The ‘most Sacred of Duties’: Maternal Ideals and Discourses of Authority in Victorian Breastfeeding Advice

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ABSTRACT

The maternal role and its associated practices were subject to much scrutiny throughout the Victorian period. Whilst motherhood was seen as the natural destiny of the (respectable) woman, mothers were nonetheless deemed in need of strict guidance on how best to raise their offspring. This was offered in an extensive range of advice and conduct books, via newspapers, journals, and fiction, and from medical practitioners, and covered pregnancy, childbirth, and all aspects of care for babies and young children. This article considers Victorian advice on infant feeding, focusing in particular on the various strategies deployed to encourage mothers to breastfeed. Advice literature for mothers frequently invoked patriarchal – religious, medical, and (pseudo-) scientific – authority, in line with broader Victorian discourses on femininity. Much of this advice was produced by, or drew on, the authority of (male) medical practitioners, whilst comparatively little emphasis was placed on maternal experience as a source of expertise. Set within the wider historical context of shifting trends in infant feeding, this article analyses the various persuasive techniques employed by the authors of advice literature, which ultimately served as an attempt to control women's maternal behaviours and to suppress their own maternal authority.

KEYWORDS: advice books, infant feeding, breastfeeding, motherhood, maternity, medical advice

In October 1864, Queen Victoria wrote to her pregnant daughter, Princess Alice, condemning her decision to breastfeed: ‘a Child can never be as well nursed by a lady of rank and nervous and refined temperament – for the less feeling and the more like an animal the wet-nurse is, the better for the child.’ When Alice disregarded her advice, Victoria reputedly named one of the cows in the royal dairy after her. Victoria’s position was out of step with the majority of Victorian advice books for mothers, which employ a range of arguments to encourage maternal breastfeeding. But Alice’s choice to disregard her mother’s advice also parallels wider discourses on infant feeding, in which the authority of the mother is persistently undermined or obscured. This article considers the relationship between Victorian advice literature on infant feeding and constructions of femininity in relation to questions of authority. As Jay Mechling observes, ‘childrearing manuals are the consequents not of childrearing values but of childrearing manual-writing values.’ Victorian advice literature on infant feeding, therefore,
should be treated with some scepticism in terms of what it tells us about infant-feeding practices. It does, however, reveal much about public discourses around gender and maternity through the methods employed to encourage mothers to engage in particular practices.

The article begins by situating these debates within the broader historical context of Victorian infant-feeding practices, as well as in relation to later critical discussions. There follows an exploration of a range of Victorian advice literature and an examination of the manner in which medical, (pseudo-) scientific, and religious authority is invoked to persuade women to breastfeed, mirroring wider literary and cultural attempts to influence and control women's behaviour and bodies. The focus is predominantly on advice literature published in Britain during the Victorian period. The nineteenth century witnessed a rapid expansion in the production of books, articles, and journals directed specifically at mothers, many of which reflect wider gender ideologies of the time. The works discussed here are notable for their concern with infant-feeding practices. The range of publication dates is deliberately broad. Whilst trends in infant feeding altered over the period, along with scientific understanding of the benefits and dangers of certain practices, there are, as this article shows, persistent patterns in the strategies deployed in Victorian advice literature to encourage mothers to adopt certain practices. These tactics of persuasion frequently include the invocation of various authorities: scientific, medical, religious – but only rarely that of the mother herself. Consequently, they reflect wider trends in public discourse in the nineteenth century – an arena from which women were frequently excluded, due to a perceived lack of expertise, or the implication that it was not appropriate for them to engage (publicly) in debate. Simon Morgan notes that ‘the boundaries between public and private were continually being tested and renegotiated’, and this is reflected in women’s participation in the advice book industry. Nonetheless, women’s voices as a source of (maternal) authority are oppressed even whilst they participate as a consequence of the pervasive authority of the Victorian medical man, whose expertise is frequently invoked in advice literature on breastfeeding. This article, then, whilst contributing to existing scholarship on infant feeding in the nineteenth century, also seeks to develop a critical understanding of the relationship between advice literature, gender ideologies, public discourse, and (patriarchal) authority in Victorian Britain.

Debates around infant feeding form part of broader Victorian ideologies on femininity and maternity, which valorize the figure of the breastfeeding mother and frequently condemn as ‘unnatural’ alternative practices of infant feeding. These ideologies contributed to the Victorian cult of motherhood, reflected in a myriad of literary and cultural forms, but particularly in advice and conduct books aimed specifically at mothers. The figure of the (‘respectable’, upper-
middle-class) mother was valorized throughout the nineteenth century. Anne Taylor’s saccharine poem, ‘My Mother’, first published in 1805 but reprinted throughout the period, encapsulates this image of the breastfeeding mother: ‘Who fed me from her gentle breast / And hush’d me in her arms to rest / And on my cheek sweet kisses prest? / My Mother.’ As Barbara Thaden notes, ‘During the Victorian period, the idealized middle-class mother’s function became providing for the health, happiness, and peace of all family members, while appearing to have no needs of her own.’ These duties were viewed as sacrosanct, not only because they involved the protection and nurturing of that bastion of Victorian respectability, the family, but also because it was perceived as essential for the future health of the nation to ensure the moral and physical health of the child.

Motherhood was viewed as all-encompassing, leaving little or no room for work or activities outside of the home, as Frances Power Cobbe indicates in her 1881 lectures, The Duties of Women:

So immense are the claims on a Mother, physical claims on her bodily and brain vigour, and moral claims on her heart and thoughts, that she cannot, I believe, meet them all, and find any large margin beyond for other cares and work. She serves the community in the very best and highest way it is possible to do, by giving birth to healthy children, whose physical strength has not been defrauded, and to whose moral and mental nurture she can give the whole of her thoughts. This is her Function, Public and Private, at one, – the Profession which she has adopted. No higher can be found.

Whilst this may seem at odds with Cobbe’s role in the campaign for women’s rights, it illustrates the pervasive influence of the Victorian cult of motherhood. This was seen as women’s ‘natural’ destiny, and those who failed to fulfil the maternal role were often treated with suspicion and disdain. But, whilst Victorian gender ideologies glorified maternity, they simultaneously deemed mothers to be in need of careful guidance. This is reflected in the plethora of advice books aimed at the Victorian (middle-class) mother. There is, then, a paradox operating here: on the one hand, women are ‘naturally’ destined for motherhood; on the other hand, idealized motherhood is – at least in part – socially constructed via pervasive literary and cultural discourses.

These discourses take many forms: from Victorian art glorifying the image of the mother, to fictional explorations of good and bad mothering, as well as newspaper columns, journals, and advice books directed at mothers. This was not a new phenomenon: Thaden points out that ‘Philosophers, doctors, political pamphleteers, and authors of moral, religious, and general advice manuals had been barraging women with propaganda urging them to stay home and take care of their children since the beginning of the eighteenth century.’ However, the conditions of the Victorian literary marketplace – developments in printing (and transportation) technologies, increased literacy rates, a rise in the disposable income of the middle classes – led to a rapid rise in the number of advice and conduct books. These cover a wide

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9 Anon., [Anne Taylor], ‘My Mother’, The Evening Fire-Side, 1:20 (27 April 1805), 158.
12 For example, Charles West Cope’s The Young Mother (1845).
14 This, of course, reflected the growth of the book industry more generally in the nineteenth century. The proliferation of advice and conduct literature at this time is indicated by the Adam Matthew collection on Women and Victorian Values, 1837–1910, which comprises ‘Advice Books, Manuals, and Journals for Women’, and runs to over 400 titles. See http://www.ampltd.co.uk/collections_az/listing.aspx?l=W.
range of topics, and were aimed at diverse groups of readers. Samuel Smiles’s *Self-Help* (1859) remains one of the best-known examples, but those directed specifically at women formed a significant share of the marketplace, and are part of wider discourses encouraging a particular construction of middle-class femininity. Some 20 years before *Self-Help*, Smiles authored an advice book on infant care: *Physical Education: or, the Nurture and Management of Children* (1838). Other notable examples of advice books for women include Sarah Stickney Ellis’s quartet of conduct books, which includes *The Mothers of England* (1843), and *Mrs Beeton’s Book of Household Management* (1861). Titles specifically concerned with infant feeding (in whole or in part) include Walter C. Dendy’s *The Book of the Nursery* (1833), Charles Vine’s *Mother and Child* (1868), P. M. Braidwood’s *The Domestic Management of Children* (1874), and Lionel Weatherly’s *The Young Wife’s Own Book* (1882). Many of these works promote an idealized – and often unrealistic – vision of motherhood. As Natalie McKnight observes, they were crucial in helping ‘to establish the “cult of motherhood” which increasingly placed the primary burden of parenting on the mother’,15 whilst at the same time, they were ‘often contradictory and maddening in their inhuman expectations’.16 Thaden notes that ‘The creation of a new type of mother seems to have been the goal of many of the conduct manuals and medical treatises of the eighteenth and nineteenth centuries’, and, echoing Mechling, highlights the tensions between ‘the ideology of motherhood’ and its ‘social practice’.17 However, whilst the practices of motherhood may have differed significantly from those urged by advice books, such works – and especially the discourses around breastfeeding – nonetheless reflect broader Victorian ideologies about motherhood, femininity, and women’s roles.

**1. PRACTICES OF INFANT FEEDING IN VICTORIAN BRITAIN**

For Victorian mothers, there were three options available for feeding young babies: maternal breastfeeding (babies nursed by their own mother), wet-nursing (employing another woman to breastfeed), and so-called ‘artificial’ feeding (spoon-feeding, or, increasingly towards the end of the period, bottle-feeding). Whilst accurate data on infant feeding is difficult to obtain, breastfeeding appears to have been the most common method of infant feeding throughout the period. Valerie Fildes’s extensive work indicates that up until 1800, ‘the great majority of British infants were breastfed at home by their mothers.’18 Industrialization brought about some changes in practices in infant feeding: whilst women in rural areas generally continued to breastfeed, those in industrialized areas – particularly working women – were now more likely to either combine breastfeeding with hand or bottle feeding, or to rely solely on these latter methods.19 However, even in the factory towns of northern England, where significant numbers of women were employed, maternal breastfeeding remained the most prevalent method.20 Wet-nurses were employed primarily by the wealthier classes, although maternal breastfeeding was common amongst this group as well. ‘Artificial’ feeding became more

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popular as the century progressed, amidst new developments in infant feeding: by the 1850s, specialized infant food and new innovative feeding devices were being regularly advertised, and bottle-feeding rates amongst middle-class mothers in both Britain and North America increased. Prior to this, hand-feeding occurred primarily amongst poorer women. Work by critics including Fildes and Virginia Phillips indicates that all three methods were adopted fairly frequently, and in varying degrees across different social groups. Maternal breast-feeding tallied with broader nineteenth-century discourses on femininity: women's ultimate role was to produce and nurture children, and breastfeeding formed an important part of that role. Most Victorian commentators recommended this as the ideal, although maternal mortality meant it wasn’t always possible. There were further barriers to maternal breastfeeding: there was no provision for maternity leave, so working women were prevented from breastfeeding for long portions of the day. Then, as now, some women experienced health problems which affected their ability to breastfeed: producing insufficient milk, or suffering from a disease or disorder which might be transmitted to the baby through nursing (though Victorian medical advice on this subject is not always accurate, and some of it reflects problematic notions of the female body as inherently diseased and contagious).

Despite the wealth of literature promoting breastfeeding, the practice was perceived by some (particularly the upper classes, as Queen Victoria’s comments evidence) as something akin to an animal function, and consequently deemed contrary to notions of genteel femininity. As a result, some women preferred to employ a wet-nurse from the less ‘respectable’ classes. The use of wet-nurses has a long history, and remained relatively common throughout the Victorian period, although developments in ‘artificial’ feeding, and anxieties around the figure of the wet-nurse impacted on their use in the late nineteenth century, and maternal breastfeeding was generally perceived as preferable. In 1834, an article in the London Medical and Surgical Journal declared, ‘there is no wet nurse equal to a healthful mother’. For those disregarding such advice, the process of selecting a wet-nurse could be problematic. It was not only a woman’s physical health which needed to be considered, but her morals and general character as well. This was reinforced by the experience of the Royal Household: in 1842, it was reported that the Prince of Wales’s wet-nurse, Mary Ann Brough, had lost her situation due to her ‘fondness for gin’. 12 years after her dismissal, Brough was charged with the murder of six of her own children, but found not guilty on the grounds of insanity. Inevitably, the press coverage drew attention to her previous role as the royal wet-nurse, and the inference in much of this – if not the explicit assertion – was that the heir to the throne

24 Working women belonged predominantly to the poorer classes. Census data suggests most women did not undertake paid work, although several critics have identified potential problems with the reliability of this data. See Edward Higgs and Amanda Wilkinson, ‘Women, Occupations, and Work in the Victorian Censuses Revisited’, History Workshop Journal, 81 (2016), 17–38.
may have been detrimentally affected by receiving milk from such a character. This case, along with numerous reports on the fate of wet-nurses’ own babies, reinforced negative perceptions of wet-nursing, and possibly contributed to its decline in the late nineteenth century.

As this overview indicates, infant-feeding practices were influenced by class status. The majority of Victorian advice books are aimed at ‘respectable’ mothers: upper- and middle-class married women who had enough disposable income to purchase them. The Mother’s Thorough Resource Book (1860) makes clear the intended audience in addressing the ‘married woman [who] is about to become a mother’.29 Whilst it is inevitable that the majority of readers would be drawn from this group (unmarried mothers were more likely to belong to the poorer classes), the specific address to the ‘married woman’ nonetheless feeds into Victorian ideologies about motherhood: the figure of the idealized mother was not the poor, unmarried woman, but the ‘respectable’ wife of the Victorian gentleman. However, there also existed a body of literature directed at a poorer class of mothers. All Jill L. Matus makes clear, this included – somewhat ironically – tracts distributed by the Women’s Sanitary Movement, an organization of middle-class women who ‘took it upon themselves to pass on . . . knowledge to their “lower” sisters’.30 Thus, whilst middle-class women were being accused of ignorance in relation to childcare, and advised on how to raise their children, some of them were in turn providing guidance to their poorer counterparts – providing a significant insight into the operation of both class and gender hierarchies in Victorian Britain. Contrasting attitudes towards mothers from different social classes are evident in an 1838 article from Chambers’ Edinburgh Journal, although, as is made clear, all mothers are construed as in need of guidance on infant care:

The lower class are excessively ignorant, often superstitious, and are generally far from being cleanly, or attentive to a variety of circumstances affecting the comfort of all children. The higher class of mothers are perhaps not so ignorant – they are at least able to purchase advice; but they are in the main culpably careless in almost every point with regard to the nurturing and bringing up of their family.31

Crucially, the author emphasizes the importance of ‘higher class’ mothers’ ability to ‘purchase advice’, implying the social significance of advice literature for women in providing better outcomes for infants.

Whilst much Victorian literature on breastfeeding is aimed at middle-class women, some commentators bemoan the plight of working women. An article published in The Spectator in 1844 refers to:

The most horrible cruelty which is practised . . . upon mothers who give suck to children, and who are dragged from the cradles of their babes to spend the day in the factory, with their breasts boiling over with milk, and their babes crying at home for that nutrient.32

Maternal Ideals in Breastfeeding Advice

Working women able to afford to place their infants in the household of respectable wet-nurses were considerably better off than those forced to leave their children with unscrupulous baby farmers: a number of high-profile cases of baby farmers killing their charges provoked a public outcry, and parliament sought to regulate the practice via the 1872 Infant Life Protection Act. Hand-fed children were often given ‘pap’ (bread soaked in water or animal milk), but by the 1840s, specialized baby foods were being regularly advertised. In the 1850s, baby bottles were also increasingly common, although these could pose a significant health risk to infants. Commentators repeatedly warn about the dangers of feeding infants ‘by hand’. In Infant Feeding and its Influence on Life (1860), C. H. F. Routh summarizes the differing outcomes for breast and ‘artificial’ feeding (although the accuracy of these statistics is unclear):

Feeding a child on breast milk exclusively . . . produces a good development in 63 per cent., medium development in 23 per cent., and bad development in 14 per cent. . . . As opposed to these results, injudicious feeding by hand produces 10 good, 26 medium, and 64 per cent. bad development.34

Limited understanding of bacteria and lack of sterilization, particularly in the first half of the century, posed a significant risk to hand-fed children. Beeton offers some dangerous advice on the subject of baby bottles: ‘the nipple need never be removed till replaced by a new one, which will hardly be necessary oftener than once a fortnight, though with care one will last for several weeks’.35 The prevalence of this and other similar unhygienic practices undoubtedly contributed to poor outcomes. There were significant advances in the understanding of the relationship between infant-feeding practices and infant mortality in the latter part of the Victorian period, and by the early twentieth century much work was being done to gather information on these with a view to improving infant mortality rates.36

2. INFANT FEEDING IN VICTORIAN ADVICE LITERATURE

Despite gaps in understanding, there remained a general consensus that maternal breastfeeding was preferable to other methods, and most Victorian advice literature reflected this. The need for a wet-nurse in some circumstances is often recognized, though caution is urged in the process of selection. The majority of advice books urge against artificial feeding. The Mother’s Thorough Resource Book, for example, notes that ‘it should be observed that the custom of giving artificial food where the mother has a bountiful supply, is highly improper and wholly unnecessary, and it is in cases of urgent necessity only that artificial feeding is to be regarded as a substitute or auxiliary’.37

Whilst advice books generally implore women to breastfeed, many also highlight the potential dangers of breastfeeding to both mother and child. These warnings reinforce the

37 Anon., The Mother’s Thorough Resource Book, p. 42.
perceived need for such advice books, and perpetuate the idea that women require ongoing help in order to avoid harming both themselves and their infants. Several warn of the dangers of overfeeding, citing this as a significant cause of infant mortality.\textsuperscript{38} The Mother's Thorough Resource Book asserts that 'in most cases, children are suckled too often, thereby counteracting the benefit intended for the infant, and unnecessarily weakening the mother'.\textsuperscript{39} The author points out the potential harm inadvertently caused by mothers attempting to soothe their children with the breast, again subtly emphasizing the need for advice:

A habit exists among mothers of giving the child the breast every time it cries, for the purpose of quieting it; although in many cases the expression of distress may arise from an already overloaded stomach, which the mother thoughtlessly attempts to ease, just as a person might strive to put out a fire by adding fuel to it.\textsuperscript{40}

Others note the risks to mothers' mental health, including J. T. Conquest's Letters to a Mother (1858), which observes that 'mental depression . . . is peculiar to certain women . . . during suckling'.\textsuperscript{41} In Hints to Mothers (1837), Thomas Bull advises against 'mother[s] of a highly susceptible nervous temperament' nursing their children: 'Her milk will be totally unfit for its nourishment: at one time it will be deficient in quantity, – at another, so depraved in its quality, that serious disturbance to the infant's health will ensue.'\textsuperscript{42} Margaret Jane Moore, in A Grandmother's Advice to Young Mothers (1835), writes that 'A woman should never suckle her child immediately after any violent agitation of mind', and reinforces this point with the example of 'a child in perfect health attacked suddenly by convulsions, in consequence of the mother having imprudently put it to her breast just after seeing a person fall down dead.'\textsuperscript{43} Such reports gave credence to the idea that women's 'proper' place was within the (safe) confines of the home – an idea increasingly prevalent at the time Moore was writing.\textsuperscript{44}

Continuous feeding at night was discouraged: Beeton describes the consequences of what she deems a 'most injurious practice', which threatens the health of both mother and child:

[The mother] wakes languid and unrefreshed from her sleep, with febrile symptoms and hectic flushes, caused by her baby vampire, who, while dragging from her, her health and strength, has excited in itself a set of symptoms directly opposite, but fraught with the same injurious consequences – “functional derangement.”\textsuperscript{45}

The Mother's Thorough Resource Book also points to the dangers to mother and baby of 'allowing the child to have the nipple constantly in its mouth during the night',\textsuperscript{46} and goes on to


\textsuperscript{39} Anon., The Mother's Thorough Resource Book, p. 40.

\textsuperscript{40} Anon., The Mother's Thorough Resource Book, pp. 40–41.


\textsuperscript{43} M. J., Countess Dowager Mountcashell [Margaret Jane Moore], A Grandmother's Advice to Young Mothers on the Physical Education of Children (London: Baldwin and Cradock, 1835), p. 20.

\textsuperscript{44} See Leonore Davidoff and Catherine Hall, Family Fortunes: Men and Women of the English Middle Class (1987; Abingdon: Routledge, 2002).

\textsuperscript{45} Beeton, The Management of Children, p. 10.

\textsuperscript{46} Anon., The Mother's Thorough Resource Book, p. 25.
suggest the potential nefarious effects of exhaustion on a mother’s milk: ‘the mother’s health . . . through sleepless nights, would soon become deranged, and the infant would also suffer from the deleterious influence this would have upon the milk’.47

Commentators also warn about the potential contaminative effects of breastfeeding. Routh asserts that ‘A diseased woman will produce diseased milk’.48 In an article entitled ‘On Consumption’ (1840), the author suggests the danger to the infant not only from the nursing mother suffering with tuberculosis, but also from those mothers with a hereditary tendency towards the disease: ‘when the mother is a member of a family predisposed to tuberculous disease, even when she herself is apparently healthy, her children should be suckled by strangers’.49 Whilst there is an increased risk of the transmission of some diseases via breastfeeding, there persisted throughout the Victorian period the notion that not only physical, but also mental illness – and even questionable morals – might be transferred to the infant during nursing. This idea is particularly evident in advice on the selection of a suitable wet-nurse. The Mother’s Thorough Resource Book urges its readers to consider carefully the temperament of the potential wet-nurse, noting, ‘the state of the mind is well known to exercise a very powerful influence on the quantity and the quality of the milk’.50 The idea that both the personality and state of mind of the nursing mother (or wet-nurse) can in some way be transmitted to the suckling child via the breastmilk has much earlier origins,51 but persisted through the nineteenth century. Robert Whytehead highlights a perceived danger in The Claims of Christian Philanthropy (1839), in regard to the transmission of ‘vice’: ‘there is in every fallen child of Adam a propensity to evil in his very nature, leading him to receive with readiness the taints of immorality, and to suck in the poison of vice . . . with his mother’s milk’.52 The notion of breastmilk as potentially harmful coincides with broader ideas about the female body as dangerous or polluted. This is reinforced in an article on breastfeeding from the early nineteenth century, which warns against menstruating women engaging in the practice: ‘The occurrence of menstrual evacuation, during lactation, is almost invariably attended with diminution and deterioration of the milk . . . When a child . . . is put to the breast of a nurse who menstruates, it rarely fails to experience derangements of the stomach and bowels’.53 Hence, whilst women were encouraged to nurse their own children, this advice came with various caveats, which serve to reinforce the notion of the need for advice to guide mothers and encourage particular maternal behaviours.

3. PERSUASIVE TECHNIQUES: DISCOURSES OF AUTHORITY IN VICTORIAN ADVICE LITERATURE

Victorian infant-feeding advice was thus rooted in wider discourses around the female body, the maternal role, and ideologies of femininity. These discourses frequently construct the

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47 Anon., The Mother’s Thorough Resource Book, p. 48.
50 Anon., The Mother’s Thorough Resource Book, p. 52.
51 One notable earlier example of this is Michelangelo, who was allegedly nursed by the daughter and wife of stonemasons. See William E. Wallace, ‘Michelangelo’s Wet Nurse’, Arion, 17 (2009), 511–15.
53 Anon., ‘On the Nourishment of Infants’, Healthside, vol. 8 (1810), p. 201. Moore directly challenges this idea, arguing that the return of the ‘periodical evacuation’ in breastfeeding women is ‘neither advantageous to the child, according to the prejudices of some; nor injurious, according to the prejudices of others’ (A Grandmother’s Advice to Young Mothers, p. 17).
female body as potentially threatening, dangerous, or as inherently ill; women as physically and mentally weak, as well as ignorant of medical science; and the female role as distinct, and encompassing various (maternal) duties. 54 Victorian infant-feeding advice employs various persuasive techniques associated with these discourses to persuade mothers to engage in particular practices: highlighting their perceived ignorance, emphasizing the authority of the medical man, and imploring them to consider their maternal duties – often in relation to wider national, social, and religious duties. 55 Matus notes that ‘the female body, especially, because it was seen primarily as a reproductive body, demanded special attention and regulation’, and consequently, ‘The unarticulated assumption that control of the body and its environment is important because the body is open, permeable and subject to change, underlies advice about . . . breastfeeding’. 56 Infant mortality rates in the nineteenth century were high, 57 with significant numbers of deaths caused by avoidable practices, including ‘overlaying’ (sleeping with the baby in the same bed), alcohol and drug administration, and feeding methods. Many advice books reference mortality rates, although these were highest amongst poorer socio-economic groups who would have had limited access to these texts. Several works appear to exaggerate the number of infant deaths 58 – whether through error, ignorance, or as a result of other motives, such as to reinforce the idea that women stood in significant need of advice, is unclear. Certainly, many advice books perpetuate the notion of women’s need for guidance by drawing an association between infant mortality, and (as Smiles terms it), women’s ‘lamentable ignorance’ on the subject of childcare. 59 Emphasizing the importance of breastfeeding, Smiles suggests that amongst infants who are not breastfed by their mothers, ‘scarcely one in seven survives the first month’, although the source for this figure is unclear. 60

The raising of healthy children was perceived as essential for the future of the English nation – particularly, as the century wore on, within increasing debates around degeneration. The mother’s role was therefore paramount, and appropriate guidance necessary. Consequently, some authors of advice books frame their work in nationalist or patriotic terms. In an early example, Mrs Frederick Pedley, in Infant Nursing and the Management of Young Children (1866), declares: ‘from one-third to one-half of our infant population is consigned to an untimely grave . . . To remove this stain from our national record should be the endeavour of English mothers’. 61 Smiles also hints at the relationship between the health of the nation and the role

54 Sandra M. Gilbert and Susan Gubar note that ‘nineteenth-century culture seems to have actually admonished women to be ill’ (The Madwoman in the Attic: The Woman Writer and the Nineteenth-Century Literary Imagination (New Haven, CT: Yale University Press, 1979), p. 54). Menstruation, pregnancy, lactation, and menopause were all frequently treated as illnesses, as Barbara Ehrenreich and Deirdre English’s anthology of advice literature, For Her Own Good: 150 Years of the Experts’ Advice to Women (New York, NY: Anchor Press, 1978), evidences.

55 The strategies employed in Victorian advice literature are also evident in early twentieth-century advice, as Jane Lewis observes: ‘One infant feeding manual-writer asserted that the woman who did not breastfeed was not worthy of the name of mother. . . . Middle-class women, who often left feeding to a nurse, were especially condemned for their “selfishness” and “unwillingness” to breastfeed’. Jane Lewis, The Politics of Motherhood: Child and Maternal Welfare in England, 1900–1939 (London: Croom Helm, 1980), p. 69.

56 Matus, Unstable Bodies, p. 47.


58 An 1838 article states that ‘Of all the children born, about the one-half die before they attain five years of age’. Anon., ‘Nursing of Children’, p. 415.

59 Samuel Smiles, Physical Education: or, the Nurture and management of Children (Edinburgh: Oliver and Boyd, 1838), p. 7.

60 Smiles, Physical Education, p. 32.

61 Pedley, Infant Nursing and the Management of Young Children, p. 7.
of the mother: ‘the first and foremost preceptor of man [is] his mother and nurse. She gives
the first bend to the twig; by care nourishing and training it into health and strength, or by
neglect allowing it to dwindle into disease or deformity’.62 He continues, ‘let it be kept in
mind that the infants of the present generation will be the fathers and mothers of a future
race’.63 This notion of motherhood as a patriotic duty feeds into wider Victorian gender de-
bates: similar arguments were deployed to discourage women from entering education and
the workplace, as in Edward Clarke’s Sex in Education (1873), which suggests female educa-
tion came at the cost of their reproductive abilities.64

Many advice books invoke notions of maternal duty in their attempts to persuade women
to breastfeed. Moore refers to breastfeeding as the ‘first maternal duty’.65 Dendy illustrates
the extent to which breastfeeding was bound up with wider expectations about the maternal role,
as well as Victorian constructions of the idealized mother: ‘The milk is the birthright of the
infant. As instinct impels the infant to the mother’s breast, and has inspired that breast with
maternal love, this beautiful link in the chain of nature should never wantonly be snapped
asunder’.66 Weatherly’s Young Wife’s Own Book is another case in point: ‘[E]very mother
should consider it her absolute duty, unless her health is delicate, and her medical man’s
opinion is against her so doing, to suckle her infant for at least six months’.67 By constructing
breastfeeding as an essential maternal ‘duty’, these advice books both participate in and con-
firm broader Victorian ideologies of femininity, through which (middle-class) women’s lives
and behaviours were framed and constrained.

Whilst praising those mothers who fulfil this duty, women who refuse to breastfeed are
frequently constructed as bad mothers, as selfish and ‘unnatural’ – a term persistently used
throughout the nineteenth century to condemn women who refused to conform to social
norms and expectations. An article published in The New Monthly Magazine in 1840 con-
demns the practice of feeding infants by hand in these terms:

under no circumstances . . . can there be any attempt so unnatural as that of rearing in-
fants by the spoon, or the feeding-pot. Nature has pointed out the proper nutriment
for the young of all animals, and has fitted it for easy assimilation, by preparing it in the
system of the parent . . . By man only, who prides himself on his reason, do we find this
law of Nature perverted.68

An article from The Lancet in 1850 condemns the practice of hiring wet-nurses as ‘unnat-
ural’, and argues that ‘the true dictates of nature . . . enjoin each mother to suckle her own
offspring’.69 Weatherly, noting a trend in the late nineteenth century for alternative means of
infant feeding, condemns this as ‘fashionable heartlessness’,70 and suggests women who refuse
to nurse their own children ‘can have no motherly love’ for them.71 Moore employs a variety

62 Smiles, Physical Education, p. 11.
64 Edward Clarke, Sex in Education, or A Fair Chance for Girls (Boston, MA: James R. Osgood & Co).
65 Moore, A Grandmother’s Advice to Young Mothers, p. 12.
67 Weatherly, The Young Wife’s Own Book, p. 118.
68 Anon., ‘On Consumption’, pp. 507–8, my emphasis.
70 Weatherly, The Young Wife’s Own Book, p. 119.
71 Weatherly, The Young Wife’s Own Book, p. 79.
of devices to encourage maternal breastfeeding, amongst them an appeal to mothers’ vanity: having (inaccurately) noted that ‘women are less exposed to death during the time of pregnancy and of nursing, than at any other period of their lives’, she observes that ‘the latter occupation is particularly favourable to beauty’, and liable to ‘clear the complexion and brighten the countenance’.

She continues: ‘A woman who cannot submit to a little trouble, which lasts but a short time, for the benefit of her child, does not deserve to have a child.’

Many advice books invoke medical authority in their attempts to persuade women to breastfeed. Matus argues that ‘Medical regulation and intervention depend on representations of the body as fragile and remarkably subject to deviation from good health’, and this is clearly reflected in the discourses around breastfeeding. While some advice demonstrates an increasing understanding of safe feeding practices as the century progresses, much of it has no scientific basis, despite claims to the contrary. Feeding on demand was strongly discouraged, and overfeeding frequently cited as a cause of death and disease. The significance of colostrum was not always recognized, so several texts recommend the use of animal’s milk, sometimes with sugar added, prior to a mother’s milk coming in, putting new-born infants at risk from potentially contaminated food and feeding equipment. A significant number of advice books are authored by medical men, who advertise their expertise on the title page. These include *Hints to Mothers for the Management of Health* by Thomas Bull M.D.; *Physical Education: or, the Nurture and management of Children* by Samuel Smiles, Surgeon; T. Herbert Barker M.D.’s *On the Hygienic Management of Infants and Children* (1859); and *Infant Feeding and its Influence on Life* by C. H. F. Routh, M.D. These function as claims to authority, intended to persuade mothers to follow their advice, and implicitly reinforcing the notion of women’s ignorance, excluded as they were from medical training.

Barker emphasizes the need for women to follow medical advice, whilst simultaneously hinting at the potential dangers posed by nurses without adequate medical knowledge: ‘the error of a nurse may implant in the child the evil that shall, in after years, defy the skill of the medical man, and end either in a premature grave, or in slow, lingering years of infirmity and misery.’ He subsequently suggests that many ‘nurses are found too ready to suggest to the mother that her strength is inadequate to the duty of suckling her infant’, but notes that ‘The experienced medical man will easily put aside imaginary difficulties.’ Such discourses reinforce the notion of medical knowledge as a specifically male domain, and contrast the figure of the (male) doctor, invested with medical authority, with that of the ignorant (female) nurse. Barker and others valorize the role of the medical man: ‘When [a child’s] natural guardians are ignorant of their duties, how important the task of the medical adviser, who, by one true suggestion, may prevent the errors that would blight the happiness of a life.’

Noting the vulnerability of the infant, and the potential long-term effects of its mistreatment, he continues: ‘How strange, then, that we should confide it to the care of those who are not

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72 Moore, *A Grandmother’s Advice to Young Mothers*, p. 29.
74 Matus, *Unstable Bodies*, p. 47.
75 See, for example, T. Herbert Barker, *On the Hygienic Management of Infants and Children* (London: John Churchill, 1859), p. 16. In fact, as Filides notes, the benefits of colostrum were identified by some writers from at least the late seventeenth century (*Breasts, Bottles, and Babies*, p. 88), but there remained no widespread recognition of this in the nineteenth century.
only ignorant of, but have never even attempted to study, the laws of its constitution, – in other words, the rudiments of physiology. Whilst this appears to criticize ignorant mothers and nurses, Barker qualifies this by calling for the teaching of physiology in schools, for both girls and boys – a radical suggestion at a time when women were prevented from studying medicine in part because of issues of decorum. Barker, then, whilst perpetuating the idea that mothers are ignorant and in need of medical advice, simultaneously looks to redress this issue via the education of women.

Several authors draw on their apparent medical knowledge to support their claims regarding the treatment of babies. Smiles, declaring that ‘The only food the infant needs is its mother’s milk’, evidences this claim by noting that ‘the mouth is adapted for sucking alone, the stomach digesting effectually milk alone, and the whole apparatus for acting efficiently on this fluid’. Smiles goes on to provide a precise description of the stomach and the manner in which it digests milk. This level of detail reinforces the impression of medical expertise and authority. Elsewhere, Smiles invokes other medical authorities to support his arguments – here on the subject of overfeeding: ‘Dr J Clarke strongly insists on over-feeding being a most fruitful cause of diseases from teething, as well of the brain as of the organs of breathing; and in this opinion he is supported by Drs Copland, Combe, and many other eminent medical men’. This tactic pits the voices of an array of medical men against that of the Victorian mother, effectively silencing her by reinforcing the idea of her ignorance, and urging her to abide by the instructions of these men of science, rather than to follow her own instincts. Smiles also encourages his reader to ensure they consult a medical attendant with regard to health issues arising for both mother and child: referencing some women’s inability to nurse their babies, he writes ‘We do not . . . define the precise cases when nursing on the part of the mother ought to be discontinued, as this is the province of the medical attendant to determine and advise’. The mother, Smiles implies, is not fit to decide when to cease breastfeeding: this, like so much else, is a decision for those with medical expertise. Maternal experience and knowledge is thus again denigrated, and (masculine) medical advice privileged.

Advice books on infant feeding also employ religious discourse in their arguments. The author of an 1840 article invokes the writings of St Jerome in his discussion on the selection of a wet-nurse:

In the choice of the nurse for the infant of a consumptive mother, we cannot do better than follow the advice of St. Jerome, who thus expresses himself: "If the mother be not fit or well able to nurse, I would then advise such mothers that they make choice of a sound woman, of good complexion, honest, free from bodily disease."

Vine writes: ‘It was beneficently ordered by the Creator that the child for a certain period after birth should be dependent on the maternal nourishment for its support’, arguing that ‘it is the bounden duty of every woman to nurse her own child’. Similarly, The Mother’s Thorough

79 Barker, On the Hygienic Management, p. x.
80 Barker, On the Hygienic Management, p. x.
81 Smiles, Physical Education, p. 20.
82 Smiles, Physical Education, p. 32.
83 Smiles, Physical Education, p. 50.
84 Smiles, Physical Education, p. 32.
Maternal Ideals in Breastfeeding Advice

Resource Book refers to maternal breastfeeding as the ‘most sacred of duties’. The sentiment is echoed in an article on wet-nursing which appeared in the Medical Times and Gazette in 1860: ‘Mothers, who are able to do so, ought to suckle their own children. But whose is the fault that so many mothers now-a-days neglect to perform this duty, of which every instinct, and natural impulse, and moral and religious duty enjoin the performance?’ This type of discourse was not new: Alexandra Shepard notes that in the eighteenth century, ‘Mothers were admonished . . . with biblical precedent, establishing their divinely ordained duty to suckle their infants’. In the Victorian period, these tactics become associated with the cult of motherhood: there remained a close association between the figure of the idealized mother and Christian beliefs, with the maternal ideal located in the image of the Madonna. A (respectable) mother’s duties involved the religious and moral education of her children. In light of the wider religious context, it is unsurprising that advice books invoke Christian beliefs in their arguments to promote breastfeeding, but, as with the various claims to medical expertise, this marks a further intervention of patriarchal authority in the process of Victorian mothering.

4. MATERNAL VOICES: MOTHERS ADVISING MOTHERS

The various persuasive techniques employed by multiple Victorian advice books to persuade mothers to breastfeed work to undermine the notion of maternal authority, and thus to effectively silence mother’s voices. Even female-authored works frequently emphasize those patriarchal sources of authority (religion, medical science) over and above maternal expertise. In contrast to this trend is Moore’s A Grandmother’s Advice to Young Mothers. As the title suggests, Moore – a mother of eight – claims authority based on her own maternal experiences. Moore challenges male medical authority in the preface to her book, contrasting this with her direct experience of breastfeeding (referring to herself in the third person): ‘Having suckled many children, she has had means of obtaining, from the first source, a species of knowledge which professional men can derive only from the information of women.’ Moore reinforces this by questioning the widespread notion that the experience of mothers and nurses is inferior to the knowledge of medical men:

Even where a physician, by being the father of a numerous offspring, may appear to have had the best means of studying those maladies incident to the early years of man, it is impossible he should ever have such experience of the momentary changes to which the infant frame is liable, as may be acquired by an observing mother or an attentive nurse[.] Moore notes the dangers posed by ignorance, and the need for mothers to seek – and follow – professional medical advice. Like Barker, though, she advocates the education of women in order to provide them with the necessary medical knowledge for caring for young children. In addition, she provides advice

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87 Anon., The Mother’s Thorough Resource Book, p. 50.
88 Anon., ‘Wet Nurses’, Medical Times and Gazette (28 April 1860), 424.
90 Moore, A Grandmother’s Advice to Young Mothers, p. iii.
91 Moore, A Grandmother’s Advice to Young Mothers, p. v.
92 Moore, A Grandmother’s Advice to Young Mothers, p. vi.
for mothers on the selection of an appropriate medical attendant, in language which echoes that used by those discussing the choice of wet-nurse, and which thus appears to encourage the notion of mothers as empowered. Moore also invokes religious authority in her work, referring to maternal breastfeeding as ‘a duty . . . which is pointed out by the Creator of all beings’. She advises against women continuing to breastfeed during pregnancy, declaring that ‘no woman can be strong enough to afford nourishment to both the child in her womb and that at her breast, without injuring herself’ – an argument which reinforces ideas about women’s inherent physical frailty. Thus, whilst Moore’s work is unusual in recognizing the authority of the mother, it nonetheless simultaneously subscribes to those other well-established modes of authority which were frequently invoked to persuade mothers to breastfeed.

Other female-authored works align with those written by medical men, and frequently reference (male) medical authority to support their claims. Pedley warns mothers against ‘consulting nurses and kind-hearted mothers, who can give no satisfactory reason for the advice they offer’, and implores them instead to ‘consult conscientious medical men’. This represents an explicit dismissal of maternal experience as a relevant source of authority for nursing mothers. For the average Victorian woman, typically with limited education, challenging proclaimed medical authority and disregarding this advice would have appeared unthinkable: women, the vast majority lacking any kind of medical knowledge themselves, were in no position to counter such views. The Mother’s Thorough Resource Book encourages pregnant women to engage a doctor ‘not only on account of its convenience, but for the feeling of security which it imparts to the female who requires his services’, thus framing the need for (male) medical intervention around the idea of reassurance rather than expertise. Advising on childbirth, the author writes: ‘the mere circumstance of his [the medical man] being at hand consoles the patient, and inspires her with confidence’. Such assertions reinforce the tacit idea that women lack the capability and the expertise to make their own decisions regarding the care of their babies. Women’s lack of familiarity with physiology, biology, and anatomy ensured they were not in a position to challenge either the (medical) claims of advice literature, or those of their medical attendants.

Whilst much female-authored advice literature invokes patriarchal authority, in The Way They Should Go (1896), Mrs (Jane Ellen) Panton, a prolific author of advice literature on a range of topics, deviates significantly from established cultural narratives around infant feeding. Panton’s work appeared concurrently with the New Woman debates, and it is significant that her challenge to prevailing ideologies around infant feeding appears at this point: by contrast, earlier works – particularly those published in the early to mid-Victorian period – coincide with a broader trend in moralizing literature. Panton suggests there is ‘no greater misery than nursing a child’, and declares, ‘Let no mother condemn herself to be a common or ordinary “cow” unless she has a real desire to nurse’. She argues, ‘a child is far easier got into

93 Moore, A Grandmother’s Advice to Young Mothers, p. viii.
94 Moore, A Grandmother’s Advice to Young Mothers, p. 29.
95 Moore, A Grandmother’s Advice to Young Mothers, p. 17.
96 Pedley, Infant Nursing, p. 58.
98 Anon., The Mother’s Thorough Resource Book, p. 15.
99 Panton’s works include From Kitchen to Garrett: Hints for Young Householders (1890) and A Gentlewoman’s Home: The Whole Art of Building, Furnishing, and Beautifying the Home (1896).
100 See Davidoff and Hall, Family Fortunes.
good habits if it is brought up from its birth by the bottle, than if it be nursed; and though all young mothers are taught to consider themselves inhuman wretches if they decline to nurse their babies, I say they are nothing of the kind.⁹² Countering the mass of advice literature which promotes maternal breastfeeding, she writes:

It is nonsense to say it is bad for the child, it is nothing of the sort. Nurses and doctors urge the mother to “nurse” because it saves trouble, and because it is “natural.” It may have been so in a state of nature; but we don’t live in that time, and we must adapt our doings to the age in which we are born and during which we have to live.⁹³

Significantly, Panton emphasizes her own maternal experience and thus claims authority on the subject of bottle feeding:

I am so absolutely sure, too, that the child does not suffer, and, indeed, is all the better for being brought up by hand in these days of ours, that I speak very strongly on a subject on which I feel strongly. For naturally no one save she who has gone through it all can comprehend the misery that one’s early married days can be, if one acts on theory, and refuses to benefit by others’ experience. I should have been twice as strong, and four times as happy now, if I had not had theories of my own on the subject, and if I had not tried to do what I considered my duty; and, therefore, I at any rate know what I am talking about, so I most strongly advise any young mother to begin as she means to go on, and to introduce the baby to the bottle as soon as it shows any inclination for food at all.

Inevitably, Panton’s views attracted criticism. The Spectator responded directly to her ‘strong opinion against mothers nursing their own children’: ‘We can only say that the life which produces this state of feeling is unnatural’ ¹⁰⁴ – a statement which serves to undermine her authority to speak by constructing her as deviating from the Victorian maternal ideal, and, by implication, condemns those who follow her advice. There is a further implication here as well - that maternal experience is only valid when it tallies with wider (patriarchal) discourses: deviation from those discourses invalidates the authority of the mother.

The response to Panton’s work is indicative of the extent to which Victorian breastfeeding advice aligns with prevailing discourses on femininity. Much of this advice represents a cultural attempt to control women’s bodies and behaviour, and ensure they conform to expectations around the maternal role. Advice which deviated from this narrative, such as Panton’s, provoked a backlash attempting to re-establish culturally inscribed maternal ideologies. In her study Hard and Unreal Advice: Social Science and the Victorian Poverty Experts (2008), Kathleen Callanan Martin details how Victorian social scientific examinations of poverty by authors such as Charles Booth and Thomas R. Malthus were at once not always scientifically rigorous and influenced by various competing agendas, including social Darwinism and religion. Information was used, manipulated, and in some cases invented to serve particular agendas. These trends, and the authority bestowed on the Victorian men of (pseudo) science, is also reflected in Victorian advice literature on infant feeding, which is not required to provide extensive evidence of its accuracy in terms of the claims it makes, but which bestows

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⁹² Panton, The Way They Should Go, p. 43.
¹⁰⁴ Anon., ‘The Way They Should Go by J. E. Panton,’ The Spectator (27 March 1897), 448.
those claims with a degree of authority which renders them difficult to challenge – particularly for the Victorian mother, who is largely denied a voice in public discourses unless that voice invokes or echoes the patriarchal authorities she might wish to challenge. Women advice writers’ references to patriarchal sources of authority (science, medicine, religion) can be read alternatively as an endorsement of those authorities or as an acknowledgement of their own lack of (maternal) authority within the public space of the literary marketplace. In order to be heard, women (mothers) channel their arguments through those figures within Victorian society who embody authority. Consequently, as this article demonstrates, Victorian advice literature promotes an idealized maternal image, both encouraging women to conform to this image, and condemning those who deviate from it.

DISCLOSURE STATEMENT

No potential conflict of interest was reported by the author.