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Sara L Kimble, *DePaul University*

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AN ENCYCLOPEDIA OF INFANTICIDE

Edited by

Brigitte H. Bechtold

and

Donna Cooper Graves

To my grandchildren

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Calypso
Izzy

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Because of the abuses of church-, state-, and privately-run founding home resources, the people began to question the use, both moral and practical, of the *tour* and of open admissions policies. Some argued that the use of the *tour* too easily encouraged parents to disregard their parental obligations. Others argued that, while the *tour* was intended to prevent infanticide, it did not help those women who lived in the countryside as founding homes with *tours* were too far away to prevent death immediately after birth. Additionally, homes were not prepared to adequately care for the thousands of children they received each year. Thus the founding home was still needed for women with illegitimate infants, but the *tour* and open admissions had created an unmanageable situation. The *tour* began to fall out of use in Western Europe throughout the first half of the nineteenth century, and by 1878 only 33 of the 69 provinces in Italy still used them. With the disappearance of the *tour*, open admissions policies often disappeared as well.

Mortality rates at founding homes were extraordinarily high on account of the overwhelming number of children housed in small spaces during the most vulnerable years of life. From London to Paris to Moscow and throughout Italy in the eighteenth and nineteenth centuries, mortality rates for children in their first year ranged from 80% to 98%. Communicable disease spread quickly between the multiple children who shared cramped beds and malnutrition was also common on account of a lack of necessary supplies. In order to alleviate some of the risk to the children and in order to create more space at the homes, infants were typically assigned to wet nurses who lived in the countryside and were sent to stay at their homes. Families that continued to foster the child throughout their youth were then often compensated by the state. Older boys still residing at founding homes were quickly apprenticed, while older girls were given a small dowry and were married off as soon as possible.

Some founding homes were established in the United States in the mid-nineteenth century and remained in use through the early twentieth. U.S. founding homes encountered the same obstacles as European ones at their inception: disease and malnutrition. In the early twentieth century the United States began to move away from institutionalized care and toward the foster system because government officials and pediatricians agreed that founding homes had failed to adequately provide for the physical and emotional needs of children. *See also:* **illegitimacy, medieval period, nineteenth century, wet nursing.**

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JENNIFER COLLINS

Founding wheel. *See:* **infant depositories, tour d'abandon.**

France. Infanticide in France was a profound social problem from the ancien régime to the twentieth century, and the threat of capital punishment did little to deter it. The eventual decline of the practice corresponded with the introduction of welfare programs to aid the indigent, the availability of contraception, and the increased social acceptance of children born outside of wedlock.

Legal efforts to abolish infanticide date from 1556 when a royal edict required all unmarried women to make a declaration of pregnancy and to announce the birth within three days of delivery or face punishment. Infants who died prior to the declaration of birth were considered "stillborn." Children of unwed mothers were more likely to die in these initial days due to mothers' poverty, lack of prenatal care, and poor health. In ancien-régime France, infanticide carried the death penalty. The law was briefly liberalized in 1791 during the French Revolution as attitudes changed. Jacobin leader Maximilien Robespierre, for example, believed that the law should compel a father to provide child support as a means to prevent infanticide and abandonment. In the conservative Napoleonic era, however, paternity suits were prohibited (1804) and the death penalty was reinstated in infanticide cases (1810). Following a case in 1811, women who were acquitted of infanticide by juries could still face a judicially-mandated punishment.

Founding homes, with their attached *tours* into which infants could be legally deposited, prevented many women from turning to illegal and hazardous alternatives of fertility control. Historian Rachel G. Fuchs reports that fatal crimes against infants declined after 1861 because of the ease of **abandonment**, a de-

cline in prosecution, the spread of contraceptive knowledge, and increased emotional investment in parenting. Founding homes were not havens as infant mortality therein was shockingly high as a result of poor hygiene and inadequate care. Historian June Burton uncovered that founding hospital medical staff studied infant deaths to develop a scientific understanding of accidental versus deliberate infant mortality.

Scholars rely on judicial records to analyze infanticide as the exact numbers of these often private events remain unknown. Nineteenth-century court records suggest that the women most likely to be prosecuted for infanticide were too impoverished to afford a midwife, unable to deliver in a public hospital due to residency requirements, isolated from family, or gave birth unassisted. Unmarried female domestic **servants** were especially vulnerable to male sexual violence in the workplace and the consequence of unwanted pregnancies. The shame of **illegitimacy**, and the failure of men to provide for their lovers, led some women to seek **abortion** and others to infanticide when all else failed. The absence of reliable contraception and the prohibition on paternity suits (until 1912) likely compounded some women's desperation. Unlike today, nineteenth-century infanticide trials rarely included expert medical **testimony** on women's mental or physical **postpartum** state. Nevertheless, historian James Donovan found that all-male juries were often sympathetic to women's plight and reluctant to assign harsh penalties.

Infanticide became a critical public health concern at the end of the nineteenth century as the precipitous decline in the national birth rate threatened France's status as a world power. The statistical significance of infanticide was studied by sociologist Brigitte Bechtold who found a measurable difference in secondary **sex ratios**, and that this difference related to legitimacy status of infants born and to other socio-economic conditions. To combat the declining birth rate, the republican government concluded that the state owed protection to infants through insurance and welfare to facilitate all children's survival. During World War I, the French government permitted women who had been raped by foreign soldiers to give birth anonymously and surrender their infants to public care in the hopes that this policy would prevent neonaticide.

Feminists had long criticized double moral standards and the inability of the law to hold men responsible for their children, especially illegitimate ones. Physician and feminist Madeleine Pelletier argued in 1911 that women should have the right to control their own bodies and the safe and legal medical means to

terminate unwanted pregnancies would end the tragedy of infanticide. Feminists condemned the law passed in 1920 that suppressed contraception and **abortion** as exacerbating women's unequal burden. Social critics pointed out that the legalization of paternity suits in 1912 was too restrictive to aid many unmarried mothers. After a long campaign, the women's rights movement secured the legalization of contraceptive devices in 1967 and abortion in 1975. The 1993 law of "childbirth under X," permits women to give birth anonymously and without fees in public hospitals to protect their identity and the newborn's life.

Infanticide occurs rarely today, and then only among mothers who are severely depressed, neurotic, or in distress. In a recent tragic case, Véronique Courjault, a middle-class married mother, was found guilty of three counts of maternal filicide. Psychiatrists testified that she suffered from a neurosis called **denial of pregnancy**. She was sentenced to eight years in prison. *See also:* **Napoleonic law.**

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Freud, Sigmund (1855-1939). An Austrian neurologist, Freud stands as one of the most significant figures in the development of social and psychological theories. Founder of the psychoanalytic school of psychology, Freud is noted for highlighting the significance of the unconscious mind and subconscious desires in influencing human activity as well as the role of repression, as a defense mechanism, in the development of personal identity and social relations. Freud is also noted for his clinical methodology of psychoanalysis in which psychopathology is addressed through dialogue between patient and analyst, often using dream analysis. Despite intense criticism and refutation of many of his ideas, Freud's