NOT A “SENTIMENTAL CHARITY”: A HISTORY OF THE
INDIANAPOLIS FLOWER MISSION, 1876-1993

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Chapter One: “Genteel,” “Frivolous,” and “Decidedly Less Vital”:

Flower Missions in Scholarly Literature

Louisa May Alcott, author of the classic book *Little Women*, published a short story about a poor blind girl named Lizzie Davis in 1886. Since Lizzie’s father had died and her mother worked constantly, Lizzie stayed home alone to care for her baby brother Billy. When Lizzie is nine years old, Billy dies suddenly and Lizzie feels she no longer has a purpose in life and wishes only to die to be with her brother in heaven. The narrator muses, “I think there were few sadder sights in that great city than this innocent prisoner waiting so patiently to be set free. Would it be by the gentle angel of death, or one of the human angels who keep these little sparrows from falling to the ground?”¹

Just as it seems that Lizzie’s situation cannot get worse, her salvation comes in the form of a kind lady who brings her flowers. As Lizzie is trying to sing herself to sleep on a stifling August day in the dirty and smelly slums, she suddenly senses the lovely fragrance of flowers and hears a kind voice speaking to her. Initially Lizzie thinks she has gone to heaven, but Miss Grace, a visitor from the local flower mission, says she is “a friend who carries flowers to little children who can not go and get them” and she found Lizzie by following the sound of Lizzie’s song. “Then, while the new friend fanned her, [Lizzie] lay luxuriating in her roses, and listening to the sweet story of the Flower Mission which, like many other pleasant things, she knew nothing of in her prison.”²

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² Ibid., 13-14.
Miss Grace tells Lizzie about her goal of creating a beautiful school where the blind can learn to be “useful and independent and happy.” Hearing about this school gives Lizzie hope for the future. Miss Grace returns another day with another blind girl, Minna. As Lizzie and Minna talk, “Miss Grace sat by enjoying the happiness of those who do not forget the poor, but seek them out to save and bless.” Miss Grace and the flower mission find a better job for Lizzie’s mother and a better place for the family to live. Eventually, Miss Grace takes Lizzie to the school for the blind where Lizzie develops her singing ability. The story culminates at the school’s autumn concert fundraiser where Lizzie’s performance helps raise a significant amount of money for the school and enables her to enjoy independence and the ability to help others as Miss Grace helped her.

Though fictional, Louisa May Alcott’s story gives us two impressions about the work of flower missions in the late nineteenth- and early twentieth-century United States. The first impression is that flower missions were as sentimental and unrealistic as Alcott’s story. Though few would dispute that helping the blind and poor is a worthwhile endeavor, Alcott’s story is almost maudlin. Modern readers find the story too simple and Lizzie’s deliverance from the brink of death too easy to be believable. Alcott’s sentimental story of the flower mission is typical of contemporary accounts of the organizations and may explain why historians have failed to give flower missions the credit they deserve.

Though Alcott is overly sentimental, *The Blind Lark* does offer a second important idea about flower missions. They did provide substantive help to the poor.

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1 Ibid., 14-15.
2 Ibid., 15.
3 Ibid., 16-19.
Miss Grace helps the Davis family with practical problems like housing, job placement, and education. Similarly, in real life, flower missions did not simply bring blossoms to the sick, but sought to provide their clients with necessities such as food, clothing, and healthcare as well as Christian encouragement. Historians have allowed the sentimentality surrounding flower missions to cloud the recognition of the practical services the groups provided. In an effort to correct this oversight, this thesis will study the Indianapolis Flower Mission from its inception in 1876 through the completion of its largest project in the 1930s and demonstrate that though the group started by delivering flowers to the sick, it also worked to provide necessary services for the needy of Indianapolis.

Alcott’s is not the only fictional representation of flower missions in late nineteenth-century magazines; many other stories mention young women working to deliver flowers to inner city slums. But magazines also carried prose accounts of actual flower missions. These accounts say that flower missions, sometimes called flower charities, existed throughout the United States, Great Britain, Canada, and even New Zealand in the late nineteenth and early twentieth centuries. The flower missions were generally organized by middle- to upper-class women who delivered flowers to the poor and sick of the cities. Volunteers gathered flowers from their own gardens or received donations from country homes, assembled the flowers into bouquets, and delivered them to hospitals and other medical institutions and sometimes to jails or prisons. Volunteers

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7 Flower missions were almost universally female organizations, but the Ladies’ Flower Mission in Chicago, IL did publish a notice in the local newspaper asking “young gentlemen” to join the organization. I have no record of the response to their invitation (*Inter Ocean*, Chicago, IL, June 27, 1878).
also occasionally visited poor homes directly, as Alcott’s story describes. Due to the nature of their work, many flower missions operated only during the summer when flowers were available.

Sources generally agree that flower missions began in the United States around the late 1860s, but specific accounts vary. Histories of the Indianapolis Flower Mission and most U.S. sources claim a Miss Helen W. Tinkham of Boston first conceived of the idea for a flower mission while she walked through a particularly “bare and ugly” part of the city and some children asked her for one of her flowers. The impact a single blossom had on the lives of those with little exposure to the beauty of nature so impressed her that she decided to start a flower mission in Boston. The New York Tribune published a similar story that was reprinted in newspapers around the United States and says the first flower mission opened in Boston in 1868. One author, writing about flower missions in England, says the idea began in the early 1870s in England, though she acknowledges that flower missions may have existed earlier in the United States. Sources agree though that the first flower mission developed out of a desire to share the beauty of nature with those who did not have access to it, whether as a result of poverty or sickness.

Flower missions came in various overlapping models. Some of the earliest flower missions were Bible Flower Missions and each bouquet had a Scripture verse attached to

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While not all flower missions included Scripture in their offerings, they all initially sought to spread the Christian Gospel by delivering flowers. Some missions carried the names “Fruit and Flower” or “Flower and Ice” missions, depending on the goods they distributed. The Women’s Christian Temperance Union had flower missions at the national level and in some of its local and regional branches. Miss Jeanie Casseday, who was an invalid herself for many years, first persuaded WCTU President Frances Willard to create the National Flower Mission to deliver flowers to the poor, sick, and those in prison. Every year the WCTU observed “Flower Mission Prison Day” on Casseday’s birthday by delivering bouquets with Scripture texts to prisons. Flower missions such as the one in San Francisco, California, also sometimes associated with the Young Women’s Christian Association. Some churches had their own flower missions that, in addition to visiting hospitals and other institutions, also provided flowers to decorate the church on Sundays. Still other flower missions, like the one in Indianapolis, were independent organizations with loose connections to local churches.

Though most flower missions started by giving flowers to the poor, many provided other services as well. Most common was delivering ice, fruit, or jellies. Many

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13 The St. Louis Flower Mission also gave ice to the poor and sometimes had the name “Flower and Ice Mission” (“The Flower Mission Seven Hundred and Forty-two Bouquets Distributed in the Hospitals Yesterday—How the Work is Progressing,” St. Louis Globe-Democrat, July 15, 1880).
17 Belle Thomas, The First One Hundred Years: A History of the First Presbyterian Church, Muncie, Indiana (Muncie, IN: Scott Printing, 1938), 116-117.
flower missions brought reading material to the sick as well. Some flower missions delivered Thanksgiving or Christmas meals and gifts to the poor. Some organizations distributed clothing and bedding. Others provided nursing services and worked to eradicate tuberculosis or other contagious diseases. Indianapolis boasted one of the most active and long-lasting flower missions, participating in all these activities at various times.

The Indianapolis Flower Mission’s early years resemble those of many other flower missions around the nation. In 1876 Alice Wright, the daughter of a prominent railroad manager, invited six of her friends to her home and asked them to help her start a flower mission to deliver flowers to the City Hospital. The Indianapolis Flower Mission initially met every two weeks to deliver flowers to the hospital and poor neighborhoods and eventually visited jails as well. Later, like many other flower missions, Wright and her friends distributed reading material and fresh fruits and jellies to the sick. As the Indianapolis Flower Mission expanded its activity, it needed money to operate and thus in the late 1870s the members started putting on various fundraisers. The Annual Flower Mission Ball eventually became one of the city’s most popular social events. The Flower Mission also held an annual fair fundraiser through the 1890s.

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20 Rice, “History of the Medical Campus,” 261; Walter O. Williams, “Board of Elders,” in *The Second Presbyterian Church of Indianapolis. One Hundred Years, 1838-1938* (Indianapolis: Second Presbyterian Church of Indianapolis, 1939), 154. The City Hospital is today called the Wishard Memorial Hospital.
21 Rice, “History of the Medical Campus,” 261.
22 Ibid., 262.
Though the Indianapolis Flower Mission started out simply delivering flowers, it quickly branched off into other areas of activity. Only three years after its founding, the Flower Mission started a lodging house for newsboys which it ran for about a year. In 1883, at the insistence of Indianapolis Social Gospel minister Oscar McCulloch, the group established the Flower Mission Training School for Nurses, which was the first nursing school in Indiana. The Flower Mission supported the Nursing School financially until 1894. The Flower Mission encouraged another innovative healthcare practice by founding Indianapolis’s first visiting nurse program in 1884. Within a year, the Flower Mission turned the program over to the Public Health Nursing Association, but the Flower Mission continued to pay its own nurses to visit clients into the 1910s.

The Indianapolis Flower Mission was legally incorporated for the first time in 1892 and stated its mission was “to disperse charity to the sick poor of the city of Indianapolis and to conduct and maintain a Training School for the education and training of female nurses.” Throughout the 1890s the Flower Mission continued to expand its work. In 1890, it assisted Oscar McCulloch’s Fresh Air Mission for Children, which brought sick children to a park outside the city where they could get clean, fresh air and sunlight. The Flower Mission took on in 1895 the significant responsibility of administering an institution that was unique for its time—a hospital specifically for children. Businessman Col. Eli Lilly and his wife made a substantial donation in memory of their young son, Charles, who had died in 1893.

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24 Ibid.
25 William Niles Wishard, Jr., M.D., “The Genesis of Marion County General Hospital and its Training School for Nurses” (Read at Commencement for Nurses, Marion County General Hospital, August 20, 1965), p. 6, Wishard Memorial Hospital, Marion County General Hospital Collection, 1861-1979 (M 0430), William Henry Smith Memorial Library, Indiana Historical Society, Indianapolis; Rice, “History of the Medical Campus,” 261.
27 Articles of Association of the Indianapolis Flower Mission, January 4, 1892, IFM Records.
of their daughter, Eleanor, to start the Eleanor Hospital for Sick Children which the Flower Mission ran until January of 1909. The Flower Mission remained interested in providing care to women and children even after the Eleanor Hospital closed. In the 1910s, a large part of the Flower Mission’s work was providing visiting nurse services to mothers and their babies.

The Flower Mission became interested in the anti-tuberculosis movement in the early 1900s. Within a decade of founding the Eleanor Hospital, the Indianapolis Flower Mission started building the Flower Mission Hospital for Incurables, designed to care for patients with tuberculosis, which opened November 11, 1903. At the time it was the only hospital in Indiana for patients in the final stages of tuberculosis. The Flower Mission supported the Hospital for Incurables, but the City Hospital owned and operated it and in 1923 the City Hospital tore down the Flower Mission’s building to make room for a new administration building. The Flower Mission moved its hospital to a house for the next eight years. The new location, never intended to serve as a hospital, proved inadequate and the fire marshal eventually condemned the building. After this, the Indianapolis Flower Mission started a major campaign to build a new tuberculosis hospital. This crusade marked the height of the Flower Mission’s influence and activity as the group engaged in fundraising and intensive lobbying to build the new hospital and persuade a reluctant city government to accept responsibility for running it in the midst of the Great

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29 Ibid.
30 Board of Directors Meeting Minutes, 1915-1920, IFM Records.
31 Smith, “They Brought Flowers.”
32 Ibid.
Depression. The Flower Mission’s persistence paid off and it dedicated the new 100-bed hospital in 1937 and turned it over to the city to operate.33

In addition to helping patients at its hospital, during the 1920s and 1930s the Flower Mission continued to provide for its “outside” patients as well—those with tuberculosis who were not able to go to an institution. The Mission paid one of its members, Mrs. Rose Noerr, to visit patients weekly and provide milk and other dietary supplements as needed.34

The creation of the Indianapolis Flower Mission Memorial Hospital marked the zenith of the group’s work. After 1936 the Flower Mission mainly functioned as a hospital auxiliary group and served a dwindling number of outside patients. In the years that followed, the Flower Mission furnished special rooms in its hospital, provided extra comforts for patients like radio and television sets, and gave Christmas parties and gifts to the patients and staff.35

Though the range of its activity diminished, the Flower Mission remained interested in encouraging medical innovations. In 1947, the Flower Mission paid for the new and expensive tuberculosis drug streptomycin when the hospital would not fund the expense.36 The Flower Mission consistently supported the Marion County Tuberculosis Association. The Flower Mission began funding nursing scholarships in 1957.37 As the threat of tuberculosis diminished and the City Hospital began to use Flower Mission facilities to treat respiratory problems generally, the Flower Mission paid for new

33 Ibid.
34 Visitor’s Reports, 1930-1932, IFM Records.
35 For example, at the April 4, 1940 Board of Directors Meeting, the Flower Mission voted to furnish a nurses’ room at the hospital, reported on the Easter treats of butter, eggs, and oranges given to patients, and voted to spend twelve dollars a month on special diets for those who needed them. IFM Records.
36 Board of Directors Meeting Minutes, February 6, 1974, IFM Records.
37 Board of Directors Meeting Minutes, September 3, 1958, IFM Records.
equipment and furnishings and for remodeling the aging building.\textsuperscript{38} By the last decade of the Flower Mission’s existence, the organization did little original work, but rather used its endowment funds to give grants to other organizations, such as the Visiting Nurse Association, the American Lung Association, the Salvation Army, and Meals on Wheels.\textsuperscript{39} The Indianapolis Flower Mission became inactive as a legally incorporated organization in 1993 after over one hundred years of leading the city in providing needed services and medical innovations.\textsuperscript{40}

As the history of the Indianapolis Flower Mission shows, flower missions played important roles in the development of the communities they served. But flower missions, despite their prevalence and significant contributions, have received little attention from historians. In fact, I have not found a scholarly book or article that devotes more than a few pages to the subject and many of the works that mention flower missions are not by historians. The authors who do mention flower missions in passing tend to dismiss the institutions as useless or at least relatively unimportant. Julia B. Rauch, a professor of social work, uses the Philadelphia Flower Mission as an example of middle- and upper-class women’s relief societies that had “only genteel contact” with the needy and failed to address real problems. She writes, “one of the most widely publicized ‘relief’ societies founded during the 1873 depression was the Flower Mission. . . . While not all women’s charities were as frivolous as the Flower Mission, it illustrates the gentility—and

\textsuperscript{38} Board of Directors Meeting, December 4, 1969, IFM Records.
\textsuperscript{39} List of expenditures and income for 1987, IFM Records.
\textsuperscript{40} Indiana Secretary of State Website, Corporation Records, https://secure.in.gov/sos/bus_service/online_corps/view_details.aspx?guid=00D237E3-52C6-418A-BBA0-1B8A4310CFD4 (accessed on October 6, 2009). Though the Indiana Historical Society Collection Guide to the Flower Mission records gives 1996 as the year in which the group ceased to exist, I have chosen to use 1993 as the group’s disbanding date because the only documentation I have found regarding the group’s ending gives 1993 as the year in which the Flower Mission was administratively dissolved as a non-profit domestic corporation in Indiana.
irrelevance to severe social problems—of many such efforts.” In his discussion of the work of the New York City’s Children’s Aid Society, creative writing professor Stephen O’Connor gives positive treatment to the “Sick Mission” which provided food and medicine to the poor, but labels the Flower Mission “decidedly less vital,” assuming flower deliveries did not meet real needs. Religious historian Charles D. Cashdollar cites flower missions as an example of Reformed church missions embracing Victorian leisure culture over more traditional work that provided for people’s essential needs or evangelism. “One by one, traditional mission programs were augmented or reshaped to meet the demands of leisure culture. Visitation turned into a ‘Flower Mission,’ with lady visitors delivering bouquets of flowers with a biblical text card attached.”

Some authors do treat flower missions more seriously in their academic writing. Literary scholar Robin L. Cadwallader’s brief article discusses flower missions or the flower charity using contemporary newspaper articles and fictional short stories. She acknowledges the value of delivering flowers and the organizational skill required to carry out flower mission work. Cadwallader also acknowledges the reasons people started flower missions, noting that organizers felt delivering flowers satisfied the poor’s need for beauty and provided moral uplift for givers and recipients alike. Though Cadwallader’s work is a helpful introduction to flower missions, it is a general account not a specific history of individual flower missions. Cadwallader also relies entirely on

newspaper and magazine articles rather than looking at flower mission records. More work is needed on historical events in addition to fictional accounts of flower missions.

One of the few historians who has written on flower missions is Beverly Seaton. While her main work is on the meaning of flowers to Victorian culture, Seaton discusses flower missions briefly. In one article Seaton interprets flower missions as the logical extension of the Victorian idea that nature communicates religious truths and encourages morality. Seaton says flower missions “show Victorian moral sentimentality in action, and perhaps indicate that Ruskin’s associations of flowers with the moral realignment of mankind was not a purely personal notion.”

Seaton also gives a brief history of flower missions in her book, *The Language of Flowers*. Both accounts are short and draw mainly from sources on English flower missions. Also, Seaton only examines the practicing of delivering flowers and does not explore how flower missions developed and changed over time. Seaton’s work does provide a valuable foundation for studying flower missions though, especially in its exploration of what flowers meant to the Victorian mind.

Scholars who dismiss flower missions as trite or “decidedly less vital” do have a valid point. Receiving flowers is generally not essential to a person’s survival, at least not in the same way that food, shelter, and medical care are. Flower mission organizers focused on beauty when many of the poor faced far more pressing problems. Still, a hasty dismissal of flower missions fails to understand the motivations behind them and also fails to explore how many of these organizations eventually provided services that scholars consider vital. Historians have deemed efforts focused on meeting physical needs important, but have dismissed as trivial efforts that focus on spiritual and emotional

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46 Seaton, “Considering the Lilies,” 281.
needs that the more religious Victorians considered just as important. The central argument of this thesis is that flower missions deserve serious academic study and historians should not dismiss them as “sentimental” and “irrelevant.” Taken as a whole, the work of flower missions was not trite or useless, and even if it was, flower missions still can give us insight into women’s experiences. My work will demonstrate that flower missions provided valuable services to their clients and communities and gave women opportunities to use their abilities in work outside the home.

Since there is little scholarly work on flower missions, I will examine the literature on women’s organizations in general and women’s reform and charitable organizations in particular. Scholars have shown that middle-class women often formed their own organizations and focused on charitable work because men excluded them from existing organizations and from the business and political world. Historians argue this situation resulted from common stereotypes about middle-class women, which they have labeled the Cult of True Womanhood or the Cult of Domesticity. According to middle-class thinking in nineteenth-century America, women by nature were morally superior to men and more disposed to be self-sacrificing, pious, submissive, and domestic. Women were naturally suited to childbearing, charity, and caring for their husbands rather than working outside the home in the realms of business or politics.

Given these assumptions, historians have argued that middle-class men and women inhabited separate spheres in the nineteenth century. Women remained in the

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domestic sphere and cared for their families and participated in religious or charitable activities, while men functioned in the public sphere outside the home. Many historians have used the notion of separate spheres as an analytical framework for their research.

Nancy F. Cott studies the development of a woman’s sphere in antebellum America. Cott studies proscriptive literature that told women how to behave as well as individual women’s writings that reflect how women thought and acted. She finds a growing consciousness “that womanhood bound women together even as it bound them down.” Cott argues the idea of a woman’s sphere emerged as a result of the developing market economy, which often excluded women from paying jobs outside the home.

Julia B. Rauch traces separate spheres into the latter part of the nineteenth century in her study of friendly visiting by Philadelphia women in the 1880s. Rauch explains that providing social services, especially for women, children, and the aged, was considered acceptable charity work for middle- and upper-class women.

Woman’s special sphere was the moral; by implication, she was not to be concerned with such crass material questions as wages, working conditions, and even the dispensation of relief. As in the family, the special charges of ladies bountiful were other women, children, the aged, and the sick; by implication, they were to avoid the idle, profligate, intemperate, and other immoral poor, particularly if they were men. Woman’s special province was the home; fitting service was therefore the creation of small institutions for children and the aged.

Historians’ use of separate spheres has produced helpful research and provides an excellent basis for interpreting the work of flower missions.

As historians have done more extensive and specific research on women’s lives though, their adherence to the separate spheres model has weakened. Many histories

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50 Ibid., 5-7.
document the ways in which middle-class women expanded or circumvented their spheres. Karen J. Blair’s 1980 work interprets the women’s club movement as a means for middle-class women to apparently stay within their proper sphere, but at the same time develop autonomy. Barbara Ann Springer focuses her 1985 work on Indiana and notes that as Hoosier women lobbied for legislative change from 1900 to 1920 they still claimed to behave as proper wives and mothers, even as they stretched their sphere and functionally had unpaid careers as lobbyists and reformers. In her 1991 study, Anne Firor Scott argues that women’s associations were vital to the nation’s social and political development and also provided women with opportunities they did not otherwise have. Women’s organizations provided their members with the chance to use their gifts outside the home and even develop political and business skills when other opportunities were closed to them.

Historians have identified one main strategy women used to circumvent their sphere as “municipal housekeeping.” Women wanted to address the problems industrializing cities experienced at the turn of the twentieth century and argued they should be involved in such public issues as sanitation, poverty, and public health because such projects were merely an extension of women’s domesticity. One historian says women in Akron, Ohio, “humanized the city. . . . The Akron women accomplished this by working within a domestic sphere that they stretched and molded to their own ends.”

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Women found ways to accomplish public work while appearing to conform to social expectations.

Linda Kerber’s historiographical essay traces the evolution of historians’ use of separate spheres rhetoric and concludes by encouraging historians to move away from such a binary view and explore the complexities of women’s lives.56 This study will continue the transition away from viewing women’s activities as completely separate from the public sphere. It will explore the ways women, while limited by social expectations, have made impressive accomplishments in the wider society.

As historians have relied less on “separate spheres” to explain women’s lives, they have also explored politics in innovative ways. Historians have called for a redefinition of politics in order to understand better how the term applies to women’s activities. Paula Baker’s 1984 article notes that even before women won the vote, there was a long tradition of female involvement in politics. Historians often miss women’s earlier involvement in politics because historians use too narrow a definition of the political. Baker suggests a new definition. “‘Politics’ is used here in a relatively broad sense to include any action, formal or informal, taken to affect the course or behavior of government or the community.”57 Baker views women’s organizations, clubs, voluntary associations, the woman’s suffrage movement, Prohibition, and Progressive women’s lobbying for legislation as examples of politics since they were all efforts to change the behavior of others.58 In a 2002 work, Elisabeth Israels Perry echoes Baker’s thoughts, especially regarding the Progressive Era. Perry argues that historians of the Progressive

58 Ibid., 647.
Era do not sufficiently emphasize women’s contributions. The term “municipal housekeeping” fails to fully reflect the broad range of women’s activities that reached beyond domestic issues.\textsuperscript{59} Perry says one way to correct the gap in the historiography is to recognize a broader range of women’s activities, including women’s reform movements, as politics, even if the women themselves did not label them as such.

I would argue that Progressive-era women’s agitation for reforms was “politics,” whether they called it that or not. When women agitated for better neighborhood sanitation, factory inspections, labor laws, or pure food and drugs, they came right up against town councils, mayors, state legislatures, federal agencies, and Congress. To get changes accomplished, they had to get ordinances and laws passed, budgets drawn, appropriations made, experts and officials hired, and enforcement officers trained and supervised. . . . All of that activity is “politics.”\textsuperscript{60}

My study of the Indianapolis Flower Mission will extend this work on middle-class women and politics.\textsuperscript{61} Though the women who ran the Indianapolis Flower Mission were from the middle- and upper-class and were conservative in many ways, they used their work at the Flower Mission to expand their sphere and involve themselves in the political and business worlds. The Flower Mission’s intensive effort to build their new hospital in the 1930s is an excellent example of women’s involvement in politics under Perry’s definition. The history of the Indianapolis Flower Mission also shows how separate spheres were much more flexible than historians have previously assumed. My project will add to the literature by examining women’s involvement in local as opposed


\textsuperscript{60} Ibid., 40-41.

to national politics and will demonstrate the range of activities in which women’s organizations participated.

Since the Indianapolis Flower Mission primarily worked on public health problems, my thesis will also draw upon existing studies of middle-class women and public health work, especially efforts to fight tuberculosis. There are many excellent histories of the anti-tuberculosis movement that focus on national organizations and efforts by the government and health professionals. Richard Shyrock wrote a classic book on the largest organization associated with the anti-tuberculosis movement, the National Tuberculosis Association (NTA). This detailed and well-researched work provides a good look at the power struggles within the NTA and those at the top of the anti-tuberculosis movement. Michael Teller’s book deals generally with the anti-tuberculosis movement as a whole, with a focus on policy decisions regarding tuberculosis. He argues the tuberculosis movement was the first truly modern health campaign and pioneered many methods that future campaigns and social reform movements would borrow.

Shyrock and Teller provide good overviews of the anti-tuberculosis movement, but other studies are more specific and examine the role of patients in addition to the

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66 Ibid., 123-126.
roles of doctors and health advocates. Sheila Rothman studies how patients dealt with tuberculosis in the late nineteenth and early twentieth centuries and shows that gender had a significant impact on patients’ abilities to seek a cure. Men often traveled for their health, while women had to fulfill their responsibilities at home, despite their illnesses. Emily Abel studies the New York Charity Organization Society’s tuberculosis patients to show that cultural, family, and financial concerns help explain why patients often failed to conform to medical instructions.

Other works on tuberculosis have studied women’s roles in preventing and treating tuberculosis. Nancy Tomes’ book, *The Gospel of Germs*, shows how germ theory, including the discovery of the tuberculosis bacillus, changed everyday life for ordinary people. The book argues that from 1880 to 1920 health crusaders had a nearly evangelistic zeal in spreading the “gospel of germs” to all American households. The anti-tuberculosis crusade was one of the most enthusiastic expressions of that zeal, preaching truths about the prevention of the disease. Women, in their domestic and care giving capacities, were especially important in educating their families about germs and protecting their homes from the spread of diseases like tuberculosis. Tomes seeks to give women due credit for improving public health by challenging “the implicitly gendered division of knowledge that regards as significant what Pasteur did in the laboratory but dismisses as inconsequential what a public health nurse or housewife did.

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70 Ibid., 136, 184-191.
with his insights.” Historian Suellen Hoy also gives women credit for their fight for cleanliness and public health through municipal housekeeping, visiting the poor, working in settlement houses, or administering visiting nurse programs.

My study of the Indianapolis Flower Mission’s work will build on these studies of women’s involvement in public health projects, especially the anti-tuberculosis movement. It will also provide a specific study of local and voluntary efforts by non-professionals and women. Male-dominated groups like the National Tuberculosis Association may have set national goals and policies, but it was organizations like the all-female Indianapolis Flower Mission that worked on the ground to eliminate the disease. The history of the Indianapolis Flower Mission also allows for further exploration of the connection between women’s groups and public health concerns and between women’s organizations and nursing.

A survey of the historical literature on women’s organizations shows that although there are a growing number of works on various women’s voluntary and religious organizations, the literature on flower missions is extremely thin. This thesis is one step toward correcting that problem. My main argument is that though the work of the Indianapolis Flower Mission may at first glance appear trite and naïve, it was actually practical and life-saving and deserves serious consideration from historians. First, delivering flowers to the sick and poor did have value, especially when we understand how people at the time thought about flowers and what emphasis people placed on spiritual as well as physical health. Second, the Indianapolis Flower Mission quickly transitioned away from simply delivering flowers into work like providing healthcare to

71 Ibid., 16.
the poor. Third, the Indianapolis Flower Mission is important because it provided women a respectable way to work outside their homes and gain experience in charitable, business, and political activity. Finally, the Indianapolis Flower Mission provides a specific case study that sheds light on the widespread institution of the flower mission. Though Indianapolis was exceptional as most likely the longest-lived and most active flower mission, studying the Indianapolis group gives a good impression of how other flower missions functioned.

The following chapters will develop my arguments more fully. Chapter Two will explore the women who started the Indianapolis Flower Mission and their motives for doing so. It will cover the Flower Mission’s founding in 1876 and its earliest years of existence until 1882. It will explain why people felt delivering flowers was beneficial in general and look specifically at the Indianapolis women’s goals for their organization. Chapter Three will focus on the Indianapolis Flower Mission from 1883, the year the Mission founded the Flower Mission Training School for Nurses, through the 1927. The organization experienced considerable changes during this time. I will explore the various factors that account for the change from passing out bouquets to providing services for the city’s sick poor. This chapter will include accounts of the Flower Mission Training School for Nurses, the Visiting Nurse Program, friendly visiting, the Eleanor Hospital for Children, and the Flower Mission Hospital for Incurables.

Chapter Four will study the creation of the Flower Mission Hospital for Incurables and the building of the new hospital in the 1930s. This project represents the zenith of the Flower Mission’s work and illustrates how charitable activities like the Flower Mission brought women into politics. The chapter will explore the Flower
Mission members’ political efforts as they lobbied city leaders for funds, worked to mobilize public opinion in their favor, and interacted with the New Deal by securing Public Works Administration funding to build their hospital. The conclusion will briefly survey the Indianapolis Flower Mission’s last fifty years and will compare Indianapolis with other flower missions around the country. Indianapolis was exceptional in that it had a longer history and more extensive activity than most flower missions, but the group still illustrates many of the characteristics of other such organizations. Many flower missions around the nation took on tasks besides delivering flowers and flower missions have strongly supported nursing, hospitals, and anti-tuberculosis efforts.

This thesis will examine the world of the flower mission by conducting a specific case study of Indianapolis. My study will demonstrate that historians have neglected or dismissed flower missions too quickly. Studying flower missions enables us to understand women’s lives in the late nineteenth and early twentieth centuries better and to discover institutions that played important roles in improving and building their communities.
Chapter Two: Bringing a “Bit of Nature’s Loveliness”:
The Indianapolis Flower Mission’s Founding Members and Their Motivations,
1876-1882

The Indianapolis Flower Mission once described its work as fulfilling Jesus’ commands by “giving the cup of cold water, or the bit of nature’s loveliness to one of His ‘little ones.’” Delivering flowers may seem sentimental or frivolous, as many critics at the time charged, but it did have value by enabling the sick and poor to enjoy nature, ministering to their spiritual needs, and cheering them with the companionship and encouragement of a visitor. Further, for historians, flower missions provide a lens through which to study nineteenth-century thinking about nature, religious duty, and women’s roles in charitable work. Developing an understanding of what flower mission members sought to accomplish illuminates the significance of the organizations.

The main questions this chapter examines are “Who started the Indianapolis Flower Mission and why?” The chapter covers the Indianapolis Flower Mission’s early years from its founding in 1876 through 1882, the year before the Flower Mission took on its first long-term project, the Flower Mission Training School for Nurses. As this chapter demonstrates, a small group of friends from the middle- and upper-classes of Indianapolis founded the Indianapolis Flower Mission. These women were leisured, white Protestants with a sense of religious duty, a desire for social interaction, and the time and money to pursue both by forming their own organization.


74 Many newspaper articles on flower mission work sought to justify the practice of delivering flowers. For example, one article says, “There are people who sneer at the flower mission as a sentimentalism, and say: ‘It would be more to the purpose to give the poor people something to eat.’ If such a person should assist in the distribution for a single afternoon he would never again regard it as a bit of useless sentiment.” “At the Flower Mission,” New York Tribune, June 8, 1900.
By the time Alice Wright created the Indianapolis Flower Mission in 1876, flower missions had already become popular organizations for respectable women to join. Thus in order to understand why the Indianapolis group came into existence, we must examine what motivated people to form flower missions in the first place and whether those motivations were present in Indianapolis. Three sets of ideas about nature, religion, gender, and class merged to support the concept of flower missions. First, nature was beneficial for the sick and poor, especially for those in the nation’s rapidly growing cities where few people had access to natural beauty. Second, Christians had a religious duty to spread the Gospel and help their fellow human beings. Third, respectable women of the upper-classes should ameliorate some of the harsh conditions of their industrializing society using their domestic skills, feminine compassion, and appreciation for beauty, but should not cross the boundaries of appropriate female behavior. The women of Indianapolis joined women around the world in putting these three ideas into practice in their new organizations.

This chapter will consist of two sections. The first will study individual Indianapolis Flower Mission members to discern what types of people were behind the work. The second will survey contemporary accounts of flower missions in Indiana and elsewhere in order to illuminate the ideology that supported such organizations.

The Indianapolis Flower Mission’s activities started out simply during its early years. Alice Wright founded the Flower Mission with five or six friends in August 1876 and the women met in the Wright home on Saturdays to deliver flowers from their
gards to the City Hospital and poor neighborhoods. The women often attached Scripture texts to their bouquets. Soon after the Mission’s founding, the members started adding reading material and edible delicacies such as fruits and jellies to their deliveries. One early member, Julia Graydon Sharpe, recounted how her coachman grumbled at taking her to make her rounds. He told her, “Miss Sharpe, I’m a coachman. I’m not a missionary.”

The group remained faithful to its pattern of weekly flower deliveries during the early years, but in 1879 it branched out into an entirely new area of service by founding the Newsboys’ Lodging House. Mrs. Mary Jameson Judah, wife of prominent attorney John Judah and a well-respected philanthropist and author, spearheaded the project which sought to provide a place for the poor boys of the city to sleep. Miss Sally Ray supervised the Lodging House, which was located on South Delaware Street. The project enjoyed broad public support, but a year later the Flower Mission turned the lodging work over to other organizations and the home eventually became the English Avenue Boy’s Club and Lauter Center. The Flower Mission members wanted to focus their work on helping the sick poor of the city. Still, the start of the Newsboys’ House

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79 “Parley Here: Flower Mission Hospital to be Dedicated May 12; Climaxes Group’s Work,” *Indianapolis Times*, April 26, 1937; Smith, “They Brought Flowers.”
80 Smith, “They Brought Flowers.”
81 *Breton Fete*, IFM Records.
marked a key turning point in the history of the Flower Mission; subsequently the organization would be increasingly active in providing essential services for the poor.

Though it was only six years old in 1882, the Indianapolis Flower Mission had already begun to change. In 1882 the group continued to deliver flowers, but also distributed clothing and food. The women took a group of poor children on a summer picnic and provided a children’s Christmas celebration at Plymouth Church, complete with a tree, a Santa Claus, and donated gifts of toys and books. By its sixth year, the group had grown to sixty-six members and was meeting every Thursday at Plymouth Church. The Flower Mission also experienced a loss in its sixth year as its founder, now Mrs. Frank Eaton, moved back to Ohio with her family. The Indianapolis Flower Mission resolved to move forward though and had a new goal of building a hospital for women and children. But they first had to raise the money.82

The Indianapolis Flower Mission needed funds beyond those provided by membership dues to support its increased activities and new goal. The resulting fundraising events combined benevolence with social mingling. One of the first fundraisers was a lawn fete given at the home of Mr. J.K. Sharpe. His daughter, Julia Graydon Sharpe, recalled that they adorned the yard with hundreds of Chinese lanterns and had a band playing in the background. The main decorations though were young women standing on pedestals around the garden, draped in robes, with their arms and faces covered in flour so they looked like living lawn statues. The local papers deemed it the social event of the year.83

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The success of the Flower Mission’s early fundraiser paved the way for other events that were often well-attended by the best of Indianapolis society. The Flower Mission organized a tour around the city via the new Belt Railway in 1879. That member Sallie E. Coleman’s father, Col. Michael A. Downing, had managed the construction of the railway may account for the Flower Mission’s choice of activity. The summer of 1880 brought a Doll Fair that raised over one thousand dollars and became an annual event. Flower Mission finances suffered later in the 1880s and 1890s and the organization lost all of its funds several times due to the failure of the financial institution that held its money. During such turbulent economic times, fundraising functioned as more than an opportunity for socializing; it ensured the Flower Mission’s continued existence.

Still, financial necessity merged with society in a pleasant way for Flower Mission members. Several of the organization’s annual events became prominent social gatherings for the elite of Indianapolis. Many Hoosiers considered the annual Flower Mission ball the most important social happening of the year. It became a reliable fundraiser for the Mission. The Flower Mission also started annual week-long fairs. The members set up a variety of booths and arranged different entertainments each night, generally centering on a theme. Mrs. Frederic Krull recalled that one fair “took a League of Nations aspect.” Each night a different group of children donned costumes and performed dances from different parts of the world. The author bemoaned her mother’s

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86 Smith, “They Brought Flowers.”
87 Rice, “History of the Medical Campus,” 262.
88 Smith, “They Brought Flowers.”
refusal to allow her to perform in the dances because the practices would interfere with her homework. Mrs. Krull recalled watching broken-heartedly as the other children participated in the fun.\(^{89}\)

By 1882 the Indianapolis Flower Mission’s membership was growing and its organization was becoming more formal, though the group did not legally incorporate for another decade. In 1882 the Indianapolis Flower Mission had sixty-six members.\(^{90}\) In 1890 it had over forty active members and twenty honorary members.\(^{91}\) In 1894 there were fifty-six active members and sixteen honorary members.\(^{92}\) The Flower Mission’s board of directors made major decisions for the group and in its first few decades of existence, active members were expected to carry out duties such as delivering flowers or visiting patients.\(^{93}\) By the late 1920s though the board of directors attended to most of the group’s tasks and members did little more than attend the annual luncheon.\(^{94}\) As the Flower Mission’s activity declined after the 1930s, it had approximately twenty members all of whom functionally served on the board. Also, beginning in 1882 the Flower Mission had an all-male advisory board that gave advice on legal and business matters, particularly on how to manage and invest money.\(^{95}\)

In just six years, the Indianapolis Flower Mission had grown in membership, expanded its activities, and established a reputation in the city through its fundraisers. In

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\(^{89}\) “Notes by Mrs. Frederic Krull on the subject of week-long fairs to raise money in Flower Mission History,” IFM Records.


\(^{91}\) Report of the Indianapolis Flower Mission, 1890, IFM Records.


\(^{93}\) Indianapolis Flower Mission Seventh Annual Report, May 1884-1885 (Indianapolis: Hasselman Journal Company Printers and Binders, 1885), IFM Records.


\(^{95}\) Flower Mission Cottage and Training School for Nurses (Indianapolis: Carlon and Hollenbeck, Printers and Binders, 1883; reprinted by Marion County General Hospital Printing Department, 1961), Indiana Collection, Indiana State Library, Indianapolis.
order to understand the Mission’s founding and its early activities better, one must know more about the women who accomplished these feats. The following section will conduct a survey of the women who started the Indianapolis Flower Mission or were prominent during its first decade of existence. While this study will not be exhaustive, it will provide information on specific individuals and paint an overall picture of the class, race, religious affiliations, and personal and family connections of the members.

The group of women who founded the Indianapolis Flower Mission and ran it in its early years was fairly homogenous. Its members were primarily white, middle-class or upper middle-class women who did not work to earn income for their families. They were socially connected. Available information suggests that all were Protestants. Members generally became involved in the Indianapolis Flower Mission through information from a friend or family member. Though many sources refer to the founders of the Mission as “young girls,” at the time some of them, such as Hannah Chapman, were in their late 30s and married with children. Others such as Alice Wright, Julia Graydon Sharpe, and Anna Sharpe were in their late teens or early twenties when they founded the organization.

Sources give varying and incomplete lists of the Flower Mission’s charter members. They all agree that Alice Wright was the leader, and one source says Mrs. Hannah Chapman, Mrs. Victor Hendricks, Miss Julia Graydon Sharpe, Miss Anna Sharpe, Miss Ridenour, and others seconded her. With the exception of Miss Ridenour, the following section discusses the charter members and some other women who joined in the 1870s or 1880s. The biographies of these important early members help explain the Flower Mission’s early success.

96 Breton Fete, 23.
A study of specific individuals confirms the class status of those involved with the Flower Mission. Alice Wright was the daughter of Gen. George Wright, a well-known citizen of Indianapolis, and Hattie Wright. Her mother stayed at home “keeping house” as did she and her younger sister Helen. Her younger brother Jason and a servant made up the rest of the household. The Wright family moved from Ohio to Indianapolis sometime in the 1870s so Mr. Wright could revive a troubled railroad company. The Wrights were leaders in the community and in the Second Presbyterian Church where Gen. Wright was first a trustee and later an elder. By 1880 Alice married Mr. Frank Eaton, and in 1882 the entire family returned to Ohio, though Alice remained an honorary member of the Indianapolis Flower Mission throughout her life.

Through Hannah Chapman, the Indianapolis Flower Mission had powerful political connections. She was a charter member of the Flower Mission and its first president, serving from 1879 to 1886. Census records indicate that her husband George was a lawyer and that she stayed home to keep the house. The couple had four children as of 1880 and kept a servant. Other sources reveal that George Chapman was an Indiana State Senator from Marion County and a hero in the Civil War who earned the

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97 1880 Census, Marion County, Indianapolis, IN, in Ancestry.com (accessed March 28, 2008), (hereafter referred to as 1880 Census).
98 John R. Seeley et al., Community Chest: A Case Study in Philanthropy (Toronto, ON: University of Toronto Press, 1957), 83; Walter O. Williams, “Board of Elders,” in The Second Presbyterian Church of Indianapolis. One Hundred Years, 1838-1938 (Indianapolis: Second Presbyterian Church of Indianapolis, 1939), 54.
100 1880 Census.
The Sharpes were one of the most prestigious families associated with the Indianapolis Flower Mission. One author says they were “one of the earliest as well as one of the most prominent families to be identified with the history of Indianapolis.” Julia Graydon Sharpe and her younger sister Anna descended from a leading New England family and their father, Joseph Kinne Sharpe, Sr., controlled much of the development of Indianapolis, making his fortune in the wholesale leather business and later by trading in Indiana real estate. Julia Graydon Sharpe was a popular socialite, but was best known as an artist who gained regional and national fame for her work. She even earned an entry in the Woman’s Who’s Who of America. Julia was active in the Flower Mission throughout her life.

Other early members hailed from equally influential families. Charter member Mrs. Victor K. Hendricks was married to a successful merchant in the Indianapolis wholesale boot and shoe business who was also a cousin of U.S. Vice President Thomas A. Hendricks. Another early member was Hannah Haughey whose husband was president of the Indianapolis National Bank and active in city government. Mrs. Haughey was heavily involved in the Flower Mission Training School for Nurses,

101 S.E. Land, Indiana Representative Men in 1881: Containing Biographies of the Members of the Senate and House of Representatives of the State of Indiana (Indianapolis: published by the author, 1881), 79-80.
102 Dunn, Greater Indianapolis, 776.
103 Ibid.
serving as the treasurer for the initial project. Mrs. Mary Jameson’s husband was Ovid Butler Jameson, the grandson of the founder of Butler University, who also served a term in the Indiana General Assembly. His sister, Mrs. Mary Jameson Judah, was also a Flower Mission member. Mary Jameson was the sister of the famous author Booth Tarkington.

The composition of the early Indianapolis Flower Mission confirms Nancy F. Gabin’s analysis of the Indianapolis women’s movement as a whole: “Many of those involved in the Indianapolis women’s movement were leisured, middle class women.” Such standing was also typical of women’s organizations nationally and thus was probably true of other flower missions. Indianapolis census records on specific members indicate that no member provided the family income, and that their families were comfortable financially. Newspaper accounts of the group’s history indicate that its members were the “fashionable ladies” of the city. At the organization’s first fundraiser, “All the society girls in town” participated.


108 Biographical Sketches of Members of the Indiana State Government and Judicial Officials, and Members of the 54th Legislative Assembly (Indianapolis: Indianapolis Sentinel Company Printers, 1885), 149-150.


112 1880 Census.

The group’s ability to involve local and even national celebrities in their events is further evidence of the prominence of the Indianapolis Flower Mission members. Part of the reason the Flower Mission fundraisers were so successful was because the women behind them were extremely well-connected. Early member Mary Jameson Judah was a noted short story author in her own right with publications in *Harper’s*, *Scribner’s*, and other magazines, but she was also called a “friend and advisor” to James Whitcomb Riley and Booth Tarkington as well as other nationally known writers.\(^{114}\) The fact that Mrs. Judah’s sister-in-law, Mary Jameson, was the sister of Booth Tarkington helps explains these connections.\(^{115}\) Thus, it is not surprising that both Mr. Riley and Mr. Tarkington contributed stories to the Flower Mission magazine, which was published yearly in the 1890s, and that Mr. Riley appeared at the Authors’ Carnival, an 1896 fundraiser.\(^{116}\)

White women comprised the Flower Mission membership, but at least one African-American had a long-time affiliation with the Flower Mission. Mary Mays worked for many years as a district nurse for the Flower Mission. When the Flower Mission first wanted to begin its visiting nurse program in 1885, it charged Mays with doing the preliminary research.\(^{117}\) Mays worked as a visiting nurse with the Flower Mission for over twenty years and became “a familiar figure in the streets of Indianapolis.”\(^{118}\) Interestingly, the 1880 census lists Mays as mulatto and her husband as


\(^{117}\) Rice, “History of the Medical Campus,” 261.

\(^{118}\) *Indianapolis News*, October 19, 1916.
Though she worked with the Indianapolis Flower Mission for years, she was not a member. Whether for reasons of race or class, Mary Mays never enjoyed official membership in the organization to which she devoted much of her life.

Like most middle- or upper-class Americans of the late nineteenth century, the Flower Mission members belonged to Protestant churches. Since the organization did not affiliate with any specific church, members’ denominations varied, but many members were Presbyterian. Both the Wright and the Sharpe families were active members of Second Presbyterian Church in Indianapolis as were many other Flower Mission members.\(^{119}\) Gertrude Ross, daughter of early Flower Mission member Julia Goodhart, and later long-time president of the organization, was a member of First Presbyterian Church.\(^{120}\) Julia Goodhart belonged to Oscar McCulloch’s Plymouth Church.\(^{121}\) Another early member, Nannie I. Newcomer, belonged to Christ Episcopal Church.\(^{122}\) Though the members differed on their choice of worship center, most of them actively participated in their churches and in other charitable societies besides the Flower Mission, indicating they were genuinely interested in religious activities and serving others.

That the Indianapolis Flower Mission remained a relatively homogeneous group is unsurprising given its membership policies. In its early years, joining was relatively easy. The Articles of Association for 1884 and 1885 said anyone could become a member by majority vote at a regular meeting as long as they agreed to help with the


\(^{120}\) Dunn, *Greater Indianapolis*, 957.


Later membership rules tightened and a mere five votes could reject a prospect. Because members of the organization voted on admitting prospects, they could keep out anyone who failed to fulfill their notion of an acceptable member. Even before the tighter admission standards, most women joined because a friend or relative did. “Most of the new members who enter our Society,” claimed one annual report, “first become interested in the work by attending some friend on her round of charitable visits and witnessing the smiles with which she is greeted . . .” Many joined the Flower Mission based on family connections. Julia and Annie Sharpe were sisters who joined together, and one of the most active members in Flower Mission history, Gertrude Goodhart (later Mrs. David Ross), first learned of the organization through her mother’s involvement. Even some men were affiliated with the Flower Mission through family. Mrs. George T. Evans often took her son Edgar with her on her Flower Mission visits and in the 1930s Edgar served on the all-male Flower Mission Advisory Board.

The Indianapolis Flower Mission grew quickly in its early years by tapping into social networks based on shared social standing, religious beliefs, family, and neighborhoods.

A study of the Indianapolis Flower Mission’s early membership reveals a rather exclusive group of well-off, white, Protestant women. No doubt this exclusivity provided a strong attraction for potential members. Historians have noted that many women joined charitable or religious organizations less out of a sense of duty and more out of a desire

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123 Indianapolis Flower Mission Seventh Annual Report, May 1884-1885, IFM Records.
124 Articles of Association, 1892, IFM Records.
for social interaction or upward mobility. No doubt this was true at least for some Flower Mission members in Indianapolis, especially considering that many of the group’s fundraisers were important social events as well. But the motivations for creating and sustaining the Flower Mission extended beyond a desire for social advancement or fellowship; strongly held religious beliefs were key reasons organizations such as the Indianapolis Flower Mission existed at all.

With a better idea of who started the Indianapolis Flower Mission, it is possible to examine their motivations more closely. Before looking at the situation in Indianapolis, it is essential to know why people started flower missions in the first place. The concept for flower missions emerged out of a desire to address the problems created by industrialization and urbanization, which were both sweeping the nation in the 1870s. But concerned individuals responded to these twin phenomena in many other ways. What made middle- and upper middle-class women think that passing out flowers to the sick and poor would be of any value? The answer lies in a mingling of ideas about nature, religion, gender, and class. A Protestant sense of religious duty and evangelical mission blended with nineteenth-century ideas about gender and class to create the idea for the flower mission. These organizations would provide a respectable, distinctively feminine way to gently share the Gospel and ease the suffering created by a rapidly industrializing and urbanizing society. This section will examine these Victorian ideas about nature, religion, gender, and class and show how they influenced the women of Indianapolis in 1876.

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Flower missions were one type of response to a rapidly changing society. The late nineteenth-century United States faced many challenges as a result of the nation’s new industrialization and accompanying urbanization. As industries expanded and centralized their operations in urban areas, immigrants and rural dwellers flocked to the cities in search of jobs. The process dramatically changed American society and raised new problems in such areas as housing, healthcare, and workers’ safety. Many people moved from the country to the city for the first time and became immersed in an industrial landscape devoid of nature and its beauty. The need of city people for contact with nature probably sparked the concept for the first flower mission and created a new form of ministry in bringing natural beauty to those cut off from it. The problems of the cities extended beyond inhabitants’ aesthetic deprivations, though, and included serious health concerns such as the spread of infectious diseases, poor sanitation, and inadequate medical facilities. Nationwide, women formed organizations to address the problems in their communities. The precedents for women’s activism had already been set by the time of the Indianapolis Flower Mission’s founding in 1876.

Flower missions emerged in the midst of this social flux. The fact that British flower missions may have preceded their American counterparts is unsurprising given that Britain had to respond to industrialization earlier than the United States, and Americans tended to model British philanthropic innovations. But the reason so many British and American women sought to face the needs of their changing cities and times

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128 Rice, “History of the Medical Campus,” 261.
with flowers is still unclear. Flower missions sprang up in the 1860s and 1870s during the reign of Queen Victoria in England. Throughout this period a distinct set of ideas shaped people’s lives and conduct, particularly for those who belonged to the middle class. Part of this Victorian mindset placed great emphasis on the power and benefit of nature, including flowers. As Beverly Seaton has observed, the Victorians loved flowers and believed that they were healthy, pleasurable, morally uplifting, and that all people should be able to enjoy them.

As Seaton wrote, in the mid-nineteenth-century English speaking world, “Flowers were considered indispensable in the sickroom.”131 It is a testimony of the compassion of the well-off women who ran flower missions that they believed that poor sickrooms should be privy to flowers as well as rich ones. One nineteenth-century writer seeking to encourage the cultivation of flowers went as far as to insist that they are essential. “Beautiful flowers are as much of a necessity in this age as good furniture, music, and current literature . . . flowers have an influence for good. Think of the good done by the city flower mission. Flowers are distributed in hospitals, prisons, homes of poor people . . . to impart joy and cheer to those who are sick and lonely . . .”132 As recounted in Chapter One, Louisa May Alcott’s story, The Blind Lark, illustrates the popular belief in the benefit of giving flowers to the sick and poor. Newspaper accounts of flower missions maintain that flowers lift the spirits of the ill, especially those who could not go out and enjoy nature for themselves. One newspaper said the St. Louis Flower Mission’s work was “carrying life and hope to the sick and despairing—and brightening many an

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eye with pleasure at sight of the beautiful flowers or luscious fruit.”

Beyond the benefits of the flowers themselves, the act of visiting the sick and letting them know that someone cared about their condition provided needed encouragement.

Flower mission supporters believed that flowers benefited the poor as well as the sick, particularly the poor in the inner cities, which were devoid of green spaces. Journalist and New York City tenement reform advocate Jacob A. Riis recognized the pleasure poor children derived from gifts of flowers. In his famous book *How the Other Half Lives: Studies Among the Tenements of New York*, Riis recounted what would happen if someone brought flowers to the children of New York’s slums: “Let him take into a tenement block a handful of flowers from the fields and watch the brightened faces, . . . I have seen an armful of daisies keep the peace of a block better than a policeman and his club, seen instincts awaken under their gentle appeal . . . .”

As usual Riis wrote from firsthand experience. In 1888 Riis’ own children persuaded him to take some daisies from their country home to the children in the city. The city children’s excitement at receiving flowers so impressed Riis that he wrote a petition to the editor of the *New York Tribune* on behalf of the local flower mission asking for donations of flowers and volunteers to deliver them. The children of the tenements particularly needed flowers because the posies gave “a glimpse of the summer fields which their eyes may never

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Interestingly, Miss Tinkham’s similar experience with the impact of flowers on the children of Boston reportedly sparked the idea of flower missions in the first place.137

Flower mission members were keenly aware that their detractors insisted that the women should do more practical things for the poor like providing food or clothing. Many flower missions addressed this criticism by expanding their services to include practical items, but they also insisted that distributing flowers did minister to real needs for beauty and spiritual encouragement.138 One article on the Chicago Flower Mission said its work was “to minister to their [the sick’s] spiritual as well as their esthetic wants.”139 Many involved with flower missions insisted that people’s spiritual needs mattered just as much as their physical needs.140 Some flower missions even boasted about the fact that they provided items beyond mere necessities. “There are societies that provide work, food and clothing, but the flower mission is the only organization that looks after the ‘goodies’ of life and make the lot of the unfortunate somewhat brighter.”141

Flowers were more than just nice things to spruce up a drab sickroom though; for mid-nineteenth-century Victorians flowers had religious significance. Victorians believed that God communicated through nature just as He communicated through the

137 Rice, “History of the Medical Campus,” 261.
139 “The Flower Mission,” Inter Ocean, Chicago, IL, May 18, 1875.
140 “The Flower Mission Close of the Second Year of a Wholesome Charity,” St. Louis Globe-Democrat, October 14, 1875. Dr. Goodell spoke at this annual meeting of the St. Louis Flower Mission and said giving flowers met spiritual needs which were just as important as physical ones.
141 “A Beautiful Work of Women The Flower Mission Receives Its Annual Report and Elects Officers,” Milwaukee Journal, October 1, 1890. Another newspaper wrote: “It will be seen that the field for Flower Mission work is almost unlimited, and extends over ground untouched by distinctly charitable organizations which are able to provide only absolute necessities.” Mrs. N.J. Hersey, “Flower Mission Report of the Work Done during the Month of August,” Rocky Mountain News, Denver, CO, September 7, 1887.
Bible, and thus flowers carried divine messages. Seaton notes that Victorians believed they could discover “religious truths in nature.” 142 Many people during this time looked to nature, including flowers, for moral guidance and knowledge about the spiritual world. 143 Thus Seaton considers flower missions “Victorian moral sentimentality in action.” The women who delivered flowers had specific spiritual messages that they sought to convey with their gifts. 144 A newspaper article supports Seaton’s argument. The author challenges those skeptical of the flower mission’s value as follows: “If any of our readers doubt its utility let them take a few flowers into any of the wretched purlieus of the city, and they will find these messengers from Heaven have more sacred meanings and uses than to serve as a button-hole bouquet or fade in the heated air of a ball-room.” 145

Flower missions fulfilled women’s God-given duties to encourage and do good to others, but they also could be a means of fulfilling their duty to spread the Gospel. As Protestant Christians, many of the women who ran flower missions genuinely believed in the Gospel. They held that all people have sinned against a holy God, and need mercy in order to avoid eternal punishment. God is loving and sent his son Jesus Christ to live on earth as a man and die on the cross in place of sinful man. In order to be saved and spend eternity with God in heaven, people through faith believe in Christ’s sacrifice on the cross and accept his forgiveness. These women also believed in the Great Commission—Jesus’ command to his followers to “Go ye therefore, and teach all nations, baptizing

143 Ibid., 261.
144 Ibid., 281-282.
them in the name of the Father, and of the Son, and of the Holy Ghost.”¹⁴⁶ For people who took their duty to obey Scripture seriously, evangelism, telling others the Gospel, was paramount. Historians should remember that these genuine religious beliefs provided a powerful motivation for action. Anne Firor Scott writes, “We must never forget that the effort[s] to ‘bring people to Christ’ or to save them from sin were enormously energizing concepts for women in missionary, moral reform, temperance, and antislavery societies.”¹⁴⁷ Thus, in addition to providing comfort and the beauty of nature, women used flower missions to evangelize. The Bible flower missions, which included Scripture verses attached to the bouquets, were perhaps best suited to spread the Gospel as they combined both sources of God’s revelation—Scripture and nature.

Flower mission members believed that their offerings of flowers and Scripture texts would have a valuable moral influence on the recipients.¹⁴⁸ One source that demonstrates this belief is a fictional tale about a young girl, Ethel, who was staying with her aunt, Miss Ellen Bentley, and was helping write Scripture verses for the flower mission. In the story Ethel questions whether anyone even reads the passages, and her aunt responds by telling her about a young girl who runs away from her family to the big city. Reading a text from a flower mission bouquet convinces her to return home.¹⁴⁹ One real life account of flower mission visits to jails expressed the hope that flowers would help rehabilitate the prisoners. “Flowers are rare in that place, and may their mission be

¹⁴⁶ Matthew 28:19 (King James Version).
¹⁴⁷ Scott, Natural Allies, 182.
to awaken a nobler manhood in each.” One author even postulated that those who gathered and prepared the flowers benefited from the beauty of nature.

Sometimes as I have seen the flowers spread out on the tables waiting to be separated into bouquets . . . my thoughts have turned to those who had gathered them . . . and I have wondered if a good work had not already been wrought, and if these very flowers were not carrying an influence, subtile [sic] but felt, mingling with their own fragrance, which was part of the secret of their sanctifying power.

Flower mission members infused their accounts of their work with religious language and were fully convinced that their efforts would not be in vain.

The final facet of flower mission ideology pertains to gender and class. Flower missions took hold because they presented perfect projects for respectable, ladylike, middle- and upper-class women. As Chapter One has already explained, society expected nineteenth-century American women, particularly those of the middle- and upper-classes, to use their moral and nurturing abilities to improve the community, but society did not want women to overstep their boundaries and involve themselves in male affairs or have contact with the desperately poor or morally bankrupt.

 Delivering flowers to cheer those in need was exactly the type of work that satisfied popular criteria for appropriate women’s charities. The flower mission utilized women’s domestic skills in growing and arranging flowers, engaged their nurturing attitude toward the sick, expressed their compassion for the less fortunate, and allowed them to share their appreciation for beauty. The missions accomplished all this while keeping women out of more serious reforms that encroached on men’s work and while enabling society to feel that something was being done to address the problems of the

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151 “The Flower Mission Close of the Second Year of a Wholesome Charity,” *St. Louis Globe-Democrat*, October 14, 1875. This quote is taken from the portion of the article that reprints the Secretary’s Report by Mrs. Joseph Shippen.
cities without requiring women to be involved too deeply with abject poverty or other serious problems. Giving a bouquet to a prisoner was much less controversial than advocating for reform of the penal system, but enabled a woman to feel like she was accomplishing something. This argument is not to discount the value of bringing flowers or ignore the other tasks flower missions performed. Still, to most people, flower mission work appeared innocuous and non-controversial. The seemingly harmless and gentle nature of flower missions helps explain why so many women willingly joined them and why they became, as in Indianapolis, popular social circles as well. The flower mission was a cause that nearly everyone could support.

Accounts of flower missions often mention that women were uniquely suited to the task of delivering flowers. In the *New York Tribune’s* account of how flower missions were conceived, it says that an unnamed woman received flowers from a friend in the middle of the summer. She was arranging them near an open window and when two newsboys looked at the flowers longingly from outside “it was not in woman’s nature to shut it without throwing them some of the flowers.”\(^{152}\) Another account says, “A woman’s mind alone could have conceived the graceful thought of decorating the sick wards of hospitals and the close rooms of invalid poverty with flowers . . . And to woman’s hands, too, the operation of this scheme seems to be wisely intrusted.”\(^{153}\) Another paper wrote,

The majority of the great cities in the eastern part of this country have their flower mission wholly controlled by women. The reason that the gentler sex has uniformly dispensed these most lovely of nature’s gifts is evidently because of their own juster [sic] appreciation of their value. Only those ladies who love flowers find their way in to this kind of

\(^{153}\) *Inter Ocean*, Chicago, IL, May 14, 1874.
charitable work, for they alone ascribe to the fragrant blossoms the soothing power which they are seen to have in the sick room.\textsuperscript{154}

Given popular perceptions of flower mission work, it is no surprise that people assumed flower mission members themselves were proper examples of Christian womanhood. One of the most infamous flower mission members illustrates this point well. The trial of Lizzie Borden in 1893 shocked America as the state of Massachusetts accused Borden of murdering her father and step-mother with an ax. Borden’s trial created a particular sensation because she seemed to be the polar opposite of an ax murderer. One of the reasons many people could not believe Borden guilty of such a ghastly crime was her active involvement in church and charitable organizations, including the Ladies’ Fruit and Flower Mission of Fall River, Massachusetts.\textsuperscript{155} Indeed one historian argues that a key reason Borden was acquitted was that jurors simply could not believe that a middle-class, religious woman who was involved in such respectable activities as flower mission work could possibly commit a violent crime.\textsuperscript{156}

While Lizzie Borden may have sullied the name of the Fruit and Flower Mission in Fall River, Massachusetts, other flower missions sought to ensure their reputations for respectable and genteel activities. One flower mission took the trouble to write to its local newspaper in an effort to correct a damaging rumor about a supposed member. The paper published the letter, which said, “Will you kindly mention in the evening’s paper that Mary E. Wilson, who married George C. Gottung, the murderer, was never a member of the Fruit and Flower Mission of the Young Women’s Christian Association . .

\textsuperscript{154} “From Gentle Hands,” \textit{Daily News}, Denver, CO, August 18, 1890.
\textsuperscript{155} Kathryn Allamong Jacob, “She Couldn’t Have Done It, Even If She Did,” in \textit{American Experiences: Readings in American History, Vol. II—Since 1865}, 7\textsuperscript{th} ed., Randy Roberts and James S. Olson, eds. (New York: Pearson, 2008), 51-61.
\textsuperscript{156} Ibid., 55.
...and that no young ladies go to penal institutions from the Mission . . .” 157 Membership in a flower mission was supposed to fulfill a religious duty, help others, and enhance a woman’s status. Organizers of flower missions wanted to ensure that their communities retained a high opinion of their work.

The women of the Indianapolis Flower Mission embraced the ideas about nature, religion, gender, and class that contributed to the development of such organizations. The surviving records of the Indianapolis Flower Mission particularly demonstrate the early members’ beliefs in the first two areas. Though the records say less about gender, the women’s choice of activity and all-female membership indicate that they probably adhered to many of their society’s ideas about women’s activities. It is clear from the documents though that the Indianapolis women strongly believed in the benefit of flowers. In the 1884 Indianapolis Flower Mission report, the secretary wrote,

Making bouquets and distributing them to the sick is always a part of our summers work. The ministry of flowers though silent is potent. Physicians and nurses testify that they often exert a most benign influence in sick rooms. The weary eye finds rest in gazing upon their freshness and beauty. The sad heart is cheered and the erring and hopeless are filled with new courage and purer thoughts. 158

A poem published in the same document reveals some sentiment about flowers. “We are the sweet Fowers, [sic] . . . We fill the air with pleasure by our simple breath. All who see us love us; We befit our places; Unto sorrow we gives smiles, and unto graces, graces.” 159 The women also believed that their visits to patients were useful. “If any one

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159 Report of the Indianapolis Flower Mission 1884, pp. 22-23. Though the IFM yearbook does not give the author of this poem, it is by Leigh Hunt and can be found in Leigh Hunt, “Flower,” in Charles D. Cleveland, English Literature of the Nineteenth Century (Philadelphia: E.C. & J. Biddle, 1857)
is inclined to regard this as a sentimental charity you have only to go some day with one of our weekly visitors . . . and see the look of delight and gratitude which covers each face as the visitor approaches.”

Indianapolis Flower Mission reports reveal the religious mission behind its work. The secretary’s report for 1884 states that the women work for “charity’s sake” and that “The only reward expected, is that which follows close upon good deeds.” The same document also acknowledges divine help in their work: “With thankful hearts toward God our helper, and Christ our divine Savior and example, we stand ready to begin our ninth year’s work.” The yearbook from 1886-1887 shows that the Flower Mission members believed their bouquets would remind the patients of God’s care for them. “We long to go to [the sick], bearing in our hands, the sweet symbols of the sure promise, ‘I will never leave nor forsake you,’ letting the loveliness of these earth-born flowers speak to them of the infinite care and tenderness of their Heavenly Father.”

The Flower Mission’s motto, adopted in 1892 when the organization legally incorporated, shows the women idealized the life devoted to service. The motto, part of a poem by Linneus Banks, says, “I live . . . For the cause that needs assistance, / For the wrongs that need resistance, / For the future in the distance, / For the good that I can do.” The women of Indianapolis firmly believed the Victorian notion that flowers communicated a divine message that it was their duty to share.

http://books.google.com/books?id=rvIdAAAAAAAJ&dq=%22We+are+the+sweet+Flowers%22&source=gbs_summary_s&cad=0 (accessed January 25, 2010), 726-729.

160 Breton Fete, 24. Emphasis in the original.
162 Ibid.
164 Rice, “History of the Medical Campus,” 262; Smith, “They Brought Flowers.”
Other Indianapolis Flower Mission records confirm that the organization believed that providing spiritual help was just as important as providing physical relief. On their weekly visits, the Flower Mission members worried about the spiritual as well as material needs of their patients. “In our work we find so many without the comforts of a religious hope, without bibles, and children without Sunday school influence who are not sick in body. Pastors and bible readers are asked to help us in caring for the heathen at home.”165 The Indianapolis Flower Mission's own accounts demonstrate that it accepted responsibility for both the spiritual and physical health of its patients.

The Indianapolis Flower Mission's close relationship with Indianapolis minister Oscar McCulloch further demonstrates how seriously the group took its religious mission. McCulloch was a prominent proponent of the Social Gospel, which encouraged the church to put less emphasis on personal salvation and focus more on redeeming society as a whole. McCulloch came to Indianapolis the year after Wright founded the Flower Mission. He took over the pastorate at Plymouth Church and transformed it into an institutional church complete with reading rooms, lecture rooms, and a focus on social welfare.166 The Indianapolis Flower Mission met at Plymouth Church in the 1880s and had a room there from which it distributed needed items to the community. That the Flower Mission worked so closely with a church demonstrates its religious commitment. The Indianapolis Flower Mission members also looked to McCulloch for guidance in

165 Breton Fete, 23.
choosing their activities. As the next chapter will discuss, his influence was a key factor in the decision to expand the Mission’s activities beyond delivering flowers.

The Indianapolis Flower Mission members’ own accounts of their organization and their connection with McCulloch and his Plymouth Church demonstrate that the women of Indianapolis adhered to the ideas about nature, religion, and gender that made flower missions popular nationally. The Indianapolis Flower Mission was particularly infused with a sense of religious duty early in its existence. That sense of religious duty would eventually fade, though, as the organization grew and accepted responsibilities other than delivering flowers.

In 1882 the Indianapolis Flower Mission stood poised for significant changes. Since its founding six years earlier, the organization had grown in size and established itself as a prominent social network of accomplished women. It had already tested new areas of work and within a year would dramatically expand its mission. This chapter has explained how the Indianapolis Flower Mission got to that point by examining who founded and ran the Flower Mission before 1882 and what motives early members had for operating the ministry.

The Indianapolis Flower Mission charter members and early recruits came from privileged families. The women were white Protestants and many were well-connected with powerful and wealthy relatives. Members often shared other family and organizational ties besides their common work at the Mission. The privileged position of

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its early members enabled the Indianapolis Flower Mission to establish itself quickly by sponsoring successful fundraisers and securing powerful supporters. The social success of Flower Mission activities were also most likely a major reason the organization could attract so many new members so quickly.

Those who joined the Indianapolis Flower Mission had motives beyond a desire for fellowship or social status. The Indianapolis women shared the ideology of other women who ran flower missions around the nation. They believed strongly in people’s need for natural beauty and in the divine message of flowers. They took their Christian duties of evangelism and charity seriously and chose flower mission work because it stayed within the bounds of accepted activities for respectable middle-class women. In Indianapolis, the Flower Mission members truly believed their task of delivering flowers benefited their patients.

It is clear that women of the Victorian era (and many men too) thought delivering flowers had value and it was worthwhile to create entire organizations to carry out such work. Even though our skeptical, modern minds often side with flower mission critics in claiming that the women would be better off distributing necessities rather than goodies, it is important to give due credit to flower mission work. Though not essential for the recipients’ survival, delivering flowers did have positive results. The assumption that people have psychological and spiritual needs that can be met in part by receiving beautiful gifts from someone who cares is valid. Considering the religious beliefs of the flower mission workers, it is not surprising that they devoted significant effort to activities they believed would help ensure others’ eternal salvation.
Despite achieving some good, flower missions constantly received criticism that they did not do enough work to meet more pressing physical needs. The critics did have a point. The problems of poverty and illness required even greater effort than most flower missions expended. One particular newspaper article illustrates this criticism and espouses some of the ideas this chapter has discussed. Entitled “A Lay Sermon on the Work of the Chicago Flower Mission,” the article opens by acknowledging the good the Chicago Flower Mission did when it carried flowers “where nothing of beauty or any expression, material or abstract, of the grace or sweetness of life is ever seen except when women’s hands carry it into the fetid squalor.” The article even acknowledges that visits to the poor often result in help for physical needs as well. “A bouquet to-day serves to make the baby’s rags more appealing, and to-morrow the baby receives new clean clothes.” But the author goes on to state a strong critique, though clothed in softened expression.

Perhaps, however, all the circumstances considered, the objection may reasonably be made that this kind of philanthropy is too dainty. The social position, the culture, the means, and the organization of these ladies, inspire the wish, quite generally felt, that they would permit their sensibilities to unite with their senses, for the purpose of turning so influential and effective an organization out of philanthropy into humanity.

The author then pleads that the women of the Chicago Flower Mission take on a new project of helping poor young girls who are destined for lives of poverty, illness, and prostitution. The Chicago Flower Mission members should spend their vast resources in helping people in such dire straits.169

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The women of the Indianapolis Flower Mission may have heard a similar sermon, though not in print from a layman, but in person from Rev. Oscar McCulloch, who challenged them to make their work more practical. Even the Flower Mission members themselves recognized that delivering blossoms was not the most effective means of ending sickness and poverty. Thus the Indianapolis Flower Mission members answered their critics who accused them of useless, sentimental work by taking on a new project, not of moral reform, but of health reform. How the Indianapolis Flower Mission reinvented itself and took on its most vital work yet is the subject of the next chapter.

A concerned citizen, M.W. Wallace, took it upon herself to write a letter to the editor of the Indianapolis Journal in 1900 to explain the work of the Indianapolis Flower Mission to those who might be confused by its sentimental name. The letter said,

To a newcomer the name Flower Mission is misleading, so I have written this explanation. It seems almost a pity to me, too, to disguise our broad, practical work under this poetical but worthy name, though twenty-four years ago when six or seven young girls agreed to go each week to the hospital and carry flowers and jelly its name covered its meaning. The daughters of those young girls are now working with them and as each year brings more sick with the increase of the population, we hope always to be able to care for them . . . .

From 1883 through 1927, the Flower Mission greatly expanded its work beyond providing flowers and treats to the sick in the City Hospital. The Flower Mission members changed their focus from satisfying spiritual and aesthetic wants to meeting physical needs, especially the need for healthcare. And just like Wallace, the women of the Flower Mission expressed concern that the public have a just appreciation for their work. One Flower Mission annual report said, “An effort has been made to give a correct knowledge of the work of the Mission to the public, to dispel the idea of a sentimental work and to substitute a charity—practical, earnest and progressive.”

The Flower Mission was concerned with its public image because its work had changed significantly from its original purpose. The Flower Mission continued to provide flowers, fruit, and jellies to patients in the hospital; however, from 1883 on it

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shifted its main focus from those tasks. In the following years, the Flower Mission started many new life-saving programs including the Flower Mission Training School for Nurses, the Visiting Nurse Program, friendly visiting, the Eleanor Hospital for Children, and the Flower Mission Hospital for Incurables. The late nineteenth century was an exciting time of innovation and growth as the Flower Mission engaged in a flurry of activities and became a respected philanthropic institution in the city.\(^{172}\) Thus, in a speech that recounted the Flower Mission’s past, charter member Julia Graydon Sharpe said she surveyed “the history of the increasing usefulness of the Flower Mission . . . ”\(^{173}\)

Chapter Three answers the questions how and why did the Indianapolis Flower Mission change its activities from delivering flowers to providing health services for those in need. Academics who dismiss flower mission work as trivial often fail to note the immense variety of vital services these organizations provided beyond delivering flowers.\(^{174}\) This chapter will provide a survey of the Flower Mission’s programs and show that, rather than being bound by sentimentality, the Flower Mission readily adopted new approaches to philanthropy and embraced the latest developments in philanthropic administration.

In 1883 the Flower Mission faced the challenge of defining itself and its work. The first portion of Chapter Three explains why the Flower Mission chose to expand from delivering flowers. Both internal and external factors contributed to the new work. The second section of this chapter shows that after starting the nursing school, subsequent projects often developed naturally out of previous work or out of flower delivery visits.


\(^{174}\) For a more detailed discussion of historians’ treatment of flower missions, see Chapter One.
Eventually, the Flower Mission focused on three areas: nursing, children, and tuberculosis. By 1927, the Flower Mission again found itself in need of direction and redefinition of its purpose. Chapter Three concludes with a discussion of the internal struggle regarding whether to continue direct service to patients. The struggle was so heated that almost the entire Flower Mission Board of Directors resigned after discontinuing the Flower Mission’s visitation program. Thus, the period of 1883 through 1927 is bookended by the Flower Mission’s struggles to define itself.

As Chapter Two concluded, the Flower Mission in 1882 was a young but flourishing organization with a large group of well-connected members, a good public image, and solid fundraising tactics. It had experimented briefly with the Newsboys’ Lodging House project. Considering its strong foundation and resources, it is not surprising that the group looked for opportunities to expand its influence. But beyond the ability to take on new work, why did Flower Mission members feel they needed to embark on a new mission of caring for the sick poor of the city? Two main factors account for the Flower Mission’s change. Visiting the City Hospital increased the Flower Mission members’ awareness of the need for better healthcare, and Rev. Oscar McCulloch encouraged the Flower Mission to take on what he considered more practical tasks.

Flower Mission work changed gradually as the group added items like clothing, bedding, and food to the flowers it dispensed. The organization had a room at Plymouth Church until 1901 and from there it distributed food and clothing, and members met weekly for business meetings and sewing days.\(^{175}\) Visiting the City Hospital, which was

\(^{175}\) Report of the Indianapolis Flower Mission, 1882, Manuscript Division, Indiana State Library, Indianapolis, 14-15; Indianapolis Flower Mission Seventh Annual Report, May 1884-1885 (Indianapolis:
notorious for its poor quality at the time, prodded the Flower Mission members to take
greater action to improve the physical condition of the city’s sick poor.\textsuperscript{176} As the women
delivered bouquets, they realized patients appreciated gifts of flowers, but needed better
healthcare. Increased awareness of the city’s problems and improved ability to solve
them pushed the Flower Mission into new work.

Working in tandem with the Flower Mission’s increased awareness of the needs
of their poorer neighbors was the influence of Rev. Oscar Carleton McCulloch, who is
perhaps best remembered for his role in legitimizing the pseudo-science of eugenics.
McCulloch’s insistence that the Flower Mission’s work be as practical as possible is
often cited as a pivotal force in encouraging the group to expand its efforts.\textsuperscript{177}
McCulloch came to Indianapolis in 1877, the year after Alice Wright formed the
Indianapolis Flower Mission, to revive the struggling Plymouth Church. Within a few
years, the energetic minister relocated the congregation and transformed its new building
into an “institutional church,” which was open every day and evening and included rooms
for reading, recreation, and social services. Plymouth Church had open membership and
no creed, and Rev. McCulloch often used his pulpit to support controversial causes such
as organized labor and penal reform.\textsuperscript{178} McCulloch had three main tenets that shaped his
work. Social Christianity, or the Social Gospel, held that Christians should focus on
transforming society as a whole, rather than on individual salvation. The institutional
church was open to the community and provided secular as well as religious services.

\textsuperscript{176} Hasselman Journal Company Printers and Binders, 1885), IFM Records, 16; Board of Directors Meeting
Minutes, September 3, 1901, IFM Records).
\textsuperscript{177} Emma Lou Thornbrough, \textit{Indiana in the Civil War Era, 1850-1880} (Indianapolis: Indiana
Historical Bureau & Indiana Historical Society, 1965), 581-582.
\textsuperscript{177} John R. Seeley et al., \textit{Community Chest: A Case Study in Philanthropy} (Toronto, ON:
University of Toronto Press, 1957), 83.
\textsuperscript{178} Clifton Phillips, \textit{Indiana in Transition: The Emergence of an Industrial Commonwealth, 1880-
1920} (Indianapolis: Indiana Historical Bureau & Indiana Historical Society, 1968), 441-442.
Finally, his belief in Applied Christianity resulted in his emphasis on social work and other efforts to improve the community. In addition to reviving his congregation, McCulloch worked with philanthropic organizations in Indianapolis, converting the Indianapolis Benevolent Society into the Charity Organization Society. Like the Flower Mission, many social welfare organizations operated out of Plymouth Church. Rev. McCulloch was active in his church and community until his death in 1891 at the age of 48.

That the Indianapolis Flower Mission developed a close connection with McCulloch is certain, but available evidence makes it difficult to know whether McCulloch guided Flower Mission work or whether the Flower Mission used McCulloch as a symbolic leader to bless projects that originated from the women themselves. While authors who admire McCulloch, including his sympathetic biographer Genevieve C. Weeks, credit him with pressuring the Flower Mission to expand its work, it is equally possible that the Flower Mission members used McCulloch’s position as a male religious leader to add legitimacy to the pioneering and potentially controversial work they were doing as women in starting their own institutions. For example, although McCulloch’s biographer credits him as “the initiator and prime mover of the mission’s most far-reaching program,” the Flower Mission Training School for Nurses, other sources say that the Flower Mission members, particularly Mrs. J.H. Stewart, were concerned about the lack of care for poor families and took the initiative to consult McCulloch on a

180 Seeley, Community Chest, 81.
181 Weeks, Oscar Carleton McCulloch, 188.
182 Ibid., 219-220.
Available evidence makes it impossible to know for sure whether McCulloch exerted more influence on the Flower Mission members than they exerted on him, but because the Flower Mission participated in so many of McCulloch’s projects and Flower Mission records quote McCulloch admiringly, the minister probably had at least some role in expanding the group’s work.

The Flower Mission worked with Rev. McCulloch in many other ways in addition to starting the Nurses’ Training School. Flower Mission Yearbooks reprinted his thoughts on charity, showing that his ideas helped inspire its work. McCulloch served on the Flower Mission’s all-male advisory board, which gave advice on money matters. Concerned about the wasteful duplication of charitable services and the need to investigate whether requests for assistance were valid, McCulloch formed the Indianapolis Charity Organization Society (COS), modeled on other such organizations around the nation. The Flower Mission agreed to report its cases to the COS and maintain weekly statistical reports. Rev. McCulloch formed the Community Chest in 1883 to conduct joint fundraising for several Indianapolis charities, giving donors confidence that their money went to reputable organizations and leaving the charities more time to conduct their work. Both the Flower Mission and the Training School for

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183 Weeks, Oscar Carleton McCulloch, 200-201; William Niles Wishard, Jr., M.D., “The Genesis of Marion County General Hospital and its Training School for Nurses” (Read at Commencement for nurses, Marion County General Hospital, August 20, 1965), 6, Wishard Memorial Hospital, Marion County General Hospital Collection, 1861-1979 (M 0430), William Henry Smith Memorial Library, Indiana Historical Society, Indianapolis.


185 Flower Mission Cottage and Training School for Nurses (Indianapolis: Carlon and Hollenbeck, Printers and Binders, 1883; reprinted by Marion County General Hospital Printing Department, 1961), Indiana Collection, Indiana State Library, Indianapolis.

186 Weeks, Oscar Carleton McCulloch, 183-184.
Nurses were early members of the Community Chest, though the Flower Mission continued its annual fair fundraisers.\textsuperscript{187}

As a result of its connection with Rev. McCulloch, the Flower Mission embraced several major national trends in philanthropy. The possibility that the rapid increase in the number of charitable organizations could result in indiscriminate and wasteful giving concerned many in the United States. Reformers like McCulloch instead advocated for “scientific charity” that would distribute relief scientifically and rationally. Charity Organization Societies like the one McCulloch formed in Indianapolis sought to encourage such “scientific charity” by investigating whether petitions for aid were genuine and then referring approved cases to organizations that would provide relief.\textsuperscript{188}

The Flower Mission eventually engaged in “friendly visiting,” a practice Charity Organization Societies often used to investigate the validity of needs.\textsuperscript{189} Closely tied to a commitment to investigating cases was McCulloch’s belief that some poor were hardworking and moral and thus deserved aid, while others were lazy and corrupt and thus undeserving.\textsuperscript{190} He thought organizations should be careful to distinguish between the two and restrict assistance to the former. Rev. McCulloch took these ideas even further by arguing that poverty and vice were hereditary among a class of people called paupers. His study entitled, “The Tribe of Ishmael: A Study in Social Degradation,” was an attempt to demonstrate with data the hereditary nature of poverty and the importance of helping the children who might escape poverty, while avoiding wasting services on the

\textsuperscript{187} Weeks, Oscar Carleton McCulloch, 189. The Community Chest was later called the Community Fund.


\textsuperscript{190} Weeks, \textit{Oscar Carleton McCulloch}, xvi-xvii.
unworthy parents. While at the end of his life McCulloch placed less emphasis on hereditary pauperism and more on social causes of poverty, eugenicists later built on McCulloch’s research to bolster support for measures like forced sterilization or limits on marriage for those deemed unfit.

In spite of his mixed legacy of ideas, Rev. McCulloch did make positive contributions to the Flower Mission’s development by encouraging it to tackle challenging new projects and modernize its methods, though there is no evidence the Flower Mission shared his most extreme beliefs about eugenics. Though Flower Mission members often passed judgment on the character of the patients, they usually provided aid anyway. As a result of McCulloch’s advice to the Flower Mission, the organization became more active and efficient, but also more discriminating toward its patients.

Considering how seriously McCulloch held the values of practicality and efficiency, it is understandable that the Flower Mission insisted that its work was practical rather than sentimental; Rev. McCulloch would have been proud.

With a better idea of why the Flower Mission changed its focus in the 1880s, it is possible to give greater detail about the new programs the Flower Mission started in three main areas—nursing work, work with children, and anti-tuberculosis work.

**Nursing Work**

Not counting their short-lived foray into managing a Newsboys’ Lodging House, the Flower Mission Training School for Nurses was the Flower Mission members’ first


major project. Nineteenth-century hospitals in general and the Indianapolis City Hospital in particular were of poor quality. Nurses improved hospital efficiency and cleanliness, but lack of professional nursing training limited their effectiveness.\textsuperscript{193} Around the United States, women’s clubs responded to the problem by creating nurses’ training schools, the first of which was founded in 1872 in New England.\textsuperscript{194} The women of Indianapolis participated in this trend, but initially had a much bigger goal than starting a nursing school. They also wanted to create a twelve-bed hospital for women and children that would serve patients who could not pay for care. The training school for nurses would help women learn valuable skills and start professional careers as well as ensure the sick received quality care.\textsuperscript{195}

Whether the Nurses’ Training School was McCulloch’s original idea or that of the Flower Mission members, McCulloch was certainly instrumental in pushing the school. He arranged for some Flower Mission members to meet with Dr. William Wishard, Sr. of the City Hospital in the spring of 1883 to discuss their idea of a small hospital and nurses’ school. Because the Flower Mission had only $12,000 available to fund the project, Dr. Wishard recommended they focus on the less expensive goal of founding a Nurses’ Training School for the City Hospital. The Flower Mission members, inspired by their recent experience seeing the trained nurses at Bellevue Hospital in New York, agreed. The Flower Mission Training School for Nurses opened in September 1883 with


\textsuperscript{195} \textit{Flower Mission Cottage and Training School for Nurses} (Indianapolis: Carlon and Hollenbeck, Printers and Binders, 1883; reprinted by Marion County General Hospital Printing Department, 1961), Indiana Collection, Indiana State Library, Indianapolis. The desire to provide women with respectable careers as well as improve hospital conditions motivated many women’s groups to create Nurses’ Training Schools. Susan M. Reverby, \textit{Ordered to Care: The Dilemma of American Nursing, 1850-1945} (Cambridge, UK: Cambridge University Press, 1987), 39.
Miss A.A. Trevor, a graduate of Bellevue Hospital Training School, as superintendent.\textsuperscript{196} The institution was the first nurses’ training school in Indiana and the second west of the Allegheny Mountains. The students lived in a home on West New York Street and trained in the women’s and children’s wards of the City Hospital.\textsuperscript{197}

Originally the Flower Mission planned to provide the majority of the school’s support with the city providing supplemental funds, but in 1884 the Flower Mission’s bank failed and the group lost its entire deposit. The Flower Mission worked to raise replacement funds, and the City Hospital significantly increased its support for the school.\textsuperscript{198} The Flower Mission continued to provide partial funding for the Nurses’ Training School until 1896 when the City Hospital took over management of the school entirely so the Flower Mission could work on other projects like the new Eleanor Hospital for Sick Children.\textsuperscript{199}

The Flower Mission Training School for Nurses had a legacy of improving patient care in Indianapolis and around the nation. Some Flower Mission graduates established training schools in other cities and one graduate, Miss Carrie Bell, died working in the mission field in Ceylon.\textsuperscript{200} Though it underwent several name changes to reflect the different names of the City Hospital, the Flower Mission Training School for Nurses remained in operation for nearly 100 years, closing in 1980.\textsuperscript{201}

\textsuperscript{196}William N. Wishard, “The Early Days of the Flower Mission Training School” (Presented at the fiftieth anniversary meeting of the Indianapolis City Hospital and Flower Mission Training School for Nurses, Sept. 1, 1933), IFM Records.
\textsuperscript{197}Weeks, \textit{Oscar Carleton McCulloch}, 200-201.
\textsuperscript{200}William Niles Wishard, Jr., M.D., “The Genesis of Marion County General Hospital and its Training School for Nurses,” 8.
The Flower Mission’s next major project grew out of its recognition of the necessity of nursing care and also received substantial support from Rev. McCulloch. McCulloch and the Flower Mission saw that the poor needed good nursing at home as well as in hospitals, and in 1884 the Flower Mission founded a visiting nurse program for Indianapolis.\textsuperscript{202} The Flower Mission hired Mrs. Mary Mays, who would be its long-time visiting nurse, to conduct the initial research on the needs of the patients who visited the city dispensary, and she found that most people lacked knowledge of how to care for the sick. The Flower Mission sought to remedy the problem by hiring Miss Henley, an English medical student, to be the first public health nurse in the city. Miss Henley visited the sick in their homes, cared for them, and educated their families and friends about treatments and how to avoid spreading disease. The Flower Mission quickly added two more nurses and in 1885 turned the visiting nurse program over to the Public Health Nursing Association.\textsuperscript{203} Even after turning over the bulk of the city’s visiting nursing to other organizations, the Flower Mission continued to employ one to two visiting nurses to see Flower Mission patients in their homes.

It is not surprising that the first visiting nurse the Flower Mission hired was from England because the concept of sending trained nurses to help the poor was pioneered there. In 1859 a Quaker philanthropist, William Rathbone, hired a trained nurse to visit the sick after he observed how effective a nurse was in caring for his sick wife. Later Mr. Rathbone partnered with Florence Nightingale to improve nurses’ training and better help the sick poor. Nightingale’s writings and personal example guided other nursing organizations in establishing both training schools for nurses and visiting nurse programs.

\textsuperscript{202} Weeks, \textit{Oscar Carleton McCulloch}, 200-201.
\textsuperscript{203} Rice, “History of the Medical Campus,” 261.
In England, the program was called district nursing, but the United States adopted the English model and modified it into visiting nursing as a variety of independent Visiting Nurse Associations hired nurses to care for the poor.204

A visiting nurse typically worked six days a week for eight to ten hours a day, making only emergency visits on Sundays. A nurse’s work included bathing patients, cleaning rooms, creating routines for medicine and meals, communicating with the doctor, and preventing the spread of disease. A nurse also often provided for special needs like food, clothing, and medical equipment.205 A nurse encountered a wide variety of ailments from tuberculosis to typhoid to injured limbs to maternity cases.206 By the early 1900s one of the most common maladies nurses encountered was tuberculosis.207

In the early 1900s, the Flower Mission had one nurse dedicated to caring for new mothers and their babies; Flower Mission records indicate Mrs. Parry was “our baby nurse,” while Mrs. Mays cared for people with a variety of diseases, including many tuberculosis patients.208 Flower Mission records often praise Mays for her dedicated work, which frequently extended into the nights. The Flower Mission even recorded that she was “Good for Man and Beast” after she cared for a horse whose throat had been cruelly cut. Mrs. Mays sewed and dressed the wound.209

Caring for injured animals, however unusual, was one of the least of the Flower Mission's challenges. The group’s reports show that nurses and members dealt with

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209 Board of Directors Meeting Minutes, May 21, 1903, IFM Records.
serious medical and familial crises. One patient, Thomas Brownlee, improved after a stay in the City Hospital for a nervous breakdown. Flower Mission records on another family said, “little girl was raped. Father in the Work house most of the time. Both parents below normal. Court sent Mrs. Mays 3 times.”

Sometimes the Flower Mission encountered families in serious poverty. In one family, the man had tuberculosis and the family had been living on only two quarts of milk a day. The Flower Mission provided money for groceries and one member, Mrs. Ruth Lowes, even gave them raspberry jelly at the man’s request.

The Flower Mission members were not content simply to hire nurses to visit their patients for them. Starting in the 1880s Flower Mission members were required to visit cases weekly. In 1884 the Flower Mission had two sections; the flower section gathered, arranged, and delivered flowers in the summer and the relief section visited and helped the sick poor. Even with all its new activities, delivering flowers to the hospital remained an important priority for the organization. As late as 1903 the Flower Mission recorded taking one hundred bouquets to the hospital. But providing direct relief to the sick poor by visiting them to discern their needs and provide items such as bedding, food, and clothing became the bulk of the Flower Mission’s work.

As the Flower Mission’s work grew and McCulloch influenced the members to become more scientific in their distribution of charity, the group adopted the new philanthropic strategy of friendly visiting in the 1890s. In an effort to administer charity

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210 Board of Directors Meeting Minutes, July 29, 1915, IFM Records.
211 Board of Directors Meeting Minutes, December 2, 1915, IFM Records.
212 Board of Directors Meeting Minutes, December 20, 1917, IFM Records.
213 Indianapolis Flower Mission Seventh Annual Report, May 1884-1885, IFM Records.
214 Board of Directors Meeting Minutes, July 2, 1903 and August 6, 1903, IFM Records.
efficiently, charity organization societies and other groups developed friendly visiting, in which wealthy philanthropists visited the poor at home to investigate their needs, coordinate relief, develop relationships with the poor, and provide a positive moral influence. The Flower Mission’s secretary’s report of 1894 testifies that this new philanthropic strategy helped those who refused charity in the form of money or gifts, but did not object to a visit from a friend who gave advice or happened to know of a job opening for them. The concept of friendly visiting was not without flaws though. Behind the practice lay the condescending assumption that the poor required middle-class advice and aid even when they initially refused it. Those with an interest in eugenics used friendly visiting to identify individuals who they labeled “feeble-minded” or who supposedly had a hereditary tendency toward pauperism. Despite its faults, the practice of friendly visiting demonstrated greater respect for the poor as individuals, not simply as a problem that the rich could expunge with money.

The Flower Mission used the strategy of friendly visiting in a more progressive way to determine how to best help their patients rather than to discern which individuals were worthy of aid. Flower Mission member, Mrs. William Elder, wife of a prominent real estate developer in Indianapolis, recorded the typical procedure for Flower Mission cases, saying,

Most of our patients come to us through the Indianapolis Charity Organization, which thoroughly investigates each case and decides if it properly belongs to us. Then it is immediately referred to our acting Vice-President, whose duty it is to investigate it . . . . Then another member takes it under her special care, visiting it two or three times a week . . . and

216 Trattner, From Poor Laws to Welfare State, 93; Hoy, Chasing Dirt, 101.
218 Trattner, From Poor Laws to Welfare State, 99.
when discharged, continuing, if possible, friendly visits. In no case is money given directly to the poor . . . \footnote{220 Mrs. William L. Elder, “The Indianapolis Flower Mission,” in \textit{State of Indiana Annual Comparative Statement of the State Charitable and Correctional Institutions, from November 1, 1889, to October 31, 1890}, Compiled from the Quarterly Reports Made to the Board of State Charities, published December 10, 1890, approved for publication by Oscar C. McCulloch and John R. Elder, (http://books.google.com/books?id=8BsXAAAAYAAJ&pg=RA11-PA104&dq=Indianapolis+Flower+Mission&cd=5#v=onepage&q=Indianapolis%20Flower%20Mission&f=false accessed April 8, 2010), 104.}

Because the Charity Organization Society pre-screened Flower Mission cases to determine whether the applicants deserved aid, the Flower Mission generally provided help to all the cases assigned to it, regardless of the visitor’s opinion of the applicants. Still the Flower Mission did limit its expenditures to those who were sick. On one occasion in 1894, the Flower Mission provided nursing services to a family of four who was sick with typhoid. Healthy relatives of the family tried to get the Flower Mission nurse and visitor to give them food and other supplies, and the visitor had to insist that Flower Mission resources were only to help the sick, not the well.\footnote{221 \textit{Report of the Indianapolis Flower Mission, 1894}, pp. 12-13.}

That the group served people of all nationalities and races further demonstrates that the Flower Mission used the practice of friendly visiting for charitable rather than discriminatory goals. Flower Mission patients included Germans, English, Irish, and Scots, as well as both black and white patients.\footnote{222 \textit{Indianapolis Flower Mission Seventh Annual Report, May 1884-1885}, IFM Records, 16.} The Flower Mission’s willingness to visit and care for African-American patients as early as the 1880s makes the group particularly noteworthy in an era of widespread racial discrimination. In addition to going to homes, the Flower Mission consistently visited the hospital with flowers, treats, and Christmas cards.\footnote{223 \textit{Report of the Indianapolis Flower Mission, May 1886-1887}, IFM Records, 17.}
Work with Children

Visiting the needy in their homes made the Flower Mission members aware of another set of needs—those of children. The Flower Mission Yearbook from 1884 notes, “Our ladies often become interested in the children of the homes where they visit. We call these little people ‘The Flower Mission children.’” Mission members noted that children were often uniquely susceptible to disease and that the polluted air and crowded conditions of the city often exacerbated their problems. To provide the children some relief, the Flower Mission began taking groups of mothers and children for day trips in the country in the 1880s. The project became more formal in 1890. Learning that extreme summer heat often resulted in death for infants and young children in Indianapolis, the Charity Organization Society, the Flower Mission, and the Flower Mission Training School for Nurses joined together to create the Summer Mission for Sick Children or the Fresh Air Mission. McCulloch served as president of the organization and several Flower Mission members served on the executive committee.

The Summer Mission served sick children and their mothers by sending nurses to their homes to give instruction, by providing day care at a fresh air camp, and by sending patients on occasional week-long visits to the country. The main focus of the project was opening a day camp at Fairview Park just outside the city. Citizens Street Railway Company provided use of the land and free transportation for the patients and volunteers. The camp opened on July 14, 1890, and served 137 children and 99 mothers during that...
summer. By 1894 the camp had permanent cottages built to house the patients. In 1894 the Flower Mission reported that every Tuesday from May to October was “Flower Mission Day” at Fairview Park and the Flower Mission could bring its patients to the camp to enjoy cleaner air and cooler temperatures. The camp operated until 1924 and the Summer Mission for Sick Children remained in existence even longer and funded other agencies that helped sick children. 

The Summer Mission for Sick Children provided important care, but medical facilities for children remained inadequate. In the beginning of the nineteenth century, few hospitals or doctors provided services specifically for children. Women’s organizations around the United States began to provide medical facilities for children, and the women of Indianapolis longed to join them. The Flower Mission wanted to create a hospital for women and children in 1883, but could not raise sufficient funds. In 1894 the Flower Mission Yearbook noted that the organization again dreamed of creating a hospital just for children. That dream became a reality in 1895 when Col. Eli Lilly and his wife donated a home at the corner of Capitol Avenue and Ninth Street and funds to create a children’s hospital in memory of their daughter, Eleanor. The Lilly family continued to support the hospital financially and the Eli Lilly Company provided

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228 Ibid., 205-206.
230 Weeks, Oscar Carleton McCulloch, 205-206.
231 In the eighteenth century some European doctors began to focus on children’s unique medical needs and create the specialty of pediatrics (Porter, Greatest Benefit, 382-383).
medicine to the hospital free of charge. Additional funds for the hospital’s creation came from the Mark Davis bequest.

The Eleanor Hospital for Sick Children opened on June 14, 1895, and had thirteen beds and a surgery. Most of the Eleanor Hospital patients could not afford to pay for their treatment and were cases from organizations such as the Indianapolis Orphan Asylum or the Board of Children’s Guardians. Some of the children needed little more than proper nourishment and care. Mrs. Elder wrote of the Eleanor Hospital, “We take a class of children who can be cared for nowhere else, the cases declared incurable . . . . Children pronounced dying, but who were only starving or suffering for lack of proper food, are often cured.” Flower Mission members regularly visited the Eleanor Hospital to provide flowers and treats for the patients.

The Eleanor Hospital fulfilled a vital niche in Indianapolis public health services, but it was relatively short-lived. The hospital closed in January 1909 because its building was “inadequate and unsanitary” and the Flower Mission could not afford to rebuild. The Eleanor Hospital’s patients moved to the City Hospital. In spite of its short existence of thirteen years, the Eleanor Hospital provided life-saving services to its patients and probably inspired the creation of the James Whitcomb Riley Hospital for Children which opened fourteen years after the Eleanor Hospital closed.

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235 Alberta J. Tharpe, Flower Mission Finance Committee, to the Indianapolis Flower Mission President, October 31, 1902; Board of Directors Meeting Minutes, October 16, 1902, IFM Records.
237 Ibid.
238 Elder, “The Indianapolis Flower Mission,” 104-105; Board of Directors Meeting Minutes, June 6 and June 27, 1901, IFM Records.
240 Rice, “History of the Medical Campus,” 262.
**Tuberculosis Work**

The Flower Mission’s final task was fighting a disease the women saw often on their visits—tuberculosis. Both Flower Mission lay visitors and paid Flower Mission nurses encountered TB and the group sought to address the growing problem of how and where to care for tuberculosis patients in order to promote recovery and stop the spread of the disease.241

The Flower Mission was not alone in working to eradicate tuberculosis. Nationally tuberculosis was one of the most common and easily spread diseases in the nation’s growing cities. Early health reformers sought to address the problem by creating sanatoria, modeled after Edward Trudeau’s institution in New York in the 1880s.242 The most important scientific breakthrough came in 1882 when Robert Koch discovered the tuberculosis bacilli. Koch’s initial discovery and the research that followed demonstrated that tuberculosis was preventable and could be eradicated, thus fueling the anti-tuberculosis movement.243 The organization of the National Tuberculosis Association in 1904 marked a key point in the crusade of voluntary organizations to eliminate tuberculosis through public education campaigns, creation of medical facilities for tuberculosis patients, and development of new treatments for the disease.244

The Flower Mission’s anti-tuberculosis work focused on providing healthcare and facilities for the sick. This project was an important one particularly for Indiana. At the

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244 Teller, The Tuberculosis Movement, 43-44; Shyrock, National Tuberculosis Association, 78.
beginning of the twentieth century, Indiana did not have a hospital for patients with advanced cases of tuberculosis.\textsuperscript{245}

The Flower Mission celebrated its twentieth-fifth anniversary in 1901 and as part of the celebration an anonymous donor gave $5,000 to build a hospital for “incurable” cases of tuberculosis. The gift came with one condition though; the Flower Mission had to raise an additional $5,000.\textsuperscript{246} The members worked hard to raise the money throughout 1901 and into 1902 and eventually succeeded.\textsuperscript{247} The City of Indianapolis provided the property and allocated $1,000 per year to support the hospital. The Flower Mission Hospital for Incurables opened on November 27, 1903, with twenty-eight beds.\textsuperscript{248} The hospital remained in operation at that same location for twenty years.

Chapter Four will discuss the Indianapolis Flower Mission’s efforts to ensure that the city continued to have a tuberculosis hospital into the 1930s.

The Indianapolis Flower Mission created a much-needed tuberculosis hospital, but the institution had only twenty-eight beds, while Morris Ross, the dedication speaker for the Hospital for Incurables, noted that 4,393 people died of tuberculosis in Indiana in 1903.\textsuperscript{249} The Flower Mission remained committed to helping those whom their hospital could not accommodate. The organization employed visiting nurses who cared for tuberculosis patients in their homes up through the late 1910s. By the 1930s, the Flower Mission paid one of their members, Rose Noerr, to serve as a professional visitor. Mrs. Noerr started in 1917 as a volunteer visitor for the group and continued her work for

\textsuperscript{245} Smith, “They Brought Flowers.”
\textsuperscript{246} Mabel Wheeler, “With An Envious Record of Service to the Sick and the Needy, Flower Mission Will Celebrate its Golden Anniversary Monday,” \textit{Indianapolis News}, October 16, 1926; Board of Directors Meeting Minutes, June 13, 1901, IFM Records.
\textsuperscript{247} Board of Directors Meeting Minutes, January 9 and February 26, 1902, IFM Records.
\textsuperscript{248} Rice, “History of the Medical Campus,” 263.
\textsuperscript{249} Ibid., 262-263.
forty-three years until 1960. By 1930 the Flower Mission served only tuberculosis patients.

When Mrs. Noerr first started as a Flower Mission visitor in 1917, she went to homes to see that children received proper care. The Flower Mission often provided milk for families that needed it, particularly those with tuberculosis, because a diet rich in eggs, milk, and other healthy foods supposedly helped cure patients. Noerr often solicited donations for milk. Her favorite tactic was arriving when someone was going to have a party with cake, ice cream, and other treats. She would look at the spread of food and ask for donations for starving children. “‘It worked every time,’” she said.

In the 1930s Mrs. Noerr continued to visit patients in their homes and provide groceries such as milk and eggs as well as investigate other needs. On one visit, she brought some potential donors to see the Walton family, a widow who was in a brace, and her three children. The family lacked an adequate stove and the other visitors provided one. Noerr sometimes pronounced judgment on lazy patients. She reported the home of Roy Bills was the “filthiest place on earth, wife was married at 13 and does not want to work [to] keep house. Mr. Bills should not be there but there is no place to take him.” The Flower Mission provided the family with milk, but could do little else. At times Mrs. Noerr was the only person who would help the patients and she often sought to get the neediest into public institutions like Sunnyside Sanatorium or the County Infirmary. In the case of Mrs. Ida Jones, whose bad limb made her unable to care for herself, Mrs. Noerr convinced her to go to the County Infirmary, but had to wash her

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251 Ibid.
252 Rose Noerr, Visitor’s Report, January 1931, IFM Records.
253 Rose Noerr, Visitor’s Report, February 1931, IFM Records.
clothes before she was presentable enough to go. Later after Mrs. Jones died, her relatives did not even want to attend the funeral and it was up to Noerr to make the arrangements.²⁵⁴

Noerr continued to provide essential services to those who needed it the most through the 1930s, but as her health declined, she limited her visiting to the Flower Mission Hospital until her retirement in 1960. Without the dedication of Mrs. Noerr, the Flower Mission slowly phased out direct service to patients.

From 1883 through the 1920s the Flower Mission went through several transformations, expanding its work from delivering flowers to supporting nursing work through the Flower Mission Training School for Nurses and the visiting nurse program, working with children through the Fresh Air Summer Mission for Sick Children and the Eleanor Hospital, and fighting tuberculosis through care for the sick in their homes and the creation of the Flower Mission Hospital for Incurables. Though meeting spiritual and emotional needs through delivering bouquets continued to be a priority for the Flower Mission, the encouragement of Rev. Oscar McCulloch and the Flower Mission members’ own awareness of the needs of the Indianapolis community moved the Flower Mission toward meeting physical and medical needs as well. From 1883 on, the Flower Mission did become increasingly useful.

The creation of the Flower Mission Training School for Nurses in 1883 was a turning point for the group as it resolved to provide practical health services to the poor. But the 1927 dilemma over whether to continue direct service to patients was far more traumatic as the Flower Mission faced the most divisive crisis of its existence.

Previously the Flower Mission was one of the few organizations available to help the sick

²⁵⁴ Ibid.
poor. But by 1927 many more organizations provided relief and agencies and donors expected workers to be professionals, whether trained nurses or social workers, rather than volunteers.²⁵⁵

As a result of these changes, the Flower Mission’s main financial supporter, the Community Fund, pressured the group to stop paying a visitor to work directly with patients and provide milk and other groceries.²⁵⁶ The Flower Mission had already noticed a significant decline in the number of its patients even after it hired a professional nurse to handle its visits, had established a permanent office with the Family Welfare Society, and sent out business cards to doctors, police, and others who might refer patients.²⁵⁷ In spite of its efforts, the Flower Mission failed to garner new patients and when its new nurse, Belle Emden, started in June 1927, she found that other social service agencies did or could have easily handled most of the Flower Mission’s cases.²⁵⁸

Facing threats of decreased funding from the Community Fund and doubting the efficacy of their work, the Flower Mission Board of Directors voted on September 19, 1927, to end their direct service to clients and focus solely on the Flower Mission tuberculosis hospital. Six members voted for the plan; two voted against it.²⁵⁹

The directors’ unprecedented action proved more controversial than they expected. The Indianapolis Star described the January 1928 annual members meeting this way: “A smouldering [sic] conflagration leaped into flames yesterday and culminated in the resignation of the board of directors of the Flower Mission Society . . . and the

²⁵⁵ Trattner, From Poor Laws to Welfare State, 102-103.
²⁵⁷ Board of Directors Meeting Minutes, June 13, 1927, IFM Records.
²⁵⁸ Belle Emden, Visitor’s Report to Board of Directors, 1927, IFM Records.
election of an entire new set of officers by the opposing forces.”260  The vote to end direct service to patients split the Flower Mission into two factions. One faction, led by Flower Mission President Mrs. Frank W. Wood and most of the board of directors, supported the decision to end direct service. The other faction, led by long-time treasurer Ruth Lowes, felt the decision to end direct service work undermined the organization’s original purpose, destroying its identity. Before the meeting of the general membership, the directors had a short meeting and discussed their September decision. The entire board, except Mrs. Lowes, felt it had acted rightly. Finally the disagreement became so heated that one officer, Mrs. Gall, made a motion that the board members that supported Mrs. Wood’s faction should simply resign since their decision had been so controversial. The motion carried and all the board members that supported the elimination of the Flower Mission’s direct service left the group, leaving Mrs. Lowes triumphant.261  At the meeting of the Flower Mission membership directly afterward, the group elected a new board that would reinstate direct service, with Mrs. Stowell C. Wasson as president and Mrs. Lowes as treasurer.262  The Flower Mission remained committed to working directly with clients, in spite of what the Community Fund and the previous board thought.

In response to the Flower Mission members’ repudiation of her decision, outgoing President Wood, wrote a report defending her board’s action. In it she wrote,

When the Flower Mission Society started 51 years ago to do its pioneer work among the sick poor there were only two hospitals, no Catholic Community Center, no Jewish Federation, no T.B. Clinic, no Sunnyside . . . and no Riley Hospital. So there was work to be done and it was done in a splendid self-sacrificing way, but as various agencies came into existence the work of the Flower Mission Society gradually lessened. For

260 Pickett, Indianapolis Star, January 5, 1928.
262 Pickett, Indianapolis Star, January 5, 1928.
some time there has been a just criticism that the Flower Mission is duplicating the work of other organizations.\textsuperscript{263}

Mrs. Wood concluded that if the Flower Mission did not give up direct service work, it would die out completely. She also insisted that building a new tuberculosis hospital remained a vital task. She concluded by saying, “None of the sick poor have been neglected because we have discontinued family work nor is there any danger that they will not be well taken care of.”\textsuperscript{264}

In contrast to Mrs. Wood’s position, Mrs. Lowes argued that the Flower Mission was created in order to help the sick poor, and “if that is taken away from the organization, it will lose the thing it was instituted primarily for.”\textsuperscript{265} The Flower Mission had worked directly with patients for so long that providing those services was an essential part of its identity. Thus direct services remained.

Subsequent Flower Mission history provides some vindication for Wood and her decision to end direct relief to patients. Though the Flower Mission did not die out because of its refusal to cooperate with the Community Fund, it did face increasingly strained relations with the organization and eventually broke from it entirely.\textsuperscript{266} Financial pressures from the Depression and the necessity of building a new tuberculosis hospital resulted in gradual neglect of Flower Mission direct services. Though Mrs. Noerr continued to serve as the paid Flower Mission visitor, her resources were limited. Rather than a clean break from its work, the Flower Mission direct services gradually faded away and the organization’s focus turned to the hospital. More than a decade later,

\textsuperscript{263} Mrs. Frank Wood, “Report of President at Annual Meeting 1927 Incorporating the Secretary’s Report,” IFM Records.
\textsuperscript{264} Ibid.
\textsuperscript{265} Pickett, Indianapolis Star, January 5, 1928.
\textsuperscript{266} Board of Directors Meeting Minutes, January 4, 1951, IFM Records.
Mrs. Wood and her faction did eventually get what they wanted, though they were no longer part of the Flower Mission by that time.

Though the Indianapolis Flower Mission’s history from 1883 through 1927 was one of “increasing usefulness” and it fulfilled an important public health role in the city for many years, by the end of the period the Flower Mission’s traditional work began to diminish. Still, its most extensive and challenging project was ahead. Starting in 1930 the Flower Mission initiated a campaign to build a new tuberculosis hospital. Its fundraising, public relations, and lobbying efforts to ensure the hospital’s completion marked the high point of the Flower Mission’s effectiveness and influence.
Chapter Four: “What the Clubwomen Want, They Can Have”:
The Campaign to Build the Indianapolis Flower Mission Memorial Hospital, 1927-1937

The women of the Indianapolis Flower Mission asked the city fire marshal in 1930 to examine the house they had been using as the Flower Mission Hospital for Incurables, because they feared the building was unsafe. Upon inspection, the fire marshal promptly condemned the building as a fire trap and ordered the organization to remove its patients. In the wake of this setback, the Flower Mission launched a major fundraising and lobbying campaign to build a new hospital for the city’s tuberculosis patients.

As Chapter Three demonstrated, the Indianapolis Flower Mission already had a long list of accomplishments by 1930, including founding a nurses’ training school, a visiting nurse program, the Eleanor Hospital for Sick Children, and the Flower Mission Hospital for Incurables. But building the new tuberculosis hospital would be its most challenging task yet. The Flower Mission committed its endowment fund to the project and worked to raise additional money. The main obstacle to its progress was a reluctant city government. The City Hospital had administered the previous Flower Mission Hospital and the Flower Mission now asked the city to fund half the construction costs and commit to operating the completed institution. In the midst of the Great Depression, this was not an easy sell. Despite the Flower Mission’s committed lobbying and efforts to enlist local clubs on behalf of its cause, it was not until 1934 when the New Deal’s Public Works Administration (PWA) provided partial funding for the construction that the city accepted responsibility for operating the hospital.
The 1930s campaign to build the Indianapolis Flower Mission Memorial Hospital is a case study that illustrates that flower missions gave women an opportunity to express themselves outside their homes and to exercise business and political skills. Especially in their later years, flower missions brought women into direct involvement with politics through projects to better the community. In its campaign to build its new tuberculosis hospital, the Indianapolis Flower Mission pressured the Indianapolis Board of Public Health to fund the project, conducted a public relations campaign to mobilize public opinion in its favor, cooperated with the New Deal, and lobbied for state legislation to fund the completed hospital.

This chapter specifically responds to Paula Baker and Elisabeth Israels Perry’s pleas that historians view women’s reform activities as politics, even if the women themselves did not use the term. As explained in Chapter One, Baker’s revised definition of politics says, “‘Politics’ is used here in a relatively broad sense to include any action, formal or informal, taken to affect the course or behavior of government or the community.” By Baker’s definition, the work of the Indianapolis Flower Mission in the 1930s undoubtedly falls under the category of politics. Additionally, this thesis builds on the notion that Progressive-era women’s reforms were politics because the women interacted with city, state, and national governments and had to pass budgets, lobby for new laws, and ensure enforcement of their reforms. The women of the Indianapolis Flower Mission certainly faced such tasks in their efforts to create the Flower Mission Hospital. Converting the Flower Mission Hospital from a dream to a

reality required all the resources and energy the members could muster. The project took a decade to complete and drained the Flower Mission’s financial resources, but eventually resulted in a meaningful contribution to the public health of Indianapolis. This chapter will follow the Flower Mission’s efforts to build its hospital, from its first offer to the city government in 1927 through the hospital’s dedication in 1937, and demonstrate that the types of activities flower missions championed brought their members directly into the political arena.

In her study of the legislative efforts of Indiana women from 1900 to 1920, Barbara Ann Springer argues that these women were “ladylike reformers” who lobbied for changes, but still professed to be ladies and good wives and mothers even as they ventured into politics and functionally had careers as unpaid lobbyists. Springer’s analysis also applies to the women who ran the Indianapolis Flower Mission in the 1930s. As in their earlier history, the Indianapolis Flower Mission’s members were an exclusive group of wealthy, white, Protestant women with powerful connections in Indianapolis society and government. What distinguished this new generation of Flower Mission members was their growing business and political skills and their increased confidence in applying those skills to accomplish their goals.

The Indianapolis Flower Mission president during the 1930s was Gertrude Ross, daughter of early Flower Mission member Julia Goodhart. Mrs. Ross started working with the Flower Mission in 1890 with her mother, served as president of the organization for fourteen years, and remained active in the group until her death in 1950. In

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addition to her Flower Mission work, Mrs. Ross helped administer organizations such as
the Indiana Free Kindergarten Society, the Young Women’s Christian Association
(YWCA), the Boys Club, and the Franchise League. She and her husband, well-known
surgeon Dr. David Ross, were active members of First Presbyterian Church.  

Other important members of the Flower Mission Board of Directors at this time
included Mrs. Anna Buchanan, wife of Charles J. Buchanan, one of the partners in the
successful Flanner and Buchanan Funeral Homes and a member of the state House of
Representatives. Mrs. Buchanan was also involved in a variety of charitable activities
and possessed strong business skills, as she oversaw her husband’s business after his
death and at one time served as vice president of the company. Mrs. Emma Cheyne
was the wife of Frederick H. Cheyne, a successful owner of an Indianapolis electric
company. The Cheynes were members of Meridian Street Methodist Episcopal Church
and were well-known for their hospitality. Finally, one of the most committed Flower
Mission members was Mrs. Ruth A. Lowes who was a member for more than fifty years
and served as treasurer continuously for thirty-four years until her death in 1934. She
was also involved in other charitable work such as the YWCA and the Women’s

ca. 1884-1987 (M 0071), William Henry Smith Memorial Library, Indiana Historical Society, Indianapolis
(hereafter cited as IFM Records); Board of Directors Meeting Minutes, September 7, 1950, IFM Records.
271 George S. Cottman, Centennial History and Handbook of Indiana: The Story of the State from
the Beginning to the Close of the Civil War, and a General Survey of Progress to the Present Time, World
War Supplement, Indiana in the World War (Indianapolis: Hollenbeck Press, 1915), 56; Jacob Piatt Dunn,
Greater Indianapolis: The History, the Industries, the Institutions, and the People of a City of Homes
272 Cottman, Centennial History, Part IV: Who’s Who In Indiana—Brief Biographical Sketches of
Prominent Men and Women, 37.
1914), 141; “Mrs. Anna Buchanan Dies; Mortuary Official’s Widow,” Indianapolis Star, April 21, 1945.
274 Dunn, Greater Indianapolis, 695-696.
275 Memorial for Mrs. Ruth A. Lowes, Reported to Board of Directors, January 1935, IFM
Records.
Department Club and was a member of Second Presbyterian Church. Her husband, James H. Lowes, had served as a captain in the Civil War.  

This group of privileged women primarily focused the Flower Mission’s efforts on the tuberculosis hospital project in the 1930s, but their organization also provided direct services to some individuals who lived in their own homes. These “outside” patients mainly suffered from tuberculosis, and the Flower Mission provided them with fresh milk and sometimes eggs and other groceries as the discretion of its paid visitor, Rose Noerr. Mrs. Noerr oversaw the distribution of special meals and treats during holidays for both the Flower Mission’s regular patients and the residents of the county Poor Farm. Before the fire marshal forcibly closed the Hospital for Incurables, the Flower Mission provided treats for its hospital patients, but after the hospital’s closing, the Flower Mission cared for its outside patients and focused the majority of its attention on building a new hospital.

Beginning around 1900, the Indianapolis Flower Mission had focused on eradicating tuberculosis; by the 1930s TB had become the Flower Mission’s sole concern. The Flower Mission’s first major venture into tuberculosis care came in 1901, when the group had started its first campaign to raise money for a hospital for advanced cases. Partnering with the City Hospital, which had donated the property and agreed to operate the hospital, the Flower Mission had opened its Hospital for Incurables in November 1903.

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277 Visitor’s Report to Board of Directors, January 12, 1928, IFM Records.
278 Visitor’s Report to Board of Directors, September 1931, IFM Records.
279 The Flower Mission referred patients with chronic illnesses other than tuberculosis to other agencies. The February 1932 Visitor’s Report says Mrs. Noerr went to see Charles Harryman, “but not our case. The man has pernicious anemia, not t.b.” IFM Records.
The Flower Mission Hospital for Incurables remained on the campus of the City Hospital until 1923 when the City Hospital tore down the building to make room for a new administration building. The city could take this action because it legally owned the building and the Board of Health ultimately controlled the hospital’s management, although the Flower Mission did have input into hospital decisions.\textsuperscript{281} The Flower Mission moved the hospital to a house on Coe Street for the next eight years. The new location, never intended to serve as a hospital, proved inadequate.\textsuperscript{282} The Flower Mission members recognized the need for a new building and in 1927 appointed a committee to contact the City Board of Health about helping them raise funds for the project.\textsuperscript{283} That same year the Indianapolis Flower Mission offered the City of Indianapolis the $62,000 that was available in the Flower Mission treasury to build a “hospital for throat and chest diseases.” The Flower Mission had several conditions for the gift, including that the city furnish the remaining building funds (which would probably be over $200,000), lay the cornerstone by April 1, 1928, and operate and maintain the hospital. The city refused, insisting the Flower Mission provide a full $300,000 for the building before construction began.\textsuperscript{284}

After their proposal failed in 1927, the hospital project became a lower priority as the Flower Mission struggled with an internal debate over whether to continue providing direct services to individuals, and the nation grappled with the beginning of the Great

\begin{footnotes}
\textsuperscript{282} Rice, “History of the Medical Campus,” 263.
\textsuperscript{283} Board of Directors Meeting Minutes, March 17, 1927, IFM Records.
\textsuperscript{284} Board of Directors Meeting Minutes, June 1, 1927, IFM Records; “Offers City Sum to Build Hospital: Flower Mission Society Seeks Institution to Treat Throat, Chest Diseases,” \textit{Indianapolis News}, June 6, 1927.
\end{footnotes}
Depression. But the need became urgent when the fire marshal condemned the building on Coe Street in 1930. The Flower Mission scrambled to resettle its patients in an already overcrowded City Hospital and within a few months placed all of them either at the City Hospital, Sunnyside Sanatorium, or the patients’ homes. One positive result of the closing of the Flower Mission’s building was that it forced the Indianapolis Board of Health, which ran the City Hospital, to recognize the need for a new tuberculosis facility.

Left with no facility for their tuberculosis patients, the Indianapolis Flower Mission dedicated itself to the building drive with new urgency. The Flower Mission hired Merritt Harrison of the architectural firm Harrison and Turnock to design the hospital and appointed a building committee in September 1930. The Flower Mission also temporarily hired Florence Stone in December to publicize the hospital project. Though the Indianapolis Board of Health also created a committee to study the prospects for the Flower Mission Hospital, two years passed with little progress. Because the Flower Mission lacked the funds and the medical expertise to run the new facility, it could do little to advance the project without the city’s consent. After a November 1931 meeting held at City Hall regarding the tuberculosis hospital, several Flower Mission

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287 Board of Directors Meeting Minutes, September 4, 1930, September 18, 1930, October 2, 1930, November 7, 1930, IFM Records.
288 Board of Directors Meeting Minutes, October 2, 1930, IFM Records.
289 Board of Directors Meeting Minutes, September 4, 1930, IFM Records.
290 Board of Directors Meeting Minutes, December 4, 1930, IFM Records.
291 Board of Directors Meeting Minutes, September 18, 1930, IFM Records.
members concluded the situation was not promising. Certainly, in the midst of the Great Depression, convincing local government to take on another long-term financial responsibility was a daunting task.

To make matters worse, the Flower Mission’s finances suffered and the organization struggled to provide milk and groceries to its outside patients. Income from investments and an allotment from the Community Fund, a joint-fundraising organization for city charities, supported the Flower Mission’s daily activities. But the early 1930s brought financial strain as the Community Fund cut the Flower Mission’s allocation substantially. The Flower Mission refused to liquidate its endowment fund, insisting on saving the money for the hospital, so it had to reduce services significantly in order to return to financial solvency. Only after the Flower Mission stopped accepting new patients, cut salaries, and requested the Board of Health provide for its patients for two months in 1933 did Flower Mission finances returned to the black. Even then the group had to keep expenses to the bare minimum.

The Flower Mission responded to these obstacles in the spring of 1932 with new energy and delved into city politics with the most intensive public relations campaign in its history. In an attempt to garner public support and pressure the city government, the group hired Mrs. Stone again as “Director of an Educational Campaign” so she could “acquaint the public with facts about the Tuberculosis situation.” Stone spoke to women’s clubs and organizations around the city, asking them to sign a resolution

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292 Board of Directors Meeting Minutes, November 5, 1931, IFM Records.
293 David Liggitt to Mrs. David Ross, President of the IFM, December 16, 1932, IFM Records.
294 Board of Directors Meeting Minutes, August 4, 1932, March 2, 1933, IFM Records.
295 Board of Directors Meeting Minutes, August 4, 1932, November 1932, March 2, 1933, IFM Records.
296 Board of Directors Special Meeting Minutes, March 24, 1932, IFM Records.
petitioning the city government to support the Flower Mission Hospital. Stone accurately predicted that this personal appeal, combined with continued newspaper coverage, would mobilize public opinion in the Flower Mission’s favor. The campaign had the added benefit of establishing relationships with groups that could help fund the project. When Stone spoke at a club meeting, she appealed to emotion and would “emphasize the old person, dying of t.b. with no place to lay his head . . . and the innocent child, more susceptible than a grown up, who is daily exposed to the disease which may ruin his whole life.” She then urged the group to support the hospital project by petitioning the city. The clubwomen of Indianapolis had enormous power. She said, “What the clubwomen want, they can have.”

The response of Indianapolis clubwomen (and men) was overwhelmingly positive. Stone spoke to church clubs, college alumni associations, the Daughters of the American Revolution, various branches of the Women’s Christian Temperance Union, Parent-Teacher Associations, and noted Indianapolis organizations such as the Propylaeum. By May 1932 forty-six organizations had responded and by the end of the year nearly 100 groups stood with the Flower Mission on the resolution.

The Flower Mission members had successfully mobilized the club movement of Indianapolis in their favor, but the Board of Health still refused to budge. As club

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297 Board of Directors Meeting Minutes, May 5, 1932, IFM Records.
299 Publicity Chairman’s Reports, 1932, General Method of Procedure, IFM Records.
300 Report of Florence H. Stone, Educational Director of Indianapolis Flower Mission, to Board of Directors, May 5, 1932, IFM Records. Ironically, the Optimist Club had one of the most pessimistic responses to the Hospital Project as several of its members agreed that “it was almost foolish to urge anything now when city has no money.” Report of Florence H. Stone to Flower Mission Board, June 2, 1932, IFM Records.
301 Publicity Chairman’s Report, 1932; Publicity Chairman’s Report at the Annual Luncheon of the Flower Mission, January 5, 1933, IFM Records.
resolutions began to pour in, Evans Woollen, Jr., president of the City Board of Health, wrote a prickly response to the Indianapolis Flower Mission, saying the resolutions were irrelevant and the financial obstacles to the hospital’s completion remained insurmountable. The letter said,

The Flower Mission Society has conferred frequently with the Board of Health in the matter of a tuberculosis hospital. . . . I had thought the Board of Health position in the matter was understood by the Flower Mission Society. Of late I have been receiving in considerable numbers resolutions . . . from ladies organizations and they petition the Board of Health to accept the proferred [sic] gift of the Flower Mission. This petition makes no mention of the financial problems involved. . . . I trust the Flower Mission Society understands our problem better than these other organizations seem to do.302

As powerful as the clubwomen of Indianapolis were, the Board of Health remained unimpressed.

Stone continued the campaign with suggestions for increased political action and her most promising idea looked past the local government to the federal level and the new administration of Franklin Delano Roosevelt. The president-elect supported constructing public buildings to create jobs. Stone asked, “why should not our hospital be the first public building to be constructed in Indianapolis under the program? The money to build is there. And certainly there is nothing that is more needed.”303 Stone also maintained contact with Indianapolis clubs and asked them to create committees to study tuberculosis in the city, which many did.304 Then she turned her attention to the upcoming city elections in February 1933. “We should line up candidates for mayor on
both tickets in favor of our project. The mayor appoints the board of health” (underlining in original).

In spite of the Flower Mission’s enthusiastic public relations campaign, the crucial momentum for the project came from the federal government. The prospect of federal funding motivated the city government to back the project and marked a turning point in the campaign for the hospital. In November 1933, just a few months into FDR’s first term, Dr. Herman Morgan, the secretary of the Indianapolis Board of Health, met with the Flower Mission Board of Directors and proposed the first concrete plan from the city to build the tuberculosis hospital. The Flower Mission would provide $30,000 for materials and the federal government would pay for the labor through the Civil Works Administration. But as with many New Deal experiments, the CWA died quickly and was reborn in agencies like the Public Works Administration, which eventually provided funding for the Flower Mission. The Flower Mission met with officials from the city government, including the mayor and several PWA engineers, to discuss PWA funds for the project on January 10, 1934. The change in agencies altered the project’s dynamic; the PWA would provide fewer dollars, thus the Flower Mission would have to provide more money than initially expected. Still, by February 1934 the Board of Public

305 Publicity Chairman’s Report, February 2, 1933, IFM Records.
306 Minutes of Meeting with Dr. Morgan, Secretary of the Board of Health and the IFM Board of Directors, November 20, 1933, IFM Records.
308 Budget Committee Meeting Minutes, January 10, 1934, IFM Records.
Health agreed on a site for the hospital on the grounds of the City Hospital and promised to maintain the new building.  

At the Flower Mission board meeting on May 3, 1934, the members learned their PWA project was under consideration, but had not received final approval. The members wrote to Washington, using all the political contacts they had to ensure their funding became a reality. Even though the project was not certain, the Flower Mission voted to begin “quiet fundraising” as soon as possible. By June, the organization had received permission from the Community Fund to begin the fundraising campaign and in July 1934 the Flower Mission received the all-important approval from the PWA for their project. The PWA would give $38,500 toward the project, approximately 30 percent of the total needed. The PWA increased its grant to $51,000 in 1935 due to increased construction costs. The City of Indianapolis officially signed the PWA grant, agreeing to build and operate the hospital, in September 1934. 

With PWA funding assured, the Flower Mission began fundraising in earnest. Since its fundraising goal was large (approximately $55,000), the members voted to hire a professional to manage the campaign. Interestingly, at this crucial point the Flower Mission women hired a man to conduct their fundraising and agreed to pay him significantly more than the $60 a month Mrs. Stone received. The board hired

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309 “Health Board Agrees on Tubercular Hospital Site: Flower Mission Unit to be Built on Grounds of City Institution,” Indianapolis Times, February 3, 1934.
310 Board of Directors Meeting Minutes, May 3, 1934, IFM Records.
311 Board of Directors Meeting Minutes, June 7, 1934, July 5, 1934, IFM Records; “PWA Increases Grant for New Hospital Unit,” Indianapolis Star, April 24, 1935. PWA funding for non-federal projects like the Flower Mission Hospital was generally in the form of a grant for 30 percent of the construction costs and a low-interest loan for the remainder of the funding. The Flower Mission refused to go into debt though and raised the remaining money itself. See Leighninger, Long-Range Public Investment, 36-39.
312 “City Indorses Flower Mission Hospital Plan,” Indianapolis Star, September 12, 1934.
313 Board of Directors Meeting Minutes, October 6, 1932, IFM Records.
advertising expert, Edward Hunter, for $100 per week for ten weeks and paid his expenses, though they stipulated that fundraising expenses should not exceed 5 percent of the fundraising goal.\footnote{314}{“An Analysis of Fund Raising Goal for Flower Mission Tubercular Hospital Campaign,” IFM Records; Joint Meeting of the Board of Directors and Advisory Board, July 24, 1934, IFM Records; “E. W. Hunger to Direct Campaign to Raise Funds for Hospital Unit: Flower Mission to Erect Building to Care for Helpless, Penniless Victims of Tuberculosis,” \textit{Indianapolis Star}, August 19, 1934.}

On September 17, 1934, the Flower Mission officially launched its fundraising campaign with a luncheon at the prestigious Columbia Club in downtown Indianapolis. The event included presentations from important guests including Flower Mission president Gertrude Ross and the mayor.\footnote{315}{Records of Flower Mission Campaign Meetings, September 17, 1934, IFM Records; “Flower Mission to Open Hospital Drive Tomorrow; Colorful History is Recalled, Organized in 1876,” \textit{Indianapolis Star}, September 16, 1934.} The organization followed up with regular luncheons at the Columbia Club for potential donors and by distributing pledge cards.

Hiring the professional fundraiser did not pay off for the Flower Mission. At the end of September, the board decided not to spend any more money on the campaign, but the women of the Flower Mission worked harder than ever on raising the money themselves. Members of the board went to the Flower Mission offices each day to help in any way possible. They resolved to write fundraising letters to the women’s clubs Mrs. Stone had already contacted.\footnote{316}{Board of Directors Meeting Minutes, September 27, 1934, IFM Records.} In October the Flower Mission board increased their personal involvement by going to specific clubs around the city and conducting the “one dollar campaign” at each.\footnote{317}{Board of Directors Meeting Minutes, October 4, 1934, IFM Records. The Cervus Club independently raised over $750 for the hospital by holding a card party, “Club Furnishes Hospital Room: Turns Over Funds to Aid in Flower Mission Campaign,” \textit{Indianapolis Star}, November 25, 1934.} The Flower Mission members voted their campaign would end on December 6. In order to reach their goal, the board sold some of the Flower Mission’s stock at a loss and donated the principal from one of its memorial
funds. Sadly, one of the Flower Mission’s most committed fundraisers, Mrs. Lowes, died on November 9, 1934, about a month before the Flower Mission realized its goal. Mrs. Lowes had been working to raise funds for the hospital up until a week before her death.

At long last the Flower Mission reached its fundraising goal for the Flower Mission Hospital. The group had $113,000, which included the New Deal money, in December 1934. The Flower Mission board wrote to the City of Indianapolis, saying they had the funds in hand and requesting a meeting to discuss management of the Indianapolis Flower Mission Memorial Hospital. The Flower Mission members were overjoyed at achieving their long-sought goal, but as the same time they faced a harsh reality. The Flower Mission ended the year without paying its monthly bill to the Polk Milk Company because of insufficient funds. The Flower Mission had realized a monumental achievement, but the hospital was far from complete.

The Indianapolis Flower Mission finally saw some of the fruits of its labor at the May 14, 1935, groundbreaking of the Flower Mission Hospital. On September 28, 1935, the organization laid the cornerstone and celebrated with an extensive program that received generous newspaper coverage. The Flower Mission members showed their enthusiasm for the New Deal and the administration that made it possible by extending an

318 Board of Directors Meeting Minutes, November 20, 1934 and Board of Directors Called Meeting Minutes, November 30, 1934, IFM Records.
319 “Mrs. James Lowes Dies; Rites Monday,” Indianapolis Star, November 10, 1934.
320 Board of Directors Meeting Minutes, December 6, 1934, IFM Records.
unsuccessful invitation to First Lady Eleanor Roosevelt to attend the cornerstone laying ceremony.\textsuperscript{323}

Even as the Flower Mission members finally saw their project become a reality, they faced more political wrangling with the city government. In May 1935 the Board of Health declared it would need $30,000 more for equipment once the hospital was completed. Though exhausted from their previous year’s fundraising, the Flower Mission agreed to help.\textsuperscript{324} When the Board of Health tried to lay all the responsibility for raising money for equipment on the Flower Mission, the members pushed back, saying because the Board of Health made decisions about contracts and costs for the hospital, it bore the primary responsibility for ensuring money was available for furnishings.\textsuperscript{325}

During the remainder of 1935 and much of 1936, the Flower Mission and the Board of Health remained at an impasse over who should provide the equipment. The Flower Mission risked completing its long-awaited building only to see it stand empty and unused. The Flower Mission finally found the solution to its problem with a combination of public and private funding in June 1936. Money left from the wills of Mrs. Susan Butler and her daughter Mrs. Margaret Butler Snow funded the hospital dispensary and another federal grant brought the total funds available for equipment to $38,000.\textsuperscript{326}

The women of the Indianapolis Flower Mission were extremely grateful to President Roosevelt for helping them complete their hospital. Thus when the president planned to come to Indianapolis on September 5, 1936 and tour the city, the women

\textsuperscript{323} Board of Directors Meeting Minutes, September 5, 1935, IFM Records.
\textsuperscript{324} Board of Directors Meeting Minutes, May 2, 1935, IFM Records.
\textsuperscript{325} Board of Directors Meeting Minutes, June 27, July 1, 1935, IFM Records.
\textsuperscript{326} Rice, “History of the Medical Campus,” 264; Board of Directors Meeting Minutes, June 4, July 2, 1936, IFM Records.
invited him to visit their hospital.327 They wrote to the “secret service man in charge of the President’s arrangements calling his attention to the matter.”328 Unfortunately for the Flower Mission, FDR was unable to schedule a visit to the tuberculosis hospital. But that did not stop the Flower Mission members from doing everything in their power to attract the president’s attention as he drove by. After the event they concluded, “The committee feels sure that he saw them and understood about the building.”329 When Mrs. Ross spoke to the mayor, he assured her that the president did indeed see the Flower Mission Hospital.330 The Indianapolis Flower Mission members were unafraid to attempt to engage politicians at the highest levels.

Its hospital was nearly complete, but the Flower Mission faced yet another political challenge, which would require a major lobbying campaign, before their dream could become a reality. In order to provide the $73,000 annually needed to run and maintain the Flower Mission Hospital, the Indiana General Assembly had to pass an increase in the Marion County tuberculosis tax from one to three cents per one hundred dollars of taxable property.331 The Flower Mission resolved to do everything possible to achieve the bill’s passage. Mrs. Stone worked on additional publicity and Flower Mission members organized “hundreds of civic-minded persons” to push the bill. The measure finally passed on March 8, 1937.332

328 Board of Directors Meeting Minutes, September 3, 1936, IFM Records.
329 Board of Directors Meeting Minutes, October 1, 1936, IFM Records.
330 Board of Directors Meeting Minutes, November 5, 1936, IFM Records.
331 “Fund for Hospital Studied at Meeting,” Indianapolis Star, December 11, 1936; “Mission Will Mark 61th Anniversary,” Indianapolis Star, January 10, 1937; Indianapolis Flower Mission Press Release, IFM Records. The state legislature had to approve the tax even though it would be implemented only in Marion County.
At long last the Flower Mission Hospital was almost ready to open. But just as its fundraising and construction took an agonizingly long time, so did its opening. For the tuberculosis patients the Flower Mission cared for regularly in their homes, the need was urgent. Each month the organization’s visitor, Rose Noerr, reported that many patients died waiting for the hospital’s completion. The Flower Mission board hoped that the facility would open by Thanksgiving of 1936 in order to care for a few of the most serious tuberculosis cases, but the Flower Mission itself would have to finance the hospital’s operations because the funding bill had not yet passed. Unfortunately, the Flower Mission’s finances were still fragile and they could not open the hospital early.

One controversy remained for the Flower Mission Hospital. Who could access the publicly-supported hospital’s services? Though the Flower Mission served outside patients of all nationalities and races through its nursing visits, the original Hospital for Incurables admitted only white patients. Since the early 1900s, the Women’s Improvement Club, an African-American organization, had operated a small day camp for black women who had tuberculosis. The facilities could only care for seven patients though and thus the Women’s Improvement Club decided “to petition the Flower Mission to accept colored patients.” The Flower Mission initially agreed to the

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333 Board of Directors Meeting Minutes, August 6, 1936, IFM Records.
334 Board of Directors Meeting Minutes, October 1, 1936, IFM Records.
335 One source says, “The Flower Mission . . . will continue to work in the Flower Mission hospital and will endeavor to provide such nursing diet for colored tuberculous people in their homes until a suitable place can be provided for their care.” Memorandum on Conference of Representatives of the Public Health Nursing Association and Indianapolis Flower Mission, July 21, 1919, IFM Records.
Women’s Improvement Club request in 1916, but in 1918 the group still could not get its patients into the Flower Mission Hospital.\(^{338}\) Eventually the Women’s Improvement Club prevailed and at the dedication of the new Flower Mission Hospital in 1937, Mrs. Ross declared, “All religions and all races will be welcomed to Flower Mission Hospital . . .”\(^{339}\) The hospital was segregated though, with men on the third floor and women on the second floor and whites on the west end of the hospital and blacks on the east end.\(^{340}\) The hospital by-laws mandated the hospital patients were to be half white and half black. The Flower Mission accepted donations for the hospital from the African-American clubs such as the Lotus Dames.\(^{341}\)

Still racial issues remained sensitive at the hospital. The Flower Mission board wanted to prevent the number of black patients from exceeding the number of white patients. On one hospital visit Noerr said, “I was sick when I found 20 colored women and 12 white. I had been told it was a colored hospital. . . . I told them not to put any colored in Cervus Club room, the club will never do anything more for us if they do.”\(^{342}\) President Ross complained about a black man staying in the white ward.\(^{343}\) Only black men could use a special bath tub provided by the Lotus Dames. The Flower Mission wanted to buy a separate one for white men.\(^{344}\) As troublesome as race relations were at the Flower Mission Hospital, they were not unusual. Many hospitals and tuberculosis facilities excluded or segregated African Americans and those that did accept them often

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\(^{338}\) Meeting Minutes, November 23, 1916, February 21, 1918, June 18, 1918, Women’s Improvement Club, Records.


\(^{340}\) Rice, “History of the Medical Campus,” 264.

\(^{341}\) Board of Directors Meeting Minutes, March 5, 1953, March 3, 1938, November 7, 1940, IFM Records.

\(^{342}\) Rose Noerr, Hospital Report, August 1939, IFM Records.

\(^{343}\) Board of Directors Meeting Minutes, July 3, 1941, IFM Records.

\(^{344}\) Rose Noerr, Hospital Report, October 3, 1940, IFM Records.
worried about having too many black patients. In spite of its reluctance the Flower Mission did take positive steps toward helping fulfill the medical needs of the African-American community, particularly in its willingness to care for black patients in their homes as early as the 1880s.

The first people to use the new tuberculosis hospital did not have TB at all, but were refugees displaced by the 1937 Ohio River flood. The Flower Mission formally dedicated the Indianapolis Flower Mission Memorial Hospital on May 12, 1937— National Hospital Day. The program included speeches from the leaders of the Flower Mission as well as the hospital administration. Approximately 500 people attended the event. Mrs. Patrick Connelly was the hospital’s first official patient. After years of planning, saving, fundraising, lobbying, and building, Indianapolis finally had a modern facility to care for patients with tuberculosis.

Though the women who sat on the Indianapolis Flower Mission Board of Directors and ran the Depression-era campaign to build a new tuberculosis hospital considered themselves respectable ladies who were devoted to their families, their work brought them right into the middle of city politics and expanded women’s roles in municipal decision-making. Perry wrote of Progressive-era women’s work for reform,

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347 Rice, “History of the Medical Campus,” 264; Board of Directors Meeting Minutes, February 4, 1937, IFM Records.
348 Started in the 1920s and held annually on May 12, Florence Nightingale’s birthday, National Hospital Day was an occasion for hospitals to invite the public to tour their facilities and learn about the need for and the accomplishments of the modern hospital. Rosemary Stevens, In Sickness and In Wealth: American Hospitals in the Twentieth Century (New York: BasicBooks:1989), 110-111.
349 Board of Directors Called Meeting Minutes, May 10, 1937 and Board of Directors Meeting Minutes June 3, 1937, IFM Records; “Flower Mission Hospital to be Dedicated Wednesday,” Indianapolis Star, May 9, 1937; “Parley Here: Flower Mission Hospital to be Dedicated May 12; Climaxes Group’s Work,” Indianapolis Times, April 26, 1937.
350 Rice, “History of the Medical Campus,” 264.
“they came right up against town councils, mayors, state legislatures, federal agencies, and Congress. To get changes accomplished, they had to get ordinances and laws passed, budgets drawn, appropriations made, experts and officials hired, and enforcement officers trained and supervised. . . . All of that activity is ‘politics.’” Perry’s analysis describes the Flower Mission Hospital campaign perfectly.

In order to see that Indianapolis had a public tuberculosis hospital, the women of the Flower Mission donated their own endowment fund, pressured the city Board of Health, promoted their cause in a public relations campaign, secured two federal grants, raised additional money, supervised the city’s construction work, and lobbied for a tax increase to support the hospital. They did all this on a limited budget in the midst of the worst depression in United States history. The Indianapolis Flower Mission members accomplished a significant achievement for their city and for their sex.

The Flower Mission not only provided additional services for the sick poor, but it also enabled women to work outside of their homes (albeit often without pay) and involve themselves in political and business affairs. By the 1930s, social expectations about women’s roles had relaxed some and women had the right to vote, but women still had much ground to gain.

Baker and Perry challenge historians to examine women’s activity in the late nineteenth and early twentieth centuries as politics, even though at the time women did not have the vote and had to use informal means to change their communities. This chapter applies Baker and Perry’s thought to the 1930s after women had the right to vote and could influence public policy in both informal and formal ways. The Flower Mission members’ political campaign to build the tuberculosis hospital was possible because of

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351 Perry, “Men Are from the Gilded Age, Women Are from the Progressive Era,” 40-41.
previous Flower Mission efforts that historians would not necessarily consider politics. Baker and Perry argue that informal efforts to encourage sanitation laws or assure public funding for tuberculosis prevention did constitute politics. Early Flower Mission efforts to found new services like the visiting nurse program or create their own institutions like the Nurses’ Training School or Eleanor Hospital gave the women confidence and experience that they could pass on to their offspring who were involved in the Flower Mission in the 1930s. Earlier work also established the reputation of the Flower Mission as a respectable and effective institution. All these efforts that were less obviously political provided the building blocks for success in the 1930s campaign to build the new hospital.

The Indianapolis Flower Mission’s long tradition of enabling its members to engage in activities outside their homes prompted one newspaper to deem it “among the pioneer women’s organizations.” The women entered the male sphere of business through their professional approach to administering an organization that was legally incorporated and had a formal structure with officers and by-laws. Their reputation for achieving their goals and persuading powerful businessmen to support their cause was well-known as early as the 1880s. “The Flower Mission has seldom entered upon any enterprise without success. It has been remarkable that the average capitalist of this city becomes as clay in the hands of the potter when assaulted by an officer of that persuasive body . . .” The Flower Mission established a training school for nurses in part to provide an opportunity for women to pursue respectable careers outside their homes. A

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353 Flower Mission Cottage and Training School for Nurses (Indianapolis: Carlon and Hollenbeck, Printers and Binders, 1883; reprinted by Marion County General Hospital Printing Department, 1961), Indiana Collection, Indiana State Library, Indianapolis, 4.
pamphlet supporting the school noted, “Do women, intelligent, enthusiastic and able to
work, demand respectable and well paid employment? No one doubts it.”\textsuperscript{354} They
visited the sick in all parts of the city, including “unfrequented alleys” and “unsavory
tenement blocks” where respectable middle-class women rarely went.\textsuperscript{355} The practice of
friendly visiting in which the Indianapolis women participated helped create a new
profession of social work that provided new career opportunities for women.\textsuperscript{356}

Their group’s past achievements provided Flower Mission members with the tools
and reputation to achieve their most challenging project of building the Flower Mission
Memorial Hospital. The organization’s subtle and informal forays into politics starting in
the 1870s provided a foundation for a significant accomplishment in the 1930s. The
Flower Mission Hospital also added to this tradition of enlarging women’s public roles.
A case study of the Indianapolis Flower Mission in the 1930s shows the organization
brought women into politics and helps illuminate how women slowly took on greater
public roles in the years following suffrage. Flower missions were thus much more than
trite sentimentality; they were important vehicles for women’s empowerment.

\textsuperscript{354} E.F. Hodges, “A New Profession for Women,” in \textit{Flower Mission Cottage and Training School
for Nurses}.
Service Review} 49 (June 1975): 244-245.
Conclusion: Unique or Unexceptional?

1938-1993

The completion of the Indianapolis Flower Mission Memorial Hospital in 1937 marked the high point of the group’s activities. The Indianapolis Flower Mission failed to reinvent itself with a new focus after tuberculosis ceased to be the grave public health concern it had been in the late nineteenth and early twentieth centuries. During the fifty years of Flower Mission history after the completion of the hospital, the organization managed a declining number of tasks with a declining number of board members and an increasing number of dollars from its prosperous endowment fund. Still, the Flower Mission did embrace some changes such as funding new life-saving drugs and procedures at the City Hospital. But on the whole, the Indianapolis Flower Mission started a slow decline in activity and eventually lost the distinct purpose that justified its existence.

From 1937 on the Indianapolis Flower Mission functioned more as a hospital auxiliary than a hospital-building institution. The members provided patients at the tuberculosis hospital with additional comforts and entertainment, including flower bouquets. They also provided special treats for Easter such as butter or fruit and gave an annual Christmas party, complete with entertainment, decorations, and gifts for the patients and staff. The Flower Mission continued to give this annual party until at least 1987. As television sets became more popular, the organization bought several for the hospital and paid for their repair.

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358 Board of Directors Meeting Minutes, April 4, 1940, December 3, 1940, IFM Records.
359 “St. Nick Visits Flower Mission Hospital,” Indianapolis Star, December 23, 1944; President’s Notes on Board of Directors Meeting, November 5, 1987, IFM Records.
360 Board of Directors Meeting Minutes, June 1, 1960, IFM Records.
In the 1930s and 1940s, the Flower Mission continued to serve its outside tuberculosis patients, sending a visitor to their homes and providing a healthy diet that included fresh milk for those who could not afford it. The group also gave special meals at holidays like Thanksgiving and Christmas. Rose Noerr continued to work as the Mission’s paid visitor until 1940 when ill health forced her to resign and limit her visits to patients in the hospital. Eventually the organization reached an agreement for the Board of Health’s tuberculosis nurses to care for the Flower Mission’s patients.

Though the Flower Mission persisted in its social service work, the hospital work gradually eclipsed direct services as more and more of the Flower Mission’s resources went to support the hospital. The Flower Mission paid for innovations and medical improvements in the hospital. Starting in 1941 it paid the salary for a resident physician at the tuberculosis hospital, since the City Hospital could not afford the expense. The most significant Flower Mission contribution to the hospital came in 1947 when the organization voted to give $1,000 to pay for the use of the new drug streptomycin, which proved to be the first successful treatment for tuberculosis. The Flower Mission funded the initial, experimental use of the drug for three patients in its hospital in 1947 and had good results. After two years of success with streptomycin treatments, the Flower Mission voted to stop providing milk to outside patients and instead use its money to provide streptomycin for patients in the hospital. The decision to fund streptomycin

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361 Rose Noerr, Visitor’s Report, July 1940 and December 1940, IFM Records.
362 Board of Directors Meeting Minutes, December 5, 1940, IFM Records.
363 Board of Directors Meeting Minutes, September 9, 1941, October 2, 1941, IFM Records.
364 Board of Directors Meeting Minutes, May 16, 1941, May 7, 1942, April 4, 1946, IFM Records.
367 Board of Directors Meeting Minutes, September 1, 1949, October 6, 1949, IFM Records.
rather than milk continued the gradual turn away from direct service to patients. It also symbolized the Flower Mission’s enthusiasm for innovative medical treatments.

The Flower Mission continued to provide funds to improve medical care at the hospital. Starting in 1957 the group gave scholarships to female nursing students at the hospital nursing school. It continued the practice through the 1960s. The Flower Mission also furnished and remodeled rooms at the hospital as needed. The members funded the purchase of new medical equipment. One of the most cutting edge projects the Flower Mission adopted was giving $5,000 in 1975 for a shock unit that was part of the hospital’s new critical medical care services. Board minutes note that the organization was proud to be the first group to donate in this area.

The Flower Mission’s work changed partially because its hospital was changing as well. As tuberculosis cases declined, the City Hospital (later called General Hospital and then Wishard Memorial Hospital) put patients with pulmonary and cardiac conditions in the Flower Mission Hospital building in the late 1950s. In 1959 the Flower Mission building also housed Krannert Laboratories, created for the study of heart and blood vessel diseases. By the 1970s, the Flower Mission Hospital building was outdated and no longer used for in patient care, but housed rehabilitation services and an outpatient clinic.

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369 “Flower Mission Board Finances Ward Renovation,” Life . . . in General: A Publication of the Health and Hospital Corporation of Marion County, October 1963, p. 9, IFM Records.
370 Board of Directors Meeting Minutes, March 5, 1970, IFM Records.
371 Board of Directors Meeting Minutes, January 9, 1975 and Joseph J. Mamlin, M.D. to Mrs. C.B. Tharp (Recording Secretary of Flower Mission Hospital Board), January 8, 1975, IFM Records.
372 Board of Directors Meeting Minutes, December 6, 1956, IFM Records.
374 Board of Directors Meeting Minutes, November 2, 1972, IFM Records.
The needs of the city of Indianapolis changed greatly after 1937 and General Hospital also changed, but the Indianapolis Flower Mission did not take the lead in responding to these changes as it had in the past. Without significant tuberculosis work to do, the Flower Mission had little direction on how to spend its growing endowment fund. After giving its entire endowment fund to build the tuberculosis hospital in the 1930s, the organization determined to rebuild its fund and use it on another large project. The Flower Mission relied on the Community Fund to provide money for monthly expenses like its milk bills, while the group invested any money it received from donations or wills. Eventually the Community Fund’s frustration with the Flower Mission’s insistence on saving its money resulted in the dissolution of the relationship between the two groups. The Flower Mission was so careful with its money that by 1981 it had total assets of over $104,000.

The group’s Board of Directors was adept at saving its money, but not as skillful at finding a new mission for spending it. As early as 1940 the board fruitlessly discussed finding a new project. Two decades later the Flower Mission faced the same problem and one meeting’s minutes said, “Mrs. Boyer urged members to look for worthwhile projects so we could put our idle money to work on its real purpose—to help TB.” Later someone crossed out the typewritten “TB” and wrote in “sick poor.” The Flower Mission was willing to re-expand its work to include the sick of all types, but did not

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375 At the January 7 and March 4, 1943 Board of Directors Meetings the Flower Mission decided to invest the $5,000 left to it by Col. William Guy Wall in U.S. Government Bonds, rather than spend the money on operating expenses (IFM Records).

376 At the January 5, 1951 Board Meeting, the Flower Mission voted to ask the Community Fund to remove the Flower Mission from its rolls after the Community Fund gave the Flower Mission an allocation of $1 for the year 1951. The Community Fund argued the Flower Mission did not need a greater allowance because it had $1,200 in its account (IFM Records).


378 Board of Directors Annual Meeting, February 1, 1940, IFM Records.

379 Board of Directors Meeting Minutes, January 6, 1966, IFM Records.
have a particular focus. Later the organization’s resources grew to the point that at one meeting, the members discussed the “problem of what to do about a surplus in our bank account for the year.” In addition to giving equipment and nursing scholarships to General Hospital, the Flower Mission donated to the Visiting Nurse Association, Meals on Wheels, the American Lung Association, the Salvation Army, and other societies as well as to selected individual needs. After 1937 the Flower Mission members rarely interacted directly with patients or started their own programs. The organization increasingly functioned like a foundation, writing checks to other organizations.

During its last several decades of existence, the Indianapolis Flower Mission became more of a social group than a charitable institution. Members often hosted meetings in their homes and served refreshments. Sometimes Flower Mission business was the least important part of the meeting. Minutes of one meeting read, “The real highlight of this meeting was a thrilling account by Mary Meek of her two unique experiences this year in participating in achiological [sic] digs sponsored by Earth Watch in Scotland in the areas of the Stone Circles.” Though Flower Mission members seemed to enjoy their involvement, during the organization’s final decades it struggled to recruit new people as its existing members aged. Meeting minutes and other records shed little light on the group’s dissolution, but declining activity and membership probably were the

380 Board of Directors Meeting Minutes, November 1974, IFM Records.
383 Board of Directors Meeting Minutes, January 4, 1979, IFM Records.
384 For example, the May 8, 1984 Board of Directors Meeting Minutes said, “The need for new and younger members was then stressed.” IFM Records.
major factors. As of November 12, 1993, the Indianapolis Flower Mission was administratively dissolved as a non-profit domestic corporation in the state of Indiana.\footnote{Indiana Secretary of State Website, Corporation Records, https://secure.in.gov/sos/bus_service/online_corps/view_details.aspx?guid=00D237E3-52C6-418A-BBA0-1B8A4310CFD4 (accessed on October 6, 2009).}

The Indianapolis Flower Mission’s one hundred and twenty year history included a wide range of activities and innovations that made it the oldest and one of the most respected philanthropic institutions in the city. But how does the Indianapolis institution compare with other flower missions? Was it a typical flower mission or an exception? Because so many flower missions existed around the United States and the world and historians have yet to identify many of them, the following section will only offer a brief and preliminary comparison of Indianapolis with other American flower missions. Still, even a short survey demonstrates that Indianapolis shared many interests with other flower mission though it was unique in its longevity and varied activity.

As Chapter One has already discussed, Indianapolis during its earliest years operated much the same way as other flower missions. The Chicago Flower Mission was organized in 1875, just a year before Indianapolis was, and also attached Scripture texts to its bouquets.\footnote{“Fruit and Flower Mission,” \textit{Inter Ocean}, Chicago, IL, January 12, 1876.} The flower mission in Milwaukee included newspapers and fruit as well as flowers in its deliveries and many flower missions including those in Milwaukee, New York City, San Francisco, and Cleveland provided the poor with meals, decorations, and sometimes gifts at Thanksgiving and Christmas.\footnote{“For Sick People the Worthy Charities of the Flower Mission,” \textit{Milwaukee Sentinel}, August 22, 1887; “City and Suburban News,” \textit{New York Times}, December 18, 1881; “Thanksgiving Charity Remembrance of the Poor and Needy by the Fruit and Flower Mission,” \textit{Daily Evening Bulletin}, San Francisco, CA, November 27, 1884; “Flower Mission,” \textit{Cleveland Daily Herald}, December 9, 1874.} The flower mission in St. Louis
wrote 1,200 Christmas cards one year for patients in the hospital and the Poor House as well as collected fruit, candy, and reading material to distribute. When flower missions did branch out into other activities, they often took on the same types of projects that the women of Indianapolis did, including visiting the sick at home and partnering with Charity Organization Societies to do organized friendly visiting. In San Francisco, the flower mission women formed a visiting committee to see the sick at home once a week and provide for their needs. They even arranged for doctors to visit some of their patients. The Denver Flower Mission most resembled the Indianapolis approach to visiting. One article on the Denver Flower Mission said its members “do systematic district visiting for the charity organization.”

The quest to improve nursing was one project that many flower missions embraced. One article on Jennie Casseday, who helped form flower missions under the Women’s Christian Temperance Union, notes: “The district nurse work owes its birth to the same touch of pain that makes all the world kin and is an outgrowth of contact with the sick poor through the flower mission.” In giving advice on starting a Visiting Nurse Program, one nineteenth-century source recommended partnering with an organization like a flower mission, suggesting that flower missions often supported

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390 “Girls at the Fountain Success of a Project of the Flower Mission Ladies,” Rocky Mountain News, Denver, CO, August 29, 1895.
visiting nursing. The flower mission at First Presbyterian Church in Muncie, Indiana, raised funds for the local Visiting Nurses Association, though it did not start the nurses’ group. Finally, the Denver Flower Mission most closely resembled the nursing work in Indianapolis. The Denver society started paying nurses to visit the sick in their homes in the 1890s and eventually created the Denver Nurses’ Association.

Some flower missions also shared Indianapolis’s focus on supporting hospitals and caring for tuberculosis patients. Though it did not start its own hospitals as Indianapolis did, the flower mission in Honolulu, Hawaii, raised money to endow a free bed at the Queen’s Hospital. And the Flower Mission and Associated Charities in Asheville, North Carolina, specialized in caring for poor tuberculosis patients.

Finally, other flower missions mirrored Indianapolis in the composition of their members, who were often wealthy and well-known in their communities. The members of the Milwaukee Flower Mission were the city’s “leading society ladies.” The St. Louis Flower Mission boasted that many the most influential and prominent men and women in the city were among its members. In San Francisco, the flower mission had

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393 Belle Thomas, The First One Hundred Years: A History of the First Presbyterian Church, Muncie, Indiana (Muncie, IN: Scott Printing, 1938), 116-117.
397 “For Sick People the Worthy Charities of the Flower Mission,” Milwaukee Sentinel, August 22, 1887.
“lady members” and received its support from “several wealthy men of the city.” Like Indianapolis, many flower missions prospered because their supporters and members were of high social standing and wealth.

Indianapolis was unique among flower missions in a few ways though. One difference was its longevity; the group existed for well over one hundred years. Without case studies of flower missions in other cities, it is hard to be sure Indianapolis was the longest-lived flower mission, but it is likely. Additionally, though other flower missions adopted one or two of Indianapolis’s interests as Denver did with nursing or Asheville did with tuberculosis, no other flower mission worked in all the areas. For a moderately sized midwestern city, Indianapolis boasted one of the most successful and active flower missions in the nation. In 1889 the Indianapolis Flower Mission was able to claim that it was second in size only to the flower mission in New York City, which had a much larger population from which to draw. The available evidence suggests that Indianapolis engaged in the same type of work that other flower missions did, though it was unique in the range of its activity and the length of its existence.

The women of the Indianapolis Flower Mission demonstrated great concern that the public realize their work was more than a sentimental charity, but rather provided practical medical services to those who could not afford them. Scholars, however, have disregarded their insistence and termed flower mission work “genteel,” “frivolous,” and “decidedly less vital.” The reason for historians’ hasty dismissal of the value of flower missions is a lack of understanding of what flower missions really did. The impression

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400 Breton Fete and Kirmess in Aid of the Indianapolis Flower Mission (Indianapolis, IN: Baker and Randolph, 1889), 25, IFM Records.
that naïve ladies beneficently, but blindly, showered flowers on poor people who would much rather have had relief from illness or starvation only presents part of the picture. Certainly some flower mission work appears naïve, but when historians consider seriously why people felt giving flowers was helpful and what other tasks flower missions performed, it is clear that flower missions met real needs and thus deserve a scholarly history.

Chapter Two studied who founded the Indianapolis Flower Mission and why. In Indianapolis a group of white, wealthy, leisured, Protestant women who were connected by familial and social ties created the Flower Mission and helped it grow in its early years. Their motives for creating a flower mission reflected the intertwined ideologies of Victorian society regarding nature, religion, gender, and class. The women who ran flower missions believed that everyone should be able to enjoy the beauty of nature, especially those who were sick or in poverty and could not go out and enjoy green spaces. They also believed it was their Christian duty to help others and spread the Gospel. Finally, they believed delivering bouquets was an acceptable charity for middle-class and elite women because it did not challenge gender roles. Understanding the reasons for flower mission work helps historians recognize the value of giving flowers. Receiving a bouquet did not prevent hunger or suffering from an untreated medical condition, but it did meet spiritual and emotional needs for human kindness and moral uplift. Thus delivering flowers was useful and studying flower missions helps historians better understand the ideology of the Victorian era.

But as Chapter Three explored, the women of Indianapolis did not stop at delivering blossoms. As the Indianapolis Flower Mission grew in membership and
resources and began to understand the physical problems its patients faced, it took on new duties that met physical as well as psychological needs. Due to the influence of a Social Gospel preacher, Rev. Oscar McCulloch, and their own awareness of the plight of Indianapolis’s sick, the Flower Mission embraced the philanthropic trends of its day and sought to make its work rational, efficient, and life-saving. While continuing to deliver bouquets, the Indianapolis Flower Mission invested its resources in nursing work by founding Indiana’s first nurses’ training school and creating a visiting nurse program, in care for children by creating the Eleanor Hospital for Sick Children and the Fresh Air Summer Mission, and in anti-tuberculosis work by providing visiting nurse services and creating the first hospital in Indiana to take advanced cases of tuberculosis.

Additionally, flower missions deserve attention not just for the services they provided for the poor, but for the opportunities they provided for the women who ran them as Chapter Four discussed. In the 1930s the Indianapolis Flower Mission sought to build a modern hospital for tuberculosis patients and took on its most challenging project yet as it raised money, pressured the city Board of Public Health to operate the completed hospital, secured a federal grant from the Public Works Administration, and lobbied the state legislature for an increase in the tuberculosis tax to fund the hospital’s operation. The campaign to create the Flower Mission Hospital was important as a piece of city history and the history of anti-tuberculosis efforts, but it also provides a chance to explore how women were involved in politics even as they conducted charitable work that was not overtly political. Flower Mission members in the 1930s did not see themselves as radical and their main priority was seeing their hospital completed, not gaining political power, but their activities still increased women’s ability to be involved in politics and
help historians better understand women’s roles, particularly in the years shortly after women received the right to vote.

Indianapolis is not the only flower mission that had a variety of activities. It was one of oldest and most active flower missions, but other such groups branched out into work besides delivering flowers, including nursing work, anti-tuberculosis work, and provision of hospital care for those who could not afford it. With a just appreciation of the contributions flower missions made to American communities and culture, historians can continue to study them as vital rather than frivolous organizations.


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CURRICULUM VITAE

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