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A Weak Mind in a Weak Body? Categorising Intellectually Disabled Children in the Nineteenth and Early Twentieth Centuries in Switzerland

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A Weak Mind in a Weak Body? Categorising Intellectually Disabled Children in the Nineteenth and Early Twentieth Centuries in Switzerland

This paper focuses on 19th-century theories according to which intellectual disabilities find expression in physical impairment. Such theories not only were discussed in the fields of anthropology, psychology and medicine but also gained importance with regard to education. The assumption that an ‘abnormal’ mind was linked to an impaired body became widespread in 19th-century Switzerland due to the growing interest in a condition then called ‘cretinism’—a specific form of ‘idiocy’ in the course of which mental and physical disintegration went hand in hand. The first institution for ‘cretinic’ children, founded by the Swiss physician Johann Jakob Guggenbühl, initially achieved considerable international fame. However, it eventually failed completely, leading to a loss of interest in ‘cretinism’. Interestingly, the specific body-mind connection that was associated with ‘cretinism’ did not vanish; instead, it became important in the context of another intellectual disability that gained attention after the mid-19th century: ‘idiocy’. Physical aspects became the main criteria for identifying ‘idiotic’ children of school age in order to allocate them to special educational measures. The idea was that by assessing the children’s physical shape, their mental conditions would become ‘legible’ and intelligible even for laypeople. Thus, the connection of an ‘abnormal’ mind to an impaired body allowed for the popularisation of knowledge regarding ‘idiotic’ children among teachers, parents and other people who dealt with such children.

Keywords: intellectual disability; special education; body-mind connection; categorisation; Switzerland

Introduction

Their skulls are mostly dented at the back or at the top of the head, and their faces are lengthened either forwards or downwards. Their facial features are uneven and disfigured. They move their eyes, often squinting to two sides, spasmodically; their lips are rubbery and pouting, and their noses are pushed in and broad; their teeth are dirty and decayed, and their skin is limp and brown or yellow ...; they have

poor eyesight as well and are hard of hearing ...; they cannot speak or walk properly; they merely utter inarticulate sounds, and they move sluggishly, staggeringly and unsteadily; their hands and feet are misshapen, often lumpy ... They are mostly small in height and crippled ..., and often they are tainted with fractures ..., strumas as well as hunches ...¹

It was at a meeting of the Swiss Society of Natural Scientists in 1830 that the renowned Swiss physician Ignaz Troxler (1780–1866) used such words to describe people suffering from a condition then called ‘cretinism’. ‘Cretinism’ had caught the interest of natural scientists in the late 18th century, and this interest grew even stronger after the turn of the 19th century.² Therefore, it is unsurprising that a figure such as Hermann Demme (1802–1867), professor of surgery, chose the very same topic for his inaugural address in celebration of the University of Bern’s anniversary in 1840. Referring to a growing body of research, Demme defined ‘cretinism’ as a specific form of ‘idiotism’ in which mental and physical disintegration went hand in hand.³ Demme explained that ‘cretinism’ was both a mental and a physical condition, yet medical experts such as Troxler and Demme himself considered physical characteristics to be its distinctive

¹ [Ignaz] Troxler, ‘Der Cretinismus und seine Formen, als endemische Menschenentartung in unserm Vaterlande’ [Cretinism and Its Forms, as Endemic Degeneration in Our Fatherland], *Denkschriften der Allgemeinen Schweizerischen Gesellschaft für die Gesamten Naturwissenschaften* 1, no. 2 (1833): 178–9.

² See Johannes Gstach, *Kretinismus und Blödsinn: Zur fachlich-wissenschaftlichen Entdeckung und Konstruktion von Phänomenen der geistig-mentalen Auffälligkeit zwischen 1780 und 1900 und deren Bedeutung für Fragen der Erziehung und Behandlung* [Cretinism and Stupidity: On the Disciplinary Discovery and the Construction of Phenomena of Mental Abnormality between 1780 and 1900 and Their Significance for Education and Therapy] (Bad Heilbrunn: Klinkhardt, 2015), 104–92.

³ Hermann Demme, *Ueber endemischen Kretinismus: Rede zur Feier des Jahrestages der Eröffnung der Hochschule in Bern* [On Endemic Cretinism: Address in Celebration of the University of Bern’s Anniversary] (Bern: Chr. Fischer, 1840), 26.

mark.⁴ The mental disintegration caused by ‘cretinism’ seemed to become intelligible only through the ‘cretinic’ body.

Physical integrity was often considered to be a requirement for optimal intellectual development. This is evident, for instance, in the Latin phrase *mens sana in corpore sano*⁵ or in Jean-Jacques Rousseau’s treatise *Emile*, which states, ‘I would not undertake the care of a feeble, sickly child ... The body must be strong enough to obey the mind ...’⁶ However, the reciprocal assumption—that linked a weak body to a weak mind—likewise had a long tradition.⁷ Taking ‘cretinism’ as a starting point, this paper examines this specific body-mind connection and its importance in regard to education. Even though the scientific interest in ‘cretinism’ was not limited to Switzerland, the

⁴ See, e.g., *ibid.*, 12–3.

⁵ Even though the Roman poet Juvenal’s words were originally intended to be satirical, the saying *mens sana in corpore sano* has often been referred to in educational contexts. See Friedrich Schweitzer, ‘In einem gesunden Körper wohnt ein gesunder Geist? Oder: Sind nasse Füße wirklich gesund?’ [A Healthy Mind in a Healthy Body? Or: Are Wet Feet Really Healthy?], *Mythen – Irrtümer – Unwahrheiten: Essays über das ‘Valsche’ in der Pädagogik*, ed. Hans-Ulrich Grunder (Bad Heilbrunn: Julius Klinkhardt, 2017), 13–7.

⁶ Jean-Jacques Rousseau, *Emile: Or, On Education* [1762] (Auckland: The Floating Press, 2009), 45. However, physical impairment can be interpreted as having the potential for better education. This notion is embodied today in the image of the slender, pale-faced, spectacled, highly educated science nerd. To name a historic example, at the beginning of the 20th century, the French ophthalmologist Émile Javal noted that short-sighted children stayed in school, whereas their ‘normal’ sighted peers left school early to work in agriculture, industry and trade. See Émile Javal, *Physiologie de la lecture et de l’écriture* [Physiology of Reading and Writing] (Paris: Félix Alcan, 1905), 188. Unsurprisingly, glasses became a symbol of intellectuality, not only because exhaustive reading damages the eyes but also because short-sighted people spend more time reading instead of doing other (physical) labour.

⁷ See Rebecca Noel, “‘No Wonder They Are Sick, and Die of Study’”: European Fears for the Scholarly Body and Health in New England Schools before Horace Mann’, *Paedagogica Historica* 54, no. 1–2 (2018): 134–53.

country had a special significance in regard to this phenomenon. Since the research on ‘cretinism’ had concluded that this ailment was especially widespread in certain parts of Switzerland (particularly in the canton of Valais),⁸ Switzerland, perhaps unsurprisingly, became the first country to have an asylum for ‘cretinic’ children. It was this asylum that—due to the masterly self-staging of its founder, Johann Jakob Guggenbühl (1816–1863)—achieved considerable international fame and served as a model for institutions founded in a number of other European countries and in the US in the 1840s and 1850s.⁹ However, Guggenbühl’s asylum eventually failed completely, leading to a loss of interest in ‘cretinism’ in Switzerland. Interestingly, the specific body-mind entanglement that was associated with ‘cretinism’ did not vanish; instead, it became important in the context of another intellectual disability that gained attention after the mid-19th century: ‘idiocy’. Physical aspects became, so this paper argues, the main criteria for identifying ‘idiotic’ children of school age in order to allocate them to special educational measures.

⁸ See, e.g., Troxler, *Cretinismus und seine Formen*, 179, 198; Demme, *Ueber endemischen Kretinismus*, 31–2.

⁹ See Edgar Miller, ‘Mental Retardation: Clinical Section – Part I’, *A History of Clinical Psychiatry: The Origin and History of Psychiatric Disorders*, ed. German Barrios and Roy Porter (London: Athlone, 1995), 219; Carlo Wolfisberg, ‘Die Heilung des Kretinismus: Eine folgenreiche (Miss)-Erfolgsstory aus den Alpen’ [The Healing of Cretinism: A Momentous Story of (Ill) Success from the Alps], *Historische Anthropologie* 11, no. 2 (2003): 199–200, 204–5; Murray K. Simpson, *Modernity and the Appearance of Idiocy: Intellectual Disability as a Regime of Truth* (Lewiston: The Edwin Mellen Press, 2014), 51.

With its focus on the shift from ‘cretinism’ to ‘idiocy’, this paper draws on what many historians call the ‘new disability history’.¹⁰ Not least with regard to intellectual disability, this approach has inspired a substantial amount of research in recent years.¹¹ In addition to promoting disability as ‘a key defining social category like “race”, class and gender’,¹² the new disability history argues that ‘intellectual disability and related concepts are products of and contingent upon specific social and intellectual environments, and perform specific functions within those environments’.¹³ In doing so, the ‘question of how and why the category of “intellectual disability” was defined or, to

¹⁰ See Paul K. Longmore and Lauri Umansky, ‘Introduction: Disability History: From the Margins to the Mainstream’, *The New Disability History: American Perspectives*, ed. Paul K. Longmore and Lauri Umansky (New York: New York University Press, 2001), 1–29.

¹¹ See, e.g., James W. Trent, *Inventing the Feeble Mind: A History of Mental Retardation in the United States* (Berkeley: University of California Press, 1994); David Wright and Anne Digby, eds., *From Idiocy to Mental Deficiency: Historical Perspectives on People with Learning Disabilities* (London: Routledge, 1996); Mark Jackson, *The Borderland of Imbecility: Medicine, Society and the Fabrication of the Feeble Mind in Late Victorian and Edwardian England* (Manchester: Manchester University Press, 2000); Patrick McDonagh, *Idiocy: A Cultural History* (Liverpool: Liverpool University Press, 2009); Goodey, C. F.: *A History of Intelligence and ‘Intellectual Disability’: The Shaping of Psychology in Early Modern Europe* (Farnham: Ashgate, 2011); Gerald V. O’Brien: *Framing the Moron: The Social Construction of Feeble-Mindedness in the American Eugenic Era* (Manchester: Manchester University Press, 2013).

¹² Patrick Devlieger et al., ‘Visualising Disability in the Past’, *Paedagogica Historica* 44, no. 6 (2008): 747. See also Catherine J. Kudlick, ‘Disability History: Why We Need Another “Other”’, *American Historical Review* 108, no. 3 (2003): 763–93.

¹³ Patrick McDonagh, C. F. Goodey, and Tim Stainton, ‘Introduction: The Emergent Critical History of Intellectual Disability’, *Intellectual Disability: A Conceptual History, 1200–1900*, ed. Patrick McDonagh, C. F. Goodey, and Tim Stainton (Manchester: Manchester University Press, 2018), 1.

use the slightly more loaded term, “constructed” takes centre stage.¹⁴ This entails that terms such as ‘cretinism’ or ‘idiocy’ must be treated ‘as signifiers that are highly contingent and context dependent’.¹⁵

Although both ‘cretinism’ and ‘idiocy’ were phenomena that attracted considerable international attention in the 19th century, research on the history of intellectual disability has mainly focused on the latter. Whereas there existed only very few institutions for ‘cretinic’ children, the increasing interest in ‘idiocy’ after the mid-19th century was accompanied by the establishment of increasing numbers of special educational facilities. The processes of institutionalisation, bureaucratisation and professionalisation in the field of special education affected increasing numbers of children and, at the same time, led to the production and archiving of an increasing number of documents. This abundance of sources might be one of the main reasons why the research on ‘idiocy’ has focused on the late 19th and 20th centuries.

‘Cretinism’

In his inaugural address at the University of Bern, Demme noted that it had been a ‘gifted young doctor’s’ achievement to be the first to establish an asylum for ‘cretinic’ children; a place where they could breathe ‘healthy mountain air’ and where they received ‘medical attention, loving care, and thorough education’.¹⁶ This ‘gifted young doctor’ was Guggenbühl, who was about to establish an asylum on the Abendberg, a mountain almost 6000 feet high in the Bernese Prealps. Considering adult ‘cretins’ to be lost, Guggenbühl wanted to focus his efforts on ‘cretinic’ children. He believed that the

¹⁴ Ibid., 2.

¹⁵ Ibid., 4.

¹⁶ Demme, *Ueber endemischen Kretinismus*, 49.

most important remedy was to bring those children to an altitude of at least 3000 feet.¹⁷ It is noteworthy that in the case of ‘cretinism’, the Alps were both a place of disease and a place of healing. According to contemporary statistics, ‘cretinism’ predominantly occurred in the Alpine region. This finding later found expression in the French swear-word ‘crétin des Alpes’—a well-known word to avid readers of the Franco-Belgian comic magazine *The Adventures of Tintin* because Tintin’s friend Captain Haddock used it.¹⁸ However, despite the Alpine region’s negative connotations in terms of ‘cretinism’, this location likewise became a place of healing—which can be interpreted as another indication of the glorification of the Swiss mountains that were at the time considered a symbol of ‘Swiss simplicity, purity, honesty, liberty and virtue’.¹⁹

In 1840, a year prior to the founding of the ‘Abendberg’, Guggenbühl released a treatise titled *Cry for Help from the Alps*.²⁰ In this publication, as well as in later works, he regarded ‘cretinism’ as a mental deficiency whose principal identifying characteristic was an impaired body. Like researchers such as Troxler or Demme, Guggenbühl

¹⁷ See J[ohann Jakob] Guggenbühl, ‘Hülfesruf aus den Alpen, zur Bekämpfung des schrecklichen Cretinismus’ [Cry for Help from the Alps, on Combating the Terrible Cretinism], *Bibliothek der Neuesten Weltkunde* 1 (1840): 200.

¹⁸ See Hergé, *Les aventures de Tintin: Le trésor de Rackham le Rouge* [The Adventures of Tintin: Red Rackham’s Treasure], rev. ed. (1945; repr., Tournai: Casterman, 1973), 20.

¹⁹ Clive H. Church and Randolph C. Head, *A Concise History of Switzerland* (Cambridge: Cambridge University Press, 2013), 186. See also Yvonne Boerlin-Brodbeck, ‘Das Bild der Alpen’ [The Image of the Alps], *Die Erfindung der Schweiz 1848–1948: Bildentwürfe einer Nation* (Zürich: Schweizerisches Landesmuseum, 1998), 76–87; Aurel Schmidt, *Die Alpen: Eine Schweizer Mentalitätsgeschichte* [The Alps: A Swiss History of Mentality] (Frauenfeld: Huber, 2011). In addition to ‘cretinism’, another affliction associated with Switzerland—but in a more positive way—was homesickness, also called ‘the Swiss disease’. See Christian Schmid, ‘Heimweh’ [Homesickness], *Historisches Lexikon der Schweiz*, vol. 6. (Basel: Schwabe 2007), 233–4.

²⁰ See Guggenbühl, *Hülfesruf aus den Alpen*.

stressed the ‘cretins’ deformed heads (skulls) and their uneven or disfigured facial features.²¹ This specific body-mind connection alluded to physiognomic and phrenological theories, which were based on the assumption that people’s inner qualities (such as intellectual capacities) could be deduced from the features of their faces and the shape of their skulls, respectively.²² Both theories were scientifically controversial but highly popular in the first half of the 19th century and beyond.²³ Franz Joseph Gall (1758–1828), the founder of phrenology (or ‘organology’, as he called his theory), had identified twenty-seven distinct, localisable organs or faculties of the brain ‘that conditioned individual intelligence and character by related dispositions of particular instincts, sentiments, and abilities’.²⁴ Gall argued that by examining the skull, one could ascertain the prominence or deficiencies of these organs. To prove the validity of their theory, phrenologists were very much interested in empirical data. That is why the Dutch physician August Willem Frederik Herckenrath (1794–1869) asked Guggenbühl

²¹ See, e.g., *ibid.*, 192, 194–6.

²² See, e.g., Martin S. Staum, *Labeling People: French Scholars on Society, Race and Empire, 1815–1848* (Montreal: McGill-Queen’s University Press, 2003); Michael Hagner, *Geniale Gehirne* [Ingenious Brains] (Göttingen: Wallstein Verlag, 2004); Sherrie L. Lyons, *Species, Serpents, Spirits, and Skulls: Science at the Margins in the Victorian Age* (Albany: New York Press, 2009).

²³ See, e.g., Ellis Shookman, ‘Wissenschaft, Mode, Wunder: Über die Popularität von Lavaters Physiognomik’ [Science, Fashion, Miracle: On the Popularity of Lavater’s Physiognomy], *Das Antlitz Gottes im Antlitz des Menschen: Zugänge zu Johann Caspar Lavater*, ed. Karl Pestalozzi and Horst Weigelt (Göttingen: Vandenhoeck & Ruprecht, 1994), 243–52; Hagner, *Geniale Gehirne*, 100–1; Nicole Becker, ‘Von der Schädellehre zu den modernen Neurowissenschaften: Ansichten über den Einfluss von Erziehung auf die Gehirnentwicklung’ [From Craniology to Modern Neurosciences: Views on the Influence of Education on Brain Development], *Jahrbuch für Historische Bildungsforschung* 10 (2004): 136–7.

²⁴ Staum, *Labeling People*, 52.

in a letter to inform him on ‘measurements of cretinic skulls’.²⁵ The belief in ‘independent and autonomous faculties in the human mind’ led phrenologists such as the French psychiatrist Jacques-Etienne Belhomme (1800–1880) to argue for the educability of intellectually disabled people.²⁶

In addition to ‘healthy mountain air’, Guggenbühl recommended further therapeutic measures against ‘cretinism’, including milk, iodine, and phosphorous ether.²⁷ Guggenbühl described the cases of a five-year-old and seven-year-old, both of whom he had treated with phosphorous ether. Combined with ‘careful instruction’, the ether had the effect of advancing their speaking skills.²⁸ After the opening of the ‘Abendberg’ in 1841—which was promoted by Troxler and financially supported by the Swiss Society of Natural Scientists²⁹—Guggenbühl continued telling and publishing medical and educational success stories.³⁰ In his opinion, an institution for the care of

²⁵ Johann Jakob Guggenbühl, *Briefe über den Abendberg und die Heilanstalt für Cretinismus* [Letters on the Abendberg and the Sanatorium for the Treatment of Cretinism] (Zürich: Orell, Füssli und Comp., 1846), 85.

²⁶ Pieter Verstraete, ‘The Taming of Disability: Phrenology and Bio-Power on the Road to the Destruction of Otherness in France (1800–60)’, *History of Education* 34, no. 2 (2005): 131.

²⁷ See Guggenbühl, *Hilfsruf aus den Alpen*, 200–1.

²⁸ *Ibid.*, 201.

²⁹ See Carlo Wolfisberg, *Heilpädagogik und Eugenik: Zur Geschichte der Heilpädagogik in der deutschsprachigen Schweiz (1800–1950)* [Special Education and Eugenics: On the History of Special Education in German-Speaking Switzerland (1800–1950)] (Zürich: Chronos, 2002), 56; Wolfisberg, *Heilung des Kretinismus*, 197; Gstach, *Kretinismus und Blödsinn*, 108.

³⁰ See [Johann Jakob] Guggenbühl, ‘Bericht über die Cretinenanstalt auf dem Abendberg’ [Report on the Sanatorium for the Treatment of Cretinism on the Abendberg], *Verhandlungen der Schweizerischen Naturforschenden Gesellschaft* 29 (1844): 113–20; [Johann Jakob] Guggenbühl, *Extracts from the First Report of the Institution on the*

children with ‘cretinism’ had to be a combination of a hospital and a school in which ‘medical and educational measures went hand in hand’.³¹ In addition to therapeutic measures such as mountain air, herbal baths, cod-liver oil, phosphorous ether, animal magnetism³² and gymnastic exercises, Guggenbühl expected educational efforts to ameliorate the ‘cretinic’ condition.³³ In particular, a ‘specific sensory development’ was necessary, for which the ‘Abendberg’s’ ‘majestic surroundings proved to be an inexhaustible source’. The children ‘learnt to identify the lakes, the mountains, the glaciers, the sun, and the moon’.³⁴ With the help of the ‘mnemonic method that connected a letter to an image’, they also learned to read and write.³⁵ Guggenbühl described one boy’s intellectual development as so advanced that ‘Prof. Ernest Naville from Geneva, after careful examinations, declared him capable of entering a seminary to

Abendberg, near Interlachen, Switzerland; for the Cure of Cretins, trans. W. Twining (London: Harrison and Co., Printers, St. Martin’s Lane, [1845]); Johann Jakob Guggenbühl, *Die Heilung und Verhütung des Cretinismus und ihre neuesten Fortschritte: Mittheilungen an die schweizerische naturforschende Gesellschaft* [Healing and Prevention of Cretinism and Their Latest Progress: Report to the Swiss Society of Natural Scientists] (Bern: Huber & Comp., 1853).

³¹ Guggenbühl, *Heilung und Verhütung*, 82.

³² Animal magnetism is presumed to be an intangible or mysterious force that is said to influence human beings. The term was used by the German physician Franz Anton Mesmer (1734–1815) to explain the hypnotic procedure he used in the treatment of patients. According to Mesmer, animal magnetism could be activated by any magnetised object and manipulated by any trained person. Disease was the result of ‘obstacles’ in the flow of fluid through the body, and these obstacles could be broken by ‘crises’ (trance states) that restored harmony to personal fluid flow. ‘Mesmer, Franz Anton’, *The New Encyclopaedia Britannica*, vol. 8 (Chicago: Encyclopaedia Britannica, Inc., 2010), 46–7.

³³ See Guggenbühl, *Heilung und Verhütung*, 83–96.

³⁴ *Ibid.*, 91.

³⁵ *Ibid.*, 92, 96.

become a teacher'.³⁶ Other cases outlined by Guggenbühl included a girl who was brought to the 'Abendberg'

at the age of three; a miserable cripple, and without mental perceptions ... In the course of a year, the joints and muscles grew strong enough that the little patient was able to walk and run perfectly. After long and unwearied care, an entire change took place. Her mind acquired its full power; she learnt to speak, not only in French, her native tongue, but also in German. This child, who would inevitably have gone on in deformity of growth and development till she had sunk into a complete cretin, is now so far advanced in her recovery as to be able to attend school ... She has become strong and healthy, active in all her motions, cheerful, amiable, and industrious.³⁷

Like other physicians of his time, Guggenbühl published his own case examples following the method of medical casuistry that had been developed around 1800.³⁸ The goal of this method was to identify disease patterns and classify these patterns by bringing together consistent individual observations (cases). Observation itself had become 'an essential way of reasoning' in almost all sciences, among them medicine, in the course of the 18th century.³⁹ Guggenbühl not only used casuistry to develop a classification of 'cretinism' but also to dramatise the affliction—not least its physical characteristics—and to highlight the effectiveness of his cures to arouse public interest.

Guggenbühl's self-staging as a healer of 'cretinism' proved highly successful. He rapidly achieved considerable international fame, which led to the onset of veritable pilgrimages to the 'Abendberg'. Even such illustrious guests as the Queen of the

³⁶ Ibid., 96.

³⁷ Guggenbühl, *Extracts from the First Report*, 5–6.

³⁸ See Gstach, *Kretinismus und Blödsinn*, 127–8.

³⁹ Lorraine Daston, 'The Empire of Observation, 1600–1800', *Histories of Scientific Observation*, ed. Lorraine Daston and Elizabeth Lunbeck (Chicago: The University of Chicago Press, 2011), 104.

Netherlands and the English writer Charles Dickens paid a visit.⁴⁰ Writings were published that praised the ‘wonders of the Abendberg’.⁴¹ Guggenbühl was appointed as an honorary member of several scientific societies, and his asylum received generous financial support.⁴² Due to its international fame, the ‘Abendberg’ became a model for institutions founded in other countries. However, Guggenbühl’s venture was also met with scepticism and criticism. The founder of the ‘Abendberg’ apparently stretched the definition of ‘cretinism’ to burnish his success stories. This eventually earned him a reputation as a charlatan. In 1858, a formal complaint was lodged regarding the poor condition of the children and the state of disorder at the institution. On behalf of the Bernese government, two physicians conducted an inquiry that led to quite damning criticisms, including a denial that any ‘cures’ had ever been achieved. Guggenbühl found it increasingly difficult to find sponsors. When he died in 1863, the ‘Abendberg’ was closed.⁴³ Guggenbühl’s eventual fall from grace also resulted in a loss of interest in ‘cretinism’, especially in Switzerland, where the former champions of ‘cretinism’ shifted their attention to other areas of study.⁴⁴

⁴⁰ Franz Merke, *Geschichte und Ikonographie des endemischen Kropfes und Kretinismus* [The History and Iconography of Endemic Goitre and Cretinism] (Bern: Huber, 1971), 239; Miller, *Mental Retardation*, 219.

⁴¹ See Leonora Gaussen, *The Wonders of the Abendberg* (Bern: n.p., 1857).

⁴² Merke, *Geschichte und Ikonographie*, 239; Wolfisberg, *Heilpädagogik und Eugenik*, 58; Wolfisberg, *Heilung des Kretinismus*, 198–9.

⁴³ Miller, *Mental Retardation*, 219; Wolfisberg, *Heilpädagogik und Eugenik*, 57–8; Wolfisberg, *Heilung des Kretinismus*, 202–4; Gstach, *Kretinismus und Blödsinn*, 129–31, 136–7, 148–9, 159.

⁴⁴ See Wolfisberg, *Heilung des Kretinismus*, 206; Gstach, *Kretinismus und Blödsinn*, 159.

‘Idiocy’

Alongside ‘cretinism’, another form of intellectual disability had been researched in the first half of the 19th century: idiocy. A classification of ‘idiocy’ that attracted wide interest was the one outlined by the French psychiatrist Jean-Etienne-Dominique Esquirol (1772–1840), chief physician of the famous Parisian Pitié-Salpêtrière Hospital, in his treatise *Mental Illnesses*.⁴⁵ This classification was based on case examples from the Salpêtrière, where Esquirol’s assistants—among them the abovementioned Belhomme—took care of the ‘idiots’ and provided them with some education.⁴⁶ Along the lines of Esquirol’s work, a similar classification of ‘idiocy’ was established in the mid-19th century in the German-speaking world.⁴⁷ By defining the range of what was considered ‘abnormal’ intellectual capacity, this classification strengthened the conceptual framework of ‘normality’ and ‘abnormality’ in the understanding of the human condition. Under the umbrella term of ‘idiocy’, three different degrees of intellectual ‘abnormality’ were identified: intellectually disabled to a lesser extent

⁴⁵ See É[tienne] Esquirol, *Des maladies mentales: Considérée sous les rapports médicale, hygiénique et médicolégal* [Mental Illnesses: On the basis of Medical, Hygienic and Medico-Legal Reports] (Paris: J.-B. Baillière, 1838).

⁴⁶ See Jean Lelièvre, *L’enfant inefficent intellectuel* [The Intellectually Inefficient Child] (Rosny-sous-Bois: Bréal, 2005), 182–3.

⁴⁷ See Michèle Hofmann, ‘Schwachbegabt, schwachsinnig, blödsinnig – Kategorisierung geistig beeinträchtigter Kinder um 1900’ [Moronic, Imbecile, Stupid – Categorising Intellectually Disabled Children around 1900], *Bildungsgeschichte: International Journal for the Historiography of Education* 7, no. 2 (2017): 142–56. For the development of similar categories in other countries see, e.g., Trent, *Inventing the Feeble Mind*, 16–23; Annemieke van Drenth, ‘Sensorial Experiences and Childhood: Nineteenth-Century Care for Children with Idiocy’, *Paedagogica Historica* 51, no. 5 (2015): 569–70; Jason Ellis, ‘Early Educational Exclusion: ‘Idiotic’ and ‘Imbecilic’ Children, Their Families, and the Toronto Public School System, 1914–1950’, *Canadian Historical Review* 98, no. 3 (2017): 489–91.

(*schwachbegabt*, ‘moronic’), intellectually disabled to a greater extent (*schwachsinnig*, ‘imbecile’), and profoundly intellectually disabled (*blödsinnig*, ‘stupid’). It was this classification of ‘idiocy’ and the corresponding (educational) measures that gained increasing attention in the second half of the 19th century in Switzerland.

In 1889, more than one hundred people gathered in Zurich with the common goal ‘to do something for the welfare and salvation of the unhappy idiots’.⁴⁸ This meeting was named the First Swiss Conference on Idiocy. In his opening address, the Conference’s cofounder and first chairman, the Zurich pastor Adolf Ritter (1850–1906), noted that ‘it was an undeniable fact that Switzerland, despite its humanitarianism in other areas, lagged behind almost all the other civilised countries in taking care of idiots’.⁴⁹ Based on statistical surveys, Ritter estimated that ‘about 30,000 idiots’ lived in Switzerland. However, only six institutions existed, and they were capable of accommodating only 180 of those people.⁵⁰ According to Ritter’s account, other countries had been more active in this regard.⁵¹ Ritter was convinced that the reason for Switzerland’s deficit was the inglorious ending of Guggenbühl’s ‘Abendberg’.⁵² To compensate for this loss, the members of the Conference wanted to put the issue of ‘idiocy’ in the foreground of the public’s attention.

⁴⁸ Joh[ann] Hofstetter-Bader, ‘Einleitung’ [Introduction], *Verhandlungen der I. Schweizerischen Konferenz für das Idiotenwesen*, ed. Ad[olf] Ritter (Zürich: S. Höhr, 1889), 1.

⁴⁹ Adolf Ritter, ‘Eröffnungsworte des Präsidenten zur I. Schweizerischen Konferenz für das Idiotenwesen in Zürich, 3. Juni 1889’ [Opening Address by the President of the First Swiss Conference on Idiocy], *Verhandlungen der I. Schweizerischen Konferenz für das Idiotenwesen*, ed. Ad[olf] Ritter (Zürich: S. Höhr, 1889), 4.

⁵⁰ *Ibid.*, 7.

⁵¹ See *ibid.*, 9.

⁵² See *ibid.*, 6.

As in the case of ‘cretinism’, the champions of ‘idiocy’ focused their efforts on children. In his 1889 opening address, Pastor Ritter made the following requests on behalf of the Conference’s organising committee: a Switzerland-wide precise survey of the number of ‘idiotic’ children and the establishment of further institutions and special classes for those children based on that survey.⁵³ These requests referred to different (educational) measures that corresponded to different degrees of ‘idiocy’. Children belonging to the first and second degrees (‘moronism’ and ‘imbecility’) were considered to be educable and should receive compulsory education, whereas children belonging to the third degree (‘stupidity’) were considered to be ineducable and should therefore be exempted from compulsory education. For the ‘morons’ and ‘imbeciles’, the foundation of special classes and special educational institutions, respectively, was demanded—with the former being an intermediate stage between elementary school and special institutions. ‘Stupid’ children were to be sheltered in institutions, where they would receive food and care but no formal education.

The Swiss Conference on Idiocy convened regularly as of 1889, and it rapidly developed into the central node of a network of people who advocated for the establishment of more care and educational facilities for ‘idiotic’ children.⁵⁴ In the late 19th century, institutions to care for such children were indeed scarce. As Ritter had noted, only a few institutions for ‘imbecile’ children had been established in Switzerland since the middle of the 19th century. In addition, the first special classes for

⁵³ See *ibid.*, 10–2.

⁵⁴ See Michèle Hofmann, ‘Ein schwacher Geist in einem schwachen Körper? Popularisierung medizinischen Wissens über geistige Schwäche im ausgehenden 19. und beginnenden 20. Jahrhundert in der Schweiz’ [A Weak Mind in a Weak Body? Popularisation of Medical Knowledge on Mental Weakness in the Late 19th and the Beginning of the 20th Centuries in Switzerland], *Spurensuche: Zeitschrift für Geschichte der Erwachsenenbildung und Wissenschaftspopularisierung* 27 (forthcoming, 2018).

‘moronic’ children were not opened until 1888.⁵⁵ However, due to the rise in interest in caring for ‘idiots’ to a greater degree, such facilities emerged in Switzerland in the last decade of the 19th century and the first decades of the 20th century. Additionally, although the institutions for ‘imbecile’ children were established by private initiatives, at least initially, the special classes were founded and financed by the public authorities.

Even though ‘cretinism’ was occasionally mentioned in the discussions on ‘idiocy’, it was no longer of importance. The new special educational institutions and the special classes corresponded with the classification of ‘idiocy’—their names did not include the adjective ‘cretinic’. ‘Cretinism’ was mostly regarded as a merely historical phenomenon, related to the infamous Guggenbühl and his failed institution.⁵⁶ In line with this view, the significance of geographical factors (Alpine region) was highlighted, and it was reported that the number of people suffering from ‘cretinism’ had declined in Switzerland due to ‘the reduction of endemic influences’.⁵⁷ ‘Cretinism’ was sometimes

⁵⁵ See, e.g., Adolf Ritter, ‘Über den gegenwärtigen Stand des Idiotenwesens in der Schweiz’ [On the Current State of Care for Idiots in Switzerland], *Verhandlungen der II. Schweizerischen Konferenz für das Idiotenwesen*, ed. K[onrad] Auer and F[riedrich] Kölle (Aarau: H. R. Sauerländer, 1899), 16.

⁵⁶ See, e.g., J[ohann] J[akob] Amstein, ‘Hat der Staat die Pflicht, für Schwach- und Blödsinnige zu sorgen?’ [Is It the State’s Responsibility to Care for Imbecile and Stupid People?], *Vorträge über die Idiotenfrage* (Zürich: J. Schabelitz, 1880), 12–4; Konrad Auer, ‘Wie wird für die körperlich und geistig zurückgebliebenen, insbesondere für die schwachsinnigen Kinder unseres Vaterlandes in ausreichendem Masse gesorgt?’ [Are the Physically and Mentally Retarded Children, Especially the Imbecile Children, of Our Fatherland Well Enough Cared for?], *Schweizerische Pädagogische Zeitschrift* 6, no. 4 (1896): 150–2.

⁵⁷ Amstein, *Schwach- und Blödsinnige*, 26. See also R[udolf] F[riedrich] Fetscherin, *Bericht an die Direction des Innern des Kantons Bern über die Zählung und Statistik der Geisteskranken und Idioten im Kanton Bern vom Jahre 1871* [Report to the Direction of Internal Affairs of the Canton of Bern on the Survey of Insane and Idiotic People in the

mentioned as a subtype or accompanying symptom of ‘idiocy’, but without further explanation of how the former would fit into the classification of the latter.⁵⁸

According to surveys from that period, shortly before the outbreak of the First World War, more than 30 institutions and more than 100 special classes for ‘idiotic’ children existed and together accommodated almost 4000 boys and girls.⁵⁹ Although not all children who were considered to be ‘idiotic’ attended a special institution or a special class, an institutional setting for those children was in the making. This setting can be

Canton of Bern in 1871] ([Bern]: n.p., [1872]), 15; A[lfred] Ulrich, ‘Der Schwachsinn bei Kindern’ [Imbecility in the Case of Children], *Verhandlungen der IV. Schweizerischen Konferenz für das Idiotenwesen*, ed. C[onrad] Auer, K[arl] Kölle and H[ermann] Graf (Glarus: Buchdruck Glarner Nachrichten, 1903), 51.

⁵⁸ See, e.g., H[ermann] A[dalbert] Wildermuth, ‘Die Pathologie der Idiotie’ [The Pathology of Idiocy], *Verhandlungen der I. Schweizerischen Konferenz für das Idiotenwesen*, ed. Ad[olf] Ritter (Zürich: S. Höhr, 1889), 14, 30; *Anleitungen für das Lehrpersonal, um die in das Alter der Schulpflicht getretenen Kinder auf das Vorhandensein geistiger oder körperlicher Gebrechen zu untersuchen* [Instructions for Teachers to Examine the Mental and Physical Health of Children Reaching School Age] ([Bern]: [Neukomm & Zimmermann], [1899]), 2.

⁵⁹ See U[rich] Graf, ‘Tabellen über Bestand und Entwicklung der Fürsorge für Geistesschwache’ [Tables on the Current State and the Development of Care for the Feeble-minded], *Fürsorge für die anormale Jugend in der Schweiz in ihren eidgenössischen und kantonalen Gesetzen, Verordnungen, Reglementen und deren Schulen, Erziehungs- und Pflegeanstalten*, ed. Emil Hasenfratz (n.p.: Selbstverlag der Gesellschaft für Erziehung und Pflege Geistesschwacher, 1916), 60–2; E[mil] Hasenfratz, ‘Tabelle I: Die schweizerischen Erziehungs- und Pflegeanstalten für Geistesschwache’ [Table I: Swiss Institutions for the Feeble-minded], *Verhandlungen der IX. Schweizerischen Konferenz für Erziehung und Pflege Geistesschwacher*, ed. E[mil] Hasenfratz and U[rich] Graf ([Herisau]: n.p. [1913]), n.p.; U[rich] Graf and H[einrich] Plüer, ‘Die Entwicklung des Hilfsschulwesens’ [The Development of the Special School System], *Verhandlungen der XII. Schweizerischen Konferenz für Erziehung und Pflege Geistesschwacher*, ed. K[arl] Jauch ([Zürich]: Selbstverlag des Vorstandes der Gesellschaft [für Erziehung und Pflege Geistesschwacher] [1921]), 71–3.

understood as an expansion of the educational space. Not only did new school types emerge, but the characteristics of existing elementary schools also changed. With the creation of special classes and special educational institutions for the ‘abnormal’, elementary school classes became mainstream classes, and the elementary school became the mainstream school—admitting only those students whose intellectual development was considered to be ‘normal’. The emergence of the new special educational setting that affected increasing numbers of children also raised the question of how these children should be categorised in practise—where to draw a line between ‘normal’ and ‘abnormal’ intellectual abilities as well as between the different degrees of ‘idiocy’. Remarkably, it was the children’s bodies that played an important role in this categorisation.

Categorising ‘idiotic’ children

In the case of ‘cretinism’, medical experts such as Troxler, Demme and Guggenbühl regarded the connection of an ‘abnormal’ mind with an impaired body to be the principal identifying characteristic. By contrast, early treatises on ‘idiocy’ did not present a homogeneous picture when it came to physical features. For example, Esquirol described people suffering from a minor degree of ‘idiocy’ as well shaped, whereas in his classification, physical impairment was restricted to the severest degrees of ‘idiocy’.⁶⁰ Similarly, Guggenbühl characterised ‘idiocy’ in general as a form of intellectual disability ‘without abnormal bodily structure’.⁶¹ However, later in the 19th century, physical characteristics seem to have gained importance as far as ‘idiocy’ was

⁶⁰ See Esquirol, *Maladies mentales*, vol. 2, 289, 304–39.

⁶¹ ‘Die Rettung der Cretinen auf dem Abendberg durch Hrn. Dr. Guggenbühl’ [The Salvation of the Cretinic on the Abendberg by Mr Guggenbühl], *Volksschulblatt* 4, no. 10 (1857): 122. See also Guggenbühl, *Heilung und Verhütung*, 7–9, 41.

concerned.⁶² This development must be considered in a broader scientific context. In the wake of the concept of evolution, which transformed human thought during the 19th century, recapitulation ranked among the most influential ideas of late 19th century science. The German zoologist Ernst Haeckel (1834–1919) proclaimed that in its own growth, an individual passes through a series of stages representing its adult ancestral forms in their correct order—an individual, in short, climbs its own family tree. Recapitulation spilled forth from biology to influence several other disciplines in crucial ways. It provided an irresistible criterion for any scientist who wanted to rank human groups—including their intellectual capacities—as higher and lower. The adults of inferior groups must be similar to the children of superior groups, as the child represents a primitive adult ancestor. If adult blacks and women are similar to white male children, then they are living representatives of an ancestral stage in the evolution of white males. An anatomical theory for ranking supposedly inferior groups—races, sexes, and classes—had been discovered.⁶³ Closely linked to recapitulation was degeneration theory, which likewise focused on the human body.⁶⁴ From the 1850s, degeneration as a

⁶² See, e.g., Hugo Henne, ‘Ueber Wesen und Behandlung der Geistesstörungen und die Bildung eines Hilfsvereins für genesende Gemüthsranke’ [On the Nature and Treatment of Lunacy and the Establishment of a Benevolent Society for Recovering Emotionally Disturbed People], *Schweizerische Zeitschrift für Gemeinnützigkeit* 9 (1870): 64–86; Wildermuth, *Pathologie der Idiotie*, 13–31; [Johann Kaufmann], ‘Fürsorge für schwachsinnige Kinder’ [Care for Imbecile Children], *Schweizerische Zeitschrift für Gemeinnützigkeit* 35 (1896): 412–27.

⁶³ Stephen Jay Gould, *The Mismeasure of Man*, rev. ed. (London: Penguin Books, 1996), 142–4. Older theories had ranked human groups based on the size and shape of their skulls, assuming that these measured data determine brain size, which in turn determines intelligence and the capacity for moral behaviour. See *ibid.*, 105–41.

⁶⁴ See, e.g., Arthur Herman, *The Idea of Decline in Western History* (New York: The Free Press, 1997).

theory of human retrogression that was manifested through degenerative signs (*stigmata*) in individuals—such as a low, sloping forehead; a flattened or upturned nose; a forward projection of the jaw or irregular teeth—became influential in psychiatry and other scientific fields. The Italian criminologist and physician Cesare Lombroso (1835–1909), for instance, developed a theory that suggested that criminality was inherited and that someone ‘born criminal’ could be identified by physical ‘stigmata’.⁶⁵ Like the phrenologists, Lombroso wanted to prove the validity of his theory by employing empirical data. He measured the bodies of prison inmates and psychiatric patients.⁶⁶

The flourishing of recapitulation and degeneration theories notwithstanding, medical treatises on ‘idiocy’ paid less attention to the body than the research conducted on ‘cretinism’ had. When it came to science, an ‘abnormal’ bodily structure was only one among several characteristics of ‘idiocy’. However, documents produced in the context of the emergence of new special educational measures in Switzerland suggest that physical characteristics became the main criteria in the actual practices of categorising ‘idiotic’ children.

These practices are mirrored in special institutions’ admission forms, which provide detailed information about why children were sent to those institutions. Different aspects of the child’s bodily structure were of interest in the admission forms.⁶⁷ The forms included questions such as the following:

⁶⁵ See Jonas Menne, ‘Lombroso redivivus?’ *Biowissenschaften, Kriminologie und Kriminalpolitik von 1876 bis in die Gegenwart* [Lombroso redivivus? Biosciences, Criminology and Criminal Policy from 1876 to the Present] (Tübingen: Mohr Siebeck, 2017), 18–22.

⁶⁶ See *ibid.*, 19.

⁶⁷ See, e.g., Anstalt zur Hoffnung Basel, ‘Zeugniss zu Handen der Anstalt zur Hoffnung in Basel 1883’ [Certificate for the Attention of the Institution ‘zur Hoffnung’ in Basel], file V BS

‘How can the child’s bodily frame, his posture and his gait be described?’

‘Does the child have any noticeable deformations?’

‘Is there anything striking about the child’s facial expression?’

‘What is the condition of his teeth?’

These questions were supposed to be answered by the person who enrolled a child in a special institution (for example, a minister, a member of the local council or a teacher), with the help of a medical expert if possible. The admission forms also asked if ‘the child’s physical development corresponded to his age’. This question can lead to the deduction that a conceptual framework of ‘normal’ (i.e., according to age) and ‘abnormal’ physical development existed. This framework allowed the characterisation of those children who were supposed to be ‘abnormal’; their development was described as backward or deficient—in comparison to an ideal-typically ‘normal’ child who developed according to age. The same held true for intellectual capacity. There too existed a notion of ‘normal’ (i.e., age-appropriate) and ‘abnormal’ development.⁶⁸ An important context for this was the introduction of age-group levels that occurred in Swiss schools from the 1870s onwards.⁶⁹ In schools organised by age-group levels, the

2268, Swiss National Library; Martinstiftung Erlenbach-Zürich, ‘Fragebogen für die Aufnahme der Kinder in die Martinstiftung in Erlenbach-Zürich’ [Questionnaire for Children’s Admission to the Institution ‘Martinstiftung’ in Erlenbach-Zurich], file V ZH 24421, Swiss National Library.

⁶⁸ This notion becomes evident in the teachers’ descriptions of children attending special institutions or children designated to attend special classes (see below).

⁶⁹ Previously, all children had been gathered together and had been taught individually or by mutual instruction. See Carlo Jenzer, *Die Schulklasse: Eine historisch-systematische Untersuchung* [The School Class: A Historico-Systematic Analysis] (Bern: Lang, 1991), 351, 362.

children were supposed to learn according to a specific timetable, a specific syllabus and specific textbooks—in other words, at a specific, age-adjusted pace. This pace corresponded to the learning capacities of an ‘average’ and therefore ‘normal’ child. Children who struggled with the educational content had posed a problem even before the introduction of age-group levels. However, after the introduction of this new organisational form, these students’ handicaps became more evident because their ‘poor’ performance was now more apparent when compared to the performances of their peers. Children who were not able to keep up with their peers were declared to be ‘disturbing factors of school life’.⁷⁰

⁷⁰ Martine Ruchat, “‘Widerspenstige’, ‘Undisziplinierte’ und ‘Zurückgebliebene’: Kinder, die von der Schulnorm abweichen (1874–1890)’ [‘Unruly’, ‘Ill-Disciplined’ and ‘Retarded’: Children Who Deviate from School Norm (1874–1890)], *Eine Schule für die Demokratie: Zur Entwicklung der Volksschule in der Schweiz im 19. Jahrhundert*, ed. Lucien Criblez et al. (Bern: Lang, 1999), 274. The boom of child psychology and child study in the last decades of the 19th century are also important in this regard. Influenced by the concept of evolution, development became a ‘magic word’. Child psychology and child study were interested in asking how children develop from birth to the end of adolescence. Both disciplines wanted to apply the methods of modern, empirical science to discover the laws of ‘normal’ child development and to improve education. See Burkhard Fuhs, ‘Das Kind als Objekt der Wissenschaft’ [The Child as a Scientific Object], *Kindsein kein Kinderspiel: Das Jahrhundert des Kindes (1900–1999)*, ed. Petra Larass (Halle: Verlag der Franckeschen Stiftungen, 2000), 373–89; Peter Rossmann, *Einführung in die Entwicklungspsychologie des Kindes- und Jugendalters* [Introduction to Developmental Psychology of Childhood and Adolescence] (Bern: Huber, 2012), 15–7; Lucien Criblez, ‘Die experimentelle ‘Avantgarde’ der Pädagogik in der Schweiz zu Beginn des 20. Jahrhunderts’ [The Experimental ‘Avant-Garde’ of Pedagogy in Switzerland at the Beginning of the 20th Century], *Jahrbuch für Historische Bildungsforschung* 19 (2013): 13–34; Edgar Weiss, ‘Entwicklung’ [Development], *Handbuch der Reformpädagogik in Deutschland (1890–1933)*, ed. Wolfgang Keim and Ulrich Schwerdt, vol. 1 (Frankfurt a. M.: Lang, 2013), 363–78.

In the late 19th century, when special institutions and special classes started to emerge in growing numbers, it was mainly the teachers' task to categorise the children. One type of source that is particularly interesting in this regard is the notes about children attending special institutions and children who were designated to attend special classes, which were written by teachers in the 1880s and 1890s.⁷¹ An essential and extensive part of these notes was descriptions of the children's bodies. Aspects that were often mentioned included a weak physical constitution (also described as 'anaemia'), shortness, an irregular head form (either a large head or a flat back of the head), a sluggish or unsteady gait, a bent posture, an expressionless face, deformed feet and defective teeth—the same characteristics that had earlier been identified as markers of 'cretinism'. The teachers' notes clearly offer evidence of the assumption mentioned above: physical characteristics became the main criteria for identifying 'idiotic' children in the school context. In the teachers' understanding of 'idiocy', bodily structure and intellectual capacity were closely linked, meaning that an 'abnormal' bodily structure was seen as an inherent part of intellectual disability. This entanglement finds its most obvious expression in characterisations such as the following. One student (A. G.) was said to reveal his intellectual disability 'by his outward appearance alone', more precisely, 'by his sluggish gait, his bent-forward posture and the expressionless look in

⁷¹ See, e.g., Anstalt zur Hoffnung Basel, 'Notizen zu einzelnen Zöglingen, 1857–1894' [Notes about Individual Pupils, 1857–1894], file PA 444 6, State archives Basel-City; Anstalt zur Hoffnung Basel, 'Aufzeichnungen über die Zöglinge, 1857–ca. 1890' [Notes about Pupils, 1857–ca. 1890], 'Klientendossiers (1857–1985)' [Clients Dossiers (1857–1985)], file ED-REG 41a 1-1 (1), State archives Basel-City; Spezialklassen Basel, 'Spezialklasse für schwachbegabte Kinder 1887–1892' [Special Class for Moronic Children 1887–1892], file Erziehungsacten K 13, State archives Basel-City; *Jahresberichte der Anstalt für schwachsinnige Kinder in Regensberg* [Annual Reports of the Institution for Imbecile Children in Regensberg] (Zürich: Herzog/Leemann, 1883–1913).

his eyes'.⁷² Another student (J. K.) was described as 'showing the face and head form of an imbecile'.⁷³ These characterisations suggested that intellectual disability became visible in the children's bodily structure—that it was inscribed in their bodies. An 'abnormal' body was considered to be the norm for an intellectually disabled child—even though the visibility of physical 'stigmata' was not seen as a necessity for diagnosing 'idiocy'. Not every intellectually disabled child suffered from a physical impairment. The teachers' notes about children attending special institutions and children who were designated to attend special classes also contain descriptions such as 'good physical shape' or 'healthy appearance'. Nevertheless, in the late 19th century, physical impairment came to characterise the lay notion of intellectual disability. This was most evident in a nationwide survey.

One of the Swiss Conference on Idiocy's requests was a Switzerland-wide precise survey of the number of 'idiotic' children. Such a survey—which can be interpreted as part of what the American science historian Theodore Porter calls 'the rise of statistical thinking'⁷⁴—was conducted for the first time in March 1897.⁷⁵ As of 1899,

⁷² Spezialklassen Basel, 'Spezialklasse für schwachbegabte Kinder 1887–1892: Brief [1889]' [Special Class for Moronic Children 1887–1892: Letter [1889]], file Erziehungsacten K 13, State archives Basel-City.

⁷³ Anstalt zur Hoffnung Basel, 'Notizen zu einzelnen Zöglingen, 1857–1894' [Notes about Individual Pupils, 1857–1894], file PA 444 6, State archives Basel-City.

⁷⁴ See Theodore M. Porter, *The Rise of Statistical Thinking, 1820–1900* (Princeton: Princeton University Press, 1986). Scientists from different disciplines wanted to decipher the fundamental principles of social life by means of statistics. 'Statistics could provide an understanding not only of the prevailing causes of death and disease but also of crime and revolution, respectively the chronic and epidemic disorders of the human spirit' (ibid., 31). The 'law of large numbers' should provide a scientific basis for socio-political reforms. Accordingly, extensive statistical studies on different areas of social life were conducted beginning in the second half of the 19th century. See, e.g., Jakob Tanner, *Fabrikmahlzeit:*

the survey occurred every year.⁷⁶ In the absence of school doctors, it was mainly the teachers who were expected to collect the statistical data and to categorise the children. Their task was to fill in a questionnaire that corresponded with the three different degrees of ‘idiocy’ and the three different (educational) measures, which meant that the questions that had to be answered left no room for other findings or interpretations. There were no other categories or measures to which the children could have been allocated—except, of course, for the category of ‘normal’. Therefore, the national survey reinforced the notion of intellectual disability that had been conceptualised since the mid-19th century and linked this notion to actual cases—to thousands of flesh and blood children.

In fact, it was literally the children’s flesh and blood—their bodies—that played an important role in this categorisation. This was most evident in an instruction leaflet for teachers that was first published in 1899. The teachers were given several pages of

Ernährungswissenschaft, Industriearbeit und Volksernährung in der Schweiz 1890–1950
[Factory Meal: Nutritional Science, Industrial Labour and Public Nourishment in
Switzerland 1890–1950] (Zürich: Chronos, 1999), 127–34.

⁷⁵ In November 1897, the Swiss Federal Statistical Office published a report that provided a comprehensive overview of the nationwide survey’s results. See *Die Zählung der schwachsinnigen Kinder im schulpflichtigen Alter* [Survey of Imbecile Children of School Age], vol. 1 (Bern: Schmid & Francke, 1897). Extensive reports on the survey results were also published in different educational journals. See, e.g., ‘Die Zählung der schwachsinnigen Kinder im schulpflichtigen Alter’ [Survey of Imbecile Children of School Age], *Jahrbuch des Unterrichtswesens in der Schweiz* 9/10 (1898): 1–115. As expected by its initiators, the survey supported the hypothesis that a great number of children suffered from ‘idiocy’ and that only a few of them were educated in special classes or special institutions.

⁷⁶ The results were regularly published in the *Zeitschrift für Schweizerische Statistik* [Journal for Swiss Statistics].

instruction to help them categorise their students.⁷⁷ The survey was carried out in March. In most Swiss cantons, the children had started school in spring (in April or May), which meant that the teachers had ten months to observe their students during lessons and in everyday school life before they filled in the questionnaires. Unlike Guggenbühl and other physicians' casuistry, in this case, observing the children was a laymen's task—which can be seen in the tradition of parental observations.⁷⁸ The leaflet contained a paragraph titled *Examination of Idiocy* with guidelines for the observation of students.⁷⁹ This paragraph was written by Karl Kölle (1859–1959), director of the Institution for Imbecile Children in Regensberg (Zurich) and member of the Swiss Conference on Idiocy's permanent committee. Despite lacking medical training himself, Kölle was considered an 'expert on idiocy' due to his long-term teaching experience at institutions for 'imbecile' children.⁸⁰ In his instruction, Kölle stated that the teachers should pay special attention to the children's bodily structure when assessing their intellectual capacity. The section 'general bodily structure' contained fifteen aspects that

⁷⁷ See *Anleitungen für das Lehrpersonal*. Versions of this instruction for the French- and Italian-speaking parts of Switzerland also existed.

⁷⁸ Parental observations, written down in observational diaries, had become popular in the late eighteenth century. See Pia Schmid, 'Die bürgerliche Kindheit' [The Bourgeois Childhood], *Kindheiten in der Moderne: Eine Geschichte der Sorge*, ed. Meike Sophia Baader, Florian Eßer, and Wolfgang Schröer (Frankfurt am Main: Campus Verlag, 2014), 66–8.

⁷⁹ See [Karl Kölle], 'Prüfung auf Schwachsinnigkeit' [Examination of Idiocy], *Anleitungen für das Lehrpersonal, um die in das Alter der Schulpflicht getretenen Kinder auf das Vorhandensein geistiger oder körperlicher Gebrechen zu untersuchen* ([Bern]: [Neukomm & Zimmermann], [1899]), 1–4.

⁸⁰ *Anleitungen für das Lehrpersonal*, 16.

were supposed to be characteristics of intellectual disability.⁸¹ Furthermore, the instruction included the sections ‘condition of the senses and the sensory organs’, ‘ability to speak’, ‘ability to discriminate’, and ‘peculiar habits’.⁸² The section on the bodily structure was mentioned first and it was the most comprehensive and most detailed one. In other words, the instruction guided the teachers to focus their attention on the children’s outward appearance, on things that were visible. Kölle’s instruction again established the close connection between an ‘abnormal’ mind and an impaired body; it suggested that intellectual disability was inscribed in the children’s bodies. Given that the leaflet was distributed among thousands of teachers and served as the basis for the annual survey as of 1899,⁸³ this specific body-mind entanglement was widely disseminated and made consistent with the teachers’ professional knowledge.

Conclusion

The assumption that links a weak body to a weak mind has a long tradition. In 19th-century Switzerland, this assumption became important in the context of the research on ‘cretinism’, which was supposed to be first of all a Swiss affliction, and the renowned institution for ‘cretinic’ children on the Abendberg. Medical experts considered physical characteristics to be ‘cretinism’s’ distinctive mark. After the inglorious ending of the ‘Abendberg’ that led to a loss of interest in ‘cretinism’, this specific body-mind

⁸¹ See [Kölle], *Prüfung auf Schwachsinnigkeit*, 2–3. Among these aspects were shortness, a sluggish gait, an irregular head form, an expressionless face, a flat nose, defective teeth and a thick neck.

⁸² See *ibid.*, 3–4.

⁸³ For the second survey, almost 7000 instruction leaflets were distributed among the schools in 1899 alone. See *Die Zählung der schwachsinnigen Kinder im schulpflichtigen Alter* [Survey of Imbecile Children of School Age], vol. 2 (Bern: Schmid & Francke, 1900), 60–1.

connection did not vanish. In fact, the same characteristics that had earlier been identified as markers of ‘cretinism’ were of importance in regard to another intellectual disability that gained attention after the mid-19th century: ‘idiocy’. Whereas an ‘abnormal’ bodily structure was only one among several characteristics of ‘idiocy’ according to medical science, in everyday school life, physical aspects became the main criteria for identifying ‘idiotic’ children.

Focussing on physical characteristics such as an irregular head form, shortness, a sluggish gait, an expressionless face or defective teeth made ‘abnormal’ mental conditions—to use a term by the American anthropologist James C. Scott—‘legible’⁸⁴ and therefore intelligible. The connection of an ‘abnormal’ mind to an impaired body allowed for the popularisation of knowledge about ‘idiotic’ children and the utilisation of this knowledge by medical laypeople. By observing and assessing the children’s bodies (the ‘outside’), teachers’ deduced their intellectual capacities (the ‘inside’) and allocated them to one of the three categories of ‘idiocy’.

⁸⁴ See James C. Scott, *Seeing Like a State: How Certain Schemes to Improve the Human Condition Have Failed* (New Haven: Yale University Press, 1998), 339–40.