

INTRODUCTION

Did Babies Make Us Modern?

DID BABIES REALLY MAKE US MODERN? Of course not. No single group or event or discovery made America into a modern nation. And what exactly is modern and when did modernity begin? Any effort to construct an answer is to wade into a vast ocean of big ideas and big changes – among them American empire building, expanding suffrage, urbanization, industrialization – and to confront a tsunami of technological developments that reshaped daily life – automobiles, radios, airplanes, telephones, motion pictures. One is more likely to drown than to make sense of how modern beliefs and practices overlaid ones that came to be seen as traditional. This book does not dive into the deep or take the long view of modernization; it looks at small tributaries, examining social life in the twentieth-century United States through the changes in infants' lives. It does not argue that babies transformed the nation from a rural, traditional society into an urban, industrial, fast-paced, and rapidly growing one in which elite citizens developed a new set of cultural norms. Babies didn't develop new ideas, invent new products, alter established political structures, or capsize traditional customs.¹

How, then, did babies help usher in the modern? The answer is that babies played a critical role in joining ordinary Americans to the modern revolutions of the twentieth century – revolutions in scientific medicine, in consumer culture, in the rise of the social welfare state, and in the understanding of human development and potential. Another way of explaining that is to point to a parallel development. Adolescence was a twentieth-century idea – a concept and a demarcated place in the life course in which people in their teenage years came to be seen as “emerging adults” entering a period of transition from childhood marked by

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formal education rather than work, by emotional upheavals, and by a strong peer culture. So too was “modern babyhood” defined and created in the twentieth century. It was a life stage in which the individual vulnerability of babies produced a new kind of shared public and private responsibility for protecting and enhancing their welfare.²

Modern babies pushed their families and the state to accommodate their needs and to change their practices. To offer an example, recognition of cod liver oil as a preventative for rickets led government agencies to give it away, parents of limited means to buy it, and cod liver oil producers to advertise it widely. An understanding of new biomedical ideas – that rickets and perhaps other ailments could be prevented – spurred both health consumerism and the belief that government agencies should provide help in the form of information and funding for direct services. Both ideas trickled into public consciousness. These were microrevolutions, but revolutions nonetheless. The new ways of living provoked resistance and backlash as well as support. In these instances, babies played a role in maintaining traditional practices. With their frequent illnesses they kept families reliant on local healers and on prayer as well as medicine.

Frequently historians of childhood embrace the concept of agency, arguing that children, once viewed as mastered by adults, need to be understood, at least in part, as creators of their own lives. Babies did not and do not have this kind of agency, but neither were they or are they powerless. Their actions – dying, living, ailing, growing, eating, sleeping, emptying their bowels and bladders, acquiring motor skills – do not change over time, but responses to them and understandings of their meaning do change and in ways that shape and reflect broader structural transformations. In the early decades of the twentieth century infant mortality began to be understood as both a social and a political problem. In the opening decades of the twenty-first century infant deaths are still spoken of, but in ways that reflect knowledge of and concern with the disparities among racial and ethnic groups and awareness of demographic data from other developed nations. Similarly, while some see babies as having agency through the demands they make – to be fed, changed, rocked, or cuddled – it is important to note that not all cultures view babies as having the same demands or even claims

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to adult attention. The belief that answering the cry of a hungry baby or comforting an infant who wakes in the night is the proper decision changed over time and reflects local circumstances and cultural norms.³

A rich lode of historical literature presents information about infant lives, but it often does so without probing babies' actual experiences. Historians of childhood offer overarching accounts of the changing features of children's lives as well as portraits of particular groups of youngsters, establishing models for studying the young. However, these scholars often neglect to fully investigate how the social, economic, and cultural shifts they study shaped the lives of babies. Other scholars engage in close readings of infant care advice literature, making evident what experts wished infants' lives to be, but they give little insight into babies' actual experiences. Yet another strand of historical research follows changing ideas about the responsibilities of parents as new childcare authorities emerged over the course of the twentieth century. All of this work can be mined in order to understand the new theories about infant development and infant care taught to generations of parents. It can also be combined with other sources to illuminate the contrast between ideal practices and lived experiences. Additional useful accounts of babies can be found in writings on the history of motherhood and on the history of parenting with its attendant and shifting priorities and anxieties. It is important too to acknowledge that the interests of mothers and infants can be and have been in conflict, as was the case in the debate over maternity benefits. Keeping new mothers out of the paid labor force allows their infants to receive more attention and care than might otherwise be the case. It also has the effect of limiting mothers' lifetime work opportunities and earnings. As this illustrates, the histories that serve as the foundation of this book can help expose and conceal the ways infants influenced Americans' lives.⁴

Writing the history of babies presents numerous challenges, not the least of which is that infants, which I define as those under one year of age, are inarticulate historical actors. Their lives must be studied, for the most part, by examining the actions and writings of the people who do have agency. We inevitably end up asking what grownups and siblings had to say about babies. And then we question what adults did to shape infants' lives and why they took those steps. What material conditions,

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cultural values, and secular and religious beliefs influenced adults' actions? But we can in turn ask what role the babies' actions played in determining adults' beliefs and in organizing their social world. By moving back and forth from accounts of individual babies' lives and collective actions on their behalf we can begin to write babies back into American history.

Perhaps the most difficult problem in writing the history of babies is one that scholars preparing synthetic histories of the United States confront: how can you draw useful conclusions about millions of subjects? Approximately 330 million babies were born between 1900 and 2000 (a period for which scholars have relatively good data). The infants that I write about were born between the late 1890s – the dawn of the twentieth century – and the mid-1960s – the end of the baby boom. In describing them, I use the term *baby citizens* when discussing the lives of infants in their families and communities and the term *citizen babies* in reference to the way government agencies conceived of and responded to the very young.

No wars, elections, or demographic transformations provide a neat periodization for the history of modern babies. It is hard to date precisely when infants attached their families to particular new ideas, processes, and products. Did the consumer revolution fully transform the nursery when the majority of babies dressed in purchased rather than homemade infant clothes? Or did consumer culture arrive slowly, reflecting changes in the economy and the growth of advertising that led increasing numbers of families to buy infant formulas or tinned baby food?

Unable to develop a precise chronology of emerging modern babyhood, we must instead view the history of infants' lives as something like a crazy quilt – there are many pieces and much overlaid stitching, but patches of the same material can be seen again and again. The pieces that appear most often include measures of a decline in infant mortality, evidence of a growing reliance on so-called scientific methods of infant care, the expanding production of goods for babies, the arrival of new immigrant groups, the movement of internal migrants from rural areas to cities that challenged and changed beliefs about babies and their care, and the appearance of new ideas about infants' cognitive and emotional

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development. The crazy quilt analogy makes clear that change is neither orderly nor consistent. So, to the extent the sources make possible, I have chosen to emphasize the variations among babies rather than to smooth out the many textures of their lives. Like all Americans, babies were a diverse group – marked by racial, ethnic, regional, and gender identities, abled and disabled bodies, and most profoundly by the economic circumstances in which they lived. Nevertheless, the microrevolutions named earlier affected them all.⁵

To find the lives of babies I probed diaries, letters, oral histories, newspapers, welfare agency case records, magazines, books, radio scripts, and, most importantly, more than 1,500 baby books. Kept by mothers and recording the lives of individual infants, baby books provide a critical window into nursery life, health practices, material culture, and popular expectations. They are not a representative sample by any means as the majority come from Euro-American families. And they have to be read skeptically. Consider Charlie Flood, born in Red Bud, Illinois, in 1914. According to his baby book, at the age of four months, he burned his face with quicklime. Three months later, he pulled off part of his tongue with a buttonhook. (Toddlerhood wasn't any easier for him; he once got a nail in his foot and on another occasion fell while holding a bottle, leaving glass in his hand.) Charlie's mother carefully recorded each accident in his baby book and he was hardly the only infant to have his calamities written down. Babies fell down stairs, off porches, and out of high chairs and cribs. Some baby books even had places designated for writing down "first tumble." Jeannette Palache's baby book records details of her life following her birth in August 1900 in Cambridge, Massachusetts, including an entry for the following January: "She fell all the way down stairs and did not hurt herself." After World War II, accounts of accidents largely vanished from baby books, although one mother diligently recorded her son's two falls off the bed in 1948. Had baby-proofing improved? Was parenting more vigilant? Were infants less curious and accident-prone? Had home safety programs made a difference? Not likely. It appears that mothers learned not to record the common accidents of babyhood because expectations about parenting and infant life changed. Emergency room records would tell a different story.⁶

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Accounts of accidents and their disappearance tell us something about actual babies' lives and about expectations regarding how to care for babies. The same is true of records of physical discipline. They too largely disappeared from baby books after World War II. Most mothers stopped recording the spankings they gave to infants and baby books, which once offered places for recording "first discipline," eliminated this entry. Certainly babies did not cease being punished and, in some instances, parents made notes without the prompts in baby books. One woman wrote in a baby book about spanking her baby's hands for "pulling the davenport fringe." Moreover, individual households and communities may have viewed physical discipline as more or less useful and important and the variations and beliefs and customs do not always appear in baby books.

Reading large numbers of baby books written over many decades, however, can be revealing. They show changes in infant care practices occurring slowly and unevenly and the reasons families jettisoned or adopted them must be inferred from the context. Perhaps spankings ceased or became a marginal practice in the second half of the twentieth century, but we have no reason to assume that they did and a lot of reasons to believe that baby books reflected what mothers wanted to do or were advised to do. Modernization, in this instance, appeared as an intellectual shift. It produced new ideas about what babies ought to experience and what parents ought to be doing or recording as they raised babies.⁷

As disingenuous as baby book entries can be, they can be equally forthcoming about nursery practices that experts saw as valuable or dangerous. The voluminous infant care advice found in print – women's magazines, baby-rearing manuals, health department pamphlets, and radio scripts – makes clear what professionals including doctors, developmental psychologists, and social workers believed. They preached loudly and clearly, but the congregation sometimes ignored their exhortations. In the first half of the twentieth century knowledgeable experts told mothers not to play with their babies. Baby books reveal their advice was not infrequently disregarded. The delights of peek-a-boo and the joy in teaching an infant to wave bye-bye overcame admonishments against overstimulation. More critically, professional dictates about infants' diet

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and health often could not be followed simply because a family lacked resources. If anything overdetermined the lives of babies, it was the economic conditions of their families, a situation that remains true to this day.

Baby books provide indirect evidence about social class and social capital. Like colonial historians who read inventories of estates to discern a family's wealth, gift lists in baby books offer important clues. Some babies received a cornucopia of toys, blankets, clothes, and dollars; other infants acquired only a few practical items or none at all. The extensive family visiting described in some baby books suggests that many infants had a rich supply of social capital even if their families lacked a decent standard of living. Details of births point to the families' connection to medical institutions and providers, while entries about deaths suggest why families needed the solace provided by religious practice. A baby book begun in 1936 contained a collection of sympathy cards and an account of a funeral for the then three-year-old who died of influenza. Another from 1943 hinted in a mere ten words at an earlier loss: "My second name is in memory of my big brother." Letters to the US Children's Bureau also supply, indirectly, information about the social world of individual infants, while community studies conducted by the Children's Bureau and by social scientists offer more evidence about the effects of poverty and isolation on health and family practices.⁸

Over the course of the twentieth century, babies helped introduce ordinary families to the principles of modern hygiene and to acceptance of medical authority. Much of the professional advice given to mothers – to kill germs, to weigh and measure babies regularly, to feed them at proper times – received a boost from advertisers who promoted the products needed to transform the nursery into a fortress against germs. Manufacturers of consumer goods and advocates for biomedical science formed an uneasy alliance that benefited from the belief that each had something to contribute to the saving of infant lives. At times, however, their partnership broke down, as when doctors wanted their well-to-do patients to visit them for written prescriptions for mixing infant formulas, while formula companies urged patients to buy their premade products. Likewise, doctors wanted the revenue from treating babies suffering from teething or colic; so too did patent medicine sellers.

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As infant mortality rates fell, families invested in their infants' futures by saving money and by learning not just what to do to protect their babies' physical health, but to nurture their emotional growth. Modern psychology and new understandings of the self entered households by way of the nursery. Babies became ambassadors of the modern as experts began urging parents to monitor infants' intellectual growth. Not unexpectedly, middle- and upper-class families with access to medical advice and infant care manuals were first to adopt the protocols of infant monitoring. Baby books and other sources suggest that the habit of psychological and emotional oversight came later to working-class families as their access to health professionals grew and as published materials and radio shows featuring experts taught them about the inner lives of babies.

If twentieth-century babies can be seen as integral to the growing cultural authority of scientific medicine, the robust expansion of the consumer economy, and the rise of new theories of self and society, they can also be seen as critical to the shifts in the relationship of the state to the family. Deemed vulnerable future citizens, babies sparked new government programs, but the growing collective interest in their health and well-being never overcame the belief that their families were ultimately responsible for their lives. Federal government support for babies included both short-lived programs such as the Sheppard-Towner Act, which provided funds for maternity and childcare programs from 1921 to 1929, and the Emergency Maternity and Infant Care Act, which provided assistance to servicemen's wives during World War II. A regular funding stream to the states for maternal and child welfare under Title V of the Social Security Act of 1935 led to more sustained federal involvement with infants. After the baby boom years still other federal and state programs began to assist some infants.

The creation of limited, means-tested efforts nodded to the great irony of twentieth-century babyhood – as collective concern for “our babies” ebbed, with each successful effort to save their lives, private interest in “my baby” grew into an even stronger cultural ideal and federal programs narrowed. The incomplete public commitment to ensuring the welfare of all babies today is not the subject of this book, but it informs every chapter. Babies before and after the twentieth century were economic actors; they have needs that must be met by individuals – parents or

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other caretakers – and needs that can only be addressed by the broader community and by civil society.

This book ends at the conclusion of the baby boom in 1964. The lives of the babies born after that can be discovered in numerous social science studies, observed from afar in demographic data, unearthed in biographies, revealed in newspaper and magazine articles, and found in institutional records. But many of their experiences are still recounted only in baby books, which have recently migrated to the online world. When the late twentieth-century and twenty-first-century babies grow up to become historians, as some surely will, they can access the baby books electronically and find other material about infants' lives on social media. And they can then look back and discover how infants shaped the postmodern world.

Many babies' lives are recounted in this book. I have changed all of their names when I used their baby books and other family records. However, if those babies grew up and deposited their papers in archives without asking for restrictions, I identified them by name. I also quote from the baby books given to me by friends and, with their permission, use their names. Because the overwhelming majority of baby books and other records come from Euro-American infants, I do not designate their racial or ethnic identification unless it differs from this prevailing one. My hope is that others will explore the materials I used and further explore the lives of babies. For that reason, in the case of the more than 1,600 baby books housed in the collection of the UCLA biomedical library, I have provided a call number, since there are numerous editions of each book.