

When children count: children according to the official statistics and childhood as a social construction (Portugal, 1875-1925)

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Official national statistics are one of the clearest expressions of the documentary construction of social reality, as reinforced by the birth and strengthening of the Nation-State. In our research, they are used to understand the process of the social construction of childhood in the period between 1875 and 1925. We focused on the field of Demography, and analysed the ages with which children were registered, the designations they were ascribed, and the institutions they were allocated to.

1. Introduction

In Portugal, the nineties witnessed a growing interest in childhood, and Social History, Anthropology and, more recently, Sociology became the crucial disciplines in the study of childhood.

While we recognise that much has already been done to understand childhood in Portugal, we believe that the new place occupied by the children in the Social Sciences demands clarification and development of both conceptual frameworks and empirical data. Therefore, we have been attempting to conduct systematic research on an ensemble of primary sources so as to be able to understand how children were socially constructed in the transition between the nineteenth and twentieth centuries in Portugal.

Official national statistics produced from Population Census create and perpetuate documentary constructions of reality that have concrete implications for childhood while study object in a social-historical perspective. It is important to stress that a Population Census is one of the administrative tools that is most capable of objectifying the national reality, and that the State resorts to it as a device capable of scientifically rationalising social reality.

First of all, we see that the construction of childhood as a statistical object in Portugal is contemporary to the birth of the country's national statistical apparatus; as a result, it allows comparative studies in longitudinal terms.

Secondly, and considering historical epistemology, resorting to national statistics makes it possible to do research on the social conditions of emergence and validation of the categories used to represent children, as well on the observational methods utilised (namely those stemming from the interaction between science, public administration and society - cf. Topalov, 2001: 79).

As a consequence, research on the objects created by the statistical apparatus enables us to understand the genesis and evolution of the categories organising the representations of the social world. This allows us to question the familiar and natural way in which those objects are lived (acted upon, felt and thought about); namely, it allows us to question one of the most familiar and natural of the social categories: children.

What we attempt here, then, is to give account of a piece of research conducted in the realm of the sociology of childhood, based on the analysis of documentary sources, and open to contributions from other disciplines; its main objective is to understand childhood as a social construction.

2. "Getting in a dialogue with statistics" or the work's methodology.

"Records are like the little children of long ago, they only speak when they are spoken to, and they will not talk to strangers" (Cheney, quoted in Hendricks, 2000:42).

In the research we present here, our first concern was to locate children (individuals aged from 0 to 20 years old) in the national statistics produced between 1875 and 1925, so as to analyse the ages with which children were registered, the designations they were ascribed, and the institutions they were allocated to.

These statistics are organised in the areas of Demography, Social Care, Justice, Education and Labour. What we first did was to go through them both in chronological and thematic terms, in order to identify references to children, either explicit or implicit (based on age distribution, designations and institutions). Following this identification, we proceeded by analysing those different areas on the basis of their main axis - age distribution, for age is, no matter its social contents, the main indicator of childhood.

The age limits we have mentioned, 0 (corresponding to the *newborns*) and 20 years old, are the limits used in the statistics to identify all individuals considered non-adults (*under 20 years old*) when there are no other age categories. Resorting to this structural dimension was crucial in this research, just like paying attention to all the areas in which there were explicit references to *children*, or *minors*, *newborns*, *childhood*, *exposed*. During the process, it also became possible to find children referred to institutions in the different areas considered, either those institutions were child specific, or children shared them with adults.

In this article (resulting from an oral presentation), however, we decided to focus only on the realm of Demography, not only due to time constraints, but also because this is the area that better demonstrates the possibility of "making statistics talk" when it seems there is nothing they can say.

3. What demographic statistics tell us about children: ages and designations

Given that demographic statistics do not make explicit reference to children as population members, we used the moment they enter life, the moment of *birth*, to start tracing them. We were then immediately directed to the designations used to describe their condition as living beings - *born alive* -, both from the point of entering life - *births* - and leaving life - *deaths*, as well as the maintenance of their condition as living beings - *age* (which is measured in *days*, *weeks*, and *years*). *Time* emerges then as the structuring axis of the portrait of a population that, born either *male* or *female*, is ascribed to the period between the first day of life and twenty years of age.

It could then be said that birth marks the entry into the social world and the age of twenty marks the beginning of adult life. The period of time between these two limits is increasingly divided in the period between 1875 and 1917. Childhood is divided into variable time categories - *up to a month*, *a month*, *two months*, *one year*, *five years* - which eventually come to stabilize in *five-year periods*, and becomes the criteria for data presentation in later statistics.

Time categories are particularly variable in the field of *mortality*: at first, deaths were registered considering the subject's actual age at the time of death, and not pre-established age categories. It is also in the field of mortality that the coincidence between its quantitative representation and causes of death render *childhood specific attributes* more visible, particularly in what regards its definition as a vulnerable and dependant stage of life.

This means that, once again, age reveals itself as a crucial dimension in order to make statistics "talk" and to understand children/adults relationships, as well as childhood specific attributes.

3.1. Child mortality, a microscopic focus on childhood.

In our research, we have noticed that time categories are more divided in the field of mortality than in any other field of demographic statistics. The greater concentration of time categories is visible in the period ranging from 0 to 5 years of age, in close connection with a diversity of diseases causing death.

Death comes, first of all, during the fetal period: the *dead fetuses*. It then strikes at the very act of being born, as revealed by the categories *born dead* and *newborn dead*. With regard to the *newborns*, an analysis of the *death causes* reveals the poor sanitation and hygiene conditions in which labour took place - *puerperal fever* - as well as *violent deaths*, classified as *voluntary*, *criminal* or *accidental* (we believe this refers to practices such as abandon, abortion and infanticide).

However, the children who manage to get through this period will still have to deal with pathologies of regular occurrence associated both with the digestive system - *acute enteritis* and *diarrhoea* - and the respiratory system - *acute bronchitis* and *pneumonia* -, often worsened by epidemic and infectious diseases - the *flu*, *typhoid fever*, *chickenpox*, and *whooping cough*. These diseases are responsible for most children deaths during their first year of life, and their impact is clearly visible up to the age of five. Of course, these diseases are related to poor conditions as regards food - poor diet and lack of hygiene - and housing - crowding, lack of sanitation, lack of light; the major cause of all this problems is identified as lack of hygiene. In what concerns children with the age of four and five, the *diseases of the nervous system and of the senses* also play a relevant role.

The persistence of high mortality rates articulates two realms, that of the body and that of the house, an organic realm and a social realm. This enables us to infer the social character of the death causes already mentioned for, despite epidemic outbreaks all over Europe since the mid-19th century, it clearly points to the precariousness of living conditions in adult urban and working environments; in its turn, this is reflected upon a given population, that of the working class children.

As regards the age *limits* of childhood with respect to mortality, they are more clearly established between the time of birth and the age of ten: the first year is the most vulnerable stage and the age of five is the crucial survival limit.

The importance of doctors and the medical class in general must be stressed at this point, for it was their nosological positivistic framework, their concern with hygiene, that enabled a given construction of children as a specific category both in medical and social senses, through public denunciation of children's living conditions and of their abandonment.

Considering what we have said so far, we can now argue that *the most crucial differentiating fact of childhood* is the *body*, particularly its physiological and anatomical differences; thus, *physical vulnerability and dependence on social conditions*, both human and material, are understood as the distinctive mark of childhood.

However, alongside differences with respect to death, inequalities with respect to life are indisputably carved in the bodies of the survivors. It is no wonder, then, that since the end of the 19th century, adults who conducted research on children, particularly on urban working class children, had as their first focus of attention the children's *bodies*. Small, dying bodies, ill-fed or starving, dirty, infected, rachitic bodies seen as *victims* of cruelty, neglect, and family misery (cf. Racha and Ferreira, 1994; Ferreira, 2000 a, b; Hasse, 1999; Hendricks, 1994).

It is this classification of children as "victims of privation and neglect" (Hendricks, 1994: 1-15) that creates the conditions for the appearance of the "social question of childhood", which extends to the fields of Social Care and Justice. Invoking the special character of children, the need of their defence and well-being has, since then, been the basis of numerous policies and social action measures.

Final considerations

We would now like to readdress the theoretical and methodological concerns stated at the beginning of this article.

We hope it has become clear for the reader the way we confronted statistics in order to find in them our object - childhood - which is seldom explicitly referred to.

Making statistics talk also involved an intertextual approach so that we could fully grasp their social-historical meaning; we are aware, however, that this article does not present the entire magnitude of this approach.

Finally, we hope to have shown that the analysis of the taxonomies used in Population Census enables an understanding of both the constitution and evolution of statistical nomenclature used to differentiate phenomena according to their statistical relevance, through the decomposing of reality into meaningful categories in the interaction between science, public administration and society.

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