

## Intervening in the nation's future: discursive practices on childhood at the Hygiene Post in the city of Novo Hamburgo-RS (1939-1960)

*Intervindo no futuro da nação: práticas discursivas sobre a infância junto ao Posto de Higiene da cidade de Novo Hamburgo-RS (1939-1960)*

*Interviniendo en el futuro de la nación: prácticas discursivas sobre la infancia en el Puesto de Higiene de la ciudad de Novo Hamburgo-RS (1939-1960)*

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**Abstract:** This article analyzes the discursive practices concerning childhood at the Hygiene Post of Novo Hamburgo - Rio Grande do Sul (1939-1960) as a microcosm of Brazilian biopolitics. Through the discursive analysis of journalistic and photographic enunciations, it is inferred that the sanitary practices of this health space were imbued with hygienist enunciations aimed at shaping local childhood according to the ideal of a productive and healthy Brazilian nation in the mid-20th century.

**Keywords:** Discursive practices. Sanitation. Hygiene. Childhood robustness. Eugenics.

**Resumo:** O artigo analisa as práticas discursivas sobre infância no Posto de Higiene de Novo Hamburgo - Rio Grande do Sul (1939-1960) enquanto microcosmo de biopolíticas brasileiras. Através da análise discursiva de enunciações jornalísticas e fotográficas infere-se que as práticas sanitárias do referido espaço de saúde estavam imbuídas de enunciações higienistas que visavam a moldagem da infância local perante o ideário de uma nação brasileira produtiva e saudável em meados do século XX.

**Palavras-chave:** Prática discursivas. Sanitarismo. Higienismo. Robustez Infantil. Eugenia.

**Resumen:** Este artículo analiza las prácticas discursivas en torno a la infancia en el Puesto de Higiene de Novo Hamburgo - Rio Grande do Sul (1939-1960) como un microcosmos de la biopolítica brasileña. A través del análisis discursivo de enunciados periodísticos y fotográficos, se infiere que las prácticas sanitarias de este espacio de salud estaban imbuídas de enunciados higienistas destinados a moldear la infancia local según el ideal de una nación brasileña productiva y saludable a mediados del siglo XX.

**Palabras-clave:** Prácticas discursivas. Saneamiento. Higiene. Robustez infantil. Eugenesia.

## Introdução

Discourses on childhood are social constructs that transform over time and, at the same time, vary between social and ethnic groups in society (Heywood, 2004, p. 21). In agreement with previous analyses (Führ, 2015, p. 66) based on Foucault (2008, p. 133)

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discourses are seen to be extrapolated through the concept of discursive practices. In other words, not only do they cover the discourse theoretical issues, but also practical issues with which historical rules are defined in space and time through subjects and their actions. Taking all that into account, we aimed to analyze discursive practices in which the Hygiene Care Center of the city of Novo Hamburgo, state of Rio Grande do Sul, was imbued between 1938 and 1960. That center is seen as a microcosm of social and health policies seeking to shape certain social construction of the Brazilian childhood in the mid-20<sup>th</sup> century.

The city of Novo Hamburgo, where the health and hygiene care center investigated was located, is part of the Metropolitan Region of Porto Alegre (RMPA), one of the metropolitan regions of the state of Rio Grande do Sul (RS), a federative unit located in southern Brazil. It is currently known as the “National Capital of Footwear” since the local economy is “mainly supported by industries linked to the leather-footwear sector” (Magalhães, 2017, p. 79).

To achieve the objective proposed, this article is structured in three analysis topics. First, we analyzed discursive practices regarding a place designed as a Hygiene Care Center after the state health reforms promoted between 1938 and 1943, during the New State period. Next, journalistic discourses about and from medical professionals were analyzed, which were produced by those professionals while working in the health care center under analysis. The choice of such discourses is based on the understanding that the margins between social and vital are spaces where “medicine encounters the limits and possibilities of enunciation” (Arouca, 2003, p. 222). Finally, we analyzed the discursive practices of health actions promoted at the Hygiene Care Center (P.H., Brazilian acronym for Posto de Higiene), whose target were the infants of the Novo Hamburgo city.

To analyze the research *corpus* identified above, the methodological logic already presented in previous studies was adopted (Führ & Jardim, 2023; Führ, 2023; Führ, 2019; Führ, 2015) employing both the Discourse Theory (social practice as discourse) and Discourse Analysis (analysis of the production of discursive practices) to understand space, subjects and their enunciations.

The methodological approach of this study is anchored in the Discourse Analysis in a maieutic perspective, that is, an analytical procedure that transcends mere textual description to act as a "synthesis and union of different theories" aimed at the composition of complex

knowledge (Gabioneta, 2015, p. 35). Inspired by Socratic *techné*, this approach is not limited to passive assistance but constitutes an active effort to question documentary materials from a "maieutic" perspective, bringing to light any hidden meanings and identifying the signifying chains that structure the discourse.

In such perspective, the reader is invited to examine the structured chains of signifiers, recognizing that meaning is always relational and dependent on the exteriority of discourse (Führ & Jardim, 2023). Under the influence of the contributions of Lara Júnior et al. (2019), the subversion of the subject in its ideological formation is assumed, where the "unsaid" and the points of contention have central weight in the constitution of circulating social memory (Führ, 2023).

Such analytical framework establishes transversal dialogues with Pochapski's (2020) investigations, privileging the history of spaces as a history of life grounded in the Foucauldian archeological-genealogical perspective. These methodological convergences extend to the use of Discourse Analysis, as employed by Schactai (2020), to unveil moralizing and normative discursive practices aimed at managing conduct and the subjectivation of individuals. In the field of governmentality and biopower. Such approaches also agree with Pereira's (2017) studies on the construction of a disciplined social body, highlighting how state control over the life cycle and population normalization transforms institutional space into a privileged target of political intervention.

We examined graphic and visual discourses of the "childhood robustness" contests and other initiatives promoted by the Hygiene Care Center in the city of Novo Hamburgo, Rio Grande do Sul, between 1938 and 1960, as biopolitical discursive practices of normalizing local childhood under the auspices of a hygienist (eugenic) ideology that remained in effect even after the end of World War II. The analysis of the discursive practices of the Hygiene Care Center of Novo Hamburgo presupposes that discourse is the locus of an irreducible tension between prevailing discourses (Führ, 2015). These categories allow us to unveil how the eugenic and hygienist ideology was established as a nodal point in pronouncements about childhood as the "future of the nation."

### **Health Space: The Hygiene Care Center of the city of Novo Hamburgo (PHNH)**

In May 1939, a Hygiene Care Center was officially opened in the city of Novo

Hamburgo, its first address was at Rua 15 de Novembro (currently Operário Neighborhood). It was headed by Edgar Loureiro Falcão, MD (Petry, 1959, p. 93).

**Figure 1:** Hygiene Care Center - P.H. opening in 1939



**Figure 2:** Childcare activity at the P.H. (1939)



*Source:* Public archive of Novo Hamburgo.

However, the designation as a Hygiene Care Center only came about to comply with the regulations of Decree N° 7,481, of September 17, 1938, which reorganized the Hygiene and Public Health services of the state of Rio Grande do Sul. In fact, before that date, the aforementioned health facility already existed, albeit without that designation, as was already the case in 38 other medium and large-sized cities in Rio Grande do Sul, where municipal entities were already implementing some "sanitation prevention measures" (Brum, 2013, p. 154). Until 1939, the health unit analyzed was coordinated by the medical doctors Wolfram Metzler and Eugênio Adams.

Such discursive practice of naming health spaces as Hygiene Care Centers was imbued with the so-called health reforms in the New State during Vargas's government. The medical doctor from Pelotas, Bonifácio Costa, MD, acted as federal intervenor for the Departamento Estadual de Saúde (DES) [State Health Department] of Rio Grande do Sul aiming to promote such health reforms between July 1938 and August 1943. During that period, Bonifácio Costa organized with the political and technical support of the medical professional class of Rio Grande do Sul, the district hygiene system (Brum, 2013, p. 233-234), whose structure at the time comprised Health Care and Hygiene Care Centers, as provided for in Art. 5 of the State Decree n° 7.481 of 1938:

The district hygiene units were divided into Health Care Centers and Hygiene Care Centers, whose composition varied according to the financial possibilities, while the Health Care Center denomination was limited to health units that had, at least, a



secretary and a small laboratory [...] (Rio Grande do Sul, 1938).

It seems relevant to mention that at that time, public health actions were subordinated to state initiatives with education purposes. At the federal level, the Health Ministry only separated from the Ministry of Education in 1953, which invariably implies that before such separation, state health initiatives were coordinated by public actions of educational character. Bonifácio Costa advocated for the separation of these educational and health institutions, obtaining autonomy for the DES (Department of Education and Health) from the State Education Secretariat of Rio Grande do Sul in 1940 (Brum, 2013, p. 224), something that would only become a Brazilian reality at the federal level 13 years later. Another pertinent observation is that, despite the initiatives analyzed being discursively labeled as "assistance-based," they effectively consisted of actions of an educational or health nature. Even today, the concept of an assistance model in health remains in effect, revealing a polysemous meaning of the term assistance (Fertonani et al., 2015), and of the interrelations between the fields of health and assistance.

Taking such discursive practices into consideration, journalistic records are quite often found reporting coordinated actions promoted between schools and health units, aiming to promote the healthiness of the space and the care for the student's physical health, since students were perceived as future citizens and model workers (Brum, 2013, p. 134). Regarding the healthiness of the spaces, it is worth noting that, as foreseen in the second part of State Decree N° 7,481 of 1938, Hygiene Care Centers (such as the one existing in Novo Hamburgo since 1939) were responsible for the sanitary inspection and oversight of the institutional facilities in the city where they were located. Journalistic records exist that guide the Novo Hamburgo community on this legal requirement for the authorization of economic activities, such as the publication of Decree n° 7,481 of 1938 and the need for the Hygiene Care Center's approval in the newspaper called *O 5 de Abril*:

**Table 1:** Journalistic records of Decree n° 7481/1938 in the newspaper O 5 de Abril

State Health Department Hygiene Care Center of Novo Hamburgo - P. H. 39	City Hall NOTE
<p style="text-align: center;"><b>CALL N. 1</b></p> <p>I hereby make public that, in accordance with the provisions of Article 232 and its paragraphs of the Regulations of the State Department of Health, formalized by Decree N° 7481 of September 14,</p>	<p>Aiming to cooperate with the public health of this city, I hereby inform those interested in the matter that this city hall will not receive, with the purpose of license and approval, blueprints of buildings that, after being examined by the Hygiene Care Center, do</p>

<p>1938, no building or part of a building may be occupied or used without prior authorization from this health department. Therefore, those responsible for all vacant buildings, or those that become vacant—owners, lessees, tenants, or their representatives—must, under penalty of fine, notify the department in writing of the vacancy, handing over the respective keys to the Hygiene Care Center's Secretariat.</p> <p>This notice is intended for property owners in Lomba Grande, who must submit their vacancy notifications to the Hygiene Care Sub-Center, already operating in the district's headquarters.</p> <p>Novo Hamburgo, May 28, 1940</p> <p><b>Dr. Loureiro Falcão</b> Head of Department</p>	<p>not have the "CHECKED" by the Medical Doctor – Head of that Agency.</p> <p><b>Nelson Toohey Schneider</b> Mayor</p>
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*Source:* Public archive of Novo Hamburgo.

According to Brum (2013), by decentralizing the actions of the Health and Education Department of Rio Grande do Sul, under Bonifácio Costa's intervention, the state reached the second position as the state with the largest number of health districts in 1941, following the state of São Paulo, and owning 88 health districts. The same number as that of municipalities belonging to that federative unit at the time. Also according to Brum (2013), the state of Rio Grande do Sul, under Costa's intervention, adopted the preference of installing hygiene care centers and health care centers to the detriment of the construction of sub-centers, the most usual practice in other states of the country. The only case of construction of a sub-center in Rio Grande do Sul occurred exactly in the municipality of Novo Hamburgo, when the municipality in partnership with the Hygiene Care Center investigated, structured a sub-center in the place called Lomba Grande, in the rural area of that city (as indicated in one of the journalistic reports above).

It did not take long for the facilities of the PHNH to become insufficient to meet the health demands of the community within its jurisdiction (which at the time still encompassed the territory of the future municipality of Campo Bom - RS). Political mobilizations began to relocate the hygiene care facility to a more centralized urban area. Between 1947 and 1948, the relocation of the Novo Hamburgo Health Center to the corner located at the time between Rua Joaquim Nabuco and Travessa Seival was initiated and completed.

**Figure 1:** Photo of the almost finished construction of the new Hygiene Care Center of Novo Hamburgo on 02/27/1948



Source: Public archive of Novo Hamburgo.

### The subjects and their health discourse: the PHNH medical professionals

Currently, there is a non-hegemonic understanding that health (in a broad sense) is not optimized only by medical professional actions. However, overdetermination practices of physician-centered discourses continue to be decisive even today (Führ, 2015), being even more pronounced in the period studied (mid-20th century). Examples of this type of pronouncement on the determinants of medical discursive practices are also found when analyzing newspaper clippings about the Hygiene Care Center of Novo Hamburgo. Hélio Augusto de Magalhães Calvet<sup>1</sup>, MD is a key medical figure in the discursive construction of what the Hygiene Care Center of Novo Hamburgo was, and his pronouncements to the local journalistic media reveal that:

**Table 2 – PHNH medical discourses before the health space's address change**

<p>Newspaper excerpt  A Gazeta de Novo Hamburgo  07/11/1947</p>	<p><i>Discourse analysis combined with Discourse Theory (social analysis of the stated discourse)</i></p>
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<p>Services rendered by the Hygiene Care Center of Novo Hamburgo – lecture with the head doctor – Movement in the Hygiene Care Center – The new building – The social assistance work in Novo Hamburgo [...]</p> <p>We decided to talk about it with the Head Doctor of the Hygiene Care Center, Magalhães Calvet, MD. We found him quite busy, in his position as head of the agency. But, even so, we could talk. The lecture was changed into an interview, and the interview became a long and detailed explanation of the construction that is being carried out, the difficulties of the task and the advantages of the new facility [...]. The building that currently shelters the Hygiene Care center has become too small, consequently improper for the new facilities needed, which, for this reason, do not go beyond being incipient. Their inappropriateness has been noticeable since the early days of the Hygiene Care center, given its location far from the central area.</p>	<ul style="list-style-type: none"> <li>* Social assistance work? Is health a right or state “charity” action?</li> <li>* Head-doctor? Does it imply the interviewed doctor’s authority beyond the technical aspects of the interview?</li> <li>* Quite busy in his position as head...? Is it necessary to justify position and tasks?</li> <li>* How was the discursive pact leading from lecture to interview to explanation negotiated between sender and receiver of the uttered discourse?</li> <li>* Inappropriateness of the health agency... (elaborate rethoric)</li> </ul>
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Source: Public archive of Novo Hamburgo.

**Table 3** – PHNH medical discourses after the health agency change of address

<p>Newspaper excerpt  O 5 de Abril  08/27/1948  (excerpt spelling mistakes kept unchanged)</p>	<p>Discourse analysis combined with Discourse Theory  (social analysis of the stated/produced discourse)</p>
<p>QUARTEL-GERAL na luta pela saúde coletiva. [CENTRAL HUB] in the fight for collective health. Medical doctor Magalhães presses a button and soon a worker appears. We verified: In July, 33,370 milk bottles were distributed, and 50 poor children are being systematically fed! [...]. The Hygiene Care center is a central hub to organize the population’s defense against debilitating diseases. Today, the Hygiene Care center plays the role of an arsenal in this fight [...]. Today we have an efficient center to form "health awareness," and an organ to create "mental hygiene" and translate it into reality... the government's thought, which is to extensively and intensely benefit the community by expanding the projection of the armament for the defense of the people's health, the primary source of national economic progress.” [...]. Doctor Magalhães has the new P.H. building and the means to work efficiently for public health. However, he does not consider that he has accomplished everything. “My intention is to transform the P.H. into a Health Center.”</p>	<ul style="list-style-type: none"> <li>* Shouldn’t it be headquarters [quartel general]? Or does the word Geral here (as opposed to general in Portuguese) refers to the generality of the health space?</li> <li>* The chief medical doctor presses a button of (magical) power and a worker appears (subordinated!). It was verified! It was witnessed by the one presenting the discourse...</li> <li>* Are 50 poor children being fed by the system?</li> <li>* Is the Hygiene Care center a central hub... An arsenal against poor people’s diseases?</li> <li>* Can health awareness be formed?</li> <li>* Only mental hygiene, not body health?</li> <li>* Work efficiently? The doctor is efficient...</li> <li>* Financial conditions enabling the Hygiene</li> </ul>



	Care center to be transformed into a health care center according to the State Decree nº 7,481/1938?
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Source: Fundação Ernesto Frederico Scheffel-FEFS [Ernesto Frederico Scheffel Foundation].

The excerpts above, from the newspapers *A Gazeta de Novo Hamburgo*<sup>2</sup> and *O 5 de Abril*<sup>3</sup>, were discursively analyzed in a maieutic perspective, leaving open spaces so that other significant chains of enunciations might be identified (Lara Júnior *et al.*, 2019).

Social events as discursive practice as exposed above, reveal that the chief medical doctor of the hygiene care center of Novo Hamburgo, Hélio Augusto de Magalhães Calvet, MD, held enunciation capabilities far broader than those of a mere medical doctor (Arouca, 2003). We observed in the analysis above that the medicine object was displaced from simple antagonism in the presence of illnesses to a broader concept of health, providing the “political medical doctor” with a more direct power of action to hamper or prevent the appearance of illnesses (Costa, 2021) in certain spaces.

Medical doctor Magalhães Calvet did not work alone. The newspaper records surveyed contained the names of other medical professionals who worked at the same time in the Hygiene Care center of Novo Hamburgo, including Boleslau Casemiro Konarzewsky<sup>4</sup>, MD; Gunther Schinker<sup>5</sup>, MD; Maximiliano Manoel Schmitz<sup>6</sup>, MD and others. During that period, medical discursive practices were imbued with the welfare-oriented character of the institutions, "marked by the distinct transformations that the 20<sup>th</sup> century underwent" (Zaluski, 2021, p. 294).

**Table 4** – Medical discourse given by doctor Calvet when the Hygiene Care center of Novo Hamburgo was reopened

Newspaper excerpt A Gazeta of Novo Hamburgo 09/16/1948 (Original spelling kept – author’s emphasis)
We are delighted to present below the speech given by the medical doctor head of the local Hygiene Care center [...].It is currently being used to provide the people of this municipality with the correct assistance they need, thus striving for the continued and ever-increasing care and attention to the major problems of <b>eugenics</b> [...].

Source: Fundação Ernesto Frederico Scheffel – FEFS [Ernesto Frederico Scheffel Foundation].

Discursive practices were in transformation. Some health enunciations (as the ones exposed above) still referred to eugenics ideology (supposedly beaten in 1945 with the end of

the World War II). The next section analyzes such discursive practices in their enunciations about which conceptual construct of childhood they referred to.

### **Discursive practices about and for infants in the Hygiene Care center of Novo Hamburgo (PHNH)**

Eugenic discursive practices and their ideology are directly linked to Hitler's rise to power in 1933. However, as pointed out by Diwan (2007), it is not correct to say that eugenic ideas belong exclusively to Nazi ideology. In fact, the German law of 1933, which promoted the forced sterilization of those considered genetically inferior, was inspired by the sterilization law of California – United States of America (USA). Eugenic discursive practices have become intertwined and interwoven with different Germanic, Anglo-Saxon, and Latin American national perspectives (Stepan, 2005). Despite the criticism Nancy Stepan received regarding her generalizations (Munareto & Diwan, 2024) concerning Latin American eugenics, it is reiterated that certain more “gentle” discursive practices were engendered in Latin America and Brazil – “[...] less concerned with biological issues than with social and environmental problems [...] marked by the influence of neo-Lamarckian French biology” (Souza, 2012, p. 2). Certain discursive practices of medical and sanitary enunciation were promoted with the intention of distinguishing “[...] a childhood that needed protection and another that should be corrected in order to create a strong nation, free from hereditary social ills” (Thiago & Fernandes, 2021, p. 229).

The sanitization of the territory and its inhabitants represented an attempt to overcome the image of a hostile climate and an ‘impure race’ that condemned Brazil to failure. Such hygienist and eugenic practices, which became institutionalized in the country, created specific forms of intervention in different contexts of society, in the pursuit of overcoming problems, which gave rise to an ideology consistent with a representation of childhood that was then being constructed: that of the ‘future of the nation’ (Costa, 2021, p. 16).

Referring again to State Decree nº 7,481 of 1938, we realized that its third part is fully dedicated to hygiene in several situations and with clear focus on child hygiene and maternity protection, with special attention to providing “hygienic milk” (Freeman, 2013) to the less fortunate (Brum, 2013). The Hygiene Care centers implemented in Rio Grande do Sul, such as that of Novo Hamburgo, had dietetic kitchens specially set up for the distribution of milk. During that same period, the state of Rio Grande do Sul organized the unique Pre-Nuptial Hygiene Service, which imposed mandatory sanitary notification on stores that sold jewelry

(wedding rings) for engaged couples (Gertz, 2005, p. 111).

The so-called child hygiene services promoted discursive practices that emphasized the care with infants and their mothers. Child hygiene started even before marriage (pre-nuptial) and followed with the assistance rendered to pregnant women and their proper education (Brum, 2013, p. 209-210). Such educational and health care was further highlighted through awards in so-called children's robustness contests:

The most robust humanoid infant specimens, as judged by the white-coated men [doctors], were not awarded a medal pinned to their left ear, as is the case today in animal exhibitions, but a savings account at the Caixa Economica Federal [Federal Savings Bank]. It was said that those contests involved a 'rigorous selection' of the offspring and that they were 'necessary for the eugenics of the race'; in reality, it was not so much the offspring that were being rewarded, but the mothers, for the healthy and vigorous children they had borne for the nation (Gertz, 2005, p. 113).

Therefore, in the mid-20th century, the significant enunciation of the "hygienic mother," who assumed responsibility for her children, reinforced by medical power (Costa, 2021, pp. 26-27) and state action, grew. The PHNH was no different. Discursive practices were implemented that rewarded "hygienic mothers" in the aforementioned childhood robustness contests:

**Figure 2:** Robustness Contest in 1951 at the PHNH



Source: Fundação Ernesto Frederico Scheffel-FEFS. [Ernesto Frederico Scheffel Foundation].

**Figure 3:** Robustness Contest in 1953 at the PHNH



Source: Fundação Ernesto Frederico Scheffel-FEFS. [Ernesto Frederico Scheffel Foundation].

**Figure 4:** Robustness Contest in 1955 at the PHNH



Source: Fundação Ernesto Frederico Scheffel-FEFS. [Ernesto Frederico Scheffel Foundation].

**Figure 4:** Robustness Contest in 1955 at the PHNH



Source: Fundação Ernesto Frederico Scheffel-FEFS. [Ernesto Frederico Scheffel Foundation].



Infant anthropometric measurement contests<sup>7</sup> became a national craze in the USA between 1908 and 1930. In other countries, including Brazil, such contests only gained greater prominence a few decades later (Diwan, 2007, p. 59). In Brazil, those contests were initially conceived by Moncorvo Filho and were systematically held by the Institute for the Protection and Assistance of Children of Rio de Janeiro – IPAI for 33 years, from July 14, 1902 onwards, being “an excellent means of stimulating natural breastfeeding” (Freire, 2011, p. 218)<sup>8</sup>.

Later, the discursive practices of childhood robustness contests were adopted by the *Legião Brasileira de Assistência – LBA*<sup>9</sup> [Brazilian Legion of Assistance], as well as by other social and health institutions, and were promoted annually, “usually in connection to the celebrations of Children’s Day” (Souza, 2022, p. 51). In Brazil, the focus of such contexts was directed to breastfeeding, and the work developed aiming to standardize and minimize breastfeeding by wet nurses and artificial feeding. They chose “[...] breastfeeding as the only means capable of generating healthy children, which in medical discourse represented the promise of a modern nation” (Costa, 2021, p. 90).

This is so much the case that childhood robustness contests held in Brazil generally established different prizes depending on the type of food the children received. The PHNH was no different. Journalistic and documentary collections available at the Ernesto Frederico Scheffel Foundation and the Novo Hamburgo Public Archive indicate that the following prize categories existed for infants competing in the robustness contests: a) with natural food (breastfeeding); b) with artificial feeding; c) with mixed feeding; d) with food from the PHNH's dietary kitchen. In the records surveyed, we observed that categories "c" and "d" were abandoned in the 1950s, and only the categories that made significant reference to breastfeeding were kept.

**Table 5** – Journalistic discourses about childhood robustness contest held by the PHNH in 1948

Excerpt from the newspaper Gazeta Novo Hamburgo 10/14/1948	<i>Discourse analysis combined with Discourse Theory (social analysis of the enunciated / produced discourse)</i>
89 COMPETITORS! – Children’s robust [sic] context: Continuing the CHILDREN'S WEEK celebrations, the largest childhood robustness competition ever held in our city took place on the	* The largest childhood robustness contest ever held...  * Smiling/proud mothers, up to the end

<p>12th of this month at the Local Health Care center, as we previously reported. Early in the morning, numerous mothers, smiling and proud of their handsome little children, lined the corridors of the Health Care center waiting for the first clash their children would wage for the ultimate title of eugenics. A simple spectacle, yet full of beauty and the most adorable little faces. Our childhood was present, the lifeblood of the Nation; the mainstay of a race: the sweetness and charm of a home, an immense reliquary of hopes!!! Life was present there! Surprised by the number of participants, this report sought further details and was informed that this year surpassed all previous years, with 89 children registered! 34 in the natural feeding category; 28 in artificial feeding; 18 with mixed feeding; and 8 with food from the Dietetic Kitchen of the Hygiene Care center. The number of young men from Novo Hamburgo was even higher, as for every 42 girls, 47 little men attended. At 9 o'clock the Examining Committee, composed of doctors... Maximiliano Schmitz, Leo Adams, Adalberto Fritz, and Guenther Schinke began the arduous task of selecting, from the four feeding categories, the most robust, the most proportionate, and the most beautiful offspring of Novo Hamburgo. Given the high number of competitors, the results of the competition and the awarding of the various prizes will take place on Saturday at 10:00 AM at the Carlos Gomes Theater</p>	<p>of the contest? (prized x not prized)</p> <ul style="list-style-type: none"> <li>* Handsome little children? Gala ball?</li> <li>* Lined as in a central hub?</li> <li>* Childhood robustness = Eugenic clash?</li> <li>* Simple or simplified spectacle?</li> <li>* Childhood = sap / nation = tree?</li> <li>* Mainstay of a race? Which race?</li> <li>* Why are the children classified according to their feeding?</li> <li>* 42 girls = 47 little men – What is the importance of mentioning such correlation?</li> <li>* The medical team listed is in even number. How would possible ties be decided to prize winner infants?</li> <li>* Robustness = well-proportionated = beautiful?</li> <li>* Health award held in a theatrical/cultural environment. Does health transcend sanitary spaces or relegates itself to the subordination of the educational sphere?</li> </ul>
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Source: Fundação Ernesto Frederico Scheffel – FEFS. [Ernesto Frederico Scheffel Foundation].

**Table 6** – Journalistic discourses about the childhood robustness contest held at the PHNH in 1948

<p>Excerpt from the newspaper  Gazeta Novo Hamburgo  10/21/1948</p>	<p><i>Discourse Analysis combined with Discourse Theory  (social analysis of the enunciated discourse)</i></p>
<p>Robustness Contest</p> <p>Closing the Children's Week, on the morning of the 16th at the Carlos Gomes Theater, as previously announced, a solemn ceremony was held to award prizes to the candidates who qualified in the Childhood Robustness contest, promoted by the local Hygiene Care center, for which eighty-nine children registered. At precisely ten o'clock, the Chief Physician of the Hygiene Care center, Dr. Magalhães Calvet, began the session by discussing the purposes of the contest and then passed the</p>	<ul style="list-style-type: none"> <li>* Does the Childhood robustness contest close the Children's Week given to its importance?</li> <li>* What are the purposes of the contest? Why aren't such purposes presented in the newspaper article?</li> <li>* Is the representative of this "paper" (newspaper) the same journalist writing the article? How can one separate the character from the author?</li> </ul>

<p>presidency to Mr. Carlos Armando Koch, the Mayor. Also present at the table were doctors Maximiliano Schmitz and Guenther Schinke, members of the Examining Committee, Mr. Guilherme C. Ludwig, President of the Brazilian Legion of Assistance, Dr. Parahim Lustosa, Secretary of the City Hall, and the representative of this paper. The Mayor, after a brief greeting, gave the floor to Dr. Magalhães Calvet (...). In addition to its intrinsic merits, the congress will be an unparalleled factor in spreading awareness of the unique position that Novo Hamburgo occupies among the municipalities of Rio Grande do Sul, as its economic importance and the activities of its people will be known, both through the ether and in person, throughout the state.</p>	<ul style="list-style-type: none"> <li>* Why was LBA present? Was this a welfare event? What was LBA effective involvement in the event?</li> <li>* Why does Novo Hamburgo occupy an unusual position? Is it not an industrial city?</li> <li>* Its children's activities? Why should the ether of Novo Hamburgo's children be felt throughout the state of Rio Grande do Sul? Is this anesthetic ether? Should the ether of the children of the city of Novo Hamburgo cause anesthetic numbness? Why?</li> </ul>
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Source: Fundação Ernesto Frederico Scheffel – FEFS. [Ernesto Frederico Scheffel Foundation].

**Figure 6:** PHNH Childhood Robustness Award held at the municipal theater (1950s)



Source: Public archive of Novo Hamburgo.

The childhood robustness contests organized by the PHNH, as well as those held by other social and health institutions in the mid-20th century, were imbued with a discursive practice that ultimately aimed at “[...] imposing conceptions of child health held by the elites, incentivizing poor mothers to conform to the hygiene conditions which they would hardly be able to put into practice” (Wadsworth, 1999). Such contests reaffirmed elitist discursive practices regarding hygiene and health towards the most impoverished population, justifying such pronouncements based on the positive results that such actions could bring to the Brazilian nation. The discursive practices that underpinned those pronouncements sometimes aimed to defend society from the child, and other times aimed to defend the child from an "impoverished" society. The discourse on childhood held an antagonistic (ambivalent) discursive meaning: sometimes it was a problem, sometimes it was a solution.



According to the discourse of the time, “[...] ‘vagrant’ children began to make the streets their point of reference. Medical discourse referred to city streets as ‘the great school of evil,’ a privileged public space for the production of future delinquents and irredeemable criminals” (Costa, 2021, p. 116). The 1950s also represent a “[...] milestone in terms of institutional development in the fields of medicine and public health in Brazil, [...] with the creation, in 1953, of the Ministry of Health – a demand cherished by doctors since the beginning of that century” (Sanglard & Costa, 2008, p. 19).

From the broad classification of abandoned minors, defined as both absence of parents and the family’s inability to provide proper life conditions to their offspring, a series of sub-categories was created throughout the 20th century by official care agencies. That was a period of strong presence of the state in the planning and implementation of policies to assist minors (Rizzini, 2004, p. 29).

Studies addressing the social meaning of childhood in Brazil in the mid-20th century, reveal that institutional and state discursive practices aimed to mold children to a project that would lead Brazil to the ideal of nationhood; concern for childhood as a social problem was linked to concern for the country's future (Costa, 2021, p. 83), presenting salvationist pronouncements regarding young infants. This logic was no different in the PHNH. Assistance-oriented discursive practices with clear salvationist pronouncements were similarly implemented by individuals within and about that healthcare space in their assistance actions:

**Table 7:** Journalistic discourses about welfare activities carried out at the PHNH in 1958

Excerpt from the newspaper Gazeta de Novo Hamburgo 05/17/1958	<i>Discourse Analysis combined with Discourse Theory (social analysis of the enunciated discourse)</i>
<p>DISTRIBUTION OF FABRICS AND WARM CLOTHING TO THE POOR OF N. HAMBURGO</p> <p>Photos of the poor people of Novo Hamburgo who crowded together near the Hygiene Care center in the Industrial City on Saturday afternoon, to whom warm clothes and fabrics were distributed. In the foreground, the two gurus [boys] seem somewhat doubtful of the "deal," and remain in the street, waiting for everything to go as promised [...].</p> <p>Novo Hamburgo [...] The final chapter of the "Clothing Drive", a movement aimed at raising funds to purchase warm clothes for poor families in the city. In a selection made by the Brazilian Legion of Assistance, the reporters of the "Folha da</p>	<ul style="list-style-type: none"> <li>* Wha time is early in the morning?</li> <li>* Why do “the poor” have to go early?</li> <li>* Staying in line despite the bad weather...</li> <li>* Helpless = humility of their clothing???</li> <li>* Helpless of the industrial city?</li> <li>* Why is it not worth investigating the “helpless”? Because one might discover the “truth” of such helplessness?</li> <li>* They didn’t succeed... What does success mean?</li> </ul>

<p>Tarde” recorded last Saturday the gathering of hundreds of poor children and ladies in front of the Hygiene Care center. Very early, long before the appointed time, the needy families began to gather, enduring even the bad weather of that day, showing with the humility of their clothing that they were, indeed, the helpless of the Industrial City. It's not worth investigating why they didn't succeed, and why they are not as fortunate as others with even a minimum of comfort. They are poor and humble, and thanks be given to the ladies who did something to improve everyone's lives. It was little, we feel, because this situation cannot be left without the attention of public authorities and social assistance organizations. We feel they lack guidance, drive, and the conditions to succeed here in the industrial environment, always ready to provide work to those who know how to work. But it is not enough to just want to work; these poor people are not idle, nor do they take pleasure in publicly receiving help from their fellow men (the poor also have pride and would be happy if they did not need to extend their hand to public charity). A rehabilitation and reintegration service, a social assistance plan that integrates those marginalized from comfort and happiness into their social environment, would, in our view, be far more humane, useful, and dignified than simply placing a modest piece of fabric and a cheap blanket in their outstretched hands. But even so, the 40,000 cruzeiros worth of clothing that the ladies distributed will warm many thin, poor children's bodies, and cover the unprotected beds of many couples who are not to blame for not having been discovered by happiness. Clothing, yes, was all they could get for the poor people of Novo Hamburgo at the time, but they have the right to earn themselves their place in society with dignity and pride, provided that society teaches and educates them for a useful, paid job.</p>	<ul style="list-style-type: none"> <li>* They didn't succeed... Did they want to succeed?</li> <li>* Is succeed to be fortunate / to enjoy comfort?</li> <li>* Giving thanks for being poor and humble?</li> <li>* Being thankful that there are poor people so that the ladies can do something?</li> <li>* It was little... Does this mean that many did not receive any clothing?</li> <li>* Can all these people be without attention?</li> <li>* Can't they be without attention, because it is their right?</li> <li>* What kind of guidance is missing? What conditions do they lack?</li> <li>* Which impulse is needed to succeed in industrial activity?</li> <li>* Is it enough to work? What is needed to work?</li> <li>* It is not enough to want to work...</li> <li>* This people... Which people? ... What are they?</li> <li>* A rehabilitation and reintegration service...</li> <li>* Which service? A non-systematized/unstructured state assistance rather than that of LBA?</li> <li>* Integration of those marginalized from comfort? Then do those marginalized have comfort / success?</li> <li>* Are poor people marginal people? Are they integrated into the environment?</li> <li>* Assistance quantified as 40 thousand cruzeiros? thin, poor children's bodies...</li> <li>* Covering the unprotected beds of many couples???</li> <li>* How can a couple be discovered by happiness?</li> <li>* the right to earn themselves their place in...What can be earned only by themselves?</li> <li>* What does society teach and educate them... Is it a right?</li> </ul>
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*Source:* Public archive of Novo Hamburgo.

The discursive analysis exposed above in a maieutic perspective is an example of the type of discursive enunciation promoted in relation to health, welfare and social actions promoted by the Hygiene Care center of Novo Hamburgo in the mid-20<sup>th</sup> century (1939-1960). As previously pointed out, the maieutic perspective of the discourse analysis adopted is merely illustrative, enabling the readers of this article to establish other possible and significant interpretive chains regarding the discursive practices that were promoted by subjects in that health space.

From 1961 onwards, the PHNH childhood robustness contests started to be called only children's health contests<sup>10</sup> in discursive practices about the actions developed in the social-health space. The change of terms indicates that the hygienist ideology (eugenics) of a much-touted "childhood robustness" no longer found the discursive support it previously had, even due to the limited space allocated to mentioning the aforementioned children's event in the journalistic media studied.

Despite the perception that welfare and social discursive practices of the PHNH and other social-health spaces abandoned certain significant terms such as "childhood robustness", this does not mean that certain eugenic discursive practices were not still in use even after the 1960s. Although eugenic discursive practices were discredited after World War II, there is practical evidence that such ideology continued in force in some discursive recesses, such as teaching manuals and subjects in teacher education courses (Rocha, 2010).

Eugenic discursive practices were also promoted by the Brazilian military dictatorship. On November 26, 1965, The *Sociedade Civil Bem-Estar Familiar no Brasil* (BEMFAM) [Brazilian Civil Family Welfare Society] was founded. It was an institution responsible for promoting birth control policies by means of contraceptive methods among the popular classes (Góes, 2023). The use of percentiles and growth curves in children's health records, such as those adopted by the Ministry of Health (Brazil, 2011), are descendants, albeit indirect and improved versions, of the anthropometric measurements developed by Francis Galton. In short, although eugenic discursive practices have been "reinterpreted" to sublimate certain pronouncements, their foundations continued to structure discourses in Brazil even after 1960.

## Final Considerations

He was determined to conquer Santa Fe, to subdue it to his will, to mold it according to his best dreams. He would not let himself be dominated by it. He would never give in to discouragement and routine. He would never be a municipal slanderer like Cuca Lopes, an indolent useless person like Chiru Mena, and much less a lackey like Amintas. He would not lose sight of Paris, and he would never forget that the world did not end at the limits of the municipality of Santa Fe.  
Character Dr. Rodrigo Cambará in the fictional work  
O Retrato - Vol. 1 (Veríssimo, 2004, p. 145).

Based on the discursive analysis of the documentary journalistic and photographic collection belonging to the Hygiene Care center of Novo Hamburgo – PHNH between 1939 and 1960, we observed that the health space analyzed was a microcosm of the current biopolitics enunciations of the mid-20<sup>th</sup> century in Brazil. The analysis of discursive practices revealed that that health space was not limited to the treatment of illnesses, but it rather worked as a mechanism of social standardization imbued with a hygienist ideology that sought to shape the “future of the nation” through direct intervention in childhood.

The discursive practices enunciated by medical professionals exercised a masterful discursive authority that extended beyond the clinic, operating in a topological circumscription where medicine merged with political and social management. The PHNH was presented as a "headquarters/central hub" in the fight for collective health, where health surveillance and moral education were inseparable. Childhood was enunciated as the "living sap of the nation," perceived as an object that needed to be rigorously selected and protected to guarantee the strength of the "Brazilian race" and national economic progress. Discursive practices such as "childhood robustness" contests materialized this logic, using anthropometry and surveillance of breastfeeding to implement a "rigorous selection" of eugenic inspiration.

The social assistance and educational actions of the PHNH aimed to establish maternal responsibility through the figure of the "hygienic mother," subjected to medical power. Such practices frequently imposed elite conceptions of health on impoverished populations, who rarely possessed the material means to fully sustain those hygiene standards.

Healthcare provided in a legitimately paternalistic manner at the Novo Hamburgo Hygiene Care center in the mid-20<sup>th</sup> century oscillated between the right to health and state charity. The discursive practice regarding childhood was ambivalent, displaying a clear and

significant antagonism: the infant was sometimes seen as a social problem, and at other times as the salvational solution for the future of the Brazilian nation. In short, the discursive practices at the Novo Hamburgo Hygiene Care center demonstrate how the field of Brazilian public health in the mid-20<sup>th</sup> century was used to correct and mold infant subjects, seeking to align local childhood with the interests of a modern and productive nation, under the aegis of a persistent hygienist approach that sought to overcome stigmas of "impure race" and alleged social backwardness.

## Notas

1 He graduated in the School of Medicine and Surgery of the Instituto hahnemanniano of Rio de Janeiro, in 1935. Specialist in tuberculosis and surgery, he was head-doctor and worked in the clinic of the Hygiene Care center of Caí (MUHM,2026a) up to the mid-1940s. He was head-doctor at the P.H. of Novo Hamburgo (1943-1951). The P.H. was located on the corner of Travessa Seival, the street was named Rua Magalhães Calvet after the deceased doctor, pursuant to Municipal Decree n<sup>o</sup> 47 of 1951 (Novo Hamburgo, 1951).

2 The newspaper *O 5 de Abril* was the first newspaper in the city of Novo Hamburgo. Its first editor was Leopoldo Petry, an important politician of the city. The newspaper was launched in May 1927, a month after the emancipation of Novo Hamburgo, and circulated up to February 1962 (Magalhães, 2017, p.24).

3 The weekly paper *A Gazeta de Novo Hamburgo* appeared in January 1934, as a public sphere paper, with the purpose of report municipal expenses and laws. From May 1934 onwards, it became the mouthpiece for the Liberal Republican Party until October 17, 1934, when it ceased publication. In 1947, it was reactivated as *Gazeta de Novo Hamburgo*, without any links with political parties and remained in circulation until October 23, 1952 (Magalhães, 2017, p. 25)

4 "He was born in São Luiz Gonzaga (RS) 1912-1981. He graduated in Medicine at the School of Medicine of Porto Alegre, in 1942. He also graduated in Law, Dentistry and Economics in the same institution. However, he only dedicated professionally to medicine. He worked as a general practitioner and surgeon and specialized in Sanitary and Labor Medicine. He was head-doctor at the Health Care center of Novo Hamburgo (RS)" (MUHM, 2026b).

5 "Born in Germany, on February 24, 1892 and died in 1971, Novo Hamburgo (RS). Son of Karl Wilhelm Schinke (medical doctor) [...] and Helene Klohe. He was a student in the Medical School when, at the age of 22, he was called up to serve in the German army during World War I in 1914 [...]. In 1918, with the end of the conflict, he resumed his studies. He graduated from the University of Kiel in Germany in 1920. He emigrated to Novo Hamburgo (RS), starting in 1921, at the request of his father, who was a doctor and already practicing in the city" (MUHM, 2026c).

6 "He graduated at the School of Medicine of Porto Alegre, in 1913. He worked in Novo Hamburgo (RS) and Montenegro (RS)" (MUHM 2026d).

7 Francis Galton (1822-1911) developed his ideas on eugenics in the book *Hereditary Genius* (1969), still considered the founding text of eugenics. In that book, Galton sought to prove, using a statistical and genealogical method, that human capacity was a function of heredity and not of education (Schwarcz, 1993). Anthropometry proved to be the ideal means, particularly height, with its strong hereditary component and its links to social class. Galton's interest in obtaining data led him to create an Anthropometric Laboratory at the 1884 International Health Exhibition in London (Cole, 2014, p. 3)

8 “Medical doctor Arthur Moncorvo Filho (1871-1944) created ideological and institutional models which can be considered representative of the medical doctors’ perceptions of children and the right way to protect them at that time” (Freire, 2011, p. 202-203).

9 Extinct Federal Institution, founded by the First Lady Darcy Vargas, responsible for the creation of federal social assistance public policies between 1942 and 1995 (Souza, 2022).

10 Excerpt from the newspaper *O 5 de Abril*, October 6, 1961: “Health Care center – The local Health Center invites the mothers of children enrolled in the Health contest to bring their little ones on the 9th and 10th of this month for the final weighing. It also announces that a medical examination will be held on the 11th in the afternoon, at 1 pm.”

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