Child health, a paradigmatic issue in modern history

ESTEBAN RODRÍGUEZ-OCAÑA (*)

The issue of the health, disease and care of children provides paradigmatic case studies within modern history. As a matter of fact, child history reveals the strategic character of health in modern industrial world, and accordingly, the relevant role of medicine as a cultural agency, insofar that medical care of children is one of the elements defining the status of children in our days.

As it is well known, the «discovery of childhood», in the authorized words of Philippe Ariès (1914-1984), is a feature of modernity, as a process explained by several authors through the mixture of economic and population aspects, race worries, sentimental and political changes —each one stressing more or less a particular set of priorities, and counting on the never ending discussion about its actual development in time, as it was pointed out by Rosa Ballester recently on the pages of this journal (1). This new social conscience was followed by the establishment of new values —i.e. with a class timing: thus, they appeared earlier within the aristocratic world and became part of the bourgeois culture before they became universalised in Western affluent societies—. Among those were the sentimentalization theorized by family historians, including maternal love, and the discourses on the joys and glories of maternity (2). Medicine was a relevant agency within this process, through

(*) Departamento de A.P. e Historia de la Ciencia, Facultad de Medicina, Universidad de Granada, 18071 Granada. E-mail: erodrig@ugr.es


(2) BADINTER, Elisabeth, L’Amour en plus. Histoire de l’amour maternal XVIIe-XXe siècle, Paris, Flammarion, 1980; MORANT DEUSA, Isabel; BOLUFER PERUGA,
its contribution to naturalise many of these moral requirements and as a structuring factor of the world of childhood (3). Notwithstanding their opposition to the central thesis of Ariès, authors like Lloyd de Mause and followers of psychohistory agree that in modern society changes relating to the protection and promotion of infancy and childhood have been outstanding (4). On top of this, the historical problem of infant and child mortality is one of the central issues for the history of population, on the conflicting explanations for the theory of demographic transition; it is timely to recall that the space of death has turned within the expert domain of medicine in the modern world (5).


Thus, the choice of child health and care as subject allows the quest of a whole set of extremely interesting problems of astounding resonance, and the uses of the plurality of methods akin to modern historiography. Such a subject demands integrating plural perspectives from anthropology, sociology, demography or history of sciences, something which has become in itself the striking feature of the history of medicine and health in our days —echoing the wish enunciated by Henry Sigerist in 1951 of looking towards medicine from the vantage point of society (6).

Here as in many other cases within historiography, the topics of research are linked to present perceptions. Make sure this is not a usual pleading for «presentism», but a recall that the aims of the historian root within his own personal —and strictly contemporary— conscience. Therefore, to explaining the interest towards child history shown by historians of medicine and health of the last 25 years or so we should look at the modern spread of «a culture of health» (in twin terms of right and duty), the weight of the medical profession and institutions, and the issues related to the hegemony of a tecno-expertocracy in our industrial and post-industrial societies, not to forget the vivid feelings, so extended, of inequality (7).

From such or similar considerations the V Conference of the European Association for the History of Medicine and Health was called and celebrated in Geneva in September 2001, around the general subject of Health and the Child: Care and Culture in History. The meeting


(7) It is enough for an example with the contents of the IX Health Forum of the London School of Hygiene and Tropical Medicine: WALT, Gill; LEON, David A. (eds.). Poverty, inequality and health: an international perspective, Oxford, Oxford University Press, 2001. See the chapter by Claudio F. Lanata on child health in developing countries.
was one of the occasions organised in that city for celebrating several anniversaries, the 100th year of the foundation of the Swiss Pediatric Society, the 125th anniversary of the School of Medicine and the 40th year of its Children’s Hospital, together with a whole series of other cultural and scientific activities that took place in the autumn season at the cantonal city under the general title of *Children stare at us. Culture, Medicine, Society*. The outcome of the Conference was vivid and lively as well within the academic sessions as in the breaks, always a useful mean to (re)affirm amities and to initiate or fulfil working agreements. There was, however, some unexpected absences due to the disturbing of regular flights after the massacre of the Twin Towers in New York, a tragedy that occurred only a few days before we met. The Conference joined the call made by the European Commission to stop working one day at noon and stand in silence and respect to the memory of victims for five minutes.

This monographic section is made with a short selection of papers presented to that Conference, collected as a way of showing the ample thematic and methodological complexity conveyed; in short, as a crucial proof of the scientific level reached by the meeting.

The most regular feature of this selection stands on the chronological side, mostly 20th century, according to the personal choice of this editor. There is hardly any doubt that the first proofs of public interest in the fate of children are found in the institutionalization of abandonment, a quite common practice at the beginnings of the modern age (8). The paper by Laurinda Abreu shows the development of such policies in the Portuguese city of Évora since 16th century, within that particular Portuguese institution for public charities, the *Misericórdia*. With her paper, Abreu contributes to the strengthening of her research project on public

---


Charities, already known by readers of this journal, this time touching upon a topic well raised among Portuguese historians, particularly by Isabel Dos Guimarães Sá (9). The chronology of this paper is earlier to the rest of the monographic issue acknowledging the historical priority of such undertakings.

Nor are they many doubts about the modern timing of the full involvement of medicine on the health of children. If we are given notice of it in some contexts as soon as the end of the 17th century, it occurs that, as a general Western process, it gained momentum on the last decades of the 19th century and joined with the modern boom of medicalization and specialization (10). Under such terms can be found in the most conspicuous of the recent general works published in the history of medicine. Roy Porter (1997) put the new concerns for child health


within the context of the relationships among «medicine, state and society» in the 20th century, inside the growing realm of «the socialization of medicine and the medicalization of society» (11). The collection by Cooter and Pickstone (2000) on 20th century medicine encloses a chapter on the child experience of disease where it can be read that medical examinations became a routine procedure for 20th century children under a complex knot of changes including the triumph of a bourgeois concept of family, imperial rivalries and worries about racial degeneration (12). López Piñero (2002) also agrees suggesting that the dominant role in the making of the pediatric specialty were social influences (13). The paper by Rosa Ballester and Enrique Perdiguero —long standing fellows in the same research team, experts in history and anthropology of medicine, and well acquainted with child health topics (14) —explores


empirically such linkage. Thus, it follows the evolution of a particular scientific component of infant medical care in two separate national situations with different political and ideological contexts. As a contribution to the growing «industry» of studies on the history of human height, this paper emphasizes the need to take into account the fruits of research in history of medicine and health to the on-going debate on the historical question of the level of life in Spain.

There is already a large bibliography on aspects of the modern development of child health in different countries. The integration of the several groups of problems so far emphasized is found, as the connection of the concerns on the health of the children and the public health movement, the dimensions in terms of race and size of population, and the institutional development of a technological medicine that won support from the people through means of complex persuasive process that eventually included the blaming of mothers in the nursing process and their becoming actual professional agents (15).

Links of interventionist activities on child health with the institution and rationale of Public health have been particularly emphasized (16).


We should remember the moral and political grounds in which the medical specialty for children was originated, as commented above, at the same time indeed that some technical and scientific novelties appeared. That is why paediatric practices were from the beginning very close to educational activities. In all industrialised countries, Paediatry grew thanks to its links to preventive campaigns (puériculture) in the first half of the 20th century. When in particular in France—as shown by Ballester and Perdiguero’s paper—a sub-specialty called «Social Paediatry» was formally established, it was a move to preserve a holistic understanding of the health of the children in front of the one-sidedness of clinicians in the years of the triumph of antibiotics, as well as a call for internationalism directed towards the so-called Third World. Its roots within the pioneer projects of public intervention against infant and child mortality of the first third of the 20th century did not go unnoticed (17).

Papers by Walter Bruchhausen and Catherine Rollet are related to this historical aspect. We are faced to the colonial translation of European prevents practices against infant mortality in East Africa under German and English rule, and we are presented the French child health notebook that follows the thread of shifting relations between families (particularly mothers) and physicians, as well as the involvement of the public or state authorities. Bruchhausen, from a ethnomedicine background, follows with this paper his research projects on the links between «care of the body and care of the soul» (as he named a recent paper) grounded on the German African colonies, that made him master both the rich documentary sources of colonial
administration as the archives of missionary orders (18). We should be aware that postcolonial studies are one of most rich and productive fields of historiography nowadays (19). Catherine Rollet-Echalier is one of the authorities on the topic of history of childhood. Although she comes from the side of historical demography, her qualitativistic sensibility has been proofed at length and her paper was one of the invited lectures of the Geneva Conference (20).

A further contemporary novelty is also the forming of a transnational space of vigilance and health prevention (21). It has accompanied the history of the imperialistic struggles from half the 19th century (international sanitary conferences and health vigilance services in the Ottoman empire), received the first supranational institutions at the beginnings of the 20th century (International —Pan American— Sanitary Bureau, 1902; Office Internationale d’Hygiène Publique, 1903) and in the inter war period saw the flourishing of new bodies within the League of Nations network (Health Organization of the L. N., 1920)


(19) MEDINA DOMÉNECH, Rosa M. La Historia de la medicina en el siglo XXI, Granada, Universidad de Granada [in press].


and the stepping onto the world stage of philanthropic foundations, as the Rockefeller, Save the Children Fund, and others. The paper by James Gillespie, also a piece within a coherent personal project of research (22), is related to this set of problems. It studies the birth of new international agencies around the difficulties of providing care to infants and children in the aftermath of the Second World War. Exactness and accuracy are virtues of his analysis on the complex relations established among national politics, organization conveniences, scientific rationality and personal choices of their expert managers.

All together, the five papers contained in this collection can be understood as practical and stimulating exercises of historiography of medicine and health where popular, institutional and medical habits are scrutinised within its social and political context. That is why I hope that they represent a most pleasant reading.
