

8 Grieving for dead children

Despite a gradual decline in the death rate at the end of the nineteenth century, infant mortality remained disproportionately high until the First World War.¹ Concentrated in poor and overcrowded urban districts, infant mortality (the deaths of children under twelve months old) occurred with such frequency (220 deaths per 1,000 live births in the worst cities between 1891 and 1900) that working-class parents were thought to have acquired a degree of immunity towards these deaths, especially as high birth rates replaced lost lives with startling rapidity.² The statistics were used to sensational effect in campaigns for the greater protection of infant life. It is unsurprising, perhaps, that alongside fears about white slavery, infanticide was one of the most recurrent moral panics of the nineteenth century. The common theme permeating anxieties about infant life was the supposed brutality of poorer parents; despite increasing awareness of social and environmental influences on life expectancy, reports on high infant mortality rates were consistently suffused with allegations of baby-farming, infanticide and wilful neglect. Much of this cynicism was rooted in perceptions of financial interest: the

¹ In the decade 1891–1900, the general mortality rate was 18.2 deaths per 1,000 live births. The infant mortality rate was 153 deaths per 1,000 live births. See, for instance, Woods and Shelton, *Atlas of Victorian Mortality*, Wohl, *Endangered Lives*, 1–10, G. Mooney, ‘Stillbirths and the Measurement of Infant Mortality Rates c. 1890–1930’, *Local Population Studies*, 53 (1994), 42–52. For improvement in infant welfare during and after the First World War see D. Dwork, *War is Good for Babies and Young Children: A History of the Infant and Child Welfare Movement in England 1898–1918* (London: Tavistock, 1987).

² Between 1891 and 1900, Birmingham, Blackburn, Leicester, Liverpool, London, Manchester, Preston and Salford had the highest rates of infant mortality in England, at 220 or more infant deaths per 1,000 live births. See Wohl, *Endangered Lives*, 10. The correlation between high mortality rates and emotional immunity to death has been applied mainly to pre-industrial society. See L. Stone, *The Family, Sex and Marriage in England 1500–1800* (New York: Weidenfeld & Nicolson, 1977), 70. Ellen Ross and Angus McLaren argue that this position is becoming increasingly untenable. See Ross, *Love and Toil*, 190, and A. McLaren, *Reproductive Rituals: The Perception of Fertility in England from the Sixteenth Century to the Nineteenth Century* (London: Methuen, 1984), 10.

diminution of family size alleviated household expenditure whilst child life insurance policies heralded a minor windfall. At best, working-class parents were fatalistic and ignorant; at worst, they were mercenaries who perceived the lives of their offspring exclusively in material terms.³ Of course, in this model, older children who provided vital household assistance or were engaged in paid employment would be mourned in the event of their death on account of the loss of their labour.

Calculations of the extent of infanticide are problematic. One correspondent to *The Times* observed in 1891 that the death of a child required no elaborate planning and was easily concealed with mock-sentiment: 'how little is needed to let a child die! A single draught of air may dispose of a baby'; and how easy to pretend sorrow, "Poor little fellow, he will be happier elsewhere" is said with a tear as the five pounds burial money is pocketed.⁴ Historians have echoed this concern. The supposed leniency of judges and coroners towards parents charged with infanticide has fostered claims that official statistics grossly underestimated the real number of cases.⁵ More controversially, Howard Taylor has argued that prosecutions for infanticide were deliberately kept to a minimum in line with the crime quotas set by the Home Office.⁶ Conversely, Ann Higginbotham and Anthony Wohl have suggested that the sensationalism (contemporary and historical) surrounding infanticide has encouraged exaggerated calculations.⁷ Certainly, there is a danger that negative stereotypes inherent in infanticide literature can be applied almost indiscriminately to working-class attitudes to young children. In particular, charges of fatalism, ignorance and privation are easily confused with accusations of neglect.

Historical analysis in the 1980s tended to reiterate the Victorian moral panic concerning infant death. At its most melodramatic, Lionel Rose's *The Massacre of the Innocents* (1986) argued that 'the value of infant life was determined by the forces of supply and demand'.⁸ Asserting that

³ See *Lancet*, 2 June 1883, 963; 5 April 1884, 633; 13 July 1889, 83; 25 November 1899, 1470; 16 June 1906, 1710. See also G. Behlmer, *Child Abuse and Moral Reform in England, 1870–1908* (Stanford: Stanford University Press, 1982) and H. Hendrick, *Child Welfare: England 1872–1989* (London: Routledge, 1994).

⁴ *The Times*, 4 August 1891, 7.

⁵ R. Sauer, 'Infanticide and Abortion in Nineteenth-Century Britain', *Population Studies*, 32, 1 (1978), 81–94, and L. Rose, *The Massacre of the Innocents* (London: Routledge & Kegan Paul, 1986), 57–69.

⁶ H. Taylor, 'Rationing Crime: The Political Economy of Criminal Statistics since the 1850s', *Economic History Review*, 51, 3 (1998), 569–90.

⁷ A. Higginbotham, "'Sin of the Age": Infanticide and Illegitimacy in Victorian London', *Victorian Studies*, 32, 3 (1989), 319–37, and Wohl, *Endangered Lives*, 34.

⁸ Rose, *Massacre of the Innocents*, 5.

human relationships were governed by ‘elementally animal’ instincts, Rose endorsed the notion that poverty was synonymous with the neglect of children.⁹ This is a complex and controversial issue, the intricacies of which Rose declined to explore. There is also a problem concerning definition of the working classes in question. Of course, there were some horrific instances of child neglect and outright murder. Nonetheless, there is a danger in assuming that a minority of high-profile scandals were representative of a wider population. Clearly, some parents were cruel and/or abusive towards their children whilst others were not overly sorry when their offspring died. Some children expressed open antipathy to their parents in adulthood: Jack Martin berated his drunken and cruel father; Alice Foley described her father as a vicious, ‘open-mouthed braggart of an Irishman’; Pat O’Mara portrayed his father as a terrifying presence who would turn violent with alarming unpredictability; and George Acorn’s entire autobiography is a bitter denunciation of both his parents.¹⁰ How far these examples can be applied beyond the confines of a single family unit, let alone the broader category of ‘the poor’, is highly questionable. Even within individual biographies, contradiction and conflict is rife: notably, George Acorn’s narrative often represents a painful attempt to reconcile himself to his parents’ shortcomings and is not entirely devoid of flashes of affection. As Eleanor Rathbone noted in 1913, one could not judge the poorer classes from extreme examples of ‘really bad’ parents. The vast majority were ‘good in intention’: they tried their best in circumstances which were, arguably, stacked against them.¹¹

Since Rose’s sensational *Massacre of the Innocents*, historical analysis of high infant mortality rates has increasingly shifted away from perpetuating moral panics to explore the narrativity of infanticide and the cultural values implicit in notions of bad parenting. It is not my intention in this chapter to dwell on this body of work or on issues of demography, epidemiology, the extent of infanticide, or the campaigns for legislative reform to protect infant life. These have been well documented by others whilst a comprehensive body of research has flourished, examining the complex interplay of environment, education and material wealth in causing or preventing infant death.¹² Rather, this chapter draws attention to a persistent gap in the historical literature: the bereavement of working-class

⁹ Ibid., 187.

¹⁰ Martin, *Ups and Downs*, 15; Foley, *Bolton Childhood*, 3, 8; O’Mara, *Autobiography of a Liverpool Slummy*, 42.

¹¹ Rathbone, *Report on the Condition of Widows*, 24.

¹² R. Cooter, *In the Name of the Child: Health and Welfare 1880–1940* (London: Routledge, 1992), A. Hardy, ‘Rickets and the Rest: Child-Care, Diet and the Infectious Children’s Diseases, 1850–1914’, *Social History of Medicine*, 5, 3 (1992), 389–412, J. Lewis, ‘The

parents who lost an infant or a small child to death. To begin, the demographic focus on infant mortality has discouraged an analysis of responses to the deaths of older children who were still dependent upon their parents (children under thirteen still had to attend school). Secondly, with the exception of Ellen Ross's excellent *Love and Toil: Motherhood in Outcast London*, scholarly interest in infanticide and child-rearing practice has largely ignored the potential of the poor to form emotional bonds with very young offspring. This is not to suggest that poorer families were happy models of humanity, but, rather, that the dynamics of interpersonal relationships were more ambiguous than has previously been allowed. This chapter aims to redress the negative stereotypes of the working-class parent by examining responses to child death as the epitome of a pragmatic culture of bereavement which did not suppress grief but enabled parents to manage sorrow and loss. As Anthony Wohl has commented, it would 'doubtless be comforting' for us to concur with contemporary social reformers who argued that infant deaths were less distressing to the poor: they were 'so common, so *expected* – parents accepted them stoically and passively, without much pain or remorse'. Yet, continues Wohl, stoicism was often, like respectability, an adopted front and easily mistaken for callous indifference.¹³

Poverty, insurance and ignorance

Few contemporary commentators would have disputed that the superior housing, relative security and perceived respectability of families headed by skilled workers exempted them from the worst charges of wilful infant and child neglect. In this sense, it was poverty itself that was supposed to foster apathy towards offspring. Giving voice to the 'bitter cry' of outcast London, Andrew Mearns claimed that the children of the poor were neglected and subjected to cruelty from birth.¹⁴ Describing Edwardian Liverpool, Andie Clerk stated that the 'sins' of poor parents were visited upon their children: it had 'nothing to do with God, it's inevitable and couldn't be otherwise'.¹⁵ Surveying the poverty-stricken metropolis, Jack

Working-Class Mother and State Intervention' in J. Lewis (ed.), *Labour and Love: Women's Experience of Home and Family, 1850–1940* (Oxford: Blackwell, 1986), 99–120, I. Loudon, 'On Maternal and Infant Mortality, 1900–1960', *Social History of Medicine*, 4, 1 (1991), 29–73, and N. Williams, 'Death in its Season: Class, Environment and the Mortality of Infants in Nineteenth-Century Sheffield', *Social History of Medicine*, 5, 1 (1992), 71–94.

¹³ Wohl, *Endangered Lives*, 41. ¹⁴ Mearns, *Bitter Cry of Outcast London*, 16.

¹⁵ Clerk, *Autobiography of a Street Arab*, 7.

London asserted that children ‘die like flies’. The links between poverty and moral degradation were explicit: ‘In the dens and lairs in which they live they are exposed to all that is obscene and indecent. And as their minds are made rotten, so are their bodies made rotten by bad sanitation, overcrowding, and underfeeding.’¹⁶ Noting that over 50 per cent of children in the East End died before the age of five, London invoked a lurid image of mass infanticide: ‘Slaughter! Herod did not do quite so badly.’¹⁷

Dramatic depictions of degradation and apathy dovetailed with allegations that the deaths of the young were welcome. In the novel *A Child of the Jago* (1896) Arthur Morrison explored the attempts of a philanthropist cleric to rescue individuals and their families from succumbing to the moral inertia fostered by poverty. Morrison charts the descent of the Perrott family from relative respectability to slum apathy as their financial fortunes decline. Their assimilation into a culture of moral squalor is signified by the death of the infant, Looey Perrott. The child is sick but her mother, Hannah, allows ‘native inertness’ to supersede a sense of responsibility and she leaves the infant alone whilst she goes drinking. When the child dies in her absence, Morrison suggests that Hannah stares ‘blankly’, looks bemused and feels only ‘listless relief’; her husband Josh feels ‘nothing in particular’ and suggests a return to the pub; their neighbours, meanwhile, congratulate them on a prospective insurance claim.¹⁸ Morrison portrays such attitudes as inseparable from a particular social environment. This did not excuse slum dwellers’ disaffection, but, rather, condemned the poverty that bred passivity and trapped the lower classes from ever leaving the slum. While Hannah and Josh Perrott are supping ale in the pub, their son Dicky, the protagonist of the novel, and a prostitute, Pigeony Poll, try to soothe the sick infant Looey. Set in juxtaposition to the married mother, the prostitute embodies Morrison’s philanthropic hope that the fallen are not beyond redemption. An outcast even among the slums, Pigeony Poll nurses the child tenderly and, when she dies, breaks into an ‘odd croaking noise’ and hides her face in her arm. The character of Dicky, meanwhile, represents the struggle of some of the poor to be good citizens. Left alone with the corpse of Looey after his parents return to the pub, Dicky lies alongside his sister ‘exhausted with sobbing, a soak of muddy tears: O Looey, Looey! Can’t you ’ear? Won’t you never come to me no more?’ That Dicky also dies later in the novel renders *A Child of the Jago* particularly pessimistic in its outlook on the prospects of the poor. Similarly, George Gissing’s *The Nether World* used the infant death scene as a tool for ruminating on the morality of the poor.

¹⁶ London, *People of the Abyss*, 276. ¹⁷ Ibid., 254.

¹⁸ A. Morrison, *A Child of the Jago* (London: Panther, [1896] 1971), 101–4.

Drawing attention to the financial privation of the Hewett family, Gissing implies that it is impossible to escape the financial advantages of infant death: 'For two years things had gone miserably for them, their only piece of good fortune being the death of the youngest child.'¹⁹ Like Morrison, Gissing is keen to suggest that callous responses to infant mortality were neither universal nor inevitable. The bitterness of Bob Hewett when told he is to become a father again is matched by his gratitude when the child is stillborn: 'Thank goodness for that, any way!' Gissing contrasts this, however, with the more complex reaction of the expectant mother, Pennyloaf. Gissing places her sorrow at the stillbirth (she is 'very low') within a pragmatic context: the family's extreme poverty provides a framework in which Pennyloaf can temper her loss and avoid being 'over sorry' that the child is dead.²⁰

Correlations between mortality and material relief among the rough and the respectable undoubtedly fuelled the moral panic concerning infant mortality, especially in cases where infant lives had been insured. According to *Public Health*, approximately 80 per cent of children were insured in the early 1890s.²¹ Identified as an incentive to infanticide, campaigns to ban infant insurance persisted well into the early decades of the twentieth century.²² A correspondent to *The Times* in 1884 likened the burial club collector to the grim reaper, claiming that life insurance was 'an abominable system' which 'unquestionably [set] a premium upon infanticide'.²³ The notion that infant insurance represented a child's death warrant and guaranteed a profitable return rested on the assumption that poorer parents had little affection for their offspring.²⁴ Even defences of infant life insurance made negative assumptions about the poorer classes. According to contemporary insurance companies, those most likely to insure their offspring were the provident and respectable classes whilst the intemperate and idle rarely took out insurance at all.²⁵

At the forefront of campaigns to regulate life insurance legislation, the editors of the medical journal, *Lancet*, avoided blanket condemnation of the working classes; parents were 'probably' fond of their offspring but, all too often, 'let their children die'.²⁶ One of the few arguments published in the *Lancet* in favour of infant insurance conjectured that its

¹⁹ Gissing, *Nether World*, 141.

²⁰ *Ibid.*, 313–14. See also Tressell, *Ragged Trousered Philanthropists*, 45.

²¹ *Public Health*, VII, 82 (1895), 164.

²² Rose, *Massacre of the Innocents*, 136–58. ²³ *The Times*, 29 September 1884, 12.

²⁴ See, for instance, *Lancet*, 7 July 1877, 36; 13 July 1889, 83; 14 November 1896, 1398; 30 July 1904, 330–1; and 25 September 1909, 962.

²⁵ Wohl, *Endangered Lives*, 34.

²⁶ *Lancet*, 1 September 1877, 331. See also *Lancet*, 24 January 1885, 167.

abolition would prove counterproductive: burial expenses would exacerbate financial burdens and propel parents to further disaffection.²⁷ The much-publicised scheme to reduce infant mortality in Huddersfield, introduced in 1906, also rested on a series of misgivings concerning working-class morality. Parents were offered a reward of one shilling for the early registration of newborn babies (within forty-eight hours of birth) and issued with a promissory note for one sovereign which would be honoured on the infant reaching its first birthday: the underlying assumption that parents would exercise greater care of offspring if offered remuneration for their efforts highlights the insidiousness of stereotypes that equated poverty with apathy.²⁸

The suspicion that life insurance motivated neglect was pervasive and influenced relationships between professionals and poorer parents. Expectant mothers were often cautious when expressing anxieties about pregnancy and financial welfare for fear of being accused of neglect should the child subsequently die.²⁹ Social surveyor Maud Pember Reeves noted that even ‘respectable’ mothers attached great importance to securing proof of stillbirth in order to deflect allegations that they had murdered a newborn child.³⁰ In late-Victorian Liverpool, medical practitioner and public health official Edward Hope included burial insurance in his criteria for assessing suspected cases of infant and child neglect. In February 1884 he visited a house where three children had recently died. The family appeared destitute. Hope reported that an eight-month-old infant lay sick in its mother’s arms whilst a ‘very ill, very dirty, very much neglected’ seven-year-old lay close by. Insurance policies had been purchased for each child.³¹ Hope avoided making explicit allegations against the parents, but, in noting that the lives of the children were insured, he raised the possibility that parents were little inclined to mend their ways if the neglect of offspring brought some real financial relief. Likewise, in January 1895 Hope visited two small girls who lay sick with scarlatina. Two other siblings had recently died. Their parents were ‘very poor people’ but, Hope observed, had managed to insure each child’s life for thirty shillings.³² Explicit parental interest in the insurance of sick children further cemented negative stereotypes. When Hope noted that the mother of James Hervey, aged six and sick with scarlatina, was ‘anxious to get him in a club on hearing a bad prognosis’, he implied that her

²⁷ *Lancet*, 6 October 1888, 680–1.

²⁸ H. Marland, ‘A Pioneer in Infant Welfare: The Huddersfield Scheme, 1903–1920’, *Social History of Medicine*, 6, 1 (1993), 25–50.

²⁹ Ross, *Love and Toil*, 98. ³⁰ Reeves, *Round About a Pound*, 70.

³¹ LVRO 352 HEA 2/1, 1 February 1884. ³² LVRO 352 HEA 2/2, 2 March 1887.

principal concern lay with finance rather than the welfare of her son.³³ On calling at the Rooney household in October 1887, Hope was incredulous to find a three-year-old, evidently dying, in the care of a woman who 'is useless as a nurse'. The child's mother had gone 'down to a club'. Two children had already died at this address and Hope ordered the removal of a fourth who displayed symptoms of scarlatina rather than leave it in a 'house of this character'.³⁴ Implicit in Hope's denunciation of the household was a perception of a hard-hearted mother who thought more of insurance money than of her child. Moreover, the disparity between making provision for life insurance whilst dwelling in 'abominable hovels' suggested to Hope a disordering of priorities.³⁵

The libel against working-class parents who insured the lives of young offspring did not, however, go unchallenged. In a 'vindication' of 'slum mothers' published in 1891, the radical physician Edward Berdoe argued that allegations concerning profiteering from death clubs were 'unpleasantly suggestive' about the character of working-class parents. Importantly, they overlooked the necessity of burial clubs: 'When a working man ... [who] has to support himself, his wife, and three or four children, loses one of the latter after a more or less expensive illness, it very rarely happens ... that he has a fund saved up out of which he can pay three or four pounds for a funeral.' In his professional capacity, Berdoe witnessed the 'tender regard' and self-sacrifice most mothers displayed towards sick children. Utilising the grasping imagery invoked by critics of the poor, Berdoe claimed that few parents, even the most destitute, appeared 'anxious to finger the gold promised by the death-club'. The significance attached to burial policy premiums was, Berdoe suggested, rooted in the cultural, political and emotional importance the working classes attached to burial rites.³⁶ Despite legislative measures regulating infant insurance from the 1870s, the correlation between infant mortality and burial insurance remained topical some three decades later. Giving evidence to the Select Committee of Inquiry into Coroners in 1909, Ernest Gibson, Coroner for Manchester, refuted the Chairman's suggestions that parents insured offspring for sinister purposes: burial insurance was so universal and the payouts so 'paltry', it was absurd to suggest that parents were scheming en masse to murder their babes.³⁷ Maud Pember Reeves reiterated this point, arguing that life

³³ LVRO 352 HEA 2/1, 21 March 1884. ³⁴ LVRO 352 HEA 2/2, 28 October 1887.

³⁵ LVRO 352 HEA 2/2, 6 May 1887.

³⁶ E. Berdoe, 'Slum Mothers and Death Clubs: A Vindication', *The Nineteenth Century* (April 1891), 560–3.

³⁷ PP 1910, XXI: 8206–11.

insurance was a necessary feature of a culture of poverty and pragmatism: ‘Shall they run the risk of burial by the parish, or shall they take Time by the forelock and insure each child as it is born, at the rate of a penny a week?’³⁸ Maud Davies thought burial insurance a good thing in that it provided working-class parents with models for saving. Indeed, the numbers of children insured in burial clubs in the rural Wiltshire parish of Corsley had declined since the opening of the Corsley School Savings Bank.³⁹

Burial costs

In a culture where long-term planning was almost unknown, burial insurance represented a strategy for guarding against financial crisis and its attendant consequences, particularly pauperism. Notably, contagious disease could claim the lives of several children within one household within days or weeks of each other, necessitating considerable outlay in funeral expenses. A ringspinner from Farnworth (born 1907) recalled that her father was ‘very bitter for a long time’ when, having contrived to inter six children in private graves, his financial resources were finally exhausted. When the seventh child succumbed to mortal sickness, he simply could not afford another interment and had to turn to the parish.⁴⁰ Little wonder he was bitter; public burial was even more undignified for young children as ‘any amount of little coffins’ could be crammed into a single grave space.⁴¹ J. Birley (born c. 1880s) suggested that the death of her baby brother whilst their father was away at sea was a ‘harrowing experience’: grief was exacerbated by the lack of an insurance policy which made it ‘almost impossible’ to buy a grave. Birley’s distraught mother immediately purchased insurance policies for her other children to guarantee them a dignified resting place should they die.⁴² The cramped conditions of the children’s common grave represented less the disaffection of poor parents, but, rather, the assumptions and economies of parish authorities. Indeed, many parents who turned to the parish for the interment of their children adopted the same customary mourning gestures (such as wearing black) utilised for adults to express their loss and confirm that the child, however young, had an identity that would be mourned.⁴³

³⁸ Reeves, *Round About a Pound*, 67. ³⁹ M. F. Davies, *Life in an English Village*, 154–5.

⁴⁰ BOHT, Tape 158a, Reference: AL/JJ/1a/014.

⁴¹ BOHT, Tape 15b, Reference: AL/LSS/A/010. See also LVRO 353 PAR 6/2/4 for a plan of children’s public graves.

⁴² I. Strickland (ed.), *The Voices of Children, 1700–1914* (Oxford: Blackwell, 1973), 182.

⁴³ Reeves, *Round About a Pound*, 71.

This is not to suggest, however, that where parents improvised burial rites for children, loss was any less painful. Again, attitudes towards interment must be placed within a pragmatic context. Robert Roberts recalled that in the Edwardian Salford slum of his childhood, parents bereft of a newborn baby would call on his shopkeeper mother to request a box 'so they could take their young to the burial without the expense [of a coffin]'.⁴⁴ Likewise, Elsie Oman recounted that 'stillborn or young babies that died were put in empty wooden soap boxes and carried to the cemetery'.⁴⁵ Hence, parents who utilised the soap box as a makeshift coffin were not dispensing with funeral custom or notions of what was decent. Rather, they used cheap materials to replicate the funeral of an older child or adult. The tiny corpse of a babe or infant lent itself to improvisation. In particular, there was little call for a hearse with which to transport the coffin. One Bolton woman (born 1906) noted that her parents carried the coffin of her two-year-old brother from their house to the cemetery.⁴⁶ Alternatively, the small coffin could be accommodated within transport provided for parents. Elsie Oman noted that for older children (around three years old), families 'would have one coach and the coffin would go in a box with glass sides under the driver's seat. If it would not fit, the mourners would have it on their knees in the coach'.⁴⁷ Oman qualifies this statement by adding that these arrangements were restricted to families who could 'afford' a funeral in the first place. There is, perhaps, a sense that improvised funerals did not take up social space in the way that adult burials were apt to do, especially if one adopts Laqueur's notion of the funeral as a final picture of the deceased's communal, occupational and political networks. Yet if children's funerals were socially less visible, there is little to suggest they were less meaningful to the bereaved. Indeed, the image of parents carrying a tiny coffin to the grave is poignant in its intimacy and simplicity.

Nonetheless, improvised burial rites gave ballast to claims that parents invested little emotion in infant offspring. Negative assumptions particularly focused on practices whereby parents passed the bodies of babes to a third party, usually an undertaker or midwife, for cheap disposal. More controversially, some parents conspired with midwives to falsify certification of their babe's birth and death in order to classify a dead newborn child as a stillbirth. Legally, a child who breathed at birth, however briefly, was classed as live-born; conversely, the stillborn child was a babe who had stopped breathing before passing out of the birth canal. As a measure against foul play, a stillbirth had to be certified by a midwife

⁴⁴ R. Roberts, *Classic Slum*, 85. ⁴⁵ Oman, *Salford Stepping Stones*, 9.

⁴⁶ BOHT, Tape 32a, Reference: AL/KP/1c/013. ⁴⁷ Oman, *Salford Stepping Stones*, 9.

or physician. Of course, the distinction between still- and live-born was significant for keeping accurate official statistics and for deterring parents from fraud, but it was also important for determining the cost of disposing of the corpse. The average cost of interring a stillborn corpse at the turn of the century was one to two shillings. The cost of burying a live-born baby of similar size to a full-term stillbirth was, however, significantly higher as few cemeteries operated a sliding scale of charges for children. Hence, the interment of a live-born child incurred the same charges as the interment of a much older child: in the north-west, Ramsbottom Cemetery in 1887 charged ten shillings for the interment of all children under ten; Colne Cemetery in 1890 charged nine shillings and sixpence for the burial of children under eight; Haslingden Cemetery in 1901 charged eight shillings for all children under fourteen.⁴⁸ To a point, the common charge for all children's burials suggests that cemetery authorities recognised the significance parents might invest in the funerals of infants, granting parents full access to a language of sanctity and commemoration. Nonetheless, given the high rates of infant death, especially in the first days and weeks of life, the levy also had considerable profit potential.

Differential burial costs for still- and live-born children incurred a harsh pecuniary penalty on parents whose offspring died soon after birth and, certainly, before any insurance policy could be purchased or validated. Even the charges incurred for burial of a stillbirth could be galling. The transient identity of the still- and newborn baby called into question the importance attached to its formal burial: many had not been named before death and were not accorded the full status of person. Likewise, a stillbirth or dead newborn infant could leave parents, especially the mother, feeling bitterly cheated. In this sense, it is hardly surprising if some parents contrived to avoid interment costs. The corpses of newborn babes might be discovered in any array of spaces: remains were found hidden in chimneys, washed up by the sea, left in fields, back alleys and in packages at railway stations.⁴⁹ Some parents were openly ambivalent about the fate of the corpse. One destitute woman, questioned by the coroner at Newington in 1895, stated that she had given the corpse of her twelve-day-old infant to a midwife, assuming that she would 'throw it over the railings and give it a cheap funeral'.⁵⁰ It was easy to infer some sinister purpose from unorthodox or illicit disposal of babies' remains. If parents were not suspected of murder or manslaughter, the 'dropping of

⁴⁸ LRO MBH 42/1.

⁴⁹ See, for instance, *Liverpool Mercury*, 11 June 1886, 6, *Liverpool Weekly Courier*, 19 March 1892, 6, and *Liverpool Echo*, 28 December 1897, 3.

⁵⁰ *Lancet*, 5 January 1895, 75.

dead infants to save funeral expenses' was inextricable from perceptions of the poor as mercenaries who construed their offspring purely in material terms.⁵¹ Clearly, some parents had dubious motives in attempting to conceal their dead offspring, especially when the only identifiable parent was an unmarried mother, and some parents probably were, quite simply, callous.

Cynicism should not, however, overshadow the possibility that some parents contrived to do little more than dodge the expense of burial. Notably, sympathetic gravediggers were thought to collaborate with parents, placing the remains of dead babes in the graves of unrelated adults. As one Bolton weaver suggested: 'you took it to the cemetery gatehouse and it was buried in somebody else's grave after the mourners had gone'.⁵² An investigation into interments in Strood village, Rochester, in 1892 found that the gravedigger had been illicitly interring babies' remains in the adult graves.⁵³ One Barrow woman recollected taking the boxed corpse of a stillborn sibling with a letter from her mother to the local gravedigger; he accepted the parcel without question and assured the twelve-year-old 'it'll be alright'.⁵⁴ Undertakers were also thought to offer assistance, slipping tiny cadavers into the coffins of unrelated adults. Giving evidence to the Committee of Inquiry into Coroners in 1909, A. J. Pepper inferred that it was common knowledge that the poor gave the remains of stillborn babies to undertakers.⁵⁵ Turning to a third party for assistance with disposal was not without risk, however, not least because the final fate of the corpse was not guaranteed. In 1875, the *Lancet* reported a case where investigation into an undertaker's office (probably on account of the putrid smell) uncovered numbers of infant corpses putrefying on the premises.⁵⁶ In 1891, public health officials discovered the decomposing remains of thirty-one stillbirths, newborn babies and infants concealed in the house of Emma Knowles, an undertaker in Birmingham.⁵⁷ In South Wales in 1911, a number of infant coffins were found to have been buried in the garden attached to a house formerly occupied by an undertaker.⁵⁸

It was not illegal to dispose of the corpse of a stillborn child outside the cemetery, providing the birth/death had been certified and the disposal did not present a public nuisance. The problem with many of these burials, however, was the lack of evidence showing how and when these babes had died. Crucially, informal burials concealed numbers of babies

⁵¹ *Lancet*, 5 April 1884, 633.

⁵² BOHT, Tape 120, Reference: AB/MS/1A/003.

⁵³ *Lancet*, 7 May 1892, 1040.

⁵⁴ E. Roberts, 'Lancashire Way of Death', 192–3.

⁵⁵ PP 1909, XV: 4741–2.

⁵⁶ *Lancet*, 30 October 1875, 640.

⁵⁷ *Lancet*, 17 August 1901, 457.

⁵⁸ *Lancet*, 17 June 1911, 1675.

whose births had never even been registered and who, consequently, never existed within an official context. Concern that newborn babies could be passed off as stillbirths to mask infanticide was reflected in the legal requirements for burial; families had to present medical certificates of stillbirth to the cemetery superintendent or churchyard sexton before interment could take place. Some cemeteries maintained full accounts of stillbirth burials in co-operation with medical officers of health, noting the parental address, date of birth/death and the midwife or physician in attendance. Any discrepancies in information could result in the exhumation of the corpse for a post-mortem inquest.⁵⁹ The number of bodies interred outside the formal arrangements of cemetery officials is unknown. At an inquest in 1888, the registrar for Mile End Cemetery, Portsmouth, revealed that he had buried between 100 and 200 ‘so-called’ stillbirths every year without seeing any certification.⁶⁰ An inquiry into All Saints church ground, Birmingham, in 1881 revealed that a local midwife was issuing false certificates of stillbirth for newborn infants for the purposes of illicit burial. She also passed the tiny corpses onto the sextoness at the cemetery for interment.⁶¹ Midwives were especially well placed to assist poor mothers in the disposal of their dead babies and their complicity in faking stillbirths was integral to calls for the regulation of the nursing profession. Medical practitioners persistently voiced concern that midwives were apt to interpret ‘stillbirth’ loosely, not only confusing ‘stillbirths’ with ‘miscarriage’ but also defining babies who lived for several hours as stillborn.⁶² In 1888, a midwife from West Derby, Liverpool, told an inquest that she believed any child who lived up to forty-eight hours after birth could be classed as stillborn.⁶³ Mary Shelton, a midwife from Hanley in Staffordshire, was fined six pounds in 1894 for falsely certifying a child as stillborn. In this case, not only had Shelton been absent from the birth, she was fully aware that the child had lived long enough to be baptised.⁶⁴ In 1896, Hannah Bossons, also from Hanley, was tried for the fraudulent burial of an eighteen-hour-old male baby who had been overlain. Bossons wrote a certificate of stillbirth and took the body in a box to the local gravedigger for him to inter in the

⁵⁹ See, for instance, YRO Acc. 239 5/1, Counterfoils of Stillbirth Certificates 1907–9 and Acc. 107: 74.

⁶⁰ *Lancet*, 15 September 1888, 530–1. The problem of illicit burial was exacerbated by the lack of means to test the validity of stillbirth certificates and the ignorance of registrars concerning the 1874 Births and Deaths Registrations Act. See *Lancet*, 3 September 1882, 430–1.

⁶¹ *Lancet*, 3 September 1882, 430–1.

⁶² The Select Committee on the Registration of Stillbirths in 1893 recommended that the distinction between miscarriage and stillbirth be drawn at seven months’ gestation. *Lancet*, 25 March 1899, 848–9.

⁶³ *Lancet*, 16 June 1888, 1222. ⁶⁴ *Lancet*, 16 June 1894, 1541.

churchyard. On further questioning, Bossons conceded that she regularly signed stillbirth certificates for babies who had lived up to four days and that many other midwives did the same. Not surprisingly, the coroner was incredulous that infants could so easily be 'removed' from life and statistics.⁶⁵

We should, however, be wary of assuming that all parents who engaged in the illicit disposal of their infants had murdered them (or done nothing to keep them alive) or that midwives acted as willing accomplices to malevolent designs. Professional men and women were inclined to view the plight of poorer families in relation to the burial of babies with sympathy. Reporting on the prosecution of a doctor in Lambeth in 1882 for the false certification of a child who had lived thirty-four hours (thus facilitating false burial), the *Lancet* speculated that doctors frequently permitted compassion for the poor to impede adherence to legality.⁶⁶ At Tipton in 1893, a coroner examined a case concerning the death and burial of two twin children, born in the absence of a doctor or a midwife, but baptised. The inquest revealed that the babies were already dead when the minister arrived but that the mother could not collect any insurance money unless the babies had been baptised.⁶⁷ Maud Pember Reeves also represented the undertaker who accepted babies' bodies for disposal as performing a favour on behalf of the poor.⁶⁸ Similarly, passing the corpse onto a third party was not necessarily indicative of ambivalence, but, rather, could be perceived as strategic: parents may have been too distressed, disappointed or exhausted to arrange burial; they may not have operated within the legal distinctions between still- and dead newborn babies; neither is it clear how many parents were aware of the bureaucratic procedures for the disposal of still- and newly born babies. Moreover, whether the child had been allowed to die or not, seeking someone else's help in disposing of a body cheaply possibly encouraged parents to believe that they would deflect suspicion of malevolent design.

That many of the illicit burials of babies' corpses took place, or were believed to take place, inside the cemetery implies a general perception of burial ground as the right and proper place for interment, even if the 'burial' fell outside formal definitions of interment practice. In 1876, for instance, workmen at Anfield Cemetery discovered the body of a child in a fishbasket which had been dropped over the wall.⁶⁹ In February 1889,

⁶⁵ *Lancet*, 10 October 1896, 1024. ⁶⁶ *Lancet*, 25 February 1882, 322.

⁶⁷ *Lancet*, 7 October 1893, 886.

⁶⁸ Reeves, *Round About a Pound*, 70. See also *Lancet*, 23 January 1891, 207, *Daily Post*, 22 October 1896, 6, and *Liverpool Weekly Courier*, 10 September 1898, 5.

⁶⁹ LVRO 353 PAR 6/5/1, 23 March 1876.

a stonemason's labourer discovered a box hidden among the shrubs at Anfield in which the 'honeycombed' remains of a babe wrapped in cotton wool lay.⁷⁰ Two months later, the body of a newborn child in a wooden box was found beneath the surface of the soil in the same cemetery.⁷¹ On 9 September 1891, cemetery employees at Anfield noted three women ('worse for liquor') loitering in the Roman Catholic portion of the ground. The sexton also spied the women hiding amongst the shrubbery. Suspecting 'all was not right', he went to investigate and discovered the body of a 'small foetus' in a cardboard box buried beneath the earth. The women were then detained whilst the police and a doctor were summoned. According to the doctor, the corpse was that of a stillborn babe. On questioning, it transpired that one of the women had borne the child and, with two neighbours, had undertaken to conceal the corpse in the grounds of the cemetery. Once the facts of the case were established, nothing further was done and the women went home.⁷² There is a problem here with the language used by the cemetery staff and it is unclear whether the babe was a stillborn or a miscarried foetus although the babe must have developed to some degree to be distinguishable.

Nonetheless, the example highlights the resourcefulness displayed by poorer families with regard to burial and suggests the sympathy of neighbours and friends with regard to securing interment inside cemetery space. The reluctance to pay even nominal costs for a burial may suggest that the birth of a stillborn or death of a newborn occasioned little sorrow. Yet the very act of depositing a body illicitly in the cemetery implies the opposite, a possibility reinforced by the Dutch courage of the three women involved in the case above. This suggests that, contrary to the alleged ambivalence of the poor towards their small offspring, some significance was vested in the resting place of newborn and stillborn babies. What is particularly striking is the implication that the defined space of the cemetery held some kind of special meaning. This is not to suggest that the women necessarily associated the ground with Christian notions of resurrection or consecration, but, rather, that it represented the customary and proper place for the dead to go, even if this meant an improvised interment. It is also possible that in hiding the box in the Roman Catholic portion of the ground, the collaborators attached a degree of significance to denominational space. Furthermore, implicit in such rudimentary burials is an attachment to the finality embodied in the funeral: laying the dead to rest in the appropriate repository, however

⁷⁰ *Liverpool Weekly Courier*, 9 February 1889, 7.

⁷¹ *Liverpool Weekly Mercury*, 20 April 1889, 1.

⁷² LVRO 353 PAR 6/5/1, 19 September 1891.

makeshift, enabled the bereaved to return to the sphere of the living. It is also worth remembering that whilst illicit burials were the newsworthy stuff of moral panics, numbers of working-class parents did inter their dead newborn and stillborn babes within the formal procedures of the cemetery.

Love, ignorance and childcare

It is ironic, perhaps, that skimping on burial costs invoked the wrath of commentators who wagged a frustrated finger at the unnecessary expense of the working-class funeral. Indeed, towards the end of the century, assumptions about the relationship between infant mortality and burial insurance was increasingly qualified. In an award-winning essay on the perils of infant life (1894), Hugh Jones, physician at the Royal Southern Hospital in Liverpool, concluded that burial insurance had been 'accorded an importance far beyond its merits'. The 'evidence' purporting to reveal a causal relationship between burial clubs and infant mortality was largely based 'upon surmise, hearsay, or general impression'. For most, life insurance was a judicious investment: mothers were aware of high mortality rates and insured their offspring to secure 'what they called a decent funeral'. That the working-class culture of death was 'shocking' to others amounted to little more than a failure to recognise a different language for death, borne of familiarity and pragmatism. Far more pernicious, suggested Jones, was the ignorance of the poor.⁷³ Jones's essay is typical of a subtle shift in the latter quarter of the century away from explicit accusations of malicious intent to the inference that parents killed off their children by clinging to outdated and ignorant child-rearing practices. For most commentators, ignorance amounted to inadequate education concerning hygiene, feeding and child-rearing. Yet ignorance was a nebulous concept. Misguided ideas about childcare could be framed in a language of passivity which, all too often, merged with notions of wilful neglect.

Much of the campaigning to reduce deaths among infants and young children fixed on the perceived responsibilities of the mother: child mortality was, 'too often', the result of 'the mother's delinquencies'.⁷⁴ Such perceptions were internalised by women; a 'good' mother worked hard for her children and when children died, it inevitably implied her failure.⁷⁵ Some men explicitly blamed their wives for the death of young

⁷³ H. Jones, 'The Perils and Protection of Infant Life (Howard Medal Prize Essay)', *Journal of the Royal Statistical Society*, 57 (March 1894), 1–103.

⁷⁴ *Lancet*, 16 June 1906, 1710. ⁷⁵ See Ross, *Love and Toil*, 128.

children. The suffocation of an infant in its drunken mother's arms filled one father with disgust. Despite his wife's cries and protestations ('Oh my baby'), he refused to admit her into their house.⁷⁶ The daughter of two Manchester millworkers (born 1896) related the story of a younger sibling's suffocation in bed in her mother's arms: '[mother] got a clobbering [off father] for that'.⁷⁷ Similarly, Teresa Turner (born 1903) claimed that her twelve-month-old sister died of a 'broken heart' when their mother returned to work and placed the child in a neighbour's care. That the cause of death assigned by the doctor (overfeeding and blocked bowels) was dismissed by the family as an 'excuse' provided enormous scope for guilt on the mother's part, compounded no doubt by the reaction of her husband: he 'went off the deep end, of course he worshipped her'.⁷⁸

Overlaying, that is, the suffocation of babies in bed with their parents, is, perhaps, the best example of the ambiguity surrounding charges of neglect and ignorance. The causes of overlaying were notoriously difficult to determine, not least because locating evidence of intent to harm was so problematic.⁷⁹ Undeniably, overlaying afforded considerable scope for criminal design. Kathleen Woodward noted the cynical assumption that 'turning over' on an unwanted baby could save parents a 'lot of trouble'.⁸⁰ That incidents of overlaying peaked at the weekend supported claims that reckless and drunken parents cared little for their offspring.⁸¹ According to Robert Roberts, deaths from overlaying were the cause of much 'searching gossip': 'Did it happen in the small hours of Sunday morning after the mother had been out drinking? Was the child illegitimate? Had it been insured, and for how much? Had it been ailing, or was another baby on its way?' Having painted a rather sordid picture, Roberts concedes that 'Most folk, though, talked kindly of it all – poor little soul! A tragic accident.'⁸² Roberts seems to imply that neighbours' willingness to veil their suspicious tittle-tattle with 'kindness' was less from an underlying belief in the innocence of parents than from a knowing complicity. It is not, however, implausible that 'searching' for sensational detail in the mundane was a regular pastime in working-class communities. Indeed, it

⁷⁶ *Liverpool Mercury*, 18 October 1886, 6, and 20 October 1886, 8.

⁷⁷ Man. OH Tape, Miss Entwistle, Tape 824.

⁷⁸ Man. OH Tape, Teresa Turner, Tape 668.

⁷⁹ For critical reviews on coroners' inquests into overlaying see *Lancet*, 2 June 1883, 963; 29 July 1905, 307; and 5 February 1910, 379.

⁸⁰ Woodward, *Jipping Street*, 96.

⁸¹ For breakdown of statistics relating alcohol to overlaying see H. Jones, 'Perils of Infant Life', 41, and *Lancet*, 11 March 1905, 660; 20 January 1906, 189; 16 June 1906, 1710.

⁸² R. Roberts, *Classic Slum*, 85.

was the function of gossip. That suspicion fixed so easily upon cases of overlaying rested on the lack of alternative explanations for cause of death. Moreover, the very term 'overlaying' is suggestive of an active and deliberate action. As Ellen Ross notes, however, most incidents were probably accidental and would, today, be classed in less inflammatory terms as 'crib deaths'.⁸³ The difficulty of defining both the cause of death and parental responsibility did not escape contemporaries. In 1909 Charles Rothera, the coroner for Nottingham, rejected claims that overlaying represented an act of wilful murder; the majority of babies died as a result of being breast-fed at night and the mother falling asleep with the child on her arm. The child then suffocated. It was impossible to gauge the parents' state of sobriety at the time of death. Nonetheless, he suggested, most mothers should have been aware of the risk involved in taking babies to bed and refrained from doing so. In that sense, overlaying could be categorised as deliberate negligence.⁸⁴

The pitfalls of assuming malevolent intent were highlighted during a debate at the Midwives Institute in 1908 which concluded, firstly, that women did not go to bed drunk but were exhausted from overwork and, secondly, that many women put their babies in bed with them, especially during winter, because the warmth of a mother's body was vital to a child's survival (particularly when the quality and quantity of bed clothing was inadequate).⁸⁵ Maud Pember Reeves supported this notion, arguing that mothers derided the idea that babies would be warm outside of the parental bed: 'when one looks at the cotton cot blankets, about thirty inches long, which are all their wildest dreams aspire to, one understands their disbelief'.⁸⁶ To assume that wilful cruelty precipitated the placing of babes in beds was perverse. Purporting to represent the opinions of the Edwardian Devonshire working class, Stephen Reynolds raged: 'I should like to see the likes o' they work hard all day and then have a kid squalling in a cradle all night, an' hae to keep on getting out of bed to 'en, for to gie 'en the breast, and taking o'en out into the cold. Babies sleeps quieter 'long wi' their mothers, an' they thrives better, too, I believe.'⁸⁷ Some adults certainly reconstructed the childish experience of sharing the parental bed as literally and metaphorically warm and comforting. Albert Jasper described being forced to surrender a place in his mother's bed to make room for a new baby as a milestone in

⁸³ Ross, *Love and Toil*, 189. ⁸⁴ PP 1910, XXI: 11,069–77.

⁸⁵ *Lancet*, 23 May 1908, 1507–8. ⁸⁶ Reeves, *Round About a Pound*, 51.

⁸⁷ S. Reynolds, B. Woolley and T. Woolley, *Seems So! A Working-Class View of Politics* (London: Macmillan, 1911), 31–2.

growing up, but one that was not reached without a sense of pique or disappointment.⁸⁸

Like overlaying, the employment of mothers outside the home occupied an ambiguous role in the causes of infant mortality: children suffered ‘perils due to their neglect by their mothers’ and were susceptible to ‘the ignorance [and ambivalence] of those to whose care they are entrusted’.⁸⁹ Yet the wages earned by working mothers were often crucial to family living standards. In Lancashire, female mill-workers could earn more than their husbands.⁹⁰ Negative assumptions concerning childminding recalled the baby-farming scandals of the mid-century. As Poplar MP Will Crooks, the embodiment of working-class upward mobility, argued in 1896, such associations assumed that parents selected carers indiscriminately. On the contrary, he found that most working parents were anxious to place their offspring with ‘respectable’ and kindly persons.⁹¹ Crooks’s observation hit upon a key theme in the debates concerning infant welfare: the gap between middle-class understanding and working-class practice. Notably, bourgeois notions of ignorance easily merged into more accusatory charges of neglect. Even when making distinctions between passive and wilful neglect, the term held connotations of apathy and indifference towards one’s children. Yet middle-class definitions of ignorance could be interpreted as attentive care within the working-class home; this hardly signified ‘neglect’ or indifference, but, rather, different understandings of child-rearing practice.

As Florence Bell noted, the biggest liability to infant life was not want of affection, but a lack of knowledge pertaining to nutrition, sanitation and healthcare.⁹² Notably, parents often turned to folk remedies for the treatment of illnesses. Describing East End Londoners, Helen Bosanquet lamented the popularity of administering stewed tea to sickly babies; of giving orange, brandy and sulphur as a medicine for measles; and of feeding infants the wrong foodstuffs.⁹³ Robert Tressell illustrated

⁸⁸ Jasper, *Hoxton Childhood*, 12.

⁸⁹ H. Jones, ‘Perils of Infant Life’, 56. Under the Factory Act 1891, mothers’ jobs were to be kept available for one month after confinement, after which time they had to return to work or forfeit their job.

⁹⁰ *The Times*, 15 November 1894, 7. See also *Lancet*, 28 March 1898, 878. For studies on the effects of mill work on infant welfare see *Lancet*, 7 July 1906, 51; 8 April 1911, 969; and 26 April 1913, 1202; C. E. Collet, ‘The Collection and Utilisation of Official Statistics Bearing on the Extent and Effects of the Industrial Employment of Women’, *Journal of the Royal Statistical Society*, 61 (April 1898), 219–60. *Lancet*, 8 April 1911, 969, and *Lancet*, 26 April 1913, 1202.

⁹¹ Minutes of Evidence Taken Before the Select Committee on Infant Life Protection and Safety of Nurse Children Bills, PP 1896 (343) X: 225.

⁹² Bell, *At the Works*, 197–8, 213. ⁹³ Bosanquet, *Rich and Poor*, 91–2.

the tension between conflicting definitions of care and ignorance in his polemical novel, *The Ragged Trousered Philanthropists*. Emphasising the pride the Eastons take in their 'very beautiful child' and the anxiety they express at his weight loss, both parents are oblivious to the fact that the solids with which they feed the child (at the expense of their own appetites) are the root of the babe's discomfort and vomiting.⁹⁴ This was not 'neglect' but a mistaken concept of good infant feeding. The advent of the health visitor, initiatives to vaccinate children against disease, to popularise new paradigms of hygiene and to supply milk for infants were, undoubtedly, invaluable in reducing infant mortality figures. Nonetheless, the task of selling new scientific constructs of motherhood and disseminating information to poorer families was difficult. The implication that parents, especially mothers, neglected their children by adhering to customary child-rearing practice could cause deep resentment.⁹⁵ Violet Butler wryly observed the shock registered by newly married young women when they discovered how many well-meaning strangers wished to visit and advise them.⁹⁶ Some visitors (often affiliated to district voluntary ladies' associations) exercised tact and discretion; others came across as patronising. Andie Clerk stated that the 'narrow-minded bigoted interference' of 'do-gooders' was as damaging to children as parental ignorance.⁹⁷ Stephen Reynolds turned the tables of ignorance on the middle classes, claiming that legal measures designed to protect poorer children were undemocratic; a 'gross and stupid insult, the outcome of sentimentality and ignorance, engineered by well-meaning busy-bodies'. Measures intended to help did little more than 'insult' and 'harass' the poor.⁹⁸ Annie Buckley (born 1902) recalled her mother's outrage when a young, unmarried visitor from Oldham Health Clinic called to offer childcare advice after the birth of a younger sibling: 'When you've brought up as many children as me, you can come and tell me how to bring them up.'⁹⁹ Again, such defiance in the face of 'lady visitors' suggests not so much an indifference to children as sensitivity to the slur on the parenting skills of poor families.

⁹⁴ Tressell, *Ragged Trousered Philanthropists*, 57–60.

⁹⁵ See F. B. Smith, *The People's Health*, 65–135, C. Dyhouse, 'Working-Class Mothers and Infant Mortality in England, 1895–1914', *Journal of Social History*, 12, 2 (1978), 248–66, A. Davin, 'Imperialism and Motherhood', *History Workshop Journal*, 5 (1978), 9–65, R. Apple, 'Constructing Mothers: Scientific Motherhood in the Nineteenth and Twentieth Centuries', *Social History of Medicine*, 8, 2 (1995), 161–78, and R. Hawes, 'The Development of Municipal Infant Welfare Services in St Helens, 1868–1914', *Transactions of the Historic Society of Lancashire and Cheshire*, 143 (1993), 165–92.

⁹⁶ Butler, *Social Conditions in Oxford*, 182.

⁹⁷ Clerk, *Autobiography of a Street Arab*, 10–11.

⁹⁸ Reynolds et al., *Seems So!*, 39.

⁹⁹ Man. OH Tape, Annie Buckley, Tape 594.

Birth, death and bonds of affection

The publication of *Maternity: Letters from Working Women* by the Women's Co-operative Guild in 1915 provided a forum for literate working-class women to express their fears and struggles with pregnancy and childbirth. The letters were hardly representative: contributors came from a self-selecting cohort who had become involved with the women's co-operative movement. The final collection of letters was edited by the middle-class activist Margaret Llewelyn Davies and an introduction was added by the feminist writer Virginia Woolf. The political thrust of the collection was to encourage women to triumph over adversity through self-improvement, thrift and co-operation. Despite the limits of the sample, the women represented came from a variety of backgrounds and their stories of motherhood provide an insight into models of pregnancy framed within the context of economic insecurity and high infant mortality rates. Notably, most of the women described pregnancy at the turn of the twentieth century in a language of personal anxiety, despondency and financial apprehension. The majority of children were unplanned, births endangered the lives of their mothers and they represented a costly addition to the family unit.¹⁰⁰ If pregnancy was discussed in a seemingly negative narrative frame in the respectable biography, pessimism was exacerbated for the unmarried or deserted woman by social isolation and increased economic insecurity. That these women figure large in histories of abortion and infanticide is, perhaps, unsurprising.¹⁰¹

If mother and child survived pregnancy, the first year of infant life, especially up to three months, represented a period of acute vulnerability to deadly infection.¹⁰² As Ellen Ross notes, it is not surprising that parents were often wary of forming strong emotional bonds to newborn babies, especially those infants who seemed 'sickly' or 'delicate', or that

¹⁰⁰ M. L. Davies (ed.), *Maternity: Letters from Working Women* (London: Virago, [1915] 1989). See also Ross, *Love and Toil*, 91–127.

¹⁰¹ A. McLaren, *Birth Control in Nineteenth-Century England* (London: Croom Helm, 1978), A. Oakley, *The Captured Womb: A History of the Medical Care of Pregnant Women* (Oxford: Basil Blackwell, 1984), J. Lewis, *The Politics of Motherhood: Child and Maternal Welfare in England, 1900–1939* (London: Croom Helm, 1980), 196–218, Rose, *Massacre of the Innocents*, 170–4, M. Stopes, *Contraception (Birth Control): Its Theory, History and Practice, A Manual for the Medical and Legal Professions* (London: John Bale, Sons & Danielsson, 1923), J. Keown, *Abortion, Doctors and the Law: Some Aspects of the Legal Regulation of Abortion in England from 1803–1982* (Cambridge: Cambridge University Press, 1988), P. Knight, 'Women and Abortion in Victorian and Edwardian England', *History Workshop Journal*, 4 (1977), 57–69, A. McLaren, 'Abortion in England', *Victorian Studies*, 20, 4 (1977), 379–400, and B. Brookes, *Abortion in England, 1900–1967* (London: Croom Helm, 1988).

¹⁰² Woods and Shelton, *Atlas of Victorian Mortality*, 47–92.

mothers made implicit distinctions between bearing and rearing children.¹⁰³ Unplanned pregnancies, hesitant attachments to newborns and 'ignorance' concerning child-rearing practice were, however, markedly different from wilful neglect and murder. Indeed, some parents' relationships with their offspring were openly affectionate. Margaret Loane claimed that there was 'scarcely' a home she visited where the family was so poor that 'no one in it rejoices over the birth of a child'. Even in the most poverty-stricken households, children were indulged in some small way on their birthday. Loane further reflected that the sight of working-class fathers picking up their 'grimy, howling' children never ceased to surprise her: men would walk about with the child in their arms, 'pressing kisses in its cheeks, and crooning lovingly'.¹⁰⁴ Whether it was affection for a grubby child or masculine displays of explicit affection that startled Loane is unclear. Whilst Loane's enthusiasm needs to be treated with caution – a self-proclaimed friend of the poor, some of her representations risk falling into sentimental 'honest but poor' type-casting – her accounts of family dynamics offer a counter to images of unrelenting gloom and disaffection. Importantly, Loane's surprise at witnessing scenes of affection between fathers and dirty children is suggestive of the prejudices about class, gender, hygiene and parenting held by both Loane and her audience. In acknowledging her surprise at masculine affection, however, Loane pre-empts the disbelief of the reader and lends authenticity to her claims.

The dynamics of working-class interpersonal relationships were not widely perceived to be typified by demonstrative gestures. Rather, many relationships were characterised by oblique signs of attachment and affection. Alice Foley's reconstruction of her childhood demonstrates the ambiguity of some kinship ties. Foley's vision of her parents' young family casts each newborn baby as 'another unwanted addition to an already harassed household yell[ing] its way into existence'.¹⁰⁵ Yet despite an ostensible indifference to her children, Foley's Catholic mother insisted that each babe be baptised immediately in case of death. The 'christening' was not a cultural or social rite of passage (Foley was carried to the priest in the dead of night by her sister) but, rather, important in terms of guaranteeing an afterlife for the babe and burial: Catholic liturgy dictated that unbaptised babies were consigned to limbo and baptism permitted the interment of the corpse in consecrated ground. The disparity between maternal indifference and baptismal

¹⁰³ Ross, *Love and Toil*, 131, 179–86. See also Michael Tooley, *Abortion and Infanticide* (Oxford: Clarendon, 1983), 310–22.

¹⁰⁴ Loane, *Queen's Poor*, 21–2. ¹⁰⁵ Foley, *Bolton Childhood*, 3–4.

significance suggests a complexity which is echoed throughout Foley's biography. Crucially, the vision of a bleak infancy untouched by displays of affection does not conflict with notions of emotional attachment. Rather, it works as a device to emphasise the hardship which characterised most working-class families and the perpetual exhaustion of mothers. Significantly, there is no doubting Foley's feelings towards her 'kindly, undemonstrative' mother: 'I loved her passionately.'¹⁰⁶ Foley's account suggests that concepts of love were complicated and subject to individual criteria which were not always identifiable to observers. It is in this light that we must re-read responses to infant and child death.

Negative stereotypes and allegations of neglect ('They don't wish any better result than death, but only that they should be screened from an inquest'¹⁰⁷) conceal the extent to which many parents fought to save a child's life. As Margaret Loane commented, 'in ordinary family life among the poor nearly every child in arms that I have seen die has died because no amount of care would keep it alive'.¹⁰⁸ Assistant Medical Officer of Health in Liverpool in the 1880s, Edward Hope, traversed the slum homes of the city in an attempt to quarantine infectious disease. Like many of his contemporaries, Hope often made implicit associations between poverty, dirt and immorality. Nonetheless, his home-visit reports indicate that destitution did not always preclude parental affection. They also highlight the ambiguous use of the term 'neglect'. Visiting a family of ten in Liverpool in December 1886, Hope found both a five-year-old and an infant severely ill. The older child, Emily, was in a 'very dirty and neglected condition'. Having made such a loaded observation, Hope then noted that the sick baby 'occupies all the mother's time'.¹⁰⁹ The apparent 'neglect' of Emily could signify lack of nutrition and sanitation rather than wilful neglect. Notably, babies required more attention by virtue of their dependency on others and, in the context of sickness, mothers could weigh up respective chances of survival and focus their attention on those considered most vulnerable. Parents were often reluctant to part with their offspring. In October 1885, Edward Hope reported that Rose Mooney, aged five, was sick from scarlatina and ought to be removed to hospital 'but the mother declines to part with the child'.¹¹⁰ On visiting the Farrington family in 1886, Hope noted that 'the mother was totally unable to continue to wait upon' her child who was sick with smallpox. Hope's note that one child had already been nursed to health and that the family were striving to avoid pauperism implied that Mrs Farrington

¹⁰⁶ Ibid., 8. ¹⁰⁷ *Lancet*, 23 October 1875, 616. ¹⁰⁸ Loane, *Queen's Poor*, 137.

¹⁰⁹ LVRO 353 HEA 2/2, 6 December 1886. ¹¹⁰ LVRO 352 HEA 2/2, 15 October 1885.

was exhausted and anxious about finance.¹¹¹ Hope urged admission to hospital for three children (aged between three and seven) sick with scarlet fever in Henderson Street in December 1886. Despite her advanced state of pregnancy, however, their mother objected to their removal from the home.¹¹² Highlighting the potential involvement of fathers in decision-making processes about childcare, Hope reported that Kate Westman, aged five, had scarlet fever but her mother refused to grant permission for admission to hospital, claiming that her husband would assault her if Kate left home.¹¹³ Hope clearly perceived childcare and sanitation as a female concern. This may derive from his assumptions about gender roles within the family, although the very poverty of these people implied the failure of the father to fulfil a breadwinning role and, perhaps in Hope's eyes, destabilised his claim to represent authority within the family.

Nonetheless, Hope's assumptions do reflect the division of labour in many working-class households, with nursing and childcare falling largely to women. Some mothers devoted themselves to the care of sick children at the expense of other duties. Indeed, Ellen Ross suggests that maternal skill provided children with their best chance of surviving life-threatening illness.¹¹⁴ One Bolton mill-worker, born 1899, recalled an outbreak of measles which affected all the children in his family. Three siblings recovered and one sister died. A fifth child, the baby Frederick, lingered between life and death. His mother 'did her best' to fight for the babe's life, an effort lauded (and legitimised) by the family doctor. When Frederick finally expired, it was a harrowing 'tragedy'.¹¹⁵ Some women appeared to stake their identity as good mothers on their ability to cheat death. One contributor to the Women's Co-operative Guild collection of maternity letters explicitly stated that 'adoration' of her 'treasures' had sustained them in their fight for life.¹¹⁶ Another mother recounted the apparently fatal illness of an infant daughter. Caring for the child exacted a 'fearful' toll on the woman's own health, yet she maintained her vigil and the child recovered. The implication in this account was that selfless devotion, epitomised in the phrase 'but I loved', proved a formidable weapon in the battle against death.¹¹⁷ It could also, however, represent a dreadful source of guilt if that battle were lost.

¹¹¹ LVRO 352 HEA 2/1, 24 June 1886. ¹¹² LVRO 352 HEA 2/2, 18 November 1886.

¹¹³ LVRO 352 HEA 2/2, 15 October 1886.

¹¹⁴ Ross, *Love and Toil*, 167. Indeed, 'ex-babies' were expected to attain a degree of independence when a new baby arrived in the family. *Ibid.*, 38.

¹¹⁵ BOHT, Tape 121b, Reference: JP/LSS/A/015. ¹¹⁶ M. L. Davies, *Maternity*, 32.

¹¹⁷ *Ibid.*, 45.

The fatalism permeating some stories of child bereavement may, in this sense, reflect little more than a desire to rationalise death and deflect feelings of responsibility: parents had done all within their means to prevent death but were powerless when pitted against Providence.¹¹⁸ Ellen Ross refers to this as the ‘emotional paradox’ which characterised maternal affections: fatalism, reluctant pregnancies and tentative attachments to newborn babies must be set against the fights women waged for the survival of their offspring.¹¹⁹ Nonetheless, expressions of resignation glossed over the self-sacrifice and solicitous care mothers typically exercised towards their children, whilst the apparent composure of parents was often interpreted by external observers as evidence of apathy. As with responses to adult deaths, however, linguistic inarticulacy often reflected the incoherence, incomprehension and frustration of grief. Hospital nurses were reportedly fascinated by mothers who kept a constant vigil by the bedside of sick children yet said so little; their reserve was incongruous with such devoted and watchful care.¹²⁰ When children died, frugal expressions typically concealed the agony of grief. Maud Pember Reeves cited the case of a mother who nursed her sick baby with unstinting devotion. When the infant died, she was distraught. Yet the doctor who arrived to certify the death simply beheld a composed woman whose only reference to bereavement was the dispassionate comment that it was ‘better’ now that the child was dead.¹²¹ One Lancashire woman nursed her youngest and most ‘favourite’ child Billy, sick with diphtheria, for three days and nights. Breaking the news of his death to other family members, however, she was inexpressive and concise: ‘He’s better now, he’s with Grandma and Auntie Hetty.’¹²² A curious child, Jane Hampson (born 1898) quizzed her mother over whether she was ‘heart-broken’ at losing five of her children to death. The reply was succinct and unsentimental: ‘I was but I hadn’t time to be because there was always another coming.’ Conceding the apparent harshness of the statement, Hampson juxtaposed it with her mother’s fondness for telling the story of her eldest child’s death, asserting that the girl was ‘the prettiest [child] she ever had’.¹²³ For Hampson, all the distress of maternal bereavement was encapsulated in the story of one child. That her mother focused on this story is not to suggest that her other children were any less meaningful, but, rather, that a first bereavement remained vivid in memory because it required the development of strategies for coping. For Hampson’s

¹¹⁸ Ross, *Love and Toil*, 192. ¹¹⁹ *Ibid.*, 181. ¹²⁰ *Ibid.*, 168–9.

¹²¹ Reeves, *Round About a Pound*, 90–1. ¹²² Seabrook, *Working-Class Childhood*, 25.

¹²³ Man. OH Transcript, Jane Hampson, Tape 692.

mother and many like her, pragmatism and economy with words reflected a desire to make grief manageable and to look forward.

Nursing a sick child could unravel previously untapped, or unseen, sources of parental affection. Throughout his autobiography, George Acorn expressed resentment towards his parents whom he characterised as rough, violent and incapable of affection. Recollecting the death of his baby brother, however, Acorn described how his mother worked 'like one possessed' to save the child, nursing it lovingly with 'sweet, soothing invocations'. When the child died, she 'braced herself' and emitted a 'piercing scream'. Acorn describes being hemmed in with his mother in their squalid room by an oppressive atmosphere of utter hopelessness. By the time Acorn's father returns home, his mother has composed herself: she speaks 'mechanically', her white face is 'set', and her eyes seem lifeless. Against this impassiveness, Acorn recounts his father, 'unemotional man as he was', breaking down into 'heartrending sobs'. This scene sits somewhat uneasily with Acorn's later assertion that slum life 'is simply animal against animal, via conventional routes'. Distaste and despair at the poor pervade Acorn's writing and he appears unsure of how to interpret the outburst of emotion occasioned by his brother's death. Observing that the death lightened the financial burden of his family, Acorn is repulsed that the burial insurance pays for new clothes and a drinking spree and implies that the sympathy of relatives and neighbours is superficial. In portraying himself as a 'love-starved, unresponsive, slum child', Acorn bitterly laments that his mother never demonstrated any tender love for him. He is, nonetheless, proud of the constant struggle she waged against poverty for her family.¹²⁴ Such inconsistencies angered and perplexed Acorn. Indeed, they demonstrate the difficulties of seeking to categorise and define interpersonal relationships among the poor. In raging against a lack of open, verbal, physical and sentimental affection, Acorn acknowledged the misery of poverty. Yet it is possible to locate within Acorn's story of struggle and sacrifice an implicit and consistent belief in the family as a unit, not merely of economic ties, but of abstract bonds of loyalty and identity also.

Within the private space of the home and individual reflection, feelings of loss adopted various guises, some of which were shared with family and friends, others of which remained personal and tied to multiple anxieties and sorrows. Gissing captured the mutability of parental grief in the pitiful character of Pennyloaf Candy. Pennyloaf's youngest child resembles 'a wax doll that has gone through much ill-usage'; it testifies to

¹²⁴ Acorn, *One of the Multitude*, 35–45, 65.

Pennyloaf's poverty and her ignorance in matters of nutrition and child-care. As the child's health visibly deteriorates, Pennyloaf's anxieties accrue. Finally, she determines to undertake the laborious journey to the hospital to seek advice. In the instant she meets the doctor, however, the child dies. Pennyloaf stares at the babe in 'a sort of astonishment', repeatedly asking 'Is she really dead?' Gissing implies that her 'stupid' questioning and 'dazed, heavy, tongue-tied state' embodies a state of shock and wonder. Far from a passionate outburst of grief, Pennyloaf's first instinct is to seek her old friend, Jane Snowden. A sense of desolation and despair only become manifest when Pennyloaf realises that she has left her umbrella at the hospital and must walk in the rain in wet shoes. It is this relatively mundane disappointment that tips Pennyloaf into a need to 'overcome all obstacles' and speak to Jane.¹²⁵ Gissing not only illustrates the disparity between apparently subdued public responses to bereavement and private emotion, he also suggests the potential for individual grief to kaleidoscope through a medley of sorrows, concerns and needs, none of which need fix on the identity of the deceased. This riot of feeling did not annul a sense of grief, but, rather, represented the complexity of loss and the inextricability of death from wider anxieties.

Like Gissing, Florence Bell recognised that grief rarely operated in isolation and that relationships between parents and offspring were ambiguous. Nevertheless, she frequently lapsed into simplistic equations between poverty, high mortality rates and immunity to grief. According to Bell, the 'majority of parents, it is needless to say, love their children, in spite of all the trouble and anxiety they entail': children were an occupation, a reason for prudence, and a bond between spouses. When children died, it could occasion great sadness, especially for the mother whose core identity hinged upon domesticity and childcare. One woman who withstood the deaths of four of her seven children was a 'sickly-looking creature' who had 'never picked up since their death'. Another, Mrs S, failed to recover from the successive deaths of nine children. Bell was also struck by women who struggled to sustain the lives of children whose survival was, 'frankly [of] no gain to the country'. Mrs D, a worn and weary woman, had given birth to sickly twins. Despite their frailty, their mother 'beamed with exultation' and looked down on them with 'tenderness and rejoicing'. At great cost to her own health, Mrs D fought to keep the babies alive until, 'to her intense grief', one of them died.

It would be easy to criticise Bell for expressing dubious views on the value of 'sickly' infant life, but stories of mothers who adored the babe

¹²⁵ Gissing, *Nether World*, 267–8.

apparently doomed to illness and death serve to emphasise the purely sentimental bonds between parent and child. Moreover, assertions of desolation and despair in response to child death were comprehensible to Bell's sensibilities. The comparative rarity of child mortality in middle-class families rendered the impact of multiple bereavements a 'dread story': 'A woman among the well-to-do who should have had seventeen children and lost twelve, would be marked out as she went about the world for the wonder and compassion of her fellows.' The death of a child among the working classes was, however, 'cruelly frequent' and 'accepted' as a possible 'destiny' for each child born. Bell's comparison implied a conceptual framework for different degrees of grief in relation to material security. Indeed, she speculated that 'easygoing, good-natured and cheery' mothers who lost children to death had achieved a 'comparative immunity' from bereavement. Bell also noted the significance that poorer parents attached to the material implications of infant and child death. For some at least, she conjectured, death 'lessen[ed] the burden of life' and was construed as a 'positive benefit instead of a misfortune'. In this sense, she thought mothers were tempted to practise passive neglect, 'allowing' their children to die. Bell cited the example of a woman who expressed bitter regret that her child died only a week prior to the validation of its insurance policy. Another stated that it was 'better' that all her children had died as they were all insured. Bell placed such attitudes within the context of financial realism.¹²⁶ What she overlooked was that anxieties about finance represented a public language of loss which expressed bitterness and desolation, yet was sufficiently impersonal to articulate to others, especially the bourgeois wife of their husband's employer. Bell failed to acknowledge the possibility that in making conceptual links between material circumstance and death, parents were invoking a language which they thought Bell expected to hear or, at least, which represented a form of anguish she could comprehend. Finally, anxieties about finance need not signify the profiteering potential of infant death, but, rather, the cruel irony of circumstances which aided and abetted early death.

In the same way that languages of resignation could be confused with apathy, the rationale of some parents was apt to be interpreted as flippancy by external observers. Florence Bell was struck by one woman's candid assertion that 'I lost all my children when they were babies, but it was better they should go when they were young, for now I know they are little saints in heaven.' Another claimed that her child of six had been 'too

¹²⁶ Bell, *At the Works*, 191–200.

clean to live'. Bell found such reconciliation incredible and could only suggest that the children who died were those with fastidious and timid personalities.¹²⁷ Yet such conceptual frameworks carried psychological value, not least because they promised bereaved parents that children had been saved from a life of privation and toil. Whether parents referred to sophisticated spiritual beliefs is not important. Rather, such perceptions suggest a rhetorical device which provided consolation merely by comparing 'peace' in death with the negatives of life.¹²⁸

Weighing death against the possibilities and opportunities in a child's future could be invoked as a deliberate strategy for accepting bereavement. This is not to suggest that such reasoning was without conflict. Deborah Smith recalled the agony of watching her youngest child suffer from prolonged inflammation of the lungs and the advice of a neighbour to pray for his death. Whilst seeing the boy in discomfort pained her, she found it difficult to reconcile this advice with her will for him to survive and the pleasure she derived from his company. Finally, Smith resolved her dilemma by creating a notion that the child was borrowed from God and must be allowed to return:

I kissed his face and thought of all we had shared together. It was better so; his little heart would ache no more; no more would that cough rack his frame. His spirit had gone to God who gave it to us for just a little while. We laid him to rest on his fourth birthday. Gone but not forgotten.

Lest her reader find her reconciliation perverse, Smith affirmed her rationale exclaiming 'What a lovely child he was! People sometimes told me he was too fair for this world.'¹²⁹

When children did expire, notions of innocence and frailty also invested their remains with extra significance: small corpses represented the fragility of life, innocence and the consolation of spiritual belief. This is most explicit in the use of white coffins for children, a visual metaphor for the purity of the young.¹³⁰ Kathleen Woodward described one baby's coffin as a 'little white box, trimmed with fancy paper'. The paper, usually used to line wedding cakes at the pastry shop, suggests hope, delicacy and sweetness.¹³¹ That the prettified coffin holds the rotting corpse of a child

¹²⁷ Ibid., 191–2.

¹²⁸ Abstract associations with angels and cherubs could render the visual (and pungent) presence of a disfigured corpse palatable.

¹²⁹ D. Smith, *My Revelation*, 40–2.

¹³⁰ See Man. OH Tape, Florence Smith, Tape 962, GRO D4375, Accounts of W. B. Wood & Sons, carpenters and builders, and Jasper, *Hoxton Childhood*, 14. Coffins could also be covered in white material. See M. Chamberlain, *Growing Up in Lambeth* (London: Virago, 1989), 85–7.

¹³¹ Woodward, *Jipping Street*, 78–81.

demonstrates the use of symbolism in attempts to ameliorate the horror of death and decay. Albert Jasper's association between a baby's corpse and his 'first glimpse of peace' similarly draws on notions of innocence. That the image is contextualised within a vermin-infested tenement flat emphasises the incorruptibility of the dead infant and, implicitly, draws attention to the awfulness, not of death, but of life.¹³²

That some of the mechanisms for managing grief were shocking to middle-class sensibilities highlights a gap in experience; it also reminds us of our own perceptions of infant death. Recalling her grandmother, a skilled midwife, Maggie Chapman described her as 'hard as iron'. In particular, Chapman expressed horror at the older woman's imperviousness to the grief of a woman whose baby was stillborn; it was a 'repairable loss'. Chapman's shock probably says more about her own sensibilities and the cultural context in which she articulated the memory than those of her grandmother.¹³³ Indeed, it could be argued that the saying was intended to be consoling. Significantly, the grandmother's phrase did not imply that babies were a burden or unwanted, but, rather, that the distress of their deaths would fade and other children would ameliorate the loss. Anne Tibble's recollection of her parents' desperate wish for a baby son goes some way to support this. Tibble read their desire as indicative of searing bitterness that their first child had died. Another boy would not replace the dead child in a literal sense, but, rather, would assuage the intensity of loss.¹³⁴ In a similar vein, the reuse of babies' names is sometimes interpreted as expectation of death and the failure of parents to invest emotion or individuality in children. This seems rather cynical. Surely, the persistent attachment to a particular name indicates the extra meanings vested in it, not least as a living memorial to its forebears and an inclination to perpetuate associations with that identity.

Clearly, grief became manifest in numerous ways, many of which were invisible or incomprehensible to the external observer. As Ellen Ross noted, mothers tended to express grief through their bodies: they stumbled, raged, took to drink or simply became silent and still.¹³⁵ One mother, writing to the Women's Co-operative Guild, related that she had nursed her 'sweet little girl' (aged four) day and night for two weeks. When the child died, she was 'so done up' with exhaustion and grief that she miscarried a baby and almost lost her own life.¹³⁶ Tears were, perhaps, the most tangible articulation of loss. Margaret Penn recalled the

¹³² Jasper, *Hoxton Childhood*, 14. ¹³³ Maggie Chapman in Kightly, *Country Voices*, 101.

¹³⁴ Tibble, *Greenhorn*, 63. This was particularly painful for Anne as she imagined her birth was a disappointment to them.

¹³⁵ Ross, *Love and Toil*, 191. ¹³⁶ M. L. Davies, *Maternity*, 158.

funeral of a schoolmate whose mother, ‘sobbing loudly’, ‘made as if to jump onto the coffin’.¹³⁷ Albert Jasper recalled the visible sorrow of a bereft father whose ‘eyes were red with crying’.¹³⁸ Relating the death of his niece, Jasper painted an image of weeping, despair, sleeplessness and dependency on his mother: ‘Mum pulled everyone together.’¹³⁹ One Bolton man (born 1896) recollected the death of his baby sister when he was three years old. Hearing a ‘horrible bustle’ in the house one morning, the boy went to the kitchen: ‘I saw a crowd there, mother’s crying in the middle of the crowd, me aunts round her.’¹⁴⁰ The scene of a child watching his distraught mother surrounded by sympathetic relatives is striking: in all its simplicity, it conveys a profound sense of anguish. James Hardman (born 1905) recalled that a ‘terrible lot of trouble’ erupted when his eighteen-month-old brother died whilst in hospital. The story of his father’s bitter conviction that medical negligence had precipitated the boy’s death was repeatedly told by the family who had difficulty in accepting that the child had died.¹⁴¹

Of course, the most conventional means of expressing loss was through the rites associated with burial. In cases where children and babes received formal burial, customs surrounding the care and disposal of the corpse were often significant as landscapes for the expression of grief in similar ways to those of funerals for adults. Such practices facilitated a verbal and symbolic language of loss and condolence. Moreover, as most rituals concerning the care of the corpse centred on women, workplace collections provided a practical forum for men to express a language of condolence.¹⁴² It is also plausible to suggest that the ability to finance a funeral represented a language in which fathers could both affirm their status as ‘provider’ and use it to express commitment to their family. Responses to the death of a child also extended beyond the rituals of interment; a grieving process might begin with the illness of a child and persist long after its funeral. Common to most, however, was the management of feeling, enabling parents to attend to the pragmatics of life without nullifying their sense of loss. David Vincent suggested that consideration of material relief could ‘cushion the blow’ of a child’s early death.¹⁴³ An alleviation of household expenditure seems a particular hard cushion. Parents may have referred to child death in languages of pragmatism and resignation. Such expressions were easily mistaken for

¹³⁷ Penn, *Manchester Fourteen Miles*, 160–2. ¹³⁸ Jasper, *Hoxton Childhood*, 14.

¹³⁹ *Ibid.*, 49. ¹⁴⁰ BOHT, Tape 41a, Reference: LSS/A/005.

¹⁴¹ Man. OH Tape, James Henry Hardman, Tape 927.

¹⁴² Ross, *Love and Toil*, 193–4, and Jasper, *Hoxton Childhood*, 14 and 49.

¹⁴³ Vincent, *Bread, Knowledge and Freedom*, 58.

flippancy or hard-heartedness. However, as with responses to adult bereavement, parents adopted malleable, symbolic and abstract gestures as their principal forums for articulating sorrow. Furthermore, the material impact of a child's death was inescapable; it was rarely, however, the only factor taken into consideration when a parent became bereaved.

Conclusion

Infanticide, child neglect and the falsification of birth certificates featured prominently in Victorian and Edwardian debates concerning working-class parenting. Clearly, some parents were indifferent and callous towards their offspring. Yet as theories linking death with disease, poverty and environmental conditions gained credence at the end of the nineteenth century, perceptions of the causes of infant mortality shifted away from an emphasis on child murder towards medical and public health issues. The panic concerning infanticide stemmed, as Wohl suggests, from a tendency among 'comfortable' Victorians to 'believe the very worst of the masses'.¹⁴⁴ That parents often expressed a language of fatalism in response to child death cemented negative perceptions of the relationship between poverty and sensibility. It followed that a class which could 'stoop to infanticide' and be resigned to infant death would not experience any great sorrow at the death of their offspring.¹⁴⁵

In Britain at the beginning of the twenty-first century, child death is rare and overwhelmingly perceived as a tragedy. As Vincent suggested in the early 1980s, death on a similar scale to Victorian mortality rates 'would have a shattering effect on the personality and family life of anyone so afflicted in our own society'.¹⁴⁶ Much like Florence Bell observing the working classes from a middle-class perspective, we struggle to make the imaginative leap in comprehending how individuals coped with recurrent death. It is beyond our capacity to empathise with such bereavements. In this sense, the notion that poverty and familiarity with death dulled the sorrow of repeated deaths, to the point of indifference in some cases, horrifies us whilst rendering our definitions of grief (and by implication, our inability to empathise) inappropriate. Yet there is a crucial difference between acknowledging that there are different experiences of bereavement and assuming that one is more distressing than another.

This chapter has shifted analysis away from indifference, resignation and poverty as evidence of immunity to profound sorrow: child death provoked intense distress, heartache, misery, wretchedness, pain and

¹⁴⁴ See Wohl, *Endangered Lives*, 34. ¹⁴⁵ *Ibid.*, 41.

¹⁴⁶ Vincent, *Bread, Knowledge and Freedom*, 56.

desolation. High infant mortality rates did not annul the hope that one's children would live. Indeed, it is worth remembering that whilst infant death was common, a great many children survived, even in the cities with the worst infant mortality rates, to reach adulthood. The language of resignation was part of a common vocabulary in which people aimed to make sense of life and death; the fatalism commonly associated with bereavement could express many things, not least a sense of exhaustion and weariness. Material circumstances were not irrelevant to responses to death. They often necessitated pragmatism in the face of grief. This was not, however, tantamount to indifference. Care of the corpse, a dignified funeral, sobs, silence and memory all formed part of a culture of bereavement which was defined not by poverty, but by diversity. Individual parents experienced grief to different degrees and expressed their loss in a variety of ways which, crucially, were not always apparent to those who expected sentimental statements of loss or displays of unfettered emotion. Yet there is little reason to suppose that diverse and pragmatic responses to death were any less meaningful.

When Jane Nixon, a housewife from Ulverston, was admitted to Lancaster Asylum in July 1880, she related to medical staff a story of exhaustion, privation and desolation. Described as 'low' and 'desponding', Jane had been 'wish[ing] she were dead' for the past ten days. Her health was delicate and she appeared weak and fretful. The cause of her distress was, she said, bereavement. Several of her children had died within the past month, the last only two weeks previously, 'leaving her two out of seven'. Jane explained that during this time, she had been 'overworked', caring for her 'brother, cousin, children, husband and herself'; she had 'been sitting up nursing [the child], lost her appetite and felt ill for a fortnight before its death'.¹⁴⁷ It may, of course, be coincidental that Jane's collapse occurred in the aftermath of the child's death. However, this story represents a useful parable. It is plausible to suggest that the will to nurse the child sustained a mother through her own exhaustion. The expiration of the child not only precipitated grief and frustration that efforts had been in vain, but, also, provided parents with the space to surrender to weariness and heartache. That many parents displayed an apparent capacity to survive bereavement did not mean that they felt less sorrow. Rather, grief reflected the ambiguity and complexity of familial relationships; people appeared to live in mute resignation not from blunted sensibility but because they grieved in personal ways and imbued the seemingly ordinary with private meaning.

¹⁴⁷ LRO HRL 3/8.