United States Department of the Interior National Park Service 56.599

DEC 1 6 2016

National Register of Historic Places Registration Form

Natl. Reg. of Historic Places
This form is for use in nominating or requesting determinations for individual properties and districts. See instructions in National Register Rufleting Flow to Complete the National Register of Historic Places Registration Form. If any item does not apply to the property being documented, enter "N/A" for "not applicable." For functions, architectural classification, materials, and areas of significance, enter only categories and subcategories from the instructions.

1. Name of Property		
Historic Name: Methodist Home H	lospital	
Other Names/Site Number: N/A		
Name of related multiple property	listing: N/A	
2. Location		
Street & Number: 821 Washington	n Avenue	10 10 10
City or town: New Orleans	State: LA	County: Orleans
Not for Publication:	Vicinity: ☐	
3. State/Federal Agency Ce	rtification	
meets does not meet the Natio	rements set forth in 36 CF onal Register Criteria. considered significant at	TR Part 60. In my opinion, the property the following level(s) of significance:
Applicable National Register Crite	ria: 🛛 A 🔲 B 🔲 C	D 12-11-11a
Signature of certifying official/T	itle: Phil Boggan, State Histor	ric Preservation Officer Date
Louisiana Department of Cultur		
State or Federal agency/bureau	or Tribal Government	
In my opinion, the property me	ets does not meet the	National Register criteria.
Signature of commenting official	al:	Date
Title:	State or Federa	Lagency/hureau or Tribal Government

Name of Property

Orleans Parish, LA County and State

4	National	Park Certification	١
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I hereby certify that the property is:

entered in the National Register

determined eligible for the National Register

determined not eligible for the National Register

removed from the National Register

other, explain://

Signature of the Keeper

1.31.2017

Date of Action

5. Classification

Ownership of Property (Check as many boxes as apply.)

X	Private
	Public - Local
	Public - State
	Public - Federal

Category of Property (Check only one box.)

X	Building(s)
	District
	Site
	Structure
	object

Number of Resources within Property (Do not include previously listed resources in the count)

Contributing	Non-contributing	
1	1	Buildings
		Sites
		Structures
		Objects
1	1	Total

Number of contributing resources previously listed in the National Register: 0

6. Function or Use

Historic Functions (Enter categories from instructions.): HEALTH CARE: hospital

Current Functions (Enter categories from instructions.): COMMERCE/TRADE: specialty store (dog grooming and daycare)

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7. Description

Architectural Classification (Enter categories from instructions.): Modern Movement: International Style

Materials: (enter categories from instructions.)

foundation: concrete

walls: brick

roof: modified bitumen

other: aluminum, cast stone, glass, steel

Narrative Description

Summary Paragraph

Methodist Home Hospital, 821 Washington Avenue, New Orleans, Orleans Parish, Louisiana, is a 2-story former maternity home and hospital located in a predominantly residential section of the historic Irish Channel neighborhood. This low-rise, U-shaped institutional building is steel-frame construction faced with textured red brick and was designed in the International Style from plans dated July 1950 and September 1952 by architect Roy Johns of Monroe, Louisiana. Construction was completed in two phases spanning 1950 to 1953. It is oriented northwest to face tree-lined Washington Avenue, which serves as one of the neighborhood's primary north-south thoroughfares, and occupies the northeast corner of the intersection of Washington Avenue and Annunciation Street, about 4 blocks north of an industrial stretch of the Mississippi River. It is surrounded by densely packed modest housing stock, primarily historic shotgun houses and Creole cottages. The building replaced two converted wood-frame residential structures with numerous rear additions that the Methodists had been utilizing as a maternity home and hospital since 1918. Both the exterior and interior have experienced relatively minor alterations dating to the building's conversion to the Methodist Children's Home (1973) and, later, to a dog daycare business (2011), and thus retains eligibility for listing on the National Register.

Narrative Description

Narrative description:

The 2-story U-shaped building at 821 Washington Avenue was designed in 1950 by architect Roy Johns of Monroe, Louisiana, to serve as a maternity home and hospital for the Methodist conferences of Louisiana, Mississippi, and North Mississippi. Since 1918, the institution that the Methodists had been operating on the site (known as the Memorial Mercy Home Hospital until 1949) had a four-fold purpose: a home for "unfortunate" (i.e., unmarried) girls to live during their pregnancy and to receive "counseling and financial help in getting a new start in life," according to a 1950s fundraising brochure; a maternity hospital; a child-caring agency; and a child-placing agency. In the years following World War II, the Methodists elected to replace their aging and overcrowded facility of adjoining wood-frame residential structures with a new, thoroughly modern home and hospital that could allow them to better serve their multi-faceted mission.

The resulting building embodies key distinctive features of the low-rise holdover International Style: a distinctly horizontal feel; a strongly rectilinear composition; simple massing; exterior elevations that are orderly and regularized in design without the use of axial symmetry, as seen in such elements as the prominent off-center

¹ "Amendments to Articles of Incorporation of the Memorial Mercy Home-Hospital of New Orleans, Louisiana (Non-Profit Organization)" before Taylor Caffery, Notary Public, October 27, 1949; "The Methodist Home Hospital," undated fundraising brochure, c. mid-1950s; and "Ground to Be Broken for \$300,000 Methodist Hospital," *The Times-Picayune*, May 27, 1950.

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location of the main entrance; a flat roof; a complete lack of ornamentation; horizontal bands of aluminum ribbon-like windows accentuated by contrasting cast-stone trim; substantive exterior walls (as opposed to the mostly glass and metal curtain walls that came to dominate the style by the mid-1950s); flat stucco-clad cantilevered canopies on both street-facing elevations that serve to underline the building's horizontal linear sweep; and, in clear adherence to the modernist maxim "form follows function," a U-shaped layout directly related to the building's practical function as a postwar maternity home and hospital. While the red-brick exterior is a departure from the classic white or light-colored smooth neutral walls of early International Style buildings, it was a common alternative for the state's holdover examples of the style, according to the Louisiana State Historic Preservation Office's historic context written by Jonathan and Donna Fricker, "Louisiana Architecture, 1945-65: Modernism Triumphant – Commercial and Institutional Buildings," to feature textured exteriors in warmer hues, a choice that seems particularly appropriate in the case of the Methodist-Home Hospital, which was striving to provide a homey atmosphere for its residents.²

The building is steel-frame construction faced with textured red brick and supported by a concrete slab-ongrade foundation, with a concrete roof and floors. It was constructed in two phases that were planned simultaneously, according to Johns' 1950 drawings, ensuring a cohesive design (although the design for the south wing was updated somewhat in 1952, as described in more detail below). (Figure 2-3, 5-6) The purpose of phasing the construction was to allow for a gradual transition from the older complex of wood-frame residential structures and to provide time to raise the necessary funds to complete the project. The first construction phase began in October 1950 and was completed in February 1951, according to newspaper accounts, and consisted of the 2-story central section of the building and the 1-story wing on the north (Laurel Street) side of the property; this 1-story wing received a 2nd story c.1980s, as described in the next paragraph.³ (Figure 1) The 2-story central section housed administrative offices and nursery rooms on the 1st floor, and dormitories and recreational areas on the 2nd floor; the 1-story north wing was dedicated to hospital functions, including labor and delivery rooms, sick wards, isolation rooms, and similar uses. The second construction phase began in 1952 and was completed in November 1953, and consisted of the 2-story wing on the south side of the property to form the building's Annunciation Street elevation.4 This 2-story wing housed meeting rooms, a living room, dining room, kitchen, laundry, and chapel on the 1st floor, with additional dormitories upstairs. (Photos 1, 5, 6)

A 2nd floor addition was constructed c. 1980s on the 1-story north wing to serve as a gymnasium for the Methodist Children's Home's young residents. (Photos 9, 11) It sits flush with the exterior walls of the historic 1st floor. The front half of the addition matches the height of the original 2-story north wing and then increases in height approximately 11 feet. The roof is flat, and the exterior walls are faced in red brick to blend with the hospital's historic exterior. The addition's aluminum windows echo the size and placement of their historic counterparts but lack the contrasting cast-stone trim. Although its construction is regrettable, this addition's compatible and unobtrusive design partially mitigates its impact and does not significantly detract from the building's identity as a historic postwar maternity home hospital.

Washington Avenue elevation (west) – primary façade (Photos 1-4):

The 2-story façade is clad in textured red brick that terminates at a subtle contrasting cast-stone coping (currently obscured by a metal parapet cap), which accentuates the flatness of the roof and the building's horizontal orientation. The central section of the building, including the off-center main entrance, is recessed roughly 4 feet from the face of the north and south wings, which contributes to the strongly geometric composition. The 1st floors of the central section and south wing feature bands of horizontal ribbon-like aluminum sash windows divided by darker red-brick mullions. This horizontal fenestration pattern is emphasized by contrasting cast-stone trim. The main lobby entrance, which is placed conspicuously off center,

² Jonathan and Donna Fricker, "Louisiana Architecture, 1945-1965: Modernism Triumphant-Commercial and Institutional Buildings" (Louisiana Division of Historic Preservation, September 2009), 6.

³ "Ceremonies Set for New Hospital," *The Times-Picayune,* February 28, 1951; "New Head of Methodist Home Hospital Takes Over," *The Times-Picayune*, June 27, 1953.

⁴ Jack H. Midgett, ed., *Annual of the Louisiana Annual Conference of the Methodist Church* (Shreveport, LA: The Drake Company, 1952), 87; "Hospital Adds Second Wing," *Morning Advocate*, May 10, 1953.

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comprises an aluminum storefront system with a strongly rectilinear composition of horizontally oriented rectangular sidelights and matching transom. A separate hospital entrance is tucked into the eastern face of the north wing and is similarly detailed to the main entrance. Original rectangular red-brick planters with cast-stone copings are located at both entrances to help demarcate their locations; they also subtly emphasize the building's rectilinear geometry. The 1st floor of the north wing is an unbroken brick surface corresponding to a mechanical room on the interior. Dividing the 1st and 2nd floors is a stucco-clad cantilevered canopy that extends nearly the length of the façade. It is currently obscured by modern signage and a fabric awning but remains clearly visible underneath. The canopy is supported in 2 locations by slender painted-metal columns. It provides a shading ledge for the 1st-floor windows along the central section of the building, then deepens at the 2 entrances to visually signal the entrances' locations and to provide protection from inclement weather; this prominent horizontal element also serves to reinforce the building's linear sweep and adds another strong geometric element to the façade.

A few elements were changed during the building's construction phase, based on a comparison of the 1950 drawings and the existing building, but it was confirmed that most of the changes are original based on photographic documentation from two 1950s brochures (Figures 7-8). On the façade, these revisions include aluminum sash windows rather than awning windows; metal entrance doors rather than wood (the metal doors were replaced with similar models at an unknown date); and the termination of the 1st-floor canopy at the end of the lobby entrance rather than beyond the edge of the south wing. The proposed façade of the south wing changed in appearance between 1950 and 1952, when Johns produced a set of revised drawings for the second phase of construction. A review of the 1952 drawings confirms that the south wing's exterior has in fact changed very little since the building was constructed.

Annunciation Street elevation (south) (Photos 5-8):

The Annunciation Street elevation is composed of the street-facing elevation of the 2-story south wing and a small 1-story rear addition. Like the front façade, it is faced with textured red brick that originally terminated at a subtle contrasting cast-stone coping (currently obscured by a metal parapet cap), accentuating the building's flat roof and horizontal orientation. The side entrance nearest the front corner of the building is demarcated by another rectangular red-brick planter and a stucco-clad flat-roofed canopy, which is supported on one end by a slender painted-metal column and on the other by a projecting brick wall. The composition of this entrance carries over the horizontal lines of the façade and provides visual interest to the building's corner view. The entrance's storefront system mirrors those on the front of the building. The 1st and 2nd floors feature horizontal bands of ribbon-like aluminum windows with contrasting cast-stone trim to match the facade. Towards the rear of this elevation is a projecting 2-story fire stair enclosure, another strongly rectilinear element that is faced with red brick to match the rest of the exterior. Beyond the stair enclosure, the 1st-floor canopy picks up again. It originally wrapped the rear corner, as shown on the 1952 drawings, but was either encapsulated or reconstructed in wood with a sloped asphalt-shingle roof and extended at an unknown date, possibly when the small 1-story rear addition was constructed. This rear addition has a flat roof and an exterior faced with textured red brick to blend with the historic building. It does not adversely impact the building's integrity due to its small size, unobtrusive design, and location at the rear of the property.

Rear elevation (east) (Photos 9-10):

The building's U shape becomes evident when viewed from the rear. The north and south wings extend approximately 60 feet beyond the rear of the central section, creating a generous courtyard area at the interior of the site. This outdoor space was a key element of the building's program, according to hospital correspondence records, in that it provided the residents a private area for exercise and play in an otherwise dense urban setting. The rear elevation is only minimally visible from the public right-of-way because it is obscured by fencing, trees, and neighboring buildings. Like the street-facing elevations, the rear is faced in textured red brick. The aluminum sash windows on the 1st and 2nd floors of the central section and south wing and the 1st floor of the north wing are, like their street-facing counterparts, organized in horizontal ribbon-like bands divided by darker red-brick mullions and bordered with contrasting cast-stone trim. A metal canopy was

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added above the 1st floor of the central section at an unknown date. There are 4 vertically oriented rectangular windows in the 2nd-floor gymnasium addition on the north wing facing the interior courtyard. A contemporary exterior metal stair provides an additional point of egress from the 2nd-floor addition.

Secondary side elevation (north) (Photos 9-11):

The Laurel Street/north elevation is minimally visible given its close proximity to the neighboring property. It is faced with textured red brick, and the aluminum sash windows on the 1st floor are defined by a contrasting cast-stone sill. The 2nd-floor gymnasium addition is punctuated by a few aluminum windows matching those on its front elevation, but the majority of the exterior is uninterrupted red brick.

Interior (Photos 12-27):

According to the home hospital's correspondence records from the 1940s, the building's U-shaped floor plan was specifically designed to meet the institution's complex programming needs, which included hospital facilities, dormitories and associated living and support facilities, child-care and child-placing facilities, and the need for a private outdoor space.

Special attention was given to ensuring that the building's layout allowed the institution to provide services in a confidential and sensitive manner to a variety of groups, including the expecting mothers, their families, the babies, and prospective adoptive families. As then-Superintendent Rev. James W. Ailor, put it, "it is necessary that people be able to come and go without bumping in to other people that they know." In addition, Ailor specified that it was "imperative" that

- A. The dormitory be as removed from the Hospital section as possible for health reasons.
- B. That the baby Nurseries be as remote from the Dorm, in the Hospital section for emotional reasons. If a girl cannot keep her baby, it is too bad if she has to pass directly in front of the Nursery where her baby is to go to her meals, etc. as she does in our present set-up. Any girl can see her baby often, if she wants to, but it should not be a forced issue....
- C. That the building or wings be so situated as to leave some court yard in the rear for the girls to exercise and play in, and for our babies to get out into the sunlight and air.⁶

All of Ailor's requirements were met in Johns' design. The home hospital's 2 floors follow a double-loaded corridor plan, which had become the dominant configuration for hospital layouts by the 1940s. The 1st floor was divided into 4 distinct areas. Clustered around the main lobby entrance were all administrative needs such as the superintendent's office, offices for the social workers, and meeting rooms. The majority of the building's central section was dedicated to nurseries and playrooms and other child-caring needs. The south wing housed the day-to-day needs of the residents: living and dining rooms, a chapel, a kitchen, and a laundry room. The north wing was exclusively dedicated to all hospital functions, including labor and delivery rooms, sick and isolation wards, doctors' offices, a nurses' station, and a laboratory. The majority of the 2nd floor housed the home's dormitories. There are 2 stairwells, one in each wing, and one elevator located near the north wing (it was originally proposed for the south wing but was relocated closer to the hospital wing during construction).

⁵ Undated and unsigned memo, Records of Health and Welfare Ministries Division of the General Board of Global Ministries, United Methodist Church Archives - GCAH, Madison, New Jersey, Methodist Home-Hospital, New Orleans, Louisiana, 1947-1964.

⁷ Stephen Verderber and David J. Fine, *Healthcare Architecture in an Era of Radical Transformation* (New Haven, CT: Yale University Press, 2000), 28.

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The partitions and finishes in the administrative area around the main lobby entrance and the living room and chapel were removed when the building was converted into a dog daycare business in 2011; otherwise, the building's distinctive layout is remarkably intact.

Generally speaking, the remaining original interior finishes are characteristic of post-war medical facilities, which by 1950 had become pictures of efficiency and cleanliness. On the 1st floor, the majority of the floors were originally covered with asphalt tile but are now exposed concrete slab. The kitchen floor is terrazzo. In the stairwells, the treads are also terrazzo with steel risers, and the landings were originally asphalt tile but are now concrete. (Photo 20) The floors on the 2nd floor, like those on the 1st, were originally asphalt tile but are now exposed concrete slab. The 1st-floor corridor where the nursery rooms were located retains its original sanitary and protective tile wainscoting and observation windows, as specified in the 1950 drawings. (Photos 15-16, Figure 4) The hospital corridor and rooms in the north wing also retain their tile wainscoting. (Photo 18) The ceilings are plaster in the corridors and acoustic tile in the hospital and dormitory rooms. The walls are plaster throughout. Some original flush wood doors remain on the 1st floor. The 2nd floor dormitory doors were replaced in 2011.

Non-contributing resource:

Behind the north wing is a contemporary detached open-air shed sheltering a pool (Photo 9). This non-contributing structure will be removed as part of the property's rehabilitation.

Assessment of Integrity:

As described above, Methodist Home Hospital has sustained overall minor modifications to its exterior and interior that do not detract from its identity as a historic postwar maternity home and hospital. As a result, the building retains a high degree of each of the seven aspects of integrity.

Location: The building is located on its original site and thus possesses integrity of location.

Design, Materials, and Workmanship: The building possesses a high degree of integrity of design, materials, and workmanship. The key original elements of the building's distinctive and complex program remain intact, as do the major features of its International Style design. The majority of original materials remain as well and are in overall excellent condition. Its form and structure are intact to clearly identify it as a steel-frame brick-faced building that could only have been a product of the mid-20th century. The double-loaded corridor layout and a number of character-defining finishes also remain to identify it as a mid-20th-century medical facility. The building's two additions are regrettable, but the 2nd-floor gymnasium addition's compatible and unobtrusive design partially mitigates its impact. The other addition is small and located at the rear of the building and has virtually no impact on the building's overall integrity.

Setting: The building possesses integrity of setting. It sits in a predominantly residential section of the historic Irish Channel neighborhood, which was densely developed in the late 19th and early 20th centuries with low-rise modest housing stock consisting primarily of wood-frame shotgun and cottage dwellings. This remains the case today.

Feeling: The building possesses integrity of feeling. It feels like an International Style institutional building from the early 1950s, and its intact layout and finishes successfully communicate the building's identity as a postwar maternity home hospital in that they reflect the prevailing trends of the period.

Association: The building retains integrity of association. It would be instantly recognizable to a former resident from the period of significance.

8. Statement of Significance

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Applicable National Register Criteria (Mark "x" in one or more boxes for the criteria qualifying the property for National Register listing.)

X	Α	Property is associated with events that have made a significant contribution to the		
		broad patterns of our history.		
	В	Property is associated with the lives of persons significant in our past.		
	С	Property embodies the distinctive characteristics of a type, period, or method of construction or represents the work of a master, or possesses high artistic values, or represents a significant and distinguishable entity whose components lack individual distinction.		
	D	Property has yielded, or is likely to yield, information important in prehistory or history		

Criteria Considerations:

Α	Owned by a religious institution or used for religious purposes			
В	Removed from its original location			
С	A birthplace or grave			
D	A cemetery			
Е	A reconstructed building, object, or structure			
F	A commemorative property			
G	Less than 50 years old or achieving significance within the past 50 years			

Areas of Significance (Enter categories from instructions.): Health/Medicine

Period of Significance: 1950-1966

Significant Dates: 1950-53 (construction dates)

Significant Person (Complete only if Criterion B is marked above): N/A

Cultural Affiliation (only if criterion D is marked above): N/A

Architect/Builder (last name, first name): Johns, Roy

Period of Significance (justification): The period of significance begins in 1950, when construction began on the home hospital, and ends in 1966, the fifty-year cut-off. Methodist Home Hospital remained in operation until the early 1970s.

Criteria Considerations (explanation, if necessary): N/A

Statement of Significance Summary Paragraph (Provide a summary paragraph that includes level of significance, applicable criteria, justification for the period of significance, and any applicable criteria considerations.)

The Methodist Home Hospital building, 821 Washington Avenue, New Orleans, Orleans Parish, Louisiana, is of local significance under Criterion A: History, in the area of Health/Medicine, as an important example of a modern postwar maternity home and hospital facility that reflected the distinctive role of maternity homes in New Orleans after World War II. Although the city's first maternity homes had been established in the 1880s

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and continued to operate into the 20th century as largely religious institutions, the postwar period, known nationally as the "Baby Scoop Era," marked a critical moment in how local maternity homes functioned and defined themselves. Driven primarily by the impact of new social trends and the introduction of social work policies, this new era came to be characterized by its emphasis on adoption and secrecy in the interest of the mother's reputation. The period of significance is 1950-1966, which begins with the building's construction and ends at the 50-year cutoff.

Narrative Statement of Significance (Provide at least one paragraph for each area of significance.)

History of the American Maternity-Home Movement:

Maternity homes (also known historically as homes for unwed mothers) first began to appear in the United States in the late 19th century as refuges for indigent and working-class women who were pregnant out-of-wedlock with nowhere to turn. On both religious and social grounds, illegitimate pregnancy was considered a grave sin with potentially irreversible implications for the mother's reputation and the future of her child. Prior to the creation of such homes, babies of illegitimate birth whose mothers could not care for them were often surrendered to unclassified public almshouses or poorhouses, which were overcrowded and unclean "charitable catch-all[s]" that offered little to no dedicated child care.⁸ Orphaned and abandoned children were thrown together with the sick, the aged, and the mentally ill, and as a result, the infant mortality rate at such institutions was exceedingly high. According to the U. S. Department of Labor's Children's Bureau, "[i]n the early days of a Massachusetts State almshouse...between 80 and 90 percent of the foundlings sent there died within a year in spite of the best care known at that time." The many women who entered these institutions pregnant or with their babies were also at high risk due to a lack of adequate medical care.

By the 1880s, as the public's thinking about charitable support evolved, unclassified poorhouses were replaced by dedicated institutions that separated dependent children and adults.¹⁰ During this period, a variety of private religious groups formed asylums for the care of orphans and destitute children; between 1850 and 1880, the number of children in orphanages increased from 7,700 to 60,000.¹¹ The 1880s also saw the creation of the nation's first children's aid societies and child-placing agencies.¹² However, while such efforts were made in the interest of the child's health and wellbeing, the separation of dependent children from adults also meant that unwed mothers seeking institutional assistance were no longer permitted to remain with their babies. Historian Marian J. Morton explains how these public policy changes reflected the social values of the period:

The grudging tolerance for public support of unmarried women gave way to the "sexual politics" of the social purity movement of the 1870s and 1880s. The movement's chief target was prostitution, but the once-clear line between prostitute and unmarried but enceinte became blurred—both represented the practice of sex outside of marriage....Public officials accordingly feared that sheltering unwed mothers implied their approval of illicit sexual behavior.¹³

Thus, destitute unwed mothers were presented with the difficult choice of either surrendering their babies to an institution or relying on the precarious support of outdoor relief.¹⁴ In response to these types of cases, the maternity-home movement began in earnest.¹⁵

⁸ Maud Morlock and Hilary Campbell, *Maternity Homes for Unmarried Mothers: A Community Service – Publication 309* (Washington, DC: U.S. Department of Labor, Children's Bureau, 1946), 3; and Marian J. Morton, *And Sin No More: Social Policy and Unwed Mothers*, 1855-1990 (Columbus: Ohio State University Press, 1993), 32.

⁹ Morlock and Campbell, *Maternity Homes for Unmarried Mothers*, 3.

¹⁰ Morton, And Sin No More, 32.

¹¹ Morton, 33.

¹² Morlock and Campbell, 4.

¹³ Morton, 32.

¹⁴ Morton, 32-33. Outdoor relief is defined as charitable assistance in the form of money, food, clothing, or goods that does not require the recipient to enter an institution.

¹⁵ Morlock and Campbell, 4, 11.

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Although the leaders of the largest groups associated with the maternity-home movement of the 1880s, the Florence Crittenton Mission and the Salvation Army, were male, early maternity-home work was primarily the realm of devout middle-class white women, many of them evangelical Protestants. ¹⁶ These women, compelled by their faith to rescue "fallen" women and girls and provide proper care to their babies, set up small homes in converted private residences in cities and towns across the nation. ¹⁷ According to historian Regina Kunzel,

Under the auspices of the National Florence Crittenton Mission, the Salvation Army, the Door of Hope, and various religious denominations, women constructed a national network of "protection and rescue shelters" to reclaim and redeem their "less fortunate sisters." A maternity home movement of considerable proportion took shape in the rich ideological and organizational context of womanly benevolence....Emma Whittemore, founder of the Door of Hope maternity homes, described deliberating with God over the best work for her: "Most earnestly did I desire to know what would be most to His glory. Suddenly the girls on the street came to my mind so forcibly that it was not difficult to almost imagine I could hear the tramp of numberless feet going straight to perdition." 18

While many of these institutions also provided care for other types of outcast women, such as prostitutes, as part of their missionary efforts, by the early 20th century indigent and working-class unwed mothers had become a primary focus given their need for a special kind of care.¹⁹

Sectarian or otherwise, maternity homes of the era functioned according to the belief that pregnancy out-of-wedlock was a moral problem rather than a social, economic, or emotional one, and that the proper approach to assisting unwed mothers was a combination of spiritual redemption and domestic work. Residents cooked, cleaned, and cared for the home's babies in addition to attending prayer services and receiving religious counsel. Lessons in sewing, childcare, ironing, and other domestic skills were frequently offered as "training in the womanly arts" that "supplemented training in religion and industrial habits to complete the evangelical strategy of redemption," according to Kunzel. Kate Waller Barrett, co-founder of the Florence Crittenton Mission, illustrates the perceived connection between spiritual healing and domestic work in her 1903 book, *Some Practical Suggestions on the Conduct of a Rescue Home*: "Laundry may...be used as 'a means of grace.' There is nothing that settles a restless, high-strung spirit, like weariness of the flesh."

The girls were encouraged to treat and care for the homes as their own, and indeed the premises were truly homelike in that most were former private residences. In many cases, including Methodist Home Hospital, a benefactor associated with the home's religious denomination gifted a house, and the staff relied on public donations, fundraising, and volunteers to sustain its day-to-day needs. Although many homes succeeded under this model, numerous period accounts attest to the struggles of maintaining adequate facilities, and some homes were forced to close.

Another important aspect of these early maternity homes was that in most cases the mothers were expected to keep their babies rather than give them up, and the staff did what they could to prepare their residents for motherhood. It was believed that keeping the child was a moral obligation, and that the child would have a stabilizing effect on the mother.²³

¹⁶ Regina Kunzel, *Fallen Women, Problem Girls: Unmarried Mothers and the Professionalization of Social Work, 1890-1945* (New Haven, CT: Yale University Press, 1993), 10. The Florence Crittenton Mission was founded by Charles N. Crittenton in 1883. The Salvation Army established its first American maternity home in Brooklyn in 1887.

¹⁷ Kunzel, Fallen Women, Problem Girls, 10-11; Morton, 40-41; Morlock and Campbell, 11.

¹⁸ Kunzel, 10-11. The Whittemore quote is taken from E. M. Whittemore, *Mother Whittemore's Records of Modern Miracles* (Toronto: Missions of Biblical Education, 1937), 41.

¹⁹ Morlock and Campbell, 10-11.

²⁰ Kunzel, 26-28.

²¹ Ibid.

²² Kate Waller Barrett, *Some Practical Suggestions on the Conduct of a Rescue Home* (Washington DC: National Florence Crittenton Mission, 1903), 28.

²³ Morlock and Campbell, 23; and Morton, 58-59.

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In providing unwed mothers with clean and safe quarters to endure their pregnancy, ensuring proper medical care for them and their babies, and providing some degree of domestic education, early maternity homes played an important role in the reduction of both infant and maternity mortality rates, particularly among the nation's poor and working class.²⁴

The Role of Social Work in the Maternity-Home Movement

Social work as a profession developed in the late 19th century as part of the broader "scientific charity" movement that promoted a rational and systematic approach to social welfare issues over what was deemed the "sentimental benevolence" of unregulated organizations.²⁵ To achieve this, philanthropic actors needed to be professionalized. The first social work training program was established in New York City in 1898. In 1912, the federal government established the U.S. Children's Bureau in the Department of Labor, which investigated child welfare issues, tracked infant mortality rates, and attempted to standardize social work practices, among other efforts.²⁶

Concurrent with the development of the social work profession was the child-saving movement, which fought for a wide variety of reforms such as child labor laws, better schools, and public health measures. By the 1910s, child-saving efforts had become one of the first specialties of social workers, and, not coincidentally, unmarried mothers became another central focus of their work.²⁷

Social workers, most of them female, endeavored to distinguish themselves from the fervent lady volunteers of the past—one historian describes them as "embarrassed by the moral heat generated by their predecessors"—by relying on formal training and the latest medical and scientific thinking to legitimize their work, including the incorporation of psychiatric theory. ²⁸ As social workers became involved with unwed mothers and maternity homes, the perception of illegitimacy and the treatment of unwed mothers underwent a fundamental change.

In social work literature of the 1910s and 1920s, the picture of the unwed mother as a "fallen" woman in need of moral reform was replaced with the "problem girl" diagnosed as suffering from "sex delinquency." In practice, many sectarian maternity homes, including Methodist Home Hospital, had not yet involved social workers in their organizations and thus continued with their mission of salvation. By World War II, however, the social worker's scientific approach to illegitimacy would significantly impact how maternity homes functioned in the postwar period.

Post-World War II Maternity Homes

While many post-war maternity homes were borne out of the early homes of the late 19th century and retained some defining aspects of their individual histories, these institutions changed significantly in their practices and facilities after World War II as they responded to the evolving needs of their communities and to the latest social and medical trends.

Between the end of World War II in 1945 and the U.S. Supreme Court's 1973 passage of *Roe v. Wade*, which legalized abortion, the country saw an unprecedented number of premarital pregnancies and a rapid increase in the number of adoptions, not just among the working-class poor, but among those from "good homes" as well.³⁰ For middle-class women, the decades after the war were a time of immense change that provided an

²⁴ Centers for Disease Control and Prevention, "Achievements in Public Health, 1900-1999: Healthier Mothers and Babies," *Morbidity and Mortality Weekly Report*, October 1, 1999, https://www.cdc.gov/mmwr/preview/mmwrhtml/mm4838a2.htm.

²⁵ Morton, 55; and Kunzel, 37.

²⁶ Morton, 56.

²⁷ Morton, 56; and Kunzel, 36.

²⁸ Kunzel, 43-45.

²⁹ Regina Kunzel, "White Neurosis, Black Pathology: Constructing Out-of-Wedlock Pregnancy in the Wartime and Postwar United States," in *Not June Cleaver: Women and Gender in Postwar America, 1945-1960,* ed. Joanne Meyerowitz (Philadelphia: Temple University Press, 1994), 305.

³⁰ "Memorial Mercy Home-Hospital," undated brochure, c. 1940s. It is important to note that this discussion is focused on white women

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increasing sense of equality and freedom, including a more liberal attitude toward sexuality.³¹ Increased access to cars (where young couples could be alone) and a greater variety of employment opportunities were also factors contributing to the problem, according to period sources.³² Yet, there remained little to no access to birth control or sex education, and premarital pregnancy continued to be stigmatized as a violation of social norms.

By the 1940s, social workers had become an integral part of maternity homes, both secular and non-secular; Methodist Home Hospital, for instance, hired its first fulltime social worker in 1947 to comply with new requirements of the Louisiana Department of Public Welfare.³³ The social work profession was more directly involved with illegitimacy than ever before, and they recognized that the demographic changes in wartime and postwar maternity homes required a new approach. Whereas practices in the early 20th century explained the behavior of the unwed working-class mother as a symptom of "sex delinquency," the middle-class women and girls who sought the help of maternity homes in the postwar period defied those stereotypes. Kunzel writes that,

Cases cited by social workers in the professional literature, previously populated by the paradigmatic working-class sex delinquent characterized by a fondness for the dance hall, an excessive use of makeup, and an inclination toward slang, now pondered an altogether different unmarried mother....Social workers were initially baffled by the unmarried mothers they found "poised, calm and assured, quiet, unruffled, friendly and smiling"; the conventional causes of illegitimacy did not seem to apply to them.³⁴

Social workers turned to psychoanalysis as the solution. Rather than regarding middle-class unwed mothers as sex delinquents or morally defective, social workers diagnosed them as neurotic.³⁵ Illegitimacy became a symptom of "unconscious needs and desires," including unresolved Oedipal complexes, masochistic fantasies, as well as a variety of personality disorders. This approach made it possible to frame out-of-wedlock pregnancy as a mistake that had come about from the mother's neuroses rather than the "willful promiscuity" of the lower classes.³⁶

In keeping with this mode of thinking, maternity homes began to emphasize privacy and secrecy to protect the mother's respectable social position. They became a place to sequester the good girls, who were given false names during their stay, until their shameful state was resolved and they could reenter society. And, rather than encourage the mother to keep the baby, as maternity homes had done in the past for their morally questionable working-class mothers, post-war homes strongly encouraged residents to give their babies up for adoption.³⁷ This new philosophy and mission marked what Fessler described as a "sea change" in the operation of maternity homes nationwide:

Well into the early 1940s, some homes still encouraged, if not required, the mother to breast-feed her baby to ensure that a bond developed between mother and child. But by the end of World War II a sea change had occurred....Maternity homes of the 1950s and 1960s were, to a great extent, a place to sequester pregnant girls until they could give birth and surrender their child for

and girls only; African Americans had a wholly different experience during this era that does not relate to the Methodist Home Hospital, which accepted whites only.

³¹ Ann Fessler, *The Girls Who Went Away: The Hidden History of Women Who Surrendered Children for Adoption in the Decades before* Roe v. Wade (New York: The Penguin Press, 2006), 7; and Mary Ann Davis, *Children for Families or Families for Children: The Demography of Adoption Behavior in the U. S.* (New York: Springer, 2011), 46.

³² Morlock and Campbell, 10-11.

³³ Superintendent James W. Ailor, "Superintendent of Memorial Home," in *Annual of the Louisiana Conference of the Methodist Church, South Central Jurisdiction* (Shreveport, Louisiana: The Drake Company, 1947), 57.

³⁴ Kunzel, "White Neurosis, Black Pathology," 307-08.

³⁵ Ibid.

³⁶ Kunzel, "White Neurosis, Black Pathology," 312-313.

³⁷ Barbara Katz Rothman, "Maternity Homes," in *Encyclopedia of Childbearing: Critical Perspectives* (Phoenix, Arizona: Oryx Press, 1993), 240-41.

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adoption. If a young woman was unsure of or uninterested in relinquishment, the staff attempted to convince her that it was her best, and perhaps only, option.³⁸

At the same time, there was also an overwhelming demand for babies from white childless couples in post-war America; according to historian Ricky Solinger, this confluence of events led to "white, pregnant, unmarried women and their babies [becoming] market commodities."39 Between 1945 and 1973, 1.5 million babies were given up for adoption in the United States.⁴⁰ The annual number of nonfamily adoptions skyrocketed from 8,000 in 1937 to over 70,000 in 1965.41 This era thus became known as the "Baby Scoop Era," in which the country's modern post-war maternity homes played a significant role.

This shift in how maternity homes functioned was reflected not just in their policies and staffing but in their facilities as well. Although some smaller maternity homes remained in converted private residences in the tradition of their predecessors, this type of arrangement began to be deemed "old and unsuited" for a modern home's needs.⁴² Consequently, many homes built new modern institutional buildings in the post-war period that could better meet their multifaceted missions, i.e., a home for unwed mothers as well as an up-to-date medical facility and an adoption service. The ideal modern home was inviting and homelike, yet also a proper and complete healthcare institution (when medical services were provided) on par with the prevailing medical practices of the day.

Maternity Homes in New Orleans

In New Orleans, the maternity-home movement closely reflected national trends, from the early benevolent efforts of religious ladies in the 1880s to the modern homes of the post-war period. After an initially flurry of new homes in the late 19th and early 20th centuries, activity slowed; in the years leading up to World War II, only two maternity homes were in operation. St. Vincent's Infant Asylum and Maternity Home and Methodist Home Hospital (then known as Memorial Mercy Home Hospital). 43 A limited number of other homes served destitute women more broadly and did not have a specific maternity focus. After World War II, however, New Orleans, like many other cities, saw a marked increase in maternity home-related development. By 1950, 5 maternity homes were in operation: Methodist Home Hospital, St. Vincent's Infant Asylum and Maternity Home, Sellers Baptist Home, the Protestant Homes for Babies, and Volunteers for America's Tremont Home. By 1970, all but St. Vincent's had constructed modern facilities.

In all 5 cases, these were existing organizations that shifted focus or expanded in response to the needs of their communities in the post-war era. Like those in other cities, many of the "unfortunate" girls appealing to maternity homes for help after the war were middle class and educated, not the poor and working-class "delinquents" and outcasts of the past. According to a study of maternity homes by the New Orleans Children's Bureau reported in *Times-Picayune ROTO Magazine*, the "typical" white unwed mother in New Orleans in 1953 was similar to those in other cities. She was not the "very young and poorly educated" girl that most people envisioned, but rather she was "probably in her late teens or early 20s...a high school graduate...[and] many girls, far from being the running-wild type, [were] products of homes with strict discipline, rigidly enforced." To help these kinds of girls, local homes and related counseling programs worked to identify the causes of their behavior and, in keeping with social work's new scientific approach to understanding illegitimacy, the Bureau determined that in virtually all cases, New Orleans' unwed mothers suffered from emotional problems. Specifically, according to the article, these problems were either "a feeling of insecurity and inferiority in social relationships," or "the firm conviction (either consciously or subconsciously) that they

39 Ricky Solinger, Wake Up, Little Susie: Single Pregnancy and Race before Roe V. Wade (New York: Routledge, 2000), 154.

³⁸ Fessler. The Girls Who Went Away. 143.

⁴⁰ Fessler, 8, citing Kathy S. Stolley, "Statistics on Adoption in the United States," The Future of Children 3, no. 1, The Center for the Future of Children, The David and Lucile Packard Foundation (Spring 1993), 30, figure 2.

⁴¹ Fessler, 183; and Penelope L. Maza, "Adoption Trends: 1944-1975," Child Welfare Research Notes #9 (U.S. Children's Bureau, August 1984), pp. 1-4, Child Welfare League of America Papers, Box 65, Folder: "Adoption—Research—Reprints of Articles," Social Welfare History Archives, University of Minnesota.

⁴² Morlock and Campbell, 90.

⁴³ Ruby Brewster, "A Study of the Memorial Mercy Home-Hospital" (master's thesis, Tulane University School of Social Work, 1942), vi.

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are unattractive to men," or "the feeling that 'nobody loves them'—this includes their parents." The goal in helping these mothers through their trouble, the article explains, was to help them start new lives; for many girls, this involved giving their babies up for adoption. 45

It was in this climate that New Orleans' postwar maternity homes began to adapt from their pre-war roles as providers of religious redemption to post-war refuges of secrecy and agencies of adoption.

Methodist Home Hospital

Methodist Home Hospital grew out of New Orleans' first maternity home, the Memorial Home for Young Women (also known as the Memorial Home for Reclaiming Young Girls). A group of concerned Presbyterian ladies founded the home in 1886 with the mission of "reclaiming from sin fallen and abandoned young girls." It was open to girls of all religious faiths. The *Daily Picayune*, in its coverage of the event, observed that the home was in line with similar efforts in urban centers around the country:

This peculiar work is interesting the good and earnest women in most of the large cities in the world, who have of late years awakened to the significant fact of the duty they owe to their sister women. In New York, London, Boston, San Francisco, and Chicago, fashionable women have formed themselves into societies for the sole purpose of protecting unprotected young girls.⁴⁷

Another *Daily Picayune* article noted that the home was the first of its kind in New Orleans, stating that "[i]n this city are asylums for widows and orphans, but this enterprise is the first for the reclamation of the fallen." By 1903, the home had relocated to Washington Avenue in the Irish Channel neighborhood to another converted residence, which contained a dedicated maternity ward. The institution suffered from a continual lack of financing until finally, in 1918, the directors donated it to the Methodist Church.

The home was renamed the Memorial Mercy Home Hospital, and until the 1940s it continued to operate in the converted residence and remained focused on the reformation of wayward girls. In 1934, for instance, a *New Orleans Christian Advocate* article reported that the primary purpose of the hospital was "to provide a home with wholesome Christian influences where young women—most of whom are from sixteen to twenty-four years in age, the pathetic victims of misplaced confidence, and disobedience—may find a place to repent of their sin and an opportunity to succeed in life." ⁵¹ Pre-war records indicate that the home attempted to find proper adoptive families for babies whose mothers gave them up, but adoption services were not yet a core part of its mission, and indeed a majority of the girls kept their babies or the babies were taken in by the girl's relatives.⁵²

After World War II, however, the home changed in a number of significant ways: its mission expanded and its policies changed, it was renamed, and it constructed a new modern facility. The home's religious motivations remained, yet its policies incorporated the scientific thinking of the social work movement and also reflected the new social climate of the post-war era. For the first time, the home prioritized the privacy of its "unfortunate" girls, most of whom were now from good homes, and its superintendent and social workers routinely advised that the babies be given up for adoption. With such a large number of babies available, the home's mission expanded to function explicitly as a child-placing agency in addition to a maternity home and hospital.

⁴⁴ "A Mother, Not a Wife," *Times-Picayune States ROTO Magazine*, November 28, 1954.

⁴⁵ Ibid.

⁴⁶ "Memorial Home—Makes Appeal on Behalf of Its Noble Work," *Daily Picayune*, October 11, 1903.

⁴⁷ "Woman's World and Work," Daily Picayune, April 15, 1888.

⁴⁸ "Memorial Home—Dedication of the Institution for Reclaiming Young Women," *Daily Picayune*, April 16, 1888.

⁴⁹ "Memorial Home—Makes Appeal on Behalf of Its Noble Work," *Daily Picayune*, October 11, 1903.

⁵⁰ "The Story of the Methodist Home Hospital," undated fundraising brochure, c. 1950.

⁵¹ "Some Interesting History of Why and How the Memorial Mercy Home was Founded," New Orleans Christian Advocate, April 12, 1934.

⁵² "Memorial Mercy Home-Hospital," pamphlet, 1941.

⁵³ Jim C. Campbell, "A Haven for Unwed Mothers," *Together Magazine* (June 1958): 13-15.

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According to Superintendent James W. Ailor's 1947 annual report, the home's efforts had "turned particularly toward Child Placement. This year has seen an unusual number of patients admitted, and in turn, an increase in the number of births." The home also adapted to the latest medical trends, including the integration of social workers; Ailor reported that in 1947 "a fulltime Social Worker became necessary...So great is the volume of work in Child placing that it is now evident that two fulltime Social Workers...will be needed," and he also pointed to several advancements in the home's medical program, including the addition of a regular pediatrics clinic and more full-time nurses.⁵⁴

In 1949, the home was renamed The Methodist Home Hospital and established a board of directors, which brought in members of the Mississippi and North Mississippi Conferences in addition to the Louisiana Conference (providing the support of over 2,000 Methodist churches in all).⁵⁵ The board's 1949 revised charter demonstrates that child placement had become a key part of the home's mission:

...to establish, equip, operate and maintain a non-profit Home and Hospital for women pregnant out of wedlock, and their babies; to arrange for legal adoption into good homes of such children as may be either formally and legally surrendered and released for adoption to The Methodist Home hospital, according to the laws of the State of Louisiana, by said mothers, or who may have been abandoned by said mothers upon their leaving the institution; to promote charity and the Christian Religion...⁵⁶

At this time, the home also began fundraising for a new facility that could better accommodate its changing mission. It needed meeting rooms and nursery space for its new child-caring and child-placing services, dedicated offices for its new social workers, modern and complete medical facilities in keeping with the latest standards (which would also allow the girls to remain sequestered at the home rather than transferred to a hospital for delivery) and overall less cramped quarters that would provide privacy and comfort for its increasingly middle-class residents, among other needs. In 1949, the home hired Roy Johns of Monroe, Louisiana, a recent graduate of Tulane University's School of Architecture, to design the building.⁵⁷ Construction began in October 1950 and the building was completed in November 1953.58 The end result, as described in detail in Section 7, was a modern facility designed in the International Style that met all of the home's needs and incorporated the latest thinking in the fields of medicine and social science. For instance, the new home incorporated virtually all of the types and arrangements of rooms recommended by the U.S. Department of Labor's Children's Bureau in its 1946 publication, Maternity Homes for Unmarried Mothers: A Community Service. In its maternity unit, this included a doctor's office for medical examinations, separate labor and delivery rooms (the walls, floors and ceilings of which were given the recommended "smooth and durable finish"), scrub and sterilizing rooms, an isolation nursery, a recovery room, separate nurseries for newborns and older babies, nurse's quarters, and adequate storage. 59 The home also provided, as advised by the Children's Bureau, ample indoor and outdoor recreational space for its residents, with its protected courtyard, dorm rooms for no more than two girls, and an adequate number of bathrooms. In addition, the new building included private offices for its social workers, superintendent, and support staff, conference rooms, and a small chapel.

Sellers Baptist Home

In 1908, Baptist Reverend A. J. Valley and his wife founded the Good Samaritan Home on Spain Street in the St. Roch neighborhood "to harbor and save girls from lives of degradation and shame." Due to a lack of

⁵⁴ Ailor, "Superintendent of Memorial Home," 57-58.

⁵⁵ "Amendments to Articles of Incorporation of the Memorial Mercy Home-Hospital of New Orleans, Louisiana (Non-Profit Organization)" before Taylor Caffery, Notary Public, October 27, 1949; and "Building Group to Meet Tuesday," *The Times-Picayune,* February 13, 1950.

⁵⁶ Ibid.

⁵⁷ Phone interview with Roy Johns by Gabrielle Begue, January 11, 2016.

⁵⁸ "Ceremonies Set for New Hospital," *The Times-Picayune,* February 28, 1951; and "New Head of Methodist Home Hospital Takes Over," *The Times-Picayune*, June 27, 1953.

⁵⁹ Morlock and Campbell, 76-94.

^{60 &}quot;Good Samaritan Home," Daily Picayune, September 3, 1909.

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support from the local community, however, the home moved to Monroe, Louisiana, in 1909.⁶¹ The Baptists then founded the Women's Emergency Home of New Orleans in 1933 to assist with "delinquent" women, which included but was not limited to unwed mothers.⁶² Any unwanted babies born at the women's home were surrendered to the Protestant Home for Babies (see below) until 1948, when the Baptist Baby Home was established in a converted residence at 2010 Peniston Street in Uptown. The women's and baby homes merged in the late 1950s at the Peniston Street site in a new facility, a 2-story institutional building designed in the Colonial Revival style by local architects Favrot, Reed, Mathes and Bergman. Deliveries took place at a nearby hospital.

St. Vincent's Infant Asylum and Maternity Home

The Sisters of Charity began operating St. Vincent's Infant Asylum in the 1860s under the auspices of the Catholic Church, with a mission to "provide for helpless babes who, in utter destitution and friendlessness, are abandoned to the charity of the world." The Sisters constructed a large 3-story Italianate-style institutional building at 1507 Magazine Street in the Lower Garden District, where the home remained until the late 20th century. Over the course of the 19th century, the city gained several similar organizations dedicated to helping orphans, widows, and abandoned children, usually in affiliation with a religious group. None of these institutions provided maternity-related services until c. 1900s, when St. Vincent's expanded its mission to include a maternity hospital, which operated on the grounds. Known as St. Joseph's Maternity Hospital, its purpose was to aid "expectant mothers in moderate circumstances and especially to aid those of the working class." The implication is that the hospital was initially open to all mothers, unwed or married, although by the 1930s it had evolved specifically into a maternity home for unwed mothers.

Volunteers of America

In 1912, the Volunteers of America (VOA) established a home for homeless women and children, which moved in 1915 into a donated residence at 1432 Magazine Street in the Lower Garden District. ⁶⁶ Whether unwed mothers were included in the "distressed cases" that they helped is unspecified, but the home was functioning explicitly as a maternity home by 1948. Deliveries took place at one of the nearby hospitals. Like the other homes of the post-war period, "unwed mothers-to-be" were "cared for and their babies put up for adoption"; according to Colonel Frank J. Tremont, Southern area commander of the VOA, "no girl is made to put her baby up for adoption but he encourages that." ⁶⁷ In 1962, the VOA moved into another converted residence at 3804 St. Charles Avenue, and soon thereafter constructed a new modern nursery building directly behind the house at 3801 Pitt Street, which was dedicated in 1970. ⁶⁸

Protestant Home for Babies

The Protestant Home for Babies was established in 1926 by a group of concerned neighborhood women as a shelter for unwanted babies. For many years, it had no affiliation with a maternity home and accepted babies from a variety of institutions, including the Baptists' Women's Emergency Home. The home's first location was a converted residence at 1233 Eighth Street in the Garden District, where it remained until 1945, when the structure was destroyed by fire. At that time, the home moved next door into another converted residence, and soon after began raising funds for a dedicated nursery building to be built on the site of their original quarters. To

⁶¹ Ibid

^{62 &}quot;Baptist Rescue Mission to Note 9th Anniversary," The Times-Picayune, February 8, 1936.

⁶³ "Twere Good You Do So Much for Charity," The New-Orleans Times, December 3, 1865.

⁶⁴ "St. Joseph's Hospital Maternity Clinic Hours," New Orleans States, October 22, 1920.

^{65 &}quot;Heredity of Great Force, Says Sister," The Times-Picayune, August 21, 1938.

^{66 &}quot;Memorial Home Given Needy by Mrs. John Dibert," The Times-Picayune, December 4, 1915.

⁶⁷ "Girls from Far Off Find Shelter Here," *The Times-Picayune*, October 3, 1948.

⁶⁸ "New Facility Is Dedicated," *The Times-Picayune*, April 24, 1970.

⁶⁹ "Old Mansion to Shelter Babies," New Orleans States, October 24, 1926.

⁷⁰ "Contract Signed for New Nursery," *The Times-Picayune*, May 2, 1953.

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In the early 1950s, the home began providing shelter for unwed mothers; deliveries took place at one of the nearby hospitals.71

Comparison of Surviving Postwar Maternity Homes

Of the 5 maternity homes in operation in Orleans Parish in the post-war period—Methodist Home Hospital, Sellers Baptist Home, St. Vincent's Infant Asylum and Maternity Home, Volunteers for America's Tremont Home, and the Protestant Homes for Babies—the nominated hospital stands out as the first maternity home to fully modernize its facilities. It was also the only post-war maternity home that incorporated all programs hospital, home, child caring, and child placing—in one building, and indeed was the only home with complete modern medical facilities on site. Finally, it retains a particularly high degree of both exterior and interior integrity.

Sellers Baptist Home built its own modern facility a few years after the new Methodist Home Hospital's was completed, similarly abandoning its converted residence for a new institutional structure. In contrast to the nominated hospital's modern exterior, the new Baptist home was designed in the Colonial Revival style, and the home did not incorporate complete medical facilities. Today, the building houses a charter school and possesses exterior integrity. The interior, however, was damaged in Hurricane Katrina in 2005 and sat vacant for 10 years; it was recently extensively renovated and appears to possess little interior integrity.⁷²

The St. Vincent's Infant Asylum and Maternity Home building was constructed in the 1860s and today remains identifiable as a mid-19th century institutional building designed in the Italianate style. It retains a high degree of exterior integrity, but it is not directly comparable to Methodist Home Hospital since it is the product of a different era. The building currently functions as a questhouse and its interior integrity is unknown.

The Volunteers of America's Tremont Home remained in a converted residence at 1430 Magazine Street until the early 1960s. In 1962, the home moved to another converted residence at 3804 St. Charles Avenue, and in the late 1960s, it constructed a modern 2-story institutional building to serve as a nursery. Unwed mothers continued to be housed in the converted residence, and there was no complete medical facility on site. Both of VOA's converted residential facilities remain standing and appear to have been restored to their residential use. Both buildings possess exterior integrity: integrity is unknown. The modern nursery building, which is less than 50 years old, is still owned by the VOA and provides emergency shelter for women. The building possesses exterior integrity, and its interior integrity is unknown.

As part of its expanded program in the post-war period, the Protestant Home for Babies housed unwed mothers in its converted residence, and in 1956 constructed a 1-story International Style nursery building on the adjacent property. In the 1970s, the maternity and adoption services were phased out and the home was renamed Raintree House, which continues today as a group home for adolescent girls. Both buildings remain standing and possess partial exterior integrity; the nursery building's flat roof was replaced with a pitched roof after Hurricane Katrina, and the converted residence was enlarged with additions. The modern nursery building and residence both possess partial integrity; the nursery was converted into an administrative building in the 1970s and largely lost its original layout; and the residence was significantly enlarged and remodeled during that transitional period as well. This property also differs from Methodist Home Hospital in that it lacked a complete medical facility and it continued the pre-war tradition of providing housing in a converted residence.

Conclusion

Methodist Home Hospital is significant as a strong representative example of the distinctive role that maternity homes played in the city after World War II. In reinventing itself in the post-war era, Methodist Home Hospital

^{71 &}quot;Auxiliary Pays Visit to Home," The Times-Picayune, September 25, 1953.

⁷² Robert Morris, "After 10 Years Vacant, My House Seeks to Reopen Large Peniston Street Child-Care Facility," uptownmessenger.com, July 2, 2015, http://uptownmessenger.com/2015/07/after-10-years-vacant-my-house-seeks-to-reopen-largechild-care-facility-on-peniston-street/.

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broke with its religious past to better address the changing needs of its community and to embrace the latest trends in medical and scientific thinking, which manifested in its revised mission and policies as well as its new International Style facility. Unlike the other 4 homes that were in operation at the time, Methodist Home Hospital was the only home in New Orleans to incorporate all aspects of its post-war mission under one roof, it was the only home to provide complete and modern medical facilities on site, and it retains the highest degree of exterior and interior integrity. For these reasons, Methodist Home Hospital is eligible for listing on the National Register.

Developmental History/Additional historic context information

See above.

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- _____. "St. Joseph's Hospital Maternity Clinic Hours," October 22, 1920.
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- Solinger, Ricky. *Wake Up, Little Susie: Single Pregnancy and Race before* Roe V. Wade. New York: Routledge, 2000.
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Collections.

NPS Form 10-900	OMB No. 1024-0018
Methodist Home Hospital	Orleans Parish, LA
Name of Property	County and State
"The Story of the Methodist Home Hospital." Und	dated fundraising brochure, c. 1950. Archives of the Louisiana
Annual Conference of the United Methodist (Church, Centenary College of Louisiana Archives and Special

The Times-Picayune. "Auxiliary Pays Visit to Home," September 25, 1953.
"Baptist Rescue Mission to Note 9th Anniversary," February 8, 1936.
"Building Group to Meet Tuesday," February 13, 1950.
"Ceremonies Set for New Hospital," February 28, 1951.
"Contract Signed for New Nursery," May 2, 1953.
"Girls from Far Off Find Shelter Here," October 3, 1948.
"Ground to Be Broken for \$300,000 Methodist Hospital," May 27, 1950.
"Heredity ofGreat Force, Says Sister," August 21, 1938.
"Memorial Home Given Needy by Mrs. John Dibert," December 4, 1915.
"New Facility Is Dedicated," April 24, 1970.
"New Head of Methodist Home Hospital Takes Over," June 27, 1953.
Times-Picayune States ROTO Magazine. "A Mother, Not a Wife," November 28, 1954.
Verderber, Stephen, and David J. Fine. <i>Healthcare Architecture in an Era of Radical Transformation</i> . New Haven, CT: Yale University Press, 2000.
Previous documentation on file (NPS): x_ preliminary determination of individual listing (36 CFR 67) has been requested previously listed in the National Register previously determined eligible by the National Register designated a National Historic Landmark recorded by Historic American Buildings Survey # recorded by Historic American Engineering Record # recorded by Historic American Landscape Survey #
Primary location of additional data:
X_ State Historic Preservation Office Other State agency Federal agency Local government University X_ Other
Name of repository: <u>Centenary College of Louisiana, Shreveport, Louisiana</u>
Historic Resources Survey Number (if assigned): N/A

Name of Property

Orleans Parish, LA
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10. Geographical Data

Acreage of Property: Less than 1 acre

Latitude/Longitude Coordinates

Datum if other than WGS84:____

(enter coordinates to 6 decimal places)

1. Latitude: 29.924070 Longitude: -90.080547

Verbal Boundary Description (Describe the boundaries of the property.)

For the purposes of this nomination, the property boundaries encompass 6 lots facing Washington Avenue: Lots 1, 2, 3, 4, 5, and 6-A, and also Lot 13, which faces Annunciation Street. See submitted boundary/plat map for clarification.

Boundary Justification (Explain why the boundaries were selected.)

These boundaries are based on Sanborn Fire Insurance Maps and the enclosed property survey dated August 7, 2015. Although Lot 13 was acquired after the period of significance, it currently includes a rear addition to the hospital building and a freestanding, non-contributing shed that is associated with the historic building's current use. The remainder of the current parcel as shown on the enclosed survey (Lots Pt. 14, 14-B, and 16) consists of vacant lots that do not relate to the hospital's overall historic significance, as they were acquired after the period of significance and do not have any clear association with the hospital building. Thus the boundaries are as seen on the submitted boundary map to include just the main hospital building and the non-contributing building marked as "pool."

11. Form Prepared By

name/title: Gabrielle Begue/Principal organization: Clio Associates LLC

street & number: 1139 Oretha Castle Haley Boulevard

city or town: New Orleans state: LA zip code: 70113

e-mail: gabrielle@clioassociates.com

telephone: (504) 858-4426 date: October 5, 2016

Additional Documentation

Submit the following items with the completed form:

- Maps: A USGS map or equivalent (7.5 or 15 minute series) indicating the property's location.
- **Sketch map** for historic districts and properties having large acreage or numerous resources. Key all photographs to this map.
- Additional items: (Check with the SHPO, TPO, or FPO for any additional items.)

Photographs

Submit clear and descriptive photographs. The size of each image must be 3000x2000 at 300 ppi (pixels per inch) or larger. Key all photographs to the sketch map. Each photograph must be numbered and that number must correspond to the photograph number on the photo log. For

Name of Property

Orleans Parish, LA
County and State

simplicity, the name of the photographer, photo date, etc. may be listed once on the photograph log and doesn't need to be labeled on every photograph.

Photo Log

Name of Property: Methodist Home Hospital

City or Vicinity: New Orleans

County: Orleans

State: LA

Name of Photographer: Rick Fifield; Gabrielle Begue

Date of Photographs: 12/19/2015; 11/10/2015

01 of 27

Washington Avenue elevation taken mid-block between Laurel and Annunciation Streets. Camera facing southeast.

02 of 27

Washington Avenue elevation at main entrance. Camera facing northwest.

03 of 27

Washington Avenue main entrance. Camera facing northeast.

04 of 27

Cornerstone at main entrance, looking toward Annunciation Street. Camera facing southeast.

05 of 27

Annunciation Street elevation, taken from corner of Washington Avenue and Annunciation Street. Camera facing north.

06 of 27

Annunciation Street elevation, looking toward Washington Avenue. Camera facing southwest.

07 of 27

Rear portion of Annunciation Street elevation. Camera facing west.

08 of 27

Detail view of cast-stone window trim with canopy on Annunciation Street elevation. Camera facing southwest.

09 of 27

Courtyard elevation of Laurel Street/north wing taken from second floor on the Annunciation Street/south wing, looking toward Laurel Street. Camera facing west.

10 of 27

Courtyard elevation of Washington and Annunciation Street wings taken from second floor fire escape of Laurel Street wing, looking toward corner of Washington Avenue and Annunciation Street. Camera facing south.

11 of 27

Laurel Street elevation taken from Washington Avenue, looking toward Fourth Street. Camera facing northeast.

Name of Property

Orleans Parish, LA
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12 of 27

General view of former first-floor administration area on the Washington Avenue side of the building looking toward Laurel Street. Camera facing northwest.

13 of 27

General view of the first-floor central corridor looking toward Laurel Street. Camera facing northwest.

14 of 27

Original flush wood doors in the first-floor central corridor, looking toward Washington Avenue. Camera facing west.

15 of 27

General view of the first-floor central corridor, looking toward Laurel Street. Camera facing northwest.

16 of 27

Tile wainscoting and observation windows in the first floor central corridor, looking toward Fourth Street. Camera facing north.

17 of 27

First-floor elevator door, looking toward Fourth Street. Camera facing northeast.

18 of 27

General view of the first-floor corridor in the Laurel Street/north wing, looking toward Washington Avenue. Camera facing southwest.

19 of 27

Interior view of former delivery room, looking toward Laurel Street. Camera facing northeast.

20 of 27

Detail view of the terrazzo treads in the stairwell, taken from second floor where Laurel Street/north wing and central section meet. Camera facing north.

21 of 27

General view of the second-floor central corridor, looking toward Laurel Street. Camera facing northwest.

22 of 27

Interior of former dormitory room on second floor, looking toward Washington Avenue. Camera facing southwest.

23 of 27

Detail view of dormitory bathroom, looking toward Washington Avenue. Camera facing southwest.

24 of 27

General view of a second-floor room, looking toward Laurel Street. Camera facing west.

25 of 27

General view of a utility room in the central section of the building, looking toward Laurel Street. Camera facing northwest.

26 of 27

Interior of the front room in the second-floor c.1980s/90s addition, looking toward Washington Avenue. Camera facing southwest.

United States Department of the Interior NPS Form 10-900

National Park Service / National Register of Historic Places Registration Form OMB No. 1024-0018

Methodist Home Hospital

Orleans Parish, LA
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27 of 27

Interior of gymnasium in c.1980s second-floor addition, looking toward Fourth Street. Camera facing northeast.

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Orleans Parish, LA

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Figure 1. This 1950 newspaper article shows architect Roy John's rendering of the new Methodist Home Hospital. "Ground to Be Broken for \$300,000 Methodist Hospital," The-Times-Picayune, May 27, 1950.

PAGE SIXTEEN

THE TIMES-PICAYUNE, SATURDAY, MAY 27, 1950

Ground to Be Broken for \$300,000 Methodist Hospital



NEW HOSPITAL WILL BE FULLY EQUIPPED STRUCTURE OF BRICK AND CONCRETE

CEREMONY TO BE HELD THURSDAY

64-Year-Old Institution to Improve Facilities

Ground-breaking ceremonies will be held Thursday at 3 p. m. (for the new \$300,000 Methods: Home hospital at \$15 Washington. The 64-year-old institution of mercy has given shelter and care to more than 3000 babies and their moothers and is acquiring better (facilities with which to carry on its mission. itts mission. Three Methodist co

Three Methodist conferences, Louislanz, Mississippl support this home, and Methodists in the two states have already contributed approximately \$130,000 toward the ballfulg costs, announced Dr. H. L. Johns, chalrman of the beard of directors for the hospital.

Apprint \$150,000 must be hospital.

hospital.

Another \$150,000 must be raised before the job can be completed. The first phase of construction is to begin by early July.

July
The ground-breaking ceremonies are scheduled during the
105th annual session of the Louisiana conference, which will be
held in New Orleans Tuesday
through Friday.
Taking part will be Bishop Paul
E. Martin of Little Rock, Ark.,
bishop of Louisiana, and Bishop
Marvin E. Franklin of Jackson,
Miss. Dr. J. G. Sneiling, superlintendent of the home hospital
from 1918 until 1949, will turn
the first shovelful of earth. Also
here will be Dr. Karl Meiser of
Chicago, general secretary of the Chicago, general secretary of the board of hospitals and homes of the Methodist church.

The brick and concrete struc-ture, designed by architect Roy Johns of Monroe, will replace two 'rame buildings which house the home hospital at S15 Waghington.

home hospital at \$15 Washington Dr. Johns described the pres-rot buildings as "fire-traps." "We have heen lucky so far in being able to meet the minimum requirements of the fire mar-shal. For years we have dreamed of having a safe, clean, attractive hospital for this work," he added.

work," he added.

The present structure is overcrowded—there are 37 bables in
the home at this time—but no one
has ever been refused assistance,
said the Rev. J. W. Alior. superintendent, However, crowded as it
is, in the nursery each baby gets
the best of medical care and attention from devoted nurses and
a staff of 23 physicians, headed
by Dr. E. H. Countiss, obstetrician, he added.
The home hospital serves a

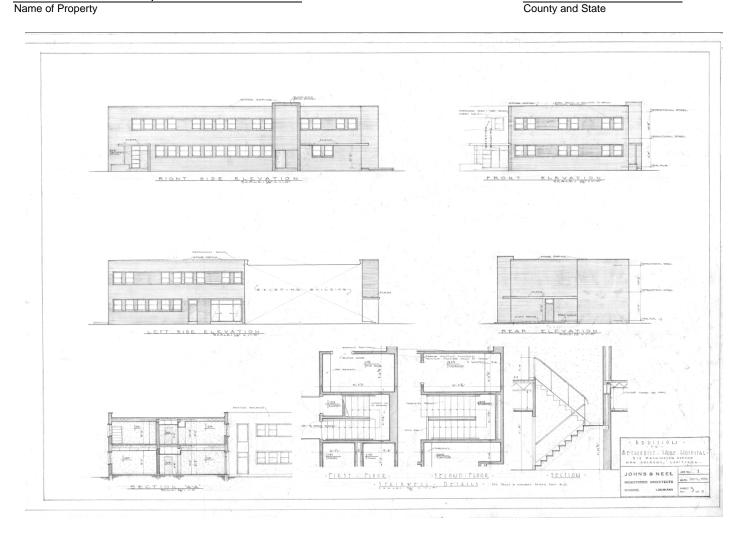


Figure 2. Elevations and sections of the Phase 2 addition (Annunciation Street/south wing), Methodist Home Hospital, September 1952. From the records of Architecture+, Monroe, Louisiana.

Name of Property

Orleans Parish, LA County and State

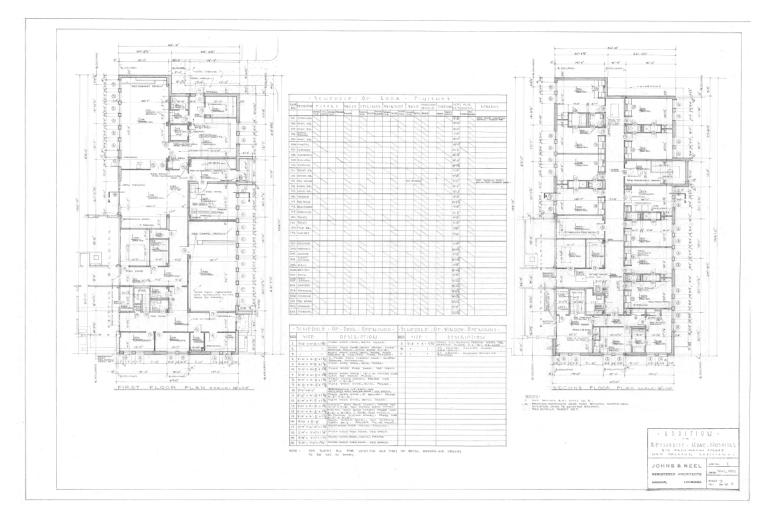


Figure 3. Floor plans of the Phase 2 addition (Annunciation Street/south wing), Methodist Home Hospital, September 1952. From the records of Architecture+, Monroe, Louisiana.

Orleans Parish, LA

Name of Property

County and State

WHAT THE CHURCHES CAN AND SHOULD DO NOW

We have constructed a fine building, beautiful and strong and adequate. It has been finished, furnished, and is now in use. It has a capacity of 40 girls and 30 babies. In our building are included splendidly equipped laboratory and delivery rooms with licensed anesthetists in attendance. The entire building is completely air-conditioned and this has been paid for. We rejoice in the accomplishment and wish to thank every Church, Pastor, and individual member who has helped to make it possible. Your enthusiasm and earnest effort have been remarkable.

Such an institution as ours must be maintained. To do so each church in the Louisiana, Mississippi, and North Mississippi Annual Conferences is asked to pay annually an amount equal to 4% of the pastor's salary. The method is left to the local church and to the annual conference. One of the very best plans is to put it in the budget that it may be paid regularly. An offering at the Christmas season has proven very effective also. We accept, with our sincere gratitude, wills and donations from individuals.

We ask the Methodists throughout the states of Mississippi and Louisiana to inform our people of the services we have to offer. We would like for each unfortunate girl who needs our services to know about the help we can give. We want to follow Christ in saying, "Go, and sin no more". Won't you help us? We believe you will.

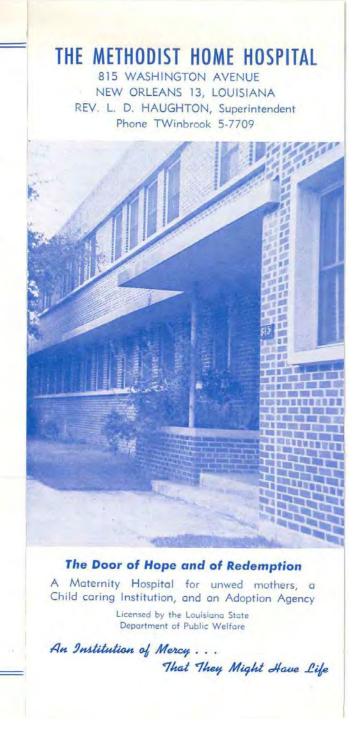
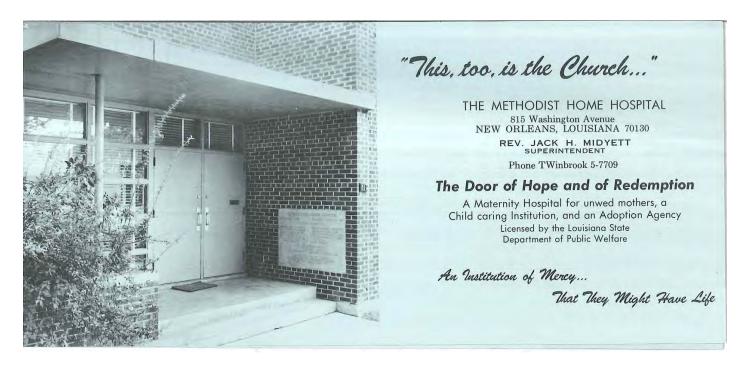


Figure 4. Methodist Home Hospital brochure, early 1950s. From the Records of Health and Welfare Ministries Division of the General Board of Global Ministries. United Methodist Church Archives - GCAH. Madison. New Jersey. Methodist Home Hospital, New Orleans, Louisiana, 1947-1964.

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The Chapel—where we meet and worship God.

OUR HISTORY AND GOVERNMENT

THE INSTITUTION that is now known as The Methodist Home Hospital was organized in 1886. Although we have had many difficult years the doors have not been closed. Thousands of girls have come in the darkest hour that ever comes to any family and have found haven.

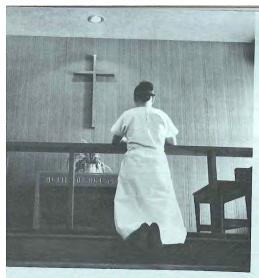
The institution became the property and responsibility of the Methodist Church in 1918. It now receives its Church support from the individual Methodist Churches of Mississippi and Louisiana. It is governed by a Board of Trustees of thirty members, lay and clerical, elected by the Louisiana, North Mississippi and Mississippi Annual Conferences of the Methodist Church. This Board includes the two presiding Bishops of the Conferences supporting the institution. It makes reports to and is promoted by the appropriate boards of these Conferences. It is a member of the National Association of Methodist Hospitals and Homes, and the American Hospital Association.

Figure 5. Methodist Home Hospital brochure, 1950s. Note the emphasis on adoption and the call for applications from adoptive parents. From the Records of Health and Welfare Ministries Division of the General Board of Global Ministries, United Methodist Church Archives - GCAH, Madison, New Jersey, Methodist Home Hospital, New Orleans, Louisiana, 1947-1964. (Continues onto next two pages)

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The Altar-where a new dedication is made.

(Photo courtesy of TOGETHER Magazine)

"THIS, TOO, IS THE CHURCH . . ."

Although we cannot all be ministers or missionaries, we can, through our resources, make it possible for the healing hand of Christ to touch lives that have been broken and wounded, that they may be healed.

The Home Hospital is deeply appreciative and humbly grateful for your support, as are the girls whose lives have been redeemed; their babies who have been given a home, love and security; and the couples whose lives have been made fuller and richer by these precious children.

Such an institution as ours must be maintained-this, too, is the

To maintain our institution, each church in the Louisiana, Mississippi, and North Mississippi Annual Conferences, is asked to pay a certain amount, usually based on a percentage. The method is left to the annual conference and the local church.

One of the best plans is to put it in the budget that it may be paid regularly.

An offering at Christmas has proven very effective also.

We also accept, with our sincere gratitude, wills and donations from



To read and relax-when we must move indoors.

OUR SERVICES, OUR FACILITIES, AND OUR STAFF

THIS INSTITUTION accepts girls who are unwed mothers of all faiths and from any section of the United States—although our primary responsibility lies in Louisiana and Mississippi.

No girl is ever denied our services because of the lack of money. They are accepted without embarrassment to themselves. Those who are able are allowed to pay a part or all of their expenses.

allowed to pay a part or all of their expenses.

This institution wants good homes for its babies. We have high standards for our adoptive parents. To properly study and select homes for our babies we have a competent and dedicated Social Work Staff.

We have excellent facilities. We own a beautiful, modern, permanent brick building. It would cost a million dollars to replace it and its equipment today. We have a capacity for 40 girls and 30 babies.

We have a housemother who lives in the Home Hospital. We have graduate purses on duty at all times, with an appropriate supporting staff.

graduate nurses on duty at all times, with an appropriate supporting staff. We have a staff of 27 physicians, most of whom give their services.

This institution has established and maintained a fine relationship with all agencies and hospitals of this medical center.

Name of Property

Orleans Parish, LA

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The Delivery Room—where Life begins.



OUR PURPOSES

For the girls, our purpose is the total redemption and rehabilitation of each girl. The degree to which we are successful is determined by the response of each individual girl. The results are very satisfactory. The percentage of redemption is high.

For the babies, we want a good home for each baby that is left by its mother for adoption. We have high standards for our adoptive homes, with no waiting list. WE INVITE MORE APPLICATIONS AT THIS TIME.

This institution brings together the baby who needs a home, and the home that needs a baby.



The Nursery—the welfare of our babies is assured.



The Patio-exercise, and relaxation.

OUR HOPE

One of our great needs is an endowment fund.

It is our hope that our friends, in making their wills, will seriously and prayerfully consider our institution. We believe we have one of the worthy altars upon which you can place some of the money with which God has blessed you. Thus, you will be able to perpetuate your service and influence and memory for many years after you have passed from this mortal life.

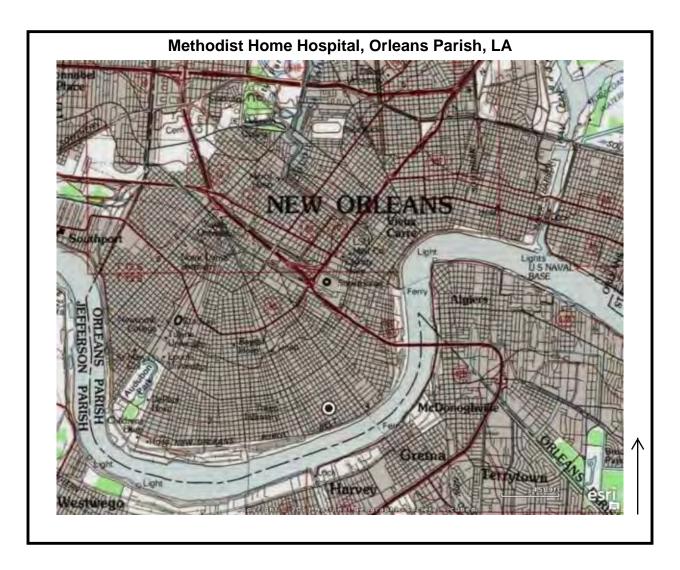
The governing agencies of this institution promise to faithfully use your gifts to this end. May the Holy Spirit guide you in your consideration.



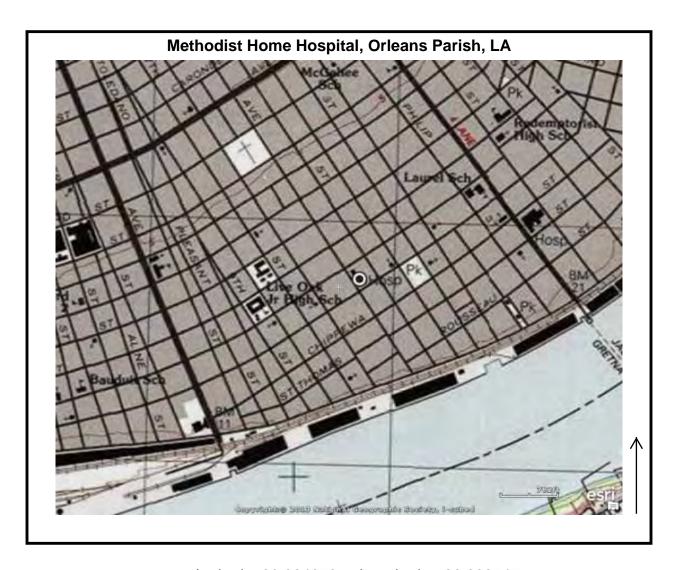
The Future—with a new promise and a new hope!

Paperwork Reduction Act Statement: This information is being collected for applications to the National Register of Historic Places to nominate properties for listing or determine eligibility for listing, to list properties, and to amend existing listings. Response to this request is required to obtain a benefit in accordance with the National Historic Preservation Act, as amended (16 U.S.C.460 et seq.).

Estimated Burden Statement: Public reporting burden for this form is estimated to average 100 hours per response including time for reviewing instructions, gathering and maintaining data, and completing and reviewing the form. Direct comments regarding this burden estimate or any aspect of this form to the Office of Planning and Performance Management. U.S. Dept. of the Interior, 1849 C. Street, NW, Washington, DC.



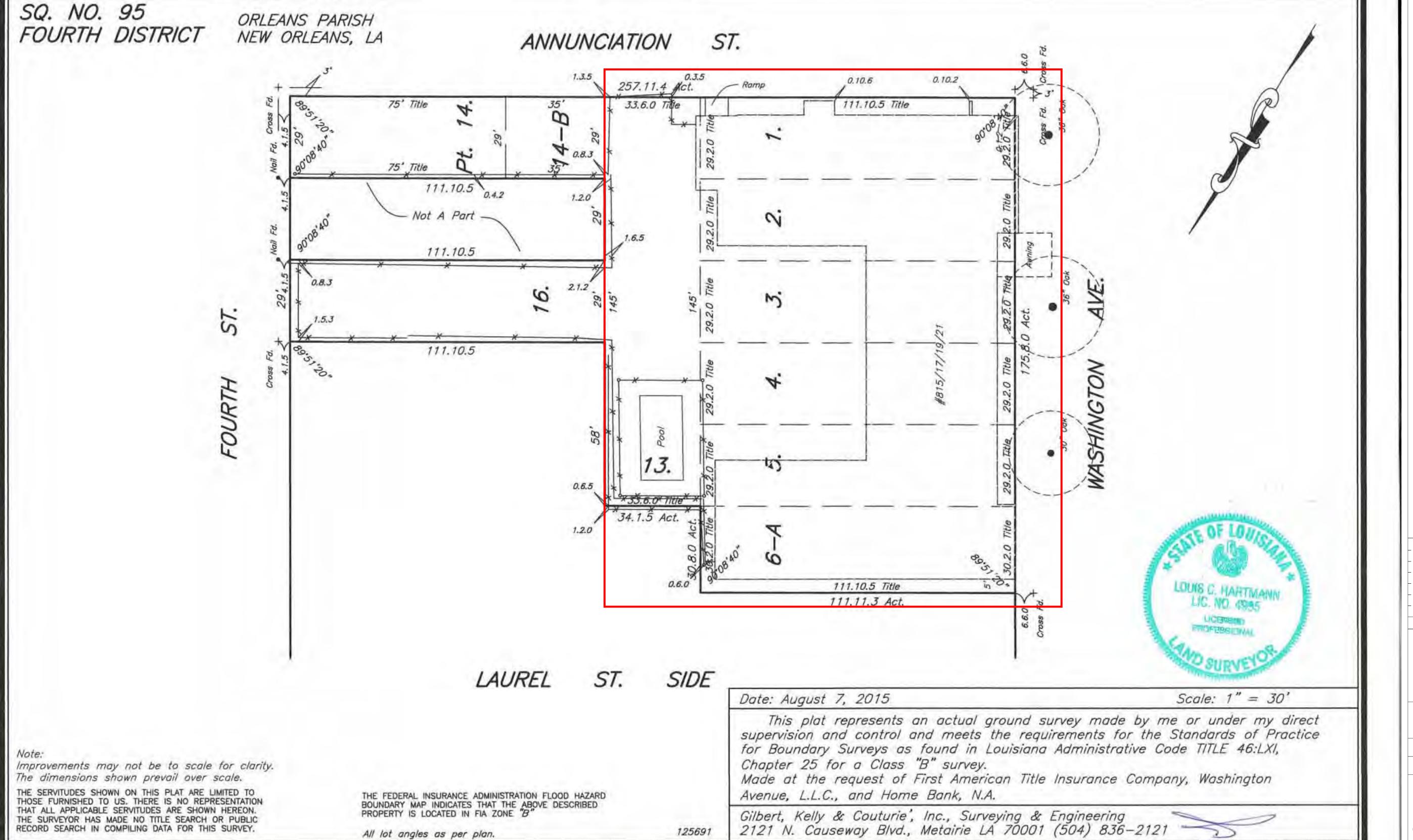
Latitude: 29.924070 Longitude: -90.080547



Latitude: 29.924070 Longitude: -90.080547







Methodist Home-Hospital Orleans Parish, LA Boundary Map

Boundary

CD PERMIT SET 8/10/15

NO REVISION DATE

821 WASHINGTON AVE PROJECT

821 Washington Ave
New Orleans, LA 70130

Project Number JOB NO

SURVEY TITLE

NOT TO SCALE

Author /Checker DRAWN/CHK

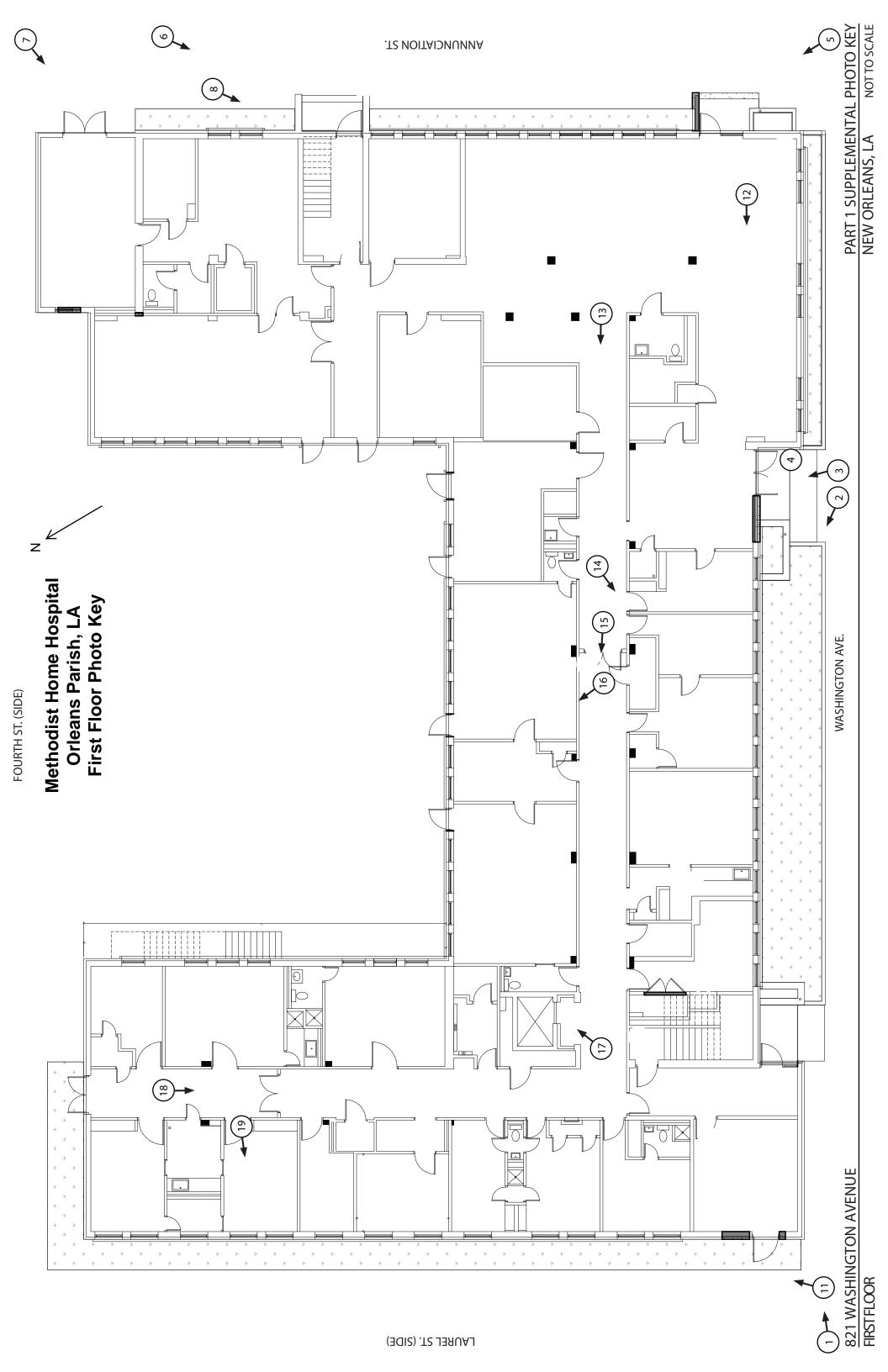
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DYDRAS ST. SHITE 3550 NO LA. 70163

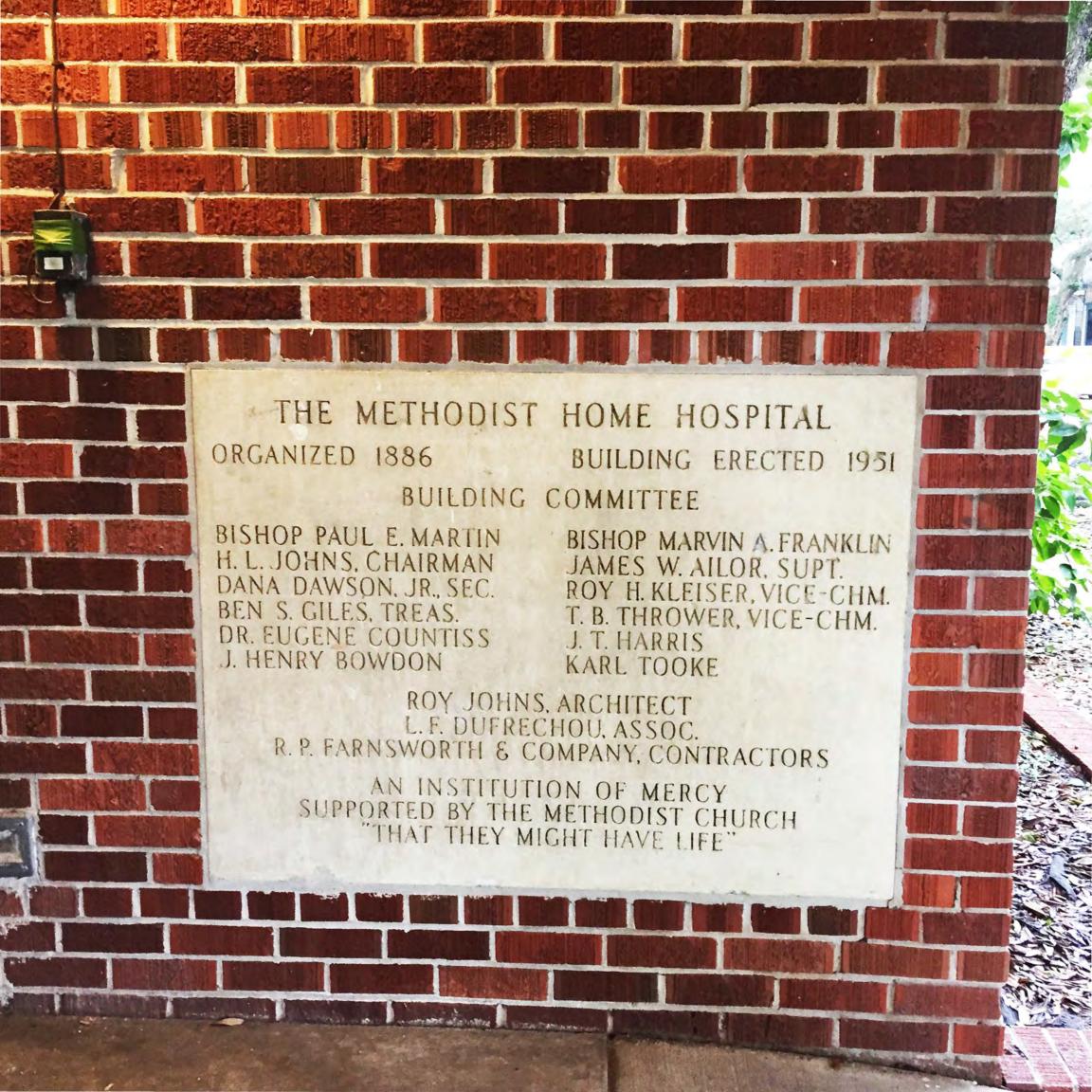
www.rozas-ward.com 504-524-4375

























































UNITED STATES DEPARTMENT OF THE INTERIOR NATIONAL PARK SERVICE

NATIONAL REGISTER OF HISTORIC PLACES EVALUATION/RETURN SHEET

Requested Action:	Nomination						
Property Name:	Methodist Home Hospital						
Multiple Name:							
State & County:	LOUISIANA, Orleans						
Date Rece 12/16/20		Pending List:	Date of 16th Day:	Date of 456 1/31/20		Date of Weekly List: 2/9/2017	
Reference number:	SG100000599						
Nominator: State							
Reason For Review	:						
Appea	I	<u>X</u> P	X PDIL		Text/Data Issue		
SHPO Request		Landscape		Photo			
Waiver		Na	National		Map/Boundary		
Resubmission		Mo	Mobile Resource		Period		
Other		TC	TCP		Less than 50 years		
		CL	.G				
X Accept	Return	R	eject <u>1/31</u>	/2017 [Date		
Abstract/Summary	Automatic listing - Federal Register notice not published in time						
Comments:	Reviewed - acceptable						
Recommendation/	Accept / A						
Criteria	Accept / A						
Reviewer Jim Gabbert			Discipline	Historia	<u>n</u>		
Telephone (202)354-2275			Date				
DOCUMENTATION	: see attached	comments : N	o see attached SL	-R : No			

If a nomination is returned to the nomination authority, the nomination is no longer under consideration by the National Park Service.





State of Conisiana

OFFICE OF THE LIEUTENANT GOVERNOR
DEPARTMENT OF CULTURE, RECREATION & TOURISM
OFFICE OF CULTURAL DEVELOPMENT
DIVISION OF HISTORIC PRESERVATION



RENNIE S. BURAS, I DEPUTY SECRETARY

PHIL BOGGAN ASSISTANT SECRETARY

December 10, 2016

	Mr. James Gabbert National Park Service 2280, 8 th Floor; National Register of Historic Places 1201 "I" Street, NW; Washington, DC 20005
	Jessica Richardson, National Register Coordinator Louisiana Division of Historic Preservation
RE:	Methodist Home Hospital, Orleans Parish, LA
lim,	
Hospital to the of the property	disk contains the true and correct copy of the nomination for the Methodist Home National Register of Historic Places. The second disk contains the photographs in TIFF format. Should you have any questions, please contact me at 225-219-dson@crt.la.gov.
hanks,	
lessica W	
Enclosures:	
Х	CD with PDF of the National Register of Historic Places nomination form
X	Physical Signature Page, with original signature Other:
Comments:	
	Please ensure that this nomination receives substantive review
Х	
	constitute a majority of property owners. (Publicly owned property)
X X X X	CD with electronic images (tiff format) Physical Transmission Letter Physical Signature Page, with original signature Other: Please ensure that this nomination receives substantive review This property has been certified under 36 CFR 67 The enclosed owner(s) objection(s) do do not