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Article

## The "Science of Motherhood"

Bethany Morey

AT THE TURN OF THE TWENTIETH CENTURY, MAJOR CITIES IN THE United States experienced radical growth as thousands upon thousands of immigrants flooded into the country with hopes for a better life and greater economic opportunities. Research indicates that women in particular anticipated the privileges and opportunities the states would provide them. Upon her arrival into the country, one Slovenian woman, brimming with anticipation exclaimed "Živijo Amerika, kjer so ženske prve!" (Long live America, where women are first!).<sup>1</sup> However, the reality of life in American cities proved to be starkly different from what most immigrants imagined. Cities were burdened by overpopulation, staggering infant mortality rates, and mothers and children were living in abject poverty in the tenements of the cities. Many individuals recognized the increasingly dire situation for immigrant families and made substantial efforts to reform life in the cities, especially for mothers and children. Individuals such as Sara Josephine Baker and institutions like the Caroline Rest greatly improved the critical situation by creating programs to educate impoverished mothers on the "science of motherhood," which

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1. Maxine Schwartz Seller, *Immigrant Women* (Philadelphia, PA: Temple University Press, 1981), 4.

led to the dramatic decline of infant mortality rates and improved the overall health of mothers and children in American cities.<sup>2</sup>

While some immigrants came for personal or familial reasons, the majority came for work.<sup>3</sup> Men rarely earned enough to support their family so “wives had to supplement the family income by working inside or outside the home.”<sup>4</sup> Foreign women soon constituted a major part of the American workforce.<sup>5</sup> Employers took advantage of the situation, recognizing that the majority of immigrants were desperate for any work they could find. Immigrants were underpaid and overworked, causing a shortage in job opportunities, increasing unemployment, and placing even further financial strain on new American families.

With the majority of job opportunities concentrated in the hearts of cities, immigrants tended to move to the center of the city, which quickly became dangerously congested. Landlords capitalized on this trend, overcharging for rent and filling the tenements beyond capacity. Consequently, inner cities quickly became the epitome of “abject poverty and squalor,” an “urban slum previously unseen in the United States.”<sup>6</sup> During her time as a doctor in Boston in 1898, S. Josephine Baker described a tenement she saw in Boston while visiting pregnant mothers:

I thought I already knew something about how filthy a tenement room could be. But this was something special, particularly in the amount of insect life. One dingy oil lamp, by the light which I could barely make out the woman in labor, lying on a heap of straw in one corner. Four stunted children, too frightened to make any noise, huddled together in a far corner. The floor was littered with scraps of food, too old to be easily identifiable, but all contributing to the odor of the place. Cockroaches and bedbugs crawled about everywhere. . . . All of it was the nth power of abject, discouraged squalor.<sup>7</sup>

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2. Elizabeth Ewen, *Immigrant Women in the Land of Dollars: Life and Culture on the Lower East Side 1890–1925*, (New York: Monthly Review Press, 1985), 138.

3. Donna Gabaccia, *From the Other Side: Women, Gender, and Immigrant Life in the U.S., 1820–1990* (Indianapolis, IN: Indiana University Press, 1994), 5.

4. Gabaccia, *From the Other Side*, 22.

5. Donna Gabaccia, *From the Other Side*, 46.

6. Richard A. Meckel, *Save the Babies: American Public Health Reform and the Prevention of Infant Mortality 1850–1929* (Baltimore, MD: The Johns Hopkins University Press, 1990), 12.

7. S. Josephine Baker, M. D., *Fighting for Life*, with a historical introduction by Patricia C. Kuszler, M. D., and Charles G. Roland, M. D. (Huntington, NY: Robert E. Krieger, 1980), 49.

Baker further described that tenements were crammed, "sometimes more than one family in a room, often boarders, never a bathroom, only some had a toilet inside."<sup>8</sup> In addition to being dirty and uncomfortable, the tenements were a breeding ground for contagious diseases that spread rapidly through the overcrowded housing.<sup>9</sup> The reality of the dangerous and miserable state in which families lived in the cities was devastating, crushing the dreams of millions of immigrants who came to the United States hoping for a better quality of life. One Italian woman, upon seeing the tenement her husband had purchased for them in the Lower East Side of New York City, looked at her husband and said "So, we have crossed half the world for this?"<sup>10</sup>

## Immigrant Mothers

The inexhaustible demands of work, the stress of awful housing conditions, and the pressure of caring for her children, life for the working immigrant woman was a constant struggle. "For the wage-earning mother . . . there is no hour of her day but has its duty, no day of her week but has its labor."<sup>11</sup> In many ways, mothers were "the backbone of everything" and kept families afloat.<sup>12</sup> They worked, cleaned, cooked, shopped, ironed, raised children, and completed a myriad of other daily tasks. Truly, immigrant mothers were the critical center "around whom the whole machinery of the family revolves."<sup>13</sup> It was an exhausting life and mothers could not handle all their duties alone. Housework was turned over to daughters the moment they were old enough to work. "Little girls helped their mothers as soon as they were able and children as young as ten or twelve sometimes managed the entire household for wage-earning mothers."<sup>14</sup> These young girls, frequently called "little mothers," took over as many child rearing tasks as they could once an infant could be separated from its mother.<sup>15</sup>

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8. Baker, *Fighting for Life*, 69.

9. Molly Ladd-Taylor, *Mother-Work: Women, Child Welfare, and the State, 1890-1930* (Chicago: University of Illinois Press, 1994), 28.

10. Elizabeth Ewen, *Immigrant Women in the Land of Dollars*, 60.

11. Molly Ladd-Taylor, *Mother-Work*, 30.

12. Elizabeth Ewen, *Immigrant Women in the Land of Dollars*, 109.

13. Ewen, *Immigrant Women in the Land of Dollars*, 97.

14. Maxine Schwartz Seller, *Immigrant Women*, 99.

15. Seller, *Immigrant Women*, 123.

One of the greatest concerns of mothers in the slums was bearing more children. Over half the women at the turn of the twentieth century with more than one child had children in intervals of 18 months or less.<sup>16</sup> Before coming to America, many women came from traditional, agricultural societies where large families were considered a gift from God.<sup>17</sup> However, in the slums of American cities more children became a curse. Another child meant another mouth a family could not afford to feed. One 23-year-old mother said, “I would rather die than have any more children when we cannot take care of them.” Another 30-year-old mother of four described the despair of bearing more children saying, “My soul cries out to die rather than have more babies. . . . I’d be happy if I wasn’t constantly under the shadow of more babies.”<sup>18</sup> For these mothers and thousands like them, pregnancy and childbirth were no longer a joyous blessing, but rather causes of great distress and worry for the health and financial wellbeing of their families.

Desperation to care for children they already had led women to take drastic measures to ensure they did not have another baby. Without adequate birth control, thousands of women turned to the illegal act of abortion “for the sake of the little ones already here,” or their other children.<sup>19</sup> In 1904, Dr. Charles Sumner Bacon estimated 6,000–10,000 abortions were performed every year in Chicago alone. Women turned to doctors and midwives who would secretly perform abortions, or mothers invented methods of their own.<sup>20</sup> Emma Goldman, a midwife in the 1890s, described the overwhelming experience of watching the “fierce, blind struggle” poor mothers fought against frequent pregnancies. “It was incredible what fantastic methods despair could invent: jumping off tables, rolling on the floor, massaging the stomach, drinking nauseating concoctions, and using blunt instruments . . . it was harrowing, but it was understandable.”<sup>21</sup> Although many mothers survived, abortions were incredibly dangerous and took a heavy physical and emotional toll on already weary mothers.

While heavy workloads, poor living conditions, and the fear of having more children were great concerns for immigrants during this time, an even greater

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16. Molly Ladd-Taylor, *Mother-Work*, 22.

17. Maxine Schwartz Seller, *Immigrant Women*, 123.

18. Molly Ladd-Taylor, *Mother-Work*, 22.

19. Elizabeth Ewen, *Immigrant Women in the Land of Dollars*, 133.

20. Leslie J Reagan, “‘About to Meet Her Maker’: Women, Doctors, Dying Declarations, and the State’s Investigation of Abortion, Chicago, 1867–1940,” *Journal of American History*, (March 1991): 1245.

21. Molly Ladd-Taylor, *Mother-Work*, 22.

issue was the staggering infant mortality rates in the cities. In July 1876, *The New York Times* wrote, "There is no more depressing feature about our American cities than the annual slaughter of little children of which they are reporting that each day during the preceding week more than a hundred infants under the age of one year had died in the city."<sup>22</sup> Everything that epitomized life in the slums, such as poorly built tenements, unsanitary conditions, and the rapid spread of contagious diseases, was a threat to infants. In New York City in 1885, 248 out of every 1000 babies died.<sup>23</sup> Nationwide, 15–20% of infants born died within the first year of life. That percentage doubled for infants born in cities. To put this statistic into perspective, today only 1% of infants die before their first birthday.<sup>24</sup> Summer in New York City was particularly deadly for infants. During the intense heat of summer in 1902, 1,500 babies were dying each week from dysentery.<sup>25</sup> During WWI, Dr. Josephine Baker declared "It is three times safer to be a soldier in the trenches in this horrible war than to be a baby in the cradle in the United States."<sup>26</sup> For a summer in 1902, Dr. Baker worked in "Hell's Kitchen" in Manhattan and experienced the hopelessness of immigrant mothers firsthand.

I climbed stair after stair, knocked on door after door, met drunk after drunk, filthy mother after filthy mother and dying baby after dying baby. . . . The babies' mothers could not afford doctors and seemed too lackadaisical to carry their babies to the nearby clinics and too lazy or too indifferent to carry out the instructions you might give them. . . . They were just horribly fatalistic about it while it was going on. Babies always die in the summer and there was no point in trying to do anything about it.<sup>27</sup>

Mothers' lackadaisical approach to caring for their infants was not out of a lack of love or concern for their babies, rather it was a grim acceptance of the likelihood that many of their infant children would die. Infant mortality was so frequent that many immigrant mothers, although devastated, simply accepted it as God's will.

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22. Richard A. Meckel, *Save the Babies*, 11.

23. Meckel, *Save the Babies*, 90

24. Meckel, *Save the Babies*, 1.

25. S. Josephine Baker, M. D., *Fighting for Life*, 58.

26. Patricia C. Kuszler, M. D., and Charles G. Roland, M. D., introduction to *Fighting for Life*, by S. Josephine Baker, M. D., xiv.

27. Tanya Hart, *Health in the City*, 87.

## Social Reform

To Dr. Baker and other social reformers, viewing infant mortality as God's will was unacceptable. Their collective efforts to change cultural and medical norms for mothers sparked a wave of social reform surrounding infant and maternity care swept the nation with Baker at its head as the first director of the New York City Bureau of Child Hygiene. After taking a class in medical school about "The Normal Child," Baker became convinced that preventative health was the key to solving the infant mortality crisis. Although preventative care seems like an obvious solution today, at the time it was revolutionary. To Baker, preventative health had everything to do with the mental health of the mothers. British physician George Newman agreed: "The problem of infant mortality is not one of sanitation alone, or housing, or indeed of poverty as such, but it is mainly a question of motherhood."<sup>28</sup> Newman and Baker were certain that by taking better care of immigrant mothers before the baby was born and teaching them how to properly care for their infants, the health of the infants and the mothers would improve.

With the focus on educating mothers, Baker began an experiment in the Upper East Side of New York City where the immigrant population and infant death rate were the highest. Nurses received names and addresses of new babies and would immediately go to the new mothers and instruct them on the science of being a mother. Breast feeding, efficient ventilation, frequent bathing, and proper clothing for summer heat were a few of their main focuses. The success of the experiment exceeded everyone's expectations. Baker described:

From the first I was pretty sure that we were getting results. I was not prepared, however, for the impressiveness of the facts when the results of the summer's campaign in that corner of the east side were tabulated. During that summer there were 1200 fewer deaths in that district than there had been the previous summer; we had saved more babies than there were men in a regiment of soldiers . . . we had proved that prevention paid far beyond our wildest hopes. There . . . was the actual beginning of my life work.<sup>29</sup>

During her career, infant mortality in New York City went from 144 deaths per 1,000 births in 1907 to 66 deaths per 1,000 births in 1923. By 1923, of the ten largest cities in the United States, New York City had the lowest infant death

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28. Richard A. Meckel, *Save the Babies*, 93.

29. S. Josephine Baker, M. D., *Fighting for Life*, 86–87.

rate.<sup>30</sup> Baker's system of nurses visiting new mothers and teaching them how to better care for themselves and their infants helped mothers and infants in the cities survive, and even thrive, despite their difficult living conditions.

## The Caroline Rest

Many others joined Baker's cause and established institutions to provide for and take care of immigrant mothers and infants. To these mothers, an institution could be "a shelter of last resort, a socially determined alternative to self or family care, a place of access to medical technology and cure" or a means to escape their impoverished life for a time.<sup>31</sup> One such institution was the Caroline Rest, founded by George H. F. Schrader, president of the Schrader Manufacturing Co.

During his years as a businessman in New York City, Schrader was overwhelmed by the pathetic state in which newborns and their mothers lived in New York City. He began researching and studying the needs of New York's mothers and infants.<sup>32</sup> As he did so, he was inspired by Plato's teaching that "the best way to set a society straight is to see to it that the country's babies come into the world and are started on their journey through life under reasonably fair conditions."<sup>33</sup> This belief became the cornerstone of Schrader's work to improve the lives of mothers and children.

While studying mothers and infants, Schrader, like Newman and Baker, also became convinced that the key to decreasing infant mortality was the education of mothers. Schrader firmly believed that mothers who were properly cared for, educated, and trained would be able to handle the needs of their infants and keep them healthy and strong. With this ideal in mind, Schrader began experimenting with a new program he called the "science of mothering" in Hartsdale, New York. His goal was to take care of women before and

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30. Patricia C. Kuszler, M. D., and Charles G. Roland, M. D., "Introduction" In *Fighting for Life*, by S. Josephine Baker, M. D., xvi.

31. Joan Lynaugh, "Institutionalizing Women's Health Care in Nineteenth- and Twentieth-Century America," in *Women, Health, and Medicine in America: A Historical Handbook*, ed. Rima Apple (New York: Garland Publishing, Inc., 1990), 249.

32. *Charities and the Commons*, vol. 20 (Philadelphia, PA: New York Charity Organization Society, 1906), 577.

33. *The American Educational Review: A Monthly Review of the Progress of Higher Education*, vol. 30 (Chicago: American Educational Co., 1909), 404.

after birth, enabling them to return to their lives in the cities rejuvenated and capable of handling the demands of raising infants. The experiment proved to be incredibly successful and, in 1907, Schrader, established the Caroline Rest for Convalescent Mothers and entrusted the management of the home to The New York Association for Improving the Condition of the Poor. The Caroline Rest, named after Schrader's mother Caroline, was the first institution of its kind and was unique in two major aspects: it was the first permanent school for mothers in the United States and it was the only home maintained in the United States devoted to poverty-stricken mothers for rest and recuperation.<sup>34</sup> Schrader had two main focuses for this institution: to take care of mothers and to take care of social workers. Schrader was adamant that mothers and babies could not be healthy if the social workers caring for them were overworked and underqualified. The Caroline Rest became a home both for mothers and their young children as well as for the social workers that cared for them.

The social workers at the Caroline Rest helped mothers before and after the birth of their babies. During pregnancy, nurses would visit and take care of the mothers in the tenements of New York City. As quickly as possible after delivery, mothers, along with any of their children who were under seven, were brought to Hartsdale. "There, free from toil and the pinch of poverty, they [the mothers] will get the much-needed rest and at the same time take the course of instruction. To these women and children, straight from the dirt and darkness of the city tenement houses, Caroline Rest cannot help but seem like a fairyland."<sup>35</sup> Mothers stayed for about three weeks.<sup>36</sup> After resting for the first day, mothers began taking classes. They learned how to bathe their babies, clean the ice box where the milk was kept, sterilize dishes for preparing the baby's food, do laundry, mend clothes, keep the home clean, and how to select and prepare cheap and nutritious foods.<sup>37</sup> The success of the program was recorded in a report given by the New York Association for Improving the Condition of the Poor, which stated:

The infant death rate in New York City is approximately 14%; in the homes of 135 women whom the Caroline Rest nurses visited after their babies had

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34. *The American Educational Review*, 304.

35. *The American Educational Review*, 305.

36. Rose McCabe "All the Fun I've Had," *Pi Lambda Theta Journal* 3, no. 23 (March 1945): 84.

37. Robert W. Bruère, "The Work of the New York Association for Improving the Condition of the Poor in Saving Child Life," *The Pedagogical Seminary* 16, no. 4 (1908): 452.

been born and had fallen sick, there were 22 infant deaths, or a mortality rate of 17%; in the homes of 202 mothers whom the nurses taught and cared for before their children came, there were only 9 infant deaths, or a mortality of 4.9% and this result was secured among the poorest of the poor.<sup>38</sup>

Clearly, what Schrader started as a mere experiment proved to dramatically improve the lives of impoverished mothers and infants of New York City.

## The Siebach Family

To illustrate just how transformative the Caroline Rest could be, we can look at the story of one woman named Lina Elfrieda (Frieda) Oertel Siebach. Born in 1894 in Leipzig, Germany, Siebach moved from Germany in 1925 with her four-year-old son Henry to be with her husband, Rudolph, who had moved the previous year to New York City. As it was with many immigrants, Frieda and her family endured the atrocities of the tenements in the city. For a long period of time, Rudolph was unable to find a job, making Frieda the sole provider as a seamstress. Speaking very little English and living in an unfamiliar country, Frieda struggled to support her rapidly growing family. Frieda arrived in New York City in 1925. In October of 1926, Frieda had a daughter named Ruth who was followed a year later by another daughter named Eleanor. Frieda became pregnant again in 1928. With a rapidly growing family, she grew increasingly frantic as she agonized over how to provide for her children. However, during her pregnancy in 1928, the Caroline Rest nurses found Frieda and helped her through her pregnancy and delivery of her son Martin, born December 1928.<sup>39</sup> Frieda and her young children stayed in the Caroline Rest in 1928 and again in 1930 when another daughter, Miriam, was born in March.

Frieda's daughter Ruth, who was four when the family visited Hartsdale the second time, later recalled her time at the Caroline Rest.

There was a place called Hartsdale—it was part of a government program. . . . It was a place out in the country where mothers and their little kids were housed and fed. My older brother Henry [11] didn't qualify so he stayed

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38. Robert W. Bruère, "The Work of the New York Association for Improving the Condition of the Poor in Saving Child Life," 452.

39. Unfortunately, there is no record as to how Frieda came into contact with the nurses from the Caroline Rest.



*Frieda Siebach (standing) holding son Martin with children Eleanor, Ruth, and Henry on the swing. Hartsdale, NY. Circa 1930. Siebach family collection.*

with my father while my mom and we youngest went to Hartsdale. We qualified: mom, me [4], Eleanor [3], Martin [2], and Miriam [newborn]. . . . I loved the smell of the meadows; it was so sweet and fresh compared to the smells of the city . . . in the city we lived in an apartment, which was mostly bare of furniture. . . . I can't remember how long we stayed, probably until my father had the means to provide for us.<sup>40</sup>

Although Ruth's memory of staying in Hartsdale in her early childhood was vague, it is clear the Caroline Rest not only provided solace for the overburdened mothers and their children but was a haven and escape from the stresses and difficulties associated with living in the tenements of the city.

Despite success stories like the Siebach family and others, the Caroline Rest closed in 1943.<sup>41</sup> Albert G. Millbank, chairman of the health committee of the Community Service Society of New York said that the Caroline Rest had "fulfilled its purpose."<sup>42</sup> George Schrader's experiment became a model to the rest of the nation, setting a precedent of education and care for new mothers, infants, and treatment of social workers. In its 34 years of service, the Caroline Rest cared for nearly 50,000 mothers and children.<sup>43</sup>

40. Ruth Knight, interview with Bonnie Nelson, 2000.

41. With the United States joining WWII in 1941, a possible cause for the closing of the Caroline Rest could be that government funding and resources were being directed towards war efforts instead of charitable institutions.

42. "Caroline Rest Closes After Years of Service," *Scarsdale Inquirer*, October 1, 1943, 4.

43. "Caroline Rest Closes After Years of Service," *Scarsdale Inquirer*, 4.

## Conclusion

At the turn of the twentieth century, life for impoverished immigrant mothers could be incredibly bleak. Because of unsanitary and cramped housing conditions, incessant demands from work and children, the fear of bearing more children the family could not afford to feed, and an ever-present feeling of hopelessness surrounding the high rate of infant mortality, immigrant women were pushed to the brink of despair. Many began to believe their pathetic situation was the reality of life in American cities. One midwife said: "women are born to suffer and it's wrong to interfere."<sup>44</sup> However, individuals such as Dr. S. Josephine Baker and George. H. F. Schrader were determined to help impoverished mothers and infants thrive in their new lives. Dr. Baker championed the reform movement that promoted an active role of nurses in the homes of new mothers and encouraged the education of infant care to new mothers. Schrader furthered this movement by creating the Caroline Rest, which allowed impoverished mothers to recover and learn about how to care for the infant and succeed as a mother. The effects of these reformers' efforts in the area of maternal and infant care improved the lives of tens of thousands of families. It is no wonder researches have declared that "of all the health revolutions that have taken place since 1850, reduction of infant mortality rate is probably the greatest and most far-reaching."<sup>45</sup>

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*Bethany Morey is from South Jordan, UT. She decided to major in History with an emphasis on women's religious history as she explored the English countryside during study abroad. After graduation she plans to get her PhD and teach religious history at BYU. When she's not being studious, she loves to play tennis, bake, and hike in the mountains. The above essay was a very special opportunity for her as she was able to research and write about her great grandmother, Frieda Siebach.*

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44. Molly Ladd-Taylor, *Mother-Work*, 19.

45. Richard A. Meckel, *Save the Babies*, 93.

