The Old Folks at Home:
The Development of Institutionalized Care for the Aged in Nineteenth-Century Philadelphia

In 1817, two Quaker women, inspecting the Philadelphia Almshouse, were shocked to discover an old woman, once of the middle class, settled among the institution’s lower-class residents. Childless and poverty-stricken, she had been forced to enter the poorhouse upon the death of her husband. Outraged, the Quaker women decided to establish a society that would house poor but respectable old ladies unwilling to accept public charity. This, Philadelphia’s first home established strictly for the old, remained its only completely age-segregated institution for thirty-three years.¹

By the end of the century, however, the city had at least twenty-

¹ Annual Report from the Managers of the Indigent Widows’ and Single Women’s Society (IWWS) for 1817 (Philadelphia, 1818), 3. I would like to thank Dr. Charles E. Rosenberg and Dr. Drew Gilpin Faust for their valuable comments and criticisms of this essay, which was supported in part by a grant from the National Library of Medicine.

Prior to 1817, both the Almshouse and Christ Church Hospital housed indigent old women. Neither institution, however, restricted admission to a specific age group. Christ Church Hospital, founded through the will of John Kearsley in 1769, was established as “an almshouse or infirmary” for “poor or distressed women of the communion of the Church of England . . . (preferring clergymen’s widows before others). . . .” As time progressed, though, this home became increasingly age-segregated. By the last quarter of the nineteenth century, while it did not limit its admission by age, the home required that its members be “of sufficient age.” Moreover, it repeatedly referred to its “elderly” inmates and often noted the advanced years of a tenant at her death, as well as the high average age of the household. See, for example, Annual Report of Christ Church for 1893 (Philadelphia, 1893), 8, and Annual Report of Christ Church Hospital for 1897, 5, 6. As this paper will attempt to show, this segregation of the old became progressively common and acceptable in late nineteenth-century America.
four private homes dedicated to the care and housing of the aged. No longer limited in scope to the poverty-stricken, these institutions attracted a broad cross section of Philadelphians. By 1900, they were providing shelter for lonely, tired, and sick individuals whose age alone qualified them for institutionalization. The formation, character, and goals of these organizations had changed completely since 1817.

The purpose of this paper is to illuminate this development and the changing social realities and conceptions of old age on which it was based. As the nineteenth century progressed, the status of the aged was radically altered. Changes in family structure, religious belief, labor force participation, occupational opportunities, as well as advances in medicine, science, and technology, all served to separate the old from their traditional spheres and accepted patterns of life. The evolution of the old-age home both mirrored and influenced this transformation. By gradually opening their doors to additional groups of "old folks," these homes concretely reflected a broadening of the "needy aged" classification. In their published reports, they clearly articulated their shifting assumptions as to the appropriate recipients of their care. Furthermore, they then specifically defined and limited the activities and interests best suited to their inmates' stage of life. By the end of the nineteenth century, the old-age home of Philadelphia had become a well-defined symptom of the new realities and attitudes confronting America's elderly population.  

2 Medical Directory of Philadelphia (Philadelphia, 1889), 273-285. This is the most complete available list. To the twenty-two homes for the aged, I have added two which do not appear on this list, the Evangelical Manor and the Philadelphia Protestant Home for the Aged. Wards of hospitals devoted to the old have been excluded.

3 For the purpose of this study eight such homes in Philadelphia were selected, chosen primarily for the availability of their records. This group includes: the Indigent Widows' and Single Women's Society, the Home for Aged and Infirm Colored People, the Old Man's Home, the Old Ladies' Home, the Methodist Home of Philadelphia, the Presbyterian Home for Widows and Single Women, the Presbyterian Home for Aged Couples and Aged Men and the Evangelical Manor. While no old-age home, to my knowledge, possesses individual case studies which are publicly attainable, this group had a wide assortment of annual reports, minutes, financial records, letters and histories. Furthermore, these organizations, established between 1817 and 1888, directed their appeals to different segments of the elderly population, and therefore offer a wide range of information on the development of private care for the aged in nineteenth-century Philadelphia.
The Indigent Widows' and Single Women's Society (founded, as we have seen, in 1817) specifically defined the proper objects of their benevolence. Open to women only, the Society declined to accept any applicant who had been born and raised in poverty. These individuals, they stated, were sufficiently cared for by the almshouse. Instead, their organization was designed for women "whose earlier lives had been passed in more refined walks of life and whom experience, therefore, had not inured to the struggles of penury."4 Their seventh annual report explained the purpose of the Society clearly:

It is generally known that in a large city there are always a number of persons who have been in easy circumstances and enjoyed the comforts attendant on this state, but have been reduced by misfortune to poverty; who are too respectable to be classed with the poor that come under the notice of most charitable societies, are unwilling to be inmates of an Alms House, and yet are unable to procure for themselves the comforts or even the necessities of life; for such it is desirable that a place should be provided where their declining years might be rendered comfortable, without the feeling of misery and degradation incident to a state of dependency on public charity.6

This feeling of degradation was to be prevented by making the women see the institution as their "home" and the other inmates as members of their "family." Separate rooms were therefore provided so that each inmate would have privacy, while meals taken at a general table were meant to insure a feeling of family unity.6

Although concerned with the material aspects of the home, the Indigent Widows' and Single Women's Society saw a more pressing reason to rescue their charges from the almshouse. While their home had certainly provided for the women's comfort, they explained, "What is more important, many exemplary Christians devote their best efforts to instruct [the inmates] and to induce them to prepare for the awful change from their sojourn in this life to a weary rest from their labours, and where sorrow can never intrude."7 The

5 7th Annual Report of the IWSWS for 1823, 3.
Society, although nonsectarian in character, emphasized their Christian orientation continuously throughout the first half of the century. Annual reports proudly enumerated tales of women whose religious devotion, strained by the conditions of poverty, had been restored through the spirit of the home. Left in the almshouse, they would have died in misery; institutionalized, they could leave the world in hopes of eternal peace.

To maintain the religious mood within the home at all times, the Society desired that only moral, pious women be admitted. To insure this, they required each applicant to give proof of a “character and habits beyond reproach” along with recommendations from “respectable persons.” Seven years later, in an attempt to further guarantee the quality of their applicants, they exacted a $150 entrance fee. This had been done, they explained, so that “unworthy objects would be excluded”; anyone who had once been middle class would, they assumed, be able to raise this amount of money.

Nowhere in their records did they give any indication that the money had been assessed for financial reasons, although the home was often in need of funds. By 1887, in fact, this measure of a woman’s past worth had reached $400.

The institution also attempted “to preserve perfect harmony in the family” through an elaborate set of rules and regulations enforced by a resident matron. Those disagreeing more than twice with her policies were expelled. In the first seventeen years, out of a total of 148 inmates, twenty women were found to be unsuitable residents. The annual reports, however, never gave explicit reasons for the expulsions. In 1887, a one-year probation period was established for each incoming resident before she became a true family member.

Despite the family-like relationships emphasized by the management, the home, at the time of its founding, did resemble the contemporary image of an institutional poorhouse in one respect: all

inmates were required to donate their labor to raise money for the house. This rule, the founders stressed, not only added to the financial stability of the home, but also "promoted a disposition of harmony and understanding by maintaining a degree of social intercourse and . . . prevented the depressing idea of entire dependency which might otherwise produce a feeling of despondency." The work instead, the Society explained, made the women feel useful and filled the home with the "spirit of industry." While they did not consider the inmates able to support themselves in full, they recorded with pride the amounts of money raised by the women's sewing, knitting, and quilting.

Beginning in the late 1830s, however, this attitude changed sharply. By mid-century, the thirty-third annual report solemnly explained the lack of activity in the institution. "It will be remembered," the management wrote, "that all the beneficiaries here are very aged, the youngest considerably more than sixty years old, the rest beyond seventy, eighty and ninety, and that as a matter of course they are rarely free from infirmity and disease and few are able to contribute by their industry to their support."

The women, instead, were pictured as the docile recipients of charity, desiring only to be fed, clothed, and sheltered. The managers of the home no long recorded the belief that this treatment might lead their charges to feel worthless or depressed. Instead, they praised the "quiet, monotonous lives" of their tenants totally apart from the productive, busy world outside the establishment's walls.

This division was further emphasized by the increasing importance which the annual reports gave to the number of years each inmate had lived. When the home was first established, the Society did not mention their beneficiaries' ages or the minimum number of years required for entrance. The earliest reference to life span, 1836,

13 2nd Annual Report of the IWSWS, 4-5.
14 Ibid., 4. The statement also appears as late as the 19th Annual Report of the IWSWS for 1825, 3.
17 Ibid.
divided the women into three categories: eighteen were over eighty, forty-four beyond seventy, and four past sixty. In 1844, the institutional boundary to senior status became definite. "No one," stated the new rule, "is admitted as an inmate who has not passed the limit of three score years." In 1888, the threshold was raised to sixty-five.

This line clearly marked the separation of the active world from that of the unproductive elderly. As we saw above, the management's explanation of the women's inability to work included a reference to their ages. This division, once drawn, became the focus of the great contrast between the happy life of the young and the sad, tiresome hours endured by the old as they waited for death. The mere entrance into senescence became a sure and incontestable sign of uselessness. "With the aged," the annual report of 1842 wrote, "we have few sympathies. They belong to a generation that has passed away; they can promise us neither reciprocation nor reward. Our reverence for them is rarely an active principle. . . ." The young had little to learn from those over sixty except the lesson of Christian charity.

This sharp separation between periods of life had an important effect on the development of institutional procedure and goals. When poverty had been the cause of the elderly's misery, an old woman could alleviate her suffering by entering the home. Now, however, she could not change her state by merely stepping inside the institution's walls. Instead, her age, her condition of uselessness, and her separation from the rest of the world all entered along with her. The Society's assurance of their ability to bring joy into the lives of the aged had vanished; in its place, the managers expressed the hope that they could soften her rapid decline.

This task required a restructuring of the possible goals of the home. To rescue a woman from poverty was not sufficient if the Society then allowed her to suffer "the burden of age." Instead, they had to prove they could provide a healthy, happier atmosphere for their charges. By mid-century, therefore, their annual reports

rarely mentioned the ominous almshouse. In its place, they began to stress the particular provisions they allocated to their institutionalized inmates. “To all whom it receives,” the twenty-eighth annual report explained, “it supplies a home during life, abundant food, comfortable clothing and kind attendance, watching over them in sickness and administering their last necessities in a filial spirit.”

In part, this change was due to the overcrowded conditions of the home. Two years after its founding, the institution had moved from Walnut to Cherry Street in order to enlarge its quarters. In 1852, the Society began to erect a new wing to the Cherry Street building.

Despite these actions, the overcrowding continued. In 1857, when the new annex opened, the seventy-eight inmates immediately filled every available space. The rule which gave each tenant private quarters was amended; two or three women now filled some of the rooms. Even the establishment in 1852 of a new home for elderly women, the Pennsylvania Asylum of Philadelphia for Indigent Widows and Single Women, did not lessen the demand. The Society, forced to turn away many applicants, began to select only the most worthy and needy for placement upon the waiting list. By 1864, this list covered all possible admissions for the next four years. Although the Civil War was multiplying the ranks of needy women, the home declined to accept any applications for an unspecified length of time. Instead, it continually pleaded with other charitable groups to undertake the cause of the aged.

In the period between 1859 and 1890, twenty-two institutions were established in Philadelphia to fulfill this need. Similar in structure to the Indigent Widows’ and Single Women’s Society, they were organized to meet the special demands of the aged. Unlike the Society, however, they shaped their homes around the special religious, sexual, occupational and racial characteristics of their inmates. In so doing, they created homogeneous units which reflected the public’s greatly expanded conception of who among the elderly should be privately institutionalized.

Most active in this movement were the city’s churches. Homes were founded by the Lutherans in 1859, the Methodists and Jews in 1865, the Baptists in 1869, the Presbyterians in 1872 and 1885 and the Evangelical Association in 1888. Unfortunately, the records of many of these groups have either been destroyed or are presently unavailable. Nevertheless, the reports from the two Presbyterian homes and the Methodist institution, as well as a history of the Evangelical Association all show a similarity in their organization, structure, and goals.

Most importantly, the managers of the homes required the applicant to be a church member in good standing. In addition, the religious leader of the community, along with other “respectable persons,” had to approve of her character. In some instances, this was further verified by a visiting committee which investigated the candidate.

The Presbyterian Home for Widows and Single Women, established in 1872, enumerated its rules clearly. Along with certificates attesting to her character, the applicant had to be unable to support herself, pay $150 to $250 for admission (depending on her age), sign all property over to the institution, agree to obey all rules set by the matron and be free from any incurable physical or mental disease. In an amendment to the rules thirteen years later, the home emphasized that anyone “seriously deranged in the mind would not be retained.”

The institution was not to be a hospital but a place where each old woman could live out her life in “personal dignity.”

The Presbyterian Home, as did all the newly founded institutions of this type, stressed the importance of creating a religious atmosphere. Daily Bible readings, weekly services, and consultations with the minister were provided. Moreover, most of the organizations saw a need for this spiritual environment to conform to the theology of their specific denominations. A history of the Evangelical Association explained that, before its institution’s establishment, they were “compelled to seek admittance [for the aged and needy members of our churches] in the Homes of other denomina-

---


tions or, in some cases, the Almshouse." Its new asylum could not only rescue the aged from poverty but would provide an appropriate sectarian environment as well.

As the homes separated according to religious preference, they also encompassed groups which had previously not been considered in need. As we have seen, prior to the Civil War the old-age homes of Philadelphia were designed solely for women. Focusing their efforts upon females without male support, the organizations implicitly assumed that men were sufficient providers regardless of age. The notion of male indigence never arose in the report of the Indigent Widows' and Single Women's Society. The growing trend to categorize the elderly according to their ages, however, had a clear effect upon the charities' perception of the old man. He too reached senescence, becoming equally irrelevant to the active young world. "Men, may become," a future asylum would observe, "by age and misfortune, as helpless as women, and if they are equally deserving of pity and aid, difference of sex should make no difference in their claim on human sympathy." Thus, in 1865, the first home for men opened its doors "as a refuge from want and suffering for decent old age."

In its organization and rules, the Old Man's Home of Philadelphia closely resembled its sister institutions. While nonsectarian in character, it required its inmates to have lived moral and religious lives, "declining to receive those who are scoffers at Christianity and known condemners of its precepts and observations." The institution wanted it clearly understood that these men had not reached their state through "crime or the sin of idleness or in- temperance," but merely through ill fortune or the infirmities of old age.

The one major difference from the women's homes was, of course, its concern with the elderly indigent male inmate. In the early years of its establishment, the managers of the asylum emphasized

26 A History of the Evangelical Manor (unauthored pamphlet published by the Evangelical Association), 1.
29 Annual Report of the Old Man's Home for 1866, 8.
the difficulties they had convincing the public of a real need for its existence. The second annual report, therefore, explained the plight of the abandoned old man:

The very name of manhood gives the idea of strength and ability to labor. Hence our first duty was to convince others of that which our own experience had taught us, namely that there is absolutely no class of humanity so sadly powerless to aid themselves, so useless in any of the ordinary duties of the household and so unwelcomed among strangers as destitute old men.31

The picture they drew of the aged male was in sharp contrast to the stereotyped image of man throughout this period.32 No longer protective, strong, nor productive, he became desexed, growing weaker and more useless than even his female counterpart. “While a woman,” the management explained, “who has reached advanced age is, even with her impaired faculties, usually able to contribute in many ways to the comforts of a family, a man thus debilitated has no resource by which he can even evince his gratitude for those who befriend him.”33 By the end of the century, the managers were attacking the masculine stereotype less strenuously; their family of 128 members seemed sufficient proof of their argument. They expressed only wonder that the institution had not been established earlier.34

The cause of the needy old man was also adopted by the Presbyterian Home for Aged Couples and Aged Single Men. Founded in 1885, this institution reflected a further broadening in the category of the institutionalized aged. As indicated by its name, the establishment had designed its facilities for married couples as well as single men. Previously, most institutional literature asked the public to commiserate with the condition of the old, lonely individual who had neither friend nor relation. One of the main aims of the earlier homes was to supply the warmth and companionship of the missing family. Any married couple wanting aid was there-

31 Annual Report of the Old Man’s Home for 1866, 8.
33 Annual Report of the Old Man’s Home for 1866, 8.
34 34th Annual Report of the Old Man’s Home for 1898, 8.
fore required to separate and be housed in different institutions.\textsuperscript{35}

The Presbyterian Home for Aged Couples and Aged Single Men, as well as the Home for Aged Couples established in 1876, rejected this stipulation, accepting couples who could present $500 admission fee, two new suits of clothing, and give proof that they could not support themselves nor be cared for sufficiently by their children.

Like the Presbyterian Home, the Home for Aged and Infirm Colored People testified to an expansion of institutional care. Founded by Quakers and blacks in 1865, it opened its doors to “worthy and exemplary colored people” who otherwise would be sent to the almshouse.\textsuperscript{36} The institution at first limited its enrollment to women, but, following a move to larger quarters in 1876, began to admit both men and couples.

Established immediately after the Civil War, the home linked its purpose closely to the “uplifting” of the newly liberated black. Its very reason for existence, the manager explained, came directly from the crimes of slavery.

If their children had been enabled to go into business as do our own, doubtless they would have been comfortable; as they were not, we actually necessitated their dependent conditions and made ourselves liable for their maintenance.

To prevent this, then, a constant recurrence of this state of things, let us open to them, the colored people, all the avenues of trade and business, leaving them to select for themselves such occupations as shall best suit them and thus give them the opportunity at least of proving whether or not they will provide for their aged.\textsuperscript{37}

The asylum’s early reports related tales of the inmates’ past lives under slavery and their subsequent escape from the conditions of poverty.\textsuperscript{38} Within a decade, however, these issues received less emphasis; the freedom gained by the black did not relieve the

\textsuperscript{35} 8th Annual Report of the Managers of the Presbyterian Home for Aged Couples and Aged Single Men (PHACAM).

\textsuperscript{36} Constitution, By Laws and Rules of the Home for Aged and Infirm Colored People [HAICP] (Philadelphia, 1865), 11.

\textsuperscript{37} Proceedings of the Third Annual Meeting of the HAICP for 1867, 6–7.

\textsuperscript{38} Proceedings of the Second Annual Meeting of the HAICP for 1866, 4, 11; Proceedings of the Third Annual Meeting of the HAICP for 1867, 6; Proceedings of the Fifth Annual Meeting of the HAICP for 1869, 7; Proceedings of the Sixth Annual Meeting of the HAICP for 1870, 4.
plight of their elderly. Instead, the institution increasingly turned its attention from the problems of the black in white society to those of the elderly inmates within its home. Centering discussions upon the particular concerns of the aged, it emphasized its ability to meet these needs through special food, clothing, and medicine. Due to the home, the managers stated, “the declining years of these impotent folks, which might else have been passed in unhealthy habitations and in much bodily distress, had been so much alleviated.”

By 1880, in fact, its annual reports bore striking resemblance to those of the other institutions.

In part, this similarity was a reflection of the home’s alteration of some of its initial rules. Although it originally set its minimum age for admittance at fifty, the institution in 1874 raised this standard to sixty. Like the Indigent Widows’ and Single Women’s Society, it also modified its attitude toward the women’s ability to work. A rule, reiterated during the first few years of establishment, requiring the women to “sew, knit or do any other service for the benefit of the Home,” disappeared from the annual reports in 1878. Explaining their action in 1881, the managers wrote that the women could not be expected to fulfill these jobs, “but they do what they can and who shall ask for more?” This similarity to the other homes was apparent in another amendment as well. In 1876, the regulations officially recorded the passage of a mandatory probation period of six months for all residents. As with the previous institutions, this was done “so that [the inmates’] dispositions and characters may become better known to us, and thus guard to some extent against the admission of improper inmates.”

Throughout this period, other groups as well established old-age institutions. Trade union and fraternal organizations, concerned with the fact that the cessation of a worker’s salary often left him unprepared for old age, opened asylums for the care of their members. In Philadelphia three such institutions existed: the Forrest

40 Charter and By Laws of the HAICP, 10. This rule is repeated annually throughout the reports.
41 17th Annual Report of the HAICP for 1881, 8.
42 12th Annual Report of the HAICP for 1876, 10.
Home for Aged and Infirm Actors, the Hayes Mechanics' Home, and the Home for Aged and Infirm Odd Fellows.\textsuperscript{43}

The opening of the Home for Infirm People of the Little Sisters of the Poor in 1869 signified still another type of home for the elderly. In the past, all asylums automatically charged their inmates a fee. Even the least expensive, the Home for Aged and Infirm Colored People, raised its cost of admission from $40 to $150 by the end of the century. The Little Sisters, however, accepted all aged paupers free of charge. Now, old-age homes were not only for respectable citizens once of the middle class, but were becoming the preferred way of dealing with the old. Even the managers of the Indigent Widows' and Single Women's Society, who had once stressed the importance of private homes only for those "too respectable to be classed with the Poor,"\textsuperscript{44} endorsed the idea of separate old-age homes for the lower classes. In 1875, they sent out a plea to the city's charities which they repeated throughout the last quarter of the century. "The Managers," they wrote, "venture to suggest to those who have treasures to bestow upon objects of mercy that another institution is required for a class who after spending their lives as domestic servants become, as age advances, dependent and friendless."

With these developments, the concept of private homes for the elderly had grown beyond its pre-Civil War definition of care for the white, formerly middle-class single woman. By 1890, it covered the single man, the married couple, the black and the poor. Furthermore, this expansion not only affected the types of persons involved but broadened the justification for institutionalization as well.

As we have seen, beginning in the late 1830s, inmates were increasingly categorized in terms of their ages, separating them sharply from the rest of society. This barrier signified another division as well; they passed from the healthy world into that of the sick and dying.\textsuperscript{45}

In their official policy statements, many of the homes stressed

\textsuperscript{43} Medical Directory of Philadelphia, 273-285; see also Lee Welling Squier, Old Age Dependency in the United States (New York, 1912), 55-71. To my knowledge—as attained through correspondence—the records of these organizations no longer exist.

\textsuperscript{44} 59th Annual Report of the IWSWS, 3.

\textsuperscript{45} 59th Annual Report of the IWSWS for 1875, 4.
emphatically that they were not created to be hospitals. In most cases, a doctor’s examination was required before admittance to insure that the applicant had no incurable disease. If an inmate became senile during his residence at the institution, he was often removed to the almshouse or hospital so that he would not disturb the tranquility of the “family.” The Indigent Widows’ and Single Women’s Society, in fact, sponsored a bed at the Pennsylvania Hospital for this specific purpose. The Society wanted their institution to be a home, not merely a shelter for the insane and dying.46

Throughout the last quarter of the century, however, the annual reports increasingly used terms of physical and mental illness to describe the attributes of their inmates. Home after home explained how the aged had minds like infants “without the joys of that period,” and bodies suffering such pain that most welcomed death.47 Their personalities, too, reflect their condition. Absorbed in their physical ailments, “both real and imagined,”48 the aged became the most difficult and trying of persons. The Home for Aged and Infirm Colored People, for example, thanked its matron and her assistants for their gentleness, patience, and forbearance in handling the residents, reminding the employees that the old were “but children of mature growth with strong desires natural to their years.”49 The annual reports evoked this description not merely for those patients rapidly approaching death but for all the inmates in their establishments. Disease was no longer a separate entity apart from old age, but had become the central and determining factor for that period of life.

Thus, although the homes were designed for the living, death dominated the pages of their yearly reports. If few residents had died during the course of the year, the homes often credited their sanitary conditions, good food, kind attention or medical care. If a

46 61st Annual Report of the IWSWS for 1877, 4. This specifically refers to the issue of sponsoring the bed. The attitude of the institution as home is repeated in almost every single issue.

47 21st Annual Report of the HAICP for 1885, 12. This is the source of the quote. Endless examples from the homes may be cited. For example, see 18th Annual Report of the HAICP, 1882, 6; 13th Annual Report of the PHACAM, 1897, 5; 69th Annual Report of the IWSWS, 1885, 5; 15th Annual Report of the Old Ladies’ Home for 1894, 4.


large number had passed away, however, the home expressed no great concern; this, after all, was the norm not the exception. “That we should have to record the deaths of eleven of the home’s members,” explained the managers of the Indigent Widows’ and Single Women’s Society, “excites but little surprise when we consider how far beyond the ordinary term of human life were the ages of those who passed away.”60 In some cases, in fact, the good health of the inmates evoked the greatest wonder.

This attitude had a notable effect upon the management of the homes. Previously, responsibility for the daily regimen of the inmates fell upon a wide variety of individuals. The managers, the matrons, the visiting committees and the churches all helped structure their charges’ routine. By viewing old age as a disease, however, the institutions implicitly gave ultimate responsibility for this task to the physician. During the last quarter of the century, in fact, statements from the attending physician, or summaries of his reports, began to appear with regularity in the annual records, replacing those of the minister. Commenting on such things as the sanitation, diet, and exercise of the patients, he expressed the official view of conditions within the home to the public. These reports never described specific diseases or their cures. Instead, the entire normal regimen of the old had fallen within the physician’s domain.61

The doctor was responsible for evaluating, endorsing, or revising all rules under which the patients lived. Dr. Jonathan Echkhardt, who attended the women of the Presbyterian Home for Widows and Single Women, emphasized the importance of these regulations. Summarizing his statement, the managers of the home explained that the physician “reported that the health of the inmates is good, considering their ages and the climatic change coincident with changes in temperature [and] . . . attributed it to the wise precautions—the diet and the strict rules laid down by the House Committee in charge.”62

These measures often regulated the daily schedule of the inmates’ lives; they were told when to rise, wash, eat and sleep. Furthermore,

60 46th Annual Report of the IWSWS for 1862, 3.
62 8th Annual Report from the PHACAM for 1893, 9.
they were instructed which activities they were not to do. One home, for example, banned all "discussion on exciting subjects," while another legislated against any unsupervised inmate leaving the building.

Missing from the annual reports, however, is the description of what filled the hours between the meals and sleep. For the most part, it seems, the management emphasized the ability of the aged to sit and watch the world go by "in peace and quiet." "To see the happy old men sitting around," the thirty-fourth annual report of the Old Man's Home exclaimed, "either in the cheerful pleasant hall or each in his own little room, was a sight that none of our managers at least will ever forget." The administration of the Home for Aged and Infirm Colored People echoed this sentiment, commenting upon the enjoyment the inmates received through the "pleasant outlook from the windows and porch of the Home . . . [as] the birds and flowers cheer them up."

Twice yearly as well, most of the homes scheduled excursions to the park for a picnic or concert. These trips, along with visits from "outsiders," marked the high point of the year. "The old folks," reported the Home for Aged and Infirm Colored People, "have received much enjoyment from the thoughtfulness of young people who have several times come out to the Home to sing to them. Such attractions aid in passing away the weary hours of old age."

Generally, however, the annual reports of the institutions cited their homes' isolation and self-sufficiency as important therapeutic qualities. Housing all facilities under one roof, they allowed the tenants to remain within the asylum's gates at all times. This, in the opinion of the various managers, not only made the sick individual more comfortable, but actually improved his health and lengthened his life.

---

53 13th Annual Report from the Old Man's Home for 1877, 6.
54 Proceedings of the 6th Annual Meeting of the HAICP for 1871, 18.
56 34th Annual Report of the Old Man's Home for 1895, 8.
57 21st Annual Report of the HAICP for 1885, 8.
59 References to improved health fill the final pages of the century's reports in all the homes. See, for example, 8th Annual Meeting of the HAICP for 1872, 7; 18th Annual Report of the Old Ladies' Home for 1893, 9; 33rd Annual Report of the Old Man's Home for 1894, 8.
The location of the homes further added to this rejuvenating process. During the last quarter of the century, several of the institutions moved to less populated sections of Philadelphia. These new locations allowed the elderly to escape the noise and tensions of the city as well as to breathe the country’s fresher air. “We believe,” explained the Old Ladies’ Home, “that few persons of any age can turn aside from the busy scene of the city’s crowded thoroughfares to enter one of these quiet retreats for old people without a sense of relief that here at last the strife and turmoil are over for the old folks . . . and [they] can now repose in an atmosphere of undisturbed serenity surrounded with the comfortable realities of warmth and food and cherished by the ready sympathy of friends.”

This new, healthier environment was not directed at the poverty-stricken alone. If a man, through age, became old and therefore sick, he too needed the institutionalized care which the homes provided. The Old Man’s Home noted that they had requests from middle-class men “desirous to live where they might be surrounded by congenial society of their age, where they would be certain of receiving care and kind attention during sickness.” The Methodist Home annexed a boarding house of this type to their establishment in 1876. Other institutions, such as the Home for Aged and Infirm Colored People, reported cases like that of Lucy Taylor “who boarded at the house and paid a monthly fee. It was of her own free will and choice that she came to this Home in her old age, to enjoy the pure air of the country and the beautiful scenery which she delighted in.”

Thus, although private care for the not impoverished members of the middle class did not develop generally until the twentieth century, the conceptual framework for it had been clearly established by the end of the nineteenth. In contrast to pre-Civil War days, lonely, once middle-class Protestant women were not the only group considered in need of shelter. Instead, most elderly adults had become, by reason of their age alone, possible candidates for extensive private care; once “over the hill,” they automatically

became sickly and dependent. In response to this public conception of the elderly, old-age homes greatly expanded their goals as well as their appeal. No longer just alternatives to the almshouse, they had developed into substitutes for family, church, and hospital. Based on the definition of old age as a disease, they then carefully quarantined their inmates to preserve their dissipating their strength and to guard them against the harmful effects of youthful society. By the beginning of the twentieth century, therefore, they would present themselves to the public not as mere residences for the old folks but as modern medical establishments especially equipped to deal with "the problem of old age."

*University of Pennsylvania*  
*Carole Haber*