A/FH/K/02/032, 12 January 1814 (Elizabeth Arkwright).

⁴⁰¹ Ibid., A/FH/K/02/033, 5 April 1815.

⁴⁰² Ibid., 9 September, 18 October 1815.

⁴⁰³ Ibid., 1 November 1815. Hunt, Blackmore, and Tibbett all went on to have further recourse to the Invalid Fund. Ibid., 14 February, 27 March, 1 May 1816; *ibid.*, A/FH/K/02/034, 26 June 1816.

family. Mr Grenville is unacquainted with this application, and perhaps it may be an additional inducement to the Gentlemen of the Committee to afford him some relief, as he cannot speak for himself, and therefore must be considered as a greater object of Compassion.⁴⁰⁴

Secretary Morris Lievesley reported that Grenville had an income of only 5 shillings a week, garnered from his pupil, and acknowledged the man's long service. In eloquent testimony to the benefits of charity, Lievesley added:

The General Committee, in order to ensure a Maintenance to a Blind Boy, had in 1758 been induced to give directions for his being regularly instructed in Music at the expense of the Charity, and the Seeds of benevolence in these, as in most instances, have been returned with tenfold produce into the bosom of the Charity.

With an Aged Wife, an [sic] helpless Daughter, and a Son, of whom it is Charity to be silent, Mr Grenville is from a state of Competency, reduced to Poverty.

Lievesley drew on "a personal knowledge of him for upwards of Twenty years" to assert his belief that Grenville's "present condition is more to be attributed to the excess of Parental affection than to any other cause whatever." The worthy Grenville was duly awarded an annuity (annual sum) of £10 from the Invalid Fund.⁴⁰⁵

A rather surprising payment out of the Invalid Fund was the transfer of 10 guineas to the Fund for Indigent Petitioners on two occasions, in 1832 and 1839.⁴⁰⁶ This Indigent Fund was very different from the Invalid Fund, with which it can easily be confused. The former was set up to assist impoverished mothers who could not sustain themselves between the time of their application and the reception of their offspring into the LFH. In January 1770, in the wake of the

⁴⁰⁴ Ibid., 12 June 1816.

⁴⁰⁵ Ibid., 19 June 1816. Lievesley had "the pleasure of informing" Grenville of the award of "pecuniary assistance ... out of a Fund which is separate from the Funds of the Corporation." Secretary's Letterbook, A/FH/A/06/002/005, 160, Lievesley to Grenville, 20 June 1816.

⁴⁰⁶ Minutes of the General Committee, A/FH/K/02/048, 22 February 1845.

Hospital's relaunch after the tumultuous years of the General Reception, the General Court resolved, "That the General Committee have Liberty to give a Sum, not exceeding one Guinea a Week in [sic] the whole, to those distressed objects who may apply to have their Children taken into this Hospital, till the Time of the Ballot."⁴⁰⁷ This aid to petitioners continued for several decades before a separate fund was established in 1799: "Subscriptions for providing a fund for affording occasional relief to those poor Women who apply for the admission of their Children, and who are in peculiar circumstances of distress" were called for that year.⁴⁰⁸ It is possible that the change was driven by unease about the use of general funds for this purpose, but it is interesting that the initiative came soon after the Hospital began to focus more closely on the welfare of the mothers, on seeking the "double benefit" of "preservation" of the mother as well as the child.⁴⁰⁹

By the end of 1816, the total sum subscribed was £91.11.6 and £90.15.0 had been distributed.⁴¹⁰ This was the Fund for Indigent Petitioners. The records for its activities after 1816 are not extant, but awards were noticed frequently in the General Committee minutes and, as seen above, money had twice to be moved into it from the Invalid Fund. Of course, many mothers found themselves, in the oft-repeated words of the Committee, in "peculiar distress."

Between 1842 and 1845, the Invalid Fund disbursed an average of £54.11.10 each year.⁴¹¹ But the Invalid Fund and the Benevolent Fund only co-existed for a short time. On January 22nd 1845,

The Treasurer [Charles Pott] called the attention of the [General] Committee to the Invalid Fund, and suggested that as its object is similar to that of another Fund originated and supported by individuals connected with the Hospital, named The Benevolent Fund, whether it might not be expedient to devise a mode whereby both Funds may be amalgamated with the view of rendering them more efficient.⁴¹²

⁴⁰⁷ Ibid., A/FH/K/02/012, 10 January 1770. The reintroduction of the ballot necessarily involved delays in admissions; petitioners had to wait until the next, scheduled ballot was conducted.

⁴⁰⁸ By-Laws Committee, A/FH/A/03/014/001/020, Bound, 1 part volume.

⁴⁰⁹ Minutes of the General Committee, A/FH/K/02/021, 22 February 1797.

⁴¹⁰ A/FH/A/03/014/001/020, By-Laws Committee, A/FH/A/03/014/001/001, Bound. This volume contains the subscription and disbursement lists for 1799-1816.

⁴¹¹ Minutes of the General Committee: A/FH/K/02/048, 22 February 1845.

⁴¹² Ibid., 22 January 1845.

Consequently a committee was established “with the view of amalgamating [the Invalid Fund] with the Benevolent Fund.”⁴¹³ This was duly effected by the General Committee and General Court meetings of February 22 and March 26, respectively, when it was also decided that “the pensioning of *Servants* [emphasis added] from the Fund created by the Offerings at the Sacrament is not a proper application of that Fund.” The Committee resolved and the General Court agreed “that in future the Fund known by the name of the Invalid Fund be designated the Benevolent Fund” with all of the former’s funds (and the income from future collections) “carried to the Benevolent Fund, and applied to *the exclusive benefit of persons brought up in the Hospital*.”⁴¹⁴ It was likely a mistaken reading of these minutes and a failure to notice Brownlow’s May 1841 letter that have led historians to believe the Benevolent Fund was created in 1845.⁴¹⁵

The Benevolent Fund was active in supporting former Foundlings in the following years, when, as Nichols and Wray put it, “The Fund met with liberal support from the Governors and others interested in carrying out the grand objects of Coram.”⁴¹⁶ In 1850, for example, the managing committee reported on “gratifying evidence of the successful progress of the Fund,” naming seven former Foundlings who were “pensioners of the Fund” in receipt of weekly payments – their ages were 92, 86, 80, 73, 71, 69, and 34 – and claiming that, in the current financial year (May 1849 - May 1850), the Committee had “dispensed £95.8.0 towards the relief of 50 [former] Foundlings under circumstances of temporary distress and difficulties” (and given five “deserving Foundlings” loans totalling £47), whilst bringing the Fund’s reserves up to £2,300.⁴¹⁷ The “continued successful progress of the fund” in 1851 saw similar figures reported,

⁴¹³ Ibid..

⁴¹⁴ Ibid., 22 February 1845. Minutes of the General Court, A/FH/K/01/007, 26 March 1845. Emphasis added. The General Court made separate provision for Dobbs. Ibid..

⁴¹⁵ Nichols and Wray made this error – *The History of the Foundling Hospital*, 227-28 – and others have followed suit, but the misunderstanding predated their *History*: an internal report of 1921, for which Secretary Nichols bore some responsibility, had the Fund “set on foot in the year 1845.” *Foundling Hospital Reports and Accounts for the Year 1921* (London: Chas. Jacques and Sons, 1922), British Library, c25/7689, Appendix, 1. Page 3 set out the “Regulations” of the Benevolent Fund in full.

⁴¹⁶ Nichols and Wray, *The History of the Foundling Hospital*, 228.

⁴¹⁷ Minutes of the General Committee, A/FH/K/02/051, 25 May 1850.

though the ten-strong list of pensioners now included three 36-year-olds.⁴¹⁸ Of course, charitable giving was selective: John Brownlow later told an applicant that the Fund was “not in a condition to give you any aid. We have in fact no money to lend. I am glad to find you are at liberty to do well in the world.” This was a white lie told to someone deemed undeserving, presumably, for Brownlow told other correspondents that same day that the fund was possessed of just over £1,000.⁴¹⁹

Discussing the Benevolent Fund in his *History*, Brownlow wrote of the Governors’ “paternal and comprehensive view of their duty” and included an Appeal “on behalf of this truly Samaritan Fund.” Its statement of the fund’s objective says much of the nature of (and constraints on) the Hospital’s paternalism: the Fund was to assist “aged or infirm Foundlings who have been out in the world, and whose laborious lives have been without reproach, or whose sickness has not been provoked by intemperance or other misconduct.”⁴²⁰ This attitude is strikingly reminiscent of the Hospital’s focus on ‘respectability’ in the *admissions* process (see last chapter). The same statement appeared in the Preface of a sermon preached “in aid of the Benevolent Fund” by the Principal of King’s College in 1870, where Dr. Barry explicitly drew attention to the parallel: in both admitting children and assisting them as adults, charity must “meet the results of sin, and yet not encourage sin itself” – a thought not unfamiliar to the Governors. Barry deprecated “indiscriminate alms-giving” as an incitement of “idleness and pauperism..., the very seed-plot of crime.”⁴²¹ The Benevolent Fund continued into the twentieth century; in 1921, now called the “Benevolent and Provident Fund,” it paid weekly allowances to 15 former Foundlings and possessed stock worth almost £20,000.⁴²²

⁴¹⁸ Ibid., 24 May 1851. In both years, income from Chapel collections outweighed separate donations.

⁴¹⁹ Secretary's Letterbook, A/FH/A/06/002/013, 464, Brownlow to Bowyer, 10 July 1862; *ibid.*, 464-65, Brownlow to Steer, Cureton, and Lawford, 10 July 1862 (£1,085.4.8).

⁴²⁰ Brownlow, *History and Objects*, 53-54.

⁴²¹ Anniversary Sermons and other printed sermons, A/FH/A/14/007/002, *Thoroughness and Thoughtfulness in Charity: A Sermon Preached at The Foundling Chapel, on the Third Sunday After Easter, May 8th, 1870, in Aid of The Benevolent Fund*, by Alfred Barry, D.D., Principal of King’s College, London (Published By Request of the Governors, London, 1870). See also Anniversary Sermons and other printed sermons, A/FH/A/14/007/002, *A Sermon Preached at The Foundling Chapel, on the Sixth Sunday After Trinity, July 7th, 1872, in Aid of The Benevolent Fund*, by The Right Reverend Henry Mackenzie, D.D., Bishop Suffragan of Nottingham (Published By Request of the Governors, London, 1872).

⁴²² *Foundling Hospital Reports and Accounts for the Year 1921*, Appendix, 4-5.

The creation of the Benevolent Fund in 1841 might be seen as a feature of the age of paternalism – but, given the Fund’s continuation long after this, it must also be regarded as a paternalist endeavour that held fast when paternalism, according to Roberts, was no longer fashionable. Similar comment might be made in relation to the Poor Law: the Benevolent Fund, in essence, was a form of *outdoor relief*; the men in charge assessed the knowable circumstances of those in need and assisted accordingly, just as community leaders had done in parishes all over England under the old Poor Law. The New Poor Law, introduced in 1834, attempted to replace outdoor relief with the workhouse test of destitution, but the Hospital persisted with outdoor relief in the form of allowances from the Benevolent Fund. The paternalism of the Benevolent Fund, and by extension of the LFH, was strong enough to disregard the ideological headwinds. The Fund was a durable and effective example of paternalism at a time when the fundamentals of its approach were being questioned in other walks of life.

* * * * *

David Roberts has shown that English paternalism flourished in the 1830s and 1840s.⁴²³ This notion refers to paternalism’s prominence in literary discourse (and sermons) and does not mean that paternalism fashioned practical outcomes, for this was the time when free trade triumphed, the Factory Acts addressed only one sector of the industrial population and still perpetuated over-10-hour days, and, famously, the Whig response to the Irish Famine was the epitome of *laissez-faire*. Soon afterwards, paternalism as discourse was in decline and the contrast with paternalism as policy was less evident. But there were exceptions: the principle of *laissez-faire* did not prevail in every area of decision-making, and paternalist enterprises endured and sometimes flourished. The London Foundling Hospital was by no means an oasis of paternalism. Paternalism fuelled by a notion of Christian benevolence, and stimulated by the needs of an increasingly urban and turbulent society, offered an alternative to the new orthodoxy that economic growth could be relied on to flush out social problems. The result was a surge of charitable endeavour in which numerous institutions, most prominently Great Ormond Street Hospital from 1852, Dr Barnardo’s homes from 1867, and the London Orphan Asylum at

⁴²³ Roberts, *Paternalism*, 244-45.

Watford from 1871, joined the LFH as the flowers of Victorian philanthropy. Paternalism, certainly the big-city version that was institutional paternalism, continued to play an important part in British life, contending with the many manifestations of Victorian poverty.

Although the LFH had a chequered history of adjustment to different social priorities over time, it never lost its commitment to the paternalistic obligations of property. Paternalism enshrined the values and purpose that created the Hospital in 1741 and sustained it through the challenges and crises of its first decades and then, remarkably, carried it through the era when other, different responses to social ills commanded centre stage. It was a robust form of paternalism underpinned by system and order rather than the shifting fortunes of local endeavour – the institutional paternalism of ‘the city of strangers’ rather than the parochial paternalism of Old England. The LFH exemplified the strengths of institutional paternalism across a range of issues and practices, notably health care, apprenticeship, and the imposition of moral standards, but it was in the development of its admissions policy that both the Hospital’s purpose and its paternalism underwent the most substantial change. These great shifts in admission policy will be the principal focus of the next chapter.

Chapter Three

Unlocking the Doors: Exploring Eighteenth-Century Admission Policies at the LFH

The London Foundling Hospital was “a crucible in which ideas were forged together, revealing social attitudes and practices,” making it a popular institution to study.⁴²⁴ Academics working on the eighteenth century have tended to concentrate on the founding of the charity and its early practices, whereas scholars of the nineteenth century often focus on the petitioning mothers who applied for the admission of their babies. This chapter and the next will explore the LFH’s admission process as it changed during the eighteenth and nineteenth centuries; I investigate how the Hospital evolved and was refashioned in an attempt to keep up with the challenges posed by the metropolis and the society in which it was stationed.⁴²⁵

As established, the original vision of the LFH, as conceived by founder Thomas Coram, was primarily focused on securing the preservation and education of at-risk infants. Coram’s sole wish regarding prospective Foundling mothers was to prevent them from placing their children in danger or committing infanticide. Soon, it will be observed how Coram’s original intentions for the charity were overshadowed by a concern about the mother’s virtue, resulting in a new method of selection based largely on the mother’s past behaviour and future prospects. The following pages illuminate the century-long evolution of the admissions system and delve into the nuanced reasons behind this transformation.

There were substantial changes in the Hospital’s admission rules from its opening in 1741 until the process reaches its final state circa the 1830s. Examining these changes requires, of course, venturing into almost a century of practice, but the aim is to unravel the LFH’s intricate relationship with the evolving social and cultural fabric of its time. While it is true that each individual Governor would have his own distinct motivations, beliefs, and ethics, the cohesive whole – one could say the Governors’ groupthink – will be analyzed. I will show how the Governors’ priorities altered, reflecting the impact of social and economic developments: the

⁴²⁴ Jessica A. Sheetz-Nguyen, “Calculus of Respectability: Defining the World of Founding Hospital Women and Children in Victorian London,” *Annales De Demographie Historique* 2, no. 114 (2007), 13.

⁴²⁵ Admission policies greatly change over the century. A timeline of key dates in administrative changes regarding infant admissions has been created for quick reference (See Appendix D).

changing nature of employment and work, economic cycles of boom and bust, the shifting role of philanthropy and, importantly, new ideas about the roles of women at home, in work, and in the public sphere.

With a focus on *whose* baby was allowed in, the study enables us to grasp the prevailing spirit of eighteenth- and nineteenth-century Britain regarding class, gender roles, and regulation of women's reproductive capacities. Thus, this dissertation tracks all the changes to the LFH admissions system that one could deem *sociological*, that is, details that focus on class, sex, occupation, family, and the circumstances that led the woman to become pregnant, all of which eventually informed the criteria by which the Governors deemed the helpless child a "worthy object of the charity." The analysis suggests evolving attitudes about philanthropy and charity, and reveals the increased rigour and rationality applied to LFH operations, which prompted significant change in the first half of the nineteenth century. It further argues that, as a necessary prelude, the 1790s were a decade of *fundamental* transformation, the most important in the Hospital's history after 1760, and that this change is crucial for understanding how the charity navigated what became its dual objective: the care of infants and the reintegration of their mothers into society, the latter being a mission that only emerged, very gradually, after 1763. Note that this dissertation does not assess the *quantitative* application changes – age and birthplace – since they were generally modified in accordance with vacancies.

The dissertation also examines the prevalent misconceptions surrounding the Hospital's General Reception (1756-60), a period often labeled as the institution's most disastrous calamity. While acknowledging the challenges and elevated mortality rates during the General Reception, it contends, for the first time, that this phase should actually be viewed as the pinnacle of Coram's vision to assist all children in need. In making this claim, the dissertation underscores the imperative to steer clear of presentism in historical analyses. It advocates for a nuanced comprehension of the early history of the Hospital, urging a balanced perspective on its challenges and achievements.

The fluctuating admission process reflects not only changes but also persistent elements within the Hospital, and provides a comprehensive view of its role in philanthropy, social attitudes, and the normalization of issues related to female sexuality, deviance, and poverty. First, I address the need for undertaking this research by offering a brief overview of previous, similar studies in the field.

Historiography

Many historians have contributed valuable perspectives on philanthropy and cultural dynamics to elucidate the essence of Georgian London. The history of the London Foundling Hospital has been integrated into the broader discourse surrounding topics such as prostitution and urbanization. The ensuing discussion briefly alludes to these intersections, illustrating how narratives related to the Hospital can possess a certain Delphic quality, enabling scholars to cite it selectively as an illustrative exemplar to fortify their arguments. The goal here is to show that the Hospital's history has been used inappropriately by some, while also identifying scholars whose research has fortified the conclusions reached in this study. As a result, it also argues for a heightened sensitivity to language when discussing the mothers and families who brought children to the LFH.

In the first chapter, I discussed a 1993 article by John Ramsland.⁴²⁶ When describing the 1700s, Ramsland uses a 1922 document entitled *Foundling Hospital Reports and Accounts for the Year 1921* and uses its "history" of the Hospital as the basis for his assertions about the early days of the admission policy, a history which, in turn, was taken from John Wrottesley's report to the Charity Commission in 1836.⁴²⁷ Ramsland makes statements that may serve as a caution to using annals of a later century to describe occurrences of earlier ones. For example, he writes that the Hospital opened "to receive abandoned or unwanted illegitimate children," and that, "It was to the Foundling in London that English women of the eighteenth, nineteenth and twentieth centuries came to give up their illegitimate babies in secret and in shame."⁴²⁸ In fact, married women and widows came to the Hospital from the beginning and this study will show that there were legitimate children admitted as late as 1816. Ramsland's line that, "The peccadilloes of the male ruling classes could thus be hidden away, unpunished and forgotten"⁴²⁹ sees a twentieth-century historian recycling eighteenth-century rumour. Ramsland also uses the earlier History to show the clandestine nature of admissions in the eighteenth century: "no questions... would be

⁴²⁶ Ramsland, "'Cultivating a Respectful and Modest Demeanour,'" op. cit., 95-112.

⁴²⁷ *Foundling Hospital Reports and Accounts for the Year 1921*, op. cit., 2-9.

⁴²⁸ Ramsland, "'Cultivating,'" 99, 110. The use of "unwanted" is addressed below.

⁴²⁹ *Ibid.*, 110.

asked of any person who brought a child...”⁴³⁰ While this was true in the first two decades, when infants were seamlessly delivered to the Hospital, without scrutiny, it was not the case once petitioning began in the 1760s.⁴³¹ This presumption of homogeneity across disparate time periods is a matter of concern. Moreover, Ramsland’s error highlights the challenges associated with relying on secondary texts published and republished over an extended span of years, particularly before the imposition of citation standards for historical integrity.

Whilst Ramsland has shown a questionable grasp of chronology in some ways, he does also identify significant change over time. Certainly, he is right to say, in relation to the period 1763-1795, that the Hospital’s inquiries into the veracity of petitions were conducted on “looser principles than later,” with their claims tested “in an imperfect manner.”⁴³² But the idea that this changed so much that “*by 1801* a manicured admission policy” had been introduced is surely overstating the transformation effected in the 1790s, substantial though it was in several respects. It was not quite the case, moreover, that admission was now “only by the mother’s personal application,” with a personal appearance for interview, though there were fewer exceptions than before. The idea that she was “interrogated about her virtue and predicament” was largely not yet true, especially regarding her “virtue,” and the next chapter will challenge the assertion that her application “had to be verified comprehensively.”⁴³³ Ramsland *is* aware that there were differences between the eighteenth and nineteenth centuries, but he has landed on 1801 as the moment when everything he associates with the new century was fully established (“manicured”), when the real story was one of continual and often erratic change.

⁴³⁰ Ibid., 99. (Ramsland cites *Foundling Hospital Reports and Accounts for the Year 1921*, but the cited quote does not actually appear in the report). The veil of secrecy shrouding the children’s backgrounds was established at the start. On 4 March 1740/1, the General Committee decided that the printed notice for the first admission should contain a sentence explicitly stating that, during the inspection when someone brings in a child, “no question whatsoever will be asked of any Person who brings a child, nor shall any Servant of the Hospital presume to Endeavour to discover who such Person is, on pain of being dismissed.” This resolution was reiterated in August 1757 and was publicized in the reception area. Minutes of the General Committee, A/FH/K/02/001, 4 March 1740/1; *ibid.*, A/FH/K/02/005, 31 August 1757. The LMA catalogue calls these documents “Minutes of the General Committee,” but initially it was called “the Committee for the Affairs of the Hospital.”

⁴³¹ Identification of the mother did occur in the very rare circumstance when the mother came back later to claim the child.

⁴³² Ramsland, “‘Cultivating,” 100.

⁴³³ Ibid.. Emphasis added.

Adrian Wilson is rather more rigorous in his analysis of LFH applications in his 1989 article.⁴³⁴ Using Hospital records alongside such contemporaneous sources as the weekly Bills of Mortality and bread prices, Wilson argues that in the seven years before the General Reception of 1756-60 and during that experiment with Parliamentary funding, the great majority of Foundlings were “bastards,” with minorities the product of “marital poverty” (inability to keep a child) or “orphaning” (the death of the mother and/or the father). He did not commit to a specific proportion but concluded that “London’s foundlings were indeed illegitimate.”⁴³⁵ It was a rise in illegitimacy, even more evident in London than in rural England, that led so many to the doors of the LFH, and the preponderance of illegitimate children continued until, in the nineteenth century, the Hospital became *exclusively* devoted to taking in babies born out of wedlock. However, 14 years after Wilson’s study, Alyssa Levene thwarted Wilson’s highly regarded thesis.

In her article “The origins of the children of the London Foundling Hospital, 1741–1760: a reconsideration,” Levene observes that infants admitted to the Hospital during its initial two decades of operation have commonly been categorized as illegitimate. However, her study of the children admitted to the LFH between 1741 and 1760 reveals a significantly larger proportion of legitimate infants than previously thought by Adrian Wilson and others. Instead, she finds that up to a third of these infants were born within wedlock, which aligns with my findings for 1768 onwards. Levene demonstrates the considerable variation in backgrounds among the children and the diverse reasons for their surrender to the LFH, emphasizing both personal and economic misfortunes affecting both married and unmarried parents.⁴³⁶

Dan Cruickshank makes notable chronological and semantic errors in his portrayal of the LFH in his *The Secret History of Georgian London: How the Wages of Sin Shaped the Capital* (2009). His text looks at the role the “sex industry” played in London during the Hanoverian period. When discussing the “massive problem” of prostitutes having illegitimate children, the culpability of LFH’s “murderous” and “deranged” mothers is compared with the “fall from grace” that shaped and moulded the charity into what it became in the nineteenth century. While Cruickshank is aware of “the agony that took place on a daily basis at the gates of the [Hospital]

⁴³⁴ Adrian Wilson, “Illegitimacy and its implications in mid-eighteenth London,” op. cit., 130-164.

⁴³⁵ Ibid., 133-35.

⁴³⁶ Alysa Levene, “The Origins of the Children of the London Foundling Hospital, 1741–1760: a reconsideration,” *Continuity and Change* 18, no. 2 (August 2003), abstract.

as despairing mothers gave their babies away,”⁴³⁷ other words inaccurately represent at least some mothers. He associates Foundling mothers with whoredom – “to a degree and at least for a time, [the LFH] cared for the illegitimate and unwanted offspring of prostitution” – even when admitting that “the Foundling’s direct role in London’s sex industry remains controversial...”⁴³⁸ He caustically writes of “*unwanted*” children “brought in for *disposal* ... whose parents happened to find it too *inconvenient, awkward, or expensive* to maintain them”⁴³⁹ – adjectives insensitively used to characterize the mothers’ motivation. In fact, as the ages of received Foundlings show, some mothers endeavoured to support their offspring for many weeks or months before concluding that the child would be better off at the Hospital. Thus, references to the “disposal” of babies and claims that mothers “gave their babies away” downplay the grief that most, if not all, parents would have endured and overlooks the fact that most of them lacked the means to raise their children alone. More sympathetic language like “when women felt they had to give over their children to the Hospital,” or “parents had to surrender their children,” or the like, would have been more sensitive to the despair of the mothers.

Cruickshank scants the role of poverty, which, as David Allin notes, was the main factor: “in most cases it was probably poverty rather than callousness which led to child abandonment.”⁴⁴⁰ It will be shown below that poverty was the principal theme in eighteenth-century petitions and that, while mothers made less reference to their poverty in the nineteenth century, the explanation lies in their appreciation of the prejudices of the Hospital men who judged their applications.

Nevertheless, the present study does align at times with Cruickshank’s views. For instance, this chapter substantiates his opinion that “in the early days of the Hospital’s gestation the implication of its aims for the morals of London seems not to have been a major concern... [For Coram] it was a peripheral issue.”⁴⁴¹ Indeed, moral issues would carry significantly greater influence in the nineteenth century. Cruickshank is wrong, however, when he asserts: “Far more important was the mission to save wronged unmarried mothers from ‘disgrace’.”⁴⁴² It was not true that the Hospital always had a mission to save unmarried mothers. As this chapter will

⁴³⁷ Cruickshank, *The Secret History of Georgian London*, op. cit., 266.

⁴³⁸ Ibid., 245.

⁴³⁹ Ibid., 249, 251. Emphasis added.

⁴⁴⁰ Allin, “Early Years,” op. cit., 23, 28.

⁴⁴¹ Cruickshank, *The Secret History of Georgian London*, 249.

⁴⁴² Ibid., 249.

demonstrate, ‘saving the mothers’ as a significant motive or rationale does not appear in the primary source documents until the 1790s, long after the founding Governors passed on.

A contemporary text utilized in Cruickshank’s work is Randolph Trumbach’s *Sex and the Gender Revolution: Heterosexuality and the Third Gender in Enlightenment London Vol.1* (1998). Trumbach’s thesis is that in the eighteenth century, a novel heterosexuality emerged, reshaping gender relations. He argues that the reaction to a new “third” gender solidified a binary sexuality, compelling men into an exclusively heterosexual identity. This development, in turn, heightened male dominance over women, altering extramarital relationships, expanding prostitution (and consequently venereal disease), increasing illegitimacy, and fostering violence against women. Trumbach’s analysis focuses on LFH petitions between 1768 and 1779. He surveys 919 petitions and finds that 780 were from “Spinsters” – consistent with Wilson’s claim about the preponderance of illegitimate children – 72 were by “Wives” and 21 by “Widows” (with the remaining few categorized as “Others”). Of the 29 who declared their age, 17 were between the ages of eighteen and twenty-three, which, like Cruickshank, Trumbach points out, tendentiously, was “exactly the age of most women who walk the streets as prostitutes.”⁴⁴³ Thus, Trumbach makes a connection between prostitution and the mothers of Foundling children. Reliance on 29 statements of age, out of 919 petitions, is questionable, and neither Cruickshank nor Trumbach acknowledges that the ages eighteen to twenty-three are also prime fertility years. Also, the priority given to helping unmarried mothers, indubitable in the nineteenth century, is mistakenly attributed to histories discussing the *eighteenth* century. This confusion underscores one issue with the LFH’s historiography: often, rules and processes of one particular time at the Hospital get conflated with another, very different time.

In “Unfortunate Objects: London’s Unmarried Mothers in the Eighteenth Century,” Tanya Evans argues that the experiences of unmarried mothers in eighteenth-century London were multifaceted and shaped by various social, economic, and cultural factors. She challenges traditional narratives that often depict unmarried mothers as passive victims of societal stigma and moral condemnation. Instead, she sheds light on their complex lives, showcasing their resilience, resourcefulness, and diverse strategies for survival in a society marked by gender

⁴⁴³ Ibid., 273. Randolph Trumbach, *Sex and the Gender Revolution. Volume One: Heterosexuality and the Third Gender in Enlightenment London* (Chicago and London: University of Chicago Press, 1998), 278.

inequality. Most importantly, in alignment with my findings from the eighteenth century, Evans underscores the broader socio-economic context in which these women lived, highlighting the excessive poverty and lack of employment opportunities experienced by petitioners.⁴⁴⁴ As in both Levene's and my study, Evans also finds that "eighteenth-century foundlings were not necessarily bastards, though the majority were."⁴⁴⁵

I will now examine the changes to the admission procedure over a century, to demonstrate how the paternalism and social outlook of the all-male Governors evolved over the years and explain what that change meant for working women in the metropolis.

Admissions

The London Metropolitan Archive (LMA) holds all the surviving petitions mothers presented to the Hospital. However, petitioning began only in the 1760s. It was not part of the application procedure for the first twenty-two years of the Hospital's existence. Besides, the initial inquiries into mothers' petitions primarily aimed at ascertaining the child's need rather than delving into the nature of the relationship between the parents or evaluating the mother's 'respectability.' The respectability assessment that was nascent in the 1790s, cemented by the 1830s, and reinforced in the by-laws in 1850, was not yet established in the eighteenth century.

a) First admissions and ballots (1741-1756)

As the Hospital was the first institution of its kind in England, founder Thomas Coram and the rest of the Governors only had a basic idea of admission criteria when it opened, but they clearly had aspirations for the charity to flourish and extend its reach. After extensively studying the LFH's archive of committee minutes, Nichols and Wray wrote, "It seems certain that the majority of the Governors, at least, among those who took a leading part in the establishment and

⁴⁴⁴ Tanya Evans, "'Unfortunate Objects': London's Unmarried Mothers in the Eighteenth Century," *Gender & History* 17, no. 1 (April 2005), 127-53.

⁴⁴⁵ *Ibid.*, 132. Evans makes this assertion based on her analysis of 1,290 eighteenth-century petitions from a total of approximately 2,000.

early administration of the Hospital, contemplated a general admission of children once the necessary funds and accommodation were available.”⁴⁴⁶ The Charter itself called for the establishment of a hospital “after the example of France, Holland, and other Christian countries,” and it was commonly known that these continental charities were open to all, without prior inquiry.⁴⁴⁷ In Chapter 2, Coram’s words regarding the purpose of the new charity were closely examined; there was no suggestion that he wished to help only certain *categories* of “exposed and deserted children,” and it was believed subsequently that “Captain Coram intended the charity for children of the poor, whether legitimate or illegitimate.”⁴⁴⁸ Except for the children’s maximum age (initially two months), the *only* unwavering admission criterion the first Governors stipulated was that the child be healthy so that it would not infect other children or the nurse mothers. As Adrian Wilson writes, the years 1741-60 “were unique in embodying the principle that objects should not be chosen by any positive selective criterion.” The conditions regarding age and health were “minimal restrictions [which] did not contradict the fundamental policy of non-selectiveness.”⁴⁴⁹ So, on the day it opened, the Hospital employed a first-come, first-served policy, pending the child’s medical inspection. The General Committee had decided that equal numbers of boys and girls should be admitted, ten boys and ten girls.⁴⁵⁰ The administration informed the public of this by placing a notice in local newspapers. The language of their advertisement received approval from the General Committee on March 4th 1741/2. It stated:

On Wednesday 25th of this instant March at eight at night and from that time until the house is full, their house over against the charity school in Hatton Garden will be open for children under the following regulations: that no child exceed in age two months nor shall have the French Pox [syphilis] or disease of like nature; all children to be inspected and the person who brings it to come in at the outer door and not to go away until the child is returned or notice given of its reception. No question asked

⁴⁴⁶ Nichols and Wray, *The History of the Foundling Hospital*, op. cit., 28. See also Narrative of the Foundling Hospital, January 1771, A/FH/M/01/008/125-132, 126.

⁴⁴⁷ The Royal Charter for the Foundling Hospital, A/FH/A/01/005/003.

⁴⁴⁸ Observations on the Foundling Hospital, A/FH/M/01/049, 33, citing Jonas Hanway’s account of Coram’s intention.

⁴⁴⁹ Wilson, “Illegitimacy,” 104. “From 1741 to 1756, [children’s] eligibility was not a question of *moral* but merely *physical* investigation.” Observations on the Foundling Hospital, A/FH/M/01/049, 33.

⁴⁵⁰ Nichols and Wray, *The History of the Foundling Hospital*, 45. See also Levene, “Origins of the Children,” 210, but Nichols and Wray claim that this was the policy from the start.

whatsoever of any person who brings a child, nor shall any servant of the Hospital presume to enquire on pain of being dismissed.⁴⁵¹

The Governors recognized that it would be best for those bringing children to the LFH to arrive discreetly. When it first opened for admissions, the hospital extinguished external lights to vouchsafe the anonymity of the mothers or those who brought children on their behalf. In accordance with this principle, upon the child's admission, the Steward promptly enclosed all notes and the detailed description of the child into a billet and sealed them. This system shows the administration's original dedication to safeguarding the mother's identity; however, it impeded the Governors from learning the mother's preferences, for instance, her desire to bestow a particular name upon the child. Speaking of names, the first children admitted on March 25th 1741 were named Thomas and Eunice Coram, acknowledging the founding father of the establishment and his wife.

The subject of the famous LFH tokens will be addressed only briefly as significant scholarly contributions have already been dedicated to their study.⁴⁵² To maintain confidentiality, those who brought children to the Hospital were encouraged to leave a distinguishing token – such as a marked coin, trinket, or scrap of fabric – as an identifier. The children were also given lead tags upon admission, with a unique number. This number, a description of their clothes and the token were recorded by a clerk in the Hospital ledger to enable identification should the parent, usually the mother, ever be in a position to come back and reclaim their child. “No [other] evidence of the parentage of the infant was left.”⁴⁵³ In reality, Foundling children were unlikely to ever see

⁴⁵¹ Minutes of the Daily Committee, A/FH/A/03/004, 4 March 1741/2. Also in McClure, *Coram's Children*, op. cit., 49-50; Gillian Pugh, *London's forgotten children: Thomas Coram and the foundling hospital* (Stroud: Tempus, 2007), 33-34. For a full list of original admission rules, see Minutes of the General Committee, A/FH/K/02/001, 25 March 1741, or Brownlow, *History and Design*, op. cit., 7-9, or Nichols and Wray, *The History of the Foundling Hospital*, 30-32.

⁴⁵² There are around 400 tokens in the Foundling Museum Collection, with many thousands more paper and textile ones in the Archives, giving us extraordinary glimpses into eighteenth-century society and individual lives. For a full overview of the tokens, see the Foundling Museum's Token Website: <https://foundlingmuseum.org.uk/our-art-and-objects/foundling-collections/tokens/>. For a more scholarly discussion, see John Styles, “Objects of Emotion: The London foundling Hospital Tokens, 1741-60,” in *Writing Material Culture History*, eds. Anne Gerritsen and Giorgio Riello (London: Bloomsbury Academic, 2015), 165-171; Gillian Clark and Janette Bright, “The Foundling Hospital and its Token System,” *Family & Community History* 18, no. 1 (2015), 53-68; and Maria Zytaruk, “Artifacts of Elegy: The Foundling Hospital Tokens,” *Journal of British Studies* 54, no. 2 (April 2015): 320-348.

⁴⁵³ Observations on the Foundling Hospital, A/FH/M/01/049, 33.

their natural families again. In December of 1758, after a newspaper report that children were being taken by force, the Governors decided to hand out receipts for the children received.⁴⁵⁴ Once the receipts went into use in 1759, the tokens had no official purpose, although mothers often continued to leave them.⁴⁵⁵

As word of the charity spread, there arose fierce competition for the limited number of places, and the need for a more equitable admission process became apparent. Often, over 100 women with children waited at the door, even though the Hospital would take only 20, a situation that “gave rise to riot and disturbance.”⁴⁵⁶ The administration, not for the last time, greatly miscalculated the demand for their charitable services.

The founding Governors showed no bias as to whose children would be admitted into the Hospital. They envisioned a proto-welfare system in which all babies needing care would receive it. In one of their first publications, they expressed the hope that their capacity would expand, since the “benefits derived” from the charity “are so apparent.”⁴⁵⁷ They further went on to claim that the sole reason to refuse children was that their funding was “very deficient to answer the intended Extensiveness of this Charity” but that they hoped “that this Hospital may soon be a Receptacle to All such poor Children as shall be brought to it.”⁴⁵⁸ Nonetheless, they still needed an objective way to select which children to take into the LFH since funds were too limited to fulfil this vision.

On October 27th 1742, the Governors resolved that admissions be decided by chance, through the introduction of a ballot system.⁴⁵⁹ John Milner, a Society of Antiquaries member and LFH Vice-President, proposed adapting the Society’s blackballing system to select Foundlings. Those who drew a white ball gained immediate admission, those with a black ball were sent away, while those with a red ball were put on a waiting list should one of the white-ball babies

⁴⁵⁴ Minutes of the General Committee, A/FH/K/02/006, 16 December 1758.

⁴⁵⁵ Clark and Bright, “The Foundling Hospital and its Token System,” 54.

⁴⁵⁶ *Foundling Hospital Reports and Accounts for the Year 1921*, 5. Inquiry Concerning Charities: Mr Wrottesley’s Report (1836), A/FH/M/01/014, 782.

⁴⁵⁷ *An Account of the Hospital*, (1749), xvii. Also in Minutes of the General Committee, A/FH/K/02/001, 5 January 1742/3.

⁴⁵⁸ *An Account of the Hospital* (1749), xvii. Also in Minutes of the General Committee, A/FH/K/02/001, 5 January 1742/3. Nichols and Wray’s extensive study of all the Hospital’s the General Committee Minutes note this same inclination in their work: “As has been seen, the tendency of the majority of Governors, from the inception of the Hospital, had always inclined to admitting all children offered to them.” Nichols and Wray, *The History of the Foundling Hospital*, 47.

⁴⁵⁹ Minutes of the General Committee, A/FH/K/02/001, 27 October 1742.

not be healthy enough to enter.⁴⁶⁰ Mothers who preferred to remain discreet might delegate the draw to the matron or nurse.⁴⁶¹ The minutes regarding this decision highlight the importance of keeping the lottery altogether fair: they resolved that all ballot selections must be in the Court Room “in the presence of all the Women to prevent all Suspicion of Fraud or Partiality.”⁴⁶² The first ballot took place on November 12th 1742.⁴⁶³ The first change to admission rules thus came as a response to the overwhelming demand for assistance. (See Appendix C for Nathaniel Parr’s 1749 drawing of the balloting process entitled “An Exact Representation of the Form and Manner in Which Exposed and Deserted Young Children are admitted into the Foundling Hospital.”)⁴⁶⁴

The desire to protect the mother’s identity is evident throughout the entire balloting period. Even in 1754 when a large donation of £200 was offered from “the Provincial Grand Lodge of Free & Accepted Masons at Calcutta in the East Indies” with the caveat that the Hospital give a “preference” to the masons’ children, the Governors declined, citing their dedication to anonymity and impartiality:

The present State & Income of the Hospital oblige us, tho’ unwillingly, to limit the Number of Children, which are drawn for by Lot, without Partiality, Favour, or Recommendation. And we persuade our selves that you will concur with us in Opinion, that when ever this Charity shall be so extensive as to receive all the Children who may be brought (which is the great Object of our Wishes) it will always be right to have the Parentage of the Children conceald [sic], even from the Governors...⁴⁶⁵

⁴⁶⁰ Ibid..

⁴⁶¹ *An Account of the Hospital* (1749), x.

⁴⁶² Minutes of the General Committee, A/FH/K/02/001, 27 October 1742.

⁴⁶³ Ibid., 24 November 1742.

⁴⁶⁴ In December 1742, seven months after Coram was removed from the governing board, the Committee also decided that anyone contributing £1000 to the Hospital should be allowed to send a child for admission. This was likely a decision made in response to increasing financial pressures and reflects that the Governors’ decision only to make exceptions to those wealthy enough to send in roughly the entire cost of upbringing the child, and then some. It is not known how many children were admitted on this basis. Minutes of the General Committee, A/FH/K/02/001, 22 December 1742.

⁴⁶⁵ Ibid., A/FH/K/02/004, 27 November 1754. The original request was made by the Masons on 16 October.

In June 1755, the Governors made a minor adjustment to the admission procedure: “That to prevent any Inconvenience which may happen by rejecting a considerable number of children, the Rule relating to the Numbers of Red Balls be altered by increasing the number of red balls to eight [from 5] to every twenty White Balls.”⁴⁶⁶ The Hospital ensured that there was no shortfall by increasing the number of red balls. In general terms, the system of admission persisted for an initial period of fifteen years, from 1741 to 1756, in which time a total of 1,384 children were admitted, averaging approximately ninety-two annually.⁴⁶⁷

b) The General Reception (1756-1760)

In the early 1750s, lack of funds meant that approximately 150 children resided in the London Foundling Hospital at any given time, despite its capacity to accommodate over 400.⁴⁶⁸ John Ramsland contends that the Hospital was in “heavy debt” by 1754, “with expenditure five times the annual income.”⁴⁶⁹ In February 1756, the Governors agreed that the only way to carry on and expand the charity was to petition the House of Commons, seeking financial support for the expansion of the charity, since, as John Brownlow later wrote:

The managers... looked forward all along to the time when they should be able to open their Hospital upon the most unrestricted plan, and many were the abortive schemes suggested for the acquirement of wealth to enable them to do so; but it was obvious, that no power or means, except Parliamentary, could be devised for effectually meeting the object.⁴⁷⁰

⁴⁶⁶ Ibid., A/FH/K/02/004, 18 June 1755.

⁴⁶⁷ Brownlow, *History and Design*, 9.

⁴⁶⁸ McClure, *Coram's Children*, 76.

⁴⁶⁹ Ramsland, ““Cultivating,” 99.

⁴⁷⁰ Brownlow, *History and Objects*, op. cit., 9-10.

In its petition to Parliament, the Committee pointed out that “Charities of the like Nature” in European countries “had the constant Assistance of their respective Legislatures”.⁴⁷¹ They acknowledged the deficiency in financial resources and hoped the government would uphold the standards set by charitable organizations on the continent:

That many proper Objects have, from Time to Time, been brought to your Petitioners, the greatest part of which they, from the Insufficiency of their Income, could not admit, to their great Concern...⁴⁷²

Two months later, on April 6, perhaps with the hope of attaining more troops for the wars with France, Parliament approved the petition. On April 21, the General Committee reported on the House of Commons’ decision:

Resolved, That the enabling the Hospital for the Maintenance & Education of exposed & deserted Young Children to receive all the Children which shall be offered, is the only Method to render that charitable Institution of lasting & general Utility.

Resolved, That to render the said Hospital of lasting & general Utility the Assistance of Parliament is necessary.

Resolved, That to render the said Hospital of general Utility & Effect, it should be enabled to appoint proper Places in all Counties, Ridings or Divisions of this Kingdom, for the Reception of all exposed & deserted Young Children.⁴⁷³

The LFH was now a national charity, funded by the state.

Parliamentary funding led to rapid expansion of the intake. The sum of £10,000 was granted to cover the rest of 1756, starting on June 2. In due course, Parliament would allocate a total of

⁴⁷¹ Minutes of the General Committee, A/FH/K/02/005, 11 February 1756. Adrian Wilson: state support “had, after all, been the practice in the Continental foundling hospitals which had served as a model for London’s tardy foundation.” Wilson, “Illegitimacy,” 107.

⁴⁷² Minutes of the General Committee, A/FH/K/02/005, 11 February 1756.

⁴⁷³ Ibid., 21 April 1756.

£548,798 to the LFH (equivalent to over £56,000,000 today).⁴⁷⁴ The funding was given on the condition that *all* children under two months old (initially) should be admitted. Thus, from June 1756 to December of 1760, any child could be dropped off at the Hospital, from anywhere in Britain, so long as it met the age requirement (which fluctuated over the General Reception period).⁴⁷⁵ The Governors quickly had to purchase and prepare six branch Hospitals around the country to ensure enough places for the children.⁴⁷⁶

Severe problems arose because the influx of children exceeded the Governors' capacity for effective management. Children were soon arriving at a rate surpassing a hundred per week, and Parliament's terms deprived them of the ability to refuse if a child was ill. Some arrived in panniers attached to donkeys, from locations across the country.⁴⁷⁷ Tragically, many perished during transit, abandoned by carriers driven by greed for the parents' money. Many of these children were so sick that their interment swiftly followed their admission. Brownlow even suggests more sinister conduct:

...they discovered that no authority, however great, could prevent parish officers from emptying their workhouses of the infant poor, and transferring them to this general sanctuary provided by government. Had they stopped here, the morality of their conduct would not, perhaps, have been questioned; but it was the frequent practice of these daring authorities, sometimes in conjunction with the brutal father, to rob the poor mother of her new-born infant, whilst she was in a state of helplessness from the effects of her recent confinement, and to convey it to the Hospital...⁴⁷⁸

In 1760, the Hospital and its wet nurses accommodated over 6,000 children, most of them under five years old.

⁴⁷⁴ Wagner, *Thomas Coram*, op. cit., 194. Wilson, "Illegitimacy," 107.

⁴⁷⁵ The maximum age limit was raised to six months in January 1757 and extended to one year by June 1757. Alysa Levene claims that this adjustment was, in part, aimed at incentivizing mothers to hold onto their infants at more tender ages since they would retain the option to surrender them at a later date, when the children were more robust. Levene, "Origins of the Children," 206.

⁴⁷⁶ The branches were opened in Ackworth, Aylesbury, Barnet, Chester, Shrewsbury, and Westerham.

⁴⁷⁷ Levene, "Origins of the Children," 216. Levene has the children coming from locations as distant as the Isle of Wight and Caernarfonshire in Wales.

⁴⁷⁸ Brownlow, *History and Design*, 11.

The General Reception period coincided with a decline in real wages starting in 1756, with an initial spike in bread prices, and a significant rise in military recruitment at the onset of the Seven Years' War. The troubled economy probably brought many infants to the Hospital during the General Reception.⁴⁷⁹ The rise in population may also have played a part. England's urban growth far outpaced the continent's. According to E.A. Wrigley, from 1600 to 1750 the number of English towns with populations ranging from 5000 to 10,000 doubled, whereas in Europe such towns actually saw a decline in population.⁴⁸⁰ The influx of children into the Hospital put its health care arrangements under extraordinary pressure, as shown in Chapter Two, and likely added to the high infant mortality rate of the General Reception: out of approximately 15,000 children accepted between 1756 and 1760, over 9,000 soon died.⁴⁸¹ Consequently, the first attempt by central government to utilize a charitable organization to address the needs of disadvantaged children became widely regarded as a failure.

Upon the revelation that a mere 40% of these "Parliamentary Children" managed to survive, criticisms in both press and Parliament shook the Hospital. While the scandals and misconduct surrounding the children's conveyance to the Hospital were beyond the Governors' control, Members of Parliament perceived a lack of return on their investment. The longstanding notion that offspring born in 'sinful circumstances' should not receive more favorable treatment than legitimate children resurfaced.⁴⁸² Consequently, in February of 1760, famously citing the "evil consequences" of the experiment, Parliament voted unanimously to discontinue their funding of the charity because of the substantial expenses incurred and concerns that the financial assistance was subverting the moral values of the lower classes.⁴⁸³

The Hospital now held over 6,000 Parliamentary Children who would, in 1760, have been between the ages of zero and four. Acknowledging its obligation, Parliament agreed to continue funding the Parliamentary Children (until 1771), but they sharply cut the grant and suggested

⁴⁷⁹ Wilson, "Illegitimacy," 128. Levene, *Childcare*, 224.

⁴⁸⁰ E. Anthony Wrigley, "Urban growth and agricultural change: England and the Continent in the early modern period," in Robert I. Rotberg and Theodore K. Rabb (eds.), *Population and History: from the Traditional to the Modern World* (Cambridge: Cambridge University Press, 1986), 128.

⁴⁸¹ Ruth McClure has a total of 14,934 incoming children for the General Reception period, whereas Gillian Wagner calculated a total of 15,082. McClure *Coram's Children*, 129. Wagner, *Thomas Coram*, 192.

⁴⁸² *Ibid.*, 194.

⁴⁸³ Minutes of the General Court, A/FH/K/01/002, 9 February 1760, quoting a resolution of the House of Commons.

selling the six branch hospitals to assist with the costs (the final one, Ackworth, closed in 1773).⁴⁸⁴

The mortality rate during the General Reception was only 5% higher than when the Hospital limited entrants and performed medical exams, a level comparable to or even lower than the rates at workhouses.⁴⁸⁵ A 1771 text entitled “Narrative on the Foundling Hospital” underscores the efficacy of the program in preserving the lives of numerous children despite the numerous fatalities, although there was no formal tally conducted for this report:

Nor can we say with Certainty how many might have lived without the Care or Intervention of the Charity; Nevertheless as few or none under the Care of Parish Officers lived to be placed out apprentices, those who have lived, which have been about 1/3, must ... be a Clear gain to the Community.⁴⁸⁶

Within a few years, however, the leadership of the Hospital lamented the “unfortunate period” of the General Reception, “the Misfortune of the Hospital,” when “the Basket at the Gate was open indiscriminately to all” and babies were left “hopeless and expiring” if not “actually dead... [Thus] an excellent Charity became the subject of abuse.”⁴⁸⁷ But the same writer, Treasurer Thomas Bernard, in 1797, also pointed out that over 4,000 survived to be apprenticed – children who might have “perished” at birth or in infancy, but for the Hospital.⁴⁸⁸ Since then, especially in the nineteenth century, scholars engaged in the historiography of the LFH typically emphasize the (negative) *repercussions* of the General Reception rather than delving into the intentions and aspirations of the Governors, often regarding these years as the nadir of

⁴⁸⁴ Carol Harris, “Admissions to the Foundling Hospital,” *Coram*, (2022) not paginated, (<https://coramstory.org.uk/explore/content/blog/admissions-to-the-foundling-hospital>). Ruth McClure demonstrates that the Governors consistently had difficulty obtaining the promised payments. McClure, *Coram’s Children*, 115-116.

⁴⁸⁵ *Ibid.*, 102, 261. Precise statistics on mortality rates are notoriously difficult to calculate and compare. Levene and Nichols and Wray note that the Ackworth branch’s mortality rate was much lower than the general mortality rate of England. Levene, *Childcare*, 192. Nichols and Wray, *The History of the Foundling Hospital*, 171.

⁴⁸⁶ “January 1771 Narrative of the Foundling Hospital,” A/FH/M/01/008/125-132, 131.

⁴⁸⁷ Minutes of the General Committee, A/FH/K/02/021, 22 February 1797.

⁴⁸⁸ *Ibid.*.

the Hospital's history. Examples include Brownlow's characterization of the period as "an unfortunate stain on [the Hospital's] history" and the chapter titled "the Evils of Indiscriminate Admission" in the work by Nichols and Wray.⁴⁸⁹ John Wrottesley blamed the General Reception for a "lamentable" increase in prostitution and immorality: "Prostitution was greatly encouraged by the unlimited facilities afforded for disposing of the fruits of illicit intercourse, thus removing one of the surest safeguards of female virtue."⁴⁹⁰ The "Observations on the Foundling Hospital" pamphlet of 1849 commented that "during this epoch [the Hospital's] operations present a dark page in its history, which ... it were well to blot out if possible, for ever!"⁴⁹¹ As Wilson comments, the "Utilitarian approach to philanthropy has been responsible for a rather jaundiced appraisal" which "castigated" the Hospital's "indiscriminate" approach.⁴⁹² Of course, the increasingly vocal aversion to indiscriminate charity had important policy repercussions with the Poor Law Amendment Act of 1834. After the 'findings' and ideas of the 1832-1834 Poor Law Commission became part of nineteenth-century discourse surrounding social welfare (particularly its emphasis on "less eligibility"), the unrestricted admission of every child came to be perceived as a troubling blemish on the institution's past.⁴⁹³ Victorian commenters ultimately boiled the General Reception down to a cost-benefit analysis, tapping into the dominant Victorian ideal of respectability and seeing the indiscriminate admission years as misguided, at best.

This sentiment persists to this day and many scholars fail to notice or disregard the Governors' aspirations to extend the Hospital's accessibility to the entire nation. If the administration had envisaged the true need for the charity, understood the living conditions and struggles of the poor, and taken the time to make ample preparations and provision, the death rate would have been much lower and Coram's dream would have been fully realized, despite Brownlow's injudicious claim that the General Reception plan "differ[ed] from [the Hospital's]

⁴⁸⁹ Brownlow has six pages criticizing the General Reception, see Brownlow, *History and Design*, 11-17. Nichols and Wray, *The History of the Foundling Hospital*, Chapter X.

⁴⁹⁰ Wrottesley's Report, A/FH/M/01/014, 783, also in *Foundling Hospital Reports and Accounts for the Year 1921*, 7.

⁴⁹¹ Observations on the Foundling Hospital, A/FH/M/01/049, 33.

⁴⁹² Wilson, "Illegitimacy," 104.

⁴⁹³ From 1832 to 1834, the Poor Law Commission underscored two key principles: 1. "Less Eligibility": This principle stipulated that the status of a pauper should be comparatively less desirable than that of an independent laborer, discouraging dependency. 2. "The Workhouse Test": Relief was to be exclusively provided within the confines of the workhouse.

original design.”⁴⁹⁴ Consequently, the following years would have looked very different from the eventual trajectory. The unfavorable connotations attached to the General Reception, overshadowed with a historical backdrop (Britain’s economic and imperial expansion, and defeating Napoleon), distorts some of the narratives surrounding the LFH’s founding and early years. This distortion may be attributed to a form of presentism or, at the very least, a failure to understand a complicated past in full.

c) Standstill (1760-1763)

Due to the “evil consequences” associated with the General Reception, the London Foundling Hospital suffered a great decline in private donations. Acquiring and equipping the country hospitals had depleted much of the capital amassed over the years, primarily from legacies, while subscriptions had diminished significantly once Parliament funded the venture. Thus, in 1760, the Governors possessed the desire, but lacked the financial resources, to reassume the philanthropic role the institution had fulfilled between 1741 and 1756. Financially compromised, and having lost both Parliamentary and public support, the Hospital had to adopt a regime of strict economy and severely limit the number of infants accepted.

On February 9th 1760, the Governors “Resolved, Nem Con [unanimously], That no children be received into this Hospital after the 25th day of March next, until further notice.”⁴⁹⁵ If the Hospital had no intention of bringing in more children for the foreseeable future, this was undone, initially, by Secretary at War Lord Barrington’s request that it accommodate orphans created by the Seven Years War.⁴⁹⁶ The General Committee agreed and six children, “having lost their Parents either in Battle or by Sickness,” were taken in on May 14th 1760.⁴⁹⁷ Aged 4, 6, 7, 8, and 12(2), they retained their names. The identity of their parents was not recorded in the General Register, but some parents’ names were recorded in the General Committee minutes. Other such “orphans” followed suit.

⁴⁹⁴ Brownlow, *History and Design*, 16.

⁴⁹⁵ Minutes of the General Court, A/FH/K/01/002, 9 February 1760.

⁴⁹⁶ Minutes of the General Committee, A/FH/K/02/007, 7 May 1760, Barrington to the Hospital, May 1760.

⁴⁹⁷ General Register, A/FH/A/09/002/004, 14 May 1760.

Between 1760 and 1763, most children accepted were war orphans, by which it was generally meant that *one* parent had died. A week after the first batch on May 14, an additional two soldiers' children were received. In October of the same year, a child named Felix Coram was admitted; clearly given a new name, he was probably not a war orphan.⁴⁹⁸ After a long break, eleven "orphans" were admitted in the second half of 1761.⁴⁹⁹ The three children of "deceased soldiers" admitted on October 8 were recommended by Secretary at War Charles Townshend, who, as Chancellor of the Exchequer, would introduce the "Townshend duties" of 1767 that led eventually to the Boston Tea Party in 1770.⁵⁰⁰ At least two children admitted in 1761 were not soldiers' orphans (and there were others about whom there is insufficient information); the one received on December 21 was recommended by a Hospital Inspector who donated £100 with the child.⁵⁰¹ This phenomenon will be discussed below; it is worth noting that in cases where children were received with money, their legitimacy or illegitimacy was not specified. The fact that the Hospital was accepting mainly war orphans at this time might explain the Committee's serious consideration of a proposal in 1761 to use "the word *Orphan* instead of *Foundling*" in the name of the Hospital, but the explanation given was that "a degree of opprobrium is attached, amongst the common people" to foundlings – an argument that would be made again in the late 1840s.⁵⁰²

The following year, in 1762, six children were received⁵⁰³ – so a total of 26 gained admission from May 1760 to the conclusion of 1762. Three children were admitted in the first half of 1763.⁵⁰⁴ If the Hospital's priority in the first years of the decade was to "dispose" of the Parliamentary Children (as apprentices) and it confined itself mostly to admitting war orphans, a return to more normal service was heralded in Treasurer Taylor White's extraordinary letter of

⁴⁹⁸ Ibid., 21 May, 24 October 1760. Minutes of the General Committee, A/FH/K/02/007, 21 May, 24 October 1760.

⁴⁹⁹ General Register, A/FH/A/09/002/004, 8 July, 5 August, 8 October, 21 December 1761.

⁵⁰⁰ Minutes of the General Committee, A/FH/K/02/008, 30 September 1761. "On reading a Letter from the Right Honble. Charles Townshend Esq. dated the 22nd instant, recommending Jonas Dean, an Orphan Child of four years old, Son of Thomas Dean, a private Man [sic] in the 33rd Regiment of Foot, who lately died in Germany, as a proper Object of this Charity. Resolved, That the said Child be received into this Hospital." See also General Register, A/FH/A/09/002/004, 23 December 1761.

⁵⁰¹ Minutes of the General Committee, A/FH/K/02/008, 16 December 1761.

⁵⁰² Observations on the Foundling Hospital, A/FH/M/01/049, 33.

⁵⁰³ General Register, A/FH/A/09/002/004, 11 January, 10 February (3), 17 March, 4 June 1762. The 4 June admission was one that Townshend recommended back in December. Minutes of the General Committee, A/FH/K/02/008, 23 December 1761.

⁵⁰⁴ General Register, A/FH/A/09/002/004, 1 January, 1, 30 March 1763.

May 1763. It describes an institution which was feeling its way gingerly, considering several avenues, but was also, at least in White's mind, committed to reviving the mission of the founding fathers:

Foundling Hospital
May 28th 1763

The Revd Mr. Sellon.

I have sent you ... the Order of the General Court for the reception of 100 children into this Hospital which is understood to be over & above the Soldiers' children who are Orphans as their Fathers & Mothers dyed abroad in Germany & Portugal all which Children are taken care of & Maintained by this Charity out of its own private Fund and by the Charity of Contributors, and not by any Fund provided by Parliament, which is applied wholly [sic] to the Maintenance of the Children taken in by Order of the House of Commons. While the Charity is in this confined State and is not supported by the Parliament. I conceive the Objects of our Charity are to be –

1. Foundlings.
2. Orphans whose Settlements are not known.
3. Children of Widows, whose mothers could not gain a Subsistence [sic] for themselves, if their Child was provided for, but must be thrown on some Parish if their child is not Supported during its first State of Infancy. I think there is no occasion to change the Names, or use any Secrecy with regard to such Children, but that they ought to be returned to their Mothers without any Payment so soon as the Mother can provide for them.
4. The Children of Fugitives, this case differs somewhat from the former.
5. Children who are Orphans, whose Parishes are known, but can't take proper Care of orphans as being in great Parishes whose Poor are taken care of in Workhouses, and by Parish Nurses. It would be very reasonable the Parishes should contribute towards the Maintenance of such Children.
6. The spurious Children of good Family whose disgrace may be concealed by the Children being placed in this Hospital.

These children are received without questions asked on payment of £100.

These are the Primary Objects of my attention till the Parliament shall make a General Provision for all helpless Infants who are in danger of perishing either from the want[,] cruelty or shame of their Parents or of Parish Officers who ought to take care of them...

At present our attention is applied to the Bills of Mortality, as they will afford a sufficient number of Objects of these sorts, but there is no reason to exclude any other Children if they are delivered to [sic] proper Persons under the Care of the

Hospital, who will prevent any mischief arising from Carriage & place them out in proper Nurserys or Hospitals.

T[aylor] W[hite]⁵⁰⁵

The opening reference to the General Court decision and the concluding remarks about the Bills of Mortality concerned the decision earlier in May 1763 to authorize the General Committee to admit up to 100 children from the City of London, Westminster, and the “Parishes within the Bills of Mortality.”⁵⁰⁶ This decision effectively limited admission to children from London, which, as White put it, would “afford a sufficient number of Objects” for the moment, while the charity was in its current “confined state.” This might seem a conservative and cautious approach, but any idea that the Hospital leaders were surefooted and purposeful is rather undermined by the multiplicity of options now under consideration. As well as the Parliamentary Children, the Hospital would accommodate war orphans and such varied “Primary Objects” as foundlings, other orphans, the offspring of impecunious widows, parish children (explained below), the “Children of Fugitives” (a novelty), and children born out of wedlock in “good” families able and willing to give the Hospital £100. This array of possibilities smacks of uncertainty and feet-finding in the wake of the trauma of the General Reception. However, White nominated so many options because the mission was all-inclusive: to rescue “helpless Infants who are in danger of perishing.” He had no wish to discriminate or “exclude.” This was the vision that had animated Coram and the founders – White became Treasurer in 1745 – and the creators of the General Reception. Despite the latter’s failure, their limited means, and a diffuse or scattershot approach to charitable endeavour, the Hospital retained the unconfined ambition of Coram and even hoped that Parliament would again “make a General Provision for all helpless Infants.” The Hospital was bloodied but unbowed.

⁵⁰⁵ Admissions, A/FH/A/06/030, Copy of Letter from the Foundling Hospital, 28 May 1763.

⁵⁰⁶ Minutes of the General Court, A/FH/K/01/002, 11 May 1763.

d) Petitioning (1763-1768)

For the next several years, the London Foundling Hospital slowly developed new ways of working. Despite the low intakes at this time, some desperate individuals believed that, by submitting a petition to the Hospital, they might secure admission for a child. In July 1763, the Hospital accepted the first-ever petition from a mother, Elizabeth Wingrove, the soldier father of her seven-year-old child, William Corbett, having died in India.⁵⁰⁷ Finally, on August 10th 1763, the scenario that would eventually become the normal state of affairs was inaugurated. On that day, the mothers of two babies, *not* war orphans, petitioned the Committee, and two babies, renamed Mary Smith (3 weeks) and William Jones (one month), were taken in on August 10 and August 17, respectively. On August 30, Mary Reeves brought in the “Male Bastard Child of about six weeks old of which she was lately delivered... she being unable to provide for it”; the General Register contains only the new name of her child, Richard Helm.⁵⁰⁸ According to the General Register, Richard was the thirty-eighth child admitted since the end of the General Reception (or, in other words, since May 14th 1760). For the rest of 1763, both petitions and children came in with increasing frequency and the total intake for the year 1763 was 41. A number of older children (aged 3 (2), 4, 5, and 7 (2)) were accepted, presumably orphans of some description. But the vast majority of the intake consisted of babies, as was the whole of it in the first 10 weeks of 1764.⁵⁰⁹

Effectively, from 1741 to 1760, people who brought children to the Hospital were not required to give any information about themselves, or the children’s parentage, and could even send a surrogate on their behalf. But once people began to petition the Hospital to take children they were “unable to provide for,” names were given, including the birth names of the infants (which, when illegitimate, were thereupon renamed if taken by the Hospital). Many petitioners were distressed single mothers, abandoned by the fathers of their illegitimate children. However, it would be a mistake to speak too confidently of typical cases. For instance, in August 1763 a father submitted a petition and the Committee accepted his child. In December 1763, a female

⁵⁰⁷ Minutes of the General Committee, A/FH/K/02/008, 6 July 1763. William, though possibly illegitimate, was not renamed. Two others were also admitted on 6 July.

⁵⁰⁸ *Ibid.*, A/FH/K/02/008, 10 August 1763. General Register, A/FH/A/09/002/004, 10, 17, 30 August 1763.

⁵⁰⁹ Minutes of the General Committee, A/FH/K/02/008, 30 August 1763 *et seq.*

lodging-house keeper submitted a petition relating how a man and his child had taken lodgings with her, and subsequently the man absconded. The parish would not, she said, take responsibility and the Hospital admitted the child.⁵¹⁰ As well as unwed mothers, married women featured in the unsolicited petitions. In December 1763, Patricia Hone's petition claimed that her husband "has forsook her and stript her of all substance," leaving her "in very distressed circumstances unable to provide for [her] Child." On the same day, the Committee heard the case of another petitioner "in very distressed Circumstances" because her husband was at sea with the Royal Navy. The "lately delivered" babies of both women were admitted.⁵¹¹ The next century would be much less accommodating towards married petitioners.

The types of applicants varied enormously at this time. As Nichols and Wray note, "several children of deserted *married* women were admitted" and the "practice of taking the children of widows" continued.⁵¹² In March and May 1764, the Hospital took in the *youngest* of a handful of legitimate children from poverty-stricken widows; it also admitted the twins of a mother with eight other children after her brother-in-law petitioned on her behalf.⁵¹³ Even more irregular was the occasional recommendation from a Hospital Governor. George Whatley, a future Treasurer (from 1779), *petitioned* on behalf of an unnamed foreigner and his wife: destitute, the man survived "by pawning or selling his Wives [wife's] apparel" and they were "unable to provide" for their newborn son, whom the Hospital agreed to take.⁵¹⁴ A similar intervention by another leading Committee member, William Harrison, is described below. Another Committee member recommended a child whose parents had both died, the Secretary of London's Magdalen Hospital attended the Committee to gain a place for a baby deserted by his mother, one distressed widow of a soldier secured admission for her overage, 19-months-old son, and a Royal Navy officer petitioned successfully on behalf of a former soldier whose wife's "dying in Child Bed rendered him totally incapable of maintaining the poor Babe" alongside his two siblings.⁵¹⁵

⁵¹⁰ Nichols and Wray, *The History of the Foundling Hospital*, 83.

⁵¹¹ Minutes of the General Committee, A/FH/K/02/008, 30 November 1763.

⁵¹² Nichols and Wray, *The History of the Foundling Hospital*, 84. Emphasis added.

⁵¹³ *Ibid.*.

⁵¹⁴ Minutes of the General Committee, A/FH/K/02/008, 30 November 1763. Another successful nomination by Whatley is noticed below.

⁵¹⁵ *Ibid.*, 14, 21 December 1763.

These cases demonstrate that, while a majority of applicants were unwed mothers, there was great *variety* and *flexibility* in the Hospital's admissions system. The Hospital accepted petitions from single women, married women, widows, poor men, and widowers; the reasons they gave were primarily economic, but multifarious contingent circumstances were also cited; recommendations, with or without petitions, came in from Governors, army officers, charity executives, and other worthies; and the *procedure* followed – inquiry or not, interview or not – was entirely unpredictable. It was later said that, “It is really quite useless attempting to define what were the objects of the charity at this time and subsequently for some years, for never was a caprice better exemplified than by these admissions.”⁵¹⁶ *Caprice* seems an apt description of the lack of system. Behind it all, however, as White made clear, was a determination to aid as many “helpless Infants” as possible, regardless of the origin of their need (or “danger”) or the nature of the application. Eighteenth-century paternalism was not very discriminating; the post-General Reception Hospital was, it seems, seeking to find its way, or to re-find its mission.

Notes appended to “Observations” in 1849 drew on Committee minutes to give further insight into the first petitioning individuals whose infants were admitted to the Hospital, including true orphans. It first surveys Elizabeth Rayson, who petitioned on behalf of her deceased sister, Ann Bradshaw. Bradshaw had passed away after childbirth at the General Lying-In Hospital near Tyburn. With the father missing and no family able to care for the child, Rayson pleaded for the Hospital to take in her niece, and “the said child was received.” Similarly, the Committee reviewed a petition from Cornelius Hassell, seeking admission for one-month-old Ann Bull. Her father, James Bull, reportedly passed away aboard “a Hospital ship in Sheerness.” Ann’s mother had died in “in the Parish of St. Andrew Wardrobe, Blackfriars, near Puddle Dock at the house of the said Cornelius Hassell who is very poor and not able to support the said child.” The Governors agreed to meet him and accept the child if Hassell could bring “proper certificates of the facts he alleges in his said Petition to the Next General Committee.”⁵¹⁷ Therefore the focus was on applicants’ circumstances: the Governors now wanted proof of hardship, a requirement aggravated, perhaps, by their awareness that the Hospital itself was under severe financial constraints. This step highlights the socioeconomic divide, with persons

⁵¹⁶ Observations on the Foundling Hospital, A/FH/M/01/049, Memoranda, unpaginated.

⁵¹⁷ Observations on the Foundling Hospital, 1849, unpaginated.

from lower economic backgrounds facing heightened scrutiny by relatively well-off officers and Governors. Essentially, at this stage, the administration was confirming the extent of the petitioner's destitution and/or determining whether the child was indeed deserted or orphaned or had a settlement – although if the child got in on a Governor's or other esteemed person's recommendation, there were no inquiries into the case. The latitude given to individual Governors was a traditional paternalist practice that would later be condemned:

... at one time children were received without inquiry on the payment of a fee of £100; at another, a governor stating that he knew the circumstances of any case, occasionally obtained a reference to himself, instead of the proper officer to make the inquiries, and on his favourable report the child would be received.⁵¹⁸

Although reservations were expressed about Governor recommendations, the practice continued. In August 1768, at the behest of Sir Clifton Wintringham, the Hospital granted entry to a 4-year-old child whose parents had both died, the Committee noting their concern that the child would be “educated in the Popish religion” as he was under the care of Irish adults.⁵¹⁹ Caprice remained pervasive, as will be evident again when the Hospital's development in the 1770s and 1790s is examined.

On February 4th 1767, the Committee noted a General Court resolution to admit an additional 30 children from the ranks of “several pitiable Objects [that] had been presented” to the Committee.⁵²⁰ This decision was prompted because, as of January 14th 1767, there remained only 116 children admitted after the General Reception period and funds and places had become available. This development signifies a recommitment to the Hospital's initial mission, but, in an attempt to control numbers, limited the intake to London (“the Cities of London and Westminster, and the Parishes adjacent”). There is a clear return to the Hospital's foundational principles, undermined by the reference to receiving 30 children “of such proper Objects according to the Charter and the Act of Parliament.” But the new emphasis on serving London

⁵¹⁸ Wrottesley's Report, A/FH/M/01/014, 784. Also in *Foundling Hospital Reports and Accounts for the Year 1921*, 9.

⁵¹⁹ Nichols and Wray, *The History of the Foundling Hospital*, 85.

⁵²⁰ Minutes of the General Committee, A/FH/K/02/011, 4 February 1767.

meant abandoning the broader national focus of the General Reception. On May 25th 1768, the Committee acknowledged the General Court's authorization to receive additional children "not exceeding fifty, as they shall think the most proper Objects, and that the said Number be kept up, as they may dye [sic] or be otherwise disposed of."⁵²¹ In the two years of 1767-68, 79 babies were admitted, not including parish children.⁵²² The Hospital, soon to see the apprenticeship of the last of the Parliamentary Children, was finally returning to something like normal life.

e) Admission of Parish Children (1767-1791)

One short-lived change aimed at utilizing vacant spaces at the London Foundling Hospital without incurring cost – a change that departed from anything the Hospital had done before – was the acceptance of "parish children." The Parish Register was one of many key documents made unavailable by a vast archival digitization project, but any comprehensive examination of admissions into the Hospital must include the parish children.⁵²³

Relations between the Foundling Hospital and the local parishes were undermined by the apprehension that former Foundlings might become burdens on the poor law and the ratepayers. While Coram received special dispensation for his charity so that Foundlings would not attain settlement from the Hospital's local parish (St. George's), the relationship between the London Foundling Hospital and parish authorities was still impaired by the legal complexities surrounding settlements and the care of foundlings. Before the Poor Law Amendment Act of 1834, the settlement of an illegitimate child was based on his/her place of birth, which did not necessarily correspond with the mother's settlement. This disparity created significant challenges for parish authorities who were often left to navigate the care and support of both the mother and child on a case-by-case basis, resulting in inconsistent care for illegitimate children across the country. In *Poverty, Gender and Life-Cycle under the English Poor Law, 1760-1834*, Samantha Williams critiques the Poor Law's effectiveness and shows how legal ambiguities led to unpredictable and inconsistent treatment of foundlings across different parishes, often resulting

⁵²¹ Ibid., 25 May 1768.

⁵²² Ibid., 342, Appendix.

⁵²³ The Parish Register that was out for digitization during this study, call # A/FH/A/09/003/001, gives the names and parishes of children, with ages and dates of death or discharge.

in tensions between local authorities and institutions like the LFH.⁵²⁴ Tanya Evans writes of “disputes over settlement” and “extraordinary stories” of parish officers exploiting the General Reception to foist 'bastards chargeable to their parish' upon the Foundling Hospital.⁵²⁵ Notwithstanding such difficulties, a project to marry the interests of the LFH and the surrounding parishes was introduced in 1767.

As early as 1753 the Governors began to discuss expanding their efforts despite the Hospital's financial constraints: before the General Reception, the initial proposal involved seeking parliamentary approval for a statute mandating parishes within the Bills of Mortality to entrust the Hospital with the care of as many parish orphans and foundlings as it could accommodate; the parishes would contribute a weekly fee to support these children.⁵²⁶ While this proposal ultimately did not materialize then, it would in the next decade. Taylor White revived the proposition in 1763 when he included, in his list of “Objects” of the institution, “Orphans” whose parishes “can't take proper Care” of them in their workhouses. “It would be very reasonable the Parishes should contribute towards the Maintenance of such Children.”⁵²⁷ As Treasurer of the cash-strapped charity, he was mindful of the financial benefit that might accrue. His concerns were clearly expressed in a letter of May 11th 1767, when he lamented the state of the Hospital's finances: the root of the problem was Parliament's payment of a sum for the remaining Parliamentary Children (“only” £28,000) when the cost of caring for them (£31,387.10.0) was substantially greater. White was angry and worried: “I suppose Mr Charles Townshend calls this Oeconomy... If there can't be a saving thought of so as to supply the deficiency of the Parliamentary Grant the Charity must be greatly distressed.”⁵²⁸ However, an apparent solution was already imminent. In February 1767, the Act for the Better Regulation of the Parish Poor Children was passed by Parliament.⁵²⁹ The legislation, known colloquially as the

⁵²⁴ Samantha Williams, *Poverty, Gender and Life-cycle Under the English Poor Law, 1760-1834* (Woodbridge, Suffolk: The Boydell Press, 2011), 16. See also Tanya Evans, *"Unfortunate Objects" Lone Mothers in Eighteenth-Century London* (Basingstoke: Palgrave MacMillan, 2005), 24-28.

⁵²⁵ Evans, *"Unfortunate Objects,"* 205.

⁵²⁶ McClure, *Coram's Children*, 79.

⁵²⁷ Admissions, A/FH/A/06/030, Copy of Letter from the Foundling Hospital, 28 May 1763.

⁵²⁸ Ibid., White to William Lee (Ackworth), 11 May 1767. White acknowledged that Parliament also gave £1500 to cover apprenticeship costs, but this still left the Hospital short by £1887.10.0.

⁵²⁹ 7 Geo. III, c. 39. Carol Harris, “Admissions to the Foundling Hospital,” Coram: <https://coramstory.org.uk/explore/content/blog/admissions-to-the-foundling-hospital>, (2022). Also in Nichols and Wray, *The History of the Foundling Hospital*, 65.

“Hanway Act,” came into effect on July 1 of that year. Jonas Hanway, LFH Governor and soon to be a Vice-President, advocated for this law in an effort to enhance the care provided to indigent children. The LFH Governors gave Hanway “every encouragement and assistance in securing the passage”⁵³⁰ – and it was quickly evident that it was the provision regarding parish children that interested them. On February 25, the General Committee received officials from the nearby parish of St Andrew’s who,

Declared that having together with several other principal Inhabitants considered the Inconveniences of Parish Workhouses with respect to the preservation and Education of the Infant Parish Poor, they were willing and Desirous to send the Parish poor Children of their said Parish to this Hospital to be Nursed and Educated under the Care of the Governors and Guardians thereof upon a Rate of £7.10 pr Annum, agreeable to what hath been allowed by Parliament.⁵³¹

The Committee resolved,

That the above Proposal is reasonable and peculiarly proper for the Occasion considering the well known Distresses of the Infant Parish Poor, and that the said Gentlemen be desired to attend next Wednesday in order to treat with them for that purpose.⁵³²

As McClure points out, Hanway’s Act “promised an opportunity to enlarge the Hospital’s work and to secure additional revenue in doing so.”⁵³³ On June 24th 1767, having received other parish officers, the Committee resolved:

⁵³⁰ McClure, *Coram’s Children*, 144-45.

⁵³¹ Minutes of the General Committee, A/FH/K/02/011, 342, Appendix.

⁵³² *Ibid.*, 342-43.

⁵³³ McClure, *Coram’s Children*, 145.

...to take such Children as now are or hereafter may be in the Workhouse, or belonging to these Parishes (the Mothers thereof consenting) to a Number not exceeding twenty of the Youngest, till further permission, in order that the same may be Nursed, reared and Educated as far as the Age of Seven Years, under the Direction of the said Governors, with liberty then to reclaim them or make a fresh Agreement for the Price of Maintenance and Education... [and] That twelve shillings and six pence pr Kalender [sic] Month [be] paid Monthly or Quarterly” to the Hospital and the same amount (subsequently increased) paid to cover “the Charges of Conveyance into the Country, Cloathing [sic], and Burial in case of Death, and Reward to Nurses at the Time it is usually given.⁵³⁴

Thus, it was agreed that Overseers of the Poor in London parishes would bring impoverished children to the LFH and facilitate payment to the Hospital for their upbringing.⁵³⁵ These entrants, aged between six and twelve months, were selected case-by-case and were usually reintegrated into the parish when they reached six to eight years of age. In the last six months of 1767, the Hospital took in 179 parish children, and 73 followed in 1768, making a total of 252 parish children received by the end of 1768.⁵³⁶

Soon, the LFH reversed its old stance on playing host to diseased children, the only category ever to be prohibited from entering the Hospital. On July 11th 1767, the administration decided that instead of returning ill parish children to their respective parishes, after finding that “the most part of them are Diseased and will require a Considerable expence [sic] for their Cure,” they opted instead to administer medical care at the LFH and invoice the parish.⁵³⁷ This turned out to be a wise decision since the mortality rate was 14.5% for parish children, starkly lower than the infant death rates reported in parish workhouses.⁵³⁸ The benefit to the children sent from their parish to the LFH cannot be overlooked. The paternalistic inclination to help the parish children, including those who were not in good health, is noteworthy – perhaps all the more so because the archival record suggests that the administration did not see them as true Foundlings: their names are not in the *General Register*, as if the administration saw two distinct

⁵³⁴ Minutes of the General Committee, A/FH/K/02/011, 343-44, Appendix.

⁵³⁵ Likewise, the War Office bore the cost of transporting orphaned children at a later stage, even though the service was typically offered without charge.

⁵³⁶ Minutes of the General Committee, A/FH/K/02/011, 348, Appendix. McClure gives 337 as the total in the first four years. McClure, *Coram's Children*, 147.

⁵³⁷ Minutes of the General Committee, A/FH/K/02/011, 346, Appendix.

⁵³⁸ McClure, *Coram's Children*, 145-46.

populations.⁵³⁹ The Governors distinguished between the two by referring to those not sent by the parish as “private Children.”

There were several differences between parish children and Foundlings. Parish children retained their names, their siblings were allowed to accompany them, their ages were not strictly limited to six to twelve months (even though this was stipulated in the Hanway Act), parishes had the right to reclaim their children upon request, and, of course, the remuneration to the LFH meant that the parish children could be a financial asset.⁵⁴⁰ There is evidence that a few of the parish children sent to the LFH were true foundlings. Thomas Aird identifies 10 who were given the name of their parish, e.g., Gabriel Fenchurch.⁵⁴¹

The Governors were to be disappointed by the financial results of the initiative.⁵⁴² Friction ensued when many parishes reneged on their commitments, their late payments undermining the financially “distressed” institution.⁵⁴³ Interestingly, the monthly sums paid for the parish children were the same as those Parliament paid for each Foundling admitted during the General Reception, as if taking in parish children was intended to replace the soon-to-end revenue from Parliament. The Governors had believed the parish money would allow them to keep the Ackworth and Shrewsbury branches open while sustaining a vital humanitarian undertaking.⁵⁴⁴ These hopes were dashed by the parish officials’ malfeasance. Moreover, it is possible that, as parish children filled vacancies, they diminished the Hospital’s efforts on behalf of actual Foundlings. The parish children received in 1767-68, for example, far outnumbered the new Foundlings. And a substantial minority of the latter were not the “deserted and exposed” children of impoverished mothers but White’s “spurious Children of good Family” (many of them surpassing the minimum age requirement for LFH-funded children) who were “received without questions asked on payment of £100.”⁵⁴⁵ Of course, the goal, though not realized in reality, was

⁵³⁹ General Register, A/FH/A/09/002/001-006.

⁵⁴⁰ Thomas Aird, Jonas Hanway and the Parish Children of the London Foundling Hospital, online talk (28 October 2021), <https://www.youtube.com/watch?v=Eo0PYa1z54k>.

⁵⁴¹ Ibid..

⁵⁴² Nichols and Wray, *The History of the Foundling Hospital*, 66.

⁵⁴³ McClure, *Coram’s Children*, 146-47.

⁵⁴⁴ Memorandum re policy of admission in view of the end of Indiscriminate Admission, A/FH/M/01/008/099-102, 4 November 1769.

⁵⁴⁵ Ibid.. Infants accompanied by a £100 donation gained admission without inquiries from 1756 to 1801. The Foundling Museum estimates that about 75 babies entered under this program. Foundling Museum, “What Is a Foundling?,” <https://foundlingmuseum.org.uk/our-story/what-is-a-foundling/>

to subsidize the Foundlings side, and doubtless the parish children were the sort of unfortunate children that the founders and early leaders, from Coram through to White and beyond, had hoped to save.

The end came, in effect, in November 1791, by which time the total number of parish children registered at the LFH was 822, over 300 in 1767-70 and almost 500 during the next two decades.⁵⁴⁶ In the same period, July 1767 - November 1791, according to the General Register there were only 175 “normal” admissions.⁵⁴⁷ By the early 1790s, partly due to the difficulty in obtaining payments from the parishes, the Governors were no longer enthusiastic about accepting parish children. Moreover, the parishes did not send as many children as the Governors had anticipated, making instead cheaper arrangements with country nurses.⁵⁴⁸ The Hospital took the last parish child in on November 5th 1791 and the last reclaimed child left on November 14th 1794, but one other remained to die at the Hospital on January 10th 1797.⁵⁴⁹ There was a period of uncertainty that perhaps tells us more about the Hospital’s erratic decision-making than about admissions policy. On July 10th 1793, the Governors discussed how the Parish of St Olave, Southwark was “indebted” to the Hospital for the “Maintenance of Children belonging to the said Parish & the Account having been outstanding more than three years, Secretary to write to demand immediate payment.” This incident served as the final catalyst, prompting the Governors to decide to end the practice when they “Resolved That no more Parish Children be received in future under the care of the Governors of this Hospital.”⁵⁵⁰ Yet, the following week, the “Resolution respecting no more Parish Children” was one of two Committee motions *not* approved.⁵⁵¹ Conceivably, passing the motion without prior notice was deemed improper, and the absence of a reference to the General Court might have compounded the issue. There followed an indication that the General Court were not of the same mind, when on March 30th 1796 it resolved, “That the General Committee be empowered as formerly to admit into this Hospital upon such terms as they shall think proper any Number of Parish Children not exceeding 100.”⁵⁵²

⁵⁴⁶ Aird, Jonas Hanway, online talk.

⁵⁴⁷ General Register, A/FH/A/09/002/001 et seq..

⁵⁴⁸ McClure, *Coram’s Children*, 148.

⁵⁴⁹ Aird, Jonas Hanway, online talk.

⁵⁵⁰ Minutes of the General Committee, A/FH/K/02/020, 10 July 1793.

⁵⁵¹ *Ibid.*, 17 July 1793.

⁵⁵² Minutes of the General Court, A/FH/K/01/004, 30 March 1796.

This scenario did not actually come to pass. The confusion may have arisen from uncertainty about the likely impact of the Hospital's developing property portfolio, the rents from which would render parish funding unnecessary. Regardless, the last parish child's death in January 1797 concluded the entire arrangement.

The parish children program had been driven by internal conditions. The impending termination of the Parliamentary grant created financial uncertainty. The institution was now confronted with the formidable challenge of sustaining its operations in the absence of this crucial funding. They chose to integrate parish children as a strategic measure to occupy beds without adding to net costs and, enabled by the new income stream, to continue admitting children as before. This approach reflects the Hospital's ongoing commitment to aiding as many children as possible insofar as its resources allowed. Thus, a financially stressed institution strayed from its previous admission practices and pursued additional revenue until property income in the 1790s allowed it to resume operations as a fully independent charity. Scholars cannot disregard the parish children's importance, not least because of the remarkable number of children involved, even if they were temporary and a means to an end.

Ultimately, the decision to admit parish children (and retain even those identified as diseased) was rooted in benevolence. Refusal to take the parish children, when Hospital finances were extremely fragile, could have jeopardized the entire operation. The Hospital's institutional paternalism would not let the lack of funds undermine the Governors' philanthropic enterprise. The administration devised a method to aid the most impoverished children, sustaining the values of their predecessors, a child-oriented focus which would be overridden by concerns about a mother's virtue in the next century.

f) Petitions and Ballots (1768-1772)

While petitions exist in an unbroken series from 1768 onwards, the first two years' were no longer "fit for access" at the LMA, even before the advent of the digitization project. The earliest ones I had access to date back to 1770; however, the General Committee minutes from 1768 to 1769 enumerate the petitions scrutinized and offer brief insight into the circumstances

of the applicants for these years. Prior to digitization, which made many petitions inaccessible, specific batches of petitions had undergone substantial examination (1770-1773, 1794, and 1800). Fortunately, during subsequent General Committee meetings, the Governors continued to discuss the petitions and usually recorded petitioners along with some relevant details. Together, these records provide valuable information on the petitioners. Unfortunately, for the eighteenth century, both the Committee minute and petition records provide scant information on the rationale behind many rejections; however, in a study aimed at illustrating the disparities in *accepted* petitions between two centuries, this obstacle did not significantly hinder my progress.

Though now secondary, numerically, to the reception of parish children, the conventional admission of Foundlings continued its unpredictable course. Eight years after the end of the General Reception, a systematic framework for petitioning was established. On May 27th 1768, the Committee decided to receive petitions in order to admit 50 children, who would be maintained by subscriptions, legacies, and other donations, “as are those who have been received since the 25 March 1760.” Eligibility was to be conditional on age (under 8 months) and geography (born within the Bills of Mortality), and restricted to those who “do not appear to have any legal Settlements,” and admission would be at “the discretion of the General Committee.”⁵⁵³ This entry hints at the Governors’ fear of being overwhelmed again, setting a low maximum age and requiring the rejection of applicants for whom the parish could bear responsibility. The latter issue was a recurrent cause of rejections. For example, in the summer of 1773, petitioner Dorothy Keen claimed she took in a lodger who later died in childbirth. Keen now could not maintain the child, so she applied to the Hospital. Even though her story was “verified,” the Committee thought Keen should apply to the parish.⁵⁵⁴ In the same year, Rebecca Floyd, a nurse, penned a petition in vernacular regarding an orphaned three-month-old whose mother had died in childbirth, and whose father’s whereabouts were unknown:

Now King Gentlemen I hope youl consider my unhappy settuation for as much as
I am in a ready furnished Lodging & my husband has been out of work sometime

⁵⁵³ Minutes of the General Committee, A/FH/K/02/011, 27 May 1768.

⁵⁵⁴ Petitions Admitted to ballot, Rejected, A/FH/A/08/001/001/004, Dorothy Keen, 21 July 1773.

which causes me with grief to Lament the unhappy Event that must undoubtedly
Ensue as the parish will not take it in & indeed Gentlemen I cannot get it proper
food & I have no heart to Drop it, this be far from me...⁵⁵⁵

Despite Floyd's assertion that "the parish will not take it in," the Committee thought the case was a parish responsibility and did not submit the application to ballot. Likewise, May Hale, a widow, was left caring for a five-month-old boy after his mother deserted him three months prior. Hale was unable to support the child as she had a large family of her own and lamented that she had "no friend to assist her with such an incumbrance." However, no verification could be provided and the Committee decided that the parish should assume responsibility for this case.⁵⁵⁶ Such instances show the administration's intent to avoid setting precedents of parishes offloading children onto them without payment. However, the Governors also allowed for flexibility, resolving:

That it be a Rule in the Reception of Children into this Hospital, that where any Child is offered who is Born within the Bills of Mortality, that Enquiry be made of the Parish Officers, whether they will take such Child, and if not, for what Reason they refuse; except in Cases where it appears that such Enquiry would be improper with regard to the Circumstances of the Mothers, and that such Reasons for such Refusal be entered in the Minute Book of Children offered.⁵⁵⁷

One such consideration, discussed below, was the concern to maintain the secrecy of mothers' circumstances.

On June 10th 1768, the first batch of petitions was assessed; William Harrison and George Whatley were tasked with examining the details. Three boys and three girls were granted admission. Some petitioners did not fall under the scope of the charity, as indicated by the mismatch between the children's assigned numbers, listed as "No. 1" to "No. 6," alongside

⁵⁵⁵ Ibid., Rebecca Floyd, 27 October 1773.

⁵⁵⁶ Ibid., Mary Hale, 27 November 1773.

⁵⁵⁷ Minutes of the General Committee, A/FH/K/02/011, 15 June 1768.

their *petition* numbers: No. 3, No. 5, No. 6, No. 8, No. 9, and No. 11. The accepted children, deemed “very pitiable Objects,” included “A Male Bastard Child...Born in St. Mary Le Bows Parish about five Weeks ago,” “a Boy... on the report of Mr. Whatley,” a three-month-old girl “Born in the Parish of St James’ Westminster but refused by Mr. Tignel, the “Overseer of the poor.”⁵⁵⁸ All six children entered the Hospital six days later, on June 16. Additional admissions occurred that summer, and included both legitimate and illegitimate children.⁵⁵⁹ Many of the mothers were in desperate financial straits; Elizabeth Mantle had to pawn most of her clothes in an attempt to keep her children alive.⁵⁶⁰ When the inquirers were unable to verify what was stated in the petition, they got the mothers to make an “Oath of the Facts before Mr Owens,” a magistrate.⁵⁶¹ In contrast to what will be evident at the end of this century, the Governors appeared to exhibit a higher level of trust in mothers, accepting their oath as factual evidence.

The Governors remained cognizant of the need to maintain the confidentiality of parents. Each child, as before, was given a number and a new name, but, although parents were named in their petitions, “neither the [original] Name of the Child, or the Father or Mother” were to be entered in the General Register.⁵⁶²

Some children were still being admitted without petitions. For example, on October 25th 1769, the Committee took a recommendation from one of its most active members, William Harrison; he explained that Martha Morris, “a great object of Compassion,” was “left a Widow with three small Children in very great distress” and asked the Hospital to take in her youngest, who was younger than two months. The Committee decided to receive the child without a

⁵⁵⁸ Ibid., 10 June 1768.

⁵⁵⁹ Ibid., 11 June 1768. Nos. 8, 9, 10; 13 June, Nos. 11, 12, 13, 14; 15 June 1768, Nos. 15, 16, 17. Petition No. 8 was for “a Legitimate Child of James Pollard Widower. Aged one Month.” No. 9 was an “illegitimate Child.” Both to be taken in on 16th June. No. 10 Elizabeth Rogers, “a Legitimate Child of John & Eliz. Rogers... the Father a Soldier; the Child to be weaned by the Mother, and taken in the 21st instant.”

⁵⁶⁰ Ibid., 27 July 1768: “Eliz. Mantle, setting forth that she was unfortunately drawn aside by a Person, who has left her in great distress, with a Young Infant, and has made away with all her Clothes, to support her Child [sic], therefore praying that the said Child may be received into this Hospital. Resolved That the said Child be received into this Hospital and that it be brought next Tuesday.”

⁵⁶¹ Ibid., 29 June 1768. “Sarah Middleton for a female Bastard Child Aged about 7 Months is Christened the Mother in Service the Father gone Abroad, the mother of this Child made Oath [sic] of the Facts before Mr Owens to be received next Monday... Mary Cruse for a Bastard Child born the 24 [sic] of May. Christened Sarah Cruse; the father Jas Spilsbury who promised her Marriage has absconded. Sworn to the Facts before Mr Owens. The Child to be received next Monday.”

⁵⁶² Ibid., 27 May 1768.

formal petition.⁵⁶³ Another petitionless child was admitted that day, recommended by a Mr. Burchnall who was not actually present at the meeting: “Mr Burchnall having represented the Case of a Child four Months old in great distress and Mr Brettell [who was listed present] having also recommended the said Child to the Protection of this Charity.”⁵⁶⁴

Alterations to the application procedure were implemented regularly. At a General Committee meeting on January 10th 1770, the Governors made significant resolutions, likely aiming to professionalize and standardize the procedure and try, perhaps half-heartedly (see below), to move beyond “caprice.” They decided the petitioners would be “examined” (interviewed) and seemed to imply, without giving an absolute commitment, that this would be followed by an inquiry “as soon as possible.” Then they reiterated the specific (qualitative) requirements that a petition must include and implemented the General Court’s January 3 recommendation to recommence balloting, in abeyance since 1756, whenever the accepted petitions outnumbered the spaces available, and the first ballot followed on Saturday March 10.⁵⁶⁵ Furthermore, anticipating the later Indigent Fund, they resolved to provide financial “Relief” to applicants facing destitution, to aid their survival (the health of the *child* was the concern) from the time of acceptance until the day of admission. There is no evidence that the moral character (or welfare) of the mother was to be considered:

Resolved...

That an Advertizement be affixed at the Gate of this Hospital that such poor persons who are desirous to take the Benefit of this Charity may deliver their Petitions to the Secretary of this Hospital, which Petition must contain the Age & Sex of the Child, which they desire should be received, and whether Wet or Dry Nursed, the Place of its Birth and whether it hath been Baptized or not...

That each petitioner shall be examined at the next General Committee after the petition is delivered. That the circumstances of each Case be examined as soon as possible, and as soon after as may be, shall be reported to the General Committee, that the Petition may be received or rejected.

⁵⁶³ Minutes of the General Committee, A/FH/K/02/012, 25 October 1769.

⁵⁶⁴ Ibid..

⁵⁶⁵ Ibid., 10 January 1770. Minutes of the General Court, A/FH/K/01/003, 3 January 1770. Proposal to take in children, A/FH/M/01/008/105-107, 3 January 1770, proposal to take in children up to a complement of 200. Minutes of the General Committee, A/FH/K/02/012, 7 March 1770, first ballot on Saturday 10 March 1770.

That to prevent mistakes each Petition be put on a File, with the Reason which induced the Committee to receive or Reject the Petition entered thereon, Each Petition is to be Numbered and Dated and filed to order.
That if the Committee find it proper to order any Relief, to the Petitioner, the sum ordered shall be entered in a Small Book to be kept for that purpose, with the Time when such Relief is to commence...”⁵⁶⁶

Despite the resolution, reasons for rejections were rarely recorded. There was no mention in the minutes of the mother’s character or reputation, nor any requirement that she be the petitioner at this stage.

In 1770, then, balloting resumed its role in admissions, featuring every time applications outnumbered vacancies. Each new round of admissions was advertised, initially by a poster on the Hospital gate, subsequently also in the daily papers. Petitioners were to submit their petitions to the Hospital’s Secretary; they would then be invited to the Hospital, with the child, for interview; upon verification of the accuracy of the quantitative data, the petition was “admitted to ballot.” The ballot itself was conducted publicly, in front of “Spectators” in the chapel and overseen by Governors. The “Balloting Box or Bag” was to “be held by two Children of the Hospital.”⁵⁶⁷ The repercussions of drawing either a white or black ball remained consistent with the practices established in the 1740s, but the red ball was phased out. The ballot was a mechanism to ensure impartiality and transparency. It would be held either monthly, every two months, or quarterly (i.e., when necessary). After the ballot, things moved swiftly: normally, children were admitted by ballot on Saturday, baptized on Sunday, and brought to the countryside on Monday.

The early scrutiny of petitions was rather flexible and tolerant. Although some petitioning mothers admitted that they became pregnant by a man who absconded, these narratives were disclosed *voluntarily*. This was the case despite the newly stated interest in the mothers’ “Circumstances”:

⁵⁶⁶ Ibid., 10 January 1770.

⁵⁶⁷ Ibid..

Notice is hereby given, that Petitions may be delivered into the Secretary's Office for the Receiving of Children until Saturday the 10th of February next; the Age of the Child, and the Circumstances of the Petitioning Person are to be mentioned, together with a Direction to whom application may be made to testifye the truth [sic] of what is set forth in the Petition...

Children appearing to have any other means of being provided for will not be admitted to be Balloted for, but the Petitions rejected.⁵⁶⁸

In contrast to the succeeding century, the phrase “Circumstances of the Petitioning Person” in this context pertains to the present tense, focusing on the individual's *current* situation rather than the course of events that had led to her application: there was no requirement for the petitioner to provide information about the pregnancy or the child's father. Mothers were questioned about alternative options, including entitlement to parish relief, but the examination mainly focused on the eligibility of the *child* and interest in the mother did not resemble the stringent scrutiny observed in the nineteenth century. Furthermore, the “enquiry” into the petitioner's statement primarily entailed either receiving a recommendation from a respectable person or having the petitioner swear to its accuracy. The effort dedicated to scrutinizing the application was far less extensive than the inquiry procedure implemented by the next generation of Governors.

While exceptions continued to be permitted, the admissions procedure – petition, interview, inquiry, ballot, and health assessment – was more orderly and predictable from 1770. Another significant set of resolutions followed in 1772:

Resolved

That it is the Opinion of this Committee that a Liberal Effort be made in the reception of Children in a proper and Public Manner in order to give the World Just Impressions of the Humanity and Utility of this Charitable Foundation.

Resolved

That it be recommended to the General Court that One Hundred Children be received, twenty in a Week, for five Weeks Successively.

Resolved

That the Age of such Children do not Exceed Six Months.

⁵⁶⁸ Ibid., 24 January 1770.

Resolved
That such Children be born in or within five Miles of the Bills of Mortality.
Resolved
That the Children to be received shall be by Petition from the Candidates.
Resolved
That the Children be received by Ballot.⁵⁶⁹

There is an air of confidence about this succinct summary, resembling a checklist, of the admissions process. The decision to take in 100 children in five weeks speaks of a readiness to restore the Hospital to full, post-General Reception working order. The Governors clearly felt able to rehabilitate their tarnished reputation – “to give the World Just Impressions” of the Hospital’s “Humanity and Utility” – and secure funding from a public whose renewed trust they sought to gain. Even so, it will be seen that traditional paternalism persisted as the administration maintained a discretionary approach, deciding on a case-by-case basis rather than adhering strictly to the new set of rules.

Pleading Voices: Survey of All Available Petitions, 1770-1773

Before the digitization project, I was able to analyze most petitions (140) between 1770 and 1773, the majority being admitted to ballot. Unlike the more uniform petitions found in Victoria’s reign, these early petitions reveal a poignant tapestry of hardship and desperation faced by applicants in various circumstances. A brief review of some of their stories will show instances of “accepted to ballot” petitions featuring both the distinctive characteristics of the eighteenth century and traits shared with petitions from the nineteenth century. This duality suggests a gradual change over time, where certain practices persisted, while others were transformed, evincing the complex evolution of social and cultural dynamics at the London Foundling Hospital.

⁵⁶⁹ Ibid., A/FH/K/02/013, 27 May 1772.

The petitions reveal how newspapers served as crucial channels for disseminating information about the service offered by the LFH. Hannah Jordan was a servant who found herself in dire straits after being deceived by a fellow servant. She lamented in her petition that, “to my great misfortune and shame,” she was led into “a great scene of misery” while attempting to support her child and conceal her “shame” from society. Hannah read the Hospital’s advertisements in newspapers, and got a clothier named Sherman to recommend her. Hannah was admitted to ballot on September 5th 1772. Similarly, Susannah Alfred was a servant employed by Mr. Panton, a distiller in the Barbican who was her recommender. She could not provide for her child after being “seduced.” Susannah also learned about the LFH’s services from newspaper advertisements.⁵⁷⁰ Newspapers and word of mouth served as the main means by which individuals in need could learn about the Hospital’s processes; the extent to which potential applications could know and anticipate the Hospital’s requirements will be discussed in the next chapter.

The predominant theme illuminated in this analysis is the profound poverty among petitioners, primarily mothers, during the years 1770 to 1773. At times, the LFH Committee noted their destitution, as seen with Sarah Evans, who was thought to bear “extraordinary Marks of Poverty.”⁵⁷¹ Most petitioners experienced severe financial distress before or due to pregnancy. Among the 140 petitions examined, 59 petitioners explicitly stated that they relied on others to keep themselves and their children from “starving.”⁵⁷² Additionally, seven petitioners, even those like Mary Lake who served in Charles Townsend Esquire’s home, wrote they could not afford to keep their “cloathes” and at least ten noted having pawned garments to support their babies.⁵⁷³ Such abject poverty, conspicuous in these petitions, contrasts sharply with its absence in most petitions submitted a generation later; indigence rarely featured in the nineteenth-century narratives. In the eighteenth century, Governors showed compassion

⁵⁷⁰ Petitions: Admitted to ballot, rejected, A/FH/A/08/001/001/003, Jordan, 5 September 1772, Alfred, n.d.. Petitioners sent to ballot first had their applications approved by the Committee.

⁵⁷¹ Petitions: Admitted to ballot, admitted, A/FH/A/08/001/001/002, Sarah Evans, 12 November 1770.

⁵⁷² Ibid., A/FH/A/08/001/001/002 & 003, “Starving”: Mary Gill (“starving”), March 1770; Christina Rebens (“two starving children”), 10 Jun 1772; Barbary Moor (two children aged 2 and 5 months and nothing to support them with, “starving” through the summer, both admitted to ballot), November 1772.

⁵⁷³ Petitions: Admitted to ballot, admitted, A/FH/A/08/001/001/002, Mary Clifton, 23 May 1770, Elizabeth Turpin, 11 April 1770, Mary Hewitt, 13 Oct 1769, Mary Bassett, 1 June 1771; Petitions: Admitted to ballot, rejected, A/FH/A/08/001/001/003, Frances Bailey, 1 July 1772; Petitions: Admitted to ballot, rejected, A/FH/A/08/001/001/004, Mary Lake, 6 March 1773, Mary Brown, 1 September 1773.

towards the most impoverished children and women, perhaps even more towards those with limited literacy, as evidenced by the admission of some mothers who penned their own petitions but wrote little about their circumstances.⁵⁷⁴

A notable contrast between petitions from the early 1770s and those from succeeding generations is the prevalence of widows and married women facing precarious circumstances. In the 140 petitions examined, 13% of petitioners (two men and 16 women) were either widowed or married, highlighting the significant representation of persons grappling with the challenges of widowhood or the absence of support from husbands. For example, in 1772 Elizabeth Hause, a widow whose husband died when she was four months pregnant, described herself as “reduced to the lowest ebb,” and having to sell all her clothes left her unable to “even appear decent.” She pleaded for help, stating that she and her child faced hunger.⁵⁷⁵ And Samuel Norbury, grieving the loss of his wife at Brownlow Hospital on June 8 of the same year, found caring for their infant and a three-year-old child with “no income more than labour...a Heavier Burthen than [he] is able to support.” Being 200 miles away from his parish of settlement, he sought assistance from Sir Rowland Wynn, who promised to go himself before the Committee to plead his case. Both Hause and Norbury had their applications sent to ballot. Griffie Jones had a very similar experience after his child’s birth led to the tragic death of its mother.⁵⁷⁶

Most of the married women who applied to the LFH were deserted by their husbands and had more than one child. In some cases, the Governors opted to accept their youngest children. Mary Line got her youngest of three children admitted to ballot on the recommendation of a baker.⁵⁷⁷ Sarah Roberts’ husband “deserted” her five months prior, leaving her with two young

⁵⁷⁴ Ibid., Elizabeth Wilkinson (“Honerd gentlemen...I take this liberty of trobeling you with my unhappy curcomstances of begin suced [seduced] by a unhappy man...”; she was too ill to attend), 20 July, read 24 July 1773, month-old female admitted 4 August 1773; Mary Scoresby (“Onable Gentilmen this is to beg the favour of your Charytey that you will admet me orphan in your Charyty I being an infortunant porson in distress and not in my pour to tacke Care of it I having no frends in the world to help me, so humble grave your charytey”), month-old male admitted 3 November 1773; Mary Vale (“Guntelman I haint it in my pour to Cupe my Childe the man is gon and left me and I carnt mintane it for I hav no vae of Busnes to mintan my child tak compason on me for I don’t know is parrish he belong to”), boy admitted 1 December 1773. Totals from A/FH/A/08/001/001/004 petitions for 1773: 6 gave mark, 24 signed well, 13 signed badly, and 55 did not sign at all, having their petitions very clearly prepared for them.

⁵⁷⁵ Petitions: Admitted to ballot, rejected, A/FH/A/08/001/001/003, Elizabeth Hause, 5 September 1772.

⁵⁷⁶ Ibid., Samuel Norbury, 22 July 1772 and Griffie Jones, n.d. (1772).

⁵⁷⁷ Petitions: Admitted to ballot, admitted, A/FH/A/08/001/001/002, Mary Line, 31 October 1770.

daughters, the youngest 7-weeks-old.⁵⁷⁸ Ann Pluckro, a poor widow, was “Left in great Distress with tow [sic] small children” when the father ran away and then died.

[She] begg[ed] Leve to meake my pettishon to the gentilmen belongin to the Charity of the foundling ospital being a object of your charetey I hope that the good gentelmen will teak compashon on her and teak the younger it being a Boy about tow months ould she thinks with god assistance she can take care to meke provvishon for the oulder [sic]

It is unclear whether Pluckro’s case was actually admitted to ballot.⁵⁷⁹ Christina Rebens’s case, however, did make it to ballot. Rebens, born in Holland, came to England to work as a servant for a “Lady.” Unexpectedly, she gave birth to twins upon arrival, causing distress as she feared she could not support herself until her husband “could join with her in paying her expenses home.” She pleaded for one infant to be taken under the Hospital’s protection as she could go back with the “Lady as her servant,” something she could not do with “two starving children.”⁵⁸⁰ And while Elizabeth Gill was not married to her children’s father, they had two children together before he died, so she applied and had her two-month-old admitted.⁵⁸¹ The same happened to Ann Stevenson, whose cohabiting partner left her with three children to become a soldier.⁵⁸² Of the last nine parents noticed here, from Hause through to Stevenson, none could have been confident of their eligibility in the nineteenth century, when almost all successful applicants were single, abandoned mothers who gave birth to one child.

There were even interesting instances of men with many children applying to the LFH. In 1773, William Putt, a porter, faced considerable hardship supporting his large family of nine children, the youngest only four months old. His annual salary of £30 as a salt officer was insufficient, especially in a time of general scarcity and high prices. John Elliot Esq, Secretary to the Salt Office, acknowledged Putt’s distress but attributed it in part to his “very bad

⁵⁷⁸ Petitions: Admitted to ballot, rejected, A/FH/A/08/001/001/003, Sarah Roberts, 8 January 1772.

⁵⁷⁹ Ibid., Ann Pluckro, 24 July 1772.

⁵⁸⁰ Ibid., Christina Rubens, 10 June 1772.

⁵⁸¹ Petitions: Admitted to ballot, admitted, A/FH/A/08/001/001/002, Elizabeth Gill, 10 April 1770.

⁵⁸² Ibid., Ann Stevenson, 7 October 1772, but admitted to ballot on 14 October.

wife.”⁵⁸³ Although another man, bachelor Charles Weeks, had his petition rejected, “being a petition of a man,” Putt was surprisingly admitted to the ballot and was successful. His then-five-month-old son was admitted.⁵⁸⁴ Perhaps the Governors took pity on him because he was married to a “bad wife” or because he had so many children. Nevertheless, Putt’s admittance would become unthinkable to future Governors. As would Elizabeth Miller’s case.

Widow Elizabeth Miller found herself in dire circumstances following the death of her husband, George Miller, three years previously. Left with two children and facing financial privation, she entered into a partnership with a milliner, hoping to secure a living. However, her situation took a turn for the worse when the milliner’s brother, under the promise of marriage, seduced Elizabeth and convinced her to leave his brother’s abode to cohabit with him. As a result of this union, Elizabeth gave birth to a female child five months prior to her petition. The brother disappeared, leaving Elizabeth destitute and with no means of support except to seek employment as a servant. Fortunately, her maternal uncle, a relatively prosperous grocer, had taken in her older child. The Hospital sent her to ballot for her third child (it is unknown what happened to her second child).⁵⁸⁵ The practice of admitting the children of widows persisted throughout the century, albeit with inquiries becoming more the norm. Almost three decades later, Elizabeth Donovan, a 36-year-old widow with five other children, who fell pregnant with another man who then died in the workhouse, had her application rejected because of an alleged falsity; after the Inquirer had cleared up the misunderstanding with medical authorities, her son was accepted by the Hospital.⁵⁸⁶ Ann Robinson was the “destitute” widow of a soldier who died from wounds incurred in the great Irish Rebellion of 1798; the inquiry confirmed her story and her child was accepted.⁵⁸⁷

Some petitioners had husbands or lovers who were alive and well, but could not provide for their offspring, and the Hospital was more accommodating than it would be a few decades later. Catherine Stephenson was married and her petition was recommended by a Mrs. Parr who claimed, “very unhappily for yor Petitioner [her husband]... being reduced to avoid

⁵⁸³ Petitions: Admitted to ballot, admitted, A/FH/A/08/001/001/004, William Putt, 8 September 1773.

⁵⁸⁴ Ibid., William Putt, 24 November 1773.

⁵⁸⁵ Ibid., Elizabeth Miller, 13 January 1773.

⁵⁸⁶ Petitions: Admitted to ballot, admitted, A/FH/A/08/001/001/025, Elizabeth Donovan, 26 February 1800.

⁵⁸⁷ Ibid., Ann Robinson, February 1800.

confinement in a gaol was obliged to send her & she has it not in her power to support him.”⁵⁸⁸ Similarly, servant Jane Pollard’s “Wages she is intitled to at service being greatly Insufficient for the purpose in these hard times even with the little assistance from her husband who is at low wages with a Farmer in the country & has no prospect but that of Beggary and Poverty before her.”⁵⁸⁹ Both Pollard and Stephenson were accepted to ballot. Jane Howard and her husband, though illiterate, petitioned for their youngest to be admitted, but they ultimately did not appear at the ballot.⁵⁹⁰ Ann Pope was married for six years and had three children with her husband, one of whom had died. In her accepted petition, she explained that her husband left her seven months prior while she was pregnant with another child, and she hoped the Hospital would be willing to take it in.⁵⁹¹ Mary Godfrey, who signed her name “meary godfree,” was a single 24-year-old servant admitted to ballot in 1771. She delivered a child on April 29 but, although the child’s father was around, he was too poor to take care of it. She said if the LFH took in her child, she could return to “honest service.”⁵⁹² Elizabeth Blake stated that her husband had “the misfortune of having a child fathered upon him” and was unable to provide support for it and, remarkably, she was sent to ballot despite the father’s presence.⁵⁹³ As we move closer to the 1790s, such occurrences waned and were seldom sanctioned by the Committee.

Although the resolutions of January 1770 stipulated that petitioners lacking details or unable to provide verification would not be admitted to the ballot, this did not hold true in practice. Frances Bailey, a single woman from St. George Hanover Square, had a bastard child whose father absconded. She worked as a servant maid, “by which calling she has always supported herself until this Misfortune.” She was forced to give up the child as she was “in a miserable mean State having neither Cloaths or any means of Support for Self & Infant.” She did not give any recommenders, nor was her case sent for inquiry, but she was admitted to ballot on July 1st 1772.⁵⁹⁴ Jane Pearson and Elizabeth Charles also offered minimal information,

⁵⁸⁸ Petitions: Admitted to ballot, rejected, A/FH/A/08/001/001/004, Catherine Stephenson, 6 January 1773.

⁵⁸⁹ Ibid., Jane Pollard, 3 February 1773.

⁵⁹⁰ Ibid., Jane Howard, 17 February 1773.

⁵⁹¹ Petitions: Admitted to ballot, admitted, A/FH/A/08/001/001/002, Ann Pope, 29 May 1771.

⁵⁹² Ibid., Mary Godfrey, 29 May 1771.

⁵⁹³ Petitions: Admitted to ballot, rejected, A/FH/A/08/001/001/004, Elizabeth Blake, 24 November 1773.

⁵⁹⁴ Petitions: Admitted to ballot, rejected, A/FH/A/08/001/001/003, Frances Bailey, 1 July 1772.

but the accompanying recommendations (from Mrs. Norisese and Mr. Tompter, respectively) were deemed sufficient to secure admission to the ballot.⁵⁹⁵ Similarly, Elizabeth Morin wrote her own petition but simply said that she had the “misfortune” to have a child, apparently “a black,” and was “unable to care for it.” The Governors sent her to ballot on October 3rd 1772.⁵⁹⁶ Bridget Hyde’s petition notably lacked two elements that would become mandatory in later procedures: substantial testimony and substantial recommenders. Nevertheless, the application was put to the ballot, in which she drew a white ball, and her child was admitted.⁵⁹⁷ Likewise, Margaret Smith found herself without the support of the absconding father, family, or friends when she delivered a healthy daughter in 1772. Although the midwife confirmed Margaret’s stay at a lying-in hospital, efforts to locate the referenced Mrs. Ross of Dean Street in Soho failed. Despite the problem with the only referent, the Committee decided to send her to ballot.⁵⁹⁸

There were also stories of women seduced by married men, something that later would have disqualified them, once a mother’s respectability became paramount. Ann Smith was a servant with a “credible family” but had a child by a married man. A Moorfields saddler testified to her story and she was admitted to ballot.⁵⁹⁹ Some of these men had other children with their wives: Ann Jones, “a spinster,” worked as a servant in a respectable household but was seduced by a married man who had a wife and two children. She struggled to provide for her two-month-old child on her weekly wages of only nine shillings.⁶⁰⁰

The fact that many mother-petitioners were not native to the London area was, at least potentially, a source of difficulty in getting their petition accepted. Unfamiliar with the city and far from their usual support networks, they often had to seek references from employers, like

⁵⁹⁵ Ibid., Jane Pearson and Elizabeth Charles, 29 July 1772.

⁵⁹⁶ Ibid., Elizabeth Morin, 23 September 1772. Other children of colour were admitted to ballot, with references: those of Diana Buxar, a servant who had just arrived from Bengal, Elizabeth Harrison, a West Indian woman who had recently arrived in London, and Lucy Strange, an East Indian woman who was sent to England by her master and during the voyage was debauched and made pregnant “but being ignorant of the English language and not knowing the person’s name cannot say more.” This child of rape was admitted. Petitions: Admitted to ballot, rejected, A/FH/A/08/001/001/004, Diana Buxar and Elizabeth Harrison, 6 March 1773, Lucy Strange, 1 December 1773.

⁵⁹⁷ Ibid., Bridget Hyde, 24 August 1773.

⁵⁹⁸ Petitions: Admitted to ballot, rejected, A/FH/A/08/001/001/003, Margaret Smith, 23 September 1772.

⁵⁹⁹ Petitions: Admitted to ballot, admitted, A/FH/A/08/001/001/002, Ann Smith, 23 May 1770.

⁶⁰⁰ Ibid., Ann Jones, 4 April 1770.

20-year-old Sarah Yeomans who had claimed to have “no friends” in the city.⁶⁰¹ Rebecca Hunt, whose son was admitted into the Hospital on November 3rd 1773, claimed she was “deserted by her Deluder and Friends” and only had her midwife to vouch for her.⁶⁰² Others had been estranged from their family or friends because “in consequence of [their] imprudent conduct” their kin had “turned their backs on her and her infant.”⁶⁰³ It appears that the Governors sometimes showed compassion towards these petitioners. Dorothy Hodgson, a poor servant girl who was “300 miles” from relatives and could barely sign her name, may have been pitied by the Governors: she went to ballot with no inquiry or references.⁶⁰⁴ Elizabeth Treadwell, having had a child with a man who subsequently abandoned her to enlist in the East India service, had a reference from Mr. Noon at the Robin Hood tavern. Mr. Noon, who had known the petitioner for a long time, attested to her dire circumstances, stating that “she lies very ill & her case is truly pitiable.”⁶⁰⁵ Despite this testimony, the committee rejected her petition, perhaps because they scorned a barkeep’s word. These decisions appear to lack consistency and coherence, raising questions about the factors influencing the Governors’ judgments. There would continue to be anomalous cases in the nineteenth century, but there was greater rigour and certainty then and the seeming anomalies had at least as much to do with gaps in the sources – they now *appear* to be unexplained – as with unsteady adherence to the established criteria.

Many petitioners who made it to the ballot were not the mothers of the children, a requirement that would be enforced after November 1815. On May 16th 1770, mariner Charles Wendell requested assistance in caring for the child of a young lodger who had died in childbirth. Wendell’s wife bore the costs of the lodger’s burial and the child’s baptism, yet their family circumstances could not sustain the child any further.⁶⁰⁶ A couple of years later, Andre Charlotte wrote on behalf of his servant Mary Brown: “she served us faithfully and well in every respect, is remarkably mild and peaceable in her disposition, and in a word is as good a servant as we desire to have.” The father, poor and incapable of caring for the child, had abandoned her. Brown’s father, described as a “poor industrious man,” was unable to assist

⁶⁰¹ Petitions: Admitted to ballot, rejected, A/FH/A/08/001/001/003, Sarah Yeomans, 22 July 1772.

⁶⁰² Rebecca Hunt, 27 October 1773.

⁶⁰³ Petitions: Admitted to ballot, admitted, A/FH/A/08/001/001/002, Eleanor Richardson, 29 May 1771.

⁶⁰⁴ Ibid., Dorothy Hodgson, 1 January 1772.

⁶⁰⁵ Petitions: Admitted to ballot, rejected, A/FH/A/08/001/001/004, Elizabeth Treadwell, 18 August 1773.

⁶⁰⁶ Petitions: Admitted to ballot, admitted, A/FH/A/08/001/001/002, Charles Wendell, 23 May 1770.

them, and her other relatives were also impoverished. Brown expressed deep sorrow in parting with her daughter but felt the necessity due to her circumstances. The Hospital admitted her to ballot.⁶⁰⁷ At the same time, Elizabeth Shaw petitioned the Hospital explaining that she had been nursing an infant for four months. The infant's parents had vanished, leaving her with the responsibility. Elizabeth, with a large family of her own and a disabled husband, felt incapable of caring for the child any longer. She was admitted to the ballot on September 5th 1772.⁶⁰⁸

In another variation, some family members would petition the Hospital on behalf of relatives. Mary Williamson described the distressing situation of her daughter Elizabeth, who had endured severe mistreatment from her lover before being abandoned. Elizabeth had suffered greatly, going nearly mad from grief. Mary pleaded for the Hospital to take in her granddaughter. Verification of Mary's account was sought from Mr. Bonnicks in Britannia Street, who volunteered to represent her before the Committee. This anomalous case of a petitioning grandmother shows the challenges in achieving standardized procedures within the institution in this period, leaving room for differing interpretations of the admission criteria.

At this time, the Committee also gave second chances. In July 1772, two petitioners successfully reapplied after drawing a black ball at their first ballots. Frances Barwis was granted a second opportunity on July 8, and Susanna Scofield on July 29.⁶⁰⁹ In the following century, this scenario will not be feasible because acceptance or rejection hinged on character and the circumstances surrounding the pregnancy; generally speaking, a person once rejected could not reapply due to the stringent criteria governing acceptance.

In the next century, while recommendations became obligatory for *all* petitions, an extensive investigation into their details would still occur, regardless of the origin of recommendation letters. In the eighteenth century, however, persons endorsed by highly esteemed recommenders could bypass the inquiry and proceed directly to the ballot. Louisa Gamball's husband, a Dutchman, absconded when she was seven months pregnant with their second child, leaving her to care for their seven-year-old son and the unborn child. To sustain herself and her children, Louisa began washing and charring. This work ruined her health, rendering her physically incapable of supporting her children. At the time of the petition, the

⁶⁰⁷ Petitions: Admitted to ballot, rejected, A/FH/A/08/001/001/003, Andre Charlotte, 5 September 1772.

⁶⁰⁸ Ibid., Elizabeth Shaw, 5 September 1772.

⁶⁰⁹ Ibid., Frances Barwis, 8 July 1772; Susanna Scofield, 29 July 1772.

newborn child was just four weeks and three days old. She was supported in her petition by Samuel Pitt, Mary James, and Catherine Hitchin, persons not eminent, but sufficiently respectable, so that the petition was submitted for the ballot, without inquiry, on September 5th 1772.⁶¹⁰ On the same day, the Committee heard a petition from Mrs. Trecothick, presumably the wife of London alderman (Lord Mayor of London in 1770) Barlow Trecothick, recommending a child “worthy” of their consideration, the father being dead. The petition was sent to ballot, with no inquiry.⁶¹¹

Governor Jonas Hanway (Vice-President of the LFH from 1772) had sufficient influence to secure the admission of three children at this time. One was the child of Mary Smith, who had to quit her job working for a milliner on account of “an unfortunate connection with a man who under a promise of marriage seduced her.” She could not support her son but was “the daughter of people of credit and character.” At the bottom of her petition, Hanway wrote, “This story I have the utmost reason to believe is true.”⁶¹² While the protocol of December 1766 had dictated that children could not be admitted based solely on a Governor’s request, the applicants recommended by Hanway were sent to ballot without inquiry. These exceptional instances, with petitioners not subjected to the scrutiny faced by petitioners with less influential recommenders, demonstrate only partial adherence to the established rules.

The inconsistency of the procedures and outcomes described here indicates that the age of “caprice” – as said of admissions ten years earlier – was far from over. The leaders’ decision-making may have been swayed by subjective biases or arbitrary criteria, including the perceived credibility of references from certain individuals or sympathy evoked by a petitioner’s desperate plea, underscoring the case-by-case nature of the admission process during this period. This question will be revisited, however, when the LFH moved towards more rigid criteria and accepted cases became increasingly homogeneous. As success criteria became more defined, the public gained a clearer understanding of what the Governors sought, and shaped their behaviour accordingly. The next chapter will explore this phenomenon in greater detail.

⁶¹⁰ Ibid., Louisa Gamball, 5 September 1772.

⁶¹¹ Ibid., Trecothick, 5 September 1772.

⁶¹² Petitions: Admitted to ballot, admitted, A/FH/A/08/001/001/002, Mary Smith, 18 December 1771.

The final three observations gleaned from this sample feature decisions that would be unfeasible in subsequent centuries. Firstly, a male infant who would become Foundling number 16678 was left in the avenue of the House of Commons. He was admitted simply on recommendation from the Speaker and was taken in on April 11th 1771.⁶¹³ In the nineteenth century, all children abandoned in the streets – genuine foundlings – or left at the door of the Hospital were brought to the parish and never admitted to the Hospital. This stark contrast might be said to highlight evolving attitudes towards responsibility and care for true foundlings; it certainly reflects a different idea of procedural propriety.

Secondly, mothers were sometimes either too ill to attend the Committee or had died before being called to it. Mary Applequest was a servant seduced under false promises of marriage, and her employer testified to her honesty and distress. Applequest could not attend the Committee due to a cold acquired at the Lying-In Hospital, but her petition was sent to ballot and someone must have participated in the ballot on her behalf, as her five-week-old son was assigned LFH number 16770 on the petition.⁶¹⁴ Similarly, Elizabeth Sadler, who gave birth to a child under difficult circumstances on September 19th 1772, had her application accepted despite being too ill to attend the Committee.⁶¹⁵ The same year, Elizabeth Cooper, a 23-year-old servant, had a child by a waterman on November 18 at Bankside in the parish of St George Southwark “where she now lays very ill” and was unable to attend the Committee. Cooper also had good character references and was admitted to ballot in absentia.⁶¹⁶ These cases illustrate the Governors’ compassion and flexibility towards mothers unable to participate due to illness or incapacity. The forthcoming chapter will trace the implementation of the “calculus of respectability,” a criterion necessitating that mothers be alive and able to present their circumstances in a particular light. This requirement effectively rendered the admittance process inaccessible to orphaned children, a notable shift in admission policy.

Lastly, some applicants were successful despite lack of support from those they claimed would recommend their case, something that would likely cause immediate rejection in the nineteenth century. For instance, in 1773, Jane Forder, a 23-year-old servant from Essex,

⁶¹³ Ibid., 11 April 1771.

⁶¹⁴ Petitions: Admitted to ballot, rejected, A/FH/A/08/001/001/003, Mary Applequest, 25 November 1772.

⁶¹⁵ Ibid., Elizabeth Sadler, n.d..

⁶¹⁶ Ibid., Elizabeth Cooper, January 1773.

recounted being seduced by John Withers, a boatman, who promised marriage but abandoned her upon learning of her pregnancy. Jane sought refuge at the Westminster New Lying-In Hospital, where she gave birth on August 6. After discharge, she secured employment with William Cook, “who know not of her having been with child if he did she fears woud turn her away & she shd then be deprived of bread.” She had endeavoured to maintain the child but could get no assistance from the father “without losing her character as the Mother of the Child.” The father then threatened to expose her ‘shame’ if she continued contact with him. To bolster her petition, Jane provided evidence from her brother, John Forder, and Mr. and Mrs. Chapman, but Mr. Chapman claimed ignorance of her situation. Regardless, Forder’s petition was admitted to the ballot on October 30.⁶¹⁷ All of the abovementioned narratives underscore the harsh realities of eighteenth-century society, where many women faced destitution, shame, and incessant struggle to provide for their children amidst societal and economic challenges.

* * * * *

George King, the Trafalgar hero discussed in Chapter 1, and his enduring friend, Henry Rivington, were two children admitted “by ballot” in the 1780s.⁶¹⁸ King’s mother, Mary Miller, entrusted the LFH with her son on November 10th 1787.⁶¹⁹ Her petition is interesting for what it *lacked*.

⁶¹⁷ Petitions: Admitted to ballot, rejected, A/FH/A/08/001/001/004, Jane Forder, October 1773.

⁶¹⁸ Berry, *Orphans of Empire*, op. cit., 103-104. Berry has them admitted by ballot, but neither the General Register nor the General Committee minutes support the idea that a ballot occurred at this time.

⁶¹⁹ Foundling Museum – “Fighting Talk: One Man’s Journey from Abandonment to Trafalgar” by Laura Porter (2021) has the picture of King’s mother’s petition. Petitions: Admitted to ballot, mainly admitted, A/FH/A/08/001/001/017, Mary Miller, 10 November 1787.

To the Hon^{able} Gentlemen Governors of the Foundling
Hospital
The Petitioner of Mary Miller is humbly presented
Which sheweth that your Petitioner is a very Great Object
having had the misfortune of having a Child with a young
man who has Quitted her and Child leaving them in the most
Extreme misery and not knowing where he is gone so as she has
no Friend nor any way of maintaining herself nor Child
She humbly intreats Gentlemen that you would be graciously
pleased to grant her the privilege of drawing for the benefit
of Your Charitable Hospital which with ^{the} Charity of the
greatest Merit being conferred upon an Object in the greatest
need of Charity &c. who remains with all possible gratitude
Gentlemen Your most Grateful Petitioner
Mary Miller

Petition of Mary Miller, 1787

The petition, written in Miller's own hand, conspicuously omits crucial information required on petitions in the next century. Miller's appeal spans a mere eleven lines and describes how the father's departure left her and their child in "the most extreme misery" with no "way of maintaining herself nor Child," but it does not detail the duration of Miller's acquaintance with the father, the circumstances of their initial meeting, and the frequency of their encounters, or instances of sexual intercourse. There was still little interest in the mother's reputation, moral character, or the circumstances leading to her predicament. The 1790s, the next period for which admissions were comprehensively examined, would see significant change in the Hospital's procedures and the beginning of a different attitude to the mothers who needed its assistance.

Fall and Rise

The 1780s saw the London Foundling Hospital in financial difficulties and, it might be said, in existential crisis. Its finances led the LFH to apply firm restrictions on admissions. In 1787, the Governors decided to limit the annual intake to ten because, as the Committee observed in April 1788, spending had outstripped income every year since 1771, leaving the charity “at least £11000 Poorer than it was in the year 1771.”⁶²⁰ It was considered better “that a smaller number of Orphans [sic] should be kept well, than that a larger Number should be kept otherwise.”⁶²¹ Between 1787 and 1791, the number admitted ranged between four and eleven children annually.⁶²² Such figures underscore the magnitude of the challenge confronted and invoke profound questions about the Hospital’s survival: another few years of such conditions might have led to its closure, fading it from memory, and it might have been the London Orphan Asylum, instead, that would be hailed as the “ornament of the metropolis.” Fortunately, a pivotal shift in finances was on the horizon.

Even with very limited admissions, the Hospital’s doors were open to some who would not have succeeded in a more rigorous and demanding system. Many children were accepted without inquiry into the mothers’ statements. By this point, the administration made a habit of writing “for Enquiry” on petitions and the absence of “for Enquiry” meant there was probably not one, although we cannot be sure that this was always so. Many petitions were approved without any sign of an inquiry, especially when a Governor recommended acceptance. In April 1788, Governor and soon-to-be Treasurer Stephen White asked for the admission “of a Distressed Child of about Six Weeks old” who was accepted with no further inquiries.⁶²³ Later that year, a distressed widow with three children, the eldest not yet five and the youngest only two months old, submitted a petition. The recommendation for her case came from Hugh Burgess, Esq., although he was not present at the Committee meeting that day. The resolution was to “receive the infant child,” likely indicating the reception of the youngest child, again

⁶²⁰ Minutes of the General Committee, A/FH/K/02/018, 17 October 1787. Ibid., A/FH/K/02/019, 16 April 1788.

⁶²¹ McClure, *Coram’s Children*, 189, citing the Report of the Committee appointed on 12 May 1790.

⁶²² General Register, A/FH/A/09/002/005, 1787-1793.

⁶²³ Minutes of the General Committee, A/FH/K/02/019, 2 April 1788. Revd Dr Stephen White (Treasurer 1791-95) was the son of Taylor White (Treasurer 1745-72).

with no inquiries made.⁶²⁴ In May 1793, when Elizabeth Pope applied, another Committee member intervened decisively: “Mr Watson having acquainted the Committee that He knew the Mother & Child to be Objects of Compassion. Ordered, That the Child be received.”⁶²⁵ Other children were admitted with *neither* recommendation of a Governor (or other eminent person) *nor* an inquiry.

A more restrictive attitude was evident in December 1790 when, after discussion of their financial situation, the Governors resolved:

That the greatest care be taken in the admission of Children that they are the proper Objects of the Charity, viz. Foundlings or exposed & deserted Children who there is reason to think would not be taken care of & supported unless it was for the humane interposition of this Charity.⁶²⁶

While the continuing commitment to support children who would otherwise face extreme hardship is noteworthy, the admonition to take “the greatest care” to admit (only) “proper Objects,” children without alternative options, is striking. However, there was still no discussion about the mothers’ respectability; the mechanism by which numerous applications would later be rejected was *not* resorted to in the 1790s, despite the financial pressures.

As both the minutes and the register show, no child entered the LFH between August 3rd 1791 and January 7th 1792.⁶²⁷ Perhaps because the Hospital had taken in so few children over the previous five years, they experienced a considerable decrease in the number of petitions received, compelling them to proactively advertise their decision to admit an additional 10 Foundlings in January of 1792.⁶²⁸ In the event, they took nine children, who ranged in age from one month to nine months.⁶²⁹ Although no longer seeking new contributions from the parishes,

⁶²⁴ Ibid., 17 December 1788.

⁶²⁵ Minutes of the General Committee, A/FH/K/02/020, 29 May 1793.

⁶²⁶ Minutes of the General Court, A/FH/K/01/004, 9 December 1790.

⁶²⁷ General Register, A/FH/A/09/002/005, August 1791 – January 1792.

⁶²⁸ Minutes of the General Committee, A/FH/K/02/020, 30 November 1791: the Governors originally decided to take in children on the first Wednesday in January, but at the meeting on 7 December 1791 they changed the next entry date to Saturday 7 January 1792.

⁶²⁹ General Register, A/FH/A/09/002/005, 7 January 1792.

admissions slowly began picking up again in 1792, when the Hospital took in a total of 25 children for the year.⁶³⁰ Petitions from widows, third parties (allies of mothers), and even a father asking for two of his children to be admitted were all accepted that year.⁶³¹ A couple of petitions came in for children whose mothers had passed away. For instance, on March 21st 1792 the Committee read a petition “on behalf of the Twin Orphan Children (One Month old) of Margaret Cartwright who died an hour after they were born, setting forth their destitute & distressed situation,” and sent it to ballot.⁶³²

There are some indications of a changing climate. Recourse to inquiry became increasingly typical. For example, Jane Harvason’s petition, “representing her distressed case with an Infant One Month old & praying for its reception into this Hospital,” prompted the decision: “Secretary do enquire concerning the circumstances of Jane Harvason’s Petition & report to the next General Committee.”⁶³³ The meaning of “circumstances” discussed above, the lack of interest in a mother’s sexual conduct, had shown no sign of changing in the 1780s, when the investigator’s very brief reports said little more than “a good character; in great distress.” In the mid-1790s, although there is an inkling of the trajectory that would be called the “calculus of respectability” when Schoolmaster Atchison wrote much more detailed reports, his remarks evinced no discernible interest in the reputation of mothers.

There was a hint of change when May 1792 brought the first instance of the *mother* being referred to as a “proper Object of this Charity,” signifying a departure from the earlier formula when the “object of charity” was the *baby* itself.⁶³⁴ This might have meant a greater interest in the mother, but, paradoxically, the discussion indicated no inquiry or recommender: future-Treasurer Thomas Bernard was simply “well satisfied the Petitioner was a proper Object of this Charity.”⁶³⁵ It appears that there was an amalgam of new and traditional admission practices; on

⁶³⁰ Ibid., 7 January – 18 December 1792.

⁶³¹ Petitions: Admitted to ballot, admitted and rejected, A/FH/A/08/001/001/018, John Batterbee’s petition for two children. Minutes of the General Committee, A/FH/K/02/020, 5 December 1792, “Admitted to Ballot.”

⁶³² Ibid., 21 March 1792.

⁶³³ Petitions: Admitted to ballot, admitted and rejected, A/FH/A/08/001/001/018, Jane Garvason. Minutes of the General Committee, A/FH/K/02/020, 21 March 1792.

⁶³⁴ Ibid., 23 May 1792.

⁶³⁵ Ibid..

balance, however, the basic pattern of the petitions demonstrated how little conditions and attitudes had changed in 30 years.⁶³⁶

In the first half of the 1790s, when applications were less numerous, there was little need to resort to a ballot to reduce the number of entries. From May to December 1792, only one instance of a ballot was recorded in the minutes. Following a comprehensive examination of all the Committee minutes and some petitions from the 1790s, the latest instance of a child “Admitted to Ballot” that I could identify was noted on a petition from November 20th 1793, meaning the last ballot drawn for entry into the Hospital must have occurred in late 1793⁶³⁷ – even though surviving petitions at the LMA are titled “Petitions: Admitted to Ballot” from 1771 until 1800. The end of balloting had more than numerical significance, for it meant that men, not chance, would decide and inevitably “placed further weight on the mother’s character”⁶³⁸ – a step towards the assessment of respectability seen in the nineteenth century.

The recovery of the institution was now clearly under way. Numbers entering the Hospital grew again in 1793 before soaring even higher from 1794: on February 5th 1794, the Committee resolved, “That 120 Children be admitted into the Hospital in the Course of the present year 1794.”⁶³⁹ They were to include the children of soldiers killed in the war against Revolutionary France: “Applications [to] be immediately received for the Admission of poor Children of Soldiers & Seamen into this Hospital whose Age does not exceed five years.” That numbers would be “Augmented from time to time in proportion to the Increase of the Funds of this Corporation” reflects the projected revenues from developing Hospital land. While the initial rents from new housing started to trickle in as early as 1793, this marked only the beginning, heralding the revival of the Hospital’s financial prospects.⁶⁴⁰

⁶³⁶ Greater certainty will be achievable when the digitization project is complete and the petitions from these years are made available to researchers again.

⁶³⁷ Petitions: Admitted to ballot, admitted and rejected, A/FH/A/08/001/001/018, Mary Welford, 4 November 1793, “Admitted to Ballot” on 20 November 1793. This was “The Humble Petition of Mary Welford,” but it was written by the curate of Hemel Hempstead.

⁶³⁸ Sheetz-Nguyen, *Victorian Women*, 58.

⁶³⁹ Minutes of the General Committee, A/FH/K/02/020, 5 February 1794.

⁶⁴⁰ *Ibid.* On the building programme, see Nichols and Wray, *The History of the Foundling Hospital*, 280-83.

Seeds of Respectability: The Genesis of Melodramatic Tropes

Petitioning, well established by the 1790s, developed attributes that would soon become increasingly familiar. Cases from the 1770s to the 1790s feature examples that would later be considered unacceptable, but other eighteenth-century petitions exhibit parallels with the discourse and approaches seen in the nineteenth century. This raises the question of whether the rigorous procedures that would prevail in Brownlow's era, were influenced, to some extent, by the petitioners themselves in the content and manner in which they presented their petitions, mainly through the inclusion of promised marriage, demonstrations of contrition, and the declared intention to return to employment if the London Foundling Hospital took in the child, all which bolstered their petitions.

Twenty-two mothers in the 1770 - 1773 sample clearly declared that they had sex with the father because he had promised marriage (about 16%).⁶⁴¹ Mary Davies presented a petition claiming that her seduction under the promise of marriage resulted in the birth of a son. Davies expressed remorse, claiming that the suffering she had already endured would prevent any further transgressions. So, while a character reference, which she failed to furnish, would become paramount next century, her unprompted penitential confession appealed to the authorities, leading to her admission to ballot.⁶⁴²

Like Davies, many other eighteenth-century mother-petitioners emphasized their innocence and the betrayal they had experienced at the hands of men who had promised marriage or commitment but ultimately abandoned them. They portrayed themselves as virtuous women who had fallen victim to the seductive wiles of unscrupulous men, thus framing their circumstances in a way that aligned with prevailing societal expectations of female purity and victimhood. In her 1800 petition, Elizabeth Donovan mentioned her betrothal twice, underscoring its significance. The Inquirer seemed to express sympathy with her anxiety to marry – “she was enticed with the hope of having a Husband with Money” – and the disappointing outcome when the man turned out to be a wastrel who drank himself to death.

⁶⁴¹ Petitions: Admitted to ballot, A/FH/A/08/001/001/002-004, 1770-73, Mary Griffiths, Ann Bush, Mary Smith, Mary Clifton, Mary Hewitt, Mary Smith, Rebecca Wilson, Judith Hart, Sarah Roper, Susanna Scofield, Elizabeth Charles, Mary Applequest, Elizabeth Brooks, a different Elizabeth Brooks, Elizabeth Sugars, Martha Crofts, Sarah Potter, Susanna Ridley, Mary Hickey, Mary Davies, and Jane Forder.

⁶⁴² Petitions: Admitted to ballot, A/FH/A/08/001/001/003, Mary Davies, 18 August 1773.

Similarly, Sarah Price's petition from the same year employed language that would later become pivotal in petitioners' narratives. She was "seduced and most cruelly treated by him" and, after the baby came, the father had "totally forsaken her altho he had repeatedly in the most solemn manner promised to marry her she has not received the smallest assistance what ever from him either for herself or Child."⁶⁴³ Both Donovan and Price had their children accepted. The following chapter will reveal how significant the promise of marriage would be in the 1800s.

Many of the eighteenth-century petitions foreshadowed recurring themes found in the nineteenth century. Eleven petitions mentioned the word "shame" and others allude to being "led astray" or "disgraced." For example, Mary Smith, a servant in a gentleman's family, was seduced by a fellow servant who absconded. "She was oblig'd to leave her Place, too, which she did before her misfortune was known to any of her friends. She has lien [sic] in at her own expense very privately in which she had spent all the money she had saved by great Industry in Service." Unless the LFH took her child, "she must not only be expos'd to Shame amongst her friends, but must be left in the utmost want and charity" having no means to support herself unless she can surrender her baby to the Hospital.⁶⁴⁴ Likewise, Ann Norman, a sixteen-year-old girl who applied in 1773, reflected on her predicament in more general terms. She articulated herself as "one among the number of her unfortunate sex who now shamefully undergoes the miseries brought upon her by too unwary a resignation of her virtue to the unlawful embraces of a man, whose repeated assurances of honour and integrity she had not the least Reason to suspect till the dreadful effects of such an intercourse grew conspicuous." This statement, penned in a very fine script, appears to be authored by someone else. Norman was born in Suffolk to reputable parents, where she resided until her recent misfortune. Several years before, she tragically lost her father, who she believed would have "preserved her free from the disgrace and shame now brought upon her." To evade the stigma, she accepted a friend's invitation to London, where she gave birth. Norman expressed a desire to return to her neighbourhood with her reputation intact, hoping that the LFH would facilitate this. She contemplated the treachery she experienced, stating that "the consciousness of this evil

⁶⁴³ Petitions: Admitted to ballot, admitted, A/FH/A/08/001/001/025, Elizabeth Donovan, 26 February 1800; Sarah Price, nd., 1800. Despite the catalogue, petitions were no longer submitted to ballot.

⁶⁴⁴ Petitions: Admitted to ballot, admitted, A/FH/A/08/001/001/002, Mary Smith, 31 October 1770.

transaction, and the perpetual remembrance of it within her own breast will be so far an atonement for the crime as to dispense with the repetition of it.” Her petition was admitted to ballot, resulting in the acceptance of her five-week-old daughter on August 4th 1773.⁶⁴⁵ In a similar fashion, a few decades later, in October 1800, Alexander Thompson petitioned on behalf of Elizabeth MacKinnon, who was going by the name of Mary Brooks “not to expose her Family”; she was married to a man called Hobbs, who deserted her, and she conceived a child with John Fountain; the Hospital inquired into the case and then took the child.⁶⁴⁶

To invoke the trope of the seduced woman, which would dominate successful petitions under a “calculus of respectability” decades later, allowed petitioners to portray themselves as vulnerable victims who had been led astray by deceitful men, resulting in their moral downfall. The concept of seduction, deeply intertwined with notions of femininity, virtue, and morality, appears occasionally in the sample. The next chapter will demonstrate the ways in which single mothers tapped into this trope to navigate their precarious social position. By presenting themselves as victims of seduction rather than as women who had willingly engaged in sexual relationships outside marriage, single mothers sought to garner sympathy and support from the charity. This trope provided a narrative framework by which single mothers could assert their moral innocence and appeal for assistance in a society that, had they been brazen, would have marginalized and condemned them for their perceived transgressions against deep-rooted moral values.

Throughout both centuries, Hospital leaders took great care to keep the mother’s situation secret. Sarah “Aviary” (Avery), seduced by a young man who disappeared, was the mother of a “helpless infant.” She sought “an asylum for her child [to] avoid the disgrace of a misfortune like hers.” Mrs. Gibbes, a former employer, attested to Avery’s fidelity and upright conduct, stating she would take the child back again later if the LFH accepted it. The case was read on May 29th 1771, and the schoolmaster was advised to inquire “with proper caution so as to give no suspicion of the girl’s misfortune.”⁶⁴⁷ As the century progressed, the Governors became increasingly concerned with whether mothers like Avery would be able to resume her

⁶⁴⁵ Petitions: Admitted to ballot, rejected, A/FH/A/08/001/001/004, Ann Norman, 21 July 1773. Norman’s petition was likely misfiled since it is in the ‘rejected’ file.

⁶⁴⁶ Petitions: Admitted to ballot, A/FH/A/08/001/002/009, Alexander Thompson, 21 October 1800.

⁶⁴⁷ Petitions: Admitted to ballot, admitted, A/FH/A/08/001/001/002, Sarah Avery, 29 May 1771.

employment if the Hospital took responsibility for raising her child. This consideration would become imperative for those contemplating relinquishing their child to the Hospital in the following century.

Caprice

The archival documents in the last decade of the eighteenth century continued to reflect a confluence of both new and traditional elements. There is in petitions from 1794 a leniency inconceivable to the later Victorian administrators. For instance, a petition dated May 28th 1794 reports:

That Ann Williams the Wife of William Williams a Taylor [sic], lived as a Servant with Mrs. Hill of Titchfield Street, the Widow of Captain Hill deceased.
That the said Ann Williams was brought to Bed of a female Child and dyed [sic] about a Month after at her lodgings and that the Child is about three Months Old.
That the said William Williams left his Wife some time ago, but his Wife could never discover where he went, but supposed he was prest and gone to Sea. On Ann Williams's Death, the Child was brought to Mrs. Hill's house, where it now is.
Mrs. Hill could never discover where or at what Parish the Child was born or what Parents the Child has, if any... Mrs. Hill hopes the Governors will take the Child under their protection, as a proper Object, and a deserted Child.⁶⁴⁸

This was the entire contents of the petition, save the title page, which states it was "Read in the General Committee" and that "Mrs. Hill certifies the Facts in the Petition."⁶⁴⁹ Notably, the authorities accepted Mrs. Hill's statement without further inquiry. Although we cannot know for certain, Williams' having left his wife "some time ago" means Ann may well have conceived a child with a man other than her husband. The absence of an inquiry into that

⁶⁴⁸ Petitions: Admitted to ballot, admitted and rejected, A/FH/A/08/001/001/019, Mrs. Hill (Ann Williams), 28 May 1794.

⁶⁴⁹ Ibid..

possibility indicates that at this stage the inquiries were more perfunctory than investigative. Despite the unconventional circumstances, they admitted the child. On the other hand, another application from 1794 reveals that the administration was starting to care about “good character.” Petitioner Amy Webb was accused by her employer Mrs. Rowe of being “saucy in her answers.” Rowe believed that Webb was married and had two previous children. Webb’s cousin persuaded a housemate, a Mr. Hume, to endorse the petition, but the inquiry found that Hume “knows nothing” of the petitioner, and like in later decades, this would result in immediate rejection.⁶⁵⁰

At the close of the century, children were still getting in without inquiries. For example, after a Governor of Magdalen Hospital “recommended” the daughter of Martha Cook, “promised marriage” by the father, who then absconded, she was admitted without investigation.⁶⁵¹ Married fathers’ petitions generally did not seem to need an inquiry. In March 1796, the Committee approved a petition from John Christopher, a “Widower in distress Circumstances.” He had four children and asked to have the youngest admitted. The Governors “Ordered, That the Child be admitted on Saturday 2nd of next Month.”⁶⁵² The administration did not insist on the child being the petitioner’s first, a criterion indispensable in the next century. On the other hand, the mid-1790s also saw discernible similarities between the petitioners of this period and those who would emerge in the nineteenth century. For instance, Frances Layton wrote that if the Hospital took her child, she “promises never to depart from the paths of virtue,” a sentiment echoed in numerous subsequent petitions.⁶⁵³ Yet, there were a variety of circumstances outlined in the petitions at this time that would not be evident in those of the next century. For instance, Patience Turner, née Patience Lorn, had four children within six years, but her husband and three children had died. She then had an arrow “shot into her eye by a Child at play,” rendering her blind in one eye and causing inflammation in the other, making embroidery work impossible. In that “distressed condition” she “humbly implores such

⁶⁵⁰ Ibid., Amy Webb, 23 July 1794.

⁶⁵¹ Minutes of the General Committee, A/FH/K/02/021, 2 March 1796.

⁶⁵² Ibid., 16 March 1796.

⁶⁵³ General Register, A/FH/A/09/002/005, 2 August 1794, Robert Layton, no. 18204.

assistance” – meaning acceptance of her remaining child – as the Governors in their “goodness shall think fit to afford.”⁶⁵⁴

There were instances where exceptions were made to the quantitative admission rules. For instance, the Governors, moved by compassion, defied the Bills of Mortality rule after receiving a letter on November 12th 1794 from Henry Grimston of Yorkshire. The letter asked whether a legitimate child born to parents destined for Botany Bay could be admitted. Jane Pick, the mother, was sentenced to fourteen years for theft, while Charles Pick, the father, faced charges of grand larceny. Their two daughters, one aged one and the other an infant, were set to be left behind. Although the elder daughter qualified for the Philanthropic Society, the younger one was deemed too young. Due to the parents’ impending transportation, the youngest child was seen as a “Deserted Young Child” and immediately admitted to the charity (likely without her parents’ say).⁶⁵⁵ Another idiosyncratic event occurred in June 1796 when the Committee decided that “six children should be admitted at the request of the War Office on payment at the rate of £50/child,” regardless of age or medical condition.⁶⁵⁶ However, in February 1800, the mother of Foundling Elizabeth Parker would cause the end of receiving money with children. Parker’s mother, who had paid £100 to have her daughter admitted, used “subterfuge” to retrieve her child from the Hospital.⁶⁵⁷ This incident raised doubts regarding the Governors’ precise legal guardianship status and their authority to retain the £100 children. As a result, possibly emboldened by healthy finances, in January 1801 they resolved to stop accepting these monetary donations.⁶⁵⁸ The admission of children accompanied by financial contributions had not entailed thorough assessment of the merits of the applicants. Consequently, the decision in 1801 marked a pivotal moment, shifting towards a more uniform admissions process and giving the Committee full decision-making power. In a small way, it repeated the achievement of a

⁶⁵⁴ Petitions: Admitted to ballot, admitted and rejected, A/FH/A/08/001/001/019, Patience Turner, 13 January 1794.

⁶⁵⁵ Minutes of the General Committee, A/FH/K/02/020, 12 November 1794.

⁶⁵⁶ Nichols and Wray, *The History of the Foundling Hospital*, 91. The General Register shows that seven children, ages ranging from 5 weeks to 12 months, were admitted on 4 June 1796. General Register, A/FH/A/09/002/005, 4 June 1796.

⁶⁵⁷ Nichols and Wray, *The History of the Foundling Hospital*, 92.

⁶⁵⁸ *Ibid.*, 91. Brownlow was clear that the financial factor was decisive: “immediately after the funds of the charity had assumed a healthier state, they abolished altogether this more than questionable practice.” Brownlow, *History and Design*, 23.

few years earlier when parish children, selected by the parish officials, of course, were no longer received.

The Governors also demonstrated a willingness to bypass the age restrictions when they deemed it prudent. For example, on May 11th 1796, the General Committee reported to the General Court:

...that an Application has been made to them on behalf of the youngest of Two Female Children of the Name of Allemande whose Father is a Foreigner who has deserted them and left the Kingdom some time ago and whose Mother lately died of a Broken Heart, which two Children being entirely unprotected by any Relative or Friend and not having any Provision for their Support or Parish Settlement in this Country. The Committee taking into Consideration the peculiarly distressed and destitute Condition of these Children have ordered the youngest to be admitted into this Hospital and it being fourteen Months old have ordered the Case to be reported to the General Court pursuant to the Resolution of 30th December 1761.⁶⁵⁹

Because the child exceeded the 12-month limit, the Governors were required to report the decision to the General Court. This occurred repeatedly; a similar example followed on March 27th 1799, when another 14-month-old was admitted, and on August 7 a four-year-old “orphan child” was taken in.⁶⁶⁰ Such cases suggest that poignant circumstances elicited sympathy, prompting the Governors to override the age limit, a decision rarely, if ever, made in the nineteenth century, when applications involving overaged children would typically be dismissed outright. During this period, however, Governors were willing to deviate from admission rules when confronted with particularly distressing cases. Yet, the decision to notify the General Court about the case underscores the institution’s commitment to procedural protocols, despite the numerous exceptions, striking a delicate balance between compassion and accountability. Perhaps that is why other children were less lucky, like one rejected on September 18th 1799 “it being above the usual Age.”⁶⁶¹ The inherent unpredictability of the

⁶⁵⁹ Minutes of the General Court, A/FH/K/01/004, 4, 11 May 1796.

⁶⁶⁰ Minutes of the General Committee, A/FH/K/02/023, 27 March, 7 August 1799.

⁶⁶¹ *Ibid.*, 18 September 1799.

entire eighteenth-century admission process renders Ramsland's notion of a "manicured admission policy" in 1801 decidedly fanciful.

Mary Carne's petition, dated August 28th 1798, though written in the third person, provides insight into her distinct circumstances and reveals a disquieting observation: to our modern perspective, many of the petitioners who made 'mistakes' were essentially children themselves. Moreover, it is a reminder that they inhabited a society where class divisions, the institution of slavery, and imperial dominance prevailed. Eighteen-year-old Carne had a connection to a "Negro boy of fifteen years of age," described as a "slave." She recounts her upbringing after her father's death in Hereford, followed by her education at a school in Surrey, intended to prepare her for domestic service. She became involved with the fifteen-year-old servant of the school's owner, resulting in the birth of a son. Carne expresses her dire financial situation and emphasizes the father's incapacity to provide as he is a slave owned by the late governess' husband. This being Carne's first transgression, she pleads for the LFH to take in her child, as it would enable her to enter service. A note by a John Keystall of Temple Bar confirms the petition's veracity and offers an earnest recommendation. Carne's child was admitted on October 6th 1798.⁶⁶²

In the 1790s, inconsistencies persisted in the treatment of petitions as there was as yet no standard procedure. The examples presented here illustrate the uneven pattern in terms of how slow attitudes and rules had been to grow regular and rigid as practice was still in transition. The historical trajectory, marked by a growing expectation that mothers take a more direct role, speaks to the complex interaction of historical forces shaping assistance-seeking. The ensuing chapter will lay out this trajectory, which hardened admission criteria around the mother's respectability.

⁶⁶² Petitions: Admitted to ballot, A/FH/A/08/001/002/008, Mary Carne, 28 August 1798 (but found in a 1793 file).

Shifting Perspectives: Reframing the “Objects of Charity” at the LFH

Although successful applications in the 1700s varied greatly, the London Foundling Hospital almost always stressed the welfare of the *child*, striving to address the needs of the vulnerable children who faced poverty and fragile familial support. The next generation’s administration would shift from prioritizing the needs of the child. Instead, their focus would move towards assisting children whose *mothers* were redeemable and capable of returning to the workforce. The transition from children’s welfare to the prospects of their mothers underlines changing perceptions of the charity’s obligations and the role – or lack of one – of charitable assistance in supporting families. Yet the shift of the “object of charity” from the child to the mother becomes discernible only from 1795 onwards. The second purpose – rehabilitating the mother – surfaces in a General Committee minute in November of that year. The Governors endorsed a preference for petitions showcasing the mother’s opportunity to re-enter service:

Ordered

That in all future Enquiry into the Merits of any Petition, for the admission of Children into this Hospital, that it be always enquired whether in a Recommendation to this Charity from a Mistress of a Servant, whether if the Child is received in consequence of such Recommendation, the Mistress or any other proper person will take the Petitioner into Service again.⁶⁶³

This pivotal change reappears with an articulation of the charity’s dual objectives two years later, when the distinct notion of the charity having *two objects*, yielding a *double benefit*, was made explicit in the General Committee on February 22nd 1797.⁶⁶⁴ The session began with the Treasurer presenting a letter regarding the late Clarke Winchester’s will; the executor requested

⁶⁶³ Minutes of the General Committee, A/FH/K/02/020, 11 November 1795. Also in McClure, *Coram’s Children*, 143.

⁶⁶⁴ This might be contrasted with a committee resolution of 1790 which spoke of “the main Object of this Charity,” the care of children. *Ibid.*, 189.

“a Statement of the Merits of the Charity” and Treasurer Bernard wrote the following statement, which was also “examined by the Secretary”:

The Foundling Hospital has Two Objects[,] to preserve and educate Infants otherwise exposed to perish, and to restore the mothers to a Course of Industry and Virtue so that almost every Act of the Charity is attended with a double Benefit, the preservation of the Child and of the Parent. In this respect the Governors have great reason to be satisfied for in Course [sic] of the preceding year (to say nothing of 65 Children received during that year of whom 58 are now living and in promising health) **not less than 50 unfortunate Women have been preserved from Vice and Despair.**

The inconvenience to be apprehended from such an Asylum is the encouragement that may be given in some Instances to licentious Habits of Life by the ease of providing for the Consequences of it. But no such Consequences could ever ensue if the sufferings of these penitent and unhappy Women were fully known to those who might otherwise have been inclined to follow their example. And it is deserving of observation that no Instance has come to the Knowledge of the Committee of any Woman so relieved who has not been thereby saved from what she would in all probability have been involved in[,] a Course of Vice and Prostitution.

The Detail of their wretched and deserted Situations sometimes too well confirmed by the almost starved condition in which some of the Infants are brought into the Hospital is one (I might say the only) painful Circumstance to those who attend as the acting administrators of the Charity, a detail of which if it could be fully given to the world without Injury to the unhappy Subjects of it would **serve to deter from Vice those who might otherwise have been the victims of Seduction.**⁶⁶⁵

This statement was clearly well received because the Committee ordered that a copy be sent to Winchester’s executors and decided “that Copies be printed for the Use of the Committee.”

The oft-quoted 1797 “duality of purpose” was declared over five decades after the hospital’s founding, underscoring the necessity for scholars to treat the eighteenth and nineteenth centuries as dissimilar entities. In the new century, the idea of “Two Objects” would be attributed to Thomas Coram. John Brownlow would claim that such a “two-fold benefit”

⁶⁶⁵ Minutes of the General Committee, A/FH/K/02/021, 22 February 1797. Emphasis added.

was part of the Hospital's "original design ... under the regulations contemplated by the Founder."⁶⁶⁶ In fact, concerns about mothers never featured in Coram's philanthropic scheme. Brownlow is taking the nineteenth-century understanding of the Hospital's mission and incorrectly reading it into Coram's motivation. Brownlow's hindsight bias has distorted perceptions of the Hospital in the eighteenth century.⁶⁶⁷

"Objects of Charity" now included the mothers who could return to respectable employment and be saved from "Vice and Prostitution." Saving the mothers would incur a sacrifice, however, for the prospect of a return to respectability caused the Hospital to favour those who *could* be restored, mothers who were fundamentally respectable in the first place, before they erred. This perspective imposed a double cost, for it meant exclusion of those who could not demonstrate their innate respectability and, by turning away those mothers, a deliberate decision against assisting some of the most helpless and deserving children. This neglect, it will be argued, marred the story of the LFH in the nineteenth century.⁶⁶⁸

Another decision, on February 5th 1800, denotes a slow and steady climb towards the "calculus of respectability." The Governors resolved that each petitioner was to be "solemnly asked whether she will swear to the Father and that she is the Mother of the Child. And that in case of doubt the Petitioner should be required to produce an Affidavit that she is the Mother."⁶⁶⁹ While the Governors had earlier accepted the mother's word, at least on this issue, and did not demand information about the father, they now bade her to disclose the father's name, and entertained the possibility of "doubt" about her own identity, sometimes requiring her to swear an affidavit. There is a suggestion here of less trust placed in applicants, heralding the more rigorous scrutiny of the future. The reasons for this shift will be further examined in the next chapter.

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⁶⁶⁶ Brownlow, *History and Design*, 16.

⁶⁶⁷ Gillian Pugh subscribes to the idea that Coram would have approved of the "Two Objects" statement. Pugh, *London's Forgotten Children*, 51.

⁶⁶⁸ Ruth McClure's *Coram's Children* covered the eighteenth-century history of the Hospital, but omits any reference to the statement of February 1797.

⁶⁶⁹ Minutes of the General Committee, A/FH/K/02/023, 5 February 1800.

The history of the London Foundling Hospital in the eighteenth century, at least in relation to the admissions system, was marked by continual experimentation, innovation, and change. The initial arrangements, established in 1741-42, lasted for over a decade. The General Reception of 1756-60 was a courageous, if doomed, attempt to extend assistance to all who required it. The reception of over 800 parish children not only responded to the needs of those children but also ensured that the Hospital survived – until the turning-point decision to base the institution’s finances on solid bricks and mortar. The LFH’s eighteenth-century governance exhibited a dynamic approach characterized by *both* continual adjustment and steadfast commitment to performing a useful, life-saving service. On many occasions, in everyday decision-making, notably regarding admissions, the Governors showed flexibility, often helping women and children whose eligibility more fastidious administrators might have questioned.

This finding might cast doubt on the idea that the LFH embodied an institutional paternalism based on bureaucratic procedure and enduring principles. In truth, though differing markedly from the local and often tiny charities of traditional paternalism, the Hospital’s institutional paternalism was always apparent, albeit evolving. By 1800, its purpose, identity, ways of working, and viability were more established and better recognized than ever before. But further change was imminent and, in fact, the great shift from prioritizing assistance for the child to rehabilitating the mother was already under way. Only in the nineteenth century did concrete policies embracing this new idea begin to take shape (see next chapter).

New procedures were developed in the wake of the General Reception, leading gradually to the creation of a mental checklist – one that was altered continually – to conduct admissions. The investigational approach to applications emerged for two distinct reasons. First, public trust had to be restored. The LFH governing body desperately needed funding, as Parliament withdrew, and had to adjust the application method in order to appeal to potential subscribers. Secondly, they had a very limited number of places, initially because of the remaining Parliamentary Children, but also because of financial constraints. Therefore, the Governors needed an admissions system that would be more discriminating in selecting appropriate “objects.”

The petitions from the 1700s vividly portray lives marked by deep-seated poverty and insecurity, a stark contrast to the petitions from the Victorian era, which do not recount similar

levels of deprivation and vulnerability. The hardships faced by eighteenth-century petitioners were self-evident, requiring no embellishment to convey their urgency. Children being surrendered to the charity in this era stemmed primarily from parental destitution, with concerns about the stigma of illegitimacy of secondary importance. The focus was on demonstrating the dire circumstances of the mother and the miserable prospects of the child. Hence Trumbach's and Cruickshank's allusion to the LFH being a repository for prostitutes' babies in the mid-to-late eighteenth century ignores the fact that petitioning, part of the expected process from 1768, ensured as far as possible that friendless, destitute mothers and their children were the beneficiaries. While some petitions did touch upon the shame experienced by the fallen woman or the potential for her to return to work, such considerations were not as prevalent as they would become in the next century, where penitence and the ability to resume employment would become crucial for success.⁶⁷⁰

The 1790s, above all the statement of February 1797, laid the foundation for principles that would be more or less formally established in the nineteenth century. By 1800, the Hospital had been restored to robust good health: it was financially stable, assisting a '3large number of children again, no longer tied to the parishes, and blessed with a slightly less capricious admissions system. It had experienced a revival, akin to a relaunch. But further change lay ahead: despite the significant shift in their conceptual framework, when the leadership introduced an additional purpose alongside the primary and enduring objective of saving infant lives, the mother's reputation had not yet come into sharp focus. The "calculus of respectability" was only beginning to feature in the minds of the Hospital's leaders.

Petitioning, introduced to select the most eligible "objects of charity," supplied the Governors with more precise details about each mother's circumstances, laying the foundation for the admissions system that solidified in the nineteenth century. In the 1830s, it became evident to the Governors that the bastardy clauses in the New Poor Law had significantly compromised the legal status of single mothers and increased the demands on the Hospital. As

⁶⁷⁰ In "Petitions to the London Foundling Hospital, 1768-72," R. B. Outhwaite argues that the petitions submitted to the Hospital primarily emphasized the petitioners' economic distress and immiseration, rather than issues of shame or moral failure. He suggests that these petitions were carefully crafted to highlight the desperate material conditions of the applicants to elicit sympathy. This study's conclusion—that the petitions focus on distress and immiseration rather than shame—aligns with Outhwaite's findings. R. B. Outhwaite, "Petitions to the London Foundling Hospital, 1768-72," *Historical Journal* 47, no. 2 (2004): 423-444.

a result, the dual purpose of the admission process, heralded in 1797 and refined in the early 1800s, culminated in the “calculus of respectability.”⁶⁷¹

⁶⁷¹ Bernd Weisbrod, “How to Become a good foundling in early Victorian London,” *Social History* 10, no. 2 (1985), 198.

Chapter Four

The Quest for the Virtuous and Penitent Mother

The preceding chapter inspected the admission practices at London Foundling Hospital in the eighteenth century, illuminating the diverse spectrum of people who sought assistance from the charity. In contrast, this chapter shifts its focus to the nineteenth century, examining a series of pivotal changes in admissions policy. By scrutinizing these changes, this chapter seeks to delineate the underlying beliefs, expectations, and cultural ethos that shaped the LFH's evolving policies, juxtaposing them with those of the preceding century.

The chapter unfolds in three distinct sections: first, it continues to trace the evolution of the Hospital's admission policy concerning illegitimate children, elucidating how these decisions contributed to the further development of a distinct form of "institutional paternalism" in nineteenth-century LFH operations. Second, it explores the Hospital's shift towards solely supporting 'respectable' women – mothers evaluated and recognized for their capability for moral redemption upon relinquishing their offspring – rather than assisting those in immediate crisis. This trend highlights the development of a much stronger ethos of respectability, eroding the Hospital's commitment to its foundational principles and relegating Thomas Coram's original purposes to the annals of history. Finally, I will illustrate how petitioners adeptly navigated the newly implemented, stringent admission protocols by positioning themselves within the dominant societal discourse and presenting themselves in accordance with the expectations of this generation of Governors. It reveals how these mothers strategically crafted their narratives to conform to the prescribed rules and conventions of Victorian charity. Ultimately, this chapter seeks to strike a balance between the institutional power of the LFH and the agency exercised by the mothers within the constraints of their limited options. But first, it is necessary to look at a historian whose scholarly insights have profoundly influenced the historiography of the LFH during this era. Her conceptualization of the "calculus of respectability" sets a cornerstone for the subsequent analysis presented in this study.

Historian Jessica Sheetz-Nguyen, one of the few academics to publish an entire book derived mainly from the LFH archive, posits the concept of the "calculus of respectability," defined as "acceptable and unacceptable circumstances, situations and standards of behaviour..."

i.e., a method used by the Governors in their decision-making. Sheetz-Nguyen surveys how the Hospital assessed the mother's character and the strategies adopted by mothers seeking admission for their children.⁶⁷² In her analysis of a large sample of nineteenth-century petitions (1842-92), Sheetz-Nguyen observes how mothers strategically positioned themselves within the framework of respectability to increase their children's chances of acceptance into the Hospital. This device involved mothers harmonizing their pleas with the prevailing norms of morality and virtue, emphasizing qualities such as maidenly innocence and personal sacrifice. By foregrounding their virtue, they sought to mitigate the stigma associated with both giving birth outside wedlock and relinquishing their children to institutional care, thereby enhancing their social acceptability and, consequently, their children's prospects for admission. Like this study, Sheetz-Nguyen sees the mothers' efforts as a form of "agency" and is aware of the "constraints" that circumscribed its effectiveness.⁶⁷³

Sheetz-Nguyen also investigates the complexities of the calculus of respectability by examining how mothers from diverse socioeconomic backgrounds navigated this process. For instance, mothers from more privileged backgrounds leveraged their social status and connections to bolster their claims to respectability, while those from marginalized communities employed alternative strategies to negotiate the admission process. These negotiations could include aligning themselves with charitable organizations or emphasizing their adherence to community expectations despite their disadvantaged circumstances. Moreover, Sheetz-Nguyen elucidates well the particular demographics of women whom the Hospital was inclined to support (for instance, mothers working in West End London had better success than their counterparts in East End London).⁶⁷⁴

Overall, Sheetz-Nguyen's analysis highlights how the calculus of respectability operated within the milieu of the Hospital, shedding light on the intricate dynamics of power, identity, and social hierarchy at play. By exploring the strategies employed by mothers, she offers valuable insights into the interactions between individual agency, societal expectations, and institutional practices at the LFH. My objective is to enhance this analysis by detailing the methods by which women could adeptly negotiate the complexities of the system. This work will therefore extend

⁶⁷² Sheetz-Nguyen, *Victorian Women*, op. cit., 75.

⁶⁷³ Ibid., 9-10, 67, 104, 158 n. 115, 165.

⁶⁷⁴ Ibid., 95.

Sheetz-Nguyen's discussion of "constrained agency," adopting a less cautious and conservative approach.⁶⁷⁵ This endeavour surpasses previous historiographical accounts by granting petitioning women a higher degree of agency than has hitherto been acknowledged.

Sheetz-Nguyen's concentration on the mid- to late-nineteenth century naturally excludes significant developments from the preceding century, particularly the 1790s, that heralded the emphasis on respectability. This study traces the trajectory of the calculus of respectability to reveal the underlying principles guiding the institution's leadership, influenced by the social conventions of their period. First, it is crucial give a brief overview of the social context in which these administrative changes took place.

Context

This chapter focuses on an era when many working-class families could expect to live below the poverty line until their children were old enough to earn for themselves and their families.⁶⁷⁶ Bypassing this fate was to some degree a matter of luck, although the right choice of partner was seen as a guarantee against future destitution. Many young women failed to achieve the sort of relationship – early marriage to a solvent and responsible individual – that might secure a viable standard of living.

Men and women, migrating to London in search of employment opportunities, found themselves far removed from their families and customary community support networks. This isolation rendered them more susceptible to the malevolent intentions of strangers. As Tanya Evans writes, "Migrants who moved away from home in search of work left parental and familial constraints behind," effecting the "absence of traditional community constraints... [Women] could enjoy relatively free relations with men of their own class that often led to the conception of bastard children."⁶⁷⁷ This social dislocation challenged Victorian customs of sexuality and unplanned pregnancies proliferated. The years 1790 to 1860 were, as Edward Shorter points out,

⁶⁷⁵ Ibid., 8-10, 67, 104, 158 n. 115, 165.

⁶⁷⁶ John Gillis, "Servants, Sexual Relations and the Risk of Illegitimacy in Nineteenth Century London, 1801-1900," *Feminist Studies* 5, no. 1 (Spring 1979): 154.

⁶⁷⁷ Evans, "'Unfortunate Objects,'" op. cit., 136, 145.

“the peak period of illegitimacy.”⁶⁷⁸ According to the Statistical Society of London, 42,651 illegitimate children were born in England and Wales in 1856 alone.⁶⁷⁹

Shorter posits a direct causal link between the rise in illegitimacy rates and the sexual revolution, attributing changes in sexual behavior to alleged shifts in collective norms and values. He suggests that increased sexual freedom led to a decline in traditional family structures and a rise in illegitimate births across Europe. While industrialization undoubtedly played a significant role in shaping urban environments and economic structures, it was not the sole determinant of evolving partnerships and family structures. Indeed, the demographic shifts highlighted in the 1821 British census, with a noticeable increase in the young population, particularly in urban areas like London, underscore the importance of considering broader demographic trends in understanding social changes. Moreover, the gender imbalance in cities, with more females than males, presented additional challenges to courtship and partnership formation, a phenomenon that has been extensively discussed by scholars such as E.A. Wrigley and Roger Schofield.

Louise Tilly, Joan Scott, and Miriam Cohen’s 1976 article “Women’s Work and European Fertility Patterns” challenges Shorter’s thesis by offering a more refined interpretation of the relationship between women’s work patterns and fertility rates. They argue that economic considerations, particularly women’s participation in the labour force, played a significant role in shaping fertility patterns. Contrary to Shorter’s emphasis on cultural shifts, they emphasize how changes in women’s employment opportunities and income affected their reproductive decisions. In essence, Tilly, Scott, and Cohen dismantle Shorter’s argument by highlighting the multifaceted nature of factors influencing reproductive behaviour and question simplistic narratives about the causes of demographic shifts, paving the way for more scholarly inquiries into the complexities of social change. Particularly relevant to my study, they note the attitude that many rural-origins women brought with them to the city.

Many women took jobs away from home and, detached from their families, they were without social protection and liable to be preyed upon. This problem was compounded by the

⁶⁷⁸ Edward Shorter, “Illegitimacy, Sexual Revolution, and Social Change in Modern Europe,” *The Journal of Interdisciplinary History* 2 no. 2 (Autumn 1971): 246.

⁶⁷⁹ William Acton, “Observations on Illegitimacy in the London Parishes of St. Marylebone, St. Pancras, & St. George’s Southwark During the Year 1857,” *Journal of the Statistical Society* 22 (1859): 491.

fact that, when young women engaged in sexual relationships in cities like London, they were still banking on the continuation of the traditional courtship protocols of the countryside, which included the expectation that a woman could engage in sexual intercourse once she was promised marriage.⁶⁸⁰ However, many male partners were less willing or able to uphold their end of the bargain because they were concentrated in highly transient occupations like unskilled migrant labour, or were apprentices, soldiers, or seamen.⁶⁸¹ Historians Barbara Taylor, Anna Clark, and Gareth Stedman Jones have all noted that the deskilling of London trades in this period meant that craftsmen were averse to marriage since they could not support a family and had to move frequently in search of work.⁶⁸²

The 1834 New Poor Law and its bastardy clause marked a significant shift in policy regarding the support of and responsibility for illegitimate children and represented a pivotal moment in the evolution of social policy in nineteenth-century Britain. It was a departure from previous approaches as it imposed financial responsibility on unwed mothers for the maintenance of their illegitimate offspring until they were sixteen years of age (previously illegitimate children typically acquired settlement from their place of birth, so the parish was responsible, chasing down alleged fathers for support). In *Unfortunate Objects: Lone Mothers in Eighteenth-Century London*, Tanya Evans held that the new system reflected a growing perception that the mothers were “morally responsible” for their condition and “part of the undeserving poor... Women rather than their male seducers were now blamed for the births of bastard babies. The unmarried mother and her child ... were no longer the ‘unfortunate objects’ of charity.”⁶⁸³ The idea that the LFH lost interest in the male seducers will be challenged below, but the judgemental attitude to mothers was certainly much in evidence. As Kate Gibson wrote, the Act terminated “illegitimate children’s entitlement to relief [and] reclassified them as undeserving poor.”⁶⁸⁴ It “placed the burden of child maintenance on the mother” and “abolished an illegitimate child’s

⁶⁸⁰ Louise Tilly, Joan Scott, and Miriam Cohen, “Women’s Work and European Fertility Patterns,” *The Journal of Interdisciplinary History* 6, no. 3 (Winter 1976): 447-476. See also Evans, “Unfortunate Objects,” 136.

⁶⁸¹ Elizabeth H. Pleck, “Seeking Female Sexual Emancipation and the Writing of Women’s History,” *Social Science History* 38, nos. 1-2 (Spring/Summer 2014): 106.

⁶⁸² See Barbara Taylor, *Eve and the New Jerusalem: Socialism and Feminism in the Nineteenth Century* (New York: Pantheon Books, 1983); Anna Clark, *The Struggle for the Breeches: Gender and the Making of the British Working Class* (Berkeley: University of California Press, 1995); and Gareth Stedman Jones, *Outcast London: a Study in the Relationship between Classes in Victorian Society* (Oxford: Clarendon Press, 1971).

⁶⁸³ Evans, *Unfortunate Objects: Lone Mothers in Eighteenth-Century London*, 209.

⁶⁸⁴ Kate Gibson, *Illegitimacy, Family, and Stigma in England, 1660-1834* (Oxford: Oxford University Press, 2022), 60.

right to paternal relief and made state relief contingent on entering the workhouse.”⁶⁸⁵ Gibson’s and Evans’ studies (and that by Samantha Williams, as shown above) collectively illustrate the complex relationship between legal reforms and institutional responses, highlighting how the Hospital navigated the shifting terrain of settlement laws and poor relief to maintain its mission of providing consistent care for Foundlings.

The bastardy clause aimed to alleviate the burden on the parish and to discourage extramarital relationships, reflecting a growing emphasis on individual accountability and the reinforcement of traditional family values. If mothers could not sustain themselves and their offspring, they were compelled to enter the workhouse. Furthermore, unlike the old Poor Law, the new act inherently questioned the truthfulness of a mother’s oath, as it stipulated that mothers making paternity claims could not get “such [an] Order... unless the Evidence of the Mother of such Bastard Child be corroborated in some material Particular by other Testimony to the Satisfaction of such Court,” a requirement often posing an insurmountable obstacle for poor, unmarried mothers trying to get assistance from irresponsible fathers.⁶⁸⁶ This new stress on sexual morals parallels the shift seen in the London Foundling Hospital administration during the nineteenth century, where petitioners’ claims were no longer accepted at face value as they had been in the previous century.

The New Poor Law Act meant that charity and poor relief were no longer the rights of the poor, but privileges that they would have to apply for and prove themselves worthy of. The Hospital, subject to the same moral atmosphere as the creators of the reformed poor law, and perhaps facing pressure to align with the reform’s requirements, adapted its strategies to maintain its mission. Nevertheless, the New Poor Law meant that many mothers who might have gone to the parish now avoided consigning their children to the workhouse by resorting, instead, to the

⁶⁸⁵ Ibid., 252, 262.

⁶⁸⁶ 4 & 5 George IV c. 76, s. 72, “An Act for the Amendment and better Administration of the Laws relating to the Poor in England and Wales” (1834). The New Poor Law Act of 1834 introduced various provisions beyond the “bastardy clause.” Key elements included the establishment of the less eligibility principle to ensure workhouse conditions were less favourable than outside labour, centralization of poor relief administration through Poor Law Unions and Boards of Guardians, classification of paupers into deserving and undeserving categories with harsher treatment for the latter, implementation of the workhouse system as the primary relief for able-bodied poor, introduction of stricter rules within workhouses including uniformity in diet and discipline, suppression of outdoor relief except in extreme cases, adoption of the deterrence principle to discourage reliance on poor relief, and provisions for apprenticeship of pauper children for future employment.

Foundling Hospital; the new system of parish relief meant a continuing flow of applicants to the LFH.

Those who subverted expectations for female sexuality, such as the prostitute, the lesbian, or the unmarried mother, often attracted much public attention, as moralists feared they would undermine the social order. This moralism was ramped up at the turn of the century, particularly by those – like many of the Hospital’s Governors – who accepted the Malthusian assertion that bastardy could be diminished by placing the onus of self-control on the woman. Authorities often feared that female sexual desires would become uncontrollable, endangering the sanctity of marriage and the social order in general. They experimented with different kinds of laws, institutions, and regulations to manage women perceived as promiscuous. Generalised anxiety about social change often focused on the figure of the immoral woman.⁶⁸⁷

In Victorian Britain, the long-held attitudes that female sexual desire was voracious and female orgasm was necessary for conception, were challenged. Amidst this evolving discourse, prominent intellectuals emerged as influential voices in shaping the venerated image of womanhood. For example, Coventry Patmore, in his narrative poem “The Angel in the House,” (1854-1862), exalted the virtues of domesticity, submission, and self-sacrifice in women, aligning with the prevailing attitudes towards femininity in Victorian society. Similarly, John Ruskin, renowned for his multifaceted contributions as an art critic, social thinker, and philanthropist, wrote about femininity in works like “Sesames and Lilies” (1865) and “The Crown of Wild Olive” (1866), popularizing the concept of the meek, placid, and chaste woman.⁶⁸⁸ Such perspectives perpetuated the idealization of women as passive, virtuous figures, emblematic of the cultural conventions of the era. This idealized feminine archetype resonated in the minds of philanthropists, middle class men who sought assurance that their contributions supported ‘deserving’ recipients amidst fierce competition for charitable donations.

In this climate, many women grappled with the challenges and the societal condemnation of having illegitimate children and there were few options that could be taken to thwart poverty

⁶⁸⁷ Judith Walkowitz, *City of Dreadful Delight: Narratives of Sexual Danger in Late-Victorian London* (Chicago: University of Chicago Press, 1992), 22.

⁶⁸⁸ Coventry Patmore, “The Angel in the House” (1854–1862), Part I, Book I, Canto II, (ebook: Project Gutenberg, August 10, 2014). John Ruskin, *Sesame and Lilies*, ed. by Edward Tyas Cook and Alexander Wedderburn, vol. 18 of Cambridge Library Collection - *Works of John Ruskin* (Cambridge: Cambridge University Press, 2010); John Ruskin, *The Crown of Wild Olive: Three Lectures on Work, Traffic, and War* (New York: John Wiley & Son, 1866).

and avoid a ravaged reputation. It is no wonder that so many of them sought refuge for their children at institutions like the LFH, which could offer the child a better life than could the mother on her own, and, after surrendering her baby, she could reclaim her good reputation. However, having recourse to the Hospital in the nineteenth century meant securing the aid of middle-class men who ostensibly disapproved of extramarital relations but, perhaps paradoxically, positioned themselves as the sole charily helping only illegitimate children. How mothers negotiated this paradox, the fact that the ideas of the Hospital's leaders were no longer as conducive to wholehearted sympathy and understanding as they had been in the previous century, will be shown in the final section.

Lineage and Legacy: Legitimate vs. Illegitimate Children

On June 3rd 1801, as it entered the nineteenth century, the London Foundling Hospital issued the most emphatic statement of its mission, when the General Committee resolved that “the principal object of this Hospital is the Maintenance and support of illegitimate Children.” The full text of that day's minutes gives an indication of the motivation behind the resolution:

The Committee having taken into consideration the state of the Finances of the Hospital and the propriety of increasing the number of Children.

Resolved,

That notwithstanding the prosperous state of the Finances of this Hospital it is not necessary or advisable to increase the number of Children therein beyond the Number of 420.

Resolved,

That the principal object of this Hospital is the Maintenance and support of illegitimate Children and that a Report be made to every General Court of the Number of Children admitted since the preceding Court distinguishing how many of them are natural Children and how many legitimate Children.⁶⁸⁹

⁶⁸⁹ Minutes of the General Committee, A/FH/K/02/024, 3 June 1801.

There was a direct connection, then, between “the state of the Finances” of the Hospital and its decision to restrict the number of children, but the resolution does not explain why the selection primarily of *illegitimate* children was the outcome. However, the Treasurer’s momentous statement four years prior, in 1797, when rescuing “penitent and unhappy Women” from “Vice and Despair” was declared to be one of the “Two Objects” of the Hospital, made the focus on illegitimate children almost inevitable: the Hospital now tried to save fallen women, unmarried girls who had been impregnated, and their children. The effective cessation of the parish children venture after 1791 and the resolution in January 1801 to discontinue the practice of accepting children who came with a premium of £100 meant that two of the routes by which legitimate children entered the London Foundling Hospital were closed. Even if illegitimate children had always constituted a majority of the intake,⁶⁹⁰ the many exceptions had ensured that the *policy* of the Hospital was never consistent and one-dimensional. This dynamic was fundamentally changed with the new century, exemplified by the resolution of 1801 that illegitimate children were the “principal objects.”

Of course, “principal” did not mean “only” and the Hospital’s uncertainty about what the new policy might mean in practice was implied by its decision to monitor admissions in the next decade. A trifling number of legitimate children were admitted over the next 15 years. The first report, in July 1801, showed no legitimate (but seven illegitimate) children admitted since May; one legitimate child and 26 illegitimate children were admitted in the second half of 1801.⁶⁹¹ Two legitimate orphans were admitted in 1802 after the death of their widowed mother, out of a total intake of 32; two children of deceased servicemen (one soldier and one seaman) were accepted in 1803, when the total intake was 33; two more orphans entered in 1804, but “during the next two years no legitimate children were taken.”⁶⁹² Therefore, between May 1801 and the end of 1806, the Hospital received a total of 5 legitimate children and 66 illegitimate children.

An application submitted in 1807 reveals the evolving perspectives within the Hospital’s leadership, signaling a departure from the principles espoused during Coram’s era. After the

⁶⁹⁰ Alys Levene found about two-thirds of Foundlings were illegitimate in her 1741-60 sample and Tanya Evans found about 76% were illegitimate in her 1760-1801 sample. Levene, “The Origins of the Children of the London Foundling Hospital, 1741–1760,” *op. cit.*, abstract. Evans, “Unfortunate Objects,” 133.

⁶⁹¹ Nichols and Wray, *The History of the Foundling Hospital*, *op. cit.*, 92-93. The Admission Book suggests that two legitimate children were admitted in September 1801. Admission Book, A/FH/A/09/020/001, 19 September 1801.

⁶⁹² *Ibid.*. Again, the Admission Book differs slightly. Admission Book, A/FH/A/09/020/001, 1802-06.

Duke of Portland, the President of the Hospital, asked in February 1807 to have orphan twins admitted, Treasurer Cox explained to him that “in selecting from the numerous applications” the Committee:

had in general preferred those Cases in which the Mother was living to those in which the Mother was dead: that the principal reason of [sic] this preference was that in the former case, in addition to the protection of the Child, they had an Opportunity of saving the Mother from shame, and of enabling her to return to her proper Situation in life, which the acknowledgement of an illegitimate Child would prevent her from doing; and that they thereby effected a double benefit, which could not be done in a case in which the Mother was dead...⁶⁹³

The Treasurer went on to claim that this policy was “in direct conformity” with the terms of the Charter, which had spoken of “the frequent Murders committed on poor miserable Infants by their Parents to hide their Shame,” or their abandonment to die in the streets, “which language cannot be applied to a case in which the Mother has been removed by death from all fear of shame, and from all temptation to murder or expose her Child.”⁶⁹⁴ However, it is a stretch to base the preference for alive mothers on this aspect of the Charter when it was clear that the Charter was enacted at a time when *any* non-diseased babies were accepted, from whoever brought them in, and “...no questions... would be asked of any person who brought a child...”⁶⁹⁵ Instead, as established earlier, Coram and the original Governors focused on saving babies; there was little regard given to *whose* children were entering the Hospital. After more than sixty years in which the Treasurer’s interpretation was not insisted upon, it is more appropriate to see Cox’s expression regarding “an Opportunity of saving the Mother from shame” as a motive that was *newly* important. The new focus on the mother and “enabling her to return to her proper Situation in life” demonstrates that the administration now valued *working* women, ones that could return to jobs and continue to strengthen the economy. (Though Cox urged the “propriety” of adhering

⁶⁹³ Minutes of the General Committee, A/FH/K/02/028, 18 February 1807. (Also in Nichols and Wray, *The History of the Foundling Hospital*, 94.)

⁶⁹⁴ Minutes of the General Committee, A/FH/K/02/028, 18 February 1807.

⁶⁹⁵ Minutes of the Daily Committee, A/FH/A/03/004, 25 March 1741.

to “some uniform principle of Conduct,” Portland pressed the twins’ case as an exception and they were admitted as John and Mary Windsor – they had been born in Windsor Castle – on March 14th 1807).⁶⁹⁶

On March 15th 1815, the General Committee ordered the Secretary to present “a List of all Children received annually from 1st Jany. 1804 to the 31st December 1814,” specifying whether legitimate or illegitimate. According to this tally, there were *three* legitimate children admitted, two in 1804 and one in 1808, during an eleven-year period in which the total number of children admitted was 349.⁶⁹⁷ These figures are conclusive: the Hospital was now devoted to rescuing illegitimate children and enabling their mothers, ‘fallen women,’ to rebuild their lives. Briefly, however, in 1814-16, the possibility of permitting deviations from the norm was entertained.

On May 25th 1814, the Committee read a petition “for the admission of an Orphan Child into this Hospital.” The child’s mother had died; the father may have died previously, but that is not known (the word “orphan” was often applied to children who had lost *one* parent) and it is possible that the child may have been legitimate. The application outlined “the Case of an Infant whose Mother (a Convict) died whilst under sentence and whose Father had run away.” The petition prompted the decision, “That this Committee be specially summoned for this Day fortnight, to consider, whether in future Petitions shall be received for the admission of Children into this Hospital, under the circumstances of the Mothers being dead.”⁶⁹⁸ The petition was rejected on June 8, but the decision on policy was held over for another two weeks. Then, on June 22, the Committee resolved, “That under the present circumstances of the Hospital, it does not appear expedient that such Petitions should be received.”⁶⁹⁹ This reference to “present circumstances” is more suggestive of financial constraints than basic principle, but the decision stuck: in July 1814 two children, presumably legitimate, were vetoed on the basis of the June 22 resolution. A fortnight later, a beleaguered father who had lost his wife petitioned for the admission of their child. His petition, too, was rejected in accordance with “the Resolution of this

⁶⁹⁶ General Register, A/FH/A/09/002/005, 14 March 1807, John and Mary Windsor, both aged 11 weeks. Nichols and Wray, *The History of the Foundling Hospital*, 95.

⁶⁹⁷ Minutes of the General Committee, A/FH/K/02/033, 15, 22 March 1815. This source overlooks the admission of John and Mary Windsor in 1807.

⁶⁹⁸ *Ibid.*, 25 May 1814.

⁶⁹⁹ *Ibid.*, 8, 22 June 1814.

Committee of the 22nd Ult. [June] respecting the admission of Children whose Mothers are Dead.”⁷⁰⁰

This is a good moment to stop and reflect upon the original intentions for the Hospital. Coram was so affected by the children left exposed to die in the streets that he decided to open a hospital for these babies who otherwise would have perished, in other words the most desperate and in-need children were the Hospital’s original “objects of charity.” The above example of an infant whose father absconded and mother died in prison being *rejected* from the Hospital simply because the mother was dead, is telling. One imagines that Coram and the other original Governors would have taken issue with this: if any baby needed help, it was this one. Mothers who were alive, working, but rejected by the Hospital for other reasons, may have been in very perilous situations indeed – perhaps ending up in a workhouse – however, the babies would still have their mother and therefore a prospect of survival. The baby of the dead, convicted mother who was rejected on June 22nd 1814 was in dire need. Without the Hospital’s help, it might die before other arrangements could be made. The LFH had started to become less tolerant of exceptions and there seems to have been less variety and flexibility all round as the nineteenth century carried on.

Over a year later, the issue appeared to be still in flux. On November 15th 1815, Treasurer Samuel Cox moved that new “Instructions delivered to Petitioners” should state “the necessity of the application being made by the Mother, and of her personal attendance on the Committee” – but the principal message here was the insistence on respectability: “The Mother of the Child (if alive) must be the Petitioner unless satisfactory reason can be shown to the Committee for dispensing with it [sic]. No Person need apply unless the Mother shall have borne previously a good Character for Virtue, sobriety and honesty.”⁷⁰¹ Now, the calculus of respectability would be applied exclusively to single mothers.

The Battle of Waterloo of June 18th 1815 persuaded the Hospital to open its doors again, as it had in the 1760s and 1790s, to so-called military orphans, children whose soldier fathers did not survive the war. On July 12th 1815, the General Committee “Resolved Unanimously,”

⁷⁰⁰ Ibid., 6, 20 July 1814.

⁷⁰¹ Ibid., 8, 15 November 1815. Also in Nichols and Wray, *The History of the Foundling Hospital*, 96.

That in consideration of the great number of British Soldiers who have lost their lives in the Service of their Country in the late actions in the Netherlands, this Committee is of opinion [sic] that thirty Children of such Soldiers, viz. 15 Boys and 15 Girls under the age of one year, be forthwith taken into the Hospital, subject to the Regulations of the Charity.

Ordered,

That this resolution be forthwith communicated to his Royal Highness the Commander in Chief [Prince Frederick, Duke of York], and that His Royal Highness be humbly requested to take such measures as he may think best calculated to promote this object.⁷⁰²

Whether this one-off departure questioned or terminated the policy of admitting only illegitimate children is a moot point, for few arrived and the project quickly expired. Prince Frederick, “very highly impressed with the Humane Consideration and judicious liberality” of the Hospital, agreed to send such children (“recommending proper objects for admittance”).⁷⁰³ The commander of the Royal Military Asylum, Chelsea, as it was then known, attended the Committee on July 26 and proposed to admit three boys of whom only one, James Winstanley, had definitely lost his father; the Hospital rejected the other two (they “do not fall within that resolution” of July 12); Winstanley was admitted after “the Consent of the Mother” was sought and given. James, two months old when Phoebe Winstanley brought him in on August 5, can have been only a few days old when his father died at Waterloo.⁷⁰⁴

The Hospital’s initiative in this regard failed to elicit great interest: in September 1815, after only the Winstanley baby was admitted, the Committee noted that, “There not being before the Committee any more applications” under the July 12 resolution “for the admission of 30 Children of British Soldiers” lost at Waterloo, Secretary Lievesley wrote to Lt. Col. Williamson to ask if the army had “any more cases to offer.”⁷⁰⁵ Williamson explained that “no further cases of Children under 12 months old, whose fathers have been killed in the late Campaign, have as yet been received by His Royal Highness the Commander in Chief.”⁷⁰⁶ Given the age

⁷⁰² Minutes of the General Committee, A/FH/K/02/033, 12 July 1815.

⁷⁰³ Ibid., 19 July 1815, Torrens to Lievesley, 13 July 1815.

⁷⁰⁴ Ibid., 26 July 1815. James died at nurse on 21 January 1816. Ibid., 31 January 1816.

⁷⁰⁵ Ibid., 13 September 1815, Lievesley to Williamson, 15 September 1815.

⁷⁰⁶ Ibid., 27 September 1815, Williamson to Lievesley, 22 September 1815.

requirement, it is no wonder there were few applicants. A general was asked if “he has from his Regiment any cases to offer to the consideration of this Committee,”⁷⁰⁷ Williamson then volunteered, “Since I had the honor to write to you, two Waterloo cases have offered [sic], and I have written to the Mothers, to know if they will give up the Children” – but the widows “could not be prevailed upon to part with them.”⁷⁰⁸

There followed, on December 8, a declaration which, while the July 1815 resolution was not discarded, confirmed the decision of June 1801:

The Committee taking into their serious consideration the great expense that has necessarily been incurred for the support of the Buildings of the Hospital, during the last three years, and the probable further calls which will be made on its funds for a similar purpose in the next; and also considering the number of Children and Adults now on the establishment, Amounting to 388; and the increase in the number of applications for the admission of illegitimate Children, within the last three months; and with due attention to the resolution of the 3rd June 1801, whereby illegitimate Children are declared to be the principal objects of this Charity.

Resolved,

That it is not expedient at present to receive any more Petitions for the admission of Children born in Wedlock, with the exception of those of Soldiers killed in the Actions in the Netherlands; or of other soldiers or sailors agreeably to the resolutions of the General Court.⁷⁰⁹

In December of that year, the Committee proceeded to reject Ann Cope’s petition for admission of her twins, “it appearing that the said Children were born in Wedlock,” departing from a practice allowed less than a decade prior (with the Duke of Portland’s legitimate twins case), and also decided that “the Petition of Sarah Bacchus (a Married Woman) for the admission of her child ... cannot be received.”⁷¹⁰

Three more children were admitted under the dispensation which restricted intake to legitimate offspring of deceased soldiers and sailors: Jane Lowry and George Manning in 1815,

⁷⁰⁷ Ibid., 27 September 1815.

⁷⁰⁸ Ibid., 4 October 1815, Williamson to Lievesley, 30 September 1815; Ibid., 18 October 1815.

⁷⁰⁹ Ibid., 6 December 1815. See also Nichols and Wray, *The History of the Foundling Hospital*, 96.

⁷¹⁰ Minutes of the General Committee, A/FH/K/02/033, 6 December 1815, 10 January 1816.

and Rachel McCaffrey in 1816.⁷¹¹ The petitions from Jane Lowry's and George Manning's parents explicitly addressed the question of legitimacy. Elizabeth Manning attended to request the admission of "her legitimate Infant Son George" and "stated the Child to have been born in Wedlock." And when Charles Lowry of the 3rd Regiment of Foot Guards petitioned "for the admission of his female legitimate Child," the anomaly was acknowledged: "Under the circumstances of the Child of Charles Lowry being born in Wedlock." With regard to Manning, the Committee immediately agreed "that the Child being born in Wedlock is not an objection to proceeding to inquire into the circumstances of the case;" it then resolved that "in as much as it appears that the Child of Elizabeth Manning was born in Wedlock, the Committee does not deem it expedient to proceed to a decision on her case, until after the next General Court" – but this decision was immediately rescinded and both children were admitted despite both this reservation and the fact that Lowry obviously did not die at Waterloo.⁷¹² McCaffrey's petition, labelled "Waterloo," encountered no such difficulties in March 1816.⁷¹³ Therefore, four legitimate children were admitted in 1815-16 (Winstanley, Manning, Lowry, and McCaffrey).

Waterloo ended the war, the perception of extraordinary circumstances soon dissipated, and any interest in taking legitimate children was short-lived. In April-May 1816, the issue was revisited for the last time in several decades. Sir William Pole wrote to request the admission of "two Orphan Children"; they were rejected as "not proper objects of this Charity."⁷¹⁴ But the application prompted a discussion in which two Committee members, Archibald Impey and John Lett, gave notice of a motion to *rescind* both the June 1801 "principal object" and the December 1815 Waterloo-exception resolutions. The Committee resolved on April 24 that the "present constitution" of the Hospital did *not* exclude legitimate children, if the numerical limit (currently 430) permitted, and John Shore proposed to consider "whether the funds of this Hospital are

⁷¹¹ Admission Book, A/FH/A/09/020/001, 16 December 1815 (Lowry, Manning), 9 March 1816 (McCaffrey). Nicholls and Wray noted the acceptance of the first two but omitted to mention McCaffrey's admission in 1816. Nichols and Wray, *The History of the Foundling Hospital*, 95-96.

⁷¹² Minutes of the General Committee, A/FH/K/02/033, 15 November 1815, 29 November 1815. Thus, Secretary Lievesley's report to the General Court on 27 December 1815 noticed 53 admissions since the previous Court "three of which only were legitimate" (Winstanley, Manning, and Lowry). Minutes of the General Court, A/FH/01/005, 27 December 1815.

⁷¹³ Minutes of the General Committee, A/FH/K/02/033, 28 February, 6 March 1816. "The Secretary begs to report, that 20 Children have been admitted into this Hospital, since the last quarterly Court, one of which only is legitimate." Minutes of the General Court, A/FH/01/005, 27 December 1815.

⁷¹⁴ Minutes of the General Committee, A/FH/K/02/033, 10 April, 15 May 1816.

adequate to the Maintenance of more.” Then on May 15, William Curtis, a future Vice-President, gave notice of a motion, which would be “Resolved” a week later:

That inasmuch as by the resolution of the 3rd June 1801, illegitimate Children are declared to be the primary objects of this Charity, in future, whenever a Petition for the admission of a legitimate Child (with the exception of the Children of Soldiers killed in the Actions in the Netherlands) shall be offered, this Committee be specially summoned to take the same into consideration...⁷¹⁵

It would appear, then, that in 1816 the issue remained unsettled, that acceptance of legitimate children remained a possibility (by specially summoning the Committee). However, *no* legitimate child was admitted after Rachel McCaffrey.⁷¹⁶ This may be because, at this time, “applications in regard to children born in wedlock became extremely rare.”⁷¹⁷ By this point Londoners, it may be surmised, saw that the Hospital was principally interested in taking illegitimate children (this study touches on how information about the LFH circulated). Some applications from married parents would have existed among the many rejected; their children were now deemed “not proper objects of this Charity,” a judgement that the Committee frequently pronounced but rarely explained. In any case, whether the cause was supply (what sort of mothers came forward) or demand (the preference of the active Governors), legitimate children were no longer admitted into the Hospital. This meant that the children of wives and widows, whatever their circumstances, however great their need, were never received after McCaffrey was accepted on March 9th 1816.

A small step, or half-step, towards formalizing this no-legitimate-children policy was made in July 1833, when the General Committee altered the printed “Instructions for the admission of

⁷¹⁵ Ibid., 17, 24 April, 15, 22 May 1816. This resolution was possibly the origin of the idea that the word “primary” was used in 1801, a misconception that reappeared in the “Observations on the Foundling Hospital of 1849” – “The admission of illegitimate children shall be the primary object of the corporation” – and subsequent sources. *Observations on the Foundling Hospital*, A/FH/M/01/049, 35.

⁷¹⁶ McCaffrey was the last child in the Admission Book who had the same surname as her mother, the petitioner. Admission Book, A/FH/A/09/020/001, 9 March 1816.

⁷¹⁷ Nichols and Wray, *The History of the Foundling Hospital*, 96.

Children.” The reference to mothers “whether Spinster, Married or a Widow” was altered by the omission of “Married.”⁷¹⁸ Though the retention of “widow” left open the possibility of exceptions, the erasure of “married” recognized the established practice of admitting only illegitimate children (“widow” would later be removed from the petition, in 1856).

Much of the upcoming analysis features one of the predominant figures in nineteenth-century LFH history, John Brownlow, a renowned and revered servant of the Hospital. He was a Foundling himself; the son of Mary Goodacre, he was admitted on August 9th 1800 at the age of three months. Like all admitted infants, he was given his new name and a number (18,607), and spent his early years with a foster family (that of Mary Skinner of Hadlow, Kent) before being returned to the Hospital.⁷¹⁹ In 1814, instead of leaving to be apprenticed to an employer, he was taken into the Secretary’s office as a clerk. He was then promoted to Treasurer’s Clerk in 1828 and became Secretary, the person in charge of the daily running of the Hospital, in 1849. He was with the LFH almost from cradle to grave, retiring in 1872 just a year before his death. His many contributions to the institution included two editions of a history of the Hospital and the creation in 1847 of the boys’ band, which launched many young men onto a career in music. Given Brownlow’s remarkably intimate affiliation with the Hospital in the period under investigation, the study frequently cites his publications and reflections as a way into the mindset of those who made decisions in his time.

If the letter of the law left room for doubt, the *de facto* policy of the Hospital at this time was to receive only illegitimate children and much effort went into admitting the *right* illegitimate children, in other words into ensuring the respectability of their mothers. In the early 1830s, Brownlow was clear that admission of a child now depended on “the previous good character” of the mother and on “whether the reception of the child, together with the secrecy observed as to the misconduct of the mother, will be attended with the consequence of her being placed in a course of virtue, and in the way of obtaining an honest livelihood.”⁷²⁰ Here, Brownlow underscores the broader societal emphasis on moral rehabilitation as well as the

⁷¹⁸ Minutes of the General Committee, A/FH/K/02/042, 10 July 1833.

⁷¹⁹ Admission Book, A/FH/A/09/020/002, 9 August 1800. Notes for Admissions, A/FH/A/09/004/003/001, Admission Note for John Brownlow.

⁷²⁰ Brownlow, *A Guide to the Charitable and Religious Societies*, op. cit., 49. The Guide was written in the early- to mid-1830s, but the precise date cannot be verified.

Hospital's calculus of respectability i.e., its position that the admission of a child was now contingent upon the mother's character and prospects for a virtuous livelihood.

Some reflection on *timing* may be appropriate. Nichols and Wray claimed that, "As regards the important questions of admissions, the policy of the Governors became settled after 1830 and has since remained practically unchanged,"⁷²¹ but they give no specific reason for settling on that year. While the procedures and practical workings of the system changed little after the 1790s, the system continued to evolve in the first-half of the nineteenth century with the *near*-prohibition of legitimate children from 1801 and their *de facto* exclusion from selection after 1816. The requirement that every petitioner should fill in a printed, pro forma *petition*, from 1813 onwards, suggests the growing professionalism of the system but did not change its essence. The decision in November 1815 that every mother had to go to the Hospital in person was rather more significant.⁷²² It permitted a closer examination of her circumstances and character, facilitating interest in the *respectability* of applicants, to which I will return below. The circumstances were now details of courtship and sexual encounter rather than the poverty and need that featured in eighteenth-century petitions.

In summary, the pivotal decision in November 1815 requiring the mother to be present, coupled with the final admission of a legitimate child in 1816, indicates that in 1815-16 the admissions system stabilized and ceased to evolve. This assertion, made with the advantage of hindsight, lacks concrete evidence of a definitive decision for the exclusive admission of illegitimate children. Perhaps the enduring nature of the new regime was not apparent to any Hospital Governor or official until it had withstood the passage of time, possibly around 1830 (which may be why Nichols and Wray selected that date). Furthermore, although one cannot prove this statistically, it seems likely that the refinement of the calculus of respectability was not fully realized until the middle decades of the century. Indeed, if that concept was based on the mores of nineteenth century bourgeois society, it would be surprising to find it fully developed before the reign of Victoria. Jessica Sheetz-Nguyen associates the calculus of respectability with the Poor Law debates of the 1830s, but does not attribute the concept to the New Poor Law of 1834. However, it is clear that public measures to assist the deserving poor (or penalize the

⁷²¹ Nichols and Wray, *The History of the Foundling Hospital*, 317.

⁷²² Minutes of the General Committee, A/FH/K/02/033, 15 November 1815. Nichols and Wray, *The History of the Foundling Hospital*, 96.

undeserving poor) and the Hospital's new inclination to give assistance only to the respectable poor (demanding "a high level of respectability") went hand in hand.⁷²³

After 1830, or thereabouts, the system *did* cease to evolve. There was now a strong commitment to saving unwed mothers as well as children. In Brownlow's *Guide to Charities*, the first words in his entry for the LFH were,

The objects of this Institution are two-fold: 1. To restore to society females who have fallen the unsuspecting victims of seduction and subsequent desertion, and who are desirous of retracing their steps, and once more to become useful and virtuous members of society. 2. To save and protect innocent and helpless infants, the offspring of illicit intercourse, who otherwise would be subjected to all the casualties [sic] and consequences attendant upon the crime of their parents.⁷²⁴

Specifying the mother's restoration first and the baby's survival second reveals how much the institution came to prize the former. John Wrottesley, in his "Report on Charities," described the "hitherto respectable" women that the Hospital would assist, and, as the Inquirer, Brownlow asked about the "moral deportment" or "moral character" of applicants (the terms used regarding Ann Elizabeth Hobbs and Ann Charlwood, respectively).⁷²⁵ In 1839, when he visited and reported on a number of London orphanages, Brownlow expressed no interest in their admissions procedures – which generally involved subscribers gaining the right to *vote* for new entrants – and the consequent reforms (1840-41) involved relatively minor matters that had nothing to do with admissions. Brownlow subsequently expressed a strong preference for a method based on "the merits of each case" rather than "the interest or caprice of guinea subscribers."⁷²⁶ Brownlow was equally supportive of the Hospital's system in his *History*, arguing that the importance of saving the child was secondary to rescuing the mother from "vice, misery, and infamy":

⁷²³ Sheetz-Nguyen, *Victorian Women*, 11.

⁷²⁴ Brownlow, *A Guide to Charitable and Religious Societies*, 48-49.

⁷²⁵ Wrottesley's Report, A/FH/M/01/014, op. cit., 780-81. Letter Book, A/FH/A/06/002/008, 347, Brownlow to Mrs. Vale, 11 January 1839 (Hobbs); Ibid., 395, Brownlow to Abraham, 30 May 1839 (Charlwood).

⁷²⁶ Observations on the Foundling Hospital, A/FH/M/01/049, Brownlow to Pott, December 1849. Brownlow was discussing the elective admissions system at London's Infant Orphan Asylum.

The adoption of a helpless, unprotected infant, the watching over its progress to maturity, and fitting it to be useful to itself and others here, and to attain eternal happiness hereafter, these are no common or ordinary acts of beneficence; but their value and their importance are lost, when compared with the benefits which (without any prejudice to the original objects of the Charity) the mothers derive from this Institution, as it is at present conducted. The preserving the mere vital functions of an infant cannot be put in competition with saving from vice, misery, and infamy, a young woman, in the bloom of life, whose crime may have been a single and solitary act of indiscretion. Many extraordinary cases of repentance, followed by restoration to peace, comfort, and reputation, have come within the knowledge of the writer of this note. Some cases have occurred, within his own observation, of wives happily placed, the mothers of thriving families, who, but for the saving aid of this Institution, might have become the most noxious and abandoned prostitutes. Very rare are the instances, none has come within notice, of a woman relieved by the Foundling Hospital, and not thereby preserved from a course of prostitution.⁷²⁷

In 1842, the Hospital made a clear statement that the institution had become a home for illegitimate children. In February 1842, the General Committee had instructed a committee “to consider and revise the Rules and Regulations of the Hospital, several of which are in a state of desuetude.” The committee found that the by-laws, rules, and regulations “are in some cases inconsistent with the Charter and [the] Act of Parliament, and with one another, and are insufficient for the general purposes of the Hospital...”⁷²⁸ So, in December 1842, the Hospital amended its by-laws, solidifying its emphasis on admitting illegitimate children while affirming further criteria for admission. Since the opening of the Hospital, the first by-law had covered a relatively trivial matter, forbidding payments to Hospital employees, and the by-laws as a whole dealt with practical details of all sorts. On December 28th 1842, the General Court resolved, “That all the existing Bye Laws, Rules and Regulations be repealed” and “That the following be the Bye Laws of the Corporation.” Eighteen by-laws were then set out in the minutes of the General Court, and the first three by-laws read as follows:

⁷²⁷ Brownlow, *History and Design*, op. cit., 37-38.

⁷²⁸ Minutes of the General Committee, A/FH/K/02/046, 9 February, 21 December 1842.

1st The admission of illegitimate Children shall be the primary object of the Corporation.

2nd No application for admission shall be received previous to the Birth of a Child; nor after the Child shall be twelve months old.

3rd The Committee shall be satisfied of the previous good character and present necessity of the Mother of every Child proposed for admission and that the Father of the Child (if living) has deserted the Mother & Child, and that the reception of the Child will, in all probability, be the means of replacing the Mother in the course of virtue and the way of an honest livelihood.⁷²⁹

This language, which does little to provide an explanation of the change, reaffirmed the primary “object” but elevated it to the prominence of first by-law. A third by-law, an echo of Brownlow, promoted respectability: a woman of “previous good character” should ideally return to “the course of virtue” and “an honest livelihood.” So, while in practice no legitimate child had entered the Hospital after 1816, this custom was finally made official in the institution’s by-laws in December 1842.

Shortly afterwards, the Hospital’s role was spelt out in a mission statement produced in 1845, a short account of its aims and activities: “The objects of the Hospital are of that class which are studiously excluded from every other charitable establishment, namely *illegitimate* children.”⁷³⁰ The LFH, alone among London’s institutions, was dedicated to receiving the children of “those unhappy females, who by broken faith, by unprincipled seduction, or by some unfortunate circumstance, are placed in a situation, where indigence and excess of bodily pain are aggravated by the prospect of hopeless contumely and irretrievable disgrace.” Like Brownlow slightly later, the writer asked “whether even the preservation of the helpless and unoffending infant is so meritorious and beneficial an act of charity, as the rescuing the wretched

⁷²⁹ Minutes of the General Court, A/FH/K/01/007, 28 December 1842. The new by-laws were confirmed by the next General Court, when it was also decided to raise the capacity of the Hospital from 460 to 500 (40 “may be safely added”). Ibid., 29 March 1843.

⁷³⁰ *An Account of the Foundling Hospital* (London, 1845), A/FH/A/01/008/002, 5. Author’s emphasis.

mother from a course of infamy and prostitution, and restoring her to character [sic] and the means of honest industry.”⁷³¹

This was the mission that distinguished the Hospital from the general run of orphanages. It is possible, moreover, that the public perception of the Hospital had come to terms with that vision.

When some Governors sought reform in 1849-50, they discussed a range of reasons for rejected applications, including fathers “forthcoming,” mothers resident in workhouses, women “avowedly profligate,” and married women impregnated by men who were not their husbands – but none, in this analysis, was attributed to the child being legitimate.⁷³² It would appear that no applications at all were now made by women rendered pregnant by their husbands, though some, to avoid rejection, may have misrepresented their circumstances. At any rate, its role as a home for illegitimate children was now the essence of the identity of the Hospital.

The last challenge to the policy of making illegitimate children the sole beneficiaries of the charity came when some Governors sought to transform the Hospital into primarily an orphanage for *legitimate* children. In its outcome, this major attempt to change the system merely confirmed the existing system. The arguments of the winners in 1850, those Governors who succeeded in blocking change, have not been preserved in the Committee’s minutes or any other sources. It was as if the radicals had the arguments, but the conservatives had the votes. This is why it might be helpful to bear in mind the determination expressed in the mission statement of 1845, for, though it will not feature openly in the story of 1849-50, it was destined to be the view which prevailed. If saving fallen women was the purpose that distinguished the Hospital from London’s many orphanages, it is not difficult to imagine the reaction to any proposal that the LFH become *one* of those orphanages.

On November 24th 1849, after a third of a century of apparently settled policy, the General Committee agreed to consider changing the rules regarding admission, acknowledging that the by-laws did not settle the issue definitively: while they “do not provide for the reception of any other than illegitimate children,” they also (through using the word “primary”) “appear[ed] to contemplate the admission of those born in wedlock.” This proposal was occasioned by the fact that the Hospital was far from full, “It appearing that there are twenty-four vacancies for the

⁷³¹ Ibid., 7-8.

⁷³² Observations on the Foundling Hospital, A/FH/M/01/049, handwritten addendum, 1849-50.

admission of children into this Hospital.” The nature of the proposed “alteration” was not specified, but the admission of legitimate children was clearly envisaged. The proponents of change also wished to consider “whether (if the Governors have the power) it is expedient for the interest of the Hospital or of the children to adopt any other name for the Charity than that of “Foundling Hospital,” and if so, what name.”⁷³³ “Foundling” had never been appropriate to children who were *not* abandoned and found, but the idea that legitimate children brought in by their parents might be called foundlings was an anomaly too far, and it was felt that “the admission of legitimate children would be defeated by a name so degrading to them & their family connections.”⁷³⁴

The “specially summoned” General Committee met on December 1st 1849 and, again with an eye to the empty beds (“twenty-four vacancies”), resolved to “alter the By-laws” relating to admission and “to adopt some other name for [the Hospital] than the “Foundling” Hospital.” The proposals, presented by William Foster White, recommended the rewriting of the first three by-laws to say:

First. That the objects of this Charity shall be indigent Orphan children, a preference being given to those who have lost both parents, and that in no case shall a petition be entertained for the admission of a legitimate child whose father is living.

Second. That an illegitimate child proved to be deserted by its father shall be considered an Orphan; but that no such child shall be so considered unless such desertion be established to the satisfaction of the Committee.

Third. That no child born in wedlock shall be received after the age of three years, & no illegitimate child after that of twelve months, and that in the latter case the Committee shall uniformly make the strictest examination into the previous character of the mother, and shall have satisfactory evidence that she has been seduced from a course of virtue, and that by the reception of the child there is a good prospect of her being preserved from further degradation, and rendered, through a deep sense of her fault, an improved and useful member of Society.

⁷³³ Minutes of the General Committee, A/FH/K/02/051, 24 November 1849.

⁷³⁴ Observations on the Foundling Hospital, A/FH/M/01/049, handwritten addendum, 1849-50.

Mr. White also gave notice that ... he would move that it be recommended to the next General Court to adopt in future the name “Orphan” for that of “Foundling” Hospital.⁷³⁵

White’s proposal would not only give true orphans priority over illegitimate children; there would also be “the strictest examination into the previous character of the mother” and her prospects as “an improved and useful member of Society” *only* when the administration sought to admit an *illegitimate* child, perhaps reflecting the Governors’ tacit endorsement of societal norms surrounding marital sanctity and the traditional family structure.

The General Committee saw “considerable discussion” – not recorded – of these proposals on December 8, before White’s motions were withdrawn. Two weeks later, on December 22, White and Treasurer Charles Pott proposed to rescind the former’s motion regarding a change of name, and the decision was then confirmed, but not explained. Pott gave notice that *he* would propose the admission changes (“alteration”) at a special Committee meeting on January 19th 1850.⁷³⁶ By this stage, a number of prominent Hospital men had endorsed the initiative; this is evidenced by copious handwritten notes in a volume containing the “Observations on the Foundling Hospital” pamphlet. John Brownlow, recently (October 1849) installed as Secretary, was one such advocate:

Memo:

When the foregoing matter was under discussion I argued that the partial admission of legitimate children into the Hospital along with the opposite class (for I never for a moment dream’d of excluding even one of the really eligible of the latter description) would be the means of relieving the children of the establishment of a great stigma inasmuch as the public would not really know (nor would the children themselves) which were legitimate or illegitimate.⁷³⁷

⁷³⁵ Minutes of the General Committee, A/FH/K/02/051, 1 December 1849.

⁷³⁶ *Ibid.*, 8, 15, 22 December 1849.

⁷³⁷ Observations on the Foundling Hospital, A/FH/M/01/049, Notes by Brownlow, unpaginated.

As an ex-Foundling himself, Brownlow might have been particularly sensitive to the stigma of illegitimacy. He held that “persons brought up in the Hospital are damnified in their progress through life by being known as “Foundlings” and “illegitimate.”⁷³⁸ His reference to “really eligible” illegitimate children relates to the problem, which featured in a minute attributed to Charles Pott, that many recent applicants to the Hospital fell far below the standard of respectability insisted upon:

[T]he far larger proportion of Petitioners have been of so low a character and such depraved habits that the reception of their children would have been inconsistent with one of the principal designs of the charity, viz, the preservation of the Mother from further degradation, and their re-establishment in a course of virtue and usefulness and that there are in consequence at this time vacancies in the House.⁷³⁹

The comment that the petitioners were low and depraved underscores the exceptionally high standard of respectability required for admission. As a result, vacancies arose at the Hospital – a situation that would never have occurred in the 1700s, when the Governors were eager to assist as many people as their financial resources would permit.

If the number of illegitimate children with *respectable* mothers was insufficient, perhaps, the argument went, legitimate children should be received. Sir Frederick Pollock, distinguished judge and LFH Governor, told Pott on December 1 that it was “open to much objection that illegitimate children should be received and that children born in wedlock should be rejected” and pointed out that Coram had made no such distinction between legitimate and illegitimate children.⁷⁴⁰ More formally, the Hospital asked the Attorney General and Solicitor General about the legality of a name change, and they duly gave a green light as long as it was only the name

⁷³⁸ Ibid..

⁷³⁹ Ibid., Minute and Resolution Proposed by Charles Pott, Esquire.

⁷⁴⁰ Ibid., Pollock to Pott, 1 December 1849.

“Foundling Hospital,” the one used “in common parlance,” that was changed and not the formal title (“Hospital for the Maintenance and Education of exposed and deserted young children”).⁷⁴¹

Finally, the General Committee meeting on January 19th 1850 settled the matter. Fifteen men attended the meeting, twice the usual attendance, suggesting that there was some awareness of the momentous nature of the event. Pott moved that it be recommended to the next General Court to make an addition to the first by-law. The proposal began with a remarkably strong statement of the twin objects of the Hospital, including the “restoration” of mothers (an idea that normally went with rescuing the mothers of *illegitimate* babies), before proceeding to advocate the admission of legitimate orphans:

It being the design of this Charity to confer a twofold benefit on the community, namely, the restoration of the mother to virtuous habits, and the preservation and proper education of the child: but the Committee shall have the power of receiving legitimate children also, whose parents are both dead, provided that upon the preservation of any petition for the admission of any such last mentioned child, the Committee shall be specially summoned to consider the same, unless any thing should appear on the face of the petition to cause its immediate rejection by the Committee to whom it shall be presented.⁷⁴²

But this motion “was after considerable discussion withdrawn by consent of the Committee.”⁷⁴³ There is no explanation of this outcome, no indication of the nature of the “considerable discussion,” or of the reason why a motion supported by both the Treasurer and Secretary was withdrawn. It was no temporary setback, for the Committee then proposed to *strengthen* the idea that the Hospital was for illegitimate children, as they were not merely the “primary” object: Pott moved and it was resolved, “That this Committee being of opinion that illegitimate children should be the sole objects of this Charity, and that the first by-law contemplates the admission of children born in wedlock also, that it be recommended to the next Quarterly General Court to

⁷⁴¹ Ibid., Case and Opinion, 29 November 1849.

⁷⁴² Minutes of the General Committee, A/FH/K/02/051, 19 January 1850.

⁷⁴³ Ibid..

erase from the said by-law the word “primary.”⁷⁴⁴ On March 27th 1850, the General Court duly amended the first by-law to this effect – “Resolved, That the word “primary” be erased from the first By Law agreeably with the recommendation of the Committee”⁷⁴⁵ – making the reception of none but illegitimate children the *de jure* as well as *de facto* policy of the Hospital and entirely quashing the efforts of those who had advocated the admission of legitimate orphans.⁷⁴⁶ This marked the final significant amendment to the admission policy, which remained unchanged until the Hospital’s closure.

The defeat of the attempted reform of 1849-50 possibly owed much to the innate conservatism of an institution that had existed for over a century and was patronised by some of the most eminent men in the country. To admit orphans up to the age of three, along with illegitimate babies, would have meant turning away from the practice of recent decades. After the shifts and changes experienced in the previous century – most notably the General Reception and the acceptance of parish children – the nineteenth century brought stability, consistency, and a clear sense of purpose, an identity. This was particularly true regarding the admissions policy, and the resolution of June 1801 was a cornerstone of that policy. The idea of a “principal” object eventually evolved into the admission of only illegitimate children. Thus, the Hospital developed a specific, unique role within the array of London’s charities. There were numerous other refuges for legitimate children who lost their parents. It was “often” observed “by individual Governors” in 1849 that, “The Foundling Hospital is the only Asylum open for illegitimate children, whereas for legitimate children there are plenty.”⁷⁴⁷ The Governors who rejected change in 1850, perhaps with the almost boastful words of the 1845 manifesto still ringing in their ears, and a certain amount of inertia built over years of settled practice, appear to have decided that the Hospital performed a necessary function and balked at the idea that it should be transformed into a very different institution, another orphan asylum.

⁷⁴⁴ Ibid..

⁷⁴⁵ Minutes of the General Court, A/FH/K/01/007, 27 March 1850.

⁷⁴⁶ The word “primary” in a volume published in 1843 was amended to “sole,” by hand, shortly after March 1850. *Charter, Act of Parliament, By-Laws, and Regulations, of the Foundling Hospital* (London, 1843), A/FH/A/01/005/005, 5. More accurately, an 1854 statement of the by-laws simply gave the first by-law as “The admission of illegitimate children shall be the object of the Corporation.” *Foundling Hospital* (1854), A/FH/A/01/009/001, 1. And the LFH Petition Form stated that, “The Children of married Women and widows are not admissible into this Hospital.” Sheetz-Nguyen, *Victorian Women*, 192 (Appendix 2).

⁷⁴⁷ Observations on the Foundling Hospital, A/FH/M/01/049, Rough Notes, December 1849. This comment was made by a writer who went on to reject the idea that there were sufficient places for orphans.

Given these sensibilities, it is no wonder that the final amendment to the petition form, in 1856, expanded upon the requirement for mothers to demonstrate their virtue, honesty, and sobriety:

No Child can be admitted unless the Committee is satisfied, after due enquiry, of the previous good character, and present necessity of the Mother, and the Father of the child has deserted it and the Mother, and that the reception of the Child will in all probability, be the means of replacing the Mother in the course of virtue, and the way of an honest livelihood.⁷⁴⁸

One might ask what was the *effect* of this admissions system. An analysis of every available petition in 1839 (138 in total, with 31 missing and not accounted for in the statistics) finds an acceptance rate of 20%. A survey of the 1849 petitions (150 in total, with 2 missing and not accounted for in the statistics) finds that the acceptance rate was only 13.5%. This notable decline in acceptance rates may be part of the reason why the Governors had vacancies in 1849-50 and had to revisit the legitimacy issue. Later, in 1857, Brownlow added some admission statistics to Wrottesley's earlier account:

	No. of Petitions	No. admitted	
1854	218	29	[13.3% acceptance rate]
1855	207	32	[15.5% acceptance rate]
1856	245	37 ⁷⁴⁹	[15.1% acceptance rate]

⁷⁴⁸ Foundling hospital petition form instructions, A/FH/A/08/001-1856, cited in Sheetz-Nguyen, *Victorian Women*, 85.

⁷⁴⁹ Wrottesley's Report, A/FH/M/01/014/001, 785, note added by Brownlow.

Many mothers faced rejection thanks to the stringent criteria now imposed by the calculus of respectability. Those advocating for change in 1850 had a valid point: ending the exclusion of legitimate children would have entailed admitting the offspring of destitute wives and widows, many of them equally deserving and in as dire circumstances as unwed mothers and their children. The proposed initiative failed, and the Hospital persisted in assisting only respectable unwed mothers. Selection was based on the woman's character rather than the immediacy of her need marks a notable deviation from the founder's charitable objectives. The nineteenth-century conception of the "merits" of applicants perpetuated an agenda that distinctly reflected the interests and values of the middle-class men who governed the charity. The institutional paternalism of the nineteenth century placed such a premium on respectability that vacancies at the life-saving charity went unfilled.

Reclamation of children, too, was tied to the idea of a respectable mother. Secretary John Brownlow's daughter, Emma, captured scenes from the LFH in her paintings, now showcased at the Foundling Museum. Among her notable works is "The Foundling Restored to its Mother," painted in 1858, which exudes refinement and respectability. This artwork poignantly depicts the reunited mother and child, showcasing Emma's skill in conveying the emotional depth and significance of such moments. The mother's attire, well-crafted and elegant, bears witness to her newfound prosperity and social status, and to her ability to rebuild her life after a period of adversity. Notably, the mother displays no flesh except for her hands and face, as if to show her conformity to bourgeois standards. However, the absence of a wedding ring, and the fact that there is no male figure beside the woman, who is accompanied by her own mother, adds an intriguing layer to the interpretation. In Victorian society, marriage symbolized respectability and stability, and spinsterhood would undoubtedly have complicated a mother's ability to reclaim her child. On the other hand, motherhood was a trope in nineteenth-century paintings, and depictions of parent-couples were far less frequent.

Marriage was a key criterion for the Governors when evaluating a mother's suitability for reclamation of her child. The Governors imposed strict requirements, necessitating proof of a secure home, steady employment, and preferably marriage to a male breadwinner capable of supporting the child; most applications failed. In light of these considerations, the absence of a wedding ring on the mother's finger in Emma Brownlow's painting raises questions about her marital status and its implications for her eligibility to reclaim her child. Keeping in mind the

painter was a woman, it is plausible that Brownlow's portrayal reflects an idealized scenario wherein the mother has successfully established herself without the need for a traditional marital arrangement. Alternatively, the absence of the ring may signify a deliberate omission aimed at challenging conventional notions of respectability and motherhood, underscoring the complexities of societal expectations and individual agency in Victorian Britain.

Although the year 1801 marked a significant juncture in the evolution of admission policies at the LFH, the anomalies and exceptions of the previous century continued for at least a decade. Even as procedures were tightened and the underlying motivation moved the Hospital relentlessly towards less varied outcomes, there was a lag between policy formulation and operationalization. Administrative oversight persisted and some Governors may have remained less than fully aware of the evolving ideal candidate well into the nineteenth century, as institutional adaptation could be slow. This period witnessed a subtle yet significant evolution, but a settled picture was evident after 1830 and 1849-50 saw the failure of an attempted reform that would have fundamentally altered the Hospital's character. Though the proposed changes were blocked, however, their very proposition underscores the continuing tension between the original mission of providing succor to all in need and the growing emphasis on societal respectability and moral rectitude.

* * * * *

Stories about foundlings have appeared in literary fiction for generations, enduring as a motif across diverse cultural landscapes. For instance, the foundling narrative of Moses is vividly portrayed through William Hogarth's depiction on the seal of the London Foundling Hospital. Laura Schattschneider's 2004 article uses both comparative literature and social history to trace the evolution of the trope of foundlings in English fiction from the eighteenth to the early nineteenth century. She argues that the foundation of the London Foundling Hospital "changed the cultural context of English foundling narratives profoundly."⁷⁵⁰ She finds a link between the evolution of foundling narratives and the Hospital's admission procedures, and stresses the

⁷⁵⁰ Laura Schattschneider, "The Infants' Petitions: An English Poetics of Foundling Reception, 1741-1837," *Studies in 18th-Century Culture* 33 (2004): 72.

impact of the petition requirement. She argues that this alteration mirrors broader cultural themes of sexual transgression, maternal authority, and redemption prevalent during the era. Juxtaposing literary texts with LFH practice, Schattschneider argues that the depiction of Foundling reception conveyed intricate societal narratives that became embedded within English society. While fiction may represent merely one facet of a broader discourse embraced among England's literate elite,⁷⁵¹ Schattschneider's work shows the Victorian figure of the 'fallen woman' was also mythologized through contemporary art, journalism, and literature and contends that foundling narratives in fiction shift from the mother to the men who assist her. Notably, she links transformations in gender dynamics coinciding to changes in petitioning methods at the Hospital, influencing the plots of English foundling fiction. This evolution – from women being central in their stories in the mid-eighteenth century to men assuming a mediating role by the century's end – coincides with the Hospital's adoption of more rigorous and patriarchal application processes, a trend intensified during the Victorian era. This bold assertion resonates with the findings of this study, as the archival evidence indicates a reinforcement of men's authority over women in need during the nineteenth century.

Examination of the admissions process of the LFH during the nineteenth century shows that the Governors slowly implemented a rigid framework, called here the "calculus of respectability," as articulated by Jessica Sheetz-Nguyen. This chapter will now explore the practical implications of these changes for those seeking their children's admission to the Hospital.

Purity and Prejudice: Gatekeeping Victorian Values in LFH Admissions

Brownlow tries to strike a balance between the detailed scrutiny the Governors applied to each case for admission – highlighting the stress on mitigating illegitimacy's stigma – and the mothers' socioeconomic and legal vulnerabilities. The Governors aimed, in Brownlow's account, not merely to provide care for abandoned children but also to offer a means for mothers to "hide

⁷⁵¹ Recent insights from cultural history emphasize the importance of not disregarding other mediums such as political and social rhetoric.

their shame” and perhaps reintegrate into society after falling victim to manipulation by an exploitative man, “for the error of a day, she was punished with the infamy of years; and although her departure from the path of virtue, so far from being the consequence of a previous vicious disposition, might have been brought about by an artful scheme of treachery, she was branded for ever as a woman habitually lewd.”⁷⁵² Brownlow’s account thus reflects the moral philosophy underpinning the nineteenth-century admission policies, stressing compassion and redemption for women presumed to have strayed from accepted behaviour due to circumstances beyond their control. His commentary underscores a dichotomy between victimization and moral depravity, whereby the Governors sought to distinguish between the seduced and abandoned and those deemed irredeemable. Thus, the Governors aimed to uphold the institution’s philanthropic mission while adhering to widespread notions of respectability and virtue. While Brownlow, in 1858, claims that these rules had “prevailed for half a century,” as we have seen, they were only *de facto* in place for that duration, not fully realized in practice. Certainly, these rules featured strict criteria aimed at determining the eligibility of petitioning mothers, not their offspring.

According to Brownlow’s mid-century account, “The present practice of the Governors is to decide each application for the admission of children on its own merits” but that “certain preliminary conditions required, the absence of any one of which is fatal to the petitioner’s application, and subjects it to instant rejection, except in very peculiar cases.” These criteria, by now only applicable to unwed, alive mothers, Brownlow asserts, “cannot be better set forth than in the language of a report made to Parliament in 1836”:

Thus it is required,

" 1. That the child shall be illegitimate, except the father be a soldier or sailor killed in the service of his country."⁷⁵³

" 2. That the child be born, and its age under twelve months.

" 3. That the petitioner shall not have made an application to any parish respecting its maintenance, or have been delivered in any parish workhouse.

*A petitioner who goes into a workhouse merely for her confinement, is not now rejected.

⁷⁵² Brownlow, *History and Design*, 2.

⁷⁵³ In 1857, Brownlow deleted "except the father be a soldier or sailor killed in the service of his country," Wrottesley’s Report, A/FH/M/01/014/001, 780.

" 4. That the petitioner shall have borne a good character previous to her misfortune or delivery.

" 5. That the father shall have deserted his offspring, and be not forthcoming, that is, not to be found, or compellable to maintain his child.⁷⁵⁴

This enumeration is notable for the lack of any provision aiming to alleviate the financial distress of the petitioner or her child. It signifies a change in priorities from the original concerns of the founding Governors and much of the eighteenth-century administration. Instead, the focus became restoration of virtue for unmarried women, following abandonment by their lovers. Brownlow goes on to discuss how *additional* circumstances could strengthen a petitioner's case for admission, quoting again from the Wrottesley 1836 charity report he heavily annotated, *finally* stipulating that poverty should be a factor in deciding the case, but rapidly returning to the idea of restoration:

Thus the petitioner's child acquires a stronger claim to admission, according to the degree in which it appears

" 1. That the petitioner is poor, and has no relations able or willing to maintain her child.

" 2. That her delivery and shame are known to few persons, being either her relations or inmates of the house in which the circumstances occurred.

" 3. That in the event of the child being received, the petitioner has a prospect of preserving her station in society, and obtaining by her own exertions an honest livelihood.

Unsurprisingly, this list fails to acknowledge how the calculus of respectability contributed to the establishment of a binary between victimization and moral depravity for the women petitioning for admission. This framework categorized women into two distinct groups: those deemed

⁷⁵⁴ Brownlow, *History and Design*, 21-22; Brownlow, *History and Objects*, op. cit., 24-25. Brownlow deleted the third requirement in 1857 and added the asterisked note below (Wrottesley's Report, A/FH/M/01/014/001, 781); this note is in Brownlow's 1865 version but not that of 1858.

deserving of sympathy and support due to their victimization, and those perceived as morally deficient or lacking in virtue. This binary not only oversimplified the complex circumstances faced by these women but also overlooked the systematic factors that often contributed to their predicaments. By failing to recognize the precise realities of the petitioner's lives, this calculus perpetuated the societal stigma created by having a child out of wedlock.

The emphasis on repentance and redemption, evident in Brownlow's account, rarely surfaces in the eighteenth-century documents (nor was it required), highlighting the humanitarian ethos that later guided the LFH's institutional paternalism. Brownlow writes, "It was not that her crime was venial, but that He who desired not the death of a sinner, but rather that she should repent and live, saw in this wretched criminal, sufficient of remorse to be the object of a lesson to mankind."⁷⁵⁵ Hence, in the eyes of a key character in the Hospital's mid-century administration, the institution shone a beacon of Christian charity, extending compassion and support to those who had strayed from the path of virtue, with little thought to the future of any rejected progeny. Furthermore, Brownlow's hindsight bias leads him to misinterpret both Coram's intentions and the Charter, accurately outlined in the first two chapters. Coram had thought not of the "Murderous" mothers' reputations, but only of preserving their children's lives; we thus see how steadfast Victorian values were adhered to in this period, and how much they differed from the concerns of the previous century. Brownlow's distinctly Victorian prose provides insight into just how mother-centred the charity had become:

No child drinks of our cup or eats of our bread whose reception, upon the whole, we are not certain to be more conducive than pernicious to the interests of religion and good morals. We hear no mother whom it would not be merciless and shocking to turn away; we exercise the trust reposed in us with a trembling and sensitive conscience; we do not think it enough to say, This woman is wretched, and betrayed, and forsaken; but we calmly reflect if it be expedient that her tears should be dried up, her loneliness sheltered, and all her wants receive the ministration of charity. The object has uniformly been to distinguish between hardened guilt and the first taint of vice. By sheltering and protecting once, reclaim for ever after, and not to doom to eternal infamy for one single stain of guilt.⁷⁵⁶

⁷⁵⁵ Brownlow, *History and Design*, 26.

⁷⁵⁶ *Ibid.*, 33-34.

The text surely contains hyperbole, but it makes clear why the administration would alter its focus from saving children to “preserving” their mothers.

There is an irony in one of the eighteenth-century practices critiqued by Brownlow in his *History*, whereby Governors had the authority to recommend a child for admission or facilitate admission through a donation:

This administration of an important branch of such an institution is thus asserted, because there is a vulgar error on the subject, namely that the Governors have the privilege of presenting children, after the manner of other establishments; but a more unfounded statement never was erroneously conceived or ignorantly disseminated!⁷⁵⁷ ...It is a fact much to be regretted, that for many years children were mysteriously received on payment of £100, without a knowledge of, or any clue being given to the parents from whom they sprang! The abuses which might, and no doubt did, arise from this system, are so obvious as to need no comment. It is due, however, to the Governors to say, that immediately after the funds of the charity had assumed a healthier state, they abolished altogether this more than questionable practice.⁷⁵⁸

Brownlow claims that there were two “vulgar errors” committed in the eighteenth-century: that children could formally get in with £100 and that eminent people, like William Harrison and George Whately, were getting children admitted by nomination. And yet one of the last children admitted to the Hospital on a reputable recommendation was none other than John Brownlow. On July 30th 1800, the General Committee reported the following:

Read the application of Lord Brownlow for the admission of Mary Goodacres [sic] Child; and it appearing to be a proper Object from Lord Brownlow’s Statement to be admitted into this Charity.
Ordered,

⁷⁵⁷ Ibid., 40.

⁷⁵⁸ Ibid., 20-21.

That it be admitted on the above day, and that Lord Brownlow be requested to procure the Father's being sent into his Majesty's Service.⁷⁵⁹

The "above day" was August 9, when infant Brownlow's admission to the Hospital occurred *without* inquiry. The decision to accept Mary Goodacre's son was based on the recommendation of a Tory peer, the source of Brownlow's name. This action, of course, violates Brownlow's own stress on thoroughly scrutinizing a mother's statement and refraining from admitting children solely based on recommendations from prominent persons – practices he regarded as fundamental principles firmly entrenched in the nineteenth century. Still, his case shows that as late as 1800, the admission system still exhibited variety and flexibility, as evidenced by yet another instance where a notable individual sponsored an application without triggering an inquiry. This situation is doubly anomalous because Goodacre seemingly did not submit a petition *and* there are no indications that the father had absconded. Such anomalies continued – Portland's exercise of patronage to secure admissions in 1807 is noticed above – but were less pervasive now that the Hospital had not only a settled procedure but a more settled, coherent purpose that took a clear view of the sort of person(s) it wished to help.

The other procedure criticized by John Brownlow – the practice of admitting a child without inquiry through payment of £100 – was officially prohibited in January of 1801. But the Secretary acknowledges that the repeal of this protocol was largely prompted by a legal dispute that arose some time after the 1801 ruling:

The truth is, the matter was about to be brought to a legal issue, from the following circumstance: The mother of a child which had been received under this rule, although a consenting party to the separation, afterwards repented, and, having discovered the residence of the nurse with whom it was placed in the country, practised upon her an artifice by which she obtained possession of the child, and refused to relinquish her right. The Governors, feeling themselves under an obligation to reclaim the child by exercising the powers which they conceived to be vested in them, took a high legal opinion, when they were advised that, owing to their departure in this respect from the spirit and letter of their charter,

⁷⁵⁹ Minutes of the General Committee, A/FH/K/02/024, 30 July 1800.

and the Act of Parliament confirming it, they had no chance of being protected in a court of law. From this time, therefore, namely January 1801, no child has been received into the Hospital, either directly or indirectly, with any sum of money, large or small.⁷⁶⁰

Thus, the decision to abolish the £100 rule was actually influenced by a legal dispute rather than by the Hospital's improved financial circumstances. Brownlow seems to contradict himself when he acknowledges the pivotal role of this legal case in prompting the rule's elimination. However, the gradual decline of these exceptions – from prevalent to nearly non-existent – by Brownlow's era is noteworthy. The change was gradual, with shifting societal strictures concerning morality, women, motherhood, the economy, and the working class, which gradually permeated LFH policy.

Centuries Compared: Changes and Parallels

During the second-half of the eighteenth century, London Foundling Hospital petitions did not revolve around the sentimental narrative of the seduced maiden that would later saturate the more uniform applications in the Victorian era (despite instances of eighteenth-century women betrayed by absconding lovers). The earlier discourse most often reflected destitution, a lack of life necessities, much distress, and adversity. Although each petitioner's circumstances—economic, social, and psychological—were unique, the descriptions of their experience easily conveyed the urgency and desperation of their situations. Petitioners described their misfortune more than their betrayal. However, in contrast, the narratives found in nineteenth-century applications, far more homogeneous, emphasize betrayal and victimization.

In the nineteenth century, a variety of reasons for rejection arise in Hospital documentation, including children or mothers dying before admission, children being overage, mothers failing to attend the interview, and mothers being deserted or widowed wives. Most commonly, “father forthcoming” was either stipulated or implied. The Hospital was all too ready to reject

⁷⁶⁰ Brownlow, *History and Design*, 20-21. Brownlow does not give the date of this “legal issue.”

applications from desperate and, to use John Wrottesley's term, "meritorious" mothers on grounds that failed to reflect the merits of the case or the depth of a mother's need. A deserted or widowed wife was no less "meritorious" than an unwed mother. And finding the father ("forthcoming") did not ensure that he would fulfil his responsibilities; it is impossible to know how many young women were turned away by the Hospital and required to seek support from improvident fathers.⁷⁶¹

The founding Governors had aimed at accommodating as many children as possible within the limitations set by spaces and funds. As a result, children had been turned away due mainly to capacity constraints, prompting the introduction of balloting as a solution. Prior to the General Reception, the minutes show that the Governors acknowledged the insufficiency of private funding and drew parallels with other nations, such as France, where a wine tax was employed, highlighting the necessity for state support. The Governors had always desired to establish branches of the Hospital throughout the country to broaden its reach, as they finally did with Parliamentary funding. Before (and after) the General Reception, Governors were even willing to run deficits in order to assist more infants in need, showcasing their faithful dedication to expand the charity without discrimination. However, late-Georgian and Victorian philanthropists were more tight-fisted with the resources bestowed on them by Divine Providence. They were ever more ready to circumscribe their charity, as Andrew suggests, particularly with the advent of the more frugal and unforgivingly selective Poor Law in 1834.⁷⁶²

The nineteenth-century Hospital worked hard to ensure that assistance went only to those who met its criteria. Many leaders and supporters of charitable associations hailed from non-aristocratic backgrounds. As a result, their voluntary efforts adhered to the standards of a business organization. They monitored 'returns' in the way typically expected in their commercial and professional endeavors.⁷⁶³ This might explain why, in this century, ineligible applicants were turned away even when the Hospital had vacancies. Moreover, in January 1855, despite facing the first major war since 1815, the Committee decided that the Hospital could not take in the "orphans" of soldiers and sailors killed in the Crimea.⁷⁶⁴ Soon after this, the Hospital

⁷⁶¹ Wrottesley's Report, A/FH/M/01/014/001, 781, 785-86. In a footnote, Wrottesley understated (chronologically) when he said that "no legitimate child has been admitted within the last 10 years." Ibid., 780.

⁷⁶² Donna Andrew, *Philanthropy and Police*, op. cit., 44, 164.

⁷⁶³ Ibid., 3ff.

⁷⁶⁴ Minutes of the General Committee, A/FH/K/02/053, 13 January 1855.

opted to recall children prematurely from their nurse-mothers instead of extending aid to additional needy children or broadening their charitable efforts to encompass a wider demographic now considered ‘undeserving.’ This policy led to above-mentioned alternative solution: children being returned, fetching children back from their wet nurses much younger. Brownlow told the Inspector of wet nurses in Kent on March 3rd 1857 that,

We are very low in our numbers here & have many beds Vacant. Would you therefore be good enough to look amongst your little ones & let me know how many there are, in your opinion, fit to be sent home [to the Hospital]. We like them to be sent here when about 3 years old, provided there is no mental or physical reason for there [sic] being retained longer in the Country... We do not object to receive them even if they are not three years old, provided they are healthy and active.⁷⁶⁵

In August 1857, Brownlow offered the Kent and Surrey Inspectors the same explanation (“We are very low in our numbers here...”) and listed the names of ten children (five in each county) “which appeared to me eligible for our Walls... If Children are 3 years old or nearly so and are active and generally healthy they are ripe for us.”⁷⁶⁶ He identified several children at nurse in Surrey who might be returned, one of them “upwards of 4 years of age” and another who was well short of three: “This child is a nice little fellow but only 2 years and 4 months old. Would it be right to have him here? We are very low in our numbers.”⁷⁶⁷ That they would go to such lengths, rather than addressing the problem by opening up admissions, shows that the decision reached in 1850, excluding orphans, was now set in stone. In the same year, 1857, Brownlow systematically amended every suggestion in Wrottesley’s recycled report that legitimate children were admissible and added that in 1850 “illegitimate children were made the sole objects of the Charity... There is now no exception,”⁷⁶⁸ and this would remain the rule until the Hospital closed.

⁷⁶⁵ Secretary’s Letterbook, A/FH/A/06/002/012, Brownlow to Vine, 3 March 1857.

⁷⁶⁶ Ibid., Brownlow to Pidcock, 20 August 1857; *ibid.*, Brownlow to Vine, 20 August 1857.

⁷⁶⁷ Ibid., A/FH/A/06/002/013, Brownlow to Pidcock, 22 July 1858.

⁷⁶⁸ Wrottesley’s Report, A/FH/M/01/014/001, annotations, 780, 785-86.

These practices surely run counter to the philanthropic ethos embodied by Coram. The institutional paternalism evident among the Hospital's administrators during the Victorian era exhibited diminished empathy towards the impoverished, to the extent that some of the most destitute children, those who lacked the support even of their mothers, no longer qualified for assistance. The Hospital instead increasingly prioritized their objective to aid mothers in restoring their social respectability, thereby reshaping the core focus of their philanthropic endeavour. Moreover, though not a primary consideration in admissions, only respectable women could reclaim their children if their fortunes improved (these Sheetz-Nguyen found only amounted to about 3% of the children in her period of study).⁷⁶⁹

So far, I have discussed the basic aims of the LFH and shown how its objectives and operations developed during the first century of its existence, as the institution moved far from what its founder had envisioned. In this concluding section, it remains to examine the practical implications of this transformation. Specifically, I analyze the effects that the transition from a first-come, first-served approach to a rigorous, petition-based admission process had on those seeking assistance from the charity. I shall assay the change and try to come closer to the world of the mothers who had to surrender their children.

Petitions as Sources

The London Foundling Hospital petitions cannot fully illuminate working-class patterns of courtship, love, and sex, as petitioners often had good reason to re-cast or distort their stories. Rather than simply relating events, a woman's autobiographical narrative might conform to the prevailing melodramatic fiction of seduction and abandonment, for "language is the site of history's enactment."⁷⁷⁰ Melodramatic narratives of the period were shaped by the trope of respectability, the growth of the metropolitan press, and discourses of sexual normalization. According to Maria Zytaruk, by 1806 the pages of literary periodicals and newspapers teemed with accounts of struggling mothers, vanished fathers, and desperate orphans and foundlings, as

⁷⁶⁹ Sheetz-Nguyen, *Victorian Women*, 185-186.

⁷⁷⁰ Joan Scott, "The Evidence of Experience," *Critical Inquiry* 17, no. 4 (Summer 1991): 793.

depicted in essays, letters, poems, and advertisements. Several decades later, the Hospital itself unveiled certain materials from their archives to the public, aiming to evoke sympathy and boost donations, a move which occurred in 1858 when discourse about the fallen women was ubiquitous.⁷⁷¹

The section is built around nineteenth-century petitions, interview transcripts, and recommendation letters, as well as any correspondence with the father a mother gave over to the LFH to support her claim, with a particular focus on petitions in 1812, 1813, 1839, 1849, 1859, and 1869. There are several reasons for selecting these years. First, at the London Metropolitan Archive (LMA), few years before 1839 have the majority of both accepted and rejected petitions intact. The best sample begins about a decade after the 1801 ruling that “the principal object of this Hospital is the Maintenance and support of illegitimate Children.” While I had hoped to compare the last years before the rule changed with the years after the rule became enforced, the documents, now being digitized, are not currently available. In 1813, the Hospital switched over to a printed petition, and twenty-five per cent of all petitions available for 1812 and 1813 have been looked at and briefly compared. For later years, I employed Sheetz-Nguyen’s research methodology, which involves randomly selecting 10% of petitions from decennial years within the study’s scope.⁷⁷² However, I implemented this methodology with a different set of petitions: from 1839, 1849, and 1859. Only a handful of petitions are available for 1869, so all on file were examined. These years were selected for two reasons. First of all, there are many thousands of petitions housed at the LMA and researchers require a statistical rule of significance. For 1839, 1849, 1859, and 1869, a minimum of twenty-five per cent of all rejected and accepted petitions were analyzed, which brings us to the main reason for selecting decennial years 1839-1869. These years form a coherent set because they feature the dominant role of John Brownlow. Thus, I have dubbed the period the “Brownlow years” and looked at petitions from 1839, when he was an increasingly assertive Treasurer’s Clerk, and 1849, 1859, and 1869, when he was the Secretary. In both capacities, Brownlow played a pivotal role in scrutinizing and evaluating the petitions submitted to the institution.

⁷⁷¹ Zytaruk, “Artifacts of Elegy,” op. cit., 40.

⁷⁷² Sheetz-Nguyen, *Victorian Women*, 2.

Brownlow has a reputation among LFH historians for being particularly thorough and unsparing with petitioners' background checks.⁷⁷³ In an account that wishes to reveal the agency that petitioning women could exercise under such a rigorous system, it seems fitting to examine petitions and outcomes from the period when Brownlow dominated proceedings. Furthermore, working with the "Brownlow years" helps to ensure procedural consistency in the primary sources utilized here. Finally, 1872 was not only the year of Brownlow's retirement, it was also when Parliament passed the first Infant Life Protection Act and the first Bastardy Law Amendment Act, prompting a chain of legislation that gradually placed adoption and foster care under the protection and regulation of the state. This legislation greatly changed the circumstances of illegitimate children in England, which is also why, with the passing of these acts, this study terminates.

The petitions in the LMA are actually composite bundles of more than one type of document. From 1813, there was a single-sided *pro forma* document – Elizabeth Longhurst's is shown below – in earlier years, a brief letter or a succinct note of 10 to 20 words had been sufficient. The new petition also contained the statement: "Children can only be received into this Hospital upon personal application of the Mothers," which would be made stricter in a motion set forth by Treasurer Cox in November of 1815 requiring the mother to attend the interview in person.⁷⁷⁴ After 1813, in rare instances, the petitioner added a written statement. Next comes the clerk's report of the interview with the mother; it is called the interview transcript in this study, but it was not, in fact, presented in the form of a question-and-answer dialogue, it was one to two pages of straight prose. In these reports, courtship, sexual relations, and abandonment were standard fare. Most bundles also contain one or more letters of recommendation, generally from relatives (often the petitioner's mother, rarely her father) and, often, from employers. These are the three main components. In a minority of cases, the Inquirer's "Report" features; these were included with greater frequency after Brownlow became Secretary in 1849. The array of officers responsible for reports in the nineteenth century included Schoolmaster Atchison, Steward Dobbs, Treasurer's Clerk Brownlow, and Bandmaster Twiddy. Most reports merely summarised and confirmed key points from the other documents (perhaps

⁷⁷³ For instance, Sheetz-Nguyen claims that, "when Mr. John Brownlow took office as secretary in 1849, the petition transcript suggest a more vigorous attention to merits of petitioner [sic] in scope in detail." *Ibid.*, 55.

⁷⁷⁴ Petition Form, A/FH/A/08/001, 1813. Minutes of the General Committee, A/FH/K/02/033, 8 November 1815.

with additional information provided by the applicant or a relative, for the Inquirer paid home visits) and tended to withhold comment. The Inquirer did report on the whereabouts of the father and correspondence regarding him was occasionally included. It would appear that the Hospital seldom tried hard to find the father; Nichols and Wray note that, “The Governors took the *unusual step*, in June 1805, of writing to the Captain of a warship, at the Nore, because a petitioner had alleged that a surgeon on board the vessel was the father of her child.”⁷⁷⁵

Embedded within the petitions lies a trove of supplementary material, such as letters from previous employers (occasionally composed on somber black-edged mourning paper and sealed with a matching black seal), vaccination certificates, as well as missives from lying-in hospitals or workhouses, often accompanied by physicians’ annotations regarding the nature of the childbirth experience and noting whether the woman kept her secret hidden well. Following the compilation of all evidence, petitions were either approved or declined in accordance with the criteria delineated on the reverse side of the petition form. Notably, once the calculus of respectability was cemented, even the intercession of notable individuals like Charles Dickens proved ineffectual if the prescribed criteria were not satisfied.

⁷⁷⁵ Nichols and Wray, *The History of the Foundling Hospital*, 94. Emphasis added.

**To the Governors and Guardians of the
Hospital for the Maintenance and
Education of Exposed and Deserted
Young Children.**

THE PETITION of (1) *Elizabeth Longhurst*
of (2) *88 Wellesley Street, Somers Town*
HUMBLY SHEWETH

That your Petitioner is (3) *A Minister* (4) *22*
Years of Age, and was on the (5) *First* Day of
(6) *July* ¹⁸³⁹ delivered of a (7) *Male* Child,
which is wholly dependant on your Petitioner for its
support, being deserted by the Father.

That (8) *George Perkins* is the Father of the
said Child, and was, when your Petitioner became
acquainted with him, a (9) *Green grocers Servant* at
(10) *108-110 Copenhagen St. Islington* and your Petitioner last saw
him on the (11) *20th* Day of (12) *May 1839*
and believes he is now (13) *Has no knowledge*

Petition documents, 1839.

Above: the pro forma petition of Elizabeth Longhurst.
Below: the interview transcript of Maria Matthews.⁷⁷⁶

⁷⁷⁶ Petitions: Rejected, A/FH/08/003/046/003, Elizabeth Longhurst, 1839; *ibid.*, A/FH/A/08/001/003/046/105, Maria Matthews, 1839. Note: For the nineteenth-century petition citations, I have put the name of the mother it could be ascertained. If not, I include the petition number at the end of the call number and/or the date.

When first acquainted with the F of her - and she was
 living with Mr. Cuthbert at Broadworth Hall
 near Doncaster and Mr. Barker was upon a visit there
 and subsequently Barker's Grocer - She had been
 with Mr. Barker 15 Months and when she first became
 acquainted with father it was two years last August
 in fact she knew him in London when she lived
 with the same family at North Tenace Brompton
 Court took place under a promise of Marriage
 at Broadworth Hall - she discovered her pregnancy
 in two Months but father had then left the Court
 took place in March 1838 - She remained at
 Broadworth Hall until July and then she left
 and came to her present Residence which is kept
 by her brother in law Mr. Howells by whom she is well
 Mr. Barker is a very kind gentleman and made enquiry

Nineteenth-Century Institutional Paternalism at the LFH:

This section of the dissertation aims to contribute to the feminist social history of the working classes in two ways. From a methodological standpoint, the findings show how interdisciplinary research can benefit social historians. It emphasises the value of integrating ideas and theories of various academic disciplines to uncover original and valuable insights. This particular venture is a history from below, written from primary sources, but it also draws on philosophy, literary theory, and sociology in its interpretation of the historical records. The small historiography of London Foundling Hospital applications has yet to illustrate fully the ways in which the petitioning mothers could use the procedures to help their cause, particularly with regard to the written petition and the in-person examination by the officials who held the

mothers' and babies' fates in their hands. While the evidence presented here illuminates the distress the mothers suffered, it also rebuts any suggestion that the petitioners were merely passive victims of their social or material circumstances.

Central to my approach is the notion of agency, particularly as wielded by the petitioning mothers who sought refuge for their children within the Hospital's walls. As defined by feminist theory and historical analysis, agency is a nuanced interconnection of past experiences, present circumstances, and future aspirations. Through a multidisciplinary lens drawing on Michel Foucault, sociologist Erving Goffman, and microhistorian Natalie Zemon Davis, I aim to elucidate how these marginalized individuals navigated the constraints of both institutional governance and societal expectations, leveraging the tools of their time to assert influence in an ostensibly rigid hierarchy. Thus, this chapter shows how tighter rules and the new focus on respectability in nineteenth-century London actually affected those on the ground who needed help. Through a meticulous examination of archival sources and interdisciplinary analysis, I endeavour to uncover the complex interplay between individual agency and institutional control in shaping the course of lives. It was in their *petitions* that these women spoke of their experiences and desperate plight, so these are the principal source. This analysis not only illustrates how petitioners negotiated the admission procedures in this period, but also provides tangible examples of how the institutional paternalism of the administration evolved and how it shaped the strategies adopted by subsequent petitioners.

Naturally, gender plays a major role in this study since it necessarily traces power dynamics and relationships between the sexes. Following Joan W. Scott, I see gender as a "primary way of signifying relationships of power."⁷⁷⁷ Gender roles not only set the power dynamics between the petitioners and the Hospital, gendered constructions of power also shaped admission policies at the LFH and other institutions. Men held leadership positions in and managed numerous British charitable organizations, including those dedicated to aiding orphans, unwed mothers, foundlings, and prostitutes. Thus, the regulations governing acceptable female conduct were largely shaped by male perspectives and women seeking assistance were obliged to conform to male expectations. The implementation of a rigorous admission procedure by the

⁷⁷⁷ Joan W. Scott, "Gender: A Useful Category of Historical Analysis," *The American Historical Review* 91 (Dec. 1986): 1067–69.

Hospital during the nineteenth century tracks the growing institutionalization of control over women's lives.⁷⁷⁸

Research on fertility practices and child-rearing indicates that working-class gender dynamics in Britain were significantly shaped by local customs, with notable regional disparities.⁷⁷⁹ In contrast, the middle and upper classes enjoyed a more cohesive and nationally oriented communication network, as seen in the previous chapter with notions of paternalism. The Hospital was mostly run by members of the middle class, who consumed the same literary works, periodicals, and educational resources, fostering a shared framework of values and behaviours that transcended regional boundaries.⁷⁸⁰ Communication within specific communities was characterized not only by social mores but also by collective participation in the socialization processes that reinforce particular rules, ethics, and expectations, as is seen with the nineteenth-century admission procedure of the Hospital.

In Foucauldian terms, institutions like the LFH utilized an “examination apparatus.” In *Discipline and Punish*, Michel Foucault explains the concept of the examination apparatus as a locus of power, functioning as a disciplinary mechanism that not only imposes norms but also categorizes individuals. The examination is “a surveillance that makes it possible to qualify, to classify and to punish. It establishes over individuals a visibility through which one differentiates them and judges them.”⁷⁸¹ Power produces “rituals of truth,” or a “general politics” of truth – which stem from the discourse that society accepts and validates – that enable one to distinguish true and false statements and the methods by which power is sanctioned.⁷⁸² The examination process authorizes normative judgments and facilitates surveillance. Whether in a criminal trial, religious institution, penitentiary, medical examination room, or within the confines of the LFH, the examination apparatus serves as a generator of both power and knowledge.

⁷⁷⁸ For more on this topic, see Walkowitz, *City of Dreadful Delight*, op. cit. Central to Walkowitz's thesis is the idea that narratives of sexual danger served to regulate and control women's behavior and mobility in public spaces.

⁷⁷⁹ Simon Szreter and Kate Fisher, “Love and Authority in Mid-Twentieth-Century Marriages: Sharing and Caring,” in *The Politics of Domestic Authority in Britain since 1800*, eds. L. Delap, B. Griffin and A. Wills (London: Palgrave Macmillan, 2009), 132-54.

⁷⁸⁰ Simon Szreter, *Fertility, Class and Gender in Britain, 1860–1940* (Cambridge: Cambridge University Press, 2010), 552; R. J. Morris, *Men, Women and Property in England, 1780-1870: A Social and Economic History of Family Strategies amongst the Leeds Middle Class* (Cambridge: Cambridge University Press, 2005), 342. W. D. Rubinstein, “Education and the Social Origins of British Elites, 1880-1970,” *Past and Present* 112, no. 1 (August 1986): 173-5.

⁷⁸¹ Michel Foucault, *Discipline and Punish: The Birth of the Prison* (New York: Random House, 1977), 184.

⁷⁸² Michel Foucault, *Power/Knowledge: Selected Interviews and Other Writings, 1972-1977* (New York: Pantheon Books, 1980), 131.

On the face of it, the LFH seems to realize a Foucauldian epistemology in its treatment of both mothers and children. The children were received into an institution which cut them off permanently from the outside world, including their biological parents, until the institution felt that they were ready to re-enter it (when they were apprenticed). Three times a year the Hospital's boys were permitted to take an excursion to Primrose Hill, but the girls were always kept within the hospital walls.⁷⁸³ As for the mothers, they had to undergo a stringent application procedure, where they were examined, validated, and judged against the administrators' "rituals of truth."

Foucault also provides a critical treatment of the language used to articulate the undeveloped and unspoken quandaries of Victorian sexuality. What Foucault has called the "discourse on sexuality" – discussion of the nature, definition, use and abuse of sexuality – is epitomized in the period looked at here.⁷⁸⁴ Power wielded by the Hospital's admission process exhibited societal expectations of that particular place (London) and time in history (Victorian era) and manifested what anthropologists would describe as 'boundary-keeping' problems, whereby what is defined as 'normal' or 'deviant' is continually refined and codified. However, this chapter will also establish how the mothers who applied to the Hospital manoeuvred the patriarchal application process by tapping into the "rituals of truth." But why would the mother undertake the daunting LFH application procedure in the first place?

The mothers who sought to have their children admitted to the Hospital were undoubtedly convinced that they would have better lives there than they would if they remained with their mostly-impoorished families, especially considering that Foundling children actually led rather privileged lives when compared to many of London's children. They had access to essentials like food, shelter, clothing, and education, as well as apprenticeship opportunities. Conversely, children in the poorest areas of the city faced high mortality rates and the risk of the workhouse, especially if Irish and Catholic.⁷⁸⁵ While to cajole the public the Hospital trumpeted its role in saving and improving the lives of children, its more discreet mission was to salvage the mother's reputation.⁷⁸⁶

⁷⁸³ Sheetz-Nguyen, *Victorian Women*, 105.

⁷⁸⁴ Michel Foucault, *The History of Sexuality: An Introduction* (New York: Pantheon Books, 1978).

⁷⁸⁵ Jessica A. Sheetz-Nguyen, "Calculus of Respectability," *op. cit.*, 32.

⁷⁸⁶ Sheetz-Nguyen, *Victorian Women*, 51.

The “Calculus of Respectability”

The Treasurer’s formal pledge in 1797 to rescue “penitent and unhappy Women” from “Vice and Despair,” one of the London Foundling Hospital’s stated objectives, underscored respectability as a pivotal criterion in assessing applicant mothers. ‘Fallen women’ seeking assistance had to demonstrate that they were *capable* of returning to a ‘respectable’ life, despite past misjudgments or momentary weaknesses. Sheetz-Nguyen demonstrates that “The Foundling Hospital Board of Governors, committee men, recommenders, and the working women who applied agreed on what constituted a respectable character.”⁷⁸⁷ But before considering how this was assessed at the Hospital, it is necessary to discuss the growing importance of the concept of respectability in nineteenth-century bourgeois society.

The rise of the ‘fallen woman’ motif in the nineteenth century was influenced by many currents, including reactionary responses to burgeoning proto-feminist movements championed by figures like Mary Wollstonecraft and Germaine de Stael. These movements advocated for women’s education, independence, employment rights, access to divorce with custody of their children, unsettling traditional gender norms, and alarming conservative opinion. Victoria’s ascension to the throne in 1837 further exacerbated this societal shift as she was emphatically deferential to her husband and celebrated in patriotic narratives as the epitome of domesticity. Meanwhile, the era’s art and literature were captivated by the allure of the fallen woman, symbolizing danger and moral transgression, while awakening a mix of prurient voyeurism and mawkish pity. Amidst widespread panic over issues like prostitution, legislative acts such as the Contagious Diseases Acts of the 1860s aimed to regulate and control perceived moral decay. The mystique surrounding the fallen woman, perpetuated by voyeuristic speculation and taboo fantasies, highlights the power of societal perceptions and the inherent ambivalence surrounding female sexuality. Yet, the stories and depictions of the fallen woman present only one perspective, often distorting and radically simplifying the reality of women’s experiences. The narratives emerging from institutions like the LFH offer a glimpse into the lived realities of women who were marginalized and stigmatized as fallen, providing a more nuanced understanding of their plight. However, it is crucial to approach these narratives critically, and

⁷⁸⁷ Ibid., 147.

read against the grain of the socio-sexual script that they were compelled to adhere to. The pressure to reduce life to trope came from both sides: the interrogating institution, and the performing petitioner, who had, with help from allies, to reshape reality to fit a familiar social and cultural script. Hence there is a lens in which we can get at the petitioner's stories. When we grasp this lens and the viewpoint it mandates, we can then read the refracted stories, back through it towards the real events that lens imaged.

When confronted by interrogative committees like that of the LFH, marginalized groups had to show that their conduct was compatible with mainstream morals. Waiting for marriage, or a proposal of marriage, to engage in sexual intercourse was not only the ideal but also the expectation of Britain's middle class in the nineteenth century. "Respectability" in this sense was "a creed and a code for the conduct of personal and family life."⁷⁸⁸ To be respectable was to exhibit prudence, restraint, and temperance, and to demonstrate a commitment to the ideals of self-help and the values of hearth and home. Additionally, to be respectable meant regarding sex – at least publicly – as a solely procreative act between married people. The concept of respectability may have owed much to the religious tenets of the evangelical revival, but it demanded secular social conduct in the shape of a respectable lifestyle. According to Peter Bailey, respectability "was considered a principal prerequisite for true citizenship."⁷⁸⁹

The social mores of the day, however, were not necessarily embraced by the working classes in practice (as shown below). This moral difference fostered a sharp social divide: the distinction between those deemed respectable and those who were not drew "a sharper line by far than that between rich and poor, employer and employee, or capitalist and proletarian."⁷⁹⁰ This distinction, however, was not a recipe for entirely separate cultures, for when a member of the lower orders – a tenant, an employee, or an applicant to an institution – craved the elite's indulgence he or she was expected to conform, outwardly at least, to the standards of bourgeois society. Thus, respectability acted as a powerful agent of cultural hegemony, with middle-class expectations dictating the conduct, real or professed, of the lower classes. It was a male-dominated hegemony. Virtuous women, especially mothers, embodied respectability in the

⁷⁸⁸ F.M.L. Thompson, *Rise of Respectable Society: A Social History of Victorian Britain, 1830-1900* (Cambridge Mass.: Harvard University Press, 1988), 251.

⁷⁸⁹ Peter Bailey, "Will the Real Bill Banks Please Stand Up?," *Journal of Social History* 12, no. 3 (Spring 1979): 338-339.

⁷⁹⁰ Geoffrey Best, *Mid-Victorian Britain* (London: Weidenfeld and Nicolson, 1971), 282.

private sphere, but in the realm of the Hospital, men took charge of discerning and maintaining respectability.

The “Rules and Regulations” of the Hospital stated that, before a child was admitted, “the previous good character and the present necessity of its mother, and the desertion of its father, must be enquired into.”⁷⁹¹ In his report of 1836 on the Hospital, John Wrottesley highlighted the importance, and great advantage, of the mother’s innate respectability and the capacity to regain it if relieved of her child:

The most meritorious case, therefore, would be one in which a young woman, having no means of subsistence, except those derived from her own labour, and having no opulent relations, previously to committing the offence bore an *irreproachable character*, but yielded to artful and long-continued seduction, and an express promise of marriage; whose delivery took place in secret, and whose shame was known to only one or two persons, as for example, the medical attendant and a single relation, and lastly, whose employers or other persons were able and desirous to take her into their service, if enabled again to earn her livelihood by the reception of her child.⁷⁹²

When Brownlow annotated and corrected Wrottesley’s report in 1857, he left this passage unaltered except for the deletion of the reference to medical attendants and relations. Moreover, the instructions issued to mothers in the nineteenth century stipulated that, “No person need apply unless she shall have previously borne a good Character for Virtue, Sobriety, and Honesty.”⁷⁹³ The Committee would refuse to accept the petitions of women guilty of past sexual indecencies, circumstances that could come to light when the petitioner was questioned or during the inquiry that now followed the receipt of almost all petitions.

By 1829, the first line of the interview transcript began with, “When first acquainted with the father,” inviting the applicant to present an account of her behaviour. While I assume that there was a set list of questions that the petitioner would be asked in the interview, no such list

⁷⁹¹ Admission Methods, A/FH/A/06/020/004, Rebuttal of Press Report (public statement by six Governors), 4 April 1829.

⁷⁹² Wrottesley’s Report, A/FH/M/01/014/001, 781, with annotations in 1857 by John Brownlow. Emphasis added.

⁷⁹³ Petitions: Admitted, A/FH/A/08/001/002/048, London Foundling Hospital, Instructions, 1839.

has been found.⁷⁹⁴ Therefore, I presume only that all petitioners were asked the same or similar questions since every petition recorded the same type of information throughout the Victorian period, including how the petitioner met the father, how long they courted, what happened to the petitioner once she was “seduced” – a term utilized in most interview transcripts – when and how many times they had sex, and what she did once she discovered she was with child.

After filling in the *pro forma* section of the petition and submitting it to the Hospital, the petitioner was usually called to an interview. How the petitioner framed her answers in her interview was key to securing her baby a place in the Hospital. It was clear that only a certain sort of narrative, one that demonstrated her essential innocence and potential to be restored to respectability, could ensure the acceptance of her child. To be “penitent” (to use the language of 1797), the entire truth had to be confessed; a full engagement with her guilt was expected. The tension between explicit acknowledgement (‘owning’) of her sin and the need to present as an unfortunate victim, a person capable of returning to respectability and usefulness, was present, unspoken, in almost every mother’s petition.

The General Committee strove to admit children of mothers they believed had not become pregnant as a result of sexual promiscuity or loose morality. Invoking the trope of the seduced woman, which would dominate successful petitions in this period, allowed petitioners to portray themselves as vulnerable victims who had been led astray by deceitful men, resulting in their moral downfall. The concept of seduction (and its female passivity) was deeply intertwined with notions of femininity, virtue, and morality and can be found throughout the sample, demonstrating the ways in which single mothers tapped into this trope as a means of navigating their precarious position. By presenting themselves as victims of seduction rather than as women who had willingly engaged in sexual relationships outside of marriage, petitioners sought to garner sympathy and support from the charity. This trope provided a narrative framework through which single mothers could assert their moral innocence and appeal for assistance in a society that often marginalized and condemned them for their perceived transgressions against traditional moral values. The trope was also evident in the late eighteenth century, as shown

⁷⁹⁴ Sheetz-Nguyen did not find any list of questions in her study, but she deduces from the uniformity of the interview accounts that there was such a list. Sheetz-Nguyen, *Victorian Women*, 12-13, 61, 65, 104-5.

above, but the notion of the wronged and innocent woman predominated in the nineteenth, replacing destitution and misfortune as the principal bases of petitioners' pleas to the LFH.

The Hospital's priorities can be deduced from the documentary evidence, even if much is obscured by the failure, in many cases, to record the reasons for rejection. The minutes of the General Committee stated merely that admission was denied where the baby "appear[ed] not to be a proper object of this Charity" – and rarely offered an explanation. The surviving petitions are more revealing when read in tandem with enclosed letters from employers, relatives, and others who supported the application, but the reasons for *rejection*, possibly involving a perceived lack of respectability, are not always evident. Despite this, the possible or probable explanation can often be deciphered, and the interview transcripts and brief notes made by a Hospital official are occasionally helpful. The following discussion is intended to shed light on the Hospital's attitude before turning, below, to showing that the mothers responded in ways that suggest agency.

The mother's lack of respectability, in a narrow view of the term, was rarely confirmed as the determining factor, but there are traces of evidence that it was of key concern. An examination of 23 rejected petitions from 1839 yielded *one* example of a woman whose sexual promiscuity was the almost certain cause of rejection: two of Elizabeth O'Neil's acquaintances spoke "in bad terms of the Petitioner's irregular habits" and said that the named father, allegedly away at sea at the time of conception, "cannot be the Father of the child," prompting Brownlow to interrogate the woman: "I sought another interview with the Petitioner, and subjected her to a close examination, when, although she still fixed the paternity upon Curtis, she admitted her intercourse with other men, particularly with a footman at the West end of the Town..."⁷⁹⁵ More typically, Mary Ann Walker's rejection was possibly attributable to her sexual misconduct, but this is not provable: Walker became pregnant with a mariner she encountered on the long – perhaps too long – sea journey back from Sydney, Australia; Brownlow's added note said "The Child above 12 months old. JB" – so the respectability issue did not arise because the child exceeded the age requirement.⁷⁹⁶

⁷⁹⁵ Petitions: Rejected, A/FH/A/08/001/003/046/076, 1839; Brownlow Report, n.d..

⁷⁹⁶ Petitions: Rejected, A/FH/A/08/001/003/046/009, Petition with Note by Brownlow, 1839.

Reasons for rejections can sometimes be inferred. In January 1839, Brownlow penned a letter to the Dundee Steam Company, seeking verification of Ann Henderson's allegation that on her journey from Dundee to London, she had been "conspired against" by crew members who gave her alcohol, "saying that it would keep away the sea sickness." Whilst she was "labouring under the effects of the spirits, and the motion of the vessel, Martin [the Master] took advantage of her helpless condition, and effected her Ruin."⁷⁹⁷ Henderson's story may easily have created unresolved doubts about her respectability for her baby was not admitted. A few months later, when Brownlow asked her employer about Ann Charlwood's assertion "that whilst in your Service she was seduced by your footman, George Edwards, who has deserted her," the response – that the footman was a "lad" of sixteen and that "she was more to be blamed than the boy as from her age & experience she ought to have been more guarded" – surely made rejection a certainty.⁷⁹⁸

The Governors asked how long courtships were before the mother fell pregnant, ostensibly viewing this as a gauge of the mother's promiscuity. The longer the relationship, the better. For instance, unsuccessful applicant Martha Banting felt "unable to name the father or his residence," implying the possibility that she was promiscuous.⁷⁹⁹ Ellen Sullivan was married but named Christopher Tucker, a "Labouring Man," as the father; this rejection could have been caused by her being married or by her apparent promiscuity, or both, but the Hospital note merely said "a married woman, rejected."⁸⁰⁰

Conceiving a child outside of wedlock prior to seeking admission to the Hospital for *another* unborn child was also regarded as grounds for disqualification as it suggested licentiousness on the part of the petitioner. Mary Leonard's application was rejected, according to Treasurer Pott's note, because "father [is] forthcoming & Petitioner having had an illegitimate child previously."⁸⁰¹ The alleged father of Maria Matthews' son, when pressed to contribute to his upkeep, said "he would have done so had he not considered that John Money a groom [also

⁷⁹⁷ Letterbook, A/FH/A/06/002/008, 347, Brownlow to the Dundee Steam Company, 16 January 1839.

⁷⁹⁸ Ibid., Brownlow to Abraham, 30 May 1839. Petitions: Rejected, A/FH/A/08/001/003/046, Abraham to Brownlow, 31 May 1839.

⁷⁹⁹ Petitions: Rejected, A/FH/A/08/001/003/046/045, Note by Pott, 16 January 1839.

⁸⁰⁰ Petitions: Rejected, A/FH/A/08/001/003/046/075, Note by Curtis, 24 July 1839.

⁸⁰¹ Petitions: Rejected, A/FH/A/08/001/003/046/046, Note by Pott, 10 January 1839.

resident there] was as likely to have been the father of it as himself.”⁸⁰² Accordingly, the recounting of sexual details in the interrogation evidently played a crucial role in the Hospital’s overall impression of the petitioner. It forced the petitioner into the position of a defendant in a criminal trial and wrung from her a confession for an act that was probably regretted but not necessarily regarded by her as morally wrong. Indeed, the admission of guilt (‘penitence’) was central to successful applications. Although, while a criminal suspect usually denies any wrongdoing, the mother has to work out a story about a forgivable sin. In this way, the LFH interrogation resembles the practices of Catholic penance more than those of the legal system. With genuine guilt comes the possibility of absolution. Many mothers were aware of this and tailored their presentation accordingly.

The decision-makers viewed those who had been in relatively stable relationships and those who reported promises of marriage more favourably than women who did not know the fathers well or, remarkably, even those who had been coerced into sex. Some, possibly aware of middle-class expectations, even claimed that they stopped having sex once marriage did not ensue. For example, in March 1839, Ellen Press (22), whose baby would be accepted, claimed that sex (the scribe called it “Con”) “only took place once.”⁸⁰³ One seventeen-year-old petitioner’s successful 1849 petition stated, “In the Course of 2 or 3 Months [the father] told her that if she would give herself up to him he would Marry her and in consequence Con took place in her Master’s kitchen and repeated 3 times when she refused to commit herself further. The last Con [sexual intercourse] was in April 1848.”⁸⁰⁴ Apparently, it was this “third” and “last” time when she realized she was pregnant.

⁸⁰² Petitions: Rejected, A/FH/A/08/001/003/046/105, Gilbert to Brownlow, 24 April 1839.

⁸⁰³ Petitions: Admitted, A/FH/A/08/001/002/048, Ellen Press, 1839.

⁸⁰⁴ Petitions: Admitted, A/FH/A/08/001/002/058, Ann A., 1849.

“He Seduced Me with a Promise of Marriage”

Formality of courtship was not exceptional in this period and was a reflection of a cautious, highly practical disposition that typified a respectable person of any class. The language was that of contract. Part of this period’s semantic formality included an expectation to keep one’s word. Promises were given and redeemed in a market of social exchange that was subject to its own tight rules. Solemn betrothal was apparently viewed, as it had been for centuries, as a significant commitment which permitted considerable intimacy.⁸⁰⁵ This was especially true among the working class, where most couples behaved initially as if pregnancy were a prelude to eventual marriage. Women seemed to have had permanent relationships in mind – this was certainly claimed in most petitions, where sex was often framed as pre-nuptial relations – when they indulged in sex outside wedlock. The sex act itself, ratifying the promise of marriage, was expected to strengthen an engaged couple’s relationship and move marriage along more quickly.⁸⁰⁶ Pre-marital sex could also bind in other ways, closing off alternatives, sealing obligations, warning off rivals, and constricting parental choice, so it could also be instrumental and strategic. No matter the sentiment, high rates of pre-wedding pregnancies all across Europe demonstrate that many who followed this practice eventually married their partners.⁸⁰⁷

At the LFH, each mother had to present information not only about her relationship with the baby’s father but also the context for her “criminal conversation,” the Hospital’s censorious term for sexual intercourse.⁸⁰⁸ Mothers had to admit to the frequency of sexual engagement and reveal the *locus delictius*.⁸⁰⁹ The conditions under which sex took place now mattered greatly to the interrogators (although some petitioners gave ambiguous answers). They would inquire whether the petitioner had received a promise of marriage and if she had given her consent to

⁸⁰⁵ For more on the importance of promises of marriage in Britain, see Susie L. Steinbach, "Promises, Promises: Not Marrying in England, 1780-1920" (PhD diss., Yale University, 1996).

⁸⁰⁶ Francoise Barret-Ducroq, *Love in the Time of Victoria: Sexuality and Desire Among Working-Class Men and Women in Nineteenth Century London* (Harmondsworth: Penguin, 1992), 113.

⁸⁰⁷ Anna Clark, *Women’s silence, men’s violence: sexual assault in England, 1770-1845* (London: Pandora, 1987), 84.

⁸⁰⁸ “Criminal Conversation” was a legal term that applied to adultery; however, the Hospital’s use of “criminal conversation” was used as a euphemism for sexual intercourse in general.

⁸⁰⁹ *locus delicti* (pl.) Latin term that translates to the “scene of the crime.” It is the place where offence or injury was committed or the place where the last event necessary to make the actor liable occurred, in this case, the sexual intercourse that resulted in pregnancy.

engage in sexual intercourse.⁸¹⁰ Given this question, it is not surprising that, in most successful cases, the petitioner relied on a promise of marriage, whether it was pronounced before intercourse or after. According to Sheetz-Nguyen, 82.14% of the successful petitioners she looked at in her 1842-92 study claimed there was a promise of marriage; an astounding rate when compared to the 23.26% of rejected petitions that claimed there was a promise of marriage.⁸¹¹ Those who could not make this claim stood a diminished chance of having their children admitted to the Hospital. In 1849, 67% of the accepted petitions in the sample claimed that there was a promise of marriage. This renders the occasional promise of marriage mentioned in eighteenth-century petitions insignificant by comparison.

Some of the love letters between petitioners and fathers were given over to the LFH and bound to the petitions, offering examples which reveal that the promise of marriage before intercourse was just not a female expectation. For instance, one father's letter included in a petition from 1859 is signed, "All my love to you my dearest Judy, I remain your true and devoted lover and soon husband."⁸¹² This is just one of the many endearments in letters from fathers who would later slight their lovers.⁸¹³ Premarital sex was evidently acceptable among working-class people if a promise was made by the man. So much so, that some men who found sexual resistance could resort to a promise of marriage to try and effect their purpose.

The prevalence of premarital sex with the promise of betrothal was so widespread at this time that it has become a recurring theme in contemporary historical fiction. Susan Edwards, a prominent author of historical romance fiction set in nineteenth-century England, explores tropes centred around seduction and breach of promise within her narratives. In her work, women are often deserted by their male lovers and their predicament is not always a case of a broken engagement after a long courtship; sometimes, it also involved instances where marriage was promised early in the relationship in order to secure a submission to intercourse.⁸¹⁴ The Magdalene asylums of the period were filled with women who were seduced under a promise of

⁸¹⁰ Sheetz-Nguyen, *Victorian Women*, 114.

⁸¹¹ *Ibid.*, 114-115.

⁸¹² Petitions: Admitted, A/FH/A/08/001/002/068/152, 1859.

⁸¹³ For more on the letters between petitioners and fathers, see Roberta Zanasi, "An Example of Writing as an Instrument of Agency: the Letters from the Mothers to the London Foundling Hospital in Victorian London," *TECA* 13, no. 7 (July 2023): 57-70.

⁸¹⁴ Cited in Kristen Renzi, "Archival Seduction: The Discursive Challenges of Reading Sex Crimes in the London Foundling Hospital Mothers' Petitions, 1807-1827," *Feminist Formations* 30, no. 2 (Summer 2018): 130.

marriage and then deserted by their lovers.⁸¹⁵ Some men fled shortly after receiving the news of pregnancy. One father's dismissive letter to his lover exhibits this well:

I write to you these few lines to let you know that I am now on the road for Gloster [sic]. I shall stay there all winter if all is well. Do not make yourself unhappy. There is plenty of nice young men in [H]olloway it is not in my power to make you happy if I was ever so willing. I never made you any promas [sic] that would cause you to le[a]ve your place.⁸¹⁶

Thus women encountered "obstacles to nuptiality... [I]t only required an unwanted pregnancy to jeopardise a courtship or put it to the test."⁸¹⁷

Nineteenth-century society, particularly in London, saw a number of changes that led to the breaking of promises of marriage and, as a result, the phenomenon of desperate women having recourse to the LFH. The traditional courtship pattern that tacitly allowed for sex between betrothed men and women operated well in flourishing economic times when young people stayed in the same communities and marriage was necessary for men to run family farms or artisanal households that depended on the labour of wives and children. But times of economic recession, like the last few years of the Napoleonic Wars and their aftermath, and again in the 1840s, meant that some men could not afford to marry and create new homes. In an 1866 letter to his fiancée, a gardener complained that the wretched winter weather put him out of work so that he became dependent on his brother to house and feed him. Penury thus made it "impossible" for him to marry his lover now that she was pregnant.⁸¹⁸ Economic circumstances created situations in which men and women had different needs with regards to marriage: while men deserted those they had promised to marry, women needed to marry for economic survival. Of course, an unmarried woman who bore an absconding man's child would have known that her marriage prospects were diminished, hence the need to surrender that child.

⁸¹⁵ Nicholas Rogers, "Carnal Knowledge: Illegitimacy in Eighteenth-Century Westminster," *Journal of Social History* 23, no. 2 (1989): 45, citing Stanley Nash, "Prostitution and Charity: The Magdalen Hospital, A Case Study," *Journal of Social History* 17 (Summer 1984): 619.

⁸¹⁶ Cited in Barret-Ducrocq, *Love in the Time of Victoria*, 142.

⁸¹⁷ Rogers, "Carnal Knowledge," 366.

⁸¹⁸ Petitions: Accepted, A/FH/A/08/001/002/075, 1866.

The Hospital's perspective on the promise of marriage must be considered, given how often that promise was described by petitioners. According to historian Steven Seidman, "Middle class Victorians accepted sex as a natural and positive part of human life" *if* it happened in "the proper sphere ... of marriage."⁸¹⁹ If sex outside wedlock was taboo for bourgeois society (implying that the lower and upper classes had different moral standards), it might be thought that betrothal brought no advantage to the applicant. If, however, sex after betrothal was *more* acceptable than sex without a betrothal, the application which referred to a promise of marriage had a better chance of success. Such a promise might not have made pre-marital sex entirely blameless – the talk of penitence suggests this – but it reinforced the idea that the young woman had been betrayed by a callous or weak-willed deception. She was more sinned against than sinner, and she appeared more *respectable* than a woman who acted without thinking of marriage and failed to prize her virginity. How readily women, wishing to tap into the dominant discourse of the day to manoeuvre middle-class prejudice, overstated their innocence and victimhood, not least by drawing attention to broken promises, is considered below.

Social Rehabilitation in a World Where Respectability Equalled Employment⁸²⁰

All petitioners were expected not only to have shown signs of contrition or regret, but also to let as few people as possible in on their shameful secret. The "Rules and Regulations" said that the Hospital would inquire into "whether the reception of the child, together with the secrecy observed as to the misfortune of the mother, will be attended with the consequence of her being placed in a course of virtue, and in the way of obtaining an honest livelihood."⁸²¹ The birth, ideally, "took place in secret" and the woman's "shame was known to only one or two persons" ("That her delivery and shame are known to few persons, being either her relations or inmates of the house in which the circumstances occurred"), and the Steward (or Inquirer) was "to make

⁸¹⁹ Steven Seidman, "The Power of Desire and the Danger of Pleasure: Victorian Sexuality Reconsidered," *Journal of Social History* 24, no. 1 (Autumn 1990): 51.

⁸²⁰ Sheetz-Nguyen, *Victorian Women*, 85. Full quote: The LFH "offered a stepping-stone to social rehabilitation in a world where respectability equalled employment."

⁸²¹ Admission Methods, A/FH/A/06/020/004, Rebuttal of Press Report, 4 April 1829.

secret inquiries as to the truth of the case disclosed” by the petitioner.⁸²² Domestic servants often concealed their pregnancy as long as possible to avoid loss of both employment and accommodation. Most of the successful Hospital petitioners in the nineteenth century gave birth in lodgings that were provided with the help of female former employers or their own families.⁸²³ Home births were extremely rare; they were “out of the question” for most unwed mothers “primarily because of the risk of discovery.”⁸²⁴ The petitioner who could rely on clandestine support from her family or employer who stood the best chance of returning to her former life and, therefore, of having her child accepted by the Hospital. In contrast, those who tried to go it alone (possibly due to shame or fear of being ostracized by their families upon discovery of their pregnancy), and who were consequently liable to have their fall known about, were normally excluded.⁸²⁵ Those who remained undiscovered in their disgrace escaped the stigma attached to giving birth outside marriage. In the words of an 1856 successful petitioner, “If you will kindly take [my baby] from me, you will save my character.”⁸²⁶ Social acceptance and undiminished prospects, not least in relation to future marriage, were at stake.

The return to “a respectable life” also meant retrieving the capacity to earn a living. Successful petitioners might regain their positions or find employment elsewhere. The Hospital was extremely interested in this prospect. It was implicit in the idea of restoring fallen women, and Wrottesley (later endorsed by Brownlow) described the wish to assist the woman “whose employers or other persons were able and desirous to take her into their service, if enabled again to earn her livelihood by the reception of her child.”⁸²⁷ The Inquirer’s reports sometimes referred to the likelihood that the mother could return to work. Robert Atchison wrote in 1812, for example, that Jane Blake’s employer “wishes to retain her, if she is relieved from her burden.”⁸²⁸ In 1831, the Steward (Dobbs) reported that Sophia Mills’s employer “allowed her to remain during her confinement and will still keep her if the child can be provided for.”⁸²⁹ The petitioners

⁸²² Wrottesley’s Report, A/FH/M/01/014/001, 779-81. Emphasis added. The Steward inquired when Wrottesley wrote in 1836, but various others later took the role and Brownlow altered “Steward” to “Inquirer” when he annotated the report in 1857.

⁸²³ Sheetz-Nguyen, *Victorian Women*, 103.

⁸²⁴ *Ibid.*, 42.

⁸²⁵ Weisbrod, “How to Become a Good Foundling,” 202.

⁸²⁶ Petitions: Admitted, A/FH/A/08/001/002/068, 1859.

⁸²⁷ Wrottesley’s Report, A/FH/M/01/014/001, 781.

⁸²⁸ Petitions: Admitted, A/FH/A/08/001/002/021/021, Report by Atchison, 1812.

⁸²⁹ Petitions: Admitted, A/FH/A/08/001/002/040, Report by Dobbs, 1831.

themselves stated the same, in notes like Eliza Petlove's in 1854 (the employer "will take me back if relieved") or at interview (Hannah Bence in 1859, "If relieved Mrs Wareing will take me back." Annie Pinner in 1859, "If relieved I purpose [sic] remaining with my mistress Mrs Bradley where I am now." James Twiddy reported that Pinner gave birth in Camberwell workhouse but "was taken thence by her present mistress, Mrs Bradley").⁸³⁰ By pledging to support women by maintaining their employment status, employers not only recognized the value of female labour but also acknowledged the societal need for a woman to maintain her respectability in order to work.

Letters of support from employers frequently made a commitment to keep (or rehire) women who managed to place their children into the Hospital's care. In 1837, domestic servant Elizabeth Burley's employer would "not hesitate to receive her again into my family being as I am perfectly satisfied that she repents of her misconduct which has no doubt driven her into the greatest trouble & distress," and Mary Linden's former employer "would readily receive her again in the same capacity."⁸³¹ In 1859, Pinner's mistress wrote that, "I have taken her back into my service believing her to be sincerely penitent."⁸³² Bence's employers clearly understood what was at stake: Mr Wareing confirmed that he and his wife were "quite willing and desirous to take Hannah Bence – hide her shame – as far as in their power... [T]he evidence of her fault can be kept from the knowledge of the world through your benevolent institution... [We] respectfully request your assistance in this painful case to save the child and mother from infamy if not destruction."⁸³³

The aspiration to facilitate the mother's return to paid work, and the secrecy which was deemed necessary to "hide her shame" as she re-entered her employer's home, reflected the new fundamental goal to rescue the mother as well as the baby, which was closely related to the question of respectability. Only a respectable young woman could be expected to rebuild her life in this way, and she could be restored if she were relieved of her child. It is an irony that, while in its formal existence (in the General Court and the General Committee), the Hospital paid no attention to the future lives of the mothers – no discussions or resolutions were devoted to their

⁸³⁰ Petitions: Rejected, A/FH/A/08/001/003/069/002, Note by Petlove, 1853. Petitions: Admitted, A/FH/A/08/001/002/068, Pinner, 1859.

⁸³¹ Petitions: Admitted, A/FH/A/08/001/002/046, References for Elizabeth Burley and Mary Linden, 1837.

⁸³² Petitions: Admitted, A/FH/A/08/001/002/068, Bence and Pinner, 1859.

⁸³³ *Ibid.*, Letter from John Wareing regarding Bence, 1859.

welfare – admission documentation shows considerable engagement with their restoration to useful and gainful employment and, implicitly, to living according to the moral values of the day.

Similar considerations likely influenced the Hospital’s usual practice of rejecting children born in the workhouse, particularly during John Brownlow’s tenure as Secretary. Such children may have been ineligible because they had a settlement, but it is also likely that the stigma associated with the workhouse undermined a mother’s perceived respectability and potential for rehabilitation. The Committee may have feared that bearing a child in the workhouse would jeopardize the secrecy crucial for restoring the mother’s reputation. Consequently, having a child in the workhouse significantly hindered a mother’s chances of securing admission for her child, as an “association with the workhouse would have marked her character with disdain.”⁸³⁴ As a result, petitioners frequently faced rejection when they lacked support from their families, employers, or reputable charities to obtain a subscription to a lying-in institution. With limited financial resources, many could not afford the services of a doctor or midwife, leaving them reliant on poor laws for assistance.⁸³⁵ So while mothers in the workhouse had significant needs, mere necessity was no longer considered a valid criterion for aid at the LFH; there was now a classist dimension of eligibility for assistance.

Workhouses were associated with a lack of respect; in 1871, Treasurer George Burrow Gregory called workhouse inmates “the lowest class, in whom the moral sense is very much deadened,”⁸³⁶ but these concerns were probably secondary to the fact that a child chargeable to the parish a child was automatically excluded from Hospital eligibility. In 1839, two children born in a local workhouse were rejected and the note on Charlotte Morrison’s petition merely said “Child chargeable to Parish of St Marylebone.”⁸³⁷ In the same year, an illiterate spinster, Mary Cure, was refused; the front of her petition simply stating, “Child born in Workhouse of St. Giles rejected.”⁸³⁸ Some years later, in 1857, Brownlow indicated that this policy had been changed. Wrottesley’s comment that “the petitioner shall not have made an application to any parish respecting its maintenance, or have been delivered in any parish workhouse” was deleted and Brownlow noted that, “It is not now insisted on that the child shall not be born in a parish

⁸³⁴ Sheetz-Nguyen, *Victorian Women*, 49.

⁸³⁵ *Ibid.*, 153.

⁸³⁶ Quoted in *ibid.*, 100.

⁸³⁷ Petitions: Rejected, A/FH/A/08/001/003/046/056, Note by Curtis, 12 June 1839.

⁸³⁸ Petitions: Rejected, A/FH/A/08/001/003/046/093, Mary Cure, 5 March 1839.

Workhouse. If the mother goes, or is taken, to a Workhouse in labour and leaves so soon as she well can afterwards, the workhouse is treated as any lying in Hospital, but if she resides there for some time before or after the confinement, the application is not entertained.”⁸³⁹ The timing of this change has not been traced, although this stipulation was absent from Brownlow’s 1858 *History* but is stated in his 1865 *History*. Maybe the decision to permit applicants who sought refuge in workhouses solely for childbirth was partly influenced by outside complaints, such as one voiced by a clergyman in October 1855.

Twenty-three-year-old Ann H. was a servant whose parents had died. Upon reading a recommendation letter of 1855 from a curate at St. Matthew’s, one cannot help but sympathize with her plight. The curate had found Ann and her newborn baby on the brink of starvation and suggested she take her baby to the Hospital. He then wrote to Brownlow promising that the church would take Ann in if she could leave her baby in the Hospital’s care. Despite this ecclesiastical support, the Hospital rejected Ann because she had given birth in a workhouse. Upon learning of this decision, the curate responded to Brownlow:

I was much grieved to find there was no hope of admission for the child of Ann H... Of course, I cannot pretend to remonstrate against the decision of the Committee but I cannot help observing that the ground for refusal does appear rather strange for she only went into the workhouse to be confined... [I]f she had one friend in the world no doubt she would not have gone there at all or at least would have left immediately.⁸⁴⁰

The subsequent change in policy came too late for Ann’s child and many who had gone before, and the exclusion of live-in workhouse mothers continued. The narrative of this petitioner not only underscores the significant evolution in the intentions of the Governors – contrast their rigid adherence to rules that narrowed the scope of the charity with the preceding century’s flexibility – but also highlights how power was wielded by the Hospital in its unwavering goal to help only those who could be reintegrated into respectable society. Accordingly, some of the most

⁸³⁹ Wrottesley’s Report, A/FH/M/01/014/001, 781.

⁸⁴⁰ Curate Richard Croft, St. Matthew’s Westminster, Letter to Secretary John Brownlow, October 24 1855, quoted in Sheetz-Nguyen, *Victorian Women*, 147-48.

impoverished petitioners often had the least chance of assistance. Ann was clearly bereft of resources and the above-mentioned Charlotte Morrison applied because she had “no way to feed her child or herself.”⁸⁴¹ Morrison signed an “x” for her name, meaning she was illiterate. Hence Thomas Coram and other founders’ original intention to provide a home for children in need without “preference to any person” was overtaken by a selective approach based solely on the behaviour and prospects of their mothers, not accounting for the mother’s or her child’s physical needs.

There were other ways in which the Hospital adhered to guidelines that denied access to needy children. As shown above, legitimate children were rarely accepted after 1800, and none were accepted after 1816. Even if a wife died in childbirth, or the death of a father reduced the family to destitution, the legitimate child was rejected. Moreover, a widower was not able to undergo the strict mother-only petition process, particularly after November 1815, when petitioners were informed that the mother of the child *must* be the petitioner unless satisfactory reason is shown to the Committee for a rare exception, thus excluding both illegitimate and legitimate infants whose mother may have died giving them life.

Upon meeting the rigorous situational criteria, the petitioner was subsequently tasked with navigating the LFH’s moral criteria, wherein a scrutiny of her past behaviour and future prospects as a virtuous citizen were subjected to a respectability assessment. Nevertheless, this study will demonstrate that despite the rigid constraints enforced by the nineteenth-century Governors, petitioners adeptly navigated societal expectations, rules, and conventions to negotiate their positions within the socio-cultural context.

An Argument for Agency

The fact that men made the major decisions in institutions like the London Foundling Hospital illustrates male hegemony in this paternalist society; however, the mothers were not entirely passive: for some at least, their depiction of themselves as helpless victims reflected the fact that they were *not* helpless victims, that they exercised agency as they sought (or fought) to

⁸⁴¹ Petitions: Rejected, A/FH/08/001/003/046/056, Charlotte Morrison, 1839.

save themselves and their babies. They were constrained, of course, for there is no doubt that they were under the thumb of the Governors' expectations. Social conventions made it so working-class women were economically reliant on men, rendering them vulnerable upon becoming pregnant as they lacked the means to sustain their offspring independently. Nevertheless, amidst the patriarchal structures and economic constraints, we can recognize resilience and resourcefulness exhibited by these women as they navigated their circumstances.

Petitioners were rejected for not meeting the Governors' expectations of virtue, offering us a window into middle-class ethics, but this study disagrees with the assumption that petitioners felt bound to tell the truth. There is a strong likelihood, even if the evidence is limited, that some petitioners bent or distorted the truth, or simply deceived, in order to satisfy the requirements of the Committee and have their children admitted. This dissertation maintains, in line with findings by historians Peter Bailey and Natalie Zemon Davis, and sociologist Erving Goffman, that the petitioners' testimonies before the Hospital Committee frequently involved elements of 'performance,' role-playing that could easily incorporate falsehoods, which were crucial before a powerful institution like the LFH. Historian Anna Clark is right to contend that, "Most of the unsuccessful petitioners were rejected for their unsuitable characters, not falsehood," but she is wrong to suppose that "the factual data from these petitions is quite accurate."⁸⁴² The Hospital's "Instructions" to would-be petitioners stated that, "Petitions must set forth the *true* State of the Mother's Case; for if any deception is used the Petition will be rejected, and the Child will not be received into the Hospital."⁸⁴³ Sheetz-Nguyen notes, "If they found the petitioner lied, the men dismissed the petitioner immediately."⁸⁴⁴ It is true that if they *found* that the petitioner was lying, they would dismiss her petition. However, Sheetz-Nguyen appears overly cautious when she later asserts that,

Mothers usually cooperated with the Foundling Hospital enquirer's review of their credentials in order to hide their shame and protect their child. Eventually, all the women who made their way to the hospital's gate tried to exert some control over

⁸⁴² Clark, *Women's Silence*, 78.

⁸⁴³ Petitions: Admitted, A/FH/A/08/001/002/048, Foundling Hospital, Instructions, 1839.

⁸⁴⁴ Sheetz-Nguyen, *Victorian Women*, 64.

their future. Nonetheless, all petitioners understood that truth telling during the hearing process was requisite for acceptance.⁸⁴⁵

Hence Sheetz-Nguyen does not connect her assertion of agency with the petitioner's ability to distort the truth, but petitioners only needed to *present* themselves as truthful. Sheetz-Nguyen does not delve into the various strategies that petitioners might use to feign truthfulness while being dishonest. This study seeks to do just that.

To be successful, the nineteenth-century petitioner required a basic grasp of societal expectations of respectability. Anna Clark admits that, "In order to gain aid from this institution ... unmarried mothers had to be able to present themselves in conformity with middle-class values," and, fortunately, "their class backgrounds ensured some familiarity with bourgeois moral standards."⁸⁴⁶ Unlike many of the eighteenth-century petitioners, although it must be acknowledged that the difference is of course not measurable or indisputable, nineteenth-century applicants did not come from the most impoverished segments of society. "Most sprang from respectable portions of the working class and the struggling lower-middle class..."⁸⁴⁷ Indeed, many were domestic servants, whose intimate familiarity with middle-class values and expectations enabled them to manipulate the truth about events that would prove extremely difficult to verify.

Petitioners who wished to present themselves in the best possible light also needed to have some idea of the Hospital's criteria and processes. Word about the Hospital did spread at the time. Women heard about it through various networks, "such as Queen Charlotte's Lying-In Hospital, Mrs. Marchmont at Urania Cottage, Mrs. Ranyard's Bible women, clergymen, employers and friends."⁸⁴⁸ Moreover, popular figures such as Charles Dickens attended charity events frequently and wrote about the Hospital in journals and newspapers. Consequently, word travelled fast about the institution and its work, especially among women in urgent need of help. It seems reasonable to conjecture that many petitioners knew which facts the Hospital's investigators would not be able to verify, making it difficult to share Sheetz-Nguyen's view that

⁸⁴⁵ Ibid., 134.

⁸⁴⁶ Clark, *Women's Silence*, 78.

⁸⁴⁷ Ibid..

⁸⁴⁸ Sheetz-Nguyen, *Victorian Women*, 86.

“few knew the details of the admissions policy.”⁸⁴⁹ Questions of detail aside, Hospital *policy* would have been widely known; Sheetz-Nguyen, discussing one petitioner, acknowledges that, “[Sarah] understood, if she wanted to succeed, she needed to prove her respectability to the committee.”⁸⁵⁰

A petitioner’s social networks could have informed her of the need to demonstrate unblemished respectability and, accordingly, that it would be best to claim her relationship lasted long enough to permit premarital sex on the promise of marriage. For every successful petitioner, there was a handful of rejected ones, meaning London harbored many women familiar with LFH standards. This would enrich their social knowledge, particularly within oral culture and among gossip networks, and no oath bound rejected women to keep the LFH admission procedure secret. Therefore, an applicant might know, for instance, that the Committee would ask her outright how many times she had sex and appreciate it if she replied that it was not frequent. The ability of petitioners to adhere to the Hospital’s preferences showcases their exercise of agency amidst their circumstances. However, while aligning with institutional expectations demonstrates their ability to navigate within the system, it is crucial to recognize the broader context of power dynamics. Petitioners made decisions but were constrained by external norms; this interplay highlights how individual choices are shaped by both internal and external influences.

The Hospital was clearly aware of the likelihood that some would withhold the truth when it issued this stern warning. Brownlow accepted that “it may be so” that “the Governors are liable to be deceived” and “imposed upon by deceiving persons.”⁸⁵¹ In reality, the Hospital showed a little flexibility – in 1859 James Twiddy, inquiring into the petition of Emma Francis, reported that “the facts, as stated by the petitioner..., are *substantially* true,” and the child was admitted⁸⁵² – but some mothers, in hope or desperation, may have resorted to conveying blatant falsehoods that would be hard to prove untrue.

⁸⁴⁹ Ibid..

⁸⁵⁰ Ibid., 111.

⁸⁵¹ Brownlow, *History and Design*, 38.

⁸⁵² Petitions: Admitted, A/FH/A/08/001/002/068/017, Emma Francis, 1859. Emphasis added.

An Exploration of Tale-Telling

In the carefully phrased petitions from almost two centuries ago, the petitioners often deployed the rhetoric of sentimental fiction in their tales of broken promises and broken hearts. This rhetoric was familiar to all, through chapbooks, ballads, storytelling, popular melodrama on the stage, and everyday conversation; even if many were barely literate, everyone had neighbours or relatives who could read the popular literature of the day, as “literate and illiterate interacted” continually.⁸⁵³ Shattered trust, a staple of such fiction, was the constant refrain of petitioners who attempted to prove that they were in a situation that was the closest thing to marriage besides marriage itself, until the moment of betrayal. For instance, in 1839, an illiterate 17-year-old “spinster” named Sarah Ann Best, the eldest of eight children (who had to take care of the younger seven because her parents were “unkind” to her and her “father was addicted to Drinking”), petitioned the London Foundling Hospital to take in her unborn child. She claimed that the father of the child had always desired to marry her, but her parents thought she was then “too young to be married.” In her interview, Best reported, “16 months after first acquainted [with the father,] he made love to her [courted her], promised her marriage and had a room for her at his own lodgings,” alluding to a long, significant, and substantive relationship. Yet, the Inquirer could only ascertain that the next-door-neighbour was courting her, but not for how long. Luckily, a “Mrs. Hampson who lives at No. 10 Margaret St., and who is the wife of a watchmaker, states that she has known the Petitioner from Infancy – recollects the man, Dukes, who lodged next door, and understood that he was courting the Petitioner + knows that he has left.” Mrs. Hampson went on to say the petitioner’s life was not one to envy and that she “has not had a fair chance.”⁸⁵⁴ The Hospital clearly agreed because they accepted her baby on the word of Mrs. Hampson. And in February 1849, Elizabeth Rogers claimed to have known the father, James Martin, for three years. After two years, he “proposed Marriage.” Then, “three months after he had proposed Marriage he seduced her.” She stated that sex occurred “by accident” when Martin took her to “a public House for Brandy and Water,” but she “solemnly swears” that sex was never repeated, emphasizing it was a one-time occurrence, although she saw him

⁸⁵³ Evans, “Unfortunate Objects,” 132-33.

⁸⁵⁴ Petitions: Admitted, A/FH/A/08/001/002/048, 27 Feb 1839.

“occasionally afterwards.” After this, she wanted him to maintain his earlier commitment and “asked him to marry. He said he did not know when he could.” Following this exchange, Martin left his residence, and Rogers never saw him again.⁸⁵⁵ Best and Rogers could have been telling the truth, or some form of the truth, or not. Nonetheless, their petitions are like those of so many others who used the common discourse of the period – the helpless woman cruelly mistreated by a wicked man after a substantive relationship – to highlight their victim-status in their tales. The existence of a pre-existing, committed relationship prior to the pregnancy served as a favourable aspect in a petitioner’s case, whereas casual liaisons would encounter disapproval. This speaks to the profound impact of the pervasive myths and fantasies associated with illegitimacy during the period: the Committee were more apt to believe both the drama of conflict between good (the wronged woman) and evil (the predatory male) and the face-saving alleged infrequency of the “criminal conversations,” even with no way to confirm any aspect of the tale. A petitioner who knew that frequent sex with her partner might alienate the stolid and righteous men of the Committee could easily shrink the truth about her number of sexual encounters. Perhaps Rogers was one of those petitioners.

Although illegitimacy was fundamentally an economic and legal issue, it allowed for a range of social discourses and their legitimizing frames. Such discourses related to the multiple meanings of family, marriage, and kinship, and necessarily embodied fluctuating ideas about genealogy, sex, and national identity.⁸⁵⁶ The conventions of the Hospital allowed the petitioner to distance herself from her own actions. In the words of Natalie Zemon Davis, “Turning a terrible action into a story is a way to distance oneself from it, at worst a form of self-deception, at best a way to pardon the self.”⁸⁵⁷ In the case of mothers petitioning the Hospital, and those helping them, it was probably more a matter of deception of those who would judge their applications, that is, of persuasion with as much deception as was necessary. All of the petitioner’s statements were constructed with the specific aim of convincing the Hospital to take the child; this agenda would influence the mothers’ narratives in key ways.

⁸⁵⁵ Petitions: Admitted, A/FH/A/08/001/002/058, 24 Feb 1849.

⁸⁵⁶ Jenny Bourne Taylor, “Nobody’s Secret: Illegitimate Inheritance and the Uncertainties of Memory,” *Nineteenth-Century Contexts* 21 (2000): 574.

⁸⁵⁷ Natalie Zemon Davis, *Fiction in the Archives: Pardon Tales and Their Tellers in Sixteenth-Century France* (Stanford: Stanford University Press, 1987), 114.

Both the LFH admission criteria and the stories mothers gave in their petitions demonstrate the power of melodramatic socio-sexual scripts. Later administrators often resorted to the trope of seduction and portrayed the unmarried mother as a victim of predatory males to explain births out of wedlock, influenced by literary convention and Christian belief. Had they not appreciated this expectation among their judges, petitioners might have been less inclined to adopt such framing for their narratives, as if they had some sense of the rules of engagement. Disadvantaged women were anything but simple or without hope.

Exertion of female agency, sexual or otherwise, was often veiled by a demure narrative. The women who figured in these LFH scenarios had to depict themselves as helpless victims to stave off the suspicion that they were sexual profligates. The Victorian bourgeoisie propagated the notion of women's lack of sexual agency, aiming to restrict women's sexual activity to procreation alone. In their efforts to conform to societal expectations and avoid social condemnation, petitioners often adopted these gendered stereotypes, perhaps recognizing their potential to sway opinion in their favour. This strategy is evident in the language recurrently employed in the petitions, which is not surprising given Brownlow's declaration in his *Guide to Charities* that the Hospital aimed to "restore to society females who have fallen the unsuspecting victims of seduction and subsequent desertion, and who are desirous of retracing their steps, and once more to become useful and virtuous members of society,"⁸⁵⁸ which is tantamount to a public statement that a public directive implying, "This is the story you must tell to win over your judges."

A large majority of the petitioners in this period cited seduction ("he seduced me") – and some spoke of "force" or drugging – placing the responsibility for the sexual act on the father. Tim Hitchcock describes this as the "cult of seduction" and Tanya Evans, drawing on different evidence, reaches the same conclusion as this study: that unmarried mothers seeking admission for their children were compelled to adopt a narrative of seduction, presenting themselves as passive victims of their seducers.⁸⁵⁹ Likewise, many petitioners, when describing how they met the fathers, claimed that in their first encounter the father "accosted" them, suggesting that the petitioner had been guided into her inappropriate actions by the man who had been aggressive

⁸⁵⁸ Brownlow, *A Guide to Charitable and Religious Societies*, 49.

⁸⁵⁹ Tim Hitchcock, *English Sexualities, 1700-1800* (London: MacMillan Press, 1997), 100, 105 ("cult of seduction"), 107, 113. Evans, "Unfortunate Objects," 128.

since they first met. This language was often employed by the women to help construct the image of themselves as victims. For example, a chambermaid at a house in Kensington, claimed:

I met Father in the summer. He accosted in the street on my way to run an errand with a fellow servant... He took particular notice of me and wrote asking if he could go walking with me...[A]fter nearly 6 months in Jan. '61 he seduced me after a servant's party – in my own pantry.⁸⁶⁰

At the time, the father of the chambermaid's baby was a residential student at Oxford. The petitioner worked as a servant in the Chalgrove house, over 10 miles, or a four-hour walk, from Oxford. So, it is likely that an Oxford student would have had no motive or way to enter the pantry without her actively letting him in, or at least inviting him to come from far to the servants' party. This detail is absent from the petition perhaps lest it suggest that the petitioner was partially complicit in her 'seduction.' This omission was wise, for the Governors accepted her child. This is not to deny that many of the petitioners were in fact pressured into sex, coerced, groomed, or even raped and these situations should not be taken lightly in my exploration of Victorian narratives and discourse.⁸⁶¹ Nevertheless, this example simply shows that a petitioner could highlight certain parts of the story in her petition – parts that place the onus on the male – more than those that indicate her own decision-making.

Tanya Evans, discussing *eighteenth*-century petitions, seems confident that the Hospital's verification measures were effective, so that "lies were often detected." She found that 7% of petitions surviving from that century were rejected because of lying.⁸⁶² But a sceptical reading of the mid-nineteenth-century petitions suggests more extensive deception, even if concrete evidence that mothers lied in their petitions and interviews is rather thin. Between truth and lies

⁸⁶⁰ Petitions: Admitted, A/FH/A/08/001/002/070, 1861.

⁸⁶¹ The sexual encounters reported by petitioners were often described as "seductions" in the Inquirer's reports, but coercion and rape might well have occurred much more often than is stated in the mothers' petitions. For more information on the discourse surrounding sexual assault and rape in these cases, see Clark, *Women's Silence*, Chapter 5.

⁸⁶² Evans, "Unfortunate Objects," 130, 149n23.

was a vast middle ground of fashioning and colouration. Lying by omission, which the chambermaid might have done, is especially difficult to trace. Because the Hospital rarely explained rejections, the instances of *confirmed* or even *alleged* lying were few and far between. None of the sampled petitions was annotated with a comment that the contents were untrue, and the General Committee's brief mentions of rejected applications were equally unrevealing. Successful liars who had their children accepted went undetected at the time and the historian cannot improve on the Inquirer's findings.

That so many women said they were promised marriage and had sex so seldom raises the suspicion that they were keen to satisfy the Hospital's known preference – but no-one in the 1839 and 1849 samples was accused of inventing such a tale, with only Elizabeth Woodroffe (1849) having “no promise of marriage” noted on her petition.⁸⁶³ Ellen Press' insistence in March 1839 that intercourse “only took place once” was possibly an understatement to preserve some vestige of respectability.⁸⁶⁴ Elizabeth O'Neil (1839) certainly did not tell the truth until Brownlow interrogated her and discovered her promiscuity “with other men.”⁸⁶⁵ Both Martha Banting (no father named) and Maria Matthews (allegedly *wrong* father named) might have tried to mislead the Hospital's officers in 1839.⁸⁶⁶ A decade later, Sarah Mitford claimed that she had “no means of identifying the father.”⁸⁶⁷ Mary Ridpath's application was refused, “no corroboration of Petitioner's statement being obtainable,” indicating concern about its truthfulness.⁸⁶⁸

If the Committee could not challenge a petitioner's statement her tale might be believed, or acquiesced in, as many successful petitioners learned. Rather than cite family members whom the Hospital might question, numerous petitioners alleged that their relationships were not known about by others. One mid-century petitioner claimed, “Father courted me and promised me marriage. This was unknown to my father and friends.”⁸⁶⁹ In 1866, another claimed, “The

⁸⁶³ Petitions: Rejected, A/FH/A/08/001/003/056/012, Elizabeth Woodroffe, 1849.

⁸⁶⁴ Petitions: Admitted, A/FH/A/08/001/002/048, Ellen Press, 1839.

⁸⁶⁵ Petitions: Rejected, A/FH/A/08/001/003/046/076, Brownlow Report, 1839. Perhaps, in the midst of the stressful circumstances, Press' inability to fulfill the expectations of her audience (despite her awareness of these societal norms) speaks to the immense pressure of the situation, rendering her compliance unattainable.

⁸⁶⁶ Petitions: Rejected, A/FH/A/08/001/003/046/045, Martha Banting, 1838; Petitions: Rejected, A/FH/A/08/001/003/046/105, Martha Matthews, 1839.

⁸⁶⁷ Petitions: Rejected, A/FH/A/08/001/003/046/045, Note by Pott, 16 January 1839 (Banting); Petitions: Rejected, A/FH/A/08/001/003/046/105, Gilbert to Brownlow, 24 April 1839 (Matthews); Petitions: Rejected, A/FH/A/08/001/003/056/013, Sarah Mitford, 1849.

⁸⁶⁸ Petitions: Rejected, A/FH/A/08/001/003/056/009, Note by Pott, 3 January 1849 (Ridpath).

⁸⁶⁹ Cited in Barret-Ducrocq, *Love in the Time of Victoria*, 94.

Father came as footman in December 1866 after 3 months he courted me and promised me marriage not known to the family.”⁸⁷⁰ Thus, in some cases, the LFH’s administration really had no way to verify a petitioner’s claims, perhaps false, and yet, despite the lack of corroboration, both of these petitions were accepted. In 1859, Maria Augusta Belson of Frimley claimed that she was engaged to be married to the father of her baby daughter on a specific day, July 16, but he died in June, only her mother “knew of [the] courtship,” her local clergyman was “ignorant of what has happened” and “I had letters from [the father] but they are burnt.”⁸⁷¹ She was sufficiently believed, as the child was admitted despite the story’s dubious credibility, likely because it adhered to the melodramatic archetype of the vulnerable and virtuous woman. One petitioner reported that the fellow servant she worked with “molested” her, “following [her] about the house,” until she “fainted” and “awoke to found [sic] myself pregnant.”⁸⁷² Whether the petitioner wished to dramatize the lack of control she felt in her relationship with the father, or whether she thought appearing completely powerless would help her case with the Committee, we cannot know. No matter the reason, the Committee took her account at face value, or was unable to challenge it, and accepted her petition.

One other observation seems relevant here. Once the *pro forma* petition was implemented in 1813, every applicant had to declare that her child was “deserted by the Father” and was asked to complete the phrase “and believes the [the father] is now _____.”⁸⁷³ The frequency with which this involved the claim that he had “Gone to Sea” or embarked on a specific ship or “gone to France” or “gone to America” or been sent to Australia, or sailed off to the West Indies or the Cape of Good Hope, or simply “disappeared” is remarkable, and suspicious.⁸⁷⁴ Although working-class male mobility was often high, it is also possible that mothers had no intention of

⁸⁷⁰ Ibid..

⁸⁷¹ Petitions: Admitted, A/FH/A/08/001/002/069/003, Maria Augusta Belson, 1860.

⁸⁷² Petitions: Admitted, A/FH/A/08/001/002/070, 1861.

⁸⁷³ Mothers were required to procure a petition form directly from the Hospital's Porter stationed at the Lodge. His observations, meticulously recorded in a logbook, included assessments of the petitioners' appearance, attire and demeanour, serving as criteria to gauge their respectability. Victoria Mills, “The Fallen Women and the Foundling Hospital,” pamphlet for *The Fallen Woman* Exhibition, Foundling Museum, London, UK, September 2015 – January 2016, 6.

⁸⁷⁴ Sheetz-Nguyen conducted an analysis of the reported destinations of fathers from the years 1842 to 1892. Her findings revealed that 36.2% were categorized as “unknown,” 24.2% relocated to other regions within the UK, 11.8% went to the continent, 9.3% emigrated to North America, 8.4% ventured to Oceania, India, or South America, 4.8% were situated in workhouses, prisons, or infirmaries, and 5.3% went to sea or the military. Sheetz-Nguyen, *Victorian Women*, Table 4.8: FH Fathers’ Destinations, 1842-92, 99.

helping find near-by men whose presence would mean rejection by the Hospital; many were probably less than truthful when they answered the question about the father's whereabouts, ensuring that he remained safely beyond reach. The writer of "Observations" in 1849 was convinced that the Hospital was regularly misled when "endeavouring to discover the Father":

There is no doubt that the greatest frauds have been committed upon the charity in this respect, and that in many cases the Father is not far off, watching the progress of his scheme for relieving himself of a burthen.⁸⁷⁵

That this point is directed against the errant father, rather than the mother, does not argue against the notion that it was the latter, the applicant, who was misleading the Hospital.

The attempt by petitioners to reconcile reality with the ideal can pose an epistemological dilemma for historians since it appears impossible to tell which mothers actually embodied the hegemonic concept of femininity esteemed by Hospital authorities. However, this can be circumvented by acknowledging that her actions may not stem from her possessing particular attributes, but rather from having access to mechanisms, techniques, and opportunities enabling her to align with those attributes or present herself as such. Clearly, whatever their real traits and actions, women tried their best to fit the mould. Thus, successful petitioners were not necessarily those embodying the normative ideal, but rather those who could convincingly portray themselves in that way. Perhaps, instead of striving to bridge the gap between representation and reality, we should view it as an opportunity for innovative analysis.

Society generally preserves the iconography that meets the expectations of the dominant discourse. In this way, the images acquire a dangerous stability.⁸⁷⁶ Particularly during periods of uncertainty, society remains steadfast in maintaining these stable conceptions. The domestic ideal of women was encouraged by grim facts of Victorian life: poverty, inefficient birth control, and frequent and hazardous childbirth. As the country entered the era of mid-Victorian prosperity, the

⁸⁷⁵ Observations on the Foundling Hospital, A/FH/M/01/049, supplementary notes, unpaginated.

⁸⁷⁶ Kenneth E. Boulding, *The Image: Knowledge in Life and Society* (Ann Arbor: University of Michigan Press, 1969), 79.

image of women did not keep pace. In the words of philosopher Kenneth Boulding, “As the world moves on, the image does not.”⁸⁷⁷

By donning specific attire, adopting particular body language, and adhering to etiquette norms, as well as emphasizing a good character in ‘feminine’ activities such as domestic work, petitioners could associate themselves with an image of respectability, actual shortcomings notwithstanding. This reading avoids treating the petitioners solely in terms of cultural representations and instead draws our attention to the social practices that underpinned the performance of respectability. Thus, an understanding of gender as performative needs to be accompanied by a recognition that an individual’s ability to undertake a particular gender performance requires access to the relevant script.

At the LFH, the script encompassed the view of man as the seducer of the innocent. In order to exert agency as a petitioner, one could not challenge this expectation. But the petitioner’s task was not to exonerate herself totally, for she had to confess guilt and show penitence, but to ensure that the man’s greater culpability and her *relative* innocence were understood. Because the father was primarily responsible for their sinful behaviour, and had now abandoned the child, the woman was justified in seeking assistance. This view would resonate with the Committee’s belief that a man is the protector/benefactor of women – or should be – and would conjure away any offensive image of the petitioner. However, it is difficult to *measure* the effect, to ascertain how successful these highly-crafted appeals in fact were, given that the reasons for most rejections (and admissions) were not recorded.

The most common characteristics of a winning tale included a disruption of older patterns of courtship, coupled with a convincing story of seduction. This may have been apparent to mothers petitioning to the Hospital, especially when one considers that the Hospital selected, amplified, and then projected their standards both back onto those women applying for its help, (successful or not) and to the rest of society (through pamphlets, publications, and newspaper notices), supplemented by gossip from women who underwent the application procedure at the LFH. Sheetz-Nguyen notes, “Word [of the LFH] had spread as far as Brighton, via small town vicars, who were among the recommenders that provided support for women in trouble.”⁸⁷⁸

⁸⁷⁷ Ibid..

⁸⁷⁸ Sheetz-Nguyen, *Victorian Women*, 86.

Thus, most petitioners had some idea of the Hospital's expectations when they first came to its doors to get a petition form.

This dissertation argues that the strategic use of the dominant discourse that plays on Foucauldian "rituals of truth" could be deployed by the petitioners, revealing the ways those with and without power related to the dominant discourse. This same recognition led Foucault to see discourse as having "tactical elements," which can leave room for strategizing and developing "identical formulas for contrary objectives."⁸⁷⁹ Hence the dominant discourse can become a "point of resistance and a starting point for an opposing strategy."⁸⁸⁰ Utilizing this tactic is one way in which the petitioner could stand strong in relation to the powerful. In this way, 'fallen women' could convince the Committee that they were respectable women who simply had a weak moment with an unscrupulous man who promised marriage. If an unwed mother could convince the Committee of her previous and hopefully ongoing respectability, she had a chance of success. She might secure a place for her child, ensuring its survival, and try to reconstruct her own life in a society where being an unmarried and a mother was very hard indeed. Still, it is crucial to acknowledge the somber reality: mothers faced the agonizing decision to surrender their children, a profoundly distressing experience to say the least. Note the larger lesson: the prospect of having a child you are unable to provide for was a worse fate than losing it, probably forever, to the LFH.

I now explore the complex mechanics of the cult of sensibility and the inherent detachment between the petitioner and the Committee, elucidating how this disconnect offered the petitioner a strategic avenue to leverage the deeply ingrained piety associated with traditional beliefs. One may object to the arguments presented here on the basis that some women candidly confessed to sexual acts that could not have impressed their benefactors and openly declared there was no promise of marriage before the "Criminal Conversation" took place, which dispensed with the courtship formalities of the time. For instance, one petitioner admits, "He did not promise marriage until after Con..."⁸⁸¹ However, perhaps because of the Hospital's known policy, these admissions, perhaps due to excessive naivety, were rare. As Françoise Barret-Ducrocq put it,

⁸⁷⁹ Foucault, *The History of Sexuality*, 101.

⁸⁸⁰ *Ibid.*, 100.

⁸⁸¹ Petitions: Admitted, A/FH/A/08/001/002/048/027, 1839.

promise-free petitioners “are certainly – judging by the petitioners’ confessions, at least – a very small band.”⁸⁸²

The LFH was typical of Victorian society, where the idea of respectability could be utilized as a defensive device, since knowing and saying a few ‘passwords’ about respectability – about betrothal, or female innocence – might, as Peter Bailey put it in a very different context, “secure immunity from the badgering of middle-class charity workers.”⁸⁸³ The middle and upper classes did not always take into account the likelihood that respectability was practised in the bubbling London centre in a more limited and situational sense than that of a permanent code of values. In this way, respectability was an assumed role as much as an ideology, where societal mores established discourse. Thus, the petitioner had the opportunity and power to craft a version of reality which suited her needs and also tapped into dominant rhetoric.

Navigating Social Constructs & Individual Agency (Inspired by Natalie Z. Davis)

Working-class Londoners knew what behaviours were expected of them and role-playing would not have been difficult, but trying to seek out the true intentions of historical agents is hard. It is therefore useful to turn to other academic disciplines for help. Sociologist Erving Goffman’s concept of role distance provides a model that helps us to appreciate the performance put on by desperate women who felt they were out of other options. Here is Goffman’s argument, applied to this context: in the interests of social practicality, a social actor (the mother) can perform a role (respectable woman) with sufficient conviction to meet the expectations of the role-other (the London Foundling Hospital).⁸⁸⁴ Goffman argues tellingly that role-playing is especially prevalent in relationships between social actors in situations governed by a strong

⁸⁸² Barret-Ducrocq, *Love in the Time of Victoria*, 95.

⁸⁸³ Bailey, “Will the Real Bill Banks,” 343.

⁸⁸⁴ When Erving Goffman refers to “social practicality,” he is discussing the ways in which individuals navigate social interactions and present themselves to others in order to achieve certain practical goals or maintain social order. This concept encompasses the various strategies people employ to manage the impressions they give off and the roles they adopt in different social settings, all with the aim of effectively functioning within society. Essentially, “social practicality” refers to the pragmatic considerations and adaptive behaviours individuals engage in to navigate social situations and meet their needs within the context of societal norms and expectations.

authority structure.⁸⁸⁵ The petitioners, cognizant of the stereotypes their social superiors anticipated, could adeptly role-play. This perspective offers a captivating insight into the petitioners, showcasing their adept ability to navigate their circumstances through subtle manoeuvring. Moreover, a comparative analysis between historian Natalie Zemon Davis' research findings and the narratives found within the Hospital petitions unveils a rich tapestry of negotiation, further accentuating the agency wielded by petitioners.

Natalie Zemon Davis' *Fiction in the Archives* (1987) was the forerunner and inspiration of this chapter. She has extracted stories of everyday life from archival documentation and placed them within the context of larger social and cultural patterns. She discusses hundreds of "pardon tales," crafted accounts of the circumstances which attended the commission of the crime of murder in sixteenth century France.⁸⁸⁶ These narrative stories were mixed with elements of formal, judicial speech, and designed to conjure the dispensation of the sovereign's grace, in other words the remission of the punishment that would otherwise have been incurred, death by execution.

In the first place, the "letters of remission" or "pardon tales" – pleas for the King's pardon – that Davis studied are similar to the petitions featured here. The letters "are one of the best sources of relatively uninterrupted narrative from the lips of the lower orders ... in sixteenth-century France."⁸⁸⁷ The same might be said of the LFH petitions between their first appearance in 1763 and 1914 (after which year they are closed to researchers).⁸⁸⁸ Some may argue that the petitions are more faithful to the words of the mothers, given that those who helped the often-illiterate mothers to write their petitions likely knew them. Davis says the royal notaries based their narratives more on storytelling convention and the discourse of legal and political life than on the experience of the supplicant. But the core of each letter remained in the latter's own words – it stayed "close to the recital of the pardon seeker, [reflecting] the supplicant's own language

⁸⁸⁵ James J. Chris, "Role Distance and the Negational Self," in Greg Smith, ed., *Goffman and Social Organization: Studies in a Sociology Legacy* (New York: Routledge, 1999), 65.

⁸⁸⁶ Most concerned murder, but other crimes ("the exceptions") did feature as well. Davis, *Fiction in the Archives*, 7.

⁸⁸⁷ *Ibid.*, 5.

⁸⁸⁸ Documents in the LFH archival collection are closed for a period of 110 years from the last date in the register, in the interest of protecting living individuals' confidentiality.

and ordering of events”⁸⁸⁹ – and it may have told the truth more accurately than the mothers did in their petitions.

Davis’ microhistory tries to peel away the informational value of the primary documents in order to focus on the evidential qualities of the discourse implicit in the petitioners’ narratives. In doing so, Davis shows how it is possible that petitioners embedded social and cultural reference points in a complex narrative discourse particular to their immediate environment. This historical method can provide a nuanced understanding of a letter writer’s intentions and inspirations, and sheds light, also, on the priorities of the intended audience, the French King and his magistrates. Similarly, the reading of LFH petitions as narrative discourse (storytelling) is integral to their historical interpretation. In both cases, the intention of the petitioners and their supporting collaborators was to *persuade*. Davis wrote of “a story establishing his innocence in a persuasive drama of words.”⁸⁹⁰ The literary or rhetorical quality of the Hospital petitions was less obvious, but, nevertheless, when working-class behaviour did not align with the standards of elites, mothers and their allies crafted their accounts according to the expectations of their judges, to demonstrate their respectability and present themselves in the best light possible. As a result, petitions from the nineteenth century exhibit significantly greater uniformity compared to those from the eighteenth century.

More is involved here than simply casting the discussion of the LFH in different terms. Davis’ purpose, as outlined above, does not embrace an appraisal of the pardon-seekers’ truthfulness in relation to the details of the crime they committed. She occasionally expresses doubt about their tales, pointing out, for example, that a murderer would be tempted to deny taking a weapon to the scene, and would refrain from mentioning a previous feud, both of which would imply premeditation and probably cause rejection; there is no doubt these were “self-interested recitals by people with bloody hands.”⁸⁹¹ But Davis is more interested in learning about the social context that shaped the narrative than uncovering the truth of the stated facts. One reason for her apparent acceptance of the latter – “the artifice of fiction did not necessarily lend falsity to an account”⁸⁹² – is her appreciation that “verisimilitude” (the appearance of being

⁸⁸⁹ Davis, *Fiction in the Archives*, 20-21.

⁸⁹⁰ *Ibid.*, 97.

⁸⁹¹ *Ibid.*, 5, 17, 94. Other untruths (or notable omissions) are mentioned in *ibid.*, 23, 92.

⁸⁹² *Ibid.*, 4.

true) made success more likely, and one way to ensure this was to stick as closely as possible, without self-incrimination, to the truth.⁸⁹³ The quality of verisimilitude was equally beneficial at the Hospital, of course, which, in turn, has made the mothers' lies so difficult to detect. Another factor which may have made Davis' petitioners more truthful was the rigorous *testing* of the account in court:

One presented oneself humbly to the judges, bare-headed, on one's knees and with imploring hands. The kin of one's victim were supposed to be there, too, if they were nearby. The letter was read aloud, and one swore it contained the truth and begged to avail oneself of the king's grace. Soon after, the judges asked questions and encouraged a long recital of answers to see whether they conformed both to the story one had told the king and to information collected during one's trial or flight. And then, ordinarily as a prisoner, one waited anywhere from a few weeks to many months, while relatives of the deceased had their chance to claim that the [supplicant's] letter of remission was full of loopholes and lies, while local witnesses were questioned about the matter and about one's past "good life and conversation," and while the king's attorney formulated his opinion.⁸⁹⁴

This was a much more rigorous and truth-testing process than that of the LFH, where the Inquirer approached (by letter or visit) individuals identified (effectively *nominated*) by the *petitioner*, "credible persons" who might or might not have known the intimate secrets of the courtship.⁸⁹⁵ Moreover, the result of lying in the remission request was even more compelling – a death sentence – than the dire consequences of being adjudged dishonest by the Hospital.

Finally, petitioners might have found validation in the acceptance of their children into the Hospital and utilized role-playing as a form of repentance. In other words, their acknowledgment of premarital 'sin' could serve as a strategy for self-redemption. Michel Foucault discusses the

⁸⁹³ Ibid., 89.

⁸⁹⁴ Ibid., 11.

⁸⁹⁵ "Credible persons" was the hopeful expression used by the Hospital. Admission Methods, A/FH/A/06/020/004, Rebuttal of Press Report, 4 April 1829.

confessional ritual: “a ritual that unfolds within a power relationship, for one does not confess without the presence (or virtual presence) of a partner who is not simply the interlocutor, but the authority who requires the confession...”⁸⁹⁶ As in any legal proceedings, the truth-value of the testimony of the petitioner is paramount.⁸⁹⁷ The story of the petitioner needed to confess to the alleged ‘crime;’ those who did so had a higher rate of success.

* * * * *

This study has provided an overview of how the London Foundling Hospital moved from a completely clandestine application procedure, focussed on child-saving, to one in which stringent examination of the child’s mother trumped any concerns about the child’s wellbeing. The changes in the petitioning process illustrate how the Governors were projecting their own class values onto the women, who had a much more pragmatic attitude to sexual morality and mores. Pregnancy among the London poor did not necessarily mean social disgrace, but it did mean economic disaster. Hospital policy in these later days reflected the public perception that the very act of bearing an illegitimate child – in whatever circumstances – was shameful. The mostly middle-class Governors began to adopt less tolerant attitudes, reflected in this new application process.

The *first* admission change went from “first come, first served” to a lottery. This move was simply a result of too many mothers needing the LFH’s help because they were afflicted by poverty, urbanization, over-population, and a volatile economy. Maternal petitioning, initially little more than a strategy to minimize entries after the General Reception, provided the Governors, almost accidentally, with the kind of information required for modern case work.⁸⁹⁸ I contend that by the 1830s, the admission process had cemented its calculus of respectability, with

⁸⁹⁶ Foucault, *The History of Sexuality*, 61-62.

⁸⁹⁷ In Foucauldian terms, “truth-value” refers to the idea that truth is not an objective reality waiting to be discovered, but rather a product of power relations, social constructions, and historical contexts. Truth is not something that exists independently of human interpretation, but rather is shaped by discourses, institutions, and the exercise of power. Foucault argues that different groups or individuals may have different truths, and these truths are often used to assert authority, justify certain actions, or marginalize others. Therefore, truth is not fixed or absolute, but rather contingent on the prevailing discourses and power structures of a given society.

⁸⁹⁸ McClure, *Coram’s Children*, 164.

its origins traceable to the groundwork laid in the 1790s. While “Restoring the mother to a course of Industry and Virtue” became the second acknowledged object of the LFH in the nineteenth century, in reality, it became the primary object and the mother’s essential innocence was the principal theme in every story

As the mothers who petitioned the Hospital were guided by Committee instructions and expectations, all petitions related the same sequence of events. By firmly eschewing the unacceptable excuses of drunkenness, poverty, and promiscuity, in a petition, the mother, like the accused in Davis’ study, could play into a socially constructed narrative, one that would give her child a better chance of acceptance into the Hospital, deceiving the Committee to some degree, if needed. To succeed in this, petitioners deployed the language of humility, repentance, and deference. This performance was enabled by a petitioning process which rarely pursued a different line of inquiry (it is ironic that the structured procedures imposed by the LFH’s nineteenth-century concept of institutional paternalism ultimately hindered the institution’s objectives). The petitions are chock-full of discourse that manifests mothers’ understanding of the Hospital’s ways and priorities, and of the values of respectable society, giving these historical actors a chance to exercise agency even when their autonomy was constrained by the desperation driving their actions, the looming threat of judgment, and, looking back, the deeds of untrustworthy men who could determine their futures and duck the consequences.

LFH petitioners aimed to persuade the Governors that by admitting their infants, they could reclaim their societal standing and regain moral respectability. Unlike the varied petitions in the eighteenth century, their nineteenth-century counterparts portray women of respectable standing who experience downfall due to abandonment by the fathers of their children, in some cases coupled with financial hardship or loss of family support. By this point, the narrative of the fallen woman was so pervasive in Victorian society, petitioners could employ elaborate details, symbols, and allusions that aligned with societal expectations. So, despite the tightening procedure of the Hospital’s investigation process under John Brownlow, amidst the diversity of situational contexts, petitioning women could manipulate the strictures of the social order so as to preserve what Goffman would identify as a kind of second-order self-realization and autonomy.⁸⁹⁹ Subscribing to conventional ‘fallen woman’ tropes, a petitioning mother could

⁸⁹⁹ Erving Goffman, “The Nature of Deference and Demeanor,” *American Anthropologist*, 58 (1956): 501.

negotiate survival for both her and her unborn child. To benefit their own situation, petitioners perpetuated the dominant Victorian gender roles of the day. Moreover, the LFH Committee probably *wished* narratives to be truthful as they did not want to see their philanthropy discredited by their admitting children born to women of ill-repute.

Finally, discussions of working-class women should not generalize their experiences. Success for a mother in this situation was measured by the admission of the child, and the mother's relief of responsibility, events we might consider tragic today. While it is important to continue to write history from below, we must recognize that homogenizing women's personal experiences is almost as unhelpful as failing to recognize their long exclusion from the historical record.

Conclusion

This dissertation offers a comprehensive exploration of the London Foundling Hospital's evolution from its inception in the mid-eighteenth century to its maturation as the "ornament of the Metropolis" in the nineteenth century, utilizing its admissions policies and practices as a prism through which to examine the motivations of its Governors and the actions of those subject to their decisions.⁹⁰⁰ Based largely on primary sources, it traces the intricate interplay between societal attitudes, institutional objectives, and individual agency within a major British charity.

It has been shown that militaristic ambitions played almost no role in the institution's founding mission: this motive barely featured in the public and private words of Thomas Coram and, except for a short-lived interest in merchant marine placements, had no impact on career-destinations until the early years of the next century. Those who cite military ends – which feature again in a Foundling Museum display at the time of writing – overlook the fact that the Hospital despatched barely a single boy-soldier or -sailor during such major conflicts as the Seven Years War, the American War, and the French Revolutionary War, when another charitable body, the Marine Society, was putting thousands of boys into the Royal Navy. Instead, the founding and governance of the Hospital were driven primarily by paternalism, grounded in genuine compassion for disadvantaged children. The Hospital's original leadership remained steadfastly focused on providing care and support to vulnerable infants.

The archival evidence required a new concept to elucidate the distinct form of paternalism animating the LFH. Consequently, the term "institutional paternalism" was coined to encapsulate the intricacies of the paternalistic practices of a particular charitable society in Georgian and Victorian Britain. This designation aptly captures the multifaceted dynamics of power and identity inherent within the Hospital. It hopes to contribute to a deeper understanding of the intersecting forces that shaped the lives of marginalized individuals and the institutions designed to assist them.

At the Hospital, there was a notable move from the conventional paternalism of the eighteenth century to nineteenth-century *institutional paternalism*, marked by a greater

⁹⁰⁰ During the 1834 Poor Law debates, Lord Chancellor Henry Brougham identified the LFH as the "ornament of the Metropolis." Quoted in Sheetz-Nguyen, "Calculus of Respectability," 13.

awareness of pressing social issues. Indeed, the paternalism of the Hospital was markedly different from the traditional, rural phenomenon that had inspired English charity since Tudor times. In London, with the Hospital a prime example, some charities were major enterprises; they were not small and localised, nor did they depend on the patronage of the landed gentry. The great London charities were led by mostly bourgeois men, their size was commensurate with the scale of urban poverty, and they ran as efficient, rules-based bureaucracies. Different from the “parochial paternalism” of Old England, this was the “institutional paternalism” of the great city charity. This form of paternalism was evident from the beginning, but Hospital procedure was systematized and made more regular and predictable as time passed, so that the term “institutional paternalism” became ever more consistent and bureaucratic as the eighteenth century transitioned to the nineteenth. The ethos was sufficiently robust to ensure the survival of the Hospital when, in Victoria’s reign, many turned to *laissez-faire* and to the market, rather than to charity, to resolve the problems of poverty. Paternalism – the big-city version that was institutional paternalism – harnessed Christian benevolence and sustained the Hospital throughout the nineteenth century.

The evolution of the admissions process, from experimental approaches to the establishment of a “calculus of respectability,” reflected broader societal shifts toward moral judgment and social control. When the Hospital opened, it attempted to admit all children whose parents were unable to support them. The initial aspiration was to meet the demand, but the administration soon realized there were more seekers than spaces, and implemented a balloting system to ensure equal opportunity for anyone bringing in a child (1742-1756). Then, during the General Reception (1756-60), Parliament assumed responsibility for the financial support of any British child brought to the Hospital. The practice was seen as a failure, but this study is the first to argue that, despite its failings, the General Reception was indeed the manifestation of Thomas Coram’s initial hope for the LFH. This study sees the scheme as the Hospital’s admirable but vain attempt to realize the founder’s dream. Gradual changes to admission procedures from the 1760s to 1800 slowly produced more restrictive policies. First, in 1768, came the petition requirement, when impoverished individuals, usually mothers but not exclusively, were required to present their cases individually to the LFH. The admission of parish children from 1767 was also a radical departure, even if it did sit well with the original intention to assist every suffering child. The next twenty years saw changes to admission policies – both formally and in practice.

Then, in the 1790s, a mother's character and ability to go back to work became key to a petitioner's success. The declaration of "twin objects" (saving both mother and child), in February 1797, laid the foundational principles that would set the stage for developments formalized in the nineteenth century.

Immediately before and after 1800, the Hospital underwent a revitalization, achieving financial stability, assisting a larger number of children, breaking ties with parishes, and adopting a more consistent, less capricious admissions process. There was, however, no return to the ambitious approach of the founders. Rather, a rigorous selection procedure focused on rescuing fallen women – unwed mothers – as well as their children. The resolution of June 1801 stated that the "principal object" of the Hospital was now "the maintenance and support of illegitimate children." The following years saw this policy confirmed in practice, with few exceptions over the next 15 years, and with no legitimate children at all admitted after 1816 – despite a major effort in 1850 to reverse this momentum and open the Hospital to legitimate orphans. The repercussions for mothers emerged rather less visibly.

After 1800, as the Hospital navigated the spirited cultural milieu of the nineteenth century, it adapted its policies to mirror changing attitudes toward poverty, morality, and social responsibility. While guided by paternalistic principles, the institution grappled with the tension between its charitable objectives and the societal expectations imposed on marginalized women. In the first decades of the century, the focus on the mother's reputation had yet to crystallize. The "calculus of respectability" was just beginning to emerge among the Hospital's leaders. By 1830, it was fully established and the result was a marked change in the nature of the mothers' petitions. The variety of mothers' circumstances evident in eighteenth century applications, even if *destitution* was the dominant theme, gave way in the next century to a single, dominant story, that of the unwed but otherwise respectable (and now penitent) mother betrayed by her lover. To navigate economic hardship and social stigma, mothers could strategically frame their narratives to align with prevailing notions of respectability and virtue. In the face of tightening procedures at the Hospital, petitioners tapped into melodramatic narratives that aligned with cultural expectations of fallen women, allowing them to negotiate survival for themselves and their unborn children. By adhering to Victorian gendered conventions as they advanced their petitions and strategically selecting narratives that would be difficult for the Hospital authorities to verify, these mothers maintained a semblance of self-realization and autonomy within the constraints of

their circumstances. Still, the new nineteenth-century admissions criteria, specifically the calculus of respectability, caused the Hospital to restrict its intake, leading it to exclude some of the neediest women and children. While talk of betrayal or abandonment of Coram's vision may be dramatic, it is likely he would have bemoaned the admissions procedure a century after his death.⁹⁰¹

The history of the LFH serves as a microcosm of broader social and cultural changes, highlighting enduring tensions between compassion and control, charity and judgment, within the realm of philanthropy and welfare provision. As scholars continue to explore the legacies of past institutions and their impact on contemporary society, they must grapple with the complexities of their histories and the voices of those who shaped and were shaped by them. This examination of the LFH's institutional policies and administrative changes over a century has uncovered long-term patterns, trends, and disjunctions that illuminate practices, cultural conventions, and attitudes as they developed, established, and evolved. The changes to the admission process here reflected shifting charitable attitudes that mirrored London's evolving society, enriching the history of children, motherhood, parenting, and philanthropy.

This study, at the outset, had intended to develop our understanding of the mothers who sought assistance from the Hospital in the nineteenth century. The need to put the Hospital of that era in context, to explain the turns taken in the charity's middle age, led to an examination of change over time during both eighteenth and nineteenth centuries – going back, indeed, to the founders and the original purpose of the institution. This broad scope has left room for more nineteenth-century analysis. The eighteenth-century story, which stars the famous Thomas Coram, William Hogarth, and George Frideric Handel, and saw radical shifts in policy and fortune, has attracted the interest of many historians. For the subsequent century, characterized by relative stability within the charity, there remains a wealth of historical terrain ripe for exploration. Even amidst less overtly transformative periods, significant gaps persist in our understanding, presenting rich opportunities for further investigation. Drawing upon the institutional paternalism framework articulated in this dissertation, scholars can inquire into other facets of the Hospital's operation, including, but not limited to, education, religion, art, and

⁹⁰¹ The only time this rule was not in place was during the General Reception, 1756-60. It is likely why so many of the GR children died.

music. Moreover, this framework can serve as a valuable analytical tool beyond the confines of this specific charity, offering a lens through which to examine and compare outwardly paternalistic structures within other charitable institutions of the era. Jessica Sheetz-Nguyen's *Victorian Women* stands out as the only recently-published book entirely dedicated to exploring the LFH in the nineteenth century.⁹⁰² It is the Victorian era, the John Brownlow years, that saw the heyday of the Hospital, its elevation to the stature of one of the capital's great charities, the ornament of the Metropolis. One hopes that this version of the Hospital will secure more attention from future academics.

Numerous avenues for scholarly inquiry into the nineteenth-century LFH remain open for investigation. For instance, John Brownlow merits a close study, or a biography. There is also ample opportunity to follow-up on the absconding fathers if one is willing to expand one's archival endeavours beyond the London Metropolitan Archive. The later lives of the Foundling children whose starts in life are recorded in the Hospital archive warrant closer investigation: did they benefit from the advantages bestowed by the Hospital – their education and the carefully selected apprenticeships – or did the stigma of illegitimacy and the lack of family and community support mean that they were permanently disadvantaged? Above all, what of the mothers? Their petitions have given the historian some insight into their lives at one moment, when they faced the greatest of challenges, giving birth outside wedlock. But much work remains to be done on what happened next. How did the mothers who surrendered their babies, and those who were unsuccessful, cope during the time that followed? Did they rebuild their lives, as artist Emma Brownlow hoped? Such a project would take the researcher far beyond the comfort zone of the Hospital archive into the arid ground of birth, marriage, and death certificates, parish registers, the census, and workhouse records. The result, one is tempted to hope, could be a major contribution to the history of working-class women.

Despite the challenges of understanding historical perspectives, social history endeavors to grasp the beliefs and motivations of historical actors. By examining past experiences, historians strive to comprehend why people took certain actions, recognizing both similarities and differences between past and present mental frameworks. The history of the LFH offers

⁹⁰² Barrett-Ducrocq's *Love in the Time of Victoria* (1992) is the only other book that focuses on LFH petitioners in the nineteenth century, but it is now thirty-one years old and Barrett-Ducrocq's lack of detailed citations makes it impossible for scholars to substantiate or build on her work.

valuable insights into the complexities of societal attitudes, institutional practices, and individual experiences within the realm of philanthropy and welfare provision. Its legacy continues to shape contemporary discussions on child welfare and social responsibility, underscoring the enduring relevance of historical inquiry into past institutions and their impact on modern society. The Hospital's pioneering approach to child welfare, including its responsibility for the care, health, and education of the children in its custody, exemplifies its significant contribution to children's history. The legacy of Thomas Coram's dedication to protecting young people lives on, in organizations such as *Coram*, which continue to advocate for children's rights and well-being.

In the 1980s, Elanor Rathbone recognized that women's challenges stem less from their gender than from their roles as mothers; this reality is still evident today. Currently, women's fragile right to balance childcare with economic independence remains under threat. The pandemic exacerbated this tension, with school closures and limited social services placing an unsustainable burden on mothers. While men have increased their involvement in childcare, a *New York Times* report highlighted a significant disparity: 45 percent of men believed they spent more time homeschooling than their female partners, while only three percent of women agreed.⁹⁰³ Shockingly, statistics from September 2020 revealed a disproportionate impact of the pandemic on women in the workforce, with four times as many women as men in the USA leaving their jobs, often due to childcare responsibilities.⁹⁰⁴ Moreover, as we witness threats to women's bodily autonomy and fundamental rights to abortion and education in various parts of the world, including the United States and Afghanistan, the LFH's history serves as a poignant reminder of the ongoing struggle for gender equality and the importance of safeguarding women's rights in the face of contemporary challenges. For all its differences, the past still bears rich lessons for the present and the evolving future.

⁹⁰³ Claire Cain Miller, "Nearly Half of Men Say They Do Most of the Home Schooling. 3 Percent of Women Agree," *The New York Times*, 6 May 2020, <https://www.nytimes.com/2020/05/06/upshot/pandemic-chores-homeschooling-gender.html>.

⁹⁰⁴ Julie Kashen, Sarah Jane Glynn, and Amanda Novello, "How COVID-19 Sent Women's Workforce Progress Backward," *The Center for American Progress*, 30 October 2020, <https://www.americanprogress.org/article/covid-19-sent-womens-workforce-progress-backward/#:~:text=advance%20gender%20equity,-Introduction%20and%20summary,school%20crises%E2%80%94would%20be%20severe>.

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Appendices:

Appendix A: Foundling boys' uniform (reproduction) and plaque from *Fighting Talk* exhibition, Foundling Museum, London, October 15, 2021 – February 27, 2022.



Foundling boy's uniform, early twentieth century
Wool serge

George is issued with a uniform on returning from foster care. The boys' uniform is quite military in style, reflecting that one of the arguments for establishing the Foundling Hospital is to save the boys to fight for their country. The Foundling Hospital uniform hardly changes at all over nearly three centuries.

Appendix B:

Wm. Tomeray	Wm. Smith	John Gonson
H. Woodward	S. Underhill	Thomas DeVilb
J. W. W. W. W.	Robt. Adams	Wm. Cotton
A. Banks	Unst. Allen	John Morris
J. G. G. G.	Wm. H. H. H.	J. B. B. B.
J. G. G. G.	E. H. H. H.	John Poulson
J. G. G. G.	J. W. W. W.	For. Wilks
J. G. G. G.	J. F. F. F.	Robt. Smith
J. G. G. G.	Henry F. F. F.	Thos. Robt.
J. G. G. G.	Wm. G. G. G.	Thos. Thayer
J. G. G. G.	John Smith	Richard Newton
J. G. G. G.	Rich. Picard	Val. Hilder
J. G. G. G.	Williamson	Th. Fraser
J. G. G. G.	J. Deacon	Rev. Marley
J. G. G. G.	J. W. W. W.	Wm. W. W.
J. G. G. G.	J. W. W. W.	Wm. Miller
J. G. G. G.	J. W. W. W.	Nice. H. H.
J. G. G. G.	J. W. W. W.	Wm. W. W.

MEMORIAL OF SEVERAL NOBLE LORDS AND GENTLEMEN TO
THE KING FOR THE GRANT OF THE CHARTER. 1725

Year: 1735

Taken From Nichols and Wray, *History of the Foundling Hospital*, 10.

Appendix C:



Nathaniel Parr, "An Exact Representation of the Form and Manner in Which Exposed and Deserted Young Children are admitted into the Foundling Hospital," 1749.

