

# Exposed and Abandoned. Origins of the Foundling Hospital

Michael Obladen

Department of Neonatology, Charité University Medicine, Berlin, Germany

## Keywords

Abandoned infants · Foundlings · History · Hospices · Infanticide · Infant mortality

## Abstract

Abandoning undesired newborn infants was a Roman form of family limitation. They were exposed or given to foster mothers. Christianization alleviated their lot when in 374 CE, Emperor Valentinian's law provided some protection. The Milan Foundling Hospital was established in 787 CE. When the Carolingian Empire fell apart during the 10th century, monastic networks (the Holy Spirit Order and Daughters of Charity) took over social support for the poor, the sick, and the insane. Foundling hospitals proliferated in Italy between the 13th and 15th centuries, in France during the 16th and 17th, and in Germany and Austria in the 18th century. Metropolitan hospices admitted thousands of infants each year. Most were not "found" exposed but were admitted anonymously via a revolving box or registered in an open office. Soon after admission, they were transported for foster care to wet nurses in villages. Sick infants, especially those suspected of suffering from syphilis, were denied the breast, and artificial feeding was tried with little success. Official death statistics were falsified by relating infant deaths not to admissions but to the total number of children cared for. Over 60% died during their first year of life, mostly from pre-

admission problems such as malformation, hypothermia, and disease; from poor hygiene in overcrowded wards; and from artificial feeding. Although not intended for that purpose, the hospices became medical research institutions when in late 18th century, physicians and surgeons were employed by maternity and foundling hospitals.

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## Introduction

Abandoning the *supernumerari* was a legacy from the Roman Empire. The *patria potestas* included the father's right to kill or expose undesired infants. Efforts to improve the survival of exposed infants originated from Christianization and from wars: the church needed souls, while the states needed soldiers. However, open hostility greeted the bastard and the foundling, even more so when their maintenance burdened the public purse. The early history, especially of the French foundling hospitals, has been described by Tenon [1], Gaillard [2], Terme and Monfalcon [3], Remacle [4], and Hügel [5]. More recent research on foundling hospitals includes the works of Stahnke [6] and Ransel [7] who described the fostering and foundling system in Russia; the works of Hunecke [8] and Kertzer [9], who described the system of infant abandonment in Italy. Ulbricht [10] described the debate during the enlightenment in the

German-speaking states and the claim that foundling hospitals encouraged promiscuity. These authors, and many more, focused on the complex social, cultural, religious, and economic aspects of the foundling hospitals. This paper aimed to explain why foundling hospitals spread over most of Europe and persisted for half a millennium even though they succeeded in saving so few lives.

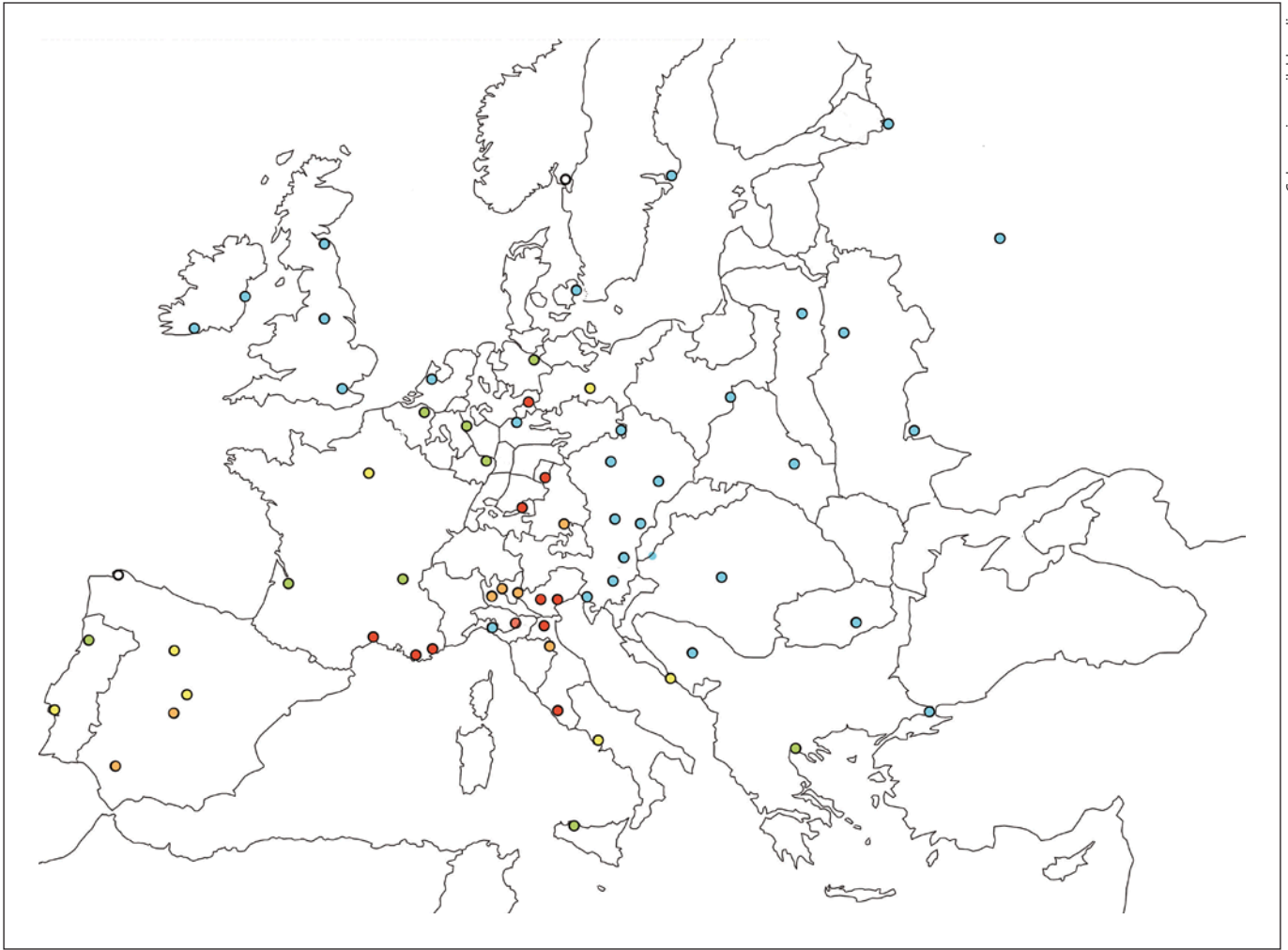
### Reports from Antiquity

With the exception of Hebrews and Egyptians, most people in antiquity exposed newborn infants, as early legislation suggests. The Sumerian Codex Hammurabi of 2250 BCE regulated adoption in §185 [11]. Greek parents were even obliged by law to get rid of infants with congenital malformations [12]. As pointed out by Garrison [13], “Few realize, indeed, that it was the main object of Greeks, Romans, Arabians, and later peoples to destroy rather than to save a majority of newborn infants, partly for economic reasons, partly from inherent selfishness.” In the second century CE, Roman historian Claudius Aelianus mentioned another exception [14]: “a Theban Law most just and humane; that no Theban might expose his Child or leave it in a Wilderness, upon pain of death. But if the Father were extremely poor, whether it were male or female, the Law requires that as soon as it is born it be brought in the swadling-clouts to the Magistrate, who receiving it, delivers it to some other for some small reward, conditioning with him that he shall bring up the Child, and when it is grown up take it into his service, man or maid, and have the benefit of its labour in requital for its education.” In Rome, many infants were exposed at the *Columna Lactaria* on the vegetable market. When not taken up by passersby, they starved or froze to death or were devoured by stray dogs or pigs. The fate of the few infants who miraculously escaped death was usually miserable. They were sold into slavery, forced into prostitution, or filled the gladiators’ schools [15]. Surviving foundlings were embellished in mythology: Zeus, Asclepius, Hephaistos, Oedipus, Caligula, Marcus Aurelius, Moses, Romulus and Remus, Daphnis and Chloe, and many others were said to have been exposed or even raised by animals as foster parents. In the 1st century BCE, the elder Seneca described how beggars mutilated foundlings to arouse bystanders’ pity [16]: “Look on the blind leaning on their sticks, or those with broken arms or twisted feet. This one is without arms, ... that one has his shoulders pulled down ...” The habit remained widespread. As late as 1633, Vincent de Paul met a Paris beggar breaking a foundling’s limbs [17].

### Christianization

At first glance, Christianization seemed to improve the unwanted infant’s lot. In 331 CE, Emperor Constantine offered them some protection [18]: “Whoever picks up a boy or a girl cast out of the father’s or owner’s house with the latter’s knowledge and consent, and on his own expense nourishes and raises the child to adulthood, shall have the right to retain this child in the same status as intended when he took it up: as a [free] child or as a slave, as he prefers. Those who knowingly and willingly cast out from home newborn children or slaves, cannot take legal action to demand them back.”

The Christian Emperor Valentinian decreed in 374 CE “that all parents must support their children and that those who abandoned them should be subject to the penalty prescribed by the law” [19]. In 442 CE, the Council of Vaison ordered full protection of foundlings in the churches [4]. Glossaries in the St. Gall library originating from 534 to 556 CE distinguished between *orphanotrophium* (home for orphaned children 4 years and older) and *brephotrophium* (nursery for abandoned newborns and young infants) [20]. The Milan Foundling Hospital was established in 787 CE to save extramaritally born infants from infanticide [21]: “The unmarried women do not dare to show their newborns in public, and put them to death. By depriving the little ones of baptism, they send them to hell, because there is no place where the adulteress can hide her shame; and dispose them in sewers, manure heaps, and rivers ... Therefore I, Datheus, archipresbyter, for my soul’s sake and to benefit all citizens, do herewith ordain and confirm that for the said infants a hospital [brephotrophium] shall be established in my house ... I wish and ordain that those women who, incited by the devil, conceive in sin, present themselves to the church. Their infants be immediately brought to the hospital, admitted by the governor, confided to the care of a mercenary wet-nurse, and are baptized. When weaned, they stay in the house until 7 years old, are sufficiently taught a trade, and receive from the hospital food, clothes, and shoes. When they have completed 7 years, they are free, absolved from any bond of slavery, and may go wherever they will.” The further development in Milan has been described by Hunecke [8]. The Council of Trent (1545–1563) deprived illegitimate infants of a social identity and branded unwed mothers as sinners. The following “century of foundlings” saw infanticide and abandonment greatly expanded. Most “Houses of God” fell under the local bishop’s jurisdiction. A marble shell at the cathedral’s entrance [4] allowed to deposit the infant anonymously.



**Fig. 1.** Map of Europe with 1740 borders and important founding hospitals according to their first opening: red,  $\leq$ 14th century; orange, 15th century; yellow, 16th century; green, 17th century; blue, 18th century. Data compiled from Hügel 1863 [5], Garrison 1965 [13], and Boswell 1988 [29].

### Order of the Holy Spirit and Daughters of Charity

When the Carolingian Empire fell apart during the 10th century, monastic networks took over social support for the poor, the sick, and the insane. Ill and malformed children were “offered” to monasteries, as Ulrich of Zell reported from the Cluny Abbey in 1082 [22]: “When the parents have their house full of children and one of them is lame or malformed, hard of hearing or blind ... this they offer God with a great vow ... to improve the care for the others.” A new era began when, some time before 1180, a monk named Guy founded a hospice in Montpellier under the name of the Holy Spirit, in which sick persons and exposed infants were admitted. The institute

and its staff were formally accredited by Pope Innocent III in 1198 [23] and soon the order grew dramatically: Holy Spirit Hospitals were established in Rome, Marseille, and Bergerac. The hospital’s success may have been associated with the Montpellier School of Medicine founded in 1220, one of the oldest universities in the world. A bull by Nicolaus IV listed nearly hundred Santo Spirito Hospitals in 1291 all over France, Italy, Spain, Germany, and elsewhere [24]. In 1204, Pope Innocent III called Guy de Montpellier to Rome as director of the recently rebuilt Ospedale S. Maria in Sassia, at that time the largest hospital in Europe [25].

Professional infant care resulted from the foundation of another order, the *Filles de la Charité* (Daughters of Charity)

by Vincent de Paul and Louise de Marillac in Paris in 1633. This order, devoted to caring for the poor, the sick, and the abandoned, was approved by the Paris archbishop in 1646 and by Pope Clemens IX in 1668. The Daughters of Charity did not take eternal vows and were free to leave the order each year. Trained in specialized schools, this order was also highly successful. By 1790, the number of hospitals staffed by the Daughters was 430 in France and 20 in Poland. Like most religious orders, the works of Vincent de Paul were closed down in 1791 by the Revolution; some of the nurses were even executed. When the shortage of trained nurses became obvious, order and school of nursing were re-established in 1800 [26]. In Russia, two huge central foundling hospitals were established in Moscow and St. Petersburg in 1770. In the Muslim world, the 12th century collection of laws *Al-Hedayah* contained an entire book regulating relations between the *Lakeet* (foundling) and *Mooltakit* (finder) [27]: “Taking up a foundling is laudable and generous ... a foundling is free ... and is maintained by the State ... he owes nothing to his Mooltakit for sustenance ... No person can take a Lakeet from his Mooltakit but by virtue of a claim of parentage.”

### Wars, Epidemics, and Poverty

We praise the Renaissance, the period between the late Middle Ages and Reformation, for its humanity, discoveries, architecture, fine art, and music. Less frequently do we consider that very few members of society benefitted from these achievements. The majority lived in poverty. The plague pandemic of 1346–1353 took 150 million lives, to which added the European famine of 1437–1440. The Thirty Years War (1618–1648) and the 7 Years War (1756–1763) further impoverished the states. From 1350 to 1650, the European population grew very little or even decreased [28]. Maternal starvation disposed to fetal growth retardation, premature birth, and neonatal infection. An appalling infant mortality was part of this process. Foundling hospitals proliferated in Italy during the 13th to 15th century, in France during the 16th to 17th, and in Germany and Austria during the 18th century (Fig. 1).

### Anonymous Admission: The Revolving Box

Contrary to the name, most foundlings were not “found” exposed; they were admitted anonymously by the *ruota oratorio* (Italian mode, a revolving box) or by admission in the *bureau ouvert* (open office, French mode). In Vienna, moth-



**Fig. 2.** Anonymous artist, 16th century: Madonna of mercy, protecting foundlings under her coat. Background shows the Florence Innocenti Hospital before Andrea della Robbia’s “bambini” were mounted to the arcade in 1487. Istituto degli Innocenti, Florence, with permission.

ers had to serve as wet nurse for 4 months to cover the cost of her abandoned infant. In London, admission was not anonymous but by public balloting. Most foundling hospitals cooperated closely with maternity hospitals, the usual delivery location for unmarried mothers. Throughout the 18th century, abandoning newborn infants was widely practiced, particularly among the descendants of the Roman Empire: Italy, Spain, France, and Austria. In France, the revolving boxes were removed by 1870; in Belgium, the last wheel was closed in Antwerp in 1860. Not only premature,



**Fig. 3.** Tokens from the London Foundling Hospital, 1750–1758. Foundling Museum, London, with permission.

malformed, and infants born out of wedlock made their way into foundling asylums; in Paris, around 10% [4] and in Vienna, up to a fifth [30] of the admitted babies were abandoned by married couples. Glorified as an authority in education, Jean Rousseau abandoned five infants born to him by Thérèse Levasseur from 1751 to 1778 [31]: “My third child was therefore carried to the foundling hospital as well as the two former, and the next two were disposed in the same manner; for I have had five children in all. This arrangement seemed to me so good, reasonable, and lawful, that I did not publicly boast of it, the motive by which I was withheld, was merely my regard for their mother.”

### Name Giving, Baptism, and Nursing Out

Their names often stigmatized foundling infants forever. In London, names were initially given which alluded to the foundling hospital’s benefactors (Thomas, Vincent

...) or to Antiquity (Virginia, Clarissa ...). Brownlow reported [32]: “(In the earliest period) it has been the Governors’ practice of to name the children at their own will ... courtly names like Abercorn, Bedford, Montague, Norfolk ... etc. When these names were exhausted, the authorities borrowed those of eminent deceased personages, Geoffrey Chaucer, William Shakespeare, John Milton, Oliver Cromwell, etc.” In France (Delaporte, Duruisseau) and Holland (Onbekant, Poorte), foundlings’ surnames alluded to location or circumstances of the exposure. The same custom prevailed in Italy (Di Dio, Casadio, Esposito, Trovato). Artists portrayed them as protected by the Madonna (Fig. 2). Soon after admission, the infants were baptized in the Foundling Hospital’s chapel, usually *sub conditione*: “If you are not yet baptized ...” Infants regarded as sick, especially those suspected to be syphilitic, were denied the breast, and artificial feedings were tried, usually with little success. Delayed placement to a wet nurse at the countryside meant admission to the

infirmery, hand feeding, and death. Immediate transfer from the foundling hospital to a supervised wet nurse willing to breastfeed the infant was its only chance for surviving the first year of life. In Paris, London, Petersburg, and many other metropolises, a dangerous turnaround evolved: the mother's move from the countryside to the capital, anonymous delivery, infant's transfer to the foundling hospital, matching with a nurse from a more or less distant parish, and transfer to the countryside with an unheated, horse-driven cart. Infants who survived were returned to the foundling hospital at the age of 6 years for schooling and learning a trade.

### Tokens – Symbol of Misery and Hope

The parents of an abandoned infant often gave it a "token," such as a ribbon, painting, letter, coin, or part of the clothing (Fig. 3), by which to recognize or identify the child in the future, in the hope that better times would let them reclaim it. During the 2nd century CE, the Greek author Longus described tokens in his novel "Daphnis & Chloe" [33]: "[The she-goat] enclined her teates unto the infant, who hungerly sucked the same ... the vesture wherin he was wrapped was a rich mantle of purple velvet, the compasse fastned about his necke with a brooch of gold, and by his side was layde a short fine sworde of most excellent workmanship ... Lamon, (greedie at the first of the riche jewels he sawe) resolved onely to beare them awaye, and to leave the childe as hee founde it ... a bashful shame quickly surprised his thoughtes, that beeing a man, hee should be lesse pitifull and humane than the poore beast it selfe ..." Leaflets attached to the baby's clothes frequently mentioned the infant's name or that of the parents, baptism, reason for abandonment, and made recommendations [34].

### Research, Statistics, and Mortality

Foundling hospitals were established to promote social order and moral discipline and to give the unmarried mother a way to get rid of her infant without resorting to infanticide. Although not intended for that purpose, they became medical research institutions during the late 18th century when physicians and surgeons (recently united in one faculty, no longer teaching in Latin) were employed by maternity and foundling hospitals. Obstetrics shifted from the midwives to physicians, and an era of medical research dawned after the French Revolution.

Early researchers were medical students. In Paris, a major protagonist of this development was François Chaussier, from 1804, director of the Maternité. Paris interns published important monographs on problems all too visible in the foundling hospitals: prematurity, malformations, hypothermia, congenital syphilis, gastroenteritis, etc. Hospital training places were rare and allocated by the *concours* (competition). In the 1820s, important treatises on newborns' diseases were published by Paris interns or the scholarship holders Dugès, Heyfelder, Billard, Lelut, Ollivier, Veron, Valleix, and others. The foundlings' parentless status facilitated the study of infants' diseases and conditions, sometimes over long periods. Nowadays, such investigations are considered as exploitative of orphan children, but at that time, they originated in genuine desire to improve nutrition and care. Foundling hospitals were expensive and became even more so once instituted, as the number of admissions skyrocketed. To justify the costs, meticulous reports were published every year, revealing the dimensions of infant abandonment. In Dublin, the number of admissions per year climbed to a maximum of 2,336 in 1808 [35], in Paris to 5,667 in 1831 [15], in Vienna to 9,820 in 1880 [36], and in St. Petersburg to 9,933 in 1888 [6]. The Foundling Hospitals' administrative statistics usually also reported infant and child deaths, but they were not accounted in relation to admission numbers but to the total number of children cared for. This calculation included older children in the countryside, yielded a grossly falsified mortality rate, and hushed up the fact that the majority of admitted "foundlings" died already during their first weeks of life.

### The Foundling Hospital's Demise

The goals of the foundling hospitals were to prevent infanticide, save the infant's life, keep the birth secret, and maintain the unmarried mother's "honor" and therefore her employment. Already in the late 18th century, Pestalozzi in Switzerland [37] and Malthus in England [38] postulated that foundling hospitals were not lowering the number of infanticides but encouraged promiscuity and worsened infant mortality. In France, Raulin reported that two-thirds of the infants in foundling hospitals died within their first year of life [39]. Carl Meissner led the opposition against foundling hospitals in Germany [40]: "Infant death camps." Throughout the 19th century, intense debate triggered harsh criticism and undeserved praise. Defenders of the foundling hos-

pitals reiterated the never proven claim that the institutions prevented infanticide and saved abandoned infants' lives. They made excuses for the mortality with the foundlings' congenital defects, prematurity, or diseases and demanded resources for the institutions, especially more and more wet nurses. In increasingly nationalistic Europe, the debate was contaminated by concerns about population growth. Opponents claimed that the hospices failed to reach any of their goals, emphasizing the excessively high mortality during the first year. It was usually above 60% with large variations from year to year and institution to institution. Beyond this, there were detrimental effects on emotional well-being: feelings of the staff hardened when confronted with such constant misery in the institutions. The question of who was to cover the high costs of the foundling hospitals tacitly over-arched the hypocritical debate. It took decades before people realized that the mere existence of foundling hospitals – and even more so, the anonymity of the revolving boxes – encouraged abandonment and thus exacerbated infant mortality.

## Conclusions

Abandoning newborn infants was a form of family limitation. The appalling mortality in foundling institutions was hidden by misleading statistics and was tacitly accepted by European societies. It resulted from intrinsic, pre-admission factors (malformation, prematurity, disease); infants' condition at admission (hypothermia, starvation); poor hygiene in overcrowded hospitals (thrush, gastroenteritis); and artificial feeding in the infirmary when venereal infection was suspected. Before 1850, artificial feeding usually meant the infant's death, and most politicians as well as all physicians must have known this. Without knowledge of microbial infections, overcrowded institutions had no real

means of saving many infants. Foundling hospitals proliferated in the 18th century, when the concern was less about “fornication” but rather about population growth that guided societies' interest. After thousand years as a respected charity, foundling hospitals fell into disrepute once their poor results were revealed in public debate.

## Acknowledgments

The author is grateful to Fiorenza Redi, Istituto degli Innocenti, Florence, for Figure 2 and to Tabitha Paterson, the Foundling Museum, London, for Figure 3. He thanks Sieghard Irrgang, Kassel, for help with the translations from Latin and Carole Cürten, University of Freiburg, for editing the English.

## Statement of Ethics

No approval of an Ethics Committee was required for this work. The “Code of Conduct Guidelines for Safeguarding Good Research Practice” of the German Research Foundation was followed.

## Conflict of Interest Statement

The author has no conflicts of interest to declare.

## Funding Sources

The author received no funding for this work.

## Author Contributions

The single author Michael Obladen performed all research, graphic work, design, and writing of the manuscript.

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