

# Natural and Deliberate Health. Coping with Health in German Autobiographies from the 18th and 19th Centuries

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## SUMMARY

1.-Introduction. 2.-Natural health. 3.-Natural and deliberate health. 4.-Rational conduct. 5.-Health and intellectual work. 5.1.-Bodily aspects. 5.2.-Mental and intellectual aspects.

## ABSTRACT

Coping with illness is a topic well established in social psychology, and in other social sciences. In this essay I focus upon coping with health. I restrict myself to health as an individual activity. Starting with a differentiation between «natural» and «deliberate» health, which was made in the times of the Enlightenment, I look into alternative health accounts represented in German autobiographies.

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## 1. INTRODUCTION (1)

Etymologically, «coping» and the «cape» we wear to protect our bodies against rainy weather are cognate words; other cognates are the

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German *Kappe* (cap), and the French *couper* (to cut). The meaning «to contend with, face hardships, problems» has been used since the 17th century (2). Thus it is quite normal to discuss coping with illness. But coping with health? According to Parsons (3), coping with illness is an ability of the body, and a capacity of the individual, or the family. I take this to be the classical conception of coping. Of course, it may be extended to groups, to all social units, whose members feel to belong together, in some ways. They may be kins, or friends, or even nations. But I shall restrict myself to the individual level, which my sources cover quite well.

Like coping with illness, the term coping with health comprises an activity, an action, a process. Understanding health as a project, means considering it as a social phenomenon, and not as a natural entity. There is controversy about the conception of the body as being a natural *and* a social phenomenon (4), or a social phenomenon, only (5). I do not aim at solving these debates, however; I shall analyse discourses, and these are social phenomena, anyway.

Conceptions of health correspond to those of illness. Both of them form part of medical conceptions; but when the iatrotechnical conception of medicine arose in the 19th and 20th centuries (6), the conception of illness became prevalent, at the latest, and conceptions of health were left with psycho-social relations (and with the corresponding sciences,

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- (2) *The Oxford English Dictionary*, 2nd ed., vol. 2, Oxford, Oxford University Press, 1989, p. 903.
  - (3) PARSONS, TALCOTT. *Health and Disease: A Sociological and Action Perspective*. In: *Action Theory and the Human Condition*, New York, Free Press, 1978, pp. 66-81.
  - (4) Cf. DOUGLAS, MARY. *Natural Symbols. Explorations in Cosmology*, London, Barrie & Rockliff, 1970; FREIDSON, ELIOT. *Profession of Medicine*, New York etc., Dodd, Mead & Co., 1970.
  - (5) As some constructivist authors put it; cf. LACHMUND, JENS; STOLLBERG, GUNNAR (eds.) *The Social Construction of Illness*, Stuttgart, Steiner; HIRSCHAUER, STEFAN. *Die soziale Konstruktion der Transsexualität*, Frankfurt a. M., Suhrkamp, 1993.
  - (6) This means a paradigm consisting of doctrines of man, of disease, and of healing, which understand their matters in the way technicians do: life consists of physical and chemical processes, which can be corrected in detail by technical interventions. Cf. ROTHSCHUH, KARL EDUARD. *Konzepte der Medizin in Vergangenheit und Gegenwart*, Stuttgart, Hippokrates, 1978, pp. 417 ff.

later on) (7). So the process of salutogenesis has been analyzed by Antonovsky in a (socio-)psychological perspective (8). My perspective will set off from sociology, from social anthropology, and from history. The modern sociologist Chris Shilling (9) asserts the attention given to the personal construction of healthy bodies in our (post-)modern society as being unprecedented. I shall maintain that this attention was a project of the Enlightenment, too.

I shall outline the forms of coping with health by drawing upon some 600 German autobiographies, from which Jens Lachmund and I have reconstructed the patients' worlds (10). The health discourse in this genre got a clear bias to male members of the educated middle classes. Women expressed their sympathy for suffering persons much more in their autobiographies, and it was more self-evident for them to nurse other people than men did. Artisans and later on industrial workers took part in discourses about poverty and illness; they told much more about contacts with non-academic healers than authors from the middle and the upper classes did. But both these groups engaged in discourses on coping with health only marginally. In this

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(7) The way Luhmann defines the axis of the «medical code» reflects this development: illness forms one of its ends, serving for connections with other social systems, and called its value of reflexion, while health does not produce such connections, and is therefore called value of designation, only. Cf. LUHMANN, NIKLAS. *Der medizinische Code*. In: *Soziologische Aufklärung*, vol. 5, Opladen, Westdeutscher Verlag, 1990, pp. 183-195.

(8) The individual sense of coherence plays a central role in the project of salutogenesis; this sense is defined as «a stable, enduring, and generalized orientation to one's world that characterizes a person throughout» his/her life. Cf. ANTONOVSKY, AARON. *Unraveling the Mystery of Health*, San Francisco, Jossey-Bass, 1987, p. 182.

(9) SHILLING, CHRIS. *The Body and Social Theory*, London etc., Sage, 1993. p. 5.

(10) For further details see LACHMUND, JENS; STOLLBERG, GUNNAR. *Patientenwelten. Krankheit und Medizin vom späten 18. bis zum frühen 20. Jahrhundert im Spiegel von Autobiographien*, Opladen, Leske & Budrich, 1995; cf. STOLLBERG, G. Health and Illness in German Workers' Autobiographies From the 19th and Early 20th Centuries. *Social History of Medicine*, 1993 a, 6, 261-276; STOLLBERG, G. Industrialization and the Construction of Health Risks in German Workers' Autobiographies from the Late 19th and Early 20th Centuries. *Dynamis*, 1993 b, 13, 235-246.

paper, I do not aim at correcting these biases; I just want to analyse some aspects of the health discourses as represented in the autobiographies.

I shall confine myself to the analysis of the everyday-personal discourse. It is represented best in the autobiographies, while other health discourses, like the professional-medical, the political, and the literary (11), are better represented in other sorts of texts.

Starting from the historical differentiation between natural and deliberate health, I shall look at natural health (2.) and the transition from natural to deliberate health (3.). Rational conduct was an important way to deliberate health (4.). Then I shall proceed to the influence of intellectual work to bodily (5.) and to mental aspects of health (6.). The relations between individual health and the public will be my next issue (7.). Then I shall go on to shifts in the late 19th century (8.), and come to a conclusion comparing historical and modern alternative health accounts (9.).

In 1788, the physician and encyclopedist Johann Georg Krünitz (1728-1796) differentiated between natural and deliberate (*willkürliche*) health. *Natural* health was based upon

«a combination of manifold things, which are not placed at our disposal, and to which our virtues and our vices scarcely contribute; thus everybody can consider it to be a mere good of luck, which heaven gives to those, who shall live a long and healthy life on earth [...] The first thing [...] is to be lucky to stem from healthy, strong, and virtuous parents [...]».

On the contrary, *deliberate* health resulted from

«obeying the duties given to us by nature; it is a deliberate good, which we would possess as soon as we would decide to follow the rules of life (i.e. diet). If we study these duties assiduously, we shall know the way to deliberate health» (12).

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(11) Cf. CRAWFORD, ROBERT. A Cultural Account of «Health»: Control, Release, and the Social Body. In: John D. McKinley (ed.), *Issues in the Political Economy of Health Care*, London, New York, Tavistock, 1984, pp. 60-103 (p. 63).

(12) Cf. KRÜNITZ, JOHANN GEORG. *Oekonomische Enzyklopaedie oder allgemeines System der Staats-, Stadt-, Haus- und Landwirtschaft*, vol. 17, Bruenn, Berlin, Trassler, 1788, pp. 797-798.

## 2. NATURAL HEALTH

Krünitz' differentiation has been assigned to social strata: the natural health of the peasants on the one hand, and the naturally ailing condition of the nobility on the other hand could be contrasted to the deliberate health of the middle classes (13). These latter ones were the main producers of autobiographies; but in them we can find many claims to natural health, too.

Johann Stephan Pütter (1725-1807) was a professor of law at Göttingen university; he was in the position to look back on some seventy years of his life:

«I had special reason to thank God, that he granted me health and energy to wait and see [...] for the exceptional success of many kinds of my vocational work [...] I had been able to live in a uniform, but active, restful, and joyous manner» (14).

Pütter did not ascribe his vocational success to the control he had performed over his life, to his balance between activity and rest, but to god, who had granted health and the ability to keep it. Deliberate health was an outcome of the natural one. In a more secular form Johann Georg Heinrich Feder (1740-1821), professor of philosophy at Göttingen, reflected upon «peculiarities of my body and mind, with some remarks on my health», when he was sixty-two in 1802:

«My bodily constitution belongs, if you follow the normal classifications, to that temperament, which Haller calls hypochondriac, and Platner, in some respects perhaps more adequately, Attic or etheric. Though the strength of my muscular system is not small, that I might be called weakly, especially my chest and my legs could always sustain strain; but the degree of irritability exceeds that one of strength in many ways» (15).

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- (13) Cf. GÖCKENJAN, GERD. *Kurieren und Staat machen. Gesundheit und Medizin in der bürgerlichen Welt*, Frankfurt, Suhrkamp, 1985, pp. 74 ff. Cf. below n. 47.
- (14) PÜTTER, JOHANN STEPHAN. *Selbstbiographie*, Göttingen, Vandenhoeck & Ruprecht, 1798, p. 615.
- (15) FEDER, JOHANN GEORG HEINRICH. *Leben, Natur und Grundsätze*, Darmstadt, Hahn, 1825, p. 235. Albrecht von Haller (1707-1777), a scholar of Boerhaave, 1736-1753

Feder described his constitution as a performance of nature: as a temperament, fitted out with a certain strength etc. But aspects of action were embedded in it:

«Mean height and meagerness determine the outline of my body. My digestive forces were always good, if diet and moderation were appropriate. I sleep lightly and never without dreaming; therefore I do not rise so refreshed as other people do. My dreams usually related to my actions of the evening before, if they had been a strain [...] Very sensitively I used to react to changing weather. Most of my illnesses resulted from suppressed transpiration, or from too slow an adaptation of food and clothes to weather conditions. I nearly never had any headache, but much more often a toothache [...]» (16).

It is quite clear, that Feder's health resulted from his bodily constitution, from his individual nature and from nature outside; illnesses were due to the disregard of these factors. Health is embedded in nature, and health activities have to adapt to it. The teeth are prone to ache, but the head is not.

Another variety of natural health was inherited. Melchior Adam Weikard (1742-1803), who had been a personal doctor to Czarina Catherine, announced:

«I could boast myself of a great advantage, that I had been born by healthy, honest, and virtuous parents. Not only the example of their honest deeds, but also the physical constitution of their bodies influence us [...] If dogs, horses, and birds depend upon a good race very much, why should a similar influence of the parents upon their children not be expected within human beings, too?» (17)

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professor of medicine at Göttingen university, retired to Switzerland in 1753, where he published medical and belletristic books. Ernst Platner (1744-1818), professor of medicine, later of philosophy, at Leipzig, published *Neue Anthropologie für Aerzte und Weltweise* (*New Anthropology for Physicians and for Wise Persons in the World*), Leipzig, Crusius, 1790.

(16) FEDER, fn. 15, pp. 235-236.

(17) WEIKARD, MELCHIOR ADAM. *Denkwürdigkeiten aus der Lebensgeschichte*, Frankfurt, Leipzig, Coburg, Sinner, 1802, p. 8.

Natural health resembled to Hippocratism, which experienced renaissances in 17th century England (e.g. Sydenham), and in 18th century France. It can be found in German autobiographies, too. Karl Friedrich Burdach, (1776-1847), a physician at Königsberg, wrote about his descendance:

«The members of the Burdach family, which had its residence in those parts of lower Lausitz, where sandy soil just affords scanty fruits, and is less favourable to develop corporal strength, mostly were of medium height, and muscular strenght, slender, but agile, and of a mild and friendly mind [...] The members of the Koch (his mother's, G.S.) family, however, who mostly dwelled in a fertile plain with a soil rich of wheat, were characterized [...] by a high height, a strong structure of the body, a certain roughness and vivacity [...]» (18).

### 3. *NATURAL AND DELIBERATE HEALTH*

But natural influences were supplemented by human activities. Feder sketched the way he processed from his natural health I described above to a deliberate one:

«By experience I found the following dietetic regulations: firstly, at dry weather, eastern winds, more wine, less water;[...] secondly, at any congestion, I helped myself by eating softening and chilling food, water, tea, cooked fruits, thin soups [...] I have never [...] been infected by a disease [...], because I did not fear them [...] I think, the great irritability of my body contributed to my health; it did not allow the bad matter to grow, and removed it, before it expanded.» (19)

Dietetic regulations were often orientated towards the medieval conception of «six things non-natural»: to a balance of light and air, of food and drinking, of work and rest, of sleeping and being awake, of secretion and excrements, and of passions which all together controlled

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(18) BURDACH, KARL FRIEDRICH. *Rückblick auf mein Leben. Selbstbiographie*, Leipzig, Voss, 1848, p. 9.

(19) FEDER, ftn. 15, pp. 237-238.

the *res naturales*, the humours (20). Karl Ignatius Lorinser (1796-1853), a physician from Oppeln (Opole) in Upper Silesia, proclaimed them in a letter to his son:

«rest and encouragement of mind, moving the body (from which depend regular blood circulation, appetite, congestion, sleep, and the strength of the muscles), healthy (i.e. good in quality and moderate in quantity) food, clear air, and to avoid all harm, especially colds.» (21)

The medical discourse combined both natural and deliberate health in the conception of the «power of life» (*Lebenskraft*). According to the famous physician Christoph Wilhelm Hufeland (1762-1836), this power was consumed by atmospheric conditions, and by human activities; but it could be regenerated to a certain amount by a special kind of activities, i.e. by dietetic measures (22). Similar conceptions turn up in the autobiographies, too. It was said about the theologian Karl Gottlieb Bretschneider (1776-1848), that his sick-bed had consumed his power of life (23). But this consumption may also produce health: Chlodwig zu Hohenlohe-Schillingsfürst (1819-1901), who became chancellor of the Reich (1894-1900), wrote about his measles he suffered from in 1842, that «they had had positive results, too, for they absorbed the plethora of corporal power», and thus cleared his mind (24).

The contrast of natural and deliberate health was doubled into both body and mind by the teacher and theologian Wilhelm Harnisch (1787-1864):

«There was a contrast in my nature between an extraordinary strength, which stepped forth suddenly, [...] and a sickness in my abdomen, or

(20) Cf. RATHER, L. J. The «six things non-natural»: A Note on the Origins and Fate of a Doctrine and a Phrase. *Clio medica*, 1968, 3, 337-347.

(21) LORINSER, KARL IGNATIUS. *Eine Selbstbiographie* (ed. Franz Lorinser), 2 vols., Regensburg, Mauz, vol. 2, 1864, p. 81.

(22) Cf. HUFELAND, CHRISTOPH WILHELM. *Makrobiotik oder die Kunst, das menschliche Leben zu verlängern*, München, Insel (first 1796), 1984, pp. 34 ff.

(23) Editor in: BRETSCHNEIDER, KARL GOTTLIEB. *Aus meinem Leben*, (ed. Horst Bretschneider), Gotha, Müller, 1851, p. 135.

(24) HOHENLOHE-SCHILLINGSFÜRST, CHLODWIG ZU. *Denkwürdigkeiten*, 2 vols., Stuttgart/Leipzig, Deutsche Verlagsanstalt, vol. 1, 1907, p. 20.



[...] my breast. In a similar way there was a contrast in my conduct, too. A clear goodness came together with an irritable vehemence and wilfulness» (25).

#### 4. RATIONAL CONDUCT

In the times of the Enlightenment, deliberate health was conceptualized as human activities being adequate to dietetic regulations. Deliberate health thus was an outcome of rational behaviour. Rational conduct was a great topic in the autobiographies. The parson, teacher, and author Gustav Dinter (1760-1831) rendered account for his health. Proudly he pointed out to have fallen ill for only 71 days in his 69 years of life:

«On behalf of my younger friends it should be granted to me to declare the way it may have happened, that I got only a few diseases through fault of mine. [...] During the long time, when I was a tutor, Dinter scarcely a day deviated from the regulations. At great parties he took the liberty of having manifold dishes, not by opulence, but because he believed that too strong a regularity could make dangerous every departure. [...] As a parson, he gave his lessons mostly in the garden, as long as the season and the weather allowed to do so; [...] he almost never studied past ten o'clock, never got up too late, walked for eight days every year [...] and no wonder his strength and his health glowed. My wrath was too violent, too passionate up to my thirtieth or thirty-second year of age [...] But I don't know whether reason or the course of years [...] mattered, [...] I became [...] calmer, and thus my body was weakened less. Calmness, social intercourse, joy at succeeding with my plans, combined with food neither excessive nor bad, seem to have strengthened my body in a way that I can expect to achieve eighty years of age, if neither a stroke (to which natures like me are inclined) nor a rupture will kill me.» (26)

Well, Dinter became 71 years old. He rendered an account for his health, a fact which clearly shows, that this topic was burdened with

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(25) HARNISCH, WILHELM. *Mein Lebensmorgen*, Berlin, Hertz, 1865, p. 49.

(26) DINTER, GUSTAV FRIEDRICH. *Dinter's Leben*, Neustadt, Wagner, 1829, pp. 322 f.

high moral obligations in his time. The emphasis was put on moderation, and a speciality may be seen in the reflexivity of the rules: Dinter enjoyed manifold dishes because simplicity might cause an excessive amount of moderation! Thus health became an ideal which could be reached by rational conduct.

Moderation was a popular device among the educated middle classes of the Enlightenment, and it formed part of political, philosophical, and medical discourses. They in turn formed part of processes being central to the development of modern society which have been conceptualized as civilization (by Norbert Elias), or as disciplinary society (by Michel Foucault). With regard to health, the contemporary writer Adolph Franz Freiherr von Knigge (1751-1796) included care for one's own health into his canon of civil virtues (27); and the philosopher Immanuel Kant (1724-1804) declared, referring to the physician Christoph Wilhelm Hufeland (1762-1836), that keeping to a diet was a moral duty (28).

In this world of strenuousness, and moderation, religious forms of coping with illness were postponed. Countess Elise von Bernstorff (born in 1789 at Copenhagen), who had married a diplomatist, and lived at Berlin since 1817, looked at the way a Russian countess, who had been married to a Prussian count, coped with illness as a strange world. Katinka Schuwaloff had been a lady at the Czar's court; being a young woman admired by many young men, she married the Prussian Count Karl von Schlieffen and moved to Berlin.

«Since that time God's paternal rule made her perceive the vicissitudes of life, too [...] She passed through illnesses on the verge of ruin; she went through accidents, which had been almost perilous to her brave husband; she had to bury children of any age, some of them had been purified by unspeakable complaints before. But in early times she had found the source, where you always conceive consolation and hope;

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(27) KNIGGE, ADOLPH FRANZ FRIEDRICH FREIHERR VON. *Über den Umgang mit Menschen*, Darmstadt, Wissenschaftliche Buchgesellschaft (first 1788), 1967, p. 82.

(28) KANT, IMMANUEL. Der Streit der Fakultäten. In: *Werke in zehn Bänden*, (ed. Wilhelm Weischedel) vol. 9, Wiesbaden, Wissenschaftliche Buchgesellschaft (first 1798), 1964, p. 371.

she had the bottom, where her anchor firmly rested! Therefore the waves of temptation have never been able to swallow up the little ship of her faith [...]» (29)

So not to cope with health, but to endure the vicissitudes of life was the device of a world even different from that of the Prussian enlightened nobility.

## 5. HEALTH AND INTELLECTUAL WORK

### 5.1. Bodily aspects

Moderation could be combined with work, especially with intellectual activities. No doubt these activities could impair health; the theologian and teacher Friedrich Kohlrausch (1780-1865) said about his father, a parson:

«Excessive strains in his public function, besides zealous studies, and musical practices, and certainly riding on horseback [...] had undermined his health, which was not strong, anyway.» (30)

As for bodily aspects of health, toughening one's body became a popular device in 19th century. The physician Daniel Gottlob Moritz Schreber (1808-1861) proclaimed:

«The young man and the young woman must learn to endure [...] changing temperatures and weathers, heat, cold, storm, [...] hunger, thirst at times [...], moderate strains [...] Live moderately, and sprightly, be content — this is the basic rule of the philosophy of health» (31).

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(29) BERNSTORFF, ELISE VON. *Ein Bild aus der Zeit von 1789 bis 1835. Aus ihren Aufzeichnungen*, 2 vols., Berlin, Bahn, vol. 1, 1897, p. 301.

(30) KOHLRAUSCH, HEINRICH FRIEDRICH THEODOR. *Erinnerungen aus meinem Leben*, Hannover, Hahn, 1863, p. 9.

(31) SCHREBER, DANIEL GOTTLÖB MORITZ. *Kallipädie oder Erziehung zur Schönheit durch ... Förderung normaler Körperbildung, lebensstüchtiger Gesundheit ...*, Leipzig, Hennig, 1858, pp. 276-277. Schreber founded a movement to establish a system of small gardens for city dwellers, and he established an institute for orthopaedics and physiotherapy at Leipzig.

So Schreber even recommended the moderation of educational strains! Robert Hamerling, a Triest teacher and author, spoke of toughening oneself in a more general sense:

«[Later on] I suffered from my abdomen more seriously, again. [...] Besides a disposition to rheumatism, a hereditary evil from my earliest childhood, troubled me [...] You ought not to think of mollycoddling; he who had to face Triest bora for ten winters, and actually did so, and who for many further years was not discouraged by any rain, by any snow flurry, by any storm from going for a walk he was used to go daily, he may repudiate any suspicion that he omitted any condition to toughen himself» (32).

Wilhelm Lübke (1826-1893), who later became a professor of the history of art at Stuttgart, opened a last aspect of toughening. He told about a fellow student at Bonn university:

«Wilhelm Neinhaus, son of a parson at the Lower Rhine, was one of the most ambitious and most versatile young men I ever met. His figure was plain, almost weakly, but he knew how to strengthen his health by toughening himself, and to steel himself for nearly continuous work. Afflicted with a totally crippled left arm by birth, he knew to compensate even this fault by applying maximal energy in a most ingenious manner. I admired the way he could use this mutilated limb [...]» (33).

Here we read that it was possible to compensate bad natural health by using deliberate health, by learning to cope with health.

But moderate intellectual work could also preserve health. The Austrian writer Ignaz Aurelius Fessler (1756-1839), who had been a monk and became a protestant theologian, praised his health, though he had become an old man:

«Free of every chronic illness, I start my seventieth year of age; I do

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(32) HAMERLING, ROBERT. Stationen meiner Lebenspilgerschaft. In: *Sämtliche Werke*, (ed. Michael Rabenlechner), vol. 13, Leipzig, Becker, (no date), p. 293.

(33) LÜBKE, WILHELM. *Lebenserinnerungen*, Berlin, Fontane, 1891, p. 111.

not suffer from any organic fault, do not know haemorrhoides, migraine, gout etc.; [...] in all the functions of my mind and in using my body I am quite as vivid, active, strong and tireless as in the twentieth year of my life» (34).

It was not only moderation and regularity, which kept him young. Fessler praised reading to have preserved his health:

«My daily way of life is simple and regular. After common benediction and enjoying the morning, I retire to my library until two o'clock at noon; it has been enriched, besides an abundant historical, philosophical, and theological stock, with an almost complete collection of Greek and Roman classical authors, and of ecclesiastical fathers [...] After dinner, my wife grants me to enjoy a piece of her musical art. After seven o'clock at night I read to my family [...]» (35)

## 5.2. *Mental and intellectual aspects*

It becomes clear from the last quotations, that bodily aspects of good health were connected with mental and intellectual ones. But furthermore intellectual work could strengthen health in mental aspects. The Königsberg writer and historical author Ludwig von Baczko (1754-1823), who had become blind in his 21st year of age, related that Immanuel Kant disliked blind persons. But Kant «added, that I (Baczko) was not blind, because I got sufficient concepts by experience (*Anschauung*), and because I got resources to overcome my lack of sight» (36). For Kant, healthy senses were prerequisites for philosophical knowledge, because empirical sensual experience provided part of it. But because experience formed knowledge *a posteriori*, only, it could be completed by «pure» forms of perception *a priori*, i.e. by categories like space, and

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(34) FESSLER, IGNAZ AURELIUS. *Dr. Fessler's Rückblicke auf seine siebenjährige Pilgerschaft*, Breslau, Korn, 1824, p. 418.

(35) FESSLER, fnt. 34.

(36) BACZKO, LUDWIG VON. *Geschichte meines Lebens*, 3 vols. Königsberg, Unzer, vol. 2, 1824, p. 13.

time. Therefore Kant had not merely been polite, when he called Baczko to be blind in his sight only, but not in his perception (37).

Pütter, the professor of law quoted above, expressed health as a mental prerequisite for bearing his vocational burdens:

«As I had arranged things now, every season, every day, every hour had its determination in a way, that I could live nearly in uniformity, but nevertheless actively, restfully, and cheerfully. I had a special reason to thank God, that he granted me health and energy, to wait and see continuously and successfully in all the different kinds of my vocational work, though they all required considerable efforts» (38).

In these ways Pütter mixed the conceptions of natural and of deliberate health as conditions of successful intellectual work, which was highly esteemed in his times and in his social world.

Things differed in the workers' social worlds. Albert Rudolph, son of a railway conductor, related:

«Arthur, my younger brother, [...] got a better bodily agility; therefore he was held in higher regard by my mother than I was. My clumsiness, which was caused by illness — I suffered from epileptical attacks —, was taken for stupidity» (39).

Albert himself was despised for his intellectual activities:

«I liked best retiring to a restful corner with a book. This tranquillity used to end prematurely, when my mother tracked me down and stroke the book [...] against my head» (40).

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(37) In a similar way, Denis Diderot (1713-1784) had contrasted the moral and the metaphysics of impaired, esp. of blind and deaf-mute persons with those of healthy ones; he supposed that human perceptive ability to resulted from sensorial perception, and not from congenital ideas.

(38) PÜTTER, fnt. 14, p. 615.

(39) RUDOLPH, ALBERT. *Wie ich flügge wurde. Jugenderinnerungen eines Arbeiters*, Stuttgart, Dietz, 1916, p. 15.

(40) RUDOLPH, fnt. 39, p. 16.

Thus, in this workers' social world health was held in high esteem as a condition of bodily fitness, and not as a prerequisite for intellectual abilities.

## 7. INDIVIDUAL HEALTH AND THE PUBLIC

Health had to be maintained not only in the private sphere, but also in the public. Robert Hamerling lamented in his autobiography:

«It is embarrassing to be to give public information about so private a matter as health is. He may be considered lucky, who may be silent concerning details of bodily misery not only in wider, but also in smaller and smallest circles! But as for him, who belongs to the public in any way, this side of his existence will also be dragged out in to the open, and he will hang at the stake of his harm on the open road, like the crucified did. He has to account, he has to justify, why he is not able to satisfy all the demands, and he has to contradict gossip concerning his bodily state by simply describing the facts» (41).

And on the six pages following the author informed us about the problems of his abdomen, proudly announcing that he continued to work at his poetry. The actor and author Karl von Holtei (1797-1880) shed some irony upon public aspects of his toothache:

«But a person who got good and healthy teeth and neglects them, who does not keep them clean, who sins against this richest gift of nature by dirty ingratitude, he or she should have to be called to account by state. It is a fault of our new code of law, that it omits this case» (42).

But this irony does not pertain to the personal duty to keep up one's health, which I sketched before.

Georg Gottfried Gervinus (1805-1871) made an analogy between his

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(41) HAMERLING, fnt. 32, pp. 292-293.

(42) HOLTEI, KARL VON. *Vierzig Jahre*, 2 vols., Breslau, Trewendt, vol. 1, 1898, p. 224.

personal health and that of the German people. He was a historian, an author and a political editor, who had been deprived of his *venia legendi* after the revolution of 1848. Gervinus reflected on relations between individual knowledge and public education:

«If the struggle of that time, when the German people looked for the difficult transition from spiritual to practical life, will be talked about in German cultural history, then my name will not remain unmentioned. For this struggle of a nation was mirrored scarcely more intensely and more clearly in another individual. The preponderance was on the side of the interior life, though tendency and impulse rather went into the other direction. This was the same in the life of the people as a whole: its fate, the level of education achieved called it per se to economic and political deeds, but its habits threw it back into its spiritual life, always. If the quality of my bodily nature was decisive for this preponderance in my private existence, then a parallel may be drawn to the life of the nation in this point, too, which in its upper strata just started to change the antiquated educational system, which made the body become stunted, to a stronger care of the physical powers, without which the race will always lack muscles and nervous energy for political affairs. Bad nature, which was situated in these conflicting tendencies and activities of the people, was expressed in morbid degeneration of spiritual life, which seemed to deny the healthy condition of the German people's nature by desperately overexciting the state of fantastic, poetic and the hyper-metaphysical desires [...]» (43).

Gervinus stated that he himself as well as the German nation had an inclination towards the *vita contemplativa* instead of the *activa*; that bad health was expressed in metaphysics, good one in political and social activities. Good health was produced by deliberate health, also on the level of the nation.

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(43) GERVINUS, GEORG GOTTFRIED. *Leben von ihm selbst*, Leipzig, Engelmann, 1893, pp. 47-48.



## 8. HEALTH IN AUTOBIOGRAPHIES OF THE EARLY TWENTIETH CENTURY

Health discourses became less elaborated and less extended in the course of the 19th century. This may be caused by the process of medicalization, which took place during that time, and which was not only performed by the physicians, who extended their jurisdiction to all problems of health and illness (44), but also by many medical laypersons, especially from the the middle classes, who demanded for curing and activities of academic doctors (45).

In the autobiographies, this process resulted in an increasing acceptance of medical terms, in a shift from the motto «to be the doctor of one's own» to being a medical layperson, and from the use of a medical pluralism of healers to an increasing confidence in and use of medical doctors. This behaviour was extended to artisans to workers by social health insurance since the 1850ies (46).

At the end of the 18th century, it was still a project of the educated middle classes to establish health as a social value of high esteem. In a pedagogic novel an aristocratic lady said to her son, who was going to marry a woman from the middle classes, and who emphasized her good health:

«Health may be highly esteemed by members of the middle classes or by peasants, who do not know higher goods. But he who has got ancestors, for him health is a bagatelle. It is not becoming for a lady to look healthy too much. That fits a peasant» (47).

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(44) Cf. ABBOTT, ANDREW. *The System of Professions*, Chicago, London, University of Chicago Press, 1988.

(45) Cf. LOETZ, FRANCISCA (1994), «Medikalisierung» in Frankreich, Grossbritannien und Deutschland, 1750-1850. In: Wolfgang Eckart, Robert Jütte (eds.) *Das europäische Gesundheitssystem*, Stuttgart, Steiner, pp. 123-161.

(46) Cf. LACHMUND; STOLLBERG, fnt. 10, pp. 179ff.

(47) This was an episode in the novel *Carl von Carlsberg oder Ueber das menschliche Elend*, written by the philanthropic parson and pedagogue CHRISTOPH GOTTHILF SALZMANN (1744-1811), 6 vols. Leipzig, Crusius (1783-1788); quoted from FISCHER, ALFONS. *Geschichte des Deutschen Gesundheitswesens*, 2 vols., Berlin 1933, vol. 2, p. 17.

In his autobiography, Ulrich Bräker, a poor Swiss peasant, still ranked «grief and sorrows of all sorts, diseases, heavy debts» equally (48). This changed in workers' autobiographies, and especially in socialist ones since the 1880's, when health was connected with utopian ideas. The socialist Lily Braun (1865-1916), daughter of a Prussian general, proclaimed that health and the ability to work were the highest goods (49). The socialist worker Adelheid Popp (1869-1939) enumerated the following elements of a social utopia: healthy dwellings, nourishing food, books, listening to a concert (50).

### 9. ALTERNATIVE HEALTH ACCOUNTS IN OUR TIMES: A CONCLUSION

Finally, I want to compare this historical with a modern diversity of health accounts. Rogers, a social psychologist, investigated beliefs about and understanding of health and illness in our times. She identified some eight alternative (types of) accounts:

1. The «body as machine» account, «within which illness is regarded as naturally occurring [...], and modern biomedicine is seen as the only valid source of effective treatment [...]
2. The «body under siege» account, in which the individual is seen to be under threat and attack from germs and diseases, [...] and the «stress» of modern life [...]
3. The «inequality of access» account, [...] concerned about the unfair allocation of [...] benefits [...]
4. The «cultural critique» account, based upon a [...] worldview of exploitation and oppression [...]
5. The «health promotion» account, which [...] stresses the wisdom of adopting a «healthy lifestyle» [...]

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(48) BRÄKER, ULRICH. *Der arme Mann im Toggenburg* (ed. Hans Amelung), Berlin, Deutsche Bibliothek (first 1789) 1917, p. 191.

(49) BRAUN, LILY. *Memoiren einer Sozialistin*, München, Langen, 1909 1911, vol. 2, p. 278.

(50) POPP, ADELHEID. *Erinnerungen aus meinen Kindheits- und Mädchenjahren*, Stuttgart, Dietz, 1915, p. 65.

6. The «robust individualism» account, which is more concerned with the individual's right to a «satisfying life» [...]
7. The «God's power» account, within which health is a product of «right living» [...] and God's care [...]
8. The «willpower» account, which [...] stresses the moral responsibility of the individual to use their «will» to maintain good health (51).

In the historical autobiographies, I could in particular find three of these accounts: the modern «God's power» account can be related to the historical conception of natural health; the «health promotion» and the «willpower» account come close to deliberate health as produced by rational behaviour. Other historical aspects of coping with health, like the moderation, and the public debate of individual health are also well known in our times, though not mentioned by Rogers. Thus the health accounts of the Enlightenment form part also of our modern accounts.

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(51) ROGERS, WENDY STAINTON. *Explaining Health and Illness*, New York etc., Harvester Wheatsheaf, 1991, pp. 208-209.