



MONTREAL, QUEBEC, CANADA; OCTOBER 29 & 30, 2004

FINAL PROGRAM

### 2004 McCord/AMS Colloquium

All events take place at the McCord Museum, 690 Sherbrooke St West, unless otherwise noted.

Pre-colloquium events:

Thursday October 28 5:30-7:00 pm Growing Up in Montreal

Exhibition launch and cocktail

Friday October 29 8:30 am Registration

9:00 am Welcome and opening remarks

9:30-10:45 am Perspectives on Child Health: European and North American Histories

Chair: Janet Golden, Rutgers University

North American Perspectives on the Historiography of Child Health, Neil Sutherland,

University of British Columbia

Ten Years of European Research on the History of Infancy and Childhood, Catherine

Rollet, Université de Versailles, Saint-Quentin-en-Yvelines

11:00-12:15 Social Representations of Child Health

Chair: Allan Young, McGill University

AIDS Orphans, Raped Babies, Suffering Children: The Moral Construction of

Childhood in Post-Apartheid South Africa, Didier Fassin, Université de Paris-Nord and Ecole des Hautes Etudes en Sciences Sociales

Selling Disability: Tools of the Trade, Laurie Block, filmmaker and director:

www.disabilitymuseum.org

12:15-1:45 pm Lunch (buffet served in Museum atrium)

1:45-3:00 pm Counting Children

Chair: Michael Kramer, McGill University, CIHR

The Historical Epidemiology of Mental Retardation in the United States, Jeffrey P.

Brosco, University of Miami

Politics, Policy and the Measuring of Child Health, Richard Meckel, Brown

University

3:15-5:00 pm Comparative Perspectives on Child Health

Chair: Andrea Tone, McGill University

The Struggle Against Infant Mortality: Some Particularities of the Quebec Experience,

1910-1970, Denyse Baillargeon, Université de Montréal

Sickled Cells, Jewish Disease and Caucasian Maladies: The Problem of 'Ethnic Pain' in

the Post-World War II History of Childhood Genetic Disease, Keith

Wailoo, Rutgers University





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FINAL PROGRAM

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5:00-6:00 pm Tours of the exhibition *Growing Up in Montreal* 

6:15 pm Reception **McGill University Faculty Club** 

3450 McTavish

Saturday October 30 9:30-10:45 am The Voice of the Child

Chair: Jason Szabo, Harvard University

"Don't feel today like speaking": Children, Experts, and Conceptions of Health in

English Canada, 1900 to 1950, Mona Gleason, University of British

Columbia

"It's Back!": Children with Cancer Talking About Their Disease, Themselves and Their

Options for Care and Treatment, Myra Bluebond-Langner, Rutgers

University

11:00-12:15 The Social Construction of Children

Chair: Jackie Duffin, Queen's University

Mental Hygiene, Film and Family in Post-World War II North America and China,

Brian Low, HuaQiao University (China)

Conceptualizing the Developing Body: Medicine, Psychology, and the Adolescent 'Body

Image,' 1920-1940, Cynthia Comacchio, Wilfrid Laurier University

12:15-1:45 pm Lunch (buffet served in Museum atrium)

1:45-3:00 pm Representing the Child's Body

Chair: Victoria Dickenson, McCord Museum of Canadian History

Dr Norman Bethune and His Circle of Artists: The Image of the Child in Art, Medicine

and Society, Loren Lerner, Concordia University

From the Last Sleep to the First Steps: Postmortem Portraits, Childhood and Amateur

Photography, Vincent Lavoie, McCord Museum of Canadian History

3:15-4:15 pm A Kind of Childhood, screening of film by Susan Bissell, Innocenti Research

Center, UNICEF (Italy)

4:30-5:30 pm Closing remarks and discussion

George Weisz, McGill University Cornelius Borck, McGill University Janet Golden, Rutgers University

Anne-Emmanuelle Birn, University of Toronto

Abstracts (alphabetical by speaker)

#### Denyse Baillargeon, Université de Montréal, Département d'histoire

The Struggle Against Infant Mortality: Some Particularities of the Quebec Experience, 1910-1970 In Nations are Built of Babies (McGill-Queen's, 1993), Cynthia Comacchio shows that as of the First World War, Ontario's public authorities clearly took charge of the struggle against infant





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mortality. The creation of the Child Welfare Bureau in 1916, the first of its kind in Canada, and the Division of Maternal and Child Hygiene and Public Health Nursing in 1920, as well as the takeover of well-baby clinics by many municipalities around the end of the conflict, all testify of this orientation. What about Quebec? This paper draws a portrait of the resources, institutions and organizations that, between 1910 and 1970, helped to educate mothers about infant hygiene and distributed free medical services. It will underline the importance of state intervention in the public health sector, both federal and provincial, the implication of the Montreal's Bureau of Health in child welfare activities, and also the presence of philanthropic organizations up until the 1960s. Differences between Quebec and Ontario will be explained by the relationship between the Catholic Church and the State, and by a conception of childhood influenced by high birth rates and nationalism.

### Susan Bissell, Innocenti Research Center, UNICEF (Italy)

A Kind of Childhood

The debate about child labour is one of the most contentious in the world today. It is an emotional debate that conjures up images of tiny children in sweatshops; their nimble fingers stitching together the products we buy in our local shops.

This is part of the story. There is another side to it. It is the side that touches on the more complex realities of children working. A Kind of Childhood is an attempt to bring those greater realities to light — to inform our notions of child labour, and to shape our understanding of childhood itself... our understanding of childhood as experienced by the majority of the world's young people. When we talk about protecting childhood and ending child labour, about boycotts and sanctions, how are children really affected? In A Kind of Childhood we will follow the lives of several children in Bangladesh as we search for answers. The central character is a boy named Idris, whose childhood and growth we have followed and filmed extensively over the past five years. Like most children in Bangladesh, work has always been an essential part of Idris' life. After losing his job in a garments factory along with thousands of other children under threat of American sanctions, Idris continued to work in a variety of jobs: in a fish market; as a public transport driver's helper; then as a driver himself. We follow Idris' story through time and space, guided by his own narration (voiceover in English), intoned with his observations and impressions. He drives us through the streets of Dhaka City, bursting with life and colour and the activity of millions of people. Through his eyes we meet the many faces of childhood in Bangladesh — the girls who sell flowers to passing cars, the children who support their sick parents, the young prostitutes, the boys selling newspapers, the children who try to balance education and work.

This is not a pro-child labour film. It is, however, a film about real children, with their struggles and dreams. Challenging strongly held notions of how childhood 'should' be, *A Kind of Childhood* gives us a provocative glimpse of another reality; a reality which at once resonates with and yet is so different from our own. It is a human story of hope and survival, not of pity or condemnation.

#### Laurie Block, filmmaker and director: www.disabilitymuseum.org

Selling Disability: Tools of the Trade

From the 19th through most of the 20th century, much of the work of educating, providing medical care and equipment, as well as vocational training for children and adults with physical, sensory, or cognitive disabilities in the United States depended on non-government organizations functioning in official or ad hoc partnership with publicly funded agencies and institutions. This presentation will take a comparative look at some of the techniques the NGOs used to raise the capital needed to run their operations. These techniques generated a wide variety of speeches, events, posters, and public service advertising. The talk will look at how organizations communicated their mission, services, and accomplishments to the general public as the media for their messages evolved. Three examples will be selected, one featuring materials from





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FINAL PROGRAM

### 2004 McCord/AMS Colloquium

late19th/early 20th century lecture hall exhibits (stand-up pitches to live audiences); an early 1930s professionally managed public service/public relations campaign using print/radio/newsreels; and a unique print/radio/television public relations campaign from the late 20<sup>th</sup> century.

#### Myra Bluebond-Langner, Rutgers University, Anthropology

"It's Back!": Children with Cancer Talking About Their Disease, Themselves and Their Options for Care and Treatment

I am currently analyzing data from a two-year ethnographic comparative study of decision making for children with cancer for whom cure was not likely (Bluebond-Langner, Belasco and Goldman 2003). The study, conducted at Children's Hospital of Philadelphia in the United States and Great Ormond Street Hospital for Children in England, is the first prospective study to follow all of the stakeholders – parents, physicians and patients – from the time that it is clear that the chance of cure is less than 30% through to the child's death or the end of the field research (nine consecutive months at each hospital). The study builds on my previous studies of chronically and terminally ill children and their families (see Bluebond-Langner, 1978, 1996; Bluebond-Langner, Perkel, Goertzel, et al 1990; Bluebond-Langner, Perkel and Goertzel, 1991) These studies as well as my current work support a particular view of children and childhood now current in childhood studies. I will weave this perspective and its implications for study as well as care of ill children into my talk as I lay out the situation in which children with cancer for whom standard therapy has failed find themselves. Particular attention will be given to the children's views of their experience, their understanding of their illness and the options available for care and treatment. Their statements will come from verbatim transcripts of audio taped conversations between myself and the children as well as interactions the child had with physicians, other medical staff and parents in their homes, hospital and out-patient clinic.

#### Jeffrey P. Brosco, University of Miami

The Historical Epidemiology of Mental Retardation in the United States

Over the last 100 years, estimates of the prevalence of mental retardation (MR) have varied widely, from 2 to 15% of the general population. This variation is explained primarily by changes in the definition of MR, but may also reflect true secular change in the number of persons with mental retardation. In this paper, I will explore the historical epidemiology of MR in the US, with focus on the intensely political nature of the definition of mental retardation. This includes disciplinary battles among psychologists, physicians, families, and other professionals; political considerations such as the number of persons who will qualify for federal programs; and broader social concerns such as the relationship between race and intelligence.

#### **Cynthia Comacchio**, Wilfrid Laurier University, History

Conceptualizing the Developing Body: Medicine, Psychology, and the Adolescent 'Body Image,' 1920-1940 This paper considers the development of interest in the adolescent body as a specific site of medical intervention within the context of the socio-cultural shifts that made the post-World War I generation of youth a "social problem." During the interwar years, medical discourses intersected with wider public concerns about the nature of modern adolescence: the physicians' growing interest in the physiological and emotional terrain of this life-stage reinforced middle-class, race-and gender-based ideals about the value of instructing the young to care for their own bodies as part of a regimen of citizenship training. The high school, rapidly becoming the defining cohort experience, served as a convenient setting for the dissemination of "health rules" toward that end. Personal stories from diaries, memoirs and other private writings suggest how some adolescents internalized increasingly encompassing medical ideas about what constituted the "picture of health" in adolescence.





MONTREAL, QUEBEC, CANADA; OCTOBER 29 & 30, 2004

FINAL PROGRAM

### 2004 McCord/AMS Colloquium

**Didier Fassin**, Université de Paris-Nord and Ecole des Hautes Etudes en Sciences Sociales AIDS Orphans, Raped Babies, Suffering Children: The Moral Construction of Childhood in Post-Apartheid South Africa

The HIV epidemic has reached a worldwide peak in South Africa, where it is estimated that five million people are infected. It has taken a heavy toll among children, mostly from poor African families, both in rural and urban areas. I am interested in the moral construction of childhood in the public sphere within this context characterized by a high level of political sensitivity. My analysis of the images and debates in the press, the political world and the social movements will be informed by ethnographical data from fieldwork in two Johannesburg townships, Alexandra and Soweto, and two Limpopo ex-homelands, Lebowa and Gazankulu. Three figures of childhood will be more specifically emphasized: the AIDS orphans, as a major issue in social programming; raped babies, as revealing the extremities of sexual violence; and suffering children, as a resource in the fight against government drug policies. I will show the common notions that underlie the three figures, as well as the particular aspect of each field. I will relate it to the global circulation of norms and values around childhood, but also to the politics of nation building. I will finally discuss the blind spots and biased perspectives in the uses of these images, show that most of the historical and social background is absent in them, and propose a political anthropology framework to give an account of the moral economy of childhood.

**Mona Gleason,** University of British Columbia, Department of Educational Studies "Don't feel today like speaking": Children, Experts, and Conceptions of Health in English Canada, 1900 to 1950

Through medical training textbooks, professional journals, and school curricula, particular ideas about the nature of children's bodies and their health were disseminated in turn of the century Canada. What is difficult to know from such sources, however, is how and whether these ideas made their way in the everyday lives of children and their families. What did children think about the treatment they received from doctors and nurses? What did children take away from health lessons they encountered in schools? Did they develop the health habits that textbooks recommended? What difference did race, class, and gender make? In order to make more visible the reception of expert attitudes and advice regarding healthy bodies in childhood, memories of adults who were born in, or grew up in, Canada in the early to mid-part of the twentieth century will be highlighted in this paper. Veronica Strong-Boag has recently argued "young voices and opinions are for the most part missing" from much of the history of children and childhood in Canada. Twenty years has passed since distinguished historian of medicine Roy Porter remarked "the sufferer's role in the history of healing – in both its social and cognitive dimensions – has been routinely ignored by scholars." Juxtaposing oral history interviews and autobiographical sources with discourses of health professionals, my intention is to begin to uncover how children themselves experienced the "incitement to health" over the early twentieth century.

#### Vincent Lavoie, McCord Museum of Canadian History

From the Last Sleep to the First Steps: Postmortem Portraits, Childhood and Amateur Photography
From the very beginning of photography, postmortem portraits of loved ones have served as
means to grieve for a loss. During the nineteenth century, many professional photographers
regularly advertised their ability to take "likenesses of deceased persons". The postmortem portrait
was the last pictorial representation of the subject, and sometimes also the first one in the case of
children and babies. Owing to the high rate of infant and child mortality, professional
photographers were frequently assigned to take postmortem portraits. By the early 1890s, Kodak
made it possible for people to take their own pictures without involving outsiders. Postmortem
photography then took a private turn. This shift occurred at a time where the amateur
photography industry celebrated family happiness in advertising, notably by presenting children
playing with a camera or parents recording their child's first accomplishments. This paper will



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# COMPARATIVE AND INTERDISCIPLINARY APPROACHES TO CHILD HEALTH IN THE 20TH CENTURY

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FINAL PROGRAM

### 2004 McCord/AMS Colloquium

examine the socio-cultural functions of postmortem child portraits in the context of a growing commodification of family life by means of photography.

#### Loren Lerner, Concordia University, Art History

Dr Norman Bethune and His Circle of Artists: The Image of the Child in Art, Medicine and Society
In the wake of the Great Depression of the 1930s and into the 1940s, artists were questioning the social responsibility of the artist and by extension the social role of art. Images of poor and sick children conveyed dissatisfaction with society's neglect of fundamental values exacerbated by widespread economic and social decline. Dr Norman Bethune, a surgeon and amateur artist, was an important catalyst for raising political consciousness, especially among Montreal artists. The first part of this presentation discusses Bethune's critical thinking about the child in relation to medicine, politics and art. It begins with an analysis of Bethune's depiction of himself as a child sick with tuberculosis, which he painted when he was a patient at the Trudeau Sanatorium. Part two explores the image of the child in the art and thought of five artists in Bethune's circle of friends: Fritz Brandtner, Louis Muhlstock, Jori Smith, Pegi Nicol MacLeod, Paraskeva Clark and Marian Scott. Dr Bethune's sponsorship of an art program for poor children will also be considered in relation to the concept of art as a therapeutic practice for underprivileged children.

**Brian Low,** College of English at HuaQiao University (China), Film and Cultural Studies *Mental Hygiene, Film and Family in Post-World War II North America and China*This presentation will compare cinematic families created for the post-World War II mental hygiene campaign in North America with filmic families constructed for post-1949 China, where no mental hygiene movement existed. Prior research into the mental hygiene movement and the North American family has focused on the intervention of the hygienists in the mother-child relationship, neglecting the side campaign to prevent grandmothers from interfering in their intervention. When compared to its Chinese counterpart, a striking contrast appears between the inter-generational unity of the family preserved by Chinese cinematographers and the images of generations separating and being isolated from each other produced as a North American ideal in the campaign to improve the mental health of children.

### Richard Meckel, Brown University, American Civilization

Politics, Policy and the Measuring of Child Health

This paper will reconstruct, examine, and interpret the Depression-era epidemiologic and policy debate that inspired the adoption of morbidity and disability rates as important indices of the health of the nation's young. In 1933, the United States Public Health Service, in conjunction with the Milbank Memorial Fund, conducted a series of surveys of the health of urban working class families. Ultimately involving a house-to-house canvass of 12,000 families in 10 cities, including a coal mining center and a cotton mill town, the studies constituted the first modern American health survey and inaugurated a shift from mortality to morbidity as the primary index of the nation's health. As Surgeon General Cummings explained at the 1934 meeting of the League of Nations Health Organization, the studies were in large part motivated by the Service's mounting frustration with the inability of "the death rate, the usual barometer of ill-health," to provide an adequate answer to what he termed among the most pressing health questions of the time: what had been the effect of the depression on health in general and child health in particular. Specifically, Cummings noted, it was hoped by the Service that the surveys would help settle an increasingly bitter epidemiological and policy debate concerning whether the worsening economic crisis was being attended by a worsening of infant and child health. Since early in the depression, infant and child hygiene advocates had been calling for federal intervention to counter what they contended were rising rates of infant and child malnutrition, disease, and emotional and mental problems. Opponents of such intervention answered those calls by noting that the traditional indices of infant and child health—mortality rates—continued to decline at a steady pace, thereby suggesting that continuing improvements in public health, medicine, and informed parenting were





MONTREAL, QUEBEC, CANADA; OCTOBER 29 & 30, 2004

FINAL PROGRAM

### 2004 McCord/AMS Colloquium

more than adequate to offset any affect that declining family income might have. Indeed, a few opponents, most notably the Hoover administration's Ray Lyman Wilbur, suggested that national belt-tightening probably had a good affect in that it was promoting simpler and more healthy eating and living habits.

#### Catherine Rollet, Université de Versailles Saint-Quentin-en-Yvelines

Ten Years of European Research on the History of Infancy and Childhood

This paper will show how European historians, demographers, anthropologists and many other researchers, have completely renewed the history of childhood and infancy during the nineteenth and twentieth centuries since the pioneer works by Lloyd de Mause and Philippe Ariès. It will focus on four main topics. The first concerns infant and child mortality and health as it is studied by historical demographers. European networks were set up to build a research program (methods, collecting data, comparison, systems of explanation, etc.), and several meetings gathered the majority of European scholars and produced several books. The second topic focuses on the daily lives ("vie quotidienne") of children and babies: what was their lived environment during the past two centuries (families, housing, education, schooling, working...)? Works by historians but also by anthropologists and art historians will be reviewed. The third part will analyze the intervention of the state in this field and the role played by medical, judicial and philanthropic networks. The emergence of a concept of the rights of children is the subject of the final part, involving numerous studies by political researchers and sociologists. Even if quantitative approaches continue to carry weight, one may observe a growing interest in new sources that provide a more precise vision of both material and emotional aspects of children's daily lives over the past two centuries.

#### Neil Sutherland, University of British Columbia

North American Perspectives on the Historiography of Child Health

The history of the health of children in the twentieth century displays two central, very striking characteristics; first, there was a very sharp decline in neonatal, infant and child mortality; second, the rates of these declines varied enormously depending on children's race, class, ethnic group, gender, and geographical location. The narrative, or more properly, the narratives delineating and analysing these changes are embedded in a complex and diverse literature. Central to it are histories of public health, child and family welfare, public policy, and of childhood and children themselves. Demography, women's history, aboriginal history, ethnic and racial histories, family history and religious history reveal other threads of the story. Much of this literature is celebratory, crafted in narratives of "progress." More recently, some historians have written in a more critical vein, probing the contentious nature of some of the work, and the motives of health professionals and reformers. These reinterpretations reveal how some "improving" measures had differentiated outcomes, not all of them positive.

### **Keith Wailoo**, Rutgers University, Department of History/Institute for Health, Health Care Policy and Aging Research

Sickled Cells, Jewish Disease and Caucasian Maladies: The Problem of 'Ethnic Pain' in the Post-World War II History of Childhood Genetic Disease

This paper examines the ways in which ethnicity and ideas of ethnic identity and pain have shaped the histories of three genetic diseases in post-World War II America. In this era, sickle cell disease (a hemoglobinopathy closely associated with people of African ancestry) emerged into prominence as a scientifically important disease, as a clinical novelty, and (increasingly) as a symbolically powerful disease characterized by "pain and suffering" long ignored. As the same time, two other hereditary diseases (Tay-Sach Disease, associated with Jewish people of Ashkenazi background, and Cystic Fibrosis, often characterized as the single most common lethal hereditary disease among Caucasians) emerged into larger scientific, clinical, and social prominence. The public discussions about each disease spoke (in particular registers) to notions of





MONTREAL, QUEBEC, CANADA; OCTOBER 29 & 30, 2004

FINAL PROGRAM

### 2004 McCord/AMS Colloquium

childhood suffering, family crisis, and group ethnic identity in America. This paper explores the evolving cultural understanding of these childhood diseases, their scientific and medical significance, and the powerful symbolism of these disorders as forms of childhood and family pain, crisis, and experience.

The organizers wish to acknowledge the generous assistance of Associated Medical Services:



"Associated Medical Services Inc. (AMS) was established in 1936 by Dr. Jason Hannah as a pioneer prepaid not-for-profit health care organization in Ontario. With the advent of medicare AMS became a charitable organization supporting innovations in academic medicine and health services, specifically the history of medicine and health care, as well as innovations in health professional education and bioethics."