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HEALTH FILMS IN THE SERVICE OF EUGENIC SURVEILLANCE OVER WOMEN IN INTERWAR EASTERN EUROPE

Abstract: This article explores the historical reconstruction of women and their specific status in nationalist movements, as "stepdaughters of the nation" in the health films produced in interwar Czechoslovakia and Yugoslavia. We trace the transformation of disciplining practices such as the female *Bildungsroman* disseminated in the late nineteenth century in the plots and artistic devices of health films aimed at persuading women to accept not only new practices of care but also being institutionalized throughout their lives by public health surveillance. Historically, the films produced in Prague and Zagreb address women in cities and rural areas, respectively. We explore the specifics of visualizing the mission of surveillance as determined by this difference.

Keywords: eugenics, Czechoslovakia, Yugoslavia, Eastern Europe

Non-MeSH: health films, population politics, patriarchal power

Eugenic patriarchalism in health propaganda

– No girl will refuse us, choose any!
– I want the best, father!
– Who is the best?
– Well, who has the prettiest face?!
– Well, no, son, this is not enough, a girl should be the best in everything.
– I want Yoka, she has a pretty face
– Yes, but she has scrofula marks.
– But in clothes it is not visible.
– Even a latent disease remains a disease.

– What about Yela?

– She is pretty, but she has no breasts, she is all of twenty, and she is flat as a board.

– Well, Marie, beautiful and sweet as a green flower

– Just about green, bent, as if not a drop of blood is not present – this one will give birth to two children for you and become an old woman! [1 p10]

This dialogue, between the rich farmer Ilja Gotovac and Nikolica, his first-born, written by Dinko Šimunović, continues further – in the very first pages of *Narodna čítanka o zdravlju* (*National book of health*), the book aims at educating the rural population of Yugoslavia regarding how to be healthy. One of possible interpretations of this text is "making women directly placed on the edges of the symbolic order" [2 p264] in interwar Yugoslavia. But the eugenic pathos of this text, as well as the many other products of health propaganda addressed to women, stress their physical condition; features of their figure and their habits are assessed in terms of readiness to give birth to healthy children.

Women were not on the margins of health propaganda – they embodied the position of the primary "others," whose submission would ensure the salvation of an entire people. In 1933, Andrija Štampar, the leader of the public health reform in interwar Yugoslavia and beyond, was welcomed by Czechoslovak authorities and experts to present lectures for the public as well as for those in the medical professions. Personally, Štampar prioritized women as his key audience and highlighted women's issues, not only within Yugoslavia but also abroad. In his letter to Bohumil Vacek, the head of the Institute of Hygiene in Prague, he wrote: "In Zlín, as well as in Turčiansky Martin, I will exclusively speak about the topic 'Woman and the people's health,' for female audiences. I have prepared new films that shed light on the everyday issues of people's health that are important." [3]

Among the films that addressed men, parents, children or even the population of peripheries the films for women stemmed from the mission to educate them, as well as the practical task of making them more obedient to new hygienic rules. In Yugoslavia, women, especially those in rural areas, represented the most uneducated part of the population: in 1926, in rural areas, more than 80 percent of women were illiterate, and in some areas, there were no educated women at all. [4] Despite the complex causes underlying the high rates of infant mortality and decreasing natality, health propaganda brought forward the illiteracy of women and their lack of health competencies as the central obstacles to ensuring child welfare. Štampar situated the level of education of mothers among such factors as income, legal status, and place of birth for explaining the mortality of infants, which was comparable among poor mothers and illiterate mothers, 30 percent and 25.6 percent, respectively. According to his data, only 10 percent of children among educated workers died before one year, but the proportion rose to 20 percent among workers who were not educated. Health films aimed at teaching women to care for children played a central role in the overall strategy for auxiliary medical education targeted at rural women.

It is difficult to judge whether propaganda outstripped institutionalization or the films intended to delegate some competencies to mothers because of the system-

atic lack of institutionalized childcare in the first half of the 1930s. The rural population was not protected by social insurance. Only in Zagreb and Ljubljana were consultation clinics for mothers established before 1918. In fact, until the middle of the 1930s only four institutions, in Skopje, Zagreb, Belgrade, and Ljubljana were able to provide sustainable assistance to mothers and children. [5] The films *Terenska sestra* (Visiting nurse, 1929), *Seljačko sveučilište Škole narodnog zdravija: ženski tečaj (*Peasant's university of the School of Public Health: Women's course 1929*), Blago kući gdje se žena uči* (Wellbeing of home where women are learning, 1936) directly taught rural women to utilize certain elements of medical knowledge and simultaneously shaped their new authenticities.

In our general understanding of regimes of authenticity, we follow Claud Bremond's idea regarding the rootedness of narrative structures in human social experiences. [6] According to Bremond, [7] the phenomenology of social life shapes the logics of the narrative cycle, as situated between two alternatives: the improvement to be achieved (accomplishment of the task, allied intervention, getting rid of the contender, negotiation, aggression, retribution or reward, or vengeance) and the foreseen deterioration (obligation, sacrifice, endured attack, endured punishment). In line with this approach, all health films are targeted with presenting unhealthy habits as predicaments of practical life and opening to the possibility of solving or avoiding these problems. We specify the performance of regimes of authenticity in the health films as the main framework for adapting and modifying global patterns in the production of health films for women, recruiting a wide range of approaches to investigating these regimes of authenticity and their presentation in culture. The main sources informing this analysis include health films collected at the *Národní filmový archiv, Praha*, National Film Archive, Prague (NFA) and Kinoteka of the *Hrvatski državni arhiv,* The *Croatian State Archives* (HDA), reviews on films in periodicals, the correspondence of Andrija Štampar (HDA), documents of the Ministries of Health at *Arhiv Jugoslavije, Archives* of *Yugoslavia* (AJ)*, Slovenský národný archív, Slovak national archives (SNA), and Bayerisches Hauptstaatsarchiv*, the archive of the Bavarian State, (BayHStA).

Transnational contexts of health films for women

Paraphrasing Henry Giroux, [8] we might say that learning in the interwar period was located in popular spheres, which inclines us to interpret Eastern European films through the historically well-situated possibilities for adapting feature films (both national and foreign) that were the most popular among the people. Endowing a woman with the competence of a doctor was not a novelty of the interwar period. *Die Ärztin im Hause* (The house doctor, 1910) by Jenny Springer was translated into Czech, Serbo-Croatian, and Polish, and enjoyed great success in Eastern Europe. Along with guidance prepared by physicians, since the last quarter of the nineteenth century, magazines for women published short instructive articles of conduct fiction aimed at educating their readers (mainly middle-class women) on how to apply the most progressive practices of proper care for children.

The institutionalization of childcare, which began in Western Europe and North America in the late nineteenth century, and reached its peak during the interwar period, was accompanied by various strategies of health education targeted at reaching women from the most vulnerable social groups. The institutionalization of caring for young children went hand-in-hand with films on relevant topics, which not only disseminated new information, but also motivated both women and the public to become part of the institutionalization process.

Bringing it home (1919), one of the first films aimed at propagating the *infant welfare station,* a new organizational approach to caring for not only poor children but for all children in the periphery, [9 p8] tells the story of retrogradely thinking Mr. Clarkson, a wealthy business owner. Clarkson is opposed to the establishment of an infant welfare station. When he visits a local fair, he bypasses the exhibition on care for children because all his attention is devoted to livestock, as long as his granddaughter is healthy, that is. But when she becomes sick, and the physician says that the issue could have been prevented if the mother of the child would have been taught to properly care for the child, Mr. Clarkson offers financial support for childcare in his homeland. The documentary part of the film presents the activities of the infant welfare station, juxtaposing examples of unsanitary methods of care with proper care such as dressing, bottle-feeding, and protecting children from flies. [10]

Our children (1921), commissioned by the Child Welfare Bureau in Gadsden, Alabama, "shows various types of community work for child welfare and a children's health conference by representatives of the children's bureau."[11 p1] The film introduces to mothers the work of visiting nurses, teaching them to measure the height and weight of their children and familiarizing them with the operation of Babies' Days, a regular action by the Red Cross, during which babies could be measured at the Red Cross nursing office.

Parentage (1919) tells the story of two boys and their destinies, as determined by their early education and care. It presents two families, the Smiths, whose love for their son manifests in providing proper care for little Robert, and the Browns, whose son, Horace, is stunted in mind and body, a pale shrinking boy because he is not welcomed or cared for by his parents. The film follows the difference in the development and growth of both boys up until the moment they should take responsibility for their families and become successors to their fathers. The film emphasizes the role of cooperation with public health institutions as the signifier of a responsible attitude towards their own health and the health of future generations: when Robert and Horace decide to marry, their future fathers-in-law ask both to pass a premarital examination, and Horace refuses. The incredible success of *Parentage* can be explained by its realistic approach in depicting "purity, love, unselfishness. It is a portrayal of everyday life in the home – a chance to see ourselves as others see us." [12 p5]

Being included on the list of films recommended by the Red Cross for international dissemination, *Parentage* and other two films [13] inspired the authors of *Dvije seke: film o njezi dojenčadi*, (Two sisters: A film about caring for infants, 1932), to adapt emotive realism in depicting the differences between proper and improper care. *Dvije seke* was one of the most popular films produced by the Film Laboratory of the School

of Public Health. By the end of the 1930s, this film was shown in the majority of Balkan countries, as well as in Czechoslovakia, United States, Germany, and France. The film consists of three parts and continues for more than 35 minutes.

Sentimental health education in *Dvije seke: film o njezi dojenčadi*

The first part of *Dvije seke* introduces the farmer Jože, who has twins. Mara and Bara have grown up in the shadow of the premature death of their mother. They move with scythes on their shoulders through the field belonging to their father – toward their maturity: the camera shows young girls, then teenagers, and, finally, two young women who smile at each other and at their father. They happily fall in love, and the schoolteacher approvingly asks Jože: "Will they soon expect an addition to the family in your house?" Not occasionally, this dialogue occurs with a church in the background, and the teacher's proposal to send the girls to a family preparation school should be seen as a continuation of his approving attitude towards developing relationships in a "proper" way. The hesitation of the father, who takes off his hat, scratches the back of his head, and replies thoughtfully, "This is something to consider," creates the opportunity for the teacher to showcase for the father and for the audience the main goals of the school. *Megu idniti domakinki* (Among future housewives), produced by the Institute of Hygiene in Skopje, was another earlier example of men's benevolent paternalism regarding the health education of their daughters. The documentary was accompanied by subtitles written not for school-aged girls but for those who had sent their daughters, granddaughters or sisters, namely, men: "Our grandmothers studied with their grandmothers and our youth can study in the school." The film ends with a scene in which the students bring the pies they have prepared at school to their grandmothers, who taste the pastries with approval and thanks. [14]

The father practically orders his daughters to go to the school, to which Mara reacts: "How great that we will spend time there!" Meanwhile, Bara grows gloomy and refuses to attend – she fears for her relationship with her prospective bridegroom. In response to Bara's fears, that Ivan will leave her while she prepares to become an ideal wife, Mara replies: "And for me, if Pero leaves me, let him be carried away! It is better now than later that the man deceives!" This exchange, likely the first mutual contest, is accompanied by a sarcastic comment in the film's subtitles: "Bara stays to guard the guy." Mara, in turn, travels to the big city to be trained as a perfect mother and housekeeper.

In the second part of the film, Mara arrives at the school. The camera work takes on a significant symbolic load – Mara is shown from top to bottom and, gradually, the camera moves in on a close-up – as she progresses in mastering the intricacies of housekeeping and caring for a child. The audience is invited to live with Mara during a lecture on the main causes of death of young children, along with classes in gardening, sewing, weaving, cooking, and caring for sick members of the family. The most dramatic facts are accompanied by a close-up of Mara's bewildered, frightened, or worried face. The lecture attacks the most disseminated (according to the experts) unhealthy practices, such as coughing on a child, kissing a child even if ill or suspicio-

us of being ill, wrapping the child up and restricting movement, and treating with a distillate to calm a child. The motto, "mothers who do not know and do not apply hygienic rules sow death over their children," is central. Mara sends a letter to her family, which Jože shares with Bara in the hope that she will change her mind about the school, but to no avail. This part of the film ends with a wedding scene that mixes fiction and documentary content about the traditions of collective celebration, featuring dances and music. Then, the viewers witness the pride of Jože in being the fresh grandfather of two young boys.

In the third part of *Dvije seke*, the contest between the two sisters reaches its zenith because of their mutually opposed approaches to caring for their sons. One of the encounters, which begins with Bara's question concerning whether Mara bathes her son every day, develops into a conflict. Bara reproaches her sister for striving to rise above all the women in the village, saying that no one needs her sermons and everyone is tired of her. Mara only states the fact that her nephew would benefit from the best care and that he is currently weakened. The offended Bara claims that her child is no worse off than others and quarrels with her sister. Mara is upset by the confrontation with her sister, but her worries about her child and her husband consume all of her attention. The viewers then observe the outputs of proper and improper care for children. Remarkably, the film devotes more than twice the screen time, nine minutes, to positive examples than for a negative example, taking up only about four minutes. For instance, for more than two minutes, the camera follows how Mara bathes and wipes the baby. The audience can observe the unbridled enthusiasm with which Mara puts into practice her acquired knowledge – the expression on her face mixes pride and joy. The feeling of self-confidence is reinforced by the constant close-ups of the baby being bathed, walked, and fed, presenting a persuasive scenario of a realistic picture of happiness.

Bara makes only "improper" decisions – she breastfeeds her son without giving him complementary foods, and then gives him cow's milk. But her key mistake is not to seek help from a doctor or her sister but instead to ask for advice from rural healers. The old women healers convince Bara that Mara has jinxed her son and put a curse on him. In despair, Bara chews a piece of bread, wraps it in a napkin, soaks it in brandy, and gives it to her son, who continues to cry hysterically but sucks the "medicine." Then, he dies. Mara consoles her sister: "When the apples are ripe, you will have a new son, and you will take care of him properly." The sisters reconcile – and together they harvest wheat. At the very end of the film, a happy Mara feeds her son with cherries against the background of a wheat field.

Dvije seke should be seen as not only a part of the propaganda about new competencies needed for responsible mothers but also as embedded in the massive public campaign aimed at promoting motherhood. Despite all her mistakes, Bara is a devoted mother who just needs to be more educated and emancipated from the "backwardness" of previous generations of rural women, in favor of "natural" progress. Healthy maternal instincts among rural women started to be seen as a main precondition for the proper care of biological and fostered children, especially young children. [15] This message is reinforced by multiple analogies between children and plants. For instance,

in exploring the importance of the sun for the prevention of rickets, the nurse at school shows two plants, one growing with sunlight and one without. The cycle of giving birth is harmonized with the change of seasons: when the cherry trees blossom, when the wheat is ripe, when the apples are ready.

The naturalness of "proper" care reverberates with another message of the film, namely, the call for women to achieve and maintain peace of mind through the acquisition of competencies. The main difference between the two sisters is the measure of their psychological stability. While Mara is self-confident and ready to take risks, Bara has a long way to go in the task of becoming a balanced woman. Notably, Mara is performed by Krunoslava Ebrić-Frlić, the actor often recruited to represent such confident characters in other films: the teacher in *Spas male Zorice* (Save little Zorica), Anka in *Birtija* or Maca in *Griješnice: Macina i Ankina sudbina* (Sinners: Maca and Anka's destiny, 1930). Bara is more often portrayed as crying or trying to deal with difficult situations from the position of a dependent child, rather than a responsible woman. Connecting new competencies with the psychological comfort of women, a main motivational component of the film, creates a dichotomy of healthy and toxic femininity, reinforced in another film that addressed women and their mission to reproduce the nation – *Griješnice: Macina i Ankina sudbina*.

Criminalizing abortion in *Griješnice: Macina i Ankina sudbina*

The motto, "Not the owner who has a bull, but one who has a son," with which *Griješnice: Macina i Ankina sudbina* opens defines the main idea of abortion as a betrayal of men's vital interests by irresponsible women. The reason behind the dramatic decrease in natality around the world was, according to the interwar experts, a consequence of the Great war and the economic crisis. The causes of infant mortality and depopulation varied from region to region, but lack of education remained one of the central concerns that connected "proper" care for children and "proper" pro-natalist behavior: "There is, of course, a general tendency towards a falling birthrate, but data covering the period 1930-34 tend to show that the worsening of social-economic conditions affected the birthrate; an abrupt decline occurred during this period. The birthrate was 35,50 in 1930 and only 31,45 in 1934". [4]

In *Griješnice*, as in many other products of pronatalist propaganda, the selfish behavior of women, who are afraid to lose their beauty after giving birth, was the main explanation for "depopulation," a risk that had started to be expressed by many European experts since the late 1920s. Friedrich Burgdörfer, an influential German demographer, attracted the attention to decreasing natality and his monumental monograph, *Volk ohne Jugend. Geburtenschwund und Überalterung des deutschen Volkskörpers. Ein Problem der Volkswirtschaft – der Sozialpolitik der nationalen Zukunft* [People without youth. Declining birth rates and aging of the Germans. A problem of the national economy – the social policy of the future of nation] (Berlin, Vowinckel: 1932), was adopted by several Eastern European experts, including Slovak pediatrician Alojz Chura, who published a two-volume study with practically an identical title "*Slovensko bez dorastu*?: *sociálne-paediatrické štúdium*" [Slovakia without youth: socially-pedi-

atric study] in 1936 or by Andrija Štampar, who not only enthusiastically accepted the approach to collect data regarding demographic changes, but also expressed general alarmism typical of the publications by Burgdörfer. The visible influence of this German expert on increasing pronatalist stances in the international agenda remains an open field for exploration.

The film is set in Slavonia, a Croatian region considered one of the main centers for migration, which was not welcomed by the experts in the School of Public Health: "These immigrants for the most part settled in primitive dwellings and had no knowledge of modern methods of agriculture. As a consequence, they suffered many setbacks." [4] This totally alarmist sentiment is presented to viewers as a part of the *Narodna čítanka o zdravlju*: "As soon as a woman stops giving birth, this leads people to the abyss and [the nation] is filled with foreigners." [1 p23] But the main protagonists of the film *Griješnice*, the young widow Maca and her friend Anka, who is in a *pokusni brak* (trial marriage, cohabitation without official registration of relations until the birth of a child, was common practice for rural Croatia and Slovenia) [16 p140-4] with the handsome Stipa, only scoff at the *Čítanka's* declaration (see Figure 1). In response to the call to have at least three children, or four, or even a maximum of six, Maca exclaims: "God forbid me six [children]; that would definitely be God's punishment." In the end, she, along with Anka, is punished for not wanting even one child.



Figure 1 Ignorance of knowledge as a sin in in *Griješnice: Macina i Ankina sudbina* (Sinners: Maca and Anka's destiny, 1930)[1]

[1] Source: HR-HDA Kinoteka [17]



Figure 2 Commitment to health knowledge: rural girls read *Narodna čítanka o zdravlju*[2]

The film tells the story of the moral fall of both women – Maca because of her irresistible desire to please and Anka because she has been corrupted by Maca and convinced to have an abortion. In the film, Maca rushes between two partners. One is Boža, a reveler and womanizer who is not married. The name of her probationary husband remains unknown, which only stresses the disorder in Maca's life, persistently noted by Manda, Maca's mother, who characterizes her daughter as "unrestrained." Boža seduces Maca when she is washing clothes in the river – frankly erotic flirting, depicted in detail, aims to persuade viewers that lust is the only motive for their relationship. At some point, the camera focuses in on the reflection of both in the river

[2] Source: Štampar [18 p129]

– which is carried away by the current, reinforcing Manda's dramatic prediction that Maca will be carried away and nothing will be left of her.

While Maca is nearing her imminent moral decline, Anka is enjoying her new life as Stipa's probationary wife – she takes care of the livestock, cleans the house, and loves Stipa. Anka becomes pregnant and Stipa is happy with the prospect of being a father, but when she shares her fears that "children steal a mother's beauty," Maca convinces her to have an abortion. The dialogue takes place in the same location in which Maca first met Boža and where their relationship began, which only emphasizes one of the moral precepts of the film: women are corrupted by men in order to corrupt other women. In her time, Maca was corrupted by Malča, a woman who trades in clandestine abortions and who is described as a sinner and a procuress. Self-interest and profit are Malča's main motives, and when Maca explains to Anka that she must pay to "get rid of the burden," the audience sees a satisfied Malča, who surreptitiously watches the young women, and, in anticipation of the money she will earn, strokes herself on the chest.

Another man in the village, Jole, becomes a witness to how Maca practically drags Anka into Malča's yard, and he easily understands what is about to happen. The following Sunday, when Anka goes to church, Jole starts extorting money in exchange for his silence about the abortion. Because she does not have any money, Jole asks Anka for her necklace made of ducats (silver or gold coins), one of the elements in traditional women's costumes. The documentary part of the film shows how prestigious it is to wear a well-decorated necklace of ducats, and viewers observe the flow of young women wearing such necklaces, with obvious pride in possessing one. Anka surrenders her necklace as a pledge of Jole's silence, but the next day, when she comes to buy back the jewelry, the blackmailer takes the money and refuses to return the necklace, saying that he is not a fool. Anka belittles him, but without result. Moreover, Stipa catches them together and creates a scene of jealousy.

Anka is waiting for punishment, leaning against an unfinished fence – which only reinforces the perception of her as a victim crucified by her own mistakes. To shed the suspicion of betrayal, she confesses that she has had an abortion. Stipa is disappointed, and Anka wants to become pregnant again. In despair, she rushes to Malča, and asks for her help to become pregnant again; Malča advises "folk remedies," in which even a desperate woman dare not believe. Then Anka turns to a doctor, who confirms the terrible diagnosis – she will never become a mother. Even Anka's prayers do not help – and the previously spontaneous happiness with Stipa disappears. In his every gesture, look, and word, both Anka and the audience recognize condemnation and anger at Anka, who has betrayed him. Anka is totally deprived when Stipa abandons her with the words that there is no meaning in marriage without children. In following scene, Anka discloses that Stipa has relationship with another girl, who would like to bear him a son. The last word from Stipa to Anka is *nerotkinja,* "infertile," and Anka rushes into the river – at the very same place that Boža flirted with Maca, and Maca persuaded Anka to have an abortion. Maca dies of blood poisoning after another abortion; in her dying scene, the viewers discover that she is Manda's only child, which only reinforces the message that one must have more children.

The film exploits a wide range of analogies for demonstrating to the viewers how fine the line is between vice and innocent entertainment, which becomes dangerous "if only the heads of young people are busy with this," an exhortation by the old men of the village when they observe Maca and Boža. *Griješnice* includes two scenes of collective dancing; one is a round dance initiated by Boža in front of the local pub, to celebrate the seduction of Maca, and the other occurs in front of the church on Sunday. The dance near the pub, emphatically polished, with a solo performed by professional dancers, is clearly perceived as overkill, which symbolizes a false sense of femininity. In contrast, the round dance at the church – in which Maca does not participate, unlike the pub dance, is rather a collective practice of togetherness, clearly evocative of true femininity.

The exaggerated drama of *Griješnice*, aimed at convincing viewers that abortion is a crime against the nation, is compatible with the expressiveness of another film about abortion, *Frauennot – Frauenglück (The misery and fortune of women, 1930), produced by Soviet filmmakers* Sergej Eisenstein and Grigori Alexandrov for the Swiss film company Praesens-Film AG. *Frauennot – Frauenglück attacked* the practice of illegal abortion, defined by the unhappiness of women, as compared to the perfectly organized and safe procedure for interrupting a pregnancy in a clinic. Verging on a Malthusian approach, *Frauennot – Frauenglück presents safe abortion as the only option for women of the working class who already have more than enough children or who lose their family's breadwinner.* This motif was not exclusive to this film. In the second half of the 1920s, the fiction genre began to address birth control and to draw public attention to the unresolved issue of how to preserve the dignity, health, and life of a woman who did not want to have children. It is noteworthy that one of the first popular writers to touch on this topic was an American of Slovenian origin, Louis Adamič. *[19]*

The scandalous popularity of *Frauennot – Frauenglück, which attracted the attention of female activists in many European countries, [20] inclines us to interpret Griješnice* as a response to the Swiss film, in which the message was diametrically opposed to the pronatalist stance of the Croatian film. Moreover, the intention to subject women to new medical practices depicted in *Frauennot – Frauenglück* was compatible with the aims of health propaganda produced by the School of Public Health. In contrast to *Griješnice, Frauennot – Frauenglück does not construct the dichotomy of "proper" and "improper" femininity. Abortion was constructed not in terms of a crime against nations but against humanity: the statistical data presented at the beginning of Frauennot – Frauenglück describe the consequences of clandestine abortions for the health and life of women in all of Europe.*

The coexistence of these films in the interwar European cinematic space cannot be separated from the struggle between two approaches to birth control, which had engulfed both the national and global levels of the health security regime since the late 1920s. While female activists and some physicians, especially those affiliated with leftist movements, promoted access for women to regulate their desire to have children, pro-natalists worked at criminalizing abortion. Interwar France, Soviet Russia, Great Britain, and Germany (after 1933) were the leaders in pronatalist policy and the struggle to criminalize abortions. [21] In the second half of the 1930s, pronatalist poli-

cy acquired all the features of a global movement. [22] In 1937, one of the French ideologues of pronatalism, Robert Henri Hazemann, became an expert for the League of Nations and, in cooperation with the experts of British Inter-Departmental Committee on Abortion, initiated an inter-country, comparative overview of the regulations concerning birth control. [23,24] Notwithstanding the strong position of pro-natalists, including Štampar [25] himself, interwar Yugoslavia introduced at the end of the 1920s, quite liberal legal regulations regarding abortion that seriously limited the options for punishing women and those who helped them. [26] The echo of this defeat is evident in *Griješnice*, in which the village community remains totally powerless in their attempt to call Malča to account: old men try to stop her by threatening to go to the police, but she responds with a threat to the threat and nothing happens.

Remarkably, some restrictions on abortion, such as tougher punishment for unmarried mothers engaging in abortion or infanticide, were introduced within the regulations on children without legal representatives in 1934. This regulation fostered the conservative backlash in the politics of birth control provided by *Ustaša*, [27] accompanied by a flourishing discourse on the naturalness of motherhood and true femininity. Czech health films that addressed women adapted this discourse for approaching not rural but urban working-class women.

Eugenic pronatalism in *Manželství pod drobnohledem*

"The first of our children will replace the father, the second perhaps me, and the third – this will strengthen our nation. We won't die out." [28 p40] These final words of a nameless Czech mother, the main character in *Manželství pod drobnohledem* (Marriage under the microscope, 1940), facing the rising sun after a sleepless night at the bedside of her ill firstborn, sum up the main message of the population policy typical (not only) of the Second Republic. The production of the film started to be planned in 1937, which was relevant to the changes in the official aims of demographic policy. [29 p3] Along with a few other short films, *Manželství pod drobnohledem* was part of a demographic campaign aimed at recruiting women to give birth more [30]. *Manželství pod drobnohledem,* "a film calling for population growth," [31 p2] tells the story not of people – but of informal institutions such as the family or childhood, and formal institutions such as maternity hospitals, centers for maternal and children's health, or vocational counseling centers, which should be aligned with each other for implementing the mission of reproducing the population.

One of the most remarkable features of this film is the anonymity of the protagonists, who remain "she," "he," and "son," as opposed to the public care institutions, which have names and addresses. One of the movie posters depicts a doctor who is watching "him" and "her" under a microscope. The film's protagonists are described by three interrelated social roles: gender, family membership, and professionality. Even the little boy has a professional dream, to become a pilot; he is sent by his father for vocational consultation. Only one personal detail matters: the number of siblings the protagonists have, representing an argument in the contest for having more or less children.

The opening of the film features shots of human legs walking in the park from different angles; the story starts from the moment when two pairs, "his" and "hers," meet. The courtship phase is the shortest section of the film, but during these five minutes, the audience learns that "she" is a seamstress and "he" is a worker, and that the main gift for their future children would be better knowledge about health and reproductive functions. The recommendation to undergo a premarital medical consultation is depicted through the rotation of the two bodies against the background of the physician's eyes.

On the morning after the wedding, the newlyweds, who have settled in the suburbs, are walking and observing the triumph of fertility in nature: a duck with chicks and a pig with a brood of piglets suckling their mother's milk. The viewers then witness the passionate kiss of a young couple, and the camera delicately pans towards the tall trees and the sky. As in stories with a dual focus narrative, in *Manželství pod drobnohledem*, "Human rhythms are no longer subservient to those of nature; nature instead reflects the decisions of each individual. The world becomes a speculum, a mirror in which men and women see the values of their own consciences reflected." [32 p116] With a modest smile, "she" informs "him" that they will become parents, and during one of the first visits to the gynecologist, the future mother asks the physician: "How will the life of my begin?" The answer takes more than 32 minutes. This one-third of the film is devoted to a detailed description of the development of the fetus, including various comments on potential deformities and the role of the mother in preventing such deformities during the intrauterine development of the child. This part of the film features many visual and discursive matches with the famous U.S. film, *Birth*, produced by a eugenic film company in 1917 [33 p14] and well-known among Czech public health experts. Karel Driml, an influential public health expert, who cooperated with Kokeisl, the film director, was able to watch this and other films commissioned by various eugenic associations during his stay in the United States as a fellow of the Rockefeller Foundation in 1921.

The detailed reproduction of the procedure for preparing a doctor to deliver a child cultivates trust in public care and its power. Critics enthusiastically described the realism achieved by the film in depicting the birth, including the fact that Eva Listová, the performer of the role of the mother, as well as the film's production crew, were constantly in the maternity hospital in order to depict the moment of birth. [34 p3] Mentioning the fact that Listová's mother was congratulated on the addition to the family [35 p1] only reinforced the link among the film, reality, and the behavior of women desirable for the nation.

In contrast, the detailed depiction in *Dvije seke* of the hygiene procedures conducted with a newborn as the basis of his health, shifts the focus from the decisive role of the mother to the role of medical staff and institutions. Even the introductory words stress the important role of public health: "The main threats to the child are the mother's ignorance of basic hygiene rules and the limited prerequisites for the healthy development of poor families." There are no instructive scenes featuring a mother caring for a child, except for a demonstration of breastfeeding, accompanied by information about devices for feeding weak children. This scene almost immediately turns

into a story about helping sick and premature babies who must be placed in an institution. The detailed description of care ends with a depiction of the training for nursing the child, including its aims and duration, "decisive for efficient operation of maternity and child care."

Instead of scenes depicting caring, the mother sings a lullaby that attracts the attention of a passerby, an elderly person who quietly sings while standing at the window and gazing with tenderness at the stroller with the baby. This peaceful family scene contrasts with the one just prior, in which an older couple is seen spending time in a restaurant – without joy, but instead with boredom and mutual irritation. *Manželství pod drobnohledem* contrasts the older generation, poisoned by unhealthy habits and unable to save the nation, with the younger generation, which shows hope. The film was intentionally opposed to the previous so-called "sexual films," defined as an "an aphrodisiac for older gentlemen, films that were made for commerce rather than science, from which fragments had to be cut in order to preserve morality." [36 p5]

The film then approaches its central issue, the number of children in a family. While the mother, following her healthy instinct, seeks to give birth to a second child, the father, fearing economic difficulties, sharply objects: "I don't even want to talk about it." And only the unexpected illness of the son, who nearly dies, may make him reconsider and become an ally of his wife. The fading of hope, and then its return due to the successful outcome of the disease, is portrayed through the analogy of life with a candle burning more or less intensely and then blurring with the daylight. This analogy, in combination with the lack of information on what kind of disease the boy has experienced, only reinforces the approach to the family as an informal institution that passes through particular situations determined by formal institutions.

The scene depicting the celebration of Mother's Day is a remarkable example of constructing family life as an informal institution aimed at translating "proper" regulations. The main character calls her mother to ask that she visit them, and upon her arrival, gives her a bouquet of flowers; the son, seeing a gesture of affection, gives his mother a flower in a pot. While the filmmakers weigh in on the side of the mother's instinct, they demonstrate perfectly the operating system for institutional support of children and mothers, even those who are poor.

The film takes six minutes to introduce the counseling center for mothers and children, designed to convince the audience of the need to rely on the hands and heads of specialists. A daycare center, a sanatorium, and a special care unit for premature infants are shown as machinery that should persuade "a modern woman to find her mission in the family and children and to win despite all the hardships and uncertainties of society." [37 p8] The participation of the father in raising his son is also embedded in the institutional design of care: he is interested in the professional choice of his child and in the proper evaluation of the child's abilities. The scene portrayed in a psychotechnics laboratory, which alternates between showing several children and several types of psychological tests to determine different abilities, becomes another element of "the institutional empire caring for children and their future."

The institutional power of childcare is aligned in the film with the long-term consequences of images of collective childhood aimed at establishing a strong analo-

gy between children and the people on the one hand, and childcare and the state on the other. The mode of collective identity dominates in depicting the children: more than seven minutes are devoted to showing the various group activities of children in the park. Like the protagonists, the groups of children are shown through the lenses of gender and age difference: the film presents the most suitable group activities for older and younger boys and girls. Even the tempo of the musical accompaniment changes: slow for girls and fast for boys.

Manželství pod drobnohledem continues to implement the mission of routinizing the institutions that aim to provide surveillance over reproduction and childrearing introduced by another film for women, *Procitnutí ženy* **(**Recognizing the woman*,* 1925**).** This film mostly focuses on womanhood as an informal institution that would require systematic institutionalization from the birth of the woman until her death, through the strong affiliation of women with different services and entities. *Procitnutí ženy* does not introduce any particular person – but women of different age groups united within particular institutionalized practices (see Figures 3-5). According to the film's authors, it was inspired by the idea of producing a film that would act as a journal for women: **"**Unlike heavy German films, our directing tries to present the scenes vividly and diversely; for example, after the scientific part, examples are immediately given. To connect science and life - not to address only a cold fact to the brain, but also a warm word to the heart - that was the idea of our authors." [38 p71]



Figure 3 Physician supervises women in sanatorium in *Procitnutí ženy* **(**Recognizing the woman**)**[3]

[3] Source: NFA [39]



Figure 4 Městská odborná škola pro ženská povolaní (City school for female occupations) in *Procitnutí ženy* (Recognizing the woman)[4]



Figure 5 Residential care institution for elderly women in *Procitnutí ženy* (Recognizing the woman)[5]

[4] Source: NFA [39]
[5] Source: NFA [39]

In late 1933, *Procitnutí ženy* was purchased by Bayern authorities with the goal of educating the public, and women in particular. The film was censored to exclude any overly explicit display of internal organs. [40] but the main content remained, which only reaffirms the suitability of this approach for audiences in different countries.

Conclusion: Health film as fantasy and event

Historicizing the health films produced in interwar Eastern Europe and beyond brings into analytical lenses the dichotomy of fantasy vs. reality. Health films intensively recruited the demonization of diseases and the sacralization of medicine, primary vehicles for constructing fantasies concerning health, yet multiple forms of skepticism regarding the historical significance of health films have arisen concerning their role in establishing global, national and local orders of health security. Our research shows that fantasy and its agents, such as health films, should not be seen as "antagonistic to social reality but its precondition or psychic glue." [41 p289]

Deconstructing the dichotomy of fantasy vs. "real" event is decisive for an intelligible narrative about producing and disseminating health films. It is possible to say that health films represent "the imaginary relation of individuals to the real conditions of their existence." [42] Each of the health films explored in this text, is connected with various actions and events "when grouped in sequences, generate the narrative" [43 p388] of women and entire nations. We interpret each of the films in terms of historical peculiarities, including a clear and precise definition of the places, events, visual analogies, etc., used in the films. This strategy for exploring films aligns with the core of a left-leaning semiotics that scrutinizes "social and artistic productions in order to discern the cultural and ideological codes operative in them." [44 p22]

Such subversive work of denaturalization not only prevents historical presentism but also introduces the devices of a visual analysis sensitive to the ceaseless movement of the original messages of health films into unpredictably novel contexts of meaning, resisting closure by a process of constant interpretation. This approach aims at presenting a comprehensive historical reconstruction of the health film as a social and cultural practice, not only embedded in health propaganda but also operating as an agent that shapes identities and regimes of authenticity. Incorporating these contexts and missions into health films reinforced their power to create fantasies able to serve multiple functions concerning surveillance over different populations.

Health films should be seen among other producers of fantasies that aimed at masking the multiple conflicts, antagonisms, or contradictions that accompanied interwar Eastern Europe. Being closely connected with progressive agrarianism and the eugenic movement, health films brought back the "jouissance" stolen by political tensions, class divisions, and gender disparities, through uniting people under the umbrella of public health and with its main representatives, doctors and nurses. The consistent nurturing of physicians' sex appeal and the attractive progress of medical intervention are among the artistic devices targeted at employing the libidinal energy of audiences. Subjecting individuals of different ethnicities, ages, genders, and classes to the

power of public health reinforced the "we-versus-they construction" aimed at nuancing and deepening multiple hierarchies.

Rezime

U članku se istražuje istorijska rekonstrukcija žena i njihov specifičan status u nacionalističkim pokretima, kao „pastorki nacije" u filmovima o zdravlju nastalih u međuratnoj Čehoslovačkoj i Jugoslaviji. Prati se transformacija disciplinskih praksi, poput ženskog *Bildungsroman*-a koji se širio krajem devetnaestog veka u zapletima i u umetničkim tehnikama zdravstvenih filmova koji su imali za cilj da ubede žene da prihvate ne samo nove prakse nege, već i da budu institucionalizovane tokom svog života putem nadzora javnog zdravlja. Istorijski gledano, filmovi proizvedeni u Pragu i Zagrebu obraćaju se ženama u gradovima i ruralnim područjima. Istražuju se specifičnosti vizuelizacije misije nadzora, kako je određena ovom razlikom.

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