

New Europe College Yearbook

Pontica Magna Program

2015-2016

2016-2017



NADIIA BUREIKO
SEVIL HUSEYNOVA
ANDRIY LYUBKA
ANNA MAZANIK
SERGEI MUDROV
PETRU NEGURĂ

KIRILL CHUNIKHIN
DARYA MALYUTINA
SANDRO NIKOLAISHVILI
ARARAT OSIPIAN
OLEKSANDR POLIANICHEV
ALEKSANDR VORONOVICI

Editor: Irina Vainovski-Mihai

Pontica Magna Fellowship Program is supported by VolkswagenStiftung, Germany.

EDITORIAL BOARD

Dr. Dr. h.c. mult. Andrei PLEȘU, President of the New Europe Foundation, Professor of Philosophy of Religion, Bucharest; former Minister of Culture and former Minister of Foreign Affairs of Romania

Dr. Valentina SANDU-DEDIU, Rector, Professor of Musicology, National University of Music, Bucharest

Dr. Anca OROVEANU, Academic Coordinator, Professor of Art History, National University of Arts, Bucharest

Dr. Irina VAINOVSKI-MIHAI, Publications Coordinator, Professor of Arab Studies, "Dimitrie Cantemir" Christian University, Bucharest

Copyright – New Europe College 2018
ISSN 1584-0298

New Europe College
Str. Plantelor 21
023971 Bucharest
Romania

www.nec.ro; e-mail: nec@nec.ro

Tel. (+4) 021.307.99.10, Fax (+4) 021. 327.07.74



ANNA MAZANIK

Born in 1986, in Moscow

Ph.D. in Comparative History, Central European University, 2015
Dissertation: *Sanitation, Urban Environment and the Politics of Public Health in Late Imperial Russia* (received CEU Best Dissertation Award)

Visiting scholar at the Institute of the History of Medicine, Johns Hopkins University (2012)

Visiting scholar at Darmstadt University of Technology (2013)

Visiting scholar at Herder Institute for Historical Research on East-Central Europe Europe (2015)

DAAD fellow at the Rachel Carson Center for Environment and Society (2013-2014)

Participation in international projects:

2010-2013 *Gender in the European Town: The making of the modern town*
(The University of Southern Denmark)

2011-2012 *Urban Historical Scholarship in East Central Europe since 1989*
(Central European University)

2011-2013 ReSET project *Towards a New Cultural History of Eastern and Central Europe*, (Institute for Historical Research, Ivan Franko National University of Lviv and Research Center 'Borderland Society: Past and Present')

Published several articles on Russian urban, environmental and medical history

Participated in conferences, workshops and summer schools in Russia, Germany, Belgium, Portugal, Ukraine, Finland, Sweden, the UK and the Czech Republic

SCHOOL DOCTORS, HYGIENE AND THE MEDICALIZATION OF EDUCATION IN IMPERIAL MOSCOW, 1889-1914

Abstract

The post-reform decades in imperial Russia witnessed an unprecedented expansion of schooling and the growing involvement of medical professionals in the school life. This article studies medical inspection and the activity of school doctors at Moscow municipal elementary schools between 1889 and 1914. The institutionalization of the school medical control was motivated by sanitary concerns and articulated through the language of hygiene. The article shows that school doctors performed a systematic, highly-valued and well-paid work and influenced legal norms and policy on the city level. It argues that school hygiene was one of the instruments of constructing a “non-coercive classroom” and promoting a more inclusive, fair and humane social policy in imperial Russia.

The post-reform era witnessed an explosion of interest in children in Russian society. Old norms of adults’ unquestionable authority over children, their oppressive treatment and mechanistic teaching were challenged by new concepts of childhood and new ideas of upbringing with their humanistic, child-centered and communicative approaches.¹

The expert discourse on children, their nurture and education developed across a number of professional fields (which were also emerging and struggling to define themselves): pedagogy, hygiene and public health, psychology and psychiatry. New professional experts criticised traditional practices of child-rearing in Russia and tried to formulate and propagate the “proper”, “rational” and “scientific” ways of caring for children. Such expert discourses also helped redefine the parent-child relations and contributed to the appearance of a different idea of parenthood, at least among the educated groups of society. This new parenthood stressed greater engagement of parents (especially mothers), their responsibility for the social and cultural development of children,

and the conscious policy of child-rearing, based on scientific knowledge, intense communication, (self-)observation and (self-)evaluation.²

The post-reform decades were also the time of the first efforts to ensure minimal child welfare and to legally protect them from exploitation and abuse. The factory law of 1882 forbade the employment of children under 12, limited working day for those under 15 and obliged industrialists to provide schools for their child workers. By the turn of the century, child protection within their families also came to the attention of the lawyers. The laws of 1891 and 1902 improved the legal status of children born out of wedlock. The new Criminal Code of 1903 prescribed arrest or removal of parental power for cruel treatment of children under 17, as well as for forcing them into beggary, prostitution or marriage.³

Perhaps nowhere was the change in childhood policy and experience more perceivable than in schooling. The post-reform decades recorded an unprecedented expansion of primary education. According to the statistics of the Ministry of Education and the Holy Synod, the number of schools (including urban, *zemstvo* and church-parish schools) grew from about 8,000 in 1856 to over 100,000 in 1911; the number of pupils increased from 450,000 to 6.6 million over the same period. A one-day census of the Ministry of Education in 1911 revealed that out of every 100 children aged between eight and eleven, 58 boys and 24 girls in the countryside and 75 boys and 59 girls in towns were attending school. Of course, there were great regional variations in school availability and the expansion of primary education had to catch up with the substantial population growth of the early twentieth century, but it is nevertheless clear that Russia was gradually moving towards a schooled society.⁴

In the research on the history of educational institutions, a well-known analysis of schools as an apparatus of modern disciplinary power became an obvious point of reference. However, the applicability of Foucauldian ideas to the Russian context is generally a subject of an ongoing historiographical debate, and the history of Russian elementary schooling is a field where alternative visions and interpretations have been convincingly proposed. Thus, Ben Eklof has repeatedly emphasized the distinct schooling culture that emerged in post-reform Russia. This culture, he argued, focused on non-coercive motivation, fostering self-esteem and initiative, and radically differed both from the authoritarian classroom that persisted elsewhere in Europe and from the overall Russian realities. In his words, the existence of such a “child-centered classroom in a coercive, hierarchical authoritarian society is a major paradox.”⁵ Catriona Kelly,

however, suggested that this argument has its limitations, and that the rigorous inspections and penalties by the Ministry of Education, as well as demands of academic curricula, imposed considerable constraints on the “non-coercive” and “child-centered” classroom, especially in secondary schools.⁶

With these discussions in mind, I would like to approach late imperial Russian schooling from a different angle – that of public hygiene. In the 1870s physicians and hygienists joined pedagogues and educators in the debates on schooling and its needs. Educational reformers recognized that school could shape not only the pupils’ minds, knowledge and morality but also their bodies and physical development, and that the two spheres were in fact tightly interconnected and inseparable. This meant that, although the content and style of teaching remained the primary concern, there were now new variables that could determine the results of schooling: the material environment of schools, the temporal and spatial organization of the educational process and its ability to accommodate, adjust to, harm or change the pupils’ bodies.

For public hygienists and community physicians schools presented an excellent source of information and an object of medical-statistical research, as few other institutions offered such a possibility to observe and study patterns of health and disease. The fact that in post-reform Russia the development of community medicine and, to a substantial degree, the expansion of schooling were managed by the same local self-government bodies – zemstvos and municipalities – helped the intellectual exchange between the two spheres and opened the way to some synergy of practical efforts.

The practical activity of school doctors in Russia has been largely overlooked by historians or dismissed as a failure. Thus, Andy Byford wrote that

the hygienists’ conceptualization of the school doctor remained only an unrealized ideal. In practice, Russian school doctors were ordinary general practitioners with only a formal link to a few schools in their local area [...] Only very occasionally and entirely as a matter of the individual doctor’s personal initiative would systematic studies of, say, the student’s eyesight, the quality of air in classrooms, or the adequacy of lighting in a school, be carried out. In other words, issues of “school hygiene” were not at all a regular part of doctors’ job description.⁷

For Byford, it was psychology and psychiatry that served as strategic links between medicine and education and promised to empower school physicians, particularly when dealing with “unteachable” or “abnormal” children.⁸

My article aims to revise this view through studying medical inspection and control at Moscow municipal elementary schools between the 1880s and 1910s. I believe that the in-depth analysis of the more systematic, regular and institutionalized forms of medical practices at schools in the last decades of the nineteenth century (that is before the rise of child psychopathology) could offer a different interpretation of the role that medicine played in the changing experience of mass schooling in late imperial Russia.

There are several aspects that make the study of schooling in Moscow particularly interesting. Historians of school education in imperial Russia focused primarily on rural schools, while the phenomenon of urban schools still awaits a thorough and critical study. Despite many common concerns, it is clear that urban and rural education faced different constraints in terms of infrastructure and accessibility, recruitment and attendance as well as the value of literacy and structured education in the communities they were serving. Furthermore, Moscow, unlike many smaller towns or zemstvos, had enough financial, social and infrastructural resources to actually implement at least some of the expert recommendations and to translate scientific debates into practice. Finally and most importantly, Moscow was one of the first cities in Russia to institutionalize medical control in municipal schools through the introduction of school sanitary physicians in 1889 and school outpatient clinics, thus formalizing the “medicalization” of schooling.

School in the eyes of late-imperial hygienists and physicians

“Nowadays there is a widespread opinion that the present organization of schools harms the health of children,” wrote Friedrich Erismann, one of the founders of scientific hygiene in Russia, in his book *The Influence of Schools on the Development of Myopia* (1870).⁹ This was the “first” book in several respects – the first book that Erismann, born and trained in Switzerland, wrote in Russia, the first work in which he moved beyond his initial specialization, ophthalmology, into the domain of public hygiene,

and the first study which applied the ideas of Western European hygienists to study Russian schools.

Erismann's interest in schools and their influence on eyesight was not particularly innovative in itself. In the 1860s a number of European physicians studied the adverse impact that schools had on pupils' health.¹⁰ In 1869, on the request of the Prussian Minister of Education, Rudolph Virchow brought together those scattered accounts into his report *Ueber gewisse die Gesundheit benachtheiligende Einflüsse der Schulen*.¹¹ The report had a significant resonance in Russia as the Deputy Minister of Public Instruction ordered to translate and publish it in the Ministry's official journal. The editors of journal noted that Virchow's valuable observations could be of limited practical interest in Russia where the primary concern was the lack of schools rather than their negative impact, but by 1870 Virchow's report appeared in Russian already in two different translations.¹² These publications, together with Erismann's book, signaled the beginning of the school hygiene in Russia which would develop and institutionalize in the two following decades.

So how exactly did the nineteenth century Russian schools harm the health of their pupils? In the opinion of hygienists, schools could induce various disorders of vision, digestion, blood circulation or skeletal development, most importantly myopia, strabismus and scoliosis. In addition, the organization of space and furniture at school caused constant inconvenience and discomfort to pupils, forcing them to move, turn and fidget and undermining their concentration. Although teachers attributed children's lack of attention and inability to sit straight to their negligence, inadvertence and bad manners, hygienists argued that those problems were in fact a result of inadequate school environment.¹³

Another concern was the weakness and underdevelopment of pupils' chest and ribcage, which at the time was regarded as a predisposition to consumption and other diseases of the lungs. In 1881, a zemstvo sanitary physician Valentin Nagorsky examined pupils of the St. Petersburg zemstvo district and found out that in their physical development, including height, weight and especially chest girth, they yielded not only to pupils from Western European countries, but also to their coevals employed at Russian factories. Was a school, Nagorsky wondered, more dangerous for children's health than a factory? Given the existing hygienic state of schools, he suggested, it was perhaps a blessing that only a minority of children were attending educational institutions, because their benefit for the intellectual development could hardly make up for their damage to health.¹⁴

Hygienists indicated a number of features of Russian schools responsible for their negative impact on children's health. School furniture was one. Erismann noted that in St. Petersburg, where he conducted his first survey on school hygiene, "very little attention was paid to the height of pupils, therefore 10-year old boys often work at the same desks as the 20-year old men, so they cannot reach the floor with their feet and, because of the extremely high position of desks, are forced to lift their shoulders so much that their necks become completely invisible."¹⁵ Too big or too small desks and benches, the impossibility to adjust their position, the lack of backrests and foot stands were both easily identifiable and easily amendable problems. In contrast, a number of other widely acknowledged problems – insufficient lighting of classrooms, poor ventilation, dampness, inadequate heating – were far more difficult to tackle as their resolution required a complete reconstruction and relocation of existing school premises.

In fact, the standards that hygienists set were not so easy to meet. Schools were required to be spacious, dry, well-lit and well-heated, with several rooms, a teacher's apartment and a yard. Erismann's ideal classroom was a 70 sq. m. room with at least 4 m high ceilings, a window on the left side, oak parquet, diffused lighting and independent systems of heating and ventilation. It was meant for a class of 36, or for 18 double desks arranged in three rows. The size of the room was supposed to allow all pupils to see the blackboard and hear the teacher's voice without it being confused by the echo. Instead of standard flat school desks Erismann proposed using slanted desks with an incline of 12-14 degrees (the design later known as Erismann's desk) which he believed to be the most ergonomic and beneficial for pupils' posture and sight.¹⁶

The reality, of course fell short of those hygienic norms. A sanitary engineer Illarion Pavlov observed in 1886 that "although school hygiene is sufficiently developed, although it provides general rational rules of classroom size, lighting, heating, ventilation, etc., until now hygiene was on its own and the reality on its own." In his view, an important reason for this was the failure of engineers and technicians to provide an essential link between the two spheres and to produce projects that took into account both the norms of hygiene and the material possibilities of community schools, especially in the countryside. Pavlov's goal was to prove that school construction according to sanitary norms was not always expensive and difficult and that financial constraints were not necessarily an obstacle to school hygiene. For this he designed a set of projects of simple and cost-effective school buildings, which met the

basic hygienic recommendations but could nevertheless be afforded by poor communities.¹⁷

The material organization of schools was, however, not the only concern of hygienists. In fact, the spheres of school life, which hygienists saw as the domain of their influence, responsibility and intervention, were surprisingly numerous. One such sphere was school discipline and punishment, and on this question the positions of hygienists and reform-minded pedagogues were unanimous. Nikolay Korf, in his famous and very influential handbook for teachers *Russian Elementary School* (1870), which by the turn of the twentieth century went through two dozen editions, called for abandoning the “old” military-like school discipline, based on rods, fear, oppression and boredom, and argued that only warm and loving attitude to children could lead to successful learning, and this view soon became a widespread teaching philosophy.¹⁸ If for progressive educators the rods of the “old” school were pedagogically ineffective, for hygienists they were unhealthy. They opposed not only the obvious forms of corporal punishment such as flogging (which was also forbidden in Russian schools), but any disciplinary measures that involved the body – flicks and slaps, hitting pupils with a ruler, making them kneel or stand, leaving them without a meal, etc. The only acceptable form of punishment was to deprive a pupil of some pleasure, for example, a game, but, as one physician admitted, “there are very few pleasures in school life.”¹⁹

School curriculum was another sphere of intervention for hygienists. They insisted on adjusting schooling to the psychological development of children and easing its strain on their mental and physical health.²⁰ While pedagogues and educators argued for the expansion of schooling, for the possibility to teach more subjects and more classes to more people, especially in primary schools, physicians proposed to limit it. Hygiene, Erismann wrote,

should require the simplification and reduction of school curricula, that is the decrease in the number of subjects, in the number of lessons, especially among younger pupils, the decrease in the quantity of homework and preparation. It is unacceptable that a 14-year old child spends all day with books, at school or at home, and that he does not have time for outdoor movement, for children’s games or for any other physical activity.²¹

To minimize the negative effect of schooling and to keep the balance between the development of the mind and the body, hygienists prescribed

sufficient sleep, long walks and physical exercise. Among the possible types of physical activity, it was not the structured and disciplined training and gymnastics, but outdoor playing that was seen as the healthiest and the most suitable option for school children. In Erismann's words,

our children play very little, and our urban children even do not know how to play. This phenomenon at first seems very strange and its roots are hidden in many natural and practical [estestvennykh i bytovykh] circumstances of our home country [...] Children need to play; for any child a game is a necessary condition of its life and normal development. If our society gets used to the idea that active games should not take place in closed premises but, if possible, outdoors, this would create a base for the proper physical development of our younger generations.²²

There were two important consequences of framing the field of hygiene so broadly. First, school hygiene offered a language and tools to criticize schools, even the most "progressive" municipal and zemstvo schools, from a position of child experience (however misinterpreted by hygienists), and not that of academic achievement. This perspective offered an alternative to the excitement about the rapid spread of schooling in the post-reform Russian society. Hygienists were far from denying the need and the value of mass education, but they warned that it had its price. Schooling – even if it promised personal development, social mobility and liberation in the future – still required restraining the body and the freedom of a pupil and condemned him or her to monotonous days in an uncomfortable and unnatural position, often hungry and cold, and at a higher risk of getting a chronic or contagious disease. Therefore, physicians argued, the classroom experience should be minimized, diversified and compensated with sufficient time outside of school and away from educational process.

In their own narrative, the theoreticians of school hygiene saw themselves as protectors of pupils and their bodies against the coercion of the educational system. The question remains, however, whether the lived experience of children outside of schools was better and freer than at school. Ben Eklof's research on Russian rural schools reveals the enthusiasm with which children went to school and the affection they retained for schooling. He also shows that the new child-centered and humanistic pedagogy encountered resistance within the families – parents thought that children were treated too leniently at school, that school was spoiling them, and encouraged teachers not to spare the rod.²³ Given the

harsh family mores among Russia's laboring population, common domestic violence, authoritarian parental power and cruel child-rearing practices, in villages and cities alike, the role of schools for children's physical and psychological health was both restraining and liberating. School could be not only the source of disciplining, physical and mental exhaustion, chronic and contagious disease, but also an escape from widespread violence and oppression, an alternative to hard work at a factory, in a workshop or in the household, that is, a healthier and a safer space for a child's body.

On the other hand, the widest possible delineation of the domain of school hygiene also served as a powerful and often effective justification for the claim for greater authority of physicians in the matters of education and their control over the operation of schools. Erismann clearly welcomed and enhanced such a medicalization of schooling:

The beneficial and desirable development of school affairs in the interests of students will only be possible if teachers and directors of educational institutions take the question of school sanitary conditions seriously and if physicians with special education in hygiene receive a significant influence over the organization of school curricula and over the lessons themselves. In other words, the physical and mental well-being of the youth urgently requires the organization of sanitary control over the state and private educational institutions and the active involvement of hygienists in the decision-making of school councils.²⁴

On the following pages, I will discuss how the processes of medical control of schools evolved and operated in imperial Moscow. I want to show that the involvement of physicians in the questions of education, that gradually happened in the last imperial decades, had many significant, if at first subtle, consequences for the entire experience of schooling in Russia, including school layout and ownership, the form of school curricula and classes taught, eating facilities, school sports and summer camps, the organization of medical care and prevention as well as the evaluation of pupils' abilities and potential. Many of those practices would outlive the imperial classroom and shape the Soviet childhood and schooling for decades to come.

Moscow municipal primary schools and the emergence of the school sanitary control

The involvement of the Moscow City Council in the matters of public education started in the 1860s. Back then, Moscow, a city with a population of ca. 400,000, had only 13 public elementary boys schools – they belonged to the Ministry of Instruction but were subsidized by the City Council. In 1867, to balance this gender disproportion, the city government opened five girls' schools, and those became Moscow's first municipal schools.²⁵

The 1871 report of the inspector of popular schools from the Ministry of Instruction gives a picture of how the first municipal primary schools – five for girls and one for boys, opened in 1870, – were organized and operated. The boys' school had 126 pupils and employed six teachers and two priests. The girls' schools were somewhat smaller in size: each of them had about 100 pupils, one priest and three or four teachers, usually female. In addition, each school also had a (female) trustee (*popechitel'nitsa*), responsible for the supervision and administration of the school. Pupils were divided into three grades according to their abilities, and studied reading and writing, grammar, basic Russian history and geography (*mirovedeniye*), arithmetic, religious instruction (*Zakon Bozhiy*), as well as singing and mechanical drawing (*chercheniye*). The Ministry's inspector was very satisfied with the arrangements at Moscow's municipal schools and their quality of teaching – the success that he attributed to pedagogical courses, organized by the Moscow City Council to prepare school teachers, help them design curricula and introduce them to the effective methods of instruction.²⁶

The municipal primary education was not free, but the tuition fee was set at only 3 rubles per year – compared, for example, to more than 200 rubles per year at a private elementary school in Moscow. However, even that sum was apparently too high for many families and, in fact, as the report reveals, a large proportion of pupils (sometimes, more than a half) studied for free.²⁷ The tuition fees were not meant to pay for the school expenses, which were covered by generous municipal funding (4900 rubles for the boys school and 3000 rubles for each of the girls schools in 1871), but rather allowed schools to accumulate some additional funds; perhaps, that could explain the lenience with collecting the fees.

In 1882, Moscow had 55 municipal elementary schools, including 26 schools for girls, 25 for boys and 4 for both sexes together. That year

the Moscow City Council declared systematic expansion of primary education its priority and set to establish ten new schools a year. Indeed, in the next two years, 18 new schools were opened, and the number of pupils increased from 6,600 in 1882-83 to 8,700 in 1884-1885. In the following decade, however, the school expansion slowed down, until the next boom, connected to the birth of Princess Olga in 1895 and the coronation of Nicholas II in Moscow in 1896, when 27 new schools were opened in one year. After this, the growth of schools continued steadily (see Figure 1). Moscow also took some steps to develop secondary education: in 1885 the first two municipal secondary schools for girls were opened, joined by a secondary school for boys several years later. However, the number of municipal secondary schools remained very small (seven for boys, eight for girls in 1911-1912), and it was in primary education where the municipal efforts concentrated.

In 1909, the Moscow City Council adopted a course towards universal primary schooling. At the same time, the 3-ruble tuition fee was abolished and the length of study at Moscow municipal schools increased from three to four years. By 1911-12 Moscow had already 312 primary schools and all of them had successfully switched to a four-year course. The financial side of this project was helped by a governmental subsidy, resulting from the State Duma's (Russian Parliament that appeared in the course of the 1905 Revolution) decree on sponsoring public education. The Moscow City Council also petitioned the Ministry of Instruction to make primary education in Moscow obligatory; the Ministry, however, replied that the introduction of obligatory primary education could only follow the revision of the general law on primary schools.²⁸

Figure 1. Expansion of municipal schools in Moscow

	1869-70	1879-80	1889-90	1899-1900	1909-1910
Number of schools	5	40	81	150	288
Number of classes	12	119	267	501	1170
Number of pupils	331	4138	10461	19853	43532

Source: I. A. Verder, ed. *Sovremennoye khozyaystvo goroda Moskvy* (Moscow: 1913).

The primary education in Moscow was separate for boys and for girls, although a small number of mixed schools existed between 1879 and 1893. Importantly, the goal of keeping gender balance, which had been behind the municipal intervention in public schooling in 1860s, never disappeared, as the municipality remained committed to promoting both boys and girls education. Despite the general bias against girls education in Russian society and stronger motivation for boys to finish elementary school (to reduce the term of their military service), the proportions of male and female students remained, respectively, at about 52% to 48%, while the number of girls' schools was, in fact, higher. Furthermore, girls' schools had predominantly female teachers and exclusively female trustees. The existence of trustees, responsible for administration, maintenance, teaching arrangements and personnel decisions at their respective school, was a peculiar policy of Moscow, different, for example, from that in St. Petersburg, where several schools were managed by one district trustee, usually male. In Moscow, the practice of having only female trustees for girls schools meant that more than half of Moscow schools were managed by women. In addition, school trustees were often consulted and invited to attend the meetings of the School Committee of the Moscow City Council, allowing women to take an active role in shaping public education in Moscow.²⁹

Who attended those municipal schools and how? The 1901-1902 report of Moscow primary schools could give some idea of the student profile and attendance. That year, the city had 176 primary schools with 11,824 male and 10,999 female students. Those pupils were rather unevenly distributed across the school grades. The most common size of a first grade was between 45 and 55 pupils – compared to 35-55 in the second and 15-35 in the third grade. This suggests that a number of pupils withdrew without finishing a course (this trend was particularly noticeable in girls schools). About 55% of all pupils belonged to the peasant estate (this group, no doubt, counting many migrant workers at factories and workshops); one third were from the lower urban groups and craftsmen (*meshchane i tsekhovye*), 5% were “soldiers’ children” and 6.5% came from the families of merchants, priests, honorable citizens and other privileged groups. The municipality also kept records on the fate of its pupils after leaving school. Thus, among the 1900-1901 graduates, 25% of boys and 16% of girls continued their general education at grammar schools (*gimnaziya*), municipal secondary schools or seminaries, 22% of boys and 19% of girls went to professional, technical or commercial

schools, another 22% of boys and girls started working, while 29% of boys and 43% of girls remained with their parents.³⁰

The expansion of schooling in Moscow, which went parallel to the establishment of school hygiene in Russia, was bound to raise a question of medical supervision of schools. However, this question did not come up until the late 1880s – the time, when the municipality, under the leadership of the young and extremely active mayor Nikolay Alekseyev, became involved in several public health and sanitation projects. In 1885-1889 it took over the city hospitals, opened the first municipal outpatient and veterinary clinics, reformed the system of venereal disease prevention and constructed a new public abattoir.

The initiative for the introduction of medical supervision at schools came from the schools themselves; however, this initiative fitted well with the general line of municipal activity at the time. In October 1887, Nikolay Richter, the trustee of the boys' elementary school in Prechistinka district, proposed to the Moscow municipal board to appoint a sanitary physician to his institution. "Concerned with the sanitary state of the school and pupils," Richter consulted his acquaintance, a former zemstvo sanitary physician Nikolay Mikhaylov, who agreed to perform medical and sanitary control at his school – and, remarkably, without any compensation for his work.³¹

Mikhaylov was, in fact, an experienced sanitary physician with some name in school hygiene. As a sanitary physician of the Moscow zemstvo, he conducted research and published on the physical development and the morbidity of pupils at rural schools as well as on the sanitary conditions of educational institutions.³² Using his experience of inspecting rural schools, Mikhaylov prepared a draft program of responsibilities of school sanitary physicians, which Richter attached to his letter. The program included medical examination of all children entering schools, smallpox vaccination, biannual measurement of children's growth, control of their health, quarantining and providing basic medical care, issuing certificates of recovery, as well as inspection of sanitary conditions at schools and disinfection.³³ Although Richter's stated goal was to get the Board's approval for his innovative practice, it is plausible that the actual purpose of the letter – and definitely its eventual result – was to attract attention to the matters of health and hygiene at schools.

Richter's letter was received well by the Moscow municipality and raised a question of organizing systematic medical surveillance of the city schools. To discuss the matter, the Teaching commission of the Moscow municipal board convened a meeting of school trustees (both male and

female), municipal representatives and physicians with an experience in inspecting child health. The participants agreed that the establishment of medical surveillance at schools would be a good way to prevent the spread of contagious and the development of chronic diseases, and that it would be easier, cheaper and more convenient to organize such control in a centralized manner. It was proposed to hire six physicians, whose work would be compensated by the municipality from the existing school tuition fees. Views differed, however, as to the exact remuneration of physicians – some suggested that their salary should be 780 rubles per year, like that of physicians at municipal hospitals; others thought that it should be 1080 rubles, like that of sanitary inspectors of doss-houses.³⁴

The purpose of the school medical surveillance was seen not in cure and therapy, but in prevention and stamping out, so that the sick children would be isolated or referred to municipal hospitals and outpatient clinics. The participants of the meeting generally supported the program proposed by Mikhaylov, but added that “because of the novelty of this activity for Moscow, the detailed regulation of the activity of a [school] physician is impossible: it should be left to experience.”³⁵

The Moscow City Council approved the plan and, in fact, agreed to allocate more funding to it than had been initially requested: the salary levels were set at 1080 rubles per year to five regular physicians and 1500 rubles to the chief physician. Importantly, the shape of the medical surveillance at schools was decided not by the governmental bureaucrats or medical scientists, but by the local educational and public health practitioners, who, although perhaps lacking competence in the scholarly debates on child physiology and psychology, had a deep understanding of the actual practice and children’s experience of schooling.

Moscow school doctors and their work

The school medical inspection started its operation from January 1889, and Nikolay Mikhaylov, who stood behind this initiative and was ready to volunteer for it, was appointed the chief school doctor.³⁶ Already as a zemstvo sanitary physician, Mikhaylov advocated the right of women to practice medicine, particularly at Russian elementary schools, otherwise, he wrote, “many aspects of the growth and development of the female body, as well as its morbidity and [disease] aetiology would for a long time stay in the darkness.”³⁷ He remained consistent with this view and

hired two female physicians, Olga Andreyeva and Olga Gortynskaya (who had a Medical Doctor degree and an international professional career) to perform medical surveillance in 30 of the 38 Moscow girls schools. The female physicians worked according to the same rules and for the same salary as their male colleagues.³⁸

Mikhaylov's reasons behind hiring of female physicians included not only women's professional emancipation but also the moral aspects of performing medical control. Considering that in the 1880s the system of public health in Moscow was only emerging, most of the city dwellers had little contact with (and possibly little trust in) the medical profession. Regular preventive inspection, that is, exposing child's body, especially a seemingly healthy one, to the medical gaze and intervention, might encounter parental suspicions and resistance. The examination of a female body by male physicians appeared to be particularly problematic. At the first meeting of school doctors Mikhaylov suggested that

girls should not be examined thoroughly, especially by male physicians – at first it is enough to perform only the examination of neck, arms, upper chest, head, throat and the external eye check. Obviously, such examination gives less information than, for example, the examination of the entire skin surface, but considering that the practice of school sanitary inspection is only beginning and that there can be people who do not understand the tasks of the sanitary inspection and misinterpret them, it is better to initially abstain from the thorough examination of girls. If any of us, school men-physicians, needs to thoroughly examine a girl, for example, when suspecting syphilis, then probably our comrades, school women-physicians, would not refuse to help us.³⁹

Nutrition was another aspect where moral and medical questions conflicted. School doctors observed that a substantial part of pupils at municipal elementary schools suffered from malnutrition. Physicians warned that hunger prevented children from concentrating on their studies and argued that "the organization of the proper nutrition should be one of the main and considerable parts of the general hygienic regime of the school."⁴⁰

However, from the very beginning of inspection it became clear that the medical and parental ideas of the proper child nutrition differed. In spring 1889 the Moscow municipal board received several complaints from parents who objected to physicians recommending ferial food, in particular, milk, to children during the Lent time, when the Orthodox rules forbade the consumption of any meat or dairy products. The head

of the municipal school committee, Ivan Lebedev asked physicians to prescribe ferial food to children only in exceptional, medically justified cases, because, as he put it, “one could not go further without disturbing the religious views of the people” [*ne narushaya religioznye vozzreniya naroda*]. The chief school doctor Mikhaylov replied to this that one cannot deprive physicians of the right to recommend ferial food, especially milk, to weak children, if physicians knew that it was necessary for children’s health. This, perhaps, could suggest that Mikhaylov himself believed that physiological laws prevailed over the specific rules of religious life. However, physicians agreed that religious views should be respected and that any advice on nutrition should be tentative and careful, “in order not to hurt and insult moral and religious feeling” [*nравственnoye, religioznoye chuvstvo*]. The final decision on child nutrition was delegated to parents, who were also encouraged to consult priests if they doubted the moral propriety of milk consumption by their children.⁴¹

Adequate nutrition at school remained high on the agenda of school doctors for many years. Physicians argued that, according to the contemporary hygienic norms, the interval between meals should not exceed four hours, but children were spending between five and seven hours at schools without any provision for meals. The Moscow municipality recognized its responsibility for school lunches and gave a small allowance for these purposes, but with that money the only food that schools could provide to its pupils was rye bread. School doctors encouraged parents to give their children home-prepared lunches (in particular, milk), but according to their investigation, about a quarter of all families did not follow that recommendation, and especially during the Lent time many children ate only bread. Some schools attempted to improve the situation by providing additional free meals (usually milk, meat broth, or porridge) to the weakest and most malnourished children. In 1902 this was reportedly practiced in 45 percent of schools. The entitlement to that additional meal was need-based, and it was school doctors who decided which children would get it.⁴²

However, school physicians saw the selective need-based support only as a temporary palliative measure. They insisted that warm lunches should be provided to all pupils at municipal schools, regardless of their social background. According to medical recommendations, those lunches should include milk (at least 300 ml per child) and a warm meal, for example cabbage or potato soup with meat, rice or millet porridge, as well as pea soup or buckwheat for the lenten days. The idea of a universal

free warm lunch at the schools generally found support in the Moscow municipality, but the continuously increasing number of pupils made it difficult to procure the necessary resources. The eventual solution implied a 50/50 participation: in 1911, the municipality decided that schools should offer warm lunches to all pupils, but the meals for the needy half would be financed from the city budget while the wealthier families should cover the expenses from their own means. School lunch was also regarded as a model healthy meal – thus, even if children lived nearby and could go home to have lunch there, it was permitted only if parents could prove that the meal at home was better than the meal at school.⁴³

Another major preoccupation of physicians was the organization of school space. Importantly, most of the municipal schools in Moscow were located in rented premises, which were not meant for educational purposes. Opening a municipal school did not imply constructing a specific school building – the scheme that we are used to today. In fact, the link between school as an educational institution and school as a special type of physical space was only emerging: in late-imperial Moscow, school usually occupied only a part of the building, sharing it with private apartments, but when a proper school building existed, it often housed several legally and educationally independent schools.

Finding school premises was a big problem, partially because of the general shortage of adequate properties, partially for the lack of funds and time. It was school doctors who were responsible for inspecting the potential premises and who decided whether those could be converted into schools. In most cases, however, as physicians complained, such decision required a compromise between the hygienic norms and the availability of properties, and they eventually had to choose “the lesser evil.” The fact that rented school premises were all of different quality and design reinforced the role of physicians, because no standard solution could be found and a separate evaluation and decision had to be taken in each case. Physicians mobilized their knowledge and resourcefulness to make the available school space more comfortable for a child’s body and accommodating of its needs. School doctors determined the type of school furniture and its arrangements; they proposed adjustments to the ventilation and heating systems, requested the construction of additional ovens or reorganization of toilets. That activity, however mundane it might seem, no doubt affected the comfort of children at schools and their lived experience of schooling.⁴⁴

Furthermore, constant reports of school physicians on the inadequacy of the rented school premises motivated the municipality to construct its

own proper school buildings. This process developed particularly rapidly in the 1900s, and by 1911 17% of pupils studied in municipal buildings (which were usually shared by several schools). The construction norms for such buildings were developed by architects together with school doctors and reflected many of their previous concerns and recommendations. For example, warm meals for pupils, promoted by physicians, required cooking and eating facilities, and the absence of the latter posed a significant hindrance to the introduction of lunches at school. In their 1904 report on school meals, physicians argued that “a kitchen and a canteen should be recognized as a necessary part of any well-organized school building.”⁴⁵ Responding to that medical discussion, the new norms required all school projects to include kitchens and canteens. The construction rules also forbade locating any classrooms in the semi-basement floor and established the proper size of rooms and windows; they stipulated rooms for medical examination as well as ventilation and water-based heating systems, with a possibility to adjust temperature individually in each room. Toilets needed to be heated, naturally lit and equipped with a separate ventilation system and a sufficient number of water-closets and sinks with running water (one per 25 students) – the convenience far above the level that most pupils had at home. Moreover, physicians repeatedly emphasized the importance of games and outdoor activities for schooling, therefore every school project was required to have recreational rooms and outdoor playgrounds.⁴⁶

Apart from creating a hygienic and comfortable environment for children’s bodies at school, physicians also interacted with them in a more direct way. School doctors measured and weighed children twice a year, organized smallpox vaccination, conducted regular selective medical checks, revealed and stamped out cases of contagious disease (most commonly, scarlet fever, diphtheria, measles, chicken pox and mumps) and were responsible for the entailing preventive measures, such as quarantine and disinfection. Although the anti-epidemic measures of school doctors somewhat overlapped with the activity of municipal sanitary physicians, the universal examinations helped identify and address also less threatening or endemic diseases, which were beyond the focus the city sanitary inspection, for example, scabies, which, according to Mikhaylov’s report, was the most common disease among pupils.⁴⁷

Physicians criticized the practice of detaining or delaying pupils after lessons or during breaks and sharply opposed any type of punishments that involved the body (for example, making delinquent pupils stay on

their knees, which was practiced at some of Moscow's boys schools). Their general approach was that "a child's body needs to be spared." This, however, did not exclude physical exercise. School doctors advocated physical activity, especially outdoor movement games, as well as the introduction of gymnastics classes not only for boys, but also – and especially – for girls. One specific concern of school doctors was that physical education lessons should never have a form of military gymnastics and drilling, taught by soldiers – as it was practiced at imperial military schools and colleges. They argued that instructors of gymnastics need to have a background in pedagogy and be trained to work with children. In 1909, the Moscow City Council commissioned a Conference on physical education. This conference concluded that physical exercise should be made part of the regular school curricula and that instructors for those classes, as for other school subjects, would need a pedagogical training.⁴⁸

From the very beginning, school doctors were discouraged to provide medical care and treatment at schools. Their task was to isolate the sick and refer them to municipal hospitals and outpatient clinics where they could receive free medical care. By the turn of the century, there was a growing demand for the separate medical care for children. It was realized in 1903 with the opening of the first school outpatient clinic, which specialized in dentistry and otolaringology. In 1911, there were already five such outpatient clinics with different specializations which served 12,000 individual patients annually.⁴⁹

One particular dimension of the work of school physicians was selecting children for summer colonies and their supervision there. School summer colonies existed in Moscow since 1890. The idea of school colonies was to give the weakest and poorest pupils a possibility to spend summer in the countryside in a healthy and comfortable environment. As one of the municipal physicians put it,

school summer colonies were a result of realization that the growing children's bodies of the absolute majority of city pupils have to develop in extremely abnormal conditions and of the desire to do at least something to counterbalance those abnormalities, to give the forming children's bodies the opportunity to develop correctly, even if for a short time.⁵⁰

School colonies were not strictly speaking a municipal undertaking. The idea came from the teachers and trustees of municipal schools and was financed from the school funds so that most children could go there

for free. Teachers and trustees successfully mobilized their social networks to minimize the costs of the summer colonies and to get funds to support them. Buildings were always provided to summer colonies free of charge. Usually those were gentry estates, unused summer houses or zemstvo schools in the provinces around Moscow. School money was thus used to cover food, transportation and service expenses. The municipality got directly involved in the organization of summer colonies only after 1904, when the municipal deputy Vasily Bakhrushin donated 12,000 rubles for these purposes. In 1890 there were 3 summer colonies for 91 children altogether, 25 for 445 children in 1898 and 67 with for children in 1911. In 1912 almost 3000 children spent summer in such colonies.⁵¹

In colonies, which usually lasted for two months, children spent their time playing (cricket seemed to be a particularly loved game), bathing, fishing, gardening, walking in the woods, picnicking, handcrafting, drawing or organizing amateur theaters and choirs. All those activities were quite normal for the “dacha” life of the Russian middle-classes, but completely new to the pupils of Moscow municipal schools, half of whom had never previously left Moscow. The diaries of the colonies as well as the reports of their instructors testify that children enjoyed their time there and wanted to come back the following year.⁵²

In colonies, as in schools, nutrition received a particular attention. The board was simple but abundant: milk and bread for breakfast, meat soup and some cereal or vegetable dish for lunch, tea and bread in the afternoon, usually outdoors, cottage cheese or porridge and milk for dinner. There was no restriction in the size of portions, and children could eat as much as they wanted.⁵³

School doctors were very much involved in the project of summer school colonies from the very beginning. They indicated which children should be sent to the colonies, examined and measured them before the departure and often visited colonies to control children’s health. Parents were not always enthusiastic about sending their children away for two months because they needed their help in the household or at work. Therefore, medically defined “weakness” of children was used as an important argument in the negotiations about the children’s rights or needs. Physicians also maintained that at least 15% of all pupils were in need of such summer vacation for health reasons, and this served as a powerful justification for the expansion of the project, giving more and more children the opportunity to spend summer in the countryside in a comfortable and healthy environment.⁵⁴

Instead of conclusion: psychopathology, school hygiene and the medicalization of schooling

In 1908 Moscow opened its first class for “retarded” children. The question of teaching children with mental disabilities and behavioral problems first appeared on the agenda of Moscow municipal institutions in 1902. The problematization of this question was no doubt connected to the rapid expansion of schooling and the discussions on the possible introduction of universal primary education, which meant that even children that had been previously left outside of the schooling system, were now brought in contact with it. However, the practical solution to this question was not implemented until 1908 when Olginsko-Pyatnitskoye school for girls opened the first so-called “auxiliary” class. In 1911-1912 Moscow had 16 such classes with 252 pupils. The potential candidates for those classes were identified by teachers or school doctors and underwent a medical and psychological examination by psychiatrists. Auxiliary classes did not have any standard scheme of teaching but favored a highly individualized approach. The general goal of those classes was to motivate children to study, to teach them to concentrate and to express themselves, and to give them some basic knowledge about the world. The key teaching methods involved games, drawing, clay modelling for visualization of the study material, rhythmic gymnastics for the development of attention and coordination, special speech exercises as well as long walks which were later discussed in classroom.⁵⁵

The opening of the auxiliary classes signaled a new stage in the medicalization of schooling, when psychiatry joined hygiene as the main medical discipline in school life. However, this did not mean any radical transformation of the role of school doctors or school hygiene. The main field of psychiatrists’ activity, however important, remained marginal to the overall educational processes in the city. Although the number of auxiliary classes was expanding, they housed less than one percent of all pupils at municipal schools. In the “ordinary” schools, the cooperation between medicine and pedagogy continued to be expressed primarily through the language of school hygiene.

To conclude, the late imperial decades witnessed a growing involvement of the medical profession in educational life. This involvement, however, happened not so much with the tools of psychiatry and psychology but rather those of school hygiene – which was itself a multi-disciplinary field that combined pediatrics, public and occupational health, epidemiology,

sanitation and nutrition science. Furthermore, the institutionalization of school medical control happened before the rise of psychiatry in Russia; it was motivated primarily by sanitary concerns and had already gained significant experience and authority by the time psychiatry started influencing practical medical activity at schools. The aspiration of Moscow school doctors, as becomes apparent from their discussions and activities, was not only to limit the negative impact of schooling on pupils' health, but rather to construct a comfortable, healthy and safe space for children and to compensate for hardships that they experienced outside of school.

Contrary to the claims of Andy Byford about the low authority of school doctors, their poor remuneration, their weak influence over governmental decisions, sporadic character and general failure of their activities,⁵⁶ the case of Moscow school medical inspection presents a rather different picture. It shows that school doctors had performed systematic, diverse, highly-valued and well-paid work already since the late 1880s. In Moscow, school doctors were full-time municipal employees, with a strictly defined circle of responsibilities, and composed an inherent part of the growing municipal medical organization. The authority of school doctors was strong enough to not only transform the school environment and experience of schooling on the micro-level (that is, in each particular school), but to also affect policy on the level of the city and to prompt changes codified in local legal norms and regulations, even if putting them into practice was interrupted by the First World War and the revolution.

On the other hand, joining the more general discussion about the interpretation of Russian modernity and the role that biomedical sciences played in it, the presented analysis of school hygiene shows how medical discourse was mobilized not to promote greater control and discipline but instead to construct what Ben Eklof called "non-coercive classroom." In fact, within the limits of their domain, physicians went perhaps even further than reform-minded pedagogues, and advocated freedom, rest and comfort which, in their view, could not be sacrificed even for the purposes of education. Indeed, school doctors used medical knowledge to articulate difference, that is to define "weak" and "abnormal" children, – but, before the appearance of auxiliary classes and to a substantial degree also afterwards, this difference was used not to segregate, discriminate or stigmatize, but, on the contrary, to advance a more inclusive, fair and humane social policy.

NOTES

- ¹ These approaches were most famously (although from different positions) advocated by Konstantin Ushinsky, Nikolay Korf and Leo Tolstoy.
- ² Andy Byford, "Roditel', uchitel' i vrach: k istorii ikh vzaimootnosheniy v dele vospitaniya i obrazovniya v dorevolutsionnoy Rossii," *Novye rossiyskiye gumanitarnye issledovniya* (2013) <http://www.nrgumis.ru/articles/276/>, accessed on July 12, 2016.
- ³ Catriona Kelly, *Children's World: Growing Up in Russia, 1890-1991* (New Haven: Yale University Press, 2007), pp. 26-28.
- ⁴ Ben Eklof, *Russian Peasant Schools: Officialdom, Village Culture, and Popular Pedagogy, 1861-1914* (Berkeley and Los Angeles: University of California Press, 1990), pp. 287-299. Eklof suggests that the actual number of boys and girls who received some schooling was much higher than the official statistics reported.
- ⁵ Ben Eklof, "Worlds in Conflict: Patriarchal Authority, Discipline and the Russian School, 1861-1914," *Slavic Review*, 50, 4 (Winter 1991), p. 795; Ben Eklof with Nadezhda Petersen, "Laska i Poriadok: The Daily Life of the Rural School in Late Imperial Russia," *The Russian Review*, 69 (January 2010), p. 29.
- ⁶ Kelly, *Children's World*, p. 33.
- ⁷ Andy Byford, "Professional Cross-Dressing: Doctors in Education in Late Imperial Russia (1881-1917)," *The Russian Review*, 65 (October 2008), p. 598.
- ⁸ *Ibid*, p. 595.
- ⁹ F.F. Erismann, *Vliyaniye shkol na proiskhozhdeniye blizorukosti po nablyudeniyam nad uchaschchimisya v uchebnykh zavedeniyakh v Sankt-Peterburge* (St. Petersburg, 1870), p. 1.
- ¹⁰ Hermann Cohn, *Untersuchungen der Augen von 10060 Schulkindern, nebst Vorschlägen zur Verbesserung der den Augen nachtheiligen Schuleinrichtungen: Eine ätiologische Studie* (Leipzig, 1867); Theodor Becker, *Luft und Bewegung zur Gesundheitspflege in den Schulen* (Frankfurt a. M., 1867); Louis Guillaume, *Hygiène scolaire. Considérations sur l'état hygiénique des écoles publiques présentées aux autorités scolaires, aux institutions et aux parents* (Genève, 1864).
- ¹¹ Rudolph Virchow, *Ueber gewisse die Gesundheit benachtheiligende Einflüsse der Schulen: ein Bericht* (Berlin, 1869).
- ¹² Rudolf Virhov, "O vrednykh vliyaniyakh shkoly na zdoroviye", *Zhurnal Ministerstva Narodnogo Prosveshcheniya*, vol. 146 (December 1869), part III, pp. 266-287.
- ¹³ Erismann, *Vliyaniye shkol*, p. 80; *Idem*, *Professional'naya gigiyena umstvennogo i fizicheskogo truda* (St. Petersburg, 1877), p. 29; see also

- A.S. Virenius, *Shkol'nye stoly i skam'yi, ikh ustroystvo i raspredeleniye v uchebnykh zavedeniyakh* (St. Petersburg, 1886).
- 14 V .F. Nagorskiy, *O vliyaniy shkol na fizicheskoye razvitiye detey* (St. Petersburg, 1881), pp. 10, 14, 27-37; on the link between chest girth and predisposition to consumption see I.A. Verner (ed.), *Sovremennoye khozyaystvo goroda Moskvyy* (Moscow, 1913), p. 61.
- 15 Erismann, *Vliyaniye shkol*, p. 98.
- 16 Erismann, *Vliyaniye shkol*; Idem, *Soobrazheniya po ustroystvu obraztsovoy klassnoy komnaty soglasno trebovaniyam sovremennoy gigiyeny* (Moscow, 1888), pp. 4-9; idem, *Soobrazheniya po voprosu o nailuchshem ustroystve klassnoy mebeli* (Moscow, 1894), pp. 3-4. The latter was published in the official circular letter for the Moscow educational district, which suggests that Erismann's recommendations were recognized at the high level.
- 17 I. Pavlov, *Narodnaya shkola. Opyt razrabotki voprosa o narodnoy shkole so storony tekhnicheskoy, gigiyenicheskoy i ekonomicheskoy* (St. Petersburg, 1886), quote from p. 1.
- 18 N.A. Korf, *Russkaya nachal'naya shkola*, 6th edition (St. Petersburg: Tipografiya Hana, 1897), pp. 72-78.
- 19 Yu. I. Zavolzhskaya, *Shkol'naya gigiyena* (St. Petersburg, 1898), p. 82.
- 20 D. Levinson, *Gigiyena shkol* (Odessa, 1872), pp. 19- 23; Erismann, *Professional'naya gigiyena*, p. 30.
- 21 Erismann, *Professional'naya gigiyena*, pp. 30-31.
- 22 S.K. Pavlova, *Sbornik podvizhnykh igr na otkrytom vozdukh v shkole* (Moscow, 1896), introduction by F. Erismann, pp. 1-2.
- 23 Eklof, "Worlds of Conflict", pp. 796-799.
- 24 Erismann, *Professional'naya gigiyena*, p. 32.
- 25 *Nachal'nye uchilishcha, uchrezhdennye Moskovskoy Gorodskoy Dumoy* (Moscow, 1882), p. 1
- 26 A. Krasnopevkov, "Obzor uchilishch dlya narodnogo obrazovaniya v Moskve", in *Zhurnal Ministerstva Narodnogo Prosveshcheniya*, vol 54 (April 1871), part IV, pp. 170-180.
- 27 Ibid.
- 28 *Moskovskiye gorodskiye nachal'nye uchilishcha. Statisticheskyy otchet za 1901-1902 g.* (Moscow, 1903), p. 2; *Sovremennoye khozyaystvo*, pp. 33-36; *Sovremennoye khozyaystvo*, pp. 36-38.
- 29 *Moskovskiye gorodskiye nachal'nye uchilishcha*, pp. 7-14, 45-46.
- 30 TsGAM (Central State Archive of Moscow, TsGA Moskvyy), 179:56:95:13.
- 31 N.F. Mikhaylov, *Materialy k opredeleniyu fizicheskogo razvitiya i bolezennosti v sel'skikh shkolakh Ruzskogo uyezda Moskovskoy gubernii* (Moscow, 1887); idem, *Obshchaya kharakteristika deyatel'nosti nashikh vospitateľnykh domov* (Moscow, 1887).
- 33 TsGAM, 179:56:95:14-15.

- 34 TsGAM, 179:56:105:9-11.
- 35 TsGAM, 179:56:105:10.
- 36 TsGAM, 179:56:105:14.
- 37 Mikhaylov, *Materialy k opredeleniyu*, p. 23.
- 38 TsGAM, 179:56:105:47.
- 39 TsGAM, 179:56:105:156.
- 40 "O zavtrakakh v nachal'nykh uchilishchakh goroda Moskvy," *Izvestiya Moskovskoy Gorodskoy Dumy, Vrachebno-sanitarny otdel* (August 1904), p. 38.
- 41 TsGAM, 179:56:105:161.
- 42 *Izvestiya Moskovskoy Gorodskoy Dumy, Vrachebno-sanitarny otdel* (March 1903), p. 16.
- 43 *Sovremennoye khozyaystvo*, p. 63-64.
- 44 "O sanitarnom sostoyanii pomeshcheniy, vnov nanyatykh dlya nachal'nykh gorodskikh uchilish k nachalu 1902-1903 uchebnogo goda," *Izvestiya Moskovskoy Gorodskoy Dumy, Vrachebno-sanitarny otdel* (February 1903), pp. 20-25; TsGAM, 179:56:105:52, 179:56:119:52-56.
- 45 "O zavtrakakh v nachal'nykh uchilishchakh goroda Moskvy," p. 44
- 46 *Sovremennoye khozyaystvo*, pp. 39-40.
- 47 TsGAM, 179:56:105:56.
- 48 TsGAM, 179:56:119:132-134.
- 49 *Izvestiya Moskovskoy Gorodskoy Dumy, Vrachebno-sanitarny otdel* (October 1903), p. 5; *Sovremennoye khozyaystvo*, p. 133.
- 50 TsGAM, 179:56:263:3.
- 51 *Letniye kolonii dlya Moskovkikh nachal'nykh gorodskikh uchilishch. Otchet 1890 g.* (Moscow, 1890); p. 12; *Sovremennoye khozyaystvo*, p.67.
- 52 *Letniye kolonii dlya Moskovkikh nachal'nykh gorodskikh uchilishch. Otchet 1890 g.*, pp. 4-12, *Otchet 1891 g.* (Moscow, 1891), pp. 7-13; *Otchet 1893 g.* (Moscow, 1894), p. 20.
- 53 *Letniye kolonii. Otchet 1892 g.*, (Moscow, 1892) p. 5; *Otchet 1893 g.*, (Moscow, 1893) p. 13-15.
- 54 *Letniye kolonii. Otchet 1890 g.* p. 4; *Otchet 1891 g.*, pp. 16-20; *Otchet 1893 g.*, p. 4; *Sovremennoye khozyaystvo*, p.67.
- 55 *Sovremennoye khozyaystvo*, pp. 71-73.
- 56 Byford, "Professional Cross-Dressing," particularly p. 614.