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*The "Industrious Poor" and the
Founding of the Pennsylvania Hospital*

THE PENNSYLVANIA HOSPITAL,* the first hospital in the thirteen colonies, was founded in Philadelphia in 1751.¹ Doctor Thomas Bond initiated the idea for the hospital, but it took the support of Benjamin Franklin, a coterie of Quaker merchants and a number of other public-spirited citizens to assure the success of this venture to aid the sick-poor of colonial Pennsylvania.²

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¹ The primacy claim of the Pennsylvania Hospital is not undisputed. The Philadelphia General Hospital correctly maintains that the Philadelphia Almshouse, from which the Philadelphia General evolved, antedates the Pennsylvania Hospital by some twenty years. The Almshouse, however, was primarily a welfare institution during the eighteenth century, even though many of its inmates did suffer from physical or mental afflictions of some sort. The Pennsylvania Hospital, on the other hand, was specifically founded as a hospital.

² For a brief discussion of the Pennsylvania Hospital's first twenty-five years, see William H. Williams, "The Early Days of Anglo-America's First Hospital," *The Journal of the American Medical Association*, Apr. 3, 1972, vol. 220, 115-119. For a more detailed discussion of the Pennsylvania Hospital's first fifty years, see William H. Williams, "The Pennsylvania Hospital, 1751-1801" (doctoral dissertation, University of Delaware, 1971).

Anglo-America's first hospital was a conscious copy of the British voluntary hospital as it developed in provincial centers outside of London. These voluntary hospitals were spawned by a reform movement that swept Great Britain during the eighteenth century. The institutions thus founded differed from the older Royal Hospitals in that the former were maintained entirely by voluntary subscribers and attended by consulting physicians, gratis,³ while the latter received support from both municipal government and voluntary subscribers, and used salaried physicians on their staffs. Great Britain's first voluntary hospital was established at Westminster in 1720, but more important to the Pennsylvania Hospital was St. George's, established at Hyde Park in 1733. St. George's was the prototype for the first English provincial voluntary hospital founded at Winchester in 1736. The Winchester institution, in turn, became the prototype for most of the subsequent provincial hospitals.⁴

There is no doubt that the founders of the Pennsylvania Hospital had in mind the creation of a "small provincial hospital" of the Winchester type.⁵ Franklin's *Pennsylvania Gazette*, in an effort to promote the local undertaking, cited the successful examples of the voluntary hospitals at Hyde Park, Bath, Edinburgh, Liverpool, Exeter and, of course, Winchester. The *Gazette* even carried some information on Anglican clergyman Alured Clarke, the founder of the hospitals at Winchester and Exeter.⁶

Acquiring specific information on the newly founded provincial hospitals, whether at Winchester or elsewhere, was no great problem to colonial Philadelphians. The *Gentleman's Magazine*, published in London but widely read in the colonies—Franklin thought it the best of England's magazines—carried detailed accounts of individual hospitals. In 1736, it announced the opening of the hospital at Winchester and later provided a detailed account of that institution's first year. The *Gentleman's Magazine* ended its report on

³ W. H. McMenemey, "The Hospital Movement of the Eighteenth Century and Its Development," *The Evolution of Hospitals in Britain*, F. N. L. Poynter, ed. (London, 1964), 57.

⁴ Alured Clarke, *A Collection of Papers Relating to the County Hospital for Sick and Lame at Winchester* (London, 1737), x; *Gentleman's Magazine*, XI (London, 1741), 474; XII (London, 1742), 152; XIII (London, 1743), 640; XIV (London, 1744), 52; *An Account of the Public Hospital for the Diseased Poor in the County of York* (York, 1743), 3.

⁵ Benjamin Franklin, *Some Account of the Pennsylvania Hospital*, I. Bernard Cohen, ed. (Baltimore, 1954), 4.

⁶ *Pennsylvania Gazette*, Aug. 8 and 15, 1751.

Winchester (often referred to as Hants) by noting that "so truly charitable an undertaking is worthy the imitation of all counties in Britain." Further praise for the Winchester hospital appeared in 1739 and then, in 1741, the *Gentleman's Magazine* published a detailed account of the new county hospital at Exeter. Subsequent issues carried details of other newly established hospitals, including those at Bristol, York, Bath, Reading and Northampton.⁷

Information was also available on British hospitals through numerous hospital reports published by the individual institutions. The first report from Winchester appeared in 1737, and by 1744 Dr. Philip Doddridge, a nonconformist divine, was able to look over published reports of at least five provincial hospitals while in the process of planning the new voluntary hospital at Northampton.⁸ Although there is no proof that these published reports were in the hands of the founders of the Pennsylvania Hospital at that institution's inception, there is reason to believe that the supporters and managers of the Philadelphia institution made a conscious effort to collect published reports put out by the various British hospitals.⁹

Newspapers also carried many reports on the voluntary hospitals in Great Britain. In 1749, for example, an unidentified letter writer noted that the hospital at Edinburgh had been much in the newspapers lately.¹⁰ Certainly many of these newspaper articles made their way to Philadelphia. Philadelphians touring Great Britain supplied yet another avenue of information. A case in point was Dr. Phineas Bond, brother of the founder of the Pennsylvania Hospital and later one of that hospital's first physicians, who returned from Europe in 1743 after spending some time in London and Edinburgh. Although there is no extant supporting evidence, it

⁷ *Gentleman's Magazine*, VI (London, 1736), 618; VII (London, 1737), 636; IX (London, 1739) 408; XI (London, 1741), 474, 497, 652; XII (London, 1742), 152; XIII (London, 1743), 640; XIV (London, 1744), 52; XVIII (London, 1748), 198; Verner W. Crane, *Benjamin Franklin and a Rising People* (Boston, 1954), 25.

⁸ Alured Clarke, *A Collection of Papers*; W. H. McMenemy, "The Hospital Movement of the Eighteenth Century and Its Development," 53.

⁹ Occasional references indicate that a systematic effort by the Pennsylvania Hospital to collect material on contemporary British hospitals was underway at an early date. Board of Managers Minutes, Pennsylvania Hospital Archives, I, 147; James Pemberton to William Logan, Feb. 5, 1761, Pemberton Copy Book, 1740-1780, Historical Society of Pennsylvania, 199.

¹⁰ *A Letter From a Gentleman in Town to His Friend in the Country Relating to the Royal infirmary of Edinburgh* (Edinburgh, 1749), 1.

seems safe to presume that the Philadelphia physician toured the important hospitals of those cities and reported to his brother what he saw.¹¹

Philadelphians were receptive to the idea of a voluntary hospital because the Quaker city suffered some of the same problems and exhibited some of the same attitudes found in British provincial centers. The growing number of sick paupers was a trans-Atlantic phenomenon as was the Christian impulse to give to those who were less fortunate. Indeed, the example of the Good Samaritan was often called upon to rally support for the voluntary hospitals on both sides of the Atlantic,¹² and more often than not the deeply devout occupied the front ranks of the movement. Quakers John Bellers and Henry Hoare, Anglican divine Alured Clarke, and non-conformist clergyman Philip Doddridge, who were front and center in the British voluntary hospital movement, had their Philadelphia counterparts in Quakers John Reynell and Israel Pemberton, and Anglican clergyman Richard Peters.

The drive for increased medical knowledge also led to support for new hospitals on both sides of the Atlantic during the eighteenth century. As early as 1714, John Bellers called attention to the potential of hospitals in the field of medical education, an argument taken up by Bishop Seeker (the future Archbishop of Canterbury) and echoed in Philadelphia by Franklin's *Gazette* when it pointed out that hospitals

“not only render the physicians and surgeons who attend them still more expert and skillful . . . but afford such speedy and effectual instruction to the young students of both professions, who come from different and

¹¹ James Thacher, *American Medical Biography* (Boston, 1828), 179. Carl and Jessica Bridenbaugh in *Rebels and Gentlemen* (New York, 1962), 244, maintain that Thomas Bond visited England in 1748, returning to Philadelphia in the same year full of such enthusiasm for the English hospital movement that he immediately proposed the establishment of a hospital in Philadelphia. Actually, Thomas Bond left Philadelphia in 1748 but his destination was Barbadoes, his purpose to improve his health. John Ross to Cadwalader Evans, Nov. 13, 1748, *Pennsylvania Magazine of History and Biography*, XIII (1889), 381-382. The fact that Thomas Bond did not travel to England in 1748 was called to my attention by Elizabeth Thomson of the Yale University School of Medicine. Miss Thomson, a biographer of Bond, is convinced that the founder of the Pennsylvania Hospital did not travel to Europe from 1739 to the founding of the Pennsylvania Hospital in 1751.

¹² *Pennsylvania Gazette*, Aug. 8, 1751; A. Logan Turner, *The Story of a Great Hospital, The Royal Infirmary of Edinburgh* (London, 1937), 84.

remote parts of the country for improvement, that they return with a more ample stock of knowledge in their art, and become blessings to the neighborhoods in which they fix their residence."¹³

Physicians and surgeons were particularly cognizant of this aspect of the hospital movement and were leaders, in many cases, in the founding of new hospitals. John Harrison in the founding of the London Hospital, a group of physicians and surgeons in the founding of St. George's, the Royal College of Physicians of Edinburgh in the rise of that city's Royal Infirmary and, of course, Thomas Bond in the founding of the Pennsylvania Hospital are just a few cases in point.

But neither Christian charity nor the growing desire for medical knowledge can wholly explain why the voluntary hospital movement suddenly blossomed during the eighteenth century. Rather, there was some other aspect of the movement that elicited the same strong support in both Winchester and Philadelphia.

The poor and how they should be treated were much on the minds of eighteenth-century Anglo-Saxons. With the increase in beggars and other dependents, poor rates were bound to increase, much to the consternation of the middling sort and their betters. But, noted Alured Clarke in 1737, the antidote was at hand. The hospital, Clarke argued, "will considerably lessen the poor rates in every parish." The same theme was sounded by other hospital supporters, but in greater detail. Poor rates, it was argued, would decline because the hospital was more efficient and therefore less costly than such previously used methods as hiring physicians to treat the sick-poor at home at public expense. By contrast with the older practices, pointed out the Rev. Richard Grey, the care of the sick-poor in a hospital would be only a tenth as expensive. The refrain was picked up in Philadelphia by the *Gazette* which agreed with Grey that the difference in cost was "at least ten to one."¹⁴

¹³ John Bellers, *An Essay Towards the Improvement of Physick in Twelve Proposals* (London, 1714), *passim*; David Owen, *English Philanthropy, 1660-1960* (Cambridge, Mass., 1964), 40; *Pennsylvania Gazette*, Aug. 8, 1751.

¹⁴ Alured Clarke, *A Proposal For Erecting a Public Hospital* (Winchester, 1736), 5; *Gentleman's Magazine*, XI (London, 1741), 475; XIII (London, 1743), 640; Richard Grey, *A Sermon for the Sick and Lame at Northampton County Infirmary* (Northampton, 1744), 16; *Pennsylvania Gazette*, Aug. 15, 1751.

In 1743, the *Gentleman's Magazine* pointed out that if a poor laborer died from medical neglect, his wife and children became a burden to the parish. It was obvious, therefore, that saving the sick-poor was essential on purely fiscal grounds. Eleven years later, Franklin seemed to be alluding to this very same point when he noted that a hospital allowed the sick-poor to "become useful to themselves, their families and the public for many years after."¹⁵ Being useful meant, in part, keeping off the poor rolls and therefore keeping down the poor rates. The latter goal was very much on the minds of mid-eighteenth-century Philadelphians and contributed to the incorporation of the Overseers of the Poor in 1749, as well as to the founding of the Pennsylvania Hospital two years later.¹⁶

As the poor increased in number their betters began to express a feeling of uneasiness about the future of the social order. At Winchester, in 1736, Alured Clarke pointed out that the hospital was a means of procuring the affections of the poor and softening their passions. At Northampton, in 1744, the Rev. Richard Grey was even more to the point when he noted that hospital care would "tend to give the poor in general grateful and honorable sentiment of and inspire them with proper love and reverence towards their superiors . . . and by consequence promote that harmony and subordination in which the peace and happiness of society consists."¹⁷

To insure that British sick-poor were aware of their debt to the respective hospitals and, more important, to those who supported those institutions, discharged patients were required, upon release from the hospital, to offer formal thanks to the managers or governors for treatment rendered. Across the Atlantic the same practice was followed, as the founders of the Pennsylvania Hospital required discharged patients to "sign certificates of their particular cases and of the benefit they have received in this hospital to be either published or otherwise disposed of as the managers may think fit."¹⁸

¹⁵ *Gentleman's Magazine*, XIII (London, 1743), 640; Benjamin Franklin, *Some Account of the Pennsylvania Hospital*, 3.

¹⁶ The incorporation of the Overseers of the Poor was aimed at keeping down Philadelphia's poor rates by allowing the Overseers to accept private contributions, thus enabling private philanthropy to shoulder some of the burden of public charity. William Clinton Heffner, *History of Poor Relief Legislation in Pennsylvania, 1682-1913* (Cleona, Pa., 1912), 73, 74.

¹⁷ Alured Clarke, *A Sermon Preached in the Cathedral Church of Winchester . . . 1736* (London, 1737), 8; Richard Grey, *A Sermon for the Sick and Lame at Northampton County Infirmary*, 20, 21.

¹⁸ Board of Managers Minutes, I, Pennsylvania Hospital Archives, 39.

More central to the rise of voluntary hospitals than the drive to keep down poor rates, or the desire to render the poor more content with their lot, was another aspect of the attitude of the nonpoor toward the victims of poverty. In her study of the English poor during the eighteenth century, Dorothy Marshall noted a decreasing sympathy for paupers. Disciplining the lazy and extravagant was advocated with greater energy than previously, with workhouses and contractors the expedients proposed and employed. Complaints were often heard of the ill management of private charities "which are too heavily felt to need any particular explanation . . .," and public laws enacted for the benefit of the poor were merely dismissed as being ineffectual. In Winchester, it was charged, large sums of money given to charity were so misused "that a great many families are known to live in idleness, on the support they receive from the public and private contributions, which are frequently found here. . . ." ¹⁹

Pennsylvania Hospital spokesman Benjamin Franklin was of the same mind. Franklin criticized charitable institutions aimed at aiding the poor because they made the poor "less provident." The giving of mankind "a dependence on anything for support . . . besides industry and frugality during youth and health, tends to flatter our natural indolence, to encourage idleness and prodigality, and thereby promote and increase poverty, the very evil it was intended to cure: thus multiplying beggars instead of diminishing them." ²⁰ Nor did Pennsylvania's Quakers seem much more interested than Franklin in supporting large institutions that would alleviate the sufferings of the poor. Although, in the latter half of the eighteenth century, Pennsylvania's Friends would lead the way in charitable ventures of an institutional nature, in 1751 recipients of organized Quaker benevolence along the Delaware seemed to be largely restricted to those of the Friendly persuasion. ²¹

¹⁹ Dorothy Marshall, *The English Poor in the Eighteenth Century* (London, 1926), 13, 14, 22, 23; Alured Clarke, *A Collection of Papers*, iv, xiv; Clarke, *A Proposal for Erecting a Public Hospital*, 1.

²⁰ Albert Henry Smyth, ed., *The Writings of Benjamin Franklin*, V (New York, 1907), 123.

²¹ Up until mid-century, Quakers in Pennsylvania were not much different in their charitable benevolence than other colonial sectarian groups. Generally, Quaker philanthropy was aimed at helping fellow Quakers. The one Philadelphia institution that the Quakers did establish prior to 1751 in the field of poor relief was an almshouse exclusively for the use of Quaker unfortunates. For a discussion of the change in Quaker attitudes towards institutional

In short, an apparent paradox existed. A transoceanic society, ostensibly unsympathetic to institutions aiding the poor, simultaneously spawned a number of voluntary hospitals which, quite obviously, were aimed at aiding the impoverished. A closer look at the situation, however, indicates that rather than a paradox, the founding of the Pennsylvania Hospital as well as the founding of the many British provincial hospitals was a logical outgrowth from this lack of faith in the established methods of dealing with poverty.

Since the sixteenth century English society had distinguished between various types of poor. Although the distinctions might vary, generally two subgroups were recognized: those who could work but wouldn't; and those who would work but couldn't. The members of the former group were often referred to as "vagabonds" or "sturdy beggars," while the latter group included the indigent elderly and the dependent young. A third subgroup which would later be labeled the "industrious" or "worthy poor" was also beginning to be recognized by the sixteenth century. Like Gaul, the British poor were divided into three parts.

Relief for the poor was aimed at providing particularly for the elderly and the young via almshouses, orphanages, and apprenticeships. As already pointed out, however, sometimes the "vagabonds" and "sturdy beggars" were unwittingly supported by charity.²² Exasperated because the poor rolls featured lazy but able paupers, it was only logical that eighteenth-century Great Britain turn to workhouses to force the reluctant poor to work. In Philadelphia, Franklin applauded the concept of the workhouse as it was being applied in Great Britain and suggested that Pennsylvania needed the same sort of institution. Franklin's main concern was to encourage the "work ethic" (*i.e.*, industry and thrift) among able-bodied colonists, because "as matters now stand with us care and industry seem absolutely necessary to our well being, they should therefore have every encouragement we can invent. . . ."²³

charity, see Sydney James, *A People Among Peoples: Quaker Benevolence in Eighteenth Century America* (Cambridge, Mass., 1963).

²² A. G. R. Smith, *The Government of Elizabethan England* (New York, 1967), 80; Marcus W. Jernigan, *Laboring and Dependent Classes in Colonial America, 1607-1783* (Chicago, 1931), 191; Samuel Mencher, *Poor Law to Poverty Program* (Pittsburgh, 1967), 22, 23.

²³ Franklin to Peter Collinson, May 9, 1753, *The Papers of Benjamin Franklin*, IV, L. W. Laboree, ed. (New Haven, 1961), 482. As might be expected, a workhouse was established

Leaders in the British voluntary hospital movement, while generally castigating the lazy-poor as an unjustified burden to public and private charity, singled out the "industrious poor" for praise. Encomiums for the latter group reached a crescendo in 1748 when the Rev. John Nixon called them "the strength and bulwark of the nation."²⁴ The irony of it all was that eighteenth-century British charity rarely aided the industrious poor, because that group was self-sufficient and, therefore, "not entitled to a parochial relief." Some of the "industrious poor" even tended to be "ashamed to receive any constant assistance from the parish collections. . . ."²⁵ Obviously the "industrious poor" were the most deserving, but how to help them without further aiding the lazy-poor?

In 1741 the *Gentleman's Magazine*, in an article concerning the "many peculiar advantages of public hospitals," pointed out that unlike other charities, the hospital is not subject to imposters because they would "be discovered by the physicians and surgeons." Moreover, while the profligate and lazy were being weeded out, care would be given to the "multitudes" who had not come under the "care of a parish or workhouse; and yet are most of all entitled to the regards of the public, since they are in present want, and are of the diligent and industrious, which is the most useful and valuable part of all society."

Four years later at Northampton, the Rev. Thomas Holme assured his listeners that the voluntary hospital benefited not only society in general, but in particular "those most useful members of it, the industrious poor." Holme went on to say that only deserving objects would be provided for in the hospital and "lazy and clamorous poverty will find no relief." Other voices joined in to inform the public that the new voluntary hospitals were particularly aimed at aiding the industrious and hard-working poor.²⁶

in Philadelphia in 1767 to promote industry and frugality among the poor. Carl and Jessica Bridenbaugh, *Rebels and Gentlemen*, 232.

²⁴ Richard Grey, *A Sermon for the Sick and Lame at Northampton County Infirmary*, 15; Thomas Holme, *A Sermon*. . . (Northampton, 1745), 27; John, Lord Bishop of Peterborough, *A Sermon*. . . (Northampton, 1748), 18; John Nixon, *A Sermon*. . . (Northampton, 1749), 14.

²⁵ Alured Clarke, *A Proposal for Erecting a Public Hospital*, 7, 4; Richard Grey, *A Sermon for the Sick and Lame at Northampton County Infirmary*, 13.

²⁶ *Gentleman's Magazine*, XI (London, 1741), 476; Thomas Holme, *A Sermon*. . . , 27; Subscription Book, Bristol Royal Infirmary Archives, Bristol, England, 1; *An Account of the Public Hospital for the Diseased Poor in the County of York*, 2; Henry Layng, *A Sermon*. . . (Northampton, 1749), 14.

It was obvious from the beginning that many more sick-poor would apply to the new voluntary hospitals than those institutions, given the limited number of beds available, could admit. Knowing that they would have to be selective with hospital applications, the founders of most British institutions gave a great deal of control over admissions to a governing body chosen by the contributors. (An exception to this generalization was the Royal Infirmery of Edinburgh.)²⁷ Given the prejudices of the day against "beggars" and "vagabonds," the prospective hospital patient had best produce a good character reference as well as a curable, noncontagious illness compounded by poverty.²⁸

A vital first step in the process of establishing voluntary hospitals in Britain was the recognition that there were "industrious" and, therefore, "worthy" poor. There is some evidence that eighteenth-century America was moving in the same direction. In New York, in 1769, it was argued that to assist the industrious poor was not charity but justice, and a recent study of Philadelphia during the 1790's found a distinction being made in the press between the industrious or worthy poor on the one hand and the "vicious" and lazy poor on the other. This distinction, however, was not universally made in eighteenth-century America and the founders of the Pennsylvania Hospital, with the exception of Franklin, did not speak to this subject. Franklin did deal at some length with poverty but, in most of his correspondence and publications, did not distinguish between the industrious and lazy poor. Indeed, through Franklin's eyes "industrious" and "poor" would have seemed mutually exclusive terms since poverty was largely the product of idleness and extravagance.²⁹

²⁷ *An Account of the Rise and Establishment of the Infirmery, Or Hospital for the Sick-poor, erected at Edinburgh* (Edinburgh, 1730), 11.

²⁸ Sick-poor applicants to most eighteenth-century British hospitals had to be suffering from a "curable," noncontagious malady before they could be admitted. The precedent for refusing incurables to British hospitals had been established in the seventeenth century. Contagious diseases were barred from the Pennsylvania Hospital, but some incurable insane patients were admitted. Board of Managers Minutes, I, Archives of Pennsylvania Hospital, 38.

²⁹ Jackson Turner Main, *The Social Structure of Revolutionary America* (Princeton, 1965), 157; John K. Alexander, "The City of Brotherly Fear," *Cities in American History*, K. Jackson and S. Schultz, eds. (New York, 1972), 81. For the view that most colonists did not make this distinction, see Main, 198. For papers of some of the most important founders of the Pennsylvania Hospital, see Coates-Reynell Papers, Pemberton Papers, and John Smith's

And yet, on one occasion, Franklin seemed to recognize that some of those suffering poverty did possess praiseworthy traits. In 1751 the Pennsylvania Assembly passed an act to establish the Pennsylvania Hospital. The first few words of the act justified the hospital on the grounds that it would save and restore "useful and laborious" people to the community. Since these "useful and laborious" people also had to be poor in order to qualify for hospital admission, the words of the act indicate that its author and supporters were sensitive to the fact that some of Pennsylvania's poor were not lacking in industry. The author of the act was Benjamin Franklin.³⁰

The act establishing the Pennsylvania Hospital made plain that the purpose behind the founding of that institution was to provide, specifically, for the "laborious" sick-poor. This is understandable in view of the fact that industry and thrift were, in all probability, even more highly esteemed among Philadelphians than among the supporters of voluntary hospitals abroad. Franklin, of course, stands out as the great exponent of the "work ethic," but the other leading supporters of the Pennsylvania Hospital, such as Quaker merchants John and Israel Pemberton and John Reynell, were of the same mind.³¹

In order to assure that the Pennsylvania Hospital's avowed purpose to provide for the "useful and laborious" poor was carried out, a screening process was set up whereby each prospective patient was required to procure a letter signed by an influential person

Diaries, all in the Historical Society of Pennsylvania. Franklin became even less sympathetic toward the poor in his later years. Howell V. Williams, "Benjamin Franklin and the Poor Laws," *Social Science Review*, XVIII (1944), 77-91.

³⁰ Benjamin Franklin, "The Act to Encourage the Establishing of an Hospital for the Relief of the Sick Poor of this Province, and for the Reception and Cure of Lunatics," *Some Account of the Pennsylvania Hospital*, 5; Benjamin Franklin, *The Autobiography and Other Writings*, L. Jesse Lemisch, ed. (New York, 1961), 134. Although, as noted in n. 29, Franklin became increasingly critical of the poor, he, nevertheless, continued to hold the Pennsylvania Hospital in high esteem. *Ibid.*, 134, 135.

³¹ Verner W. Crane, *Benjamin Franklin and a Rising People*, 30; Judy M. DiStefano, "A Concept of the Family in Colonial America: The Pembertons of Philadelphia" (doctoral dissertation, Ohio State University, 1970), 275, 278, *passim*; Carl L. Romanek, "John Reynell, Quaker Merchant of Philadelphia" (doctoral dissertation, Pennsylvania State University, 1969), 5, 6.

describing his case. Patients recommended by contributors to the hospital were to be given first preference to the limited beds available.³² As in Great Britain, charity of this type demanded deference as well as good character on the part of the applicant since his admission depended on recommendations from his betters. Those sick-poor who were turned away from the hospital probably turned to municipal almshouses for succor. A random comparison of patients at the Philadelphia Almshouse (House of Employment and Bettering House) and the Pennsylvania Hospital during the late eighteenth century supports this assumption. On a typical admission day in 1794, for example, the Philadelphia Almshouse discharged one patient it described as "one of the worst kind," a second who was labeled "a skulking fellow," and a third who was laconically characterized as "worse." Typical of Almshouse admissions that year was Nathaniel Cope, "another of those worthless scoundrels who there is no possibility of keeping in or out and who continually makes a meer slipper of this institution to their own conveniency." Although a few of the Pennsylvania Hospital's patients were of the caliber of a Nathaniel Cope, on the whole they seemed a better sort than most of the rabble who ended up in the Philadelphia Almshouse.³³

As initially pointed out, the founding of the Pennsylvania Hospital can be best seen as an extension of the British voluntary hospital movement to the "New World." During the eighteenth century, the reluctance of the British middle and upper classes to support the older, more established forms of charity was reconciled with self-interest and a genuine desire to help the "industrious poor." The voluntary hospital movement met with strong support because it avoided some of the pitfalls experienced by the older forms of charity and, at the same time, served to benefit the "industrious" or "worthy" poor, a group that British philanthropy had

³² Board of Managers Minutes, I, Archives of the Pennsylvania Hospital, 38, 39.

³³ Entries for Apr. 3, June 16, 1795, Book of Daily Occurrence, House of Employment and Almshouse of Philadelphia, Mar. 25, 1794–Sept. 28, 1795, on microfilm courtesy of Dale Fields, Historical Society of Delaware; Board of Managers Minutes, I–VII, Rough Minutes, 1753–1801, Pennsylvania Hospital Archives. This is not to say that only those with unimpeachable character were allowed into Anglo-America's first hospital. Certainly, if there were empty beds and enough money available to support those beds, less desirable types were also admitted.

hitherto ignored. There were, of course, many other reasons given for the support of the hospital movement—the *Gentleman's Magazine* listed more than ten—³⁴ but the main impulse grew out of a desire to help, in particular, those poor who showed a decent respect for the “work ethic.” It was in the same spirit that Anglo-America’s first hospital was created.

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³⁴ *Gentleman's Magazine*, XI (London, 1741), 476, 477.