

THE ROMANIAN GOVERNMENT AND DEMOGRAPHIC POLICIES

Ceașescu's regime and contemporary perspectives

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Foreword

The day when I was born

I was born on the 6th of May 1980. I was not the child of a planned pregnancy, but my family welcomed me lovingly despite what living in Transylvania was like in the 80s. That, however, is not the point of this foreword. Without undermining in any manner maternity, my mother remembers the day when I was born for much more than the usual reasons. The day when I was born, while comfortably occupying a bed in a common ward at the Maternity Clinic in Cluj Napoca, surrounded by new mothers, a woman was interrogated to death while suffering an indisputable severe haemorrhage, so severe there was no doubt in the minds of the women there: she had undergone a clandestine abortion. The *Securitate* Officers were yelling, they wanted the name of the person who had carried out the procedure. Now whether it was murder or manslaughter, whether the doctors tried to intervene but were brusquely sent away or rather at that point we were all that broken inside that we were no longer capable of even trying, I do not know. What I do know is that I was not able to find in the official records of the hospital a death register or certification reconcilable with this episode. This death is the reason why I chose this topic of research.

Acknowledgements

I would like to thank Annunziata Nobile for her unlimited patience and support, as well as for all the guidance and explanations that have made addressing this topic possible.

Preface: Politics, Reproduction, and Demography

The theme of pronatalist policies of contemporary states is still quite rife with controversy, being highly debated in Romanian and Western historiographies. Scientific research devoted to the topic, both in Romania and in the West, is generous. A large number of studies and volumes by historians, sociologists, and demographers were published after 1989, the majority of which focused on the negative demographical, medical and social outcomes of the post-1966 pronatalist policy. They detail the high level of maternal and infant mortality, the physical and mental trauma of women, the abandonment and institutionalisation of children, the appearance of congenital diseases among them, and the appearance and proliferation of AIDS among institutionalised children (Hord et al., 1991; Kligman, 1992; Șerbănescu et al., 1995).

Raw data on the pronatalist policy, studies on social memory, oral history, gender studies are supplied by Anton (2009), Baban (1999; 2000), and Pop-Eleches (2006). Gail Kligman (1998) offers the first complex synthetic work dedicated to the demographic policies of the Ceaușescu regime. Kligman's work constitutes a documentary analysis of the pronatalist policies of the regime from a number of perspectives: legislation and its application, communist propaganda, the manner in which the entire society was constrained to submit to the new rules, and

the social problems which beset Romania at the beginnings of the 1990s as a direct consequence of those measures. The work has a few caveats, the most important of which being related to the scarcity of archival documentation, which is easily explainable due to restricted access in the 1990s. In recent years, the debate in the field of historiography regarding the population policy of the Ceaușescu regime has become more nuanced due to the opening of the archives of some communist state institutions. The discussion has moved from consequences to causes, with a focus on understanding the implementation of pronatalist legislation.

Researchers such as Pălășan (2009), and Soare (2013) have attempted to demonstrate the exceptional character of the post-1966 Romanian population policy. The current study brings a new perspective on this problem, on the basis of sources obtained from the archive of the Ministry of Health and the Romanian Communist Party, documents that greatly clarify the motivation of the political leadership to opt for a restrictive policy, as well as the arguments against the adoption of the technocratic initiatives.

Building Socialism in Ceaușescu's Romania. Reproduction and Demographic Growth as Tool

In order to address the theme of this work, namely Demographic Policy in Ceaușescu's Romania, it is indispensable to contextualise (a) demographic and reproduction policies as such in the universe of real socialism as well as (b) these specific actions of the Romanian Communist Party and its leader(s) taking into account the *status quo* during the aftermath of the World War II, which will then, in later chapters, allow us to briefly introduce the plausible connection between this specific policy and certain contemporary phenomena, Romanian emigration for example.

1.1. Ideological Aspects. Socialism. Totalitarianism

Those of us who survived the less than glorious days of life behind the Iron Curtain often encounter a certain sense of difficulty in addressing socialism, communism or even marxism together with our 'western peers'. These obstacles are rarely dogmatic or intellectual, but rather placed at that subtle level of *Weltanschauung* that happens to remain the starting point of any given observation, which will forever distinguish those generations born and raised in the socialist society of the 20th

century from the rest of humanity. As time passes by and those specific experiences are further contextualised by periodically rethinking ourselves in the ever-changing world of the 21st century, certain elements remain more resilient. The point of rupture in dialogue caused by having directly and personally experienced the Eastern Block is that sense of western superiority we perceive when, again, our ‘western peers’ discuss these topics, almost as to say that the socialist ‘experiment’ failed in Central and Eastern Europe because our respective Lenins, Stalins or Ceaușescus, to name three, lacked that moral composure, ethical spirit and technical ability to make it work, whereas Eurocommunism¹ (Revel, 1978) or our respective Gramscis, Berlinguers or Marchaises would certainly have offered everything necessary and could have made it work. The same goes for literature on Bureaucratic collectivism² (Finger, 1997) and such.

In 2017 the Nobel Prize for Economics was awarded to professor Richard Thaler, for his contribution to behavioural economics, focusing on the effects of psychological, cognitive, emotional, cultural and social factors on the economic decisions of individuals and institutions and how those

1 The origin of the term 'Eurocommunism' was subject to great debate in the mid 1970s, being attributed to American-Polish diplomat and political scientist Zbigniew Brzezinski, to Italian journalist Arrigo Levi or to Yugoslav journalist France Barbieri.

2 Bureaucratic collectivism is a theory of class society. It is used by a part of the Trotskyist movement to describe the nature of the Soviet Union under Joseph Stalin, and other similar states in Central and Eastern Europe and elsewhere. They have argued that said economies were not socialist due to the lack of equal power-relations in the workplace, the presence of a new ‘elite’, and because of the commodity production that took place in these economies.

decisions vary from those implied by classical theory (Lin, 2011). Experts hailed this Nobel Prize, beyond the specific contribution to the field of study and humanity as a whole, for finally having managed to draw the attention towards the human factor at the core of any human endeavour³ (Thaler, 2016), which reminds us of the more or less humorous catch phrase circulated online and attributed to Canadian author Mark Steyn that *history is demography punctuated by wild chase scenes*.

That centrality of the *homo sapiens sapiens* was not questioned in socialist societies, albeit interpreted uniquely in its collective instance, the people as one individual. Here we mention Claude Lefort (Lefort, 1981) who was one of the political theorists who put forward the relevance of a notion of totalitarianism (relevant to Stalinism as well as fascism), and considered totalitarianism as different in its essence from the big categories used in the western world since ancient Greece, like the notions of dictatorship or tyranny. Lefort applied it to the regimes of Eastern Europe in the second half of the century, that is, to an era when terror, a central element of totalitarianism for the other authors, had lost its most extreme dimensions. Lefort characterizes the totalitarian system

³ Richard Thaler, 2016 “I believe that for the last 50 or 60 years, economists have devoted themselves to studying fictional creatures.... They might as well be studying unicorns.” U.S. National Public Radio Interview, <https://www.npr.org/2016/01/12/462386252/richard-thaler-why-most-economists-might-as-well-be-studying-unicorns>,

by a double 'fence': Totalitarianism abolishes the separation between state and society: the political power permeates society, and all pre-existing human relations tend to be replaced with a one-dimensional hierarchy between those who order and those who obey. Every organization, association or profession is thus subordinated to the planning of the state. The differences of opinion, one of the values of democracy, is abolished so that the entire social body is directed towards the same goal; even personal tastes become politicized and must be standardized. The aim of totalitarianism is to create a united and a closed society, in which the components are not individuals and which is defined completely by the same goals, the same opinions and the same practices. Stalinism thus knew the "identification of the people to the proletariat, of the proletariat to the party, of the party to the management, of the management to the 'Égocrate'" (Lefort, 1981, p. 175).

Lefort demonstrates the central difference between totalitarianism and dictatorship: a dictatorship can admit competing transcendental principles, like religion; the ideology of the totalitarian party is religion. A dictatorship does not aim for the destruction and absorption of society, and a dictatorial power is a power of the state against society, that presupposes the distinction of the two; the plan of a totalitarian party is to merge state with society in a closed, united and uniform system,

subordinated under the fulfilment of a plan – ‘socialism’ in the case of the USSR and the Eastern Block. Lefort calls this system ‘people-one’:
"The process of identification of power and society, the process of homogenisation of the social space, the process of the closing up of society and the authority to enchain it in order to constitute the totalitarian system" (Lefort, 1981, p. 175).

The construction of the new socialist person and of socialist society depended on the careful monitoring and disciplining of the population. Surveillance and control were among the institutionalized mechanisms used to facilitate public compliance with the regime's projects. Demographic policy provided the ideological framework through which vital population growth was to be monitored and guaranteed. The population, simultaneously the subject and object of social experimentation, was to be moulded with or without its consent into the socialist idea (Lefort, 1981).

1.2. Historical and General Context. From World War II to Ceaușescu's Election

In brief, in the aftermath of World War II, in March 1948, the Romanian government held elections that for the last time included the facade of opposition-party participation; the People's Democratic Front⁴ took 405

⁴ *The People's Democratic Front (Romanian: Frontul Democrației Populare, FDP) was a political alliance in Romania during the communist era, dominated by the Romanian Communist Party (PCR).*

of the 414 seats. On April 13, 1948, the new National Assembly proclaimed the creation of the Romanian People's Republic and adopted a Stalinist constitution (Fischer-Galati, 1967). The assembly ostensibly became the supreme organ of state authority; in reality, however, the Communist Party's Politburo and the state Council of Ministers held the reins of power. The constitution also listed civil and political rights and recognized private property, but the authorities soon renounced the separation of the judiciary and executive and established the Department of State Security (*Departamentul Securitatii Statului*), commonly known as the *Securitate*, Romania's secret police. In 1949 acts considered dangerous to society became punishable even if the acts were not specifically defined by law as crimes, and economic crimes became punishable by death. The central government also created and staffed local 'people's councils' to further tighten its hold on the country. In June 1948, the national assembly enacted legislation to complete the nationalization of the country's banks and most of its industrial, mining, transportation, and insurance companies. Within three years the state controlled 90 %of Romania's industry. The nationalization law provided reimbursement for business owners, but repayments never materialized (Bachman & Keefe, 1989).

In July 1948, the government created a crucial state planning commission to control the economy (which will be taken up again in this chapter), and in January 1949 Romania joined the Council for Mutual Economic Assistance (Comecon), effectively aligning Romania to the Soviet satellites system (Bideleux & Jeffries, 2007). Romania launched an ambitious program of forced industrial development at the expense of agriculture and consumer-goods production. In the First Five-Year Plan (1951-55), planners earmarked 57% of all investment for industry, allotted 87% of industrial investment to heavy industry, and promised the workers an 80% improvement in their standard of living by 1955. The government began construction of the Danube-Black Sea Canal, a project of monumental proportions and questionable utility, which eventually became the destination of many forced labour political detainees who managed to survive the great purges of the 50s (Bachman & Keefe, 1989).

In 1949 the government initiated forced agricultural collectivization to feed the growing urban population and generate capital. The state appropriated land, prodded peasants to join collective farms, and equipped machine stations to do mechanized work for the collective farms. Government forces besieged rural areas and arrested about 80,000 peasants for being private farmers or siding with private farmers, who

were reviled as ‘class enemies;’ about 30,000 people eventually faced public trial. Forced collectivization brought Romania food shortages and reduced exports, and by late 1951 the government realized it lacked the tractors, equipment, and trained personnel for successful rapid collectivization. The forced collectivization campaign produced only about 17% state ownership of Romania's land. The authorities shifted to a policy of slow collectivization and cooperativization, allowing peasants to retain their land but requiring delivery to the state of a portion of their output. Large compulsory-delivery quotas drove many peasants from the land to higher-paying jobs in industry. Industrialization proceeded quickly and soon began reshaping the country's social fabric (Bachman & Keefe, 1989).

Although Romania remained a predominantly agricultural country, the percentage of industrial workers increased as peasants left the fields and villages for factory jobs and overcrowded city apartments. Trade school and university graduates also flocked to the cities (Bideleux & Jeffries, 2007).

By 1953 government decrees had made most professionals state employees, eliminated private commerce, and bankrupted the commercial bourgeoisie. In 1948 the regime determined to reform the social structure and inculcate ‘socialist’ values. The authorities tackled

illiteracy, but they also severed links with Western culture, jailed teachers and intellectuals. Party leaders ordered writers and artists to embrace socialist realism and commanded teachers to train children for communal life. The state transformed the Romanian Orthodox Church into a government-controlled organization, supervised Roman Catholic schools, jailed Greek Catholic clergy, merged the Uniate and Orthodox churches, and seized Uniate church property (Bachman & Keefe, 1989).

1.3. Economic Aspects. Centrally Planned Command Economies

Socialist states, driven by centrally planned command economies, actively pursued their political goals through massive social engineering projects. Lacking the capital of market economies, as well as the centrality of that concept, socialist economies in the 20th century often depended on the availability of labour (Schweickart et al., 1998) and on the control of population both as service, commodities and goods provider as well as beneficiary, to avoid the usage of the almost blasphemous word 'consumer'. Therefore, the control of population was the point of critical strategic thinking as well as one of the main levers when securing long-term national interests (Soare, 2013). At that point it became obvious that demographic growth, and not merely its planning, was the only available instrument, particularly in the demographic aftermath of the losses of the First and Second World Wars with all its

more or less presumed relevance in connection to economy, militarisation, security and nationalism in Romania.

As summarised by Ronald D. Bachman and Eugene K. Keefe in their book *Romania: a country study* published by the Federal Research Division of the United States Library of Congress the prerequisite for rapid economic growth after World War II was the wholesale transfer of labour from agriculture, which had employed 80% of the population before the war, to other sectors--primarily to heavy industry (Bachman et al., 1989). The industrial work force grew by an average of 5% per year during the 1950-77 period, as Romania was accomplishing its most dramatic economic development, and industrial output was rising by an average 12.9 % annually. As late as 1960, 65% of the labour force was still engaged in agriculture, with only some 15% working in industry and 20 % in other sectors. But in the course of the following two decades, the labour force would be transformed, as peasants left the land in the wake of agricultural collectivization to take better-paid jobs in the cities. Between 1971 and 1978, the outflow of rural labour accelerated to 11% per year, more than twice the rate of the 1950s and 1960s. By 1980 agriculture employed no more than 2% of the labour force, while industry occupied 36% and other sectors the remaining 35%. By this time the rural exodus had slowed, and although half the population continued

to reside in rural areas, the reserves of able-bodied young men in agriculture had been reduced drastically. As a result, targets for expansion of the industrial labour force were unattainable, and agriculture was becoming the domain of the elderly and women. The rapid realignment of the work force created difficulties for agriculture, particularly during planting and harvest seasons. To compensate for the loss of farm workers, the government followed the Stalinist practice of mobilizing soldiers, young people, and even factory workers to 'donate' their labour. Throughout the communist era, these groups have supplied unpaid labour that made possible the massive civil engineering projects launched after World War II. In 1988 more than 720,000 high school and college students and 30,000 teachers were detailed to agricultural work sites, and another 50,000 students and 2,000 teachers 'donated' labour at construction projects. Throughout the 1980s, the government appeared to be growing more reliant on compulsory labour, issuing a decree in August 1985 requiring all citizens to make labour and financial contributions to public works projects. At the same time, the military's role in the economy was also becoming more prominent. Soldiers worked on such important national projects as the Danube-Black Sea Canal, the Iron Gate hydroelectric project, and the Bucharest subway, as well as on more mundane details such as repairing streets and bringing in the harvest. After 1985, when Ceaușescu militarized the electric power

industry, army officers even became involved in the management of the civilian economy (Bachman & Keefe, 1989).

1.4. The Context of Demographic Policy in Romania

The Political Executive Committee of the Central Committee of the Romanian Communist Party appeals to the entire population, to urban and village workers, to understand that to ensure normal demographic growth it is a great honour and patriotic obligation for every family and for all of our people [...] to have enduring families with many children, raised with love, and by so doing, to guarantee the vitality, youth, and vigour of the entire nation. Today, more than ever, we have the utmost obligation to assure our homeland of new generations that will contribute to the flourishing of our socialist nation, to the triumph of socialism and communism in Romania (Ceașescu, 1973).⁵

Romania's Carpathian-dominated relief, geographic position at the crossroads of major continental migration routes, and the turbulent history associated with that position adversely affected population development. The region had 8.9 million inhabitants in 1869, 11.1 million in 1900, 14.3 million in 1930, 15.8 million in 1948, and 23.2 million in 1989 (Baban, 1999).

Annual birth rates remained as high as 40 per 1,000 well into the 1920s, whereas mortality rates, although declining, were still well above 20 per 1,000. Children under five accounted for half of all deaths. During the interwar years, death rates remained high, primarily because of infant

⁵ Translated from Minutes of the plenary session of the Central Committee of the Romanian Communist Party June 18-19 1973, Bucharest: Editura politica.

mortality rates of 18-20 % (World Bank, 2019).

In fact, throughout the 1930s, Romania had the highest birth, death, and infant mortality rates in Europe. The annual natural population increase fell from 14.8 per 1,000 in 1930 to 10.1 per 1,000 in 1939. These figures conceal considerable regional variation. Birth rates in the Old Kingdom regions of Walachia and Moldavia were much higher than in the former Hungarian territories, which had already begun to decline in the nineteenth century (Baban, 1999).

Demographic development in the immediate post-war period continued to show a drop in the annual growth rates. Population losses occurred through excessive mortality, reduced natality, and migration, not only because of World War II but also because of subsequent Soviet occupation. Extensive pillage by the Red Army and exorbitant demands for restitution by the Soviets squeezed the peasants, resulting in harvest failures in 1945 and 1946 and severe famine in 1947. In that year, 349,300 deaths were reported, compared with 248,200 the following year. A birth rate of 23.4 per 1,000 and a death rate of 22 per 1,000 resulted in a very low natural increase of 1.4 per 1,000, the lowest ever recorded in Romania's tumultuous history. In the 1950s, recovery from the war brought the birth rate up to 25.6 per 1,000 and the death rate down sharply to 9.9 per 1,000. In 1955 the annual natural rate of increase was

15.9 per 1,000. Again, there were significant regional variations, with Moldavia, Dobruja, and parts of Transylvania showing a higher increase, whereas the Crisana and Banat regions showed very little growth and, in some cases, even declined (World Bank, 2019).

From a peak of 15.9 per 1,000 in 1955, the rate of natural increase declined rapidly to 6.1 per 1,000 in 1966. Several factors combined to produce this slump, not least of all a law introduced in 1957 that provided abortion on demand. Access to free abortion, coupled with the scarcity of contraceptives and the fact that society did not generally condemn it, made abortion the primary means of fertility control. After the 1957 law was enacted, abortions soon outnumbered live births by a wide margin, with the ratio of abortions to live births reaching four to one by 1965. It was not unusual for a woman to terminate as many as twenty or more pregnancies by abortion (Pop-Eleches, 2006).

It was not the easy access to abortion, however, but the reasons behind the decision not to bear children that contributed most to falling birth rates. During this period, a virtual transformation of society was under way. Education levels rose dramatically, and urbanization and industrialization proceeded at a breakneck pace. As they had in other countries, these developments brought lower fertility rates. Women were staying in school longer and putting off having children. Urban areas,

where the decline in birth rates was most pronounced, provided cramped and overcrowded housing conditions that were not conducive to the large families of the past. Moreover, communist ideology emphasized the equal participation of women in socialist production as the only road to full equality. Industrialization brought more and more women into the work force, not only for ideological reasons, but also to ease rising labour shortages. Fewer and fewer women made the decision to take on the double burden of a full work week and raising children (Baban, 1999).

In the case of Romania, the incipit of the demographic growth policy in analysis can conventionally be identified long before Nicolae Ceaușescu, with the constitution of the State Commission for Planning in July 1948, whose goal was to define the new nationalised economy⁶. From a ‘*a posteriori*’ perspective, this evolution was fairly easy to predict when analysing the overall situation.

In this context, the above-mentioned State Commission for Planning in July 1948⁷ was given the task to define a ‘plan’ which then evolved into being a key element in the political discourse of the post-war Romania, namely the instrument to translate socialism into practice. On this basis,

⁶ The "nationalization" of industry on June 11, 1948, represented the "real dialectical moment, the 'threshold' at which the backbone of the old society was broken" (Ionescu, 1964, p. 163). This act was followed by a series of decisions of equal importance. Collectivization, another threshold strategy, was unveiled in March 1949 (Jowitt, 1978 and Kideckel, 1993).

⁷ In Romanian, *Comitetul de stat al planificării* (1948-1963)

the plan legitimated the scientific nature and veracity of the new 'rationalised' system.

Planning addressed all aspects of social life, not just the economy. In August 1948, a law on the reorganization of education was adopted. The education system was reformed in order to eradicate illiteracy and educate a skilled workforce at the aim of meeting the needs of a planned rapid development. Women became the beneficiaries of mass educational efforts. In line with the gender equality ideology and the demands of an intensive working regime, women were incorporated into the socialist workforce. In retrospect, it is no coincidence that a state that declared the dictatorship of the proletariat (Marx & Engels, 1848) had to create a proletariat to dictate to.

The motivation and the justification for the monumental task of planning was given by the fact that in the interwar years, capitalist expansion progressed slowly in what was predominantly an agricultural country (75-80% of the population lived in rural areas). Birth rates were partly a reflection of the rural population's general composition, the norm being four children per family. However, the ravages of the World War II created uncertainty and fear among the population, and so did the occupation of the Soviet troops and the establishment of communist power in Romania (Ghetau, 1978).

At the end of the World War II, Romania had only an incipient proletariat even in the former province of the Hapsburg Empire, Transylvania (Brubaker et al., 2008). Nevertheless, after the war and despite plans and attention given to the topic, the drop in birth rates complicated the agenda and its reconciliation with the needs and requirements of the labour market. To make things worse, less than two decades later, the demographic problems in the aftermath of the war were worsened by those generated by a different set of factors: rapid urbanization, lack of housing, wages, literacy, higher education opportunities as well as higher expectations of standards of life - all of these have contributed to the decline in birth rates. Since the mid-1960s as a means of confronting this population trend, catalyst policies have become a general feature of the modernization strategies of the socialist states in Eastern Europe (Winter & Teitelbaum, 1985).

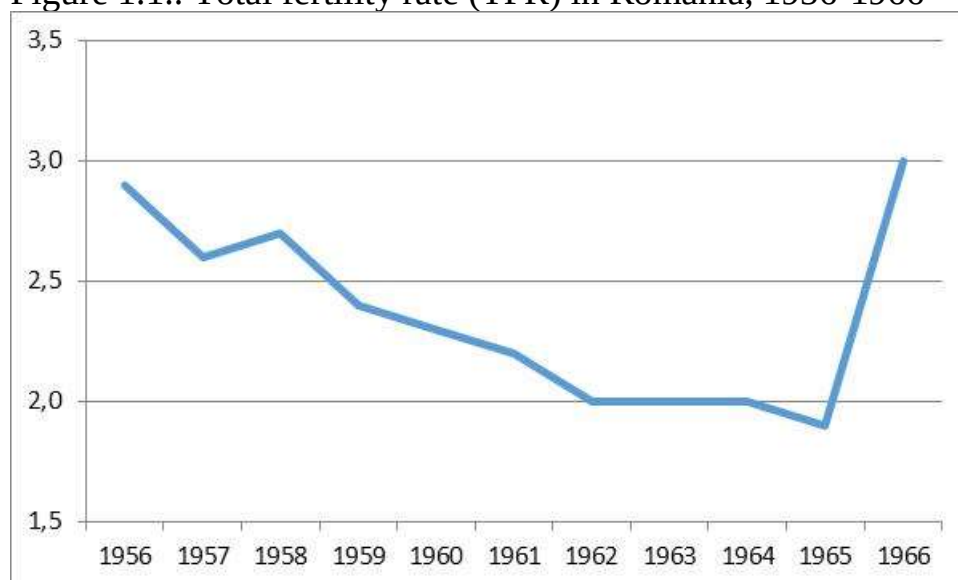
While characterised by the dynamic rhythm of socio-economic changes in the first period of communist governance⁸, which led to the improvement of the public health system, urbanization, industrialization,

8 Here we underline that the distinction in Romania between the positive output produced by the communist governance and the overall unavoidable modernisation of Romania determined by the Zeitgeist of the second half of the 20th century still need to be clarified: "It has been claimed by scholars, both within Romania and elsewhere, that Communist rule 'saved' Romania from the economic crisis that existed in the 1930s. A close analysis reveals, however, that the economic achievements of the regime are comparable to those which have occurred elsewhere in Europe under different political systems. It is argued that Romania's relative position among the industrial nations has remained about the same as it was in the pre-socialist period. Moreover, there is much evidence that the socialist period represents less of a break with the ancien regime than the Romanian leaders claim." (Chirot, 1978, pp. 457–499).

mass education and collectivization, birth rates continued to be low and abortion was restricted unless the pregnancy threatened the mother's life or when the child was likely to be born with a disability.

In other words, in 1965, Romania was in demographic decline, manifested especially through the decline in births but abortion had not yet acquired a national demographic significance, a situation which was similar to that in the majority of Central- and Eastern-European states.

Figure 1.1.: Total fertility rate (TFR) in Romania, 1956-1966



Source: National Institute of Statistics, *Romanian Demographic Yearbook*, 2006: 120

According to the Census of 15 March 1966, Romania had a population of only 19 105 056 inhabitants and the total fertility rate were only 1.9 (Figure 1.1.) an indicator that, according to the Communist Party, “did not even ensure the simple reproduction of the population, that is one

female child for each woman in her fertility period from 15 to 49 years of age”⁹.

Demographic considerations notwithstanding, the new regime that ruled over Bucharest was genuinely worried about the obstacles this would pose for the construction of socialism, for industrial development, due to the existence of a population ‘with a structure based on old-age groups’.



Address of the first secretary of the Romanian Workers' Party, Gheorghe Gheorghiu-Dej, at the National Women's Conference, 1958 (Courtesy of the Photo Department, ROMPRES, Bucharest).

Even during the existence of the regime, Mary Ellen Fischer argued for the economic motivation for the adoption by the regime of a coercive policy designed to raise birth rates. The economic argument rests in the Stalinist dogma, according to which more people could generate a

⁹Arhiva Nationala Istorica Centrala, fond Comitet Central, Partidul Comunist Roman, Secția Cămarilor, dosar 101/1966, f. 106.

stronger economy (Fischer, 1989). The need for work-force became more poignant in the 1950s, due to the ample industrialisation process of Gheorghiu Dej, intensified further after the refusal of the Soviet economic integration plans.¹⁰

In order to facilitate projects aimed at radical social change, the young Communist government first needed to destroy the institutions, norms and values of the previous system¹¹. As encountered in other parts of the 20th century socialist society, the traditional family structures were being attacked. For instance, the initial liberalization of legal abortion and access to divorce were direct attacks on the traditional family, attacking the hierarchical order of authority between generations and genders. Again, the intention was to break the familiar social order and to create a mobile workforce made up of individuals unconstrained by family ties or 'tradition' (Verdery, 1983). In turn, these individuals would create the necessary labour force to carry out the vigorous plans of industrialization and forced collectivisation of rural space. Among these individuals were

10 At the beginning of the 1960s, the Soviet Union proposed a project of economic organisation in Eastern Europe that sought the specialisation of the economies of these countries on the production of certain items (the Emil Borisovici Valev plan). Romania was to become a predominantly agricultural country. Gheorghiu Dej understood this plan as one that undermined his authority, and he rebuffed it, and intensified the industrialisation process even more by developing common projects with Yugoslavia, and bought Western technological developments. In this context, the need for a sufficient workforce became essential (Retegan, 2002).

11 Shortly after the end of World War II, 75-80% of the population lived in rural areas; approximately three-quarters of the active 'work force' was engaged in agricultural work. By 1977, 56.4 % of the population continued to live in rural locales (World Bank, 2019). Although many rural inhabitants were no longer agricultural workers, they nonetheless lived primarily according to the norms of their communities. It is beyond the scope of this work to discuss the ambivalent role of the peasantry for the Romanian Communist Party.

the women whose entry into the labour force was facilitated by the newly granted access to abortion and divorce. Of course, a rapid and radical social reform has greatly contributed to geographic and social mobility. In the meantime, the planned social mobility radically changed the demography of Romania. In 1966, the urban population increased to 38.2%, from 23.4% in 1948¹². The state guaranteed the minimum wage and the minimum living conditions for all those who participated in the construction of socialism. Among them, peasants and workers, irrespective of their sex, benefited from upward mobility and escaped the remaining of the feudal order¹³. But social change also contributed to a pronounced decline in the birth rate, which dropped from 25.6 live births per 1000 inhabitants in 1955, to 19.1 per 1000 in 1960, to 14.3 per 1000 by 1966¹⁴. The total fertility rate, or average number of children per woman, had fallen from four before World War II to fewer than two in 1966 (Trebici & Ghinoiu, 1986). In 1966, Romania—like its neighbour Hungary—had one of the lowest total fertility rates in the world: an

12 *Anuarul statistic al Romaniei*, 1990: 51. According to the data, the urban population increased by 4.9% between 1948 and 1956. This rapid growth gradually slowed; between 1956 and 1966, the urban population increased by 2.3%; between 1977 and 1992, by 1.8%.

13 In this case, the internal differences inside Romania are enormous, Transylvania did not benefit from the upheaval as much as the rest of the country since its development starting point was drastically different in comparison to the rest of the country, mainly due to the industrialisation and advanced infrastructures made available and built during the Hapsburg and Austro-Hungarian Empire (Brubaker, 2008).

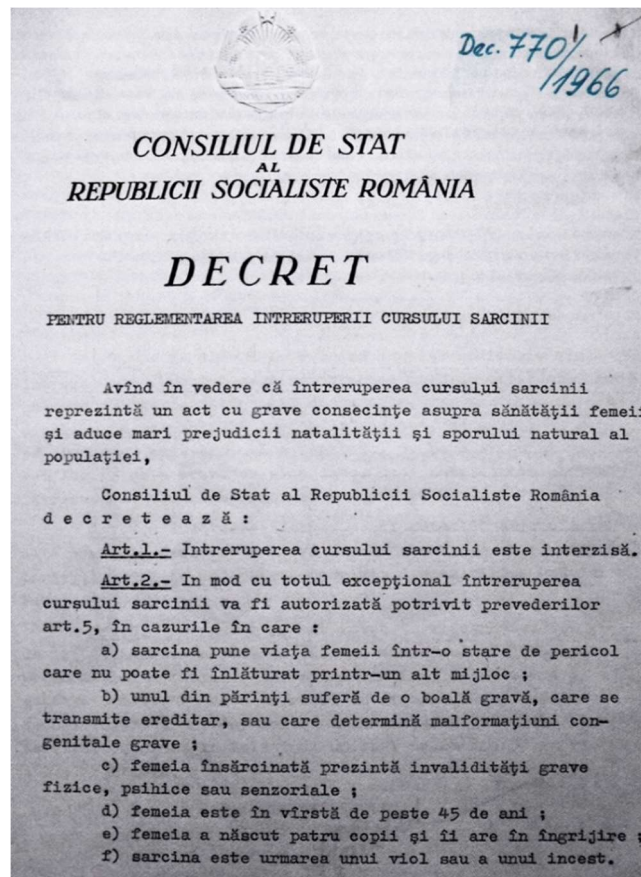
14 From 1956 to 1965, the birth rate declined to 14.6 per 1,000. *Anuarul statistic al Romaniei*, 1990: 66—67.

average of 1.9 children per woman¹⁵. Despite the ideological dictate that reproduction of the labour force was a social necessity, the birth rate declined.

15 The Hungarians did not adopt the policies instituted in Romania. Instead, they turned to maternity incentives. (Chesnais 1992).

Ceaușescu's Reign

2.1. Ceaușescu's Election and Decree 770/1966



Nicolae Ceaușescu was elected General Secretary¹⁶ of the Party in 1965 after the death of Gheorghe Gheorghiu-Dej. Like the previous leader,

¹⁶ One of his first acts was to change the name of the party from the Romanian Workers' Party back to the Communist Party of Romania and to declare the country a socialist republic, rather than a people's republic. In 1967, he consolidated his power by becoming president of the State Council, making him de jure head of state. His political apparatus sent many thousands of political opponents to prison or psychiatric hospitals (Medical Ethics Department of the British Medical Association with advice from the BMA's Medical Ethics Committee, 1992).

Ceaușescu officially promoted gender equality, but also desired to increase the nation's population.

In his rhetoric, he stressed the '*distinguished role and noble mission*' found in child-rearing, and promised state-sponsored assistance in the form of childcare centres, accessible medical care, maternity leave, and work protection so that women could combine large families with work outside the home.



Peasant family roots: the mothers of Nicolae Ceaușescu and Elena Petrescu, 1977 (Courtesy of the Photo Department, ROMPRES, Bucharest).

Ceaușescu's ideas of mandating large families were inspired by Stalinist Soviet Union (abortion was illegal in USSR between 1936 and 1955), as well as by his own conservative upbringing in rural southern Romania.

Ceaușescu promoted an ideal of the superwoman, active in the workforce, politically involved, raising many children, taking care of the household chores, and succeeding in doing all these at the same time.

To counter this sharp decline of the population, the Communist Party led by Ceaușescu decided that the Romanian population should be increased to 30 million inhabitants. In October 1966, Decree 770 was authorized by Ceaușescu (Gilberg, 1990). The decree criminalized abortion except in the following cases:

- women over 45 (lowered to 40 in 1974, raised back to 45 in 1985)
- women who had already delivered and reared four children (raised to five in 1985)
- women whose life would be threatened by carrying to term due to medical complications
- women whose fetuses were malformed
- women who were pregnant through rape or incest

The effect of this policy was a sudden transition from a birth rate of 14.3 per 1,000 in 1966 to 27.4 per 1,000 in 1967, though it fell back to 14.3 in 1983.

2.2. The details of the policy

With a political system in place that made long-range planning the cornerstone of economic growth, demographic trends took on particular significance. As development proceeded, so did disturbing demographic

consequences. It soon became apparent that the country was approaching zero population growth, which carried alarming implications for future labour supplies for further industrialization. The government responded in 1966 with a decree that prohibited abortion on demand and introduced other pronatalist policies to increase birth rates. The decree stipulated that abortion would be allowed only when pregnancy endangered the life of a woman or was the result of rape or incest, or if the child was likely to have a congenital disease or deformity. Also an abortion could be performed if the woman was over forty-five years of age or had given birth to at least four children who remained under her care. Any abortion performed for any other reason became a criminal offense, and the penal code was revised to provide penalties for those who sought or performed illegal abortions.

Other punitive policies were introduced. Men and women who remained childless after the age of twenty-five, whether married or single, were liable for a special tax amounting to between 10 and 20 % of their income. The government also targeted the rising divorce rates and made divorce much more difficult. By government decree, a marriage could be dissolved only in exceptional cases. The ruling was rigidly enforced, as only 28 divorces were allowed nationwide in 1967, compared with 26000 the preceding year (Hord, 1991).

Some pronatalist policies were introduced that held out the carrot instead of the stick. Family allowances paid by the state were raised, with each child bringing a small increase.



Maternal Glory Orders and medals given to patriotic mothers (9, 8 respectively 7 children)

Monetary awards were granted to mothers beginning with the birth of the third child. In addition, the income tax rate for parents of three or more children was reduced by 30 % (Hord, 1991).

The government's ban on abortions and modern contraception in 1966 also was accompanied by the introduction of limited pronatalist incentives. The main incentives provided were paid medical leaves during pregnancy and a one-time maternity grant of about \$85, which is roughly equal to an average monthly wage income (Baban, 1999).

The increases in the monthly child allowance provided by the government to each child was increased by \$3, a very small amount compared to the cost of raising a child. One potential concern with this

identification strategy is that these financial incentives, although very small in magnitude, might have changed the demand for children. Because the analysis will mainly focus on changes in fertility behaviour following the liberalization of abortions and modern contraceptives in 1989, the confounding effect of financial pronatalist incentives on fertility would be a potential worry only if the government had abolished these incentives concurrently with the liberalization of abortion and modern contraceptive methods. According to a study on the provision of social services in Romania (World Bank, 1992), no major reforms had taken place in the provision of maternity and child benefits in the first three years following the fall of communism (Baban, 1999).

Because contraceptives were not manufactured in Romania, and all legal importation of them had stopped, the sudden unavailability of abortion made birth control extremely difficult. Sex had traditionally been a taboo subject, and sex education, even in the 1980s, was practically non-existent. Consequently, the pronatalist policies had an immediate impact, with the number of live births rising from 273,687 in 1966 to 527,764 in 1967--an increase of 92.8 %. Legal abortions fell just as dramatically with only 52,000 performed in 1967 as compared to more than 1 million in 1965. This success was due in part to the presence of police/Securitate in hospitals to ensure that no illegal abortions would be performed. But

the policy's initial success was marred by rising maternal and infant mortality rates closely associated with the restrictions on abortion (Hord, 1991).

The increase in live births was short-lived. After the police returned to more normal duties, the number of abortions categorized as legal rose dramatically, as did the number of spontaneous abortions. The material incentives provided by the state, even when coupled with draconian regulation and coercion, were not enough to sustain an increase in birth rates, which again began to decline. As the rate of population growth declined, the government continued efforts to increase birth rates. In 1974 revisions in the labour code attempted to address the problem by granting special allowances for pregnant women and nursing mothers, giving them a lighter work load that excluded overtime and hazardous work and allowed time off to care for children without loss of benefits (Hord, 1991).

The Ceaușescu regime took more aggressive steps in the 1980s. By 1983 the birth rate had fallen to 14.3 per 1,000, the rate of annual increase in population had dipped to 3.7 per 1,000, and the number of abortions (421,386) again exceeded the number of live births (321,489). Ceaușescu complained that only some 9 % of the abortions performed had the necessary medical justification. In 1984 the legal age for marriage was

lowered to fifteen years for women, and additional taxes were levied on childless individuals over twenty-five years of age. Monthly gynaecological examinations for all women of childbearing age were instituted, even for pubescent girls, to identify pregnancies in the earliest stages and to monitor pregnant women to ensure that their pregnancies came to term. Miscarriages were to be investigated and illegal abortions prosecuted, resulting in prison terms of one year for the women concerned and up to five years for doctors and other medical personnel performing the procedure. Doctors and nurses involved in gynaecology came under increasing pressure, especially after 1985, when demographic command units were set up to ensure that all women were gynaecologically examined at their place of work. These units not only monitored pregnancies and ensured deliveries but also investigated childless women and couples, asked detailed questions about their sex lives and the general health of their reproductive systems, and recommended treatment for infertility (Kligman, 1998).

Furthermore, by 1985 a woman had to have had five children, with all five still under her care, or be more than forty-five years old to qualify for an abortion. Even when an abortion was legally justified, after 1985 a party representative had to be present to authorize and supervise the procedure. Other steps to increase material incentives to have children

included raising taxes for childless individuals, increasing monthly allowances to families with children by 27 %, and giving bonuses for the birth of the second and third child (Kligman, 1998).

Although government expenditures on material incentives rose by 470 % between 1967 and 1983, the birth rate actually decreased during that time by 40 %. After 1983, despite the extreme measures taken by the regime to combat the decline, there was only a slight increase, from 14.3 to 15.5 per 1,000 in 1984 and 16 per 1,000 in 1985. After more than two decades of draconian anti- abortion regulation and expenditures for material incentives that by 1985 equalled half the amount budgeted for defence, Romanian birth rates were only a fraction higher than those rates in countries permitting abortion on demand (Kligman, 1998).

Romanian demographic policies continued to be unsuccessful largely because they ignored the relationship of socioeconomic development and demographics. The development of heavy industry captured most of the country's investment capital and left little for the consumer goods sector. Thus, the woman's double burden of child care and full-time work was not eased by consumer durables that save time and labour in the home. The debt crisis of the 1980s reduced the standard of living to that of a Third World country, as Romanians endured rationing of basic food items and shortages of other essential household goods, including diapers.

Apartments were not only overcrowded and cramped, but often unheated. In the face of such bleak conditions, increased material incentives that in 1985 amounted to approximately 3.61 lei per child per day--enough to buy 43 grams of preserved milk--were not enough to overcome the reluctance of Romanian women to bear children (Hord, 1991).

Despite the obvious reluctance of women to bear children because of socioeconomic conditions, the Ceaușescu regime continued its crusade to raise birth rates, using a somewhat more subliminal approach. In 1986 mass media campaigns were launched, extolling the virtues of the large families of the past and of family life in general. Less subtle were the pronouncements that procreation was the patriotic duty and moral obligation of all citizens. The campaign called for competition among *judete* (counties) for the highest birth rates and even encouraged single women to have children despite the fact that illegitimacy carried a considerable social stigma (Kligman, 1998).

The new approach, like previous attempts, met with little success. In early 1988, demographic policies were again on the political drawing board, as the Political Executive Committee of the Romanian Communist Party (PCR) ordered the Ministry of Health to produce a 'concrete program' for increasing the birth rate. The regime's drastic and even obsessive response to the low birth rates appears to have been

unwarranted. Death rates steadily declined during this period, and in 1965, when the crusade began, there was little evidence of an impending demographic crisis. Romania's rate of natural increase of 6 per 1,000 was considerably higher than that of the German Democratic Republic (East Germany) at 3 per 1,000 and Hungary's 2.4 per 1,000. In 1984 Romania compared even more favourably with a rate of natural increase of 3.9 per 1,000 as opposed to East Germany's 0.4 and Hungary's -2 per 1,000 (Hord, 1991).

In 1989 abortion remained the only means of fertility control available to an increasingly desperate population. The number of quasi-legal abortions continued to rise, as women resorted to whatever means necessary to secure permission for the procedure. Women who failed to get official approval were forced to seek illegal abortions, which could be had for a carton of Kent cigarettes (Kligman, 1998).

2.3. The Romanian Experiment

What differentiates the Romanian experience is the gravity and intensity of the measures deemed necessary to implement the coercive pro-natalist policies, regulated according to a variety of elements, and which produced the devastating consequences, sacrificing individuals, families and eventually a people, making Communist Romania a classroom example in Demography worldwide (Legge & Alford, 1986).

“the fetus is the socialist property of the whole society. Giving birth is a patriotic duty. Those who refuse to have children are deserters, escaping the law of natural continuity” (Ceașescu, 1986, p 217)

Initially, this pro-natalist policy was completed with mandatory gynaecological visits and penalties for single women over 25 and married couples without children, but starting in 1977, all childless persons, regardless of sex or marital status, were fined monthly contributions from their wages, whose size depended on the sector in which the person worked. The state glorified child-rearing, and in 1977 assigned official decorations and titles to women who went above and beyond the call of duty and had more than the required number of children (Kligman, 1998).



The 20th million inhabitant of the Socialist Republic of Romania presented to Ceașescu and other important political leaders, 1969 (Courtesy of the Photo Department, ROMPRES, Bucharest).

The nature of the shortage economy helped control the emergence of a society dependent on the state for the bare essentials of daily life long after the state was able to provide them. Social welfare incentives,

however meagre, served to integrate the population more deeply into the web of a totalising system. However, as the years passed and the global recession compounded the inherent problems of command economies in general, coercive measures were again added to the incentives meant to cajole consent in Ceaușescu's Romania. The rhetoric of socialist achievement unintentionally sparked consumerist desires that the regime could not satisfy. Manipulative strategies kept people hooked into the system (Kligman, 1998).

By the mid-1980s, daily life had become impoverished in almost all respects. Women's circumstances were especially dire because women also bore the greatest burden of the demographic policies. In Ceaușescu's Romania, where poverty had become a general condition, the maternal mortality rate for 1989 was the highest ever recorded in Europe. Illegal abortion was the primary cause. To be sure, analysis of Ceaușescu's demographic policies enables us to explore in detail the tragic consequences of banned abortion in Romania and also calls attention to other aspects of the politics of reproduction, notably how international interests come into play, often in unintentionally nefarious ways. In the 1970s, Ceaușescu's pronatalist policies were regarded positively in the West. By the late 1980s those same policies were widely condemned (Baban, 1999).

After the issuing of Decree 770/1966, and not taking into consideration the numerous complaints that doctors filed to the Ministry of Health, even the possibility that these women would receive oral contraceptives was denied. We can also mention here that the administration of oral contraceptives was prohibited even for women who, for medical reasons, could benefit from legal abortions. The use of contraceptives was considered by the specialists the most appropriate and safe method of family planning, however, their scarce availability on the domestic market due to blocking their import and to not producing them internally in a context where the pharmaceutical industry was nationalised, as well as a lack of proper education for their utilisation, made them inaccessible for the majority of the population (Baban, 1999). Under these conditions, abortion still remained the most widely spread means of birth control, with negative effects on women's health. In the 1980s, the Minister of Health, Victor Ciobanu, responded to a formal complaint by a gynaecologist concerning the use of contraceptives for women who had medical reasons for abortion: *"Any medical or surgical procedure that suppresses the woman's ability to procreate constitutes a violation of the party's and the state's vision concerning the stimulation of births and is against the law"*.¹⁷

¹⁷ Arhiva Ministerului Sanatatii, fond D.A.M.-O.M.C.T., dosar 13/1986, unnumbered.

2.4. Reproduction in the Socialist Republic of Romania

Less noticed than the dramatic increase in the birth rate that was provoked by Ceaușescu's banning of abortion was his direct policy link between the bearing of children and the social reproduction of the Socialist Republic of Romania. Demographic policy, that is, demographic analysis harnessed fully to the interests of the state, and the articulation of a '*national ideology under socialism*' were essential features of Ceaușescu's socialist vision (Verdery, 1991).

Therefore, mobilizing the labour force was not a phrase characterizing the complexity of human activity mobilize in order to achieve a rapid, 'multilateral' change (the term 'multilateral' will be further contextualised in this paragraph). Rather, control over the body or bodies of socialist workers to be more explicit is the means by which the 'plan' has been translated into the practices of everyday life. At the Ninth Congress of the Romanian Communist Party he referred to the improvement in the building and final victory of communism in our country. At the Tenth Party Congress in 1969, Ceaușescu introduced the concept of the '*multilaterally developed socialist society*' in which the material and spiritual realms of society would be created according to socialist principles (Tismaneanu, 1988).

The resulting relationship between state policy and demographic factors had a direct influence on the family; changed gender relations and roles, and highlighted the often contradictory interests of the state and its citizens.

The point is and remains the policy and the means to enforce the decree as well as the necessary social control. To enforce the decree, society was strictly controlled. Motherhood was described as the meaning of women's lives and praised in sex education courses and women's magazines, and various written materials were distributed detailing information on prenatal and child care, the benefits of children, ways to ensure marital harmony, and the consequences of abortion. Contraceptives disappeared from the shelves and were soon only available to educated urban women with access to the black market. In 1986, any woman working for or attending a state institution was forced to undergo at least annual gynaecological exams to ensure a satisfying level of reproductive health as well as detect pregnancy, which were followed until birth. Women with histories of abortion were watched particularly carefully (Kligman, 1995).

Medical practitioners were also expected to follow stringent policies and were held partially responsible for the national birth rate. If they were caught breaking any aspect of the abortion law, they were to be

incarcerated, though some prosecutors were paid off in exchange for a lesser sentence. Each administrative region had a Disciplinary Board for Health Personnel, which disciplined all law-breaking health practitioners and on occasion had show trials to make examples of people. Sometimes, however, punishments were lessened for cooperation. Despite the professional risks involved, many doctors helped women determined to have abortions, recognizing that if they did not, she would turn to a more dangerous, life-threatening route. This was done by falsely diagnosing them with an illness that qualified them for an abortion, such as diabetes or hepatitis, or prescribing them drugs that were known to counter-induce pregnancy, such as chemotherapy or antimalarial drugs. When a physician did not want to help or could not be bribed to perform an abortion, however, women went to less experienced abortionists or used old remedies (Kligman, 1995).

2.5. The Leader and the Party

Former Communist leaders who have spoken about the genesis of decree 770 have always confirmed that it was very much Nicolae Ceaușescu in person who pushed the policy. The Romanian leader did not even approve the import of contraceptives for the women who had done their ‘duty’ to have and raise four children, In. 1966, during the meeting of the Executive Committee of the Romanian Communist Party, the

nomenklatura debated a demographic study drafted by a committee headed by Voinea Marinescu, Minister of Health and Social Affairs. Alexandru Drăghici, a member of the Executive Committee of the Communist Party roughly attack the report. *"All this study," he says, "is a blueprint for the experience of other countries, it contains a lot of demagoguery and it proposes to give monetary incentives as if the state were to buy these children. Each of us are sons of labourers or peasants, poor people, and we know how we grew up. I do not know why we run around to look for experiences. We must end with this sinful decree (1957 abortion liberalization decree) which only encourages libertines and the family must be a family. We must also take action to stop divorces"* (Minutes of the 2nd of August 1966 meeting of the PCR, p. 17, Editura Politica Bucuresti). The other speakers were more cautious. *"We cannot ask a family to have more children than they want to have"*, Ion Gheorghe Maurer¹⁸ stated. But nothing passed. The only measure proposed by the authors of the demographic study accepted by party leaders was to increase the number of nurseries. As usual, the conclusions belonged to Nicolae Ceaușescu, who surpassed Drăghici's virulence. *"In my opinion, through the abortion legalization decree, we have legalized prostitution through abortions and the right to divorce,"* Ceaușescu said. *"And what's*

¹⁸ Ion Gheorghe Iosif Maurer (23 September 1902 – 8 February 2000) was a Romanian communist politician and lawyer, as well as a 49th Prime Minister of Romania.

worse, even in the party leadership we have and we have such things. In America, Rockefeller could not run for president because he divorced and remarried, and we have many comrades who get divorced by phone. Is it possible that we are an institution that encourages prostitution, or do we have the responsibility to preserve the health of the people, the natural increase of the population and to defend the morality of the people? We must put an end to this state of affairs and not allow that leadership positions in the state and in the party are given by those who in their personal lives show a lack of communist morality. We cannot ask factory workers for things that we cannot ask a party leader at different levels." (Minutes of the 2nd of August 1966 meeting of the PCR, p. 18, Editura Politica Bucuresti). Ceaușescu did agree to increase the number of nurseries. But he insisted that the ‘problem’ of contraceptive methods to be removed from the material, and two weeks later he ordered the drafting of a law that limited divorces to exceptional cases.



Page from the Romanian language manual discussing a state visit.

Contraception was virtually banned in Romania. At the timid objections of some to the changes in the life of the modern family, Ceaușescu responded with his childhood memories. Paraphrasing the minutes of the same meeting, he said... we were 10 children and we lived in one room. By Decree 770/1966, imprisonment was foreseen for women who aborted illegally and for those who would help them. The rule of law also foresaw the involvement of control commissions and new responsibilities for ministries, law enforcement, militia, *Securitate*, doctors, ‘snitches’, factory directors or schools. Working Romanian women were required to perform periodic gynaecological examinations to detect pregnancies. Thus, the most intimate element of human life, sexuality, was subjected to party control.



The 1985 National Women's Conference with President Ceaușescu, Prime Minister Dascalescu and other leaders presiding (Courtesy of the Photo Department, ROMPRES, Bucharest).

Unwanted children doubled in 1967 the fertility rate of the previous year. 1967 marks the highest number of children born in the entire post-1944

period in Romania. In 1973, however, the total fertility rate returned to the level of 2.4 children born on average by one woman. And in the following years fertility rates eventually returned to figures characteristic of the period before the adoption of the decree. The effects of the legislation on 'family consolidation' (that limited divorce) were similar. For a short while, divorces fell spectacularly, according to Adrian Dumitru, the Minister of Justice in 1966, between 1 October 1966 and 31 May 1967, 4,512 divorce actions were filed, less than 87.7% of the same period before the introduction of legislation. The hindrances were one way or another overcome and the divorce wave rose again.



Ceaușescu's speech at the Women's National, 1971 (Courtesy of the Photo Department, ROMPRES, Bucharest).

From 1979 to 1988, the number of abortions increased, save for a decline in 1984-1985. Despite this, many unwanted children were born, as their parents could scarcely afford to care for the children they already had, and were subsequently abandoned in hospitals or orphanages. The

recurring phrase in Romania was ‘The State wanted them, the State should raise them.’



A mother of triplets in a Bucharest maternity hospital, 1984 (Courtesy of the Photo Department, ROMPRES, Bucharest).

The aberration went even further: some of these orphans, underfed and neglected to the point of insanity in crumbling buildings where the staff was undersized beyond any plausible limit, were purposely given transfusions as ‘pick me ups’, but in the 80s it turned out that this blood was HIV infected (Kligman, 1998).



Mothers nursing in a Bucharest maternity hospital, 1987 (Courtesy of the Photo Department, ROMPRES, Bucharest).

Those born in this period, especially between 1966 and 1972, are nicknamed the ‘small decree’ (*decrețel*), a word with a negative nuance due to the perceived mental and physical damage due to the risky pregnancies and failed illegal abortions which literally means ‘small decree’. Over 9,000 women died between 1965 and 1989 due to complications arising from illegal abortions (Kligman, 1995).

2.6. Internal and External Outlook on Ceaușescu’s Demographic Policy

How was this not contrasted by the population? For many Romanians, Ceaușescu represented the potential salvation from the harsh embrace with which the Soviets controlled their satellites: the ghost of the Red army, colonization strategies, invasion, cultural repression. Ceaușescu’s rhetoric was rewarded in popularity if not in loyalty by the Romanian

nation. In this context, Decree no. 770 could not have been contrasted by the population due to the persistent fear that was prevalent in Gheorghiu-Dej's period of Stalinist rule (Jowitt, 1971).

What about the international community? In distinct contrast to the internationalist discourse of Soviet-groomed communists, Ceaușescu proclaimed the continuing sanctity of the nation and the State as the basis of the development of socialist society. The development and flourishing of each socialist nation, of each socialist state, equal in rights, sovereign and independent should have been an essential requirement upon which depend the strengthening of the unity and cohesion of the socialist countries, the growth of their influence upon mankind's advance toward socialism and communism (Ceaușescu, 1965). For the Western leaders, Ceaușescu (after Tito), was a star in the midst of the darkened Soviet socialism. 'Self-determination', the emphasis on the 'family' welcomed a conventional, respected and familiar form of organization in society in contrast with the more extreme experiments of dismantlement of the nuclear family tested in Soviet Russia (Goldman, 1993). His pro-natalist initiatives aimed at combating birth reduction, a well-established problem in the West, have been recognized favourably in the 1974 World Population Conference in Bucharest¹⁹. Similarly, the modernization

19 J. D. Rockefeller, a member of the American delegation, praised Ceaușescu for his concerns about the role of governments in ensuring their population's well-being: "It is gratifying and encouraging

plans for the 'systematization' of urban and rural spaces were considered comprehensive and rational (Sampson, 1984). The West considered Ceaușescu a plausible ally in the eastern block. His position on Israel was approved in the West and made it possible for the United States and others to open dialogue with the Libyans and the Palestinians, for example. He was a facilitator of the talks between the United States and China²⁰.

For Ceaușescu in Romania, modernization also entailed the eventual securing of Romania's autonomy, especially in the Soviet bloc²¹. His defiant stand against joining the Warsaw Pact's invasion of Czechoslovakia in 1968 dramatically focused attention on his independent streak, if not on his nationalist and socialist intentions. Facing his nation and the world, Ceaușescu momentarily announced: *"We know, comrades, that the entry of the forces of the five socialist countries into Czechoslovakia is a great error and a serious danger to peace in Europe and to the fate of socialism in the world. It is inconceivable in today's world, when the peoples are rising to the*

that you say this because I do not believe there are many heads of state who cast the problem of population in this perspective." Quote from the stenogram of a meeting between Ceaușescu and Rockefeller during the 1974 World Population Conference. (Archives of Romania's Department of Defence and the archives under the authority of the army, 1994. Unnumbered)

20 Ceaușescu's visits to China and North Korea during this period planted the seeds for his own "cultural revolution" and personality cult. Ion Iliescu, the first post Ceaușescu president of Romania, referred to this in his memoir, *Revoluție și reformă* (Iliescu 1993).

21 Ceaușescu's speeches often contain the idea that Romania's autonomy depends upon repaying its public debt.

struggle to defend their national independence and for equality in rights, that [...] socialist states should violate the freedom and the independence of another state [...] there can be no excuse for accepting even for a moment the idea of military intervention in the affairs of a fraternal socialist state. [...] Nobody can set himself up as an adviser and guide for the way in which socialism must be built [...] the Romanian people will not permit anybody to violate the territory of our fatherland”(Ceașescu, 1968, p. 3)²².

The impressive rhetoric invoking ‘the right to the self determination’ and the glory of ‘national pride’ contributed to the strengthening of Ceașescu's power in Romania, his prestige in the West, as well as among the nations of the Third World and within the unaligned movement. ‘Independence’ and ‘national sovereignty’ were catchphrases that stimulated enthusiastic support at home and Western approval abroad, Ceașescu was known as the Romanian leader who stood up to the Soviet Union.

Beyond this misleading perception both abroad and internally that he was the solution to a series of problems, in reality the restrictive abortion law issued through decree 770 in 1966 was and has remained the key

²² *Balcony Speech by Nicolae Ceașescu on Czechoslovakia, August 21, 1968, printed in full in Scinteia, August 22, 1968.*

indicator of the intentional relationship between the socialist state and its citizens throughout Ceaușescu's government. Controlling the reproduction of society was fundamental to the enormous project of socialist transformation. Therefore, it is important to understand the critical cultural role played by the politicization of what has traditionally been developed in the private life of family relationships, especially sexual relations and socialization of children, as it has regularly happened in the history of humanity in most totalitarian regimes (Koonz, 1987; de Grazia, 1992; Jancar, 1978.). By legislating reproductive behaviour, the state has entered the most intimate field of social relations. This radical change in the social relations and organizational structures of everyday life was an overarching goal of the development strategies promulgated by the communist planners. Again, the socialist or command economy was dependent on the mobilization and use of human resources, namely the availability and control of the labour force. In such planned economies, where current and future labour needs were relatively high (international labour migration was virtually non-existent and birth rates diminished), attention to demographic phenomena was vital from the point of view of strategy (Wolff, 1967).

The impact of the Romanian abortion ban in demographic terms

3.1. General overview

The world came into contact with the consequences of the demographic policy after the fall of the Iron Curtain. News of an infant AIDS epidemic, whose existence had been publicly suppressed during the final years of the Ceaușescu regime, filled the world's media shortly after the regime's demise in 1989. But infant AIDS was not the only dramatic physical consequence that afflicted the politicized bodies of Romanian citizens. Maternal and infant mortality rates soared as shown below in this chapter; the population's health in general was affected. However, data available on epidemiological studies is scarce, incomplete or unreliable. Ultimately, politics dictated the parameters of medical research as well as of medical practices and determined the limits of social and scientific knowledge. Therefore, in attempting to make sense of the medical consequences of the pronatalist policies, existing data can only be interpreted in the context in which they were produced and used.

A cautionary word is appropriate about attributing too much power to demographic policies alone in determining what are complex social

outcomes. On the one hand, age-specific male mortality has been consistently rising in Romania, as it has been elsewhere in the region, marking a demographic change due to the adverse condition of the period of time analysed. It is, however, clearly not a direct consequence of the pronatalist policies (Chesnais, 1983).

On the other hand, changes in the shape of the population's age distribution were indeed significantly affected by pronatalist policies; however, other factors such as urbanization, mass education, and widespread health care contributed to the overall demographic process as well.

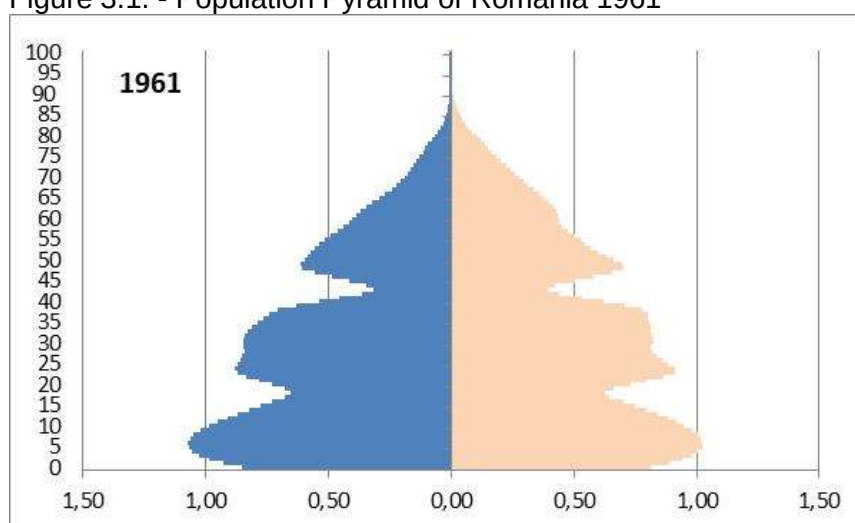
Whereas the baby boom attributable to the 1966 law looks dramatic in sheer numerical terms, this cohort's incorporation into the educational and employment systems, as well as the marriage market, was mitigated by complex socio-political and institutional responses. The sociological significance of demographic trends differs markedly from their demographic characterization.

3.2. Impact on age distribution

Population pyramids, as instrument, visualize the demographic structure of a population. The width represents the size of the population of a given age; women on the right and men to the left. The bottom layer represents the number of children and above it the numbers of older cohorts. This

graphical representation of statistical-demographic data offers readers a direct and indisputable view on the situation in discussion, the abnormalities in the Romanian case being particularly obvious. For the purpose of this demonstration, years 1961, 1971 and 1991 have been selected.

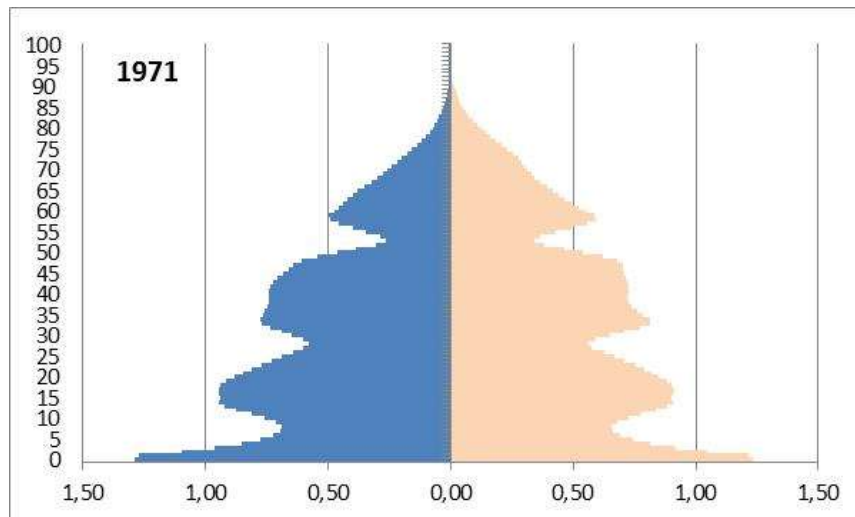
Figure 3.1. - Population Pyramid of Romania 1961



Source of data: U.N., *World Population Prospects 2019*

The population pyramid of 1961 shows no signs of aging. There are constrictions for both sexes in the 15-19 and 40-45 age groups, produced by the lack of births connected to the two world conflicts, a characteristic common to the other European countries. Another important element is the constriction at the base, caused by the beginning of the decline in births.

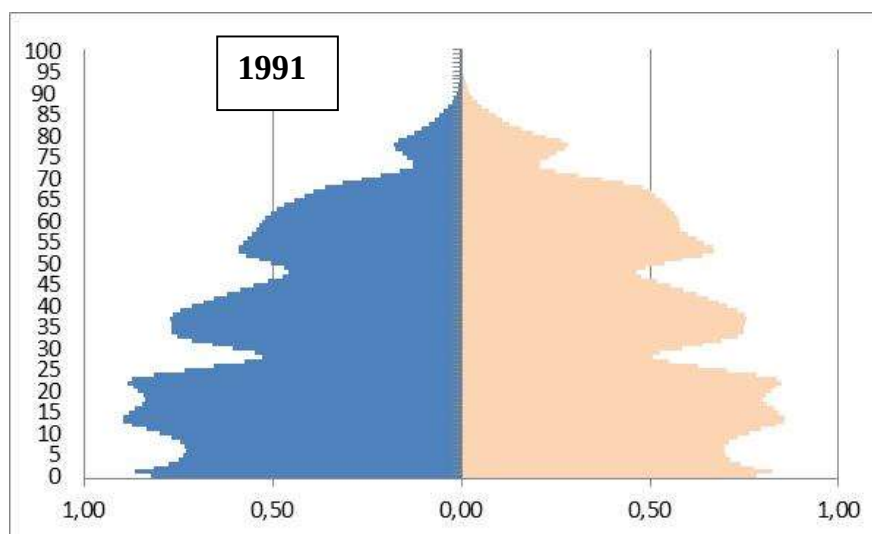
Figure 3.2. - Population Pyramid of Romania 1971



Source of data: U.N., World Population Prospects 2019

Ten years later, the signs of the pronatalist politics are evident: the base of the pyramid widens anomalously, particularly in the 0-3 age group, demonstrating the intensity of the pro-natalist measures and policies. A prevalence of elderly women begins to be visible, due to a very pronounced male super-mortality.

Figure 3.3. - Population Pyramid of Romania 1991



Source of data: U.N., World Population Prospects 2019

The pyramid of 1991, in addition offering answers to the anomalies of the previous pyramids, with a shift of the cohorts of 10 and 20 years old, shows, under the age of 20, constrictions and peaks of expansion caused by variations in the legislation on abortion.

3.3. Induced Abortions

As elsewhere in the Soviet bloc, abortion was the primary method of fertility control in Romania, which was the extreme case among these countries (Blayo, 1991; Hord et al., 1991).

Table 3.1 - Abortion in Selected countries, 1987

<i>Country</i>	<i>Abortions x 1,000 live births</i>
Romania	131.1
Bulgaria	102.8
Yugoslavia	102.2
Czechoslovakia	72.5
Hungary	67.3
GDR	42.2
Italy	33.9
Sweden	32.0
England and Wales	22.5
Finland	21.9
France	21.0
Scotland	14.1
FRG	13.5

Source: United Nations, Patterns of Fertility in Low-Fertility Settings, 1992, p. 70.

It is generally assumed that Romanian women had, on average, between five and seven abortions during their reproductive lives. In Romania, the restricting of legal abortion combined with the lack of modern

contraceptive options led to a dramatic increase in the practice of illegal abortion, in consequence of which many mothers ended up on death's doorstep. Indeed, Romania's maternal mortality rate skyrocketed over time. Between 1987 and 1989 it was the highest in Europe (Baban and David, 1994; Hord et al. 1991).

It must nonetheless be emphasized that abortion-related statistics are highly variable and notoriously inaccurate (Blayo, 1991). The classification of an abortion as legal or illegal depended on a variety of factors. The official category of registered abortions included abortions that were legal according to the dictates of the law and legal according to the license taken by physicians who interpreted certain non-legally induced abortions as legal. It was in the interest of individuals and institutions who provided abortion statistics to 'round them down' - that is, to lower their numbers. This practice was applied to many other domains of statistical production, with statistics being manipulated according to the needs of the 'plan.' For example, in reporting agricultural and industrial production figures and natality figures, statistics tended to be inflated. Collusion was systemwide (Blayo, 1991).

The purpose of numerical manipulation was to avoid sanctions, especially pecuniary ones. Again, the personnel at any hospital—from administrators to the medical cadre—knew that it was in their best

interests to declare the smallest number of abortions possible. The number of legal abortions for which certificates were based on legitimate therapeutic grounds was relatively low, and varied little from year to year (Kligman, 1998).

Table 3.2. - Distribution of Abortions by motivation, 1979-1988, %

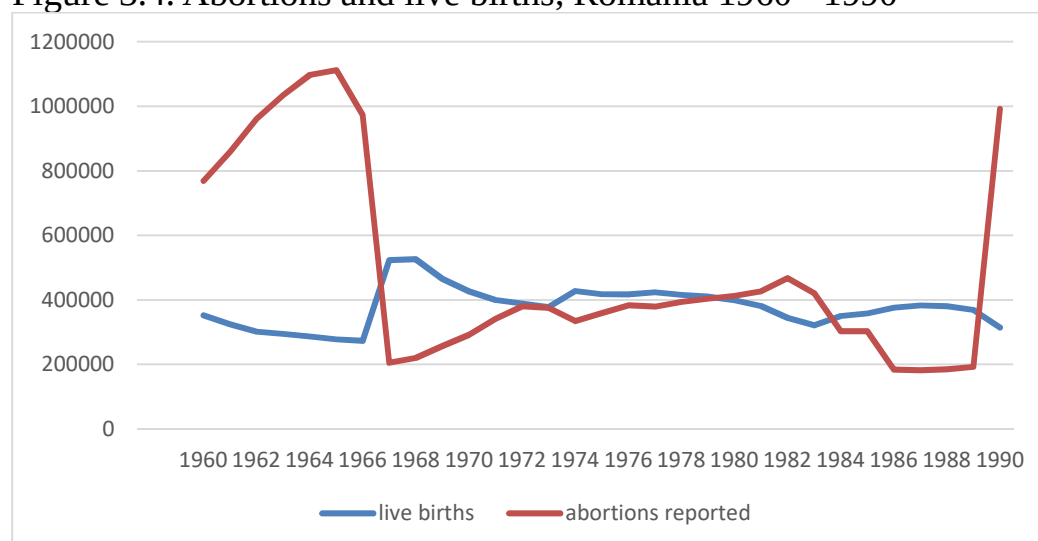
Year	Four/five children	Mother aged 40-45	Medical causes	Incomplete data
1979	35.9	9.1	7.5	47.5
1980	36.1	8.6	7.8	47.5
1981	35.5	7.9	8.1	48.5
1982	34.8	7.2	8.2	49.8
1983	36.1	7.1	8.9	47.9
1984	41.4	7.7	9.6	41.3
1985	42.4	7.2	9.4	41.0
1986	14.1	0.9	16.4	68.6
1987	16.9	0.6	16.4	66.1
1988	22.8	0.5	16.6	60.1

SOURCE: Roznatovschi 1989, Report catalogued as State Secret, Aspecte ale intreruperilor de sarcina in Republica Socialista Romania 1988, Bucharest: Ministerul Sanatatii, Centrul de Calcul si Statistica Sanitara

Until 1985, women who were 40 years old or who had four or more children in their care were eligible for legal abortions. In 1985 the age limit and number of children were increased, the effects of which are seen in table 3.2.: in 1986 the number of incomplete abortions rose, meaning that more women had ended up in the hospital as a result of illegal abortions; fewer women were able to seek legal abortions on the grounds of age or number of children, and more abortions were attributed to medical causes. As the data indicates, regardless of the legal changes,

the number of abortions continued to rise, and many of them were illegal, at least when initially performed (figure 3.4.). Whenever political measures were reinforced throughout the hospital system, a temporary suspension of or adjustment to abortion-related practices occurred. However, the heightened surveillance that was applied when the repressive screws were tightened did not endure indefinitely, and abortions resumed (Kligman, 1998).

Figure 3.4. Abortions and live births, Romania 1960 - 1990



Source of data: Eurostat, Institutul National de Statistica – Anuarul Statistic al Romaniei 1990

Abortion statistics were falsified in various ways. For example, medical and statistics personnel devised broad statistical categories that allowed the facts to be obscured and facilitated shifting cases between legal and illegal categories. In this way, the medical profession managed to circumvent the political controls of the state to a certain degree. To illustrate, a report following up on a U.S. Agency for International

Development (USAID) site visit to Romania provided interesting statistics on legally sanctioned abortion for the years 1983—1987, from which politically motivated statistical adjustments may be inferred. In 1985, for example, rape was cited as the underlying cause of 127,601 legal abortions. But in 1984, rape had officially accounted for only 32 abortions. The 1985 figure shows clearly how statistics became constructs of political necessity: despite further broadening of the anti-abortion law, rape still constituted a legal basis for abortion. Furthermore, because 1985 happened to be the last year in which already having four children remained a legitimate reason for a legal abortion, the number of abortions in this category was high. As illustrated in table 3.3, there was consensus among physicians in their responses to political constraints on medical practice (Baban, 1999).

Table 3.3 – Legally Sanctioned Interruption of Pregnancy, Romania 1983-87

<i>Year</i>	<i>Spontaneous Abortions</i>	<i>More than Four Children</i>	<i>Rape</i>
1983	199,867	151,846	54
1984	121,045	120,782	32
1985	20	128,372	127,601
1986	1	59	4,516
1987	118,390	0,388	29

Source: David & Baban, 1994, Women's Health, Family Planning and Institutionalised Children in Romania 1991

Spontaneous abortions or miscarriages also offered physicians a great deal of classificatory latitude. In 1983, the year in which the natality

figures reached their lowest level since 1966, there were 199,867 spontaneous abortions recorded. In 1985, after political-disciplinary measures had been re-established throughout the hospital system, only 20 such abortions were recorded. Because of the political climate, physicians were reluctant even to report miscarriages. In 1986, but a single spontaneous abortion was noted. As surveillance lessened and everyone adjusted to the newer version of Decree 770, the reporting of spontaneous abortions resumed. By 1987, 118,390 miscarriages were on record (Kligman, 1998).



Example of propaganda: images from women's magazines, in this case an article explaining that in the case of an unwanted pregnancy caused by rape, forced marriage is always the preferred choice.

Following the issuance of Decree 77, the number of recorded abortions dropped sharply, from 973,447 to 205,783. Noticeable declines also occurred after the tightening of abortion measures in 1973, and again between 1983 and 1985. However, these subsequent declines were not

nearly as dramatic, suggesting that by then the population had learned how to adapt more quickly to the imposition of additional restrictions. The number of abortions again crept up while the number of births slid back down (Kligman, 1998).

Abortion data for the period 1979—1988 reveal other trends associated with the banning of abortion and lack of modern contraceptive alternatives (Roznatovschi, 1989). Of the total number of registered abortions, approximately 60 % were due to incomplete abortions. These women arrived at the hospital in need of emergency treatment for post-abortion complications. Note this estimate does not include women who died before reaching a hospital. A report regarding abortion-related maternal deaths during the first five months of 1987 cited clandestine abortions, euphemistically referred to as deaths due to psycho-social factors, as the primary cause of maternal deaths (Sebastian, 1987). Of 180 such deaths, 26.6% happened somewhere other than medical institutions. Of those who did make it to the hospital, approximately 24% died within 24 hours of admission as a result of grave toxic-septic conditions (Sebastian, 1987). Medical doctors and patients alike attest to the fact that women ended up in the hospital out of dire necessity, already in the claws of secondary complications (Stephenson et al., 1992). Data on the prevalence of post-abortion morbidity are not available. In 1989,

for example, at one of Bucharest's largest maternity clinics, 3,129 women were hospitalized for complications associated with illegally performed abortions (Mezei, 1991).

3.4. Maternal Mortality

As noted above, self-induced abortions often meant that many mothers died, leaving the children they already had motherless. From a reading of a selection of files at the Ministry of Health, it was painfully evident that many of the women who died as a result of illegal abortions left three or four children behind. Some of these women had had as many as ten abortions before this final tragedy. According to Mezei, 1,193 children were left motherless in 1989 from the consequences of illegal abortions. Mezei also reports that between 1981 and 1989 the recorded total of motherless children was 8,004. According to data from the Center for the Calculation of Health Statistics, the total number of children left motherless between 1982 and 1988 was 7,918 and did not include figures for 1981 or 1989, suggesting that the actual number was higher than 8,004. Whatever the real numbers, many children were left motherless (Mezei, 1991).

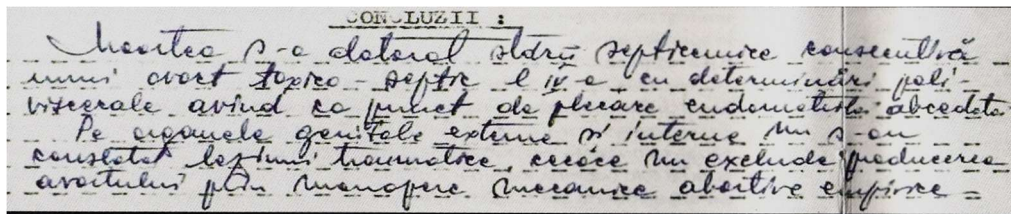
A word of caution in interpreting the category of maternal mortality is appropriate. In most of the available data, maternal mortality is specified and refers to the deaths of women who are already mothers. Hence,

maternal mortality statistics do not typically include deaths of women who have not already borne children (who are not yet mothering). Young women who had become pregnant out of wedlock and married women who were not yet ready to have a first child are not usually included among these statistics (Kligman, 1998).

To combat the rising incidence of illegal abortion and its link to maternal mortality, the all-too-familiar formulaic intensification and diversification of health education for women was recommended. Propaganda and instructional activities (e.g., conferences, slide shows, and films) illustrating the evil consequences of abortion, the danger to the health and life of the woman, to [her] family, and society, were to be held throughout the country in enterprises with high numbers of female employees, in youth groups, and in villages. Films were to be shown in theatres around the country (Kligman, 1995).

Throughout the years in which the pronatalist measures were in force, illegal abortions and their consequences contributed significantly to the disturbing increase in maternal deaths that earned Romania the highest maternal mortality rate in Europe. The French demographer Blayo estimated that in 1988 there were 204 deaths per 100,000 declared abortions in Romania; in the same year in the Soviet Union there were only 10 per 100,000. In France the data showed a variation between 0.5

and 1 death per 100,000 declared abortions over the years (Blayo 1991).



Medical report attesting death by septicemia caused by illegal abortion.

Abortion was the primary cause of maternal death. Maternal deaths due to causes other than abortion-related practices generally decreased.

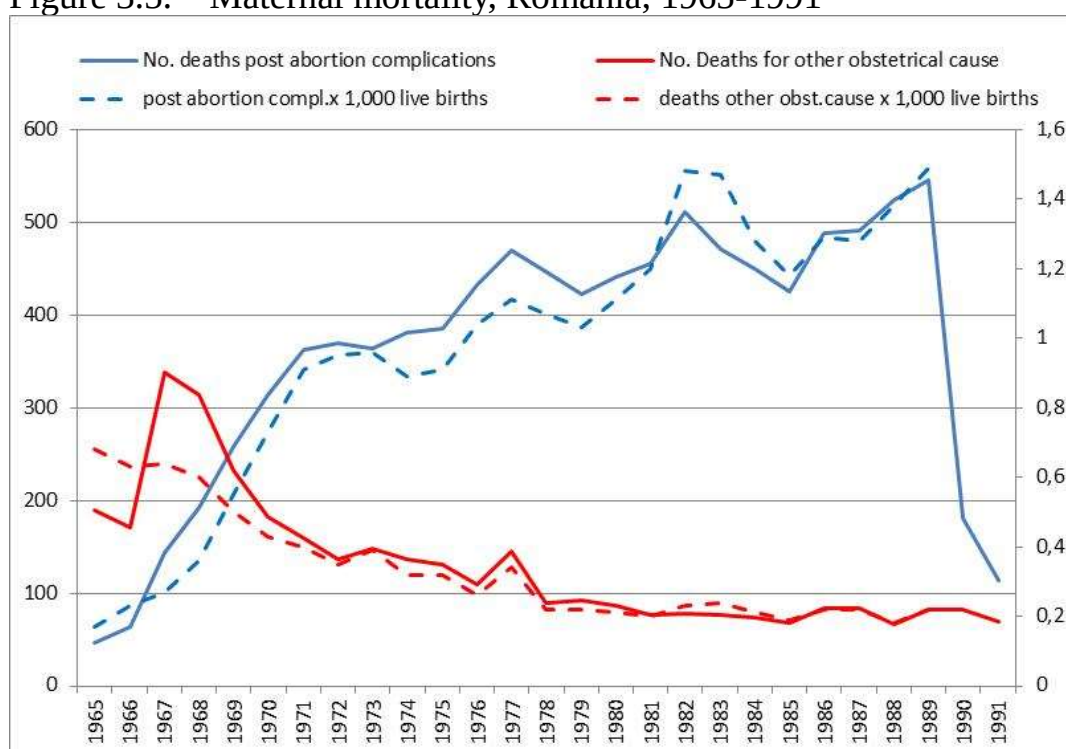


Women on trial for illegal abortions (Courtesy of the Photo Department, ROMPRES, Bucharest).

However, there was a relatively consistent relationship between the number of maternal deaths due to obstetrical risk and restrictive legislative activity: the number of maternal deaths due to causes other than abortion rose each time the abortion-related legislation was tightened—for example, in 1968, and again in 1973 and 1986 (after

which obstetrical risk again declined). Although such increases may be attributed in part to politically correct statistical manipulation, these temporary shifts better reflect the increase in the number of births and decrease in the number of illegal abortions immediately following abortion-related proscriptions. With the benefit of experience, social adaptation (including partial accommodation by the health system) to legal constraints occurred with greater rapidity (Kligman, 1998).

Figure 3.5. – Maternal mortality, Romania, 1965-1991



Source of data: Ministry of Health, Romania, 1996

The effects of the demographic policies may be seen in the abortion-related maternal mortality figures given (figure 3.5). In 1965, the last year when abortion was legal, of a total of 237 maternal deaths, 47 were due to complications stemming from abortion. In 1967, after Decree 770

had been in effect for one year, the number of maternal deaths had tripled, to 143 abortion-related deaths (of a total of 481 deaths). By 1989, 545 out of 627 deaths were due to post-abortion complications. As can be seen, the obstetrical risk for abortions initiated in hospitals was low. Over the years, the maternal mortality rate rose from 86 deaths per 100,000 live births in 1965 to 169 per 100,000 live births in 1989; of those, 87% were related to abortion. It has been estimated that during the 1980s, every year approximately 500 otherwise healthy women of childbearing age died from post abortion haemorrhage, sepsis, abdominal trauma, and poisoning (Kligman, 1998).

Despite the state's glorification of motherhood, between 1965 and 1989 approximately 9,452 women were said to have died from abortion-related complications (Newman, 1991). The chilling irony of Ceaușescu's pronatalist policies was that illegal abortion became a common method of fertility control as well as the predominant cause of mortality among women of childbearing age. If the state punishes physicians who, for humanistic or financial reasons, perform illegal abortions where legal abortion is severely restricted and modern contraceptive options are unavailable, an increase in maternal deaths due to unsafe abortions is inevitable (Baban, 1999).

Upon the fall of the Ceaușescu regime in December 1989, most women's

bodies were liberated from the grip of the centralized state. Virtually the day after the execution of the Ceașescus, abortion was fully legalized in Romania. Urban and rural women alike expressed gratitude for the legalization of abortion. The fear of unsafe abortion had coloured sexuality in Romania, especially the sexual lives of women, married or not. The decriminalization of abortion had an immediate effect on the number of legal abortions recorded, as well as on the number of abortion-related maternal deaths. In 1990 abortions (992,265) outnumbered live births (314,746) by a ratio of three to one. The total fertility rate quickly fell below replacement level. By the summer of 1990, the principal hospitals in Bucharest alone were each reporting 70 to 100 abortions performed daily (Baban, 1999).

Within one year, a dramatic drop in abortion-related maternal deaths was also recorded: from 545 to 181. Although the maternal mortality rate declined to 83 per 100,000 inhabitants, abortion-related deaths still accounted for 66 % of the 1990 total. So great were the traumas associated with the pronatalist policies that, months after the legalization of abortion, the Ministry of Health still received files of mothers who had died as a result of illegal abortions, unaware of the momentous changes. Moreover, according to Serbanescu, because nonmedical abortionists may be more accessible, more affordable, or more familiar, the practice

of illegal abortion was likely to continue, especially among women who seek abortion beyond the legal gestational limit of 12 weeks (Serbanescu et al., 1995).

A host of other problems affected women throughout the period of pronatalist policies. Doctors noted that women complained regularly about depression, nervous disorders, sexual problems, and social isolation (Viorica, 1985). Although post-abortion morbidity data are unreliable, health officials readily refer to problems that frequently resulted from illegal abortions: "damage to the uterine cervix, chronic infection, and severe anaemia that, in turn, increase the risk of postpartum haemorrhage and infection, infertility, preterm birth, and low birthweight" (Stephenson et al. 1992, p 1329). Serbanescu et al. have estimated that nearly 20 % of the 4.9 million women of reproductive age are thought to have suffered impaired fertility (Serbanescu et al. 1995,). Despite an assumed relationship between demographic policy and morbidity, there is little evidence to substantiate anything other than probable influences. It is extremely difficult to disaggregate factors that emerged from the consequences, intended or otherwise, of centralized planning and increasing neo-Stalinist state control, which, in turn, gave rise to diverse socio-psychological and physical ailments. It is the totalizing context of the Ceaușescu regime itself that must ultimately be

analysed. For women, the state's 'multilaterally developed' attempts to control their fertility were a source of tension throughout the childbearing years. To this were added everyday stresses—social, economic, medical, sexual—caused by the precariousness of existence in Ceaușescu's Romania (Kligman, 1998).

3.5. Infant and Child Mortality

Ceaușescu's pronatalist policies caused an increase in infant mortality, also because health facilities did not hold up to increased births.

Figure 3.6 – Abortions and infant mortality, Romania, 1965 1989



Source of data: Ministry of Health, Romania report to the World Health Organization, 1996

Over the years of communist rule in Romania, infant mortality declined markedly: for example, in 1948 there were 142.7 infant deaths for every 1,000 live births; by 1989 that number had dropped to 26.9 infant deaths for every 1,000 live births. Nonetheless, relative to infant mortality rates in other industrialized countries, the Romanian rate remained high.

Moreover, the figures are unreliable. Infant mortality rates in the former communist countries were generally underreported; in Romania, statistical distortion was politically motivated. Although the number of infant deaths dropped more or less continuously after the interwar years, the infant mortality rate varied in accordance with a number of factors, not the least of which was the number of births. As has already been discussed, the birth rate also tended toward decline—in spite of the demographic legislation, but in keeping with modern trends in industrialized countries.

Like the birth rate, infant mortality rates were affected by the abortion legislation. As Baban and David point out, the infant mortality rate had been at 46,6 in 1966 when Decree 770 went into effect; by 1968 it had climbed up to 59,9, giving Romania one of the highest rates in Europe—a distinction that would be maintained until the demise of the regime. Nonetheless, infant mortality did decline after 1968, until the next legislative decision, after which another slight increase occurred in 1974 (Baban, 1999).

An almost continuous decline followed, lasting until the next round of abortion-related legislation. Not surprisingly, infant mortality increased in 1984 and 1985, and hit a high in 1987. Although by 1989 the infant mortality rate had dropped to 26.9, it was still among the highest in

Europe. In comparison with most other countries, Romania's performance is poor. In Hungary, the infant mortality rate was 15.7 deaths per 1,000 live births; in Bulgaria, 13.6 deaths (Trebici, 1991). In 1990 Romania's infant mortality rate remained high, with 25.3 deaths per 1,000 live births recorded in the first six months (Hord et al., 1991).

Figure 3.7 – Number of abortions and maternal mortality, Romania 1965-1989



Source of data: Ministry of Health, Romania reported to the World Health Organization, 1996.

The positive relation between the criminalization of abortion and an increasing maternal mortality rate is stronger than that between criminalization and an increasing infant mortality rate (figure 3.6 and 3.7). Again, it is difficult to attribute direct causality, particularly in a context of worsening socioeconomic conditions. During the winter months, the lack of heating itself constituted a threat to infant survival. Paediatricians often mentioned this, also noting that hospitals in

Bucharest were better off than most others in terms of infrastructural resources. One physician whispered that the infant wards were the only ones heated regularly in Bucharest, an arrangement secretly agreed upon among medical personnel; this was an attempt to reduce the number of infant deaths. This same doctor doubted that hospitals outside of the capital possessed the necessary backup energy sources (Mezei, 1993).

Among the principal causes of infant death in Romania were malnutrition, respiratory ailments, and congenital anomalies (Mezei, 1993). Infants especially at risk were those whose mothers were 40 years of age and older (49.2 % had mothers in this age group), infants who weighed less than 3.2 kg at birth, and those who were born in rural areas. In 1988 infant mortality in rural areas was 27.8; in urban areas it was 23 (Rosca and Popescu, 1989).

Just as physicians were politically responsible for promoting the birth rate plan, so too were they responsible for reducing the high infant mortality rates. Doctors were called to task for "[not] respecting the obligatory program of home visits to evaluate a child's development and to detect the first signs of illness"²³. By 1988 the registration of live births

23 Raport cu privire la cauzele care au determinat scaderea sporului natural al populatiei si masurile ce se impun a fi luate de Consiliul Sanitar Superior, Ministerul Sanatatii si Comisia Nationala de Demografie, in vederea imbunatatirii indicatorilor demografici - Report on the causes that led to the decrease of natural population growth and the measures to be taken by the Higher Health Council, the Ministry of Health and the National Demography Commission, in order to improve the demographic indicators. Unnumbered.

was delayed, often up to 15 days. The official rationale for this delay was that those in rural areas where communication networks and transportation were more problematic would then have adequate time to report live births, deaths, and so on. But as many commented, this two-week period allowed time to determine whether an infant was likely to survive the first difficult phase of life, and to adjust infant mortality figures accordingly. If an infant died during this grace period, a doctor might attempt to convince the mother to agree to list the child as a stillbirth. A physician explained that if you were not registered alive, then you were not registered dead either, that is as an infant and child mortality statistic (Kligman, 1995).

However, not all mothers were prepared to cooperate with this strategy. Some were intent on receiving the minuscule financial compensation to which they thought they were entitled for bearing children, but in order to do so the infant had to be in the mother's care. A mother had to be convinced that declaring a child a stillbirth was a humanitarian gesture. Otherwise, the physician was potentially vulnerable to accusations and political trials. If the mother did not agree to reclassify her child's birth status, then the physician was subject to the fines related to not fulfilling the infant mortality plan (Kligman, 1995).

Children between the ages of one and four were also vulnerable to

premature death. In 1988, Romania had the highest European child mortality rate in this age group (2.2 %); respiratory ailments, accidents, and congenital anomalies ranked as principal causes (Malceolu & Iancu, 1989). Children living in rural areas, as well as adult males, were at higher risk than those in urban areas or adult females. Yet again, it is difficult to posit a direct causal relationship between child mortality and demographic policies. For example, a party activist, reporting in 1977 on the demographic situation in the Constanta region, summarized the diverse potential factors contributing to deaths among young children. Among these factors were the prevalence of infectious diseases, especially for children attending nursery school, where contagion was more likely. In this same discussion, attention was drawn to the problem of nutrition and its role in promoting good health (Malceolu, 1989). The quantitative measure of caloric intake suggested that the daily intake of children at nursery schools or kindergartens was actually somewhat higher than the necessary 1300 calories per day. However, this caloric excess was qualitatively problematic, most of these calories having come from processed carbohydrates such as flour and sugar products. The caloric intake from proteins, fruits, vegetables, and fats was insufficient (Malceolu & Iancu, 1989).

The divide between quantity and quality widened steadily in the 1980s.

Quantitative measures became the literal representations of the "new socialist person." Scientific or rational nutrition provided this newly constituted being with correlated height, weight, and caloric intake prescriptions. Pregnant women were instructed about proper diets so that the future labour force would consist of healthy, fit bodies. Quantitative data were modified as necessary. However, such sleights of hand could not be applied to everyday experience. Infants, children, and women—the objects of intense scrutiny—continued to die, despite the "ideal conditions" accorded their care by the paternalist state, which discursively championed their significance in the development of socialism (Malceolu & Iancu, 1989).

3.6. The comparative perspective: Moldova, Bulgaria, Russian Federation, Hungary

During the period 1960-90 unusually high levels of legally induced abortions characterized the communist countries of Eastern Europe. These countries, following the lead of the Soviet Union, were among the first in the world to liberalize access to abortions in the late 1950s (David, 1999).

In related work, Levine and Staiger (2004) looking at changes in abortion policies in Eastern Europe in the 1980s and early 1990s find that in countries that changed from very restrictive regimes to liberal regimes

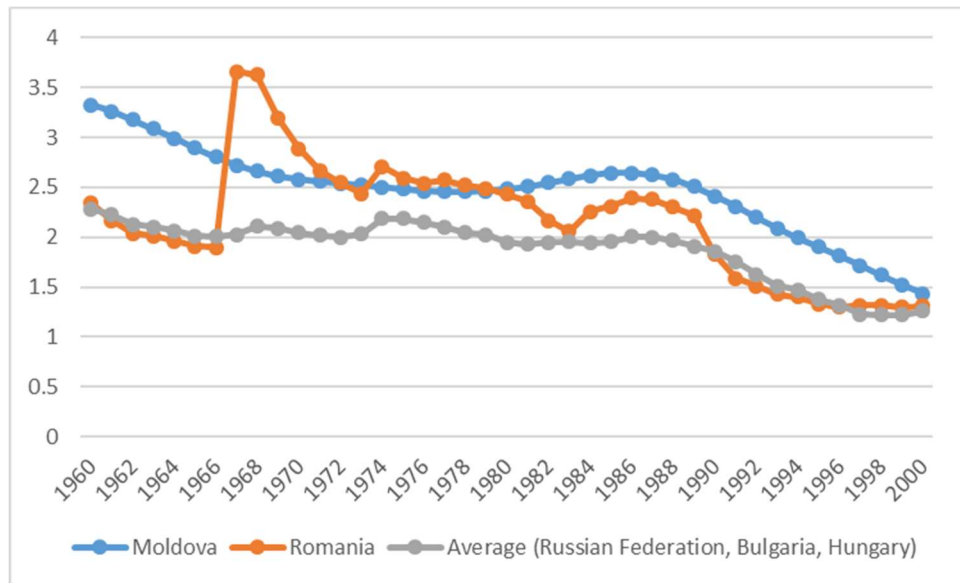
had significant increases in pregnancies and abortions and decreases in births of about 10%.

Compared to other countries in the region, Romania has long been a special situation in the field of demography and reproductive behaviour because of the radical changes in policy concerning access to legal abortion (Baban, 1999). Prior to 1966, Romania had the most liberal abortion policy in Europe and abortion was the most widely used method of birth control (World Bank, 1992). In 1965, there were four abortions for every live birth (Berelson, 1979).

The countries chosen for this comparison are characterised by overall social and cultural similarities with the Romanian context, and these common elements level the starting ground and explain the role of national policy in demographic output. Furthermore, abortion and modern contraceptives were legally available in the mentioned countries except Romania, both before and during the economic transition that started in 1990.

This type of discrepancy between comparable situations demonstrates the gravity of the situation created in Romania by the local demographic growth policy. The results were dramatic: Crude birth rates increased from 14.3 in 1966 to 27.4 in 1967 and the total fertility rate increased from 1.9 to 3.7 children per woman in the same period (figure 3.8).

Figure 3.8 – Total Fertility Rate (births per woman) - Romania, Bulgaria, Russian Federation, Hungary, Moldova 1960-2000



Source: United Nations Population Division. *World Population Prospects: 2019 Revision*.

The large number of births continued for about 3 years, after which the fertility rate stabilized for almost 20 years, albeit at a higher level than the average fertility rates in Hungary, Bulgaria, and Russia. The law was strictly enforced until December 1989, when the communist government was overthrown. This trend reversal was immediate with a decline in the fertility rate and a sharp increase in the number of abortions. In 1990 alone, there were one million abortions in a country of only 22 million people (World Bank, 1992).

Society, Family, Marxism and legislation. The State and its citizens

This chapter is dedicated to understanding the links between the ideology at the basis of the organisation of family and reproduction in Socialist Romania, in terms of archetypal aim, consequent jurisprudence, family structure and balance of power among family members. The analysis ultimately paints a metaphorical image depicting the totalitarian state as an incarnation of an autocratic patriarch that disposes of its citizens as it pleases, eliminating all individuality for collective purposes, compelling human being to breed generations of *tovarași*.

4.1. The Marxist family

The Marxist position on the family is found in “The Origin of Family, Private Property, and the State: in the Light of the Researches of Lewis H. Morgan” by Friedrich Engels (Engels, 1884). Its basic premise is that the patriarchal family and its subjugation and exploitation of women and children were born out of private-property relationships. Under socialism the abolition of private property would result in relationships between couples founded solely on love, and the emphasis on collective life

would diminish the importance of the family as a unit for nurturing children.

It is argued that the first domestic institution in human history was not the patriarchal nuclear family but the matrilineal clan.

Engels here follows Lewis H. Morgan's thesis as outlined in his major book, *Ancient Society* (Morgan, 1877). Morgan was an American business lawyer who championed the land rights of Native Americans and became adopted as an honorary member of the Seneca Iroquois tribe. Traditionally, the Iroquois had lived in communal longhouses based on matrilineal descent and matrilineal residence, an arrangement giving women much solidarity and power. Writing shortly after Marx's death, Engels stressed the theoretical significance of Morgan's highlighting of the matrilineal clan:

"The rediscovery of the original mother-right gens as the stage preliminary to the father-right gens of the civilized peoples has the same significance for the history of primitive society as Darwin's theory of evolution has for biology, and Marx's theory of surplus value for political economy." (Engels, 1884, p. 36).

4.2. The Evolution of Family Law

Family law in socialist Romania was modelled after Soviet family legislation. From the outset, it sought to undermine the influence of religion on family life. Under the *ancien régime*, the church was the centre of community life, and marriage, divorce, and recording of births

were matters for religious authorities. Under communism these events became affairs of the state, and legislation designed to wipe out the accumulated traditions and ancient codes was enacted. The communist regime required marriage to be legalized in a civil ceremony at the local registry prior to, or preferably instead of, the customary church wedding (Anton, 2009).

Overall, a more liberal legal atmosphere prevailed, granting women greater rights within the family. The predominance of the husband was reduced, and the wife was given equal control over children and property and was entitled to keep her maiden name. The divorce procedure was greatly facilitated. In fact, if both parties wanted a divorce, and there were no children involved, the dissolution of the marriage could be accomplished simply by sending a joint statement to the local registry office. In addition to the right to divorce with relative ease, abortion on demand was introduced in 1957 (Anton, 2009).

As already explained, because of the more liberal procedures, the divorce rate grew dramatically, tripling by 1960, and the number of abortions also increased rapidly. Concern for population reproduction and future labour supplies prompted the state to revise the Romanian Family Code to foster more stable personal relationships and strengthen the family. At the end of 1966, abortion was virtually outlawed, and a new divorce decree made

the dissolution of marriage exceedingly difficult (Anton, 2009).

As part of the program to increase birth rates, the legal age for marriage was lowered to fifteen years for women in 1984, and yet the rate of marriage remained quite steady--on average about 9 marriages per 1 000 people per year. The divorce rate remained well below 1 per 1,000 until 1974. A study published in 1988, however, showed that the divorce rate had risen steadily since 1974, although not to the pre-1966 level. It must be noted, however, that divorces were measured against the total population and not the total number of marriages, which disguised the rising rate. The primary causes of divorce were violence and alcoholism. The study concluded that marital instability was once again a growing problem (Baban, 1999).



The canning factory in Galați 1971. Copyright @Adevarul.ro

Much family legislation concerned women in the workplace and was

designed to increase the size of families. Provisions for pregnant women and working mothers were comprehensive and generous. Expectant and nursing mothers were not permitted to work under hazardous conditions, were exempt from overtime work, and after the sixth month of pregnancy and while nursing were exempt from night work--all with no reduction in salary. Nursing mothers were entitled to feeding breaks, which could total two hours per day-- also with no reduction in pay. In addition, women were allowed paid maternity leave of 112 days--52 days prior to and 60 days after delivery. They were also entitled to paid leave to care for sick children under three years of age. Without loss of benefits, mothers were permitted to take a leave of absence from work to raise a child to the age of six, or they could request half-time work (Baban, 1999).

4.3. Changes in Family Structure

Not only did households become smaller--mostly because of a lower fertility rate--there was also a transition from the traditional extended family of three generations in a single household to the nuclear family of only a couple and their children. By the late 1960s, only 21,5 % of families had grandparents living with them. This trend was hastened by improved old-age pensions that made it unnecessary for the elderly to live with their children and by the cramped quarters of urban living.

However, in the countryside, where about half of Romanian families still lived in the late 1980s, families tended to have more children, and extended families were common. And even when parents and their children lived in separate households, the close relations of kinship were not abolished, even after one or the other had moved to the city. Strong ties between households were evident in the extended family strategies that were aimed at maximizing resources by placing family members in various sectors of the economy. This process led to jointly owned property such as livestock, joint cultivation of garden plots, and shared material comforts from salaried labour (Baban, 1999).

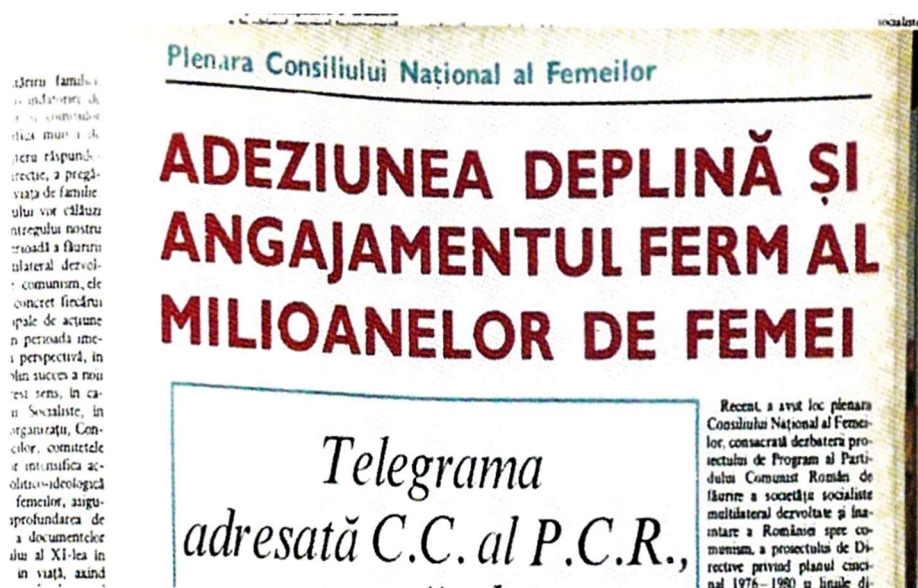
4.4. Family Life

The process of socialist modernization greatly affected family life. Through education and a comprehensive welfare system, the state assumed responsibility for providing assistance and transmitting values. Although the family was identified as the fundamental unit of socialist society, and it heavily influenced the values of the younger generation, its primary role had become population reproduction. Even that role was no longer a private matter, but was subject to the whim of government policy. But the prediction that socialism would provide for the transfer of domestic duties from the home to the public sector fell far short of fruition. In 1989 communal dining facilities and public laundries were

still largely unavailable, and because the tertiary sector of the economy received the lowest priority, services such as house cleaning, home repairs, and dry cleaning were either inadequate or non-existent (Baban, 1999).

Consumer durables to lighten the burden of housework were available only to a privileged few. In the late 1960s, only 7.3% of households had electric refrigerators, 22.6 % had gas stoves, 9.5 % had washing machines, 3.2 % had vacuum cleaners, and 38.8 % had electric irons. By the late 1980s, the situation had improved somewhat, but the majority still lacked these items. In addition to the difficulties associated with home maintenance, shopping for the family was laborious and time-consuming. The dearth of refrigerators and freezers forced most families to shop for food every day and because supermarkets were scarce, shopping entailed trips to several different stores where the customer typically had to stand in one queue to select merchandise and in another to pay for it. Many food items remained rationed until the fall of the communist regime (oil, butter, bread, etc.), whereas the consumption of everything else was scarce simply because it was not available because of Ceausescu's 1980's austerity policy aimed at eliminating external debt (Ban, 2012). Inadequate public transportation made shopping even more toilsome (Baban, 1999).

Family life for rural Romanians differed in many respects from that of urban families. Their living standards were lower, and they maintained values and behaviour patterns that were firmly rooted in traditional peasant life. The unavailability of electricity to many rural households made it impossible for them to use refrigerators and washing machines, which in many cases would have been prohibitively expensive. Even when electricity was available and they could afford the appliances, many peasant women still did their laundry at the stream because it was a traditional site of social interaction (Kideckel, 1993).



Article detailing the answer of the Plenary Session of the National Women's Council to the telegram sent by the Central Committee of the Romanian Communist Party: "full adherence and commitment of millions of women"... to the 5 years plan detailing demographic growth.

Likewise, many rural families eschewed refrigerators in favour of traditional ways of preserving food. Perhaps because farm produce was a source of income for many rural families, they consumed far less fresh

meat, vegetables, and fruit than urban families, and the staple of the rural diet remained maize porridge flavoured with cabbage, cheese, onion, or milk. This frugal everyday diet was interspersed with feasting on special occasions such as weddings, funerals, Easter, and Christmas (Kideckel, 1993).

Rural family life was much more heavily influenced by religion than was urban society. Romanian Orthodoxy, rich in tradition, dictated the rhythm of life in a calendar of numerous holiday celebrations. Church attendance in rural areas far surpassed that in urban places. Most rural people viewed the civil marriage ceremony required by the state as a mere formality and lived together only after a church wedding. In addition, divorce was much less common in rural parts. Rural families spent a remarkable amount of free time in church and in church-related activities. The average sermon lasted more than three hours. Visiting, folk music, folk dancing, and listening to the radio were other popular activities. Urban families, on the other hand, exhibited more secularized values and were more likely to use their free time to pursue cultural activities (Kideckel, 1993).

Although industrialization, urbanization, and education did not eliminate the cultural gap between rural and urban Romania, these processes did narrow it. Rural-urban contact occurred daily through commuting, and the

accoutrements of urban living trickled back to families even in the most remote areas. Furthermore, although the influence of religion was not eradicated, it certainly declined, especially in urban areas, creating an unforeseen problem. Surveys indicated that the socialist ethics and values that the state expected the educational system to instil had not filled the void left by fading religious values (Kideckel, 1993).



Union of Communist Youth (Romania). Source: National Museum of Romanian History. Exhibition 70s/80s, Our Youth

4.5. Emancipation and Women's Organizations

The socialist plan for the emancipation of women aimed to eliminate the barbarously unproductive, petty, nerve-racking drudgery of their lives (Kligman, 1998).



Example of propaganda: images from women's magazines, Femeia 1980

The subservience of women was to be ended by establishing the complete equality of the sexes before the law and by making women economically independent through employment outside the home. The legislation was easily accomplished, and Romanian women were indeed mobilized into the work force in large numbers. By 1970 some 74.9 % of working-age women (aged 20 to 59 years) were employed outside the home. But despite the theoretical commitment of socialism to eradicating sexual inequality, working women continued to bear the burden of caring for children, home, and husband. Romanian husbands tended to regard cooking, cleaning, laundry, shopping and child care as essentially female duties (Kideckel, 1993).



Ana Pauker, Romanian renown communist, the world's first female foreign minister (1947), at a feminist event in Romania in front of the banner. "Long live the world unity of women."

Consequently women were left with the lion's share of household responsibilities and far less time to pursue educational, recreational, cultural, or social activities (Kligman, 1998).

By the 1980s, illiteracy among females had long since been eliminated. Female enrolment in the primary education system was proportionate to their numbers, and a woman's access to higher education had also increased considerably. Some 44 % of students pursuing higher education were women--up from 32.8 % in 1945. Behind these figures, however, lurked stereotyped sex roles that were much more difficult to erase. Popularly held views continued to divide professions according to sexual suitability (Baban, 1999).



Example of propaganda: images from women's magazines, Femeia 1970

Studies showed that most girls chose traditional feminine specializations, such as education and the humanities, whereas boys tended to favour technical and scientific fields. Consequently, young men acquired skills and filled occupations that were held in higher regard and were better paid (Baban, 1999).

A similar fissure occurred in the industrial workplace, where patterns of sex discrimination clearly penalized women. Although opportunities abounded for those who wanted to work, women were found primarily in the ready-made clothing, textile, soap, cosmetics, and public health industries. They were also the majority in the shoe and food industries and in trade.



Article from a newspaper: *"Honoring mothers: a duty of conscience, a social duty"*

Thus women were concentrated in light industries, whereas economic development favoured heavy industry, which employed mostly men, was more modernized and automated, and paid better wages. Not only were women concentrated in branches of the economy where they laboured at more arduous tasks and earned less, women were seldom employed as supervisors, even in the sectors where they dominated in numbers. Women also made up more than 60 % of the agricultural work force, which constituted about two-thirds of the total female labour force (Kligman, 1998).

This sexual division of labour was due both to discrimination and to voluntary choices on the part of women not to enter certain professions and not to seek promotions. Generally, the primary factor in the decision to limit themselves was the double burden of homemaking and child

rearing, which left little time for professional preparation or extra responsibilities in the workplace.



Examples of front pages of the 'Femeia' Newspaper (The Woman)

In addition, men had negative attitudes toward women's careers. In a 1968 study to determine whether professional women were supported in their endeavours by their spouses, only 35 % of the husbands interviewed valued their wives' careers more than their housework. This attitude was reinforced by labor laws designed to protect women's reproductive capacities and provide for maternal functions, which prohibited women from working in particular occupations and placed restrictions on hours and work load in general (Kligman, 1998).

Although women represented some 30 % of the PCR membership in 1980, few actually participated in political activity. Of those women serving in government, most held less powerful positions at the local level or served on women's committees attached to local trade unions, where the work was largely administrative in nature. Women were

usually involved in issues of special concern to their gender, such as child care, or health and welfare matters, and rarely served on the more important state committees (Baban, 1999).

Unlike in the West, feminist groups dedicated expressly to the articulation and representation of women's interests did not exist in Romania. A national committee of prominent women headed by Ceaușescu's wife, Elena, was organized to advise the government on women's issues. There were also traditional women's groups, such as social and educational associations and women's committees attached to local trade unions. These organizations served the interests of the PCR first and foremost. The PCR officially regarded feminism and an independent women's movement as divisive and unacceptable (Kligman, 1995)

Clearly socialism had not resolved the conflict between the sexes, and although it provided equal access to education and employment, it did not provide equal opportunity to succeed. In that regard, Romania's experience was not very different from that of other countries, but it was ironic that such inequality between the sexes persisted in a country ideologically committed to its elimination.

4.6. The Individual and the State

The interests of states in social reproduction are often in conflict with those of women and families in determining biological or individual reproduction. Modern states and their citizens claim rights to self-regulate various reproductive concerns, such as contraception, abortion and adoption. From a certain perspective, reproduction serves as embodiment, as quintessential example to explain the complexity of formal and informal relations between states and their citizens (David, 1994). Another example would be the analysis of a state's tax system, which would provide an illuminating lens through which to study state-society relations: all citizens are subject to taxation, and many express their individuality through various forms of compliance, resistance and evasion.

In Romania, according to popular understanding, the state, the party, and the secret police were virtually synonymous with respect to their hypernym: 'the power'. These rhetorical devices distinguished 'they' from 'we', and in part legitimated acts of complicity with, and duplicity against, the state. Duplicity and complicity were crucial to both the endurance and the demise of the Ceaușescu regime. This imaginary collective subjectivity of the state was the result of its personification and definition in contrast with the individual. The state had needs and desires

that had to be satisfied. As such, it was embodied, corporeal. According to French social and political theorist Claude Lefort the socialist state reconstituted itself as 'People-As-One' (Lefort, 1986). This people's body, so to speak, was the property of the state, to be moulded and developed into the ideal socialist country. The state as personified being spoke incessantly about itself and exercised power in its own interests, presented as those of its citizens.

Through rhetorical, institutionalized, and disciplinary strategies, the state defined the parameters of the permissible and the acceptable, the limits of what could and would be tolerated. It also constituted a self-serving symbolic order to which interests other than its own were to be fully subjugated. Fertility control was a critical issue around which conflicts of interest between the state and its citizens, especially women, were likely to erupt. Socialist economies were dependent on the availability of labour, or human capital, and "reproduction of the labour force" became a *motto* of political rhetoric. To this end, reproduction was consciously politicized, especially in Romania (McIntyre, 1975). Demographic policy was the strategy by which the state controlled both social and biological reproduction for the "building of socialism." As anthropologists Faye Ginsburg and Rayna Rapp state, "*reproduction is a slippery concept, connoting parturition, Marxist notions of household*

sustenance and constitution of a labour force, and ideologies that support the continuity of social systems"(Ginsburg & Rapp, 1991, p. 311).

That reproduction has been politicized in all societies in one way or another is hardly surprising: reproduction provides the means by which individuals and collectivities ensure their continuity. By the politics of reproduction we broadly refer to the complex relations among individual, local, national, and global interests that influence reproductive practices, public policy, and the exercise of power. Otherwise stated, the politics of reproduction centre attention on the intersection between politics and the life cycle, whether in terms of abortion, new reproductive technologies, international family planning programs, eugenics, or welfare (Kligman, 1992).

Reproduction is fundamentally associated with identity: that of the nation as the imagined community that the state serves and protects, and over which it exercises authority, or that of the family and the lineage in the protection and perpetuation of itself and its name (Anderson, 1991). As mentioned above, social reproduction and biological reproduction secure the continuity of peoples in social units— couples, families, ethnic groups, and nations, in fact the banning of abortion is often heralded in the name of preventing the death of the nation, but discontinuity is also a possibility, and one that is frequently exploited for national(ist)

purposes (Gal, 1994). The failure to reproduce is instrumentally claimed by political 'entrepreneurs' to threaten the very existence of the family or the nation-state.

In view of the multiple interests and values attached to reproduction, it is understandable that reproduction is highly politicized, frequently at the expense of the concerns of individuals, especially women. It is equally understandable that individual, familial, and political interests in reproduction differ so dramatically. The state, as in Ceaușescu's Romania, may demand that women bear children in fulfilment of their patriotic duties; or, as in Deng's China, the state may restrict the number of children per family in an effort to curtail population growth.

Indeed, economic issues are always linked to social and biological reproduction. Cost-benefit considerations necessarily enter into individual as well as political calculations, the results of which are often at odds. Reproductive issues constitute a focus for contestation within societies as well as between them (Ginsburg & Rapp, 1995).

The intervention of states or governments into reproductive issues also blurs the distinctions between public and private prerogatives. In general, women are the most affected, although not exclusively so, by the transgression of embodied boundaries. Questions about the right to physical integrity of the body and what individuals do with them point

to issues of individual rights. And yet, in Ceaușescu's Romania, individual rights did not form part of public or private discourse (Petchesky, 1990). The state legislated social equality and ideologically supported social rights (e.g., jobs, housing, access to medical care). The banning of abortion and the bearing of children were related to citizens' obligations to the state that 'cared' for them (Mureșan et al., 2008). Individual rights were not at issue.

Ceaușescu's Romania presents an extreme instance of state intrusion into the bodies and lives of its citizens. It also represents "*the most striking failure of a coercive public policy designed to influence reproductive behaviour*" (David, 1994, p. 346). Banning abortion has never eradicated the practice of abortion—neither in repressive, totalising states such as Ceaușescu's Romania or Stalin's Soviet Union, nor western democracies.

An analysis of the politics of reproduction in Ceaușescu's Romania offers a dramatic illustration of a tragic reality that is historically and comparatively consistent. At the same time, it presents a detailed excursion into the everyday workings of a totalising regime. A focus on Ceaușescu's demographic policies serves other purposes as well. The contradictions, traumas, and opportunities that emerge from the banning of abortion are highlighted or made more explicit in non-democratic contexts, as are international responses to them. In a neo-Stalinist state,

the legitimate spaces in which citizens could seek refuge or resist the penetrating gaze of state surveillance were greatly reduced. The state's presence was maximal and abortion tourism was hardly an option for ordinary citizens of Ceaușescu's Romania since travel abroad was highly restricted.

In Romania, strict coercive pro-natalism served Ceaușescu's nationalism and megalomaniacal fantasies under the aegis of the political economy of socialism. Again, that reproduction of the labour force was claimed to be essential to the building of socialism. Socio-economic hardships were distributed across the majority of the population rather than differentiated by class.²⁴

24 During the last years of the Communist rule in Romania even Marx and Engels were controlled books. Left with nothing but classical literature, Romanians used other cultural references to conceptualise and formulate critique. An example is this passage from Alexandre Dumas' "Count of Monte Cristo" to explain what equality may mean. "Nay, madame; I would place each of these heroes on his right pedestal -- that of Robespierre on his scaffold in the Place Louis Quinze; that of Napoleon on the column of the Place Vendome. The only difference consists in the opposite character of the equality advocated by these two men; one is the equality that elevates, the other is the equality that degrades; one brings a king within reach of the guillotine, the other elevates the people to a level with the throne. (Dumas, Count of Monte Cristo, Chapter 6, p.4).

Anthropological elements and organisation of society in the totalitarian regime

The specific context in which the demographic policy was put into practice, with detailed reference to human behaviour and its related organisation of society, is fundamental in order to understand how the demographic policy was successful in obtaining the results discussed. In the case of Romania, the draconian measures would never have managed to dig so deeply into the actions of its citizens had they not been the object of a wider totalitarian regime.

5.1. The agricultural component

The share of the labour force employed in agriculture decreased to less than 30 % by 1981, and this decline was accompanied by the destruction of many aspects of the peasant way of life. By 1963 more than 95 % of all arable land was controlled by the state, either through collective or state farms. As a result, small-scale agriculture was no longer available to support the traditional peasant way of life, and the family was no longer the basic unit of production and consumption. The peasants who remained on the land were forced to participate in large-scale, stage-

managed agriculture that paralleled other socialist enterprises. The peasants were permitted to till small "private" plots, which in 1963 accounted for about 8 % of all arable land. But even cultivation of these plots was subject to state interference. Initially some violent protests against collectivization occurred, but on the whole, protest took the form of plummeting yields. This process not only adversely affected living standards for town and country alike, but increased party penetration of the countryside, further reducing peasant autonomy (Bideleux, 2007).

Several other factors contributed to the rural exodus and the decline of the peasant class, among them substantial wage differentials between agricultural and non-agricultural sectors. In 1965 peasant incomes were only half the national average. Although the state tried to remedy the situation by establishing minimum incomes in the 1970s, remuneration for agricultural labourers remained well below that for industrial workers. In 1979 the average agricultural worker's income was still only 66 % of the industrial worker's, and during the 1980s it rose to only 73 %. A persistent and wide disparity also existed between rural and urban standards of living. In the mid-1970s, the majority of rural households were without gas, not even half had electricity, and more than one-third were without running water. Even in the 1980s, washing machines, refrigerators, and televisions were still luxury items, and peasant

expenditures for them and other non basic items and for cultural activities remained conspicuously below those of industrial workers. In addition, rural citizens received lower pensions and child allowances and had much more limited educational opportunity (Kideckel, 1993).

Despite Ceaușescu's nationalistic glorification of peasant folklore and values, in the mid-1980s the Romanian peasant remained very much a second-class citizen. Adults perceived their lowly status and encouraged their children to leave the land. Young people were inclined to do so and showed a decided preference for occupations that would take them out of the village. The regime was unable to prevent this development because it lacked the investment capital to both provide amenities to the countryside and to continue its industrialization program. Consequently, the quality of the agricultural work force deteriorated to the point of inadequacy. As the young, educated, and ambitious abandoned the fields for the factories, the laborers left behind were older and, increasingly, female. Although they constituted only 14 % of the national labour force in 1979, women made up 63 % of agricultural labour. The average age of adult male farmers rose to 43.2 years in 1977 (Baban, 1999).

Many of these peasants were apathetic and, according to Ceaușescu, willing to spend their time drinking and gambling in local pubs instead of working on the cooperative farms. A 1981 survey showed that some

34 % of all agricultural cooperative members had avoided doing any work whatsoever for the cooperative during that entire year. Consequently, the regime had to mobilize soldiers, urban workers, college, high-school, and even elementary school students to work in the fields at planting and harvest time (Kideckel, 1993).

Ironically the systematization program, which placed plants and factories throughout the countryside to equalize living standards, actually made the situation worse. Even as demands were made for the peasantry to increase agricultural output, commuting from village to factory became a fairly widespread practice, drawing the best labour from an already deteriorated supply. As a result, many peasant families were transformed into extended households whose members participated in both farming and industrial work. In such families, at least one member commuted to a factory and worked for wages, whereas others worked on the cooperative farm to secure the privilege of cultivating a private plot. The factory wage raised the family's standard of living, and the plot provided fruits, vegetables, meat, and dairy products that the family could consume or sell for extra cash. Even when members of the family had permanently migrated to nearby cities, these mutually advantageous economic ties were maintained, somewhat ameliorating economic conditions in the countryside (Baban, 1999).

Some observers argued that this rural-urban nexus boosted support for the regime in the countryside and contributed to political stability throughout the 1970s, when commuting workers constituted some 30 % of the urban work force (50 % in some cities). Although commuters provided labour without aggravating the urban housing shortage, having a large number of peasants in the factories had certain disadvantages. The poorly educated and relatively unskilled peasant workers could not be fully integrated into urban industrial society. Most were deeply religious, and their lives centred not on work but on Orthodox rituals and family. Commuters were often absent because of village celebrations or the need to tend the household plot (Baban, 1999).

Peasant commuting also brought an increased awareness of the differences between rural and urban living conditions--particularly during the 1980s, when the overall standard of living sank to nearly unbearable levels. Rural areas were the most harshly affected, and despite the regime's efforts to restrict migration to cities, the process continued, albeit at a slower rate. In the late 1980s, the disappearance of the peasantry as a distinct class appeared virtually inevitable (Baban, 1999).

5.2. The proletariat

Creation of a class-conscious proletariat was a primary goal of the PCR.

Explosive growth in the industrial sector, which continually garnered the lion's share of investment capital, ensured the transformation of the economy and, consequently, the social structure. In 1950 industrial workers represented only 19 % of the employed population. By 1988 the proletariat accounted for some 60 % of the working population (Angrist, 2000).

The ranks of the working class swelled with peasants from the villages, some as commuting workers, but most as migrants who took up permanent residence in the cities. In 1948 only 23.4 % of the population lived in cities, but by 1988 over half were urban dwellers, most of whom had been born and raised in the countryside. In the late 1970s, some 60 % of residents in the seven largest cities had rural origins. These workers exhibited roughly the same traditional peasant characteristics as peasant workers who retained residences in the villages. Generally, they were members of the Orthodox Church, parochial, poorly educated, and relatively unskilled. Values inculcated by church, family, and village were not easily pushed aside, and rural-urban migrants had tremendous difficulty adapting to the industrial work place. As a result, alcoholism and absenteeism were recurring problems. Moreover, neither commuters nor rural-urban migrants were interested in the political activity demanded of a class-conscious proletariat. In contrast, the small pre-war

industrial working class was a much more urbanized, skilled, and politically active group, which felt an affinity with the new regime not shared by those of peasant origin (Kideckel, 1993).

As industrialization and urbanization progressed, the working class became more differentiated by type of industry and work process and by age group and social origin. The working class as a whole continued to exhibit very little class consciousness or solidarity. Over the years, as the standard of living slowly rose, the working class was accorded special advantages, and the circumstances of workers improved compared to other social groups. Socialist income policies reduced wage differentials between blue and white-collar workers, so that by the 1970s many skilled workers earned as much or more than their better-educated compatriots. Likewise, urban workers gained the most from comprehensive welfare and social services introduced under socialist rule (Baban, 1999).

Although it was never a significant source of political leadership, the working class initially was generally satisfied with its special status and at least tacitly approved of the regime and its policies. Later years, however, witnessed a growing discontent among the rank and file of the proletariat, much of which was related to working conditions. The most common complaints concerned poor pay and slow advancement. Increasingly workers blamed the regime and the bureaucratic centrality

planned economic system for problems in industrial enterprises. They believed that the system's waste and inefficiency not only affected wages and promotions, but also contributed to the precipitous decline in the standard of living. Although the late 1980s brought increases in wages, compared to other East European countries, wages remained quite paltry. Small as the increases were, they created inflation because of the scarcity of consumer goods. The regime sought to relieve workers of a portion of their disposable income by forcing them to buy shares in their factories, which was tantamount to confiscation and forced saving in that there was no popular control over these funds. The regime's inability to shorten the forty-eight-hour work week also provoked discontent, especially in light of the calls for citizens to devote an increasing number of hours to unpaid 'patriotic work' on their day off (Angrist, 2000).

In 1989 almost all Romanian workers belonged to trade unions, which were organs for worker representation in name only. In reality the unions, which were controlled by the party after 1947, functioned as transmission belts carrying directives from the central administration to the rank and file and as tools of political socialization to inculcate desired attitudes and values. Workers had to join trade unions to receive social welfare and many fringe benefits (Baban, 1999).

In 1971 workers' councils were established at enterprises, ostensibly to

involve workers in economic decision making but in reality to shore up support for the regime. Few workers viewed the councils positively. Data collected in the mid-1970s indicated that only one-third of workers actually submitted suggestions to their council, and of those who did so, only 40 % thought their recommendations could influence enterprise policy. Most workers did not even know who their representatives were and did not participate in the councils, which were dominated by the same persons who directed other party, state, and mass organizations (Angrist, 2000).

Although workers shunned officially sanctioned channels, they covertly expressed their dissatisfaction through low productivity, absenteeism, and general apathy. The older and most skilled workers seemed least satisfied and frequently changed jobs in search of better positions and higher wages. By the late 1970s, some workers were airing their grievances in mass protests. In 1977 some 35,000 miners in the Jiu Valley went on strike to protest food shortages and new regulations that forced older workers to retire with reduced benefits. In 1979 roughly 2,000 intellectuals and workers attempted to form a free trade union and called for improved working conditions, abolition of involuntary labour on weekends, official recognition of a national unemployment problem, and an end to special privileges for the party elite (Angrist, 2000).

Working-class discontent continued to grow in the 1980s. The majority of older workers expressed dissatisfaction with pay and wanted stronger links between individual productivity and wages, objecting to the pay system that penalized all workers if the enterprise did not fulfil its production plan. Forced 'patriotic labour' continued, and each citizen was required to work six days per year at local public works or face stiff penalties. Complaints about inequitable distribution of resources among social groups became more frequent, and the perquisites for the party elite, such as chauffeured limousines and palatial residences, drew bitter criticism. In late 1987, mass demonstrations and riots occurred in Brasov. Angry workers protested pay cuts for unfilled production quotas, energy and food shortages, and the regime's repression. They burned portraits of Ceaușescu, ransacked city hall and local party headquarters, seized personnel records, and looted party food shops. There were rumours of similar incidents in other major cities as well (Angrist, 2000).

Although public protests were swiftly and brutally suppressed, worker dissatisfaction continued to smoulder. But the majority of workers, perhaps because of chronological and psychological ties to a peasant past, were predisposed to react to even the direst conditions with passive hostility rather than active opposition. At the close of the 1980s, the working class was sullen and dispirited to the point of apathy (Kideckel,

1993).

5.3. The intelligentsia

Traditionally the Romanian intelligentsia--the educated elite of society--had been the children of the landed aristocracy who had moved to cities to become poets, journalists, social critics, doctors, or lawyers. Given the country's overall situation, any education beyond the elementary level accrued special privileges and high social status. The intelligentsia played a leading role in the life of the nation, providing a humanistic voice for major social problems, shaping public opinion, and setting value criteria. After 1918, as the aristocracy declined, the class of intellectuals and professionals grew stronger. Throughout the interwar years, many of them occupied high political positions and were quite influential (Bachman, 1989).

During the first decade of communist rule, the old intelligentsia were all but eliminated. They lost their jobs, and their possessions were confiscated. Many were imprisoned, and thousands died or were killed. Those who survived the purge were blackmailed or frightened into submission and collaboration with the new regime. The intellectual arena was cleared of any opposition to communist power and policies, leaving the ruling party free to create a new intelligentsia--one that would be unquestionably loyal, committed to the communist cause, and easily

manipulated. The traditional role of the intelligentsia had been irreversibly changed (Kligman 1999).

The party set out to educate a new intelligentsia that would meet the needs of the crash program of industrialization. The number of people with secondary or higher education rose dramatically. From 1956 to 1966, the total number of Romanians with a higher education increased by 58 %, and the number of students enrolled in universities more than doubled. A quota system that favoured the children of peasant and proletarian families ensured the desired social composition of this rapidly expanding student population. Children of middle-class families were kept to a minimum by a selection system that allocated more points for social origin than for academic qualifications. At the same time, the establishment of the new political system, with its many institutions necessary for administering the centrally planned economy, required an ever-increasing number of white-collar workers. The regime was eager to pull these workers from the ranks of peasantry and proletariat, regarding them as more politically reliable. By 1974 more than 63 % of non-manual workers were sons and daughters of proletarian families. This prodigious social advancement produced a highly diverse intelligentsia. The intellectual elite was composed of two main subgroups--a creative elite similar to the traditional intelligentsia

involved in scholarly and artistic pursuits, and a new technocratic elite involved in industrial production and management (Bachman, 1989).

In contrast to the interwar period, when the intelligentsia shared the political stage with the ruling establishment, the role of intellectuals in socialist Romania became one of total subservience to the ruling elite. This reversal was particularly stifling for the creative intelligentsia, whose new mission was to paint a picture of socialism that was pleasing, reassuring, and convincing to both the masses and the regime. Under such conditions, freedom of expression and creativity evaporated. As a reward for conformity and demonstrated ideological commitment, the new members of the creative intelligentsia received social and material privileges. Despite reduced wage differentials between white- and blue-collar workers and despite the regime's emphasis on the more technical professions, the new intellectual elite exhibited a marked disdain for manual labour. The intellectuals showed a marked preference for the same fields their predecessors had most highly regarded--philosophy, history, literature, and the arts. It was toward these endeavours that they encouraged their children. The interests of the intelligentsia were strikingly at odds with party canon, which maintained that the intelligentsia was not a class but a separate social stratum working in harmony with the proletariat and performing the leading creative,

executive, and administrative roles (Bachman, 1989).

As the technical intelligentsia grew larger and had a more powerful voice in management, its members too were seen as a threat to political authority. Although increasing the quality and quantity of industrial production was the goal of both the PCR and the technical intelligentsia, the means to that end was common cause for disagreement between loyal but technically incompetent party careerists and the younger, better educated technocrats. Indicative of the rancour between the two was the latter's undisguised contempt for General Secretary Ceaușescu (Baban, 1999).

Until the late 1960s, the PCR leadership, despite some mistrust and aversion toward intellectuals, acknowledged that the cooperation and participation of skilled professionals was critical for the country's economic development. But with Ceaușescu's rise to power, hostility toward the intelligentsia grew. In the early 1970s, an anti-intellectual campaign was launched to eradicate 'retrograde values'. Ceaușescu criticized the intelligentsia for their bourgeois and intellectualist attitudes. Members of the technical intelligentsia were accused of resisting party policy, and thousands were dismissed from research and administrative positions and reassigned to more overtly productive work. Writers and artists were denounced for works that did not proclaim the achievements

and goals of socialism and aid in the creation of the new socialist man. The Writers' Union purged members who did not show renewed commitment to ideology and patriotism (Bongaarts,1994).

Throughout the 1970s and 1980s, as the Ceaușescu personality cult permeated society, cultural conditions became increasingly repressive. The media were reorganized to allow for more stringent control, and the number of correspondents sent abroad was sharply reduced. Western journalists increasingly were refused entry, and those who were admitted had very limited access to information. Foreign journalists who dared to be critical were kept under police surveillance and frequently expelled (Bongaarts,1994).

As nationalistic overtones grew more strident, restraints on scholars wanting to study in the West increased. The length of time permitted for research was reduced from ten months to three months. In later years, the regime consistently refused to allow students or scholars to take advantage of academic opportunities abroad. The number of United States lecturers in Romania under the Fulbright program dropped from ten to five, and the number of Romanian lecturers in the United States decreased from thirty-eight in 1979 to only two in 1988 (Baban, 1999).

As the anti-intellectual campaign continued into the 1980s, intelligentsia membership in the PCR declined sharply. In the late 1960s, before the

onset of the ideological campaign, roughly 23 % of PCR members were from the intelligentsia. By 1976 the figure was only 16.5 %. At the end of the 1980s, the intelligentsia was the least satisfied of any social stratum. Probably neither the technical nor the creative elite would have argued for the more heroic version of socialism, with its devotion to egalitarianism and the disappearance of class differences. On the contrary, members of the intelligentsia strongly believed that they deserved certain privileges. They were especially unhappy with salary levels, the party's stifling control over their careers, and their insecure position in society (Bongaarts,1994).

Despite the high level of discontent among the intelligentsia, there was relatively little overt dissent against the regime. In 1977, following the Helsinki Accords, a dissident movement involving several intellectuals under the leadership of the prominent writer Paul Goma did surface. After publicly condemning the regime's violation of human rights, many members of the group were arrested, interrogated, or confined to psychiatric hospitals. Later that year, Goma was exiled to the West. In the 1980s there were sporadic cases of dissent, but most intellectuals expressed their dissatisfaction by withdrawing into their private lives and avoiding, as much as possible, participation in institutionalized forms of public life (Bongaarts,1994).

5.4. The political nomenclature

Before the Soviet imposition of a communist regime in 1945, party membership had been negligible, but immediately thereafter membership soared, reaching 250,000 by the end of that year. Most of the new members were from the working class or peasantry, or claimed to be, and by virtue of their social origins were considered politically reliable. Most joined the party for opportunistic reasons rather than out of new-found loyalty to the communist cause. These workers and peasants, although relatively uneducated, were hastily inducted into the *nomenclatura*-- lists of key party and state positions matched with politically reliable candidates. They were immediately eligible for some of the most powerful positions the party had to offer, and they soon had cause to develop a sense of loyalty to the political establishment and its communist principles (Baban, 1999).

After the first decade of communist rule, the PCR membership included about 5 % of the population over twenty years of age. Most of the members were over forty years old. The social composition of the party in 1955 revealed the favoured position of the working class; though workers accounted for only 20 % of the general population, they represented 43 % of the membership. Peasants, the majority of the population, were underrepresented at only 34 %--still a remarkable

figure when compared with their political position in the *ancien régime*. The intelligentsia, although overrepresented with 23 % of the membership for their 9 % of the population, had less influence than before the war (Kligman, 1998).

By the mid-1950s, a new political elite had emerged--the party careerists. Most were increasingly dogmatic functionaries, primarily of peasant origin, who had from the beginning occupied the key posts of the nomenklatura. As such, they had served as the driving force behind the massive social and economic transformation of the country and had risen to positions of relative comfort and security. By the late 1950s, however, the old guard was beginning to lose key positions to a growing class of better educated and more competent technocrats. It was a more liberal climate in which technical skills were better appreciated, and important appointments were based more on qualifications than on political loyalty. For a while the apparatchiks successfully resisted this trend, but as a result of the demand for technical competence, many were demoted to less important positions or removed to the provinces. The rapid growth of higher education provided an ever-increasing number of young technocrats to replace the party careerists. After Ceaușescu consolidated his power, however, the period of political liberalization came to an end. By 1974, with the anti-intellectual campaign well under way, the party

careerists were again firmly entrenched (Kligman, 1998).

The social composition of the PCR in the 1980s affirmed that the battle against the intellectuals had been won. In 1987, 80 % of the 3.6 million PCR members were of working-class or peasant origins. Approximately 10,000 of these members constituted the central nomenclatura--the true political elite. This elite, especially its core--the Political Executive Committee--was empowered to steer societal development in the direction it deemed necessary and became the sole arbiter of the nation's social values (Baban, 1999).

That poorly educated bureaucrats dominated the party and government had severe consequences for society. The low standard of living and cultural repression of the 1980s were directly attributable to the attitudes and values of this ruling elite, who were anti-intellectual, antitechnocratic, hostile to change, and increasingly xenophobic and isolationist. More specifically, these prejudices were the attitudes and values of President Ceaușescu, who presided over probably the smallest ruling elite in Romanian history. Ceaușescu surrounded himself with party careerists who unabashedly contributed to his personality cult, and he installed members of his immediate and extended family in the most powerful party and government positions (Bongaarts, 1994).

The political elite enjoyed a lifestyle much different from that of most

citizens. Members of this group lived in palatial homes expropriated from the previous elite, were cared for by servants, protected by bodyguards, and whisked to work in limousines. They had exclusive access to special shops and commissaries that offered a wide variety of food and luxury items. Ceaușescu lived in regal splendour. His residence in suburban Bucharest was protected by guards and traffic blockades. Several castles and palaces were renovated for his personal use and were no longer open to public visitation. He and his entourage travelled in a fleet of luxury cars, for which all traffic was stopped (Bongaarts,1994).

The conspicuous perquisites enjoyed by Ceaușescu and his circle created resentment among the population, which was suffering from economic and cultural atrophy as well as political repression. Dissidents of various backgrounds called for the abolition of special privileges for the ruling elite, and by the late 1980s disaffection was evident at all levels of society.

In the past, nationalism had played an important role in the legitimacy of the ruling elite and in mobilizing support for its plans for the country. By the late 1980s, however, nationalistic fervour was waning. The Soviet Union appeared much less threatening, and more than a few Romanians were drawn to Mikhail Gorbachev's political and economic reforms. Ceaușescu's periodic mobilization campaigns during the 1970s and 1980s had damaged relations between the ruling elite and the rest of

society to the point that more and more citizens were reluctant to rally around the PCR and were less accepting of its close-fisted political control and economic policies. Average citizens were weary of sacrificing to build a socialist utopia for posterity and would have preferred a higher living standard in their own lifetimes (Kideckel, 1993).

Declining social mobility was another important factor in the growing discontent among the citizenry. The economic development following the imposition of communist rule created considerable upward mobility. The fast-growing industrial sector demanded more laborers, skilled workers, and managers. The ever-expanding state bureaucracy required an army of clerks and administrators, and the regime needed thousands of writers, artists, and philosophers to help create the new socialist man and woman. The rapid development of free education combined with the demographic policy created a demand for teachers. In 1969 more than 83 % of the working population were the product of this mass social mobility and held positions of greater status than had their fathers. More than 43 % of those in upper-level positions had working-class origins, and 25 % had peasant backgrounds. In contrast, only 14 % had roots in the intelligentsia (Kideckel, 1993).

As the economic transformation slowed, such phenomenal social mobility was no longer possible. Fewer positions at the top were being

created, and they were becoming less accessible to the children of workers and peasants. The new economy demanded skilled personnel, and educational credentials became more important than political criteria for recruitment into high-status positions. Statistics showed that children of intellectuals and officials were far more likely to acquire these credentials than were children of peasants and workers. In the late 1960s, when peasants and workers constituted over 85 % of the population, their children made up only 47 % of the university student body, whereas children of the intelligentsia filled 45-50 % of university slots. Moreover, members of the intellectual elite were more likely to find places for their children in the most prestigious universities and faculties, whereas students from worker and peasant backgrounds were concentrated in the less sought after agricultural and technical institutions (Kideckel, 1993).

Such inequalities persisted into the late 1980s, largely because children of the intelligentsia had better opportunity to acquire language facility and positive attitudes toward learning. Furthermore, these families were abler to prepare their children for the competitive selection process through private tutoring. Some resorted to bribery to obtain special consideration for their children. A child from an intellectual family had a 70 % chance of entering the university; the child of a worker or peasant had only a 10 % chance (Bongaarts, 1994).

Despite the regime's repeated assaults on the intelligentsia and the ideological efforts to elevate the status of blue-collar work, most citizens continued to aspire to intellectual professions. Studies conducted in the 1970s at the height of the ideological crusade against intellectualism and the privileged class revealed that the majority of young Romanians planned to pursue higher education. Virtually none declared any desire for a blue-collar career. And yet as a consequence of the party's effort to channel more of the population into production jobs, opportunities for professional careers grew increasingly rare. Enrolment in technical schools had increased to 124,000 by the end of 1970, which provided a surfeit of low-paid, low-status engineers (Bongaarts,1994).

In the 1980s, it appeared that the boundaries between the social strata were beginning to harden. Research conducted in the mid-1980s suggested that some 87 % of citizens born into the working class remained blue-collar workers. The intelligentsia showed an even greater degree of self-reproduction, and the rate of downward mobility from the intellectual elite into other social categories was remarkably low--lower in fact than in any other European member of Comecon. The hardening stratification along traditional lines gave evidence of a growing class consciousness, which was most evident among the intelligentsia, whose values, attitudes, and interests differed from those of other segments of

society. Workers, too, exhibited increased class consciousness, as their aspirations and expectations went unfulfilled. Not only did social mobility in general decrease, it also declined within the working class itself, creating greater potential for social unrest (Kideckel, 1993).

6

The systematization of Repression within the Demographic policy

The subject of this chapter is the analysis of how the state worked on its various bodies -political and physical- to produce institutional consent for and in complicity with the demographic policies. It shows the complexity, totality and unequivocal nature of the system put in place in order to narrate how such a violent policy was put into practice.

6.1. The State

Among the institutions that played a significant if largely symbolic role in legitimating state power in Romania was its 'supreme body', the Grand National Assembly. All members were formally elected, making them participants in what was later to be known as Ceaușescu's 'original democracy'. As in any democracy, the Grand National Assembly was meant to serve a legislative function. Indeed, it did; however, the Grand National Assembly served the legislative power of the state rather than that of the people.

It fell to this elected political body to approve and apply the legislative decisions of the Party /State, which represented the only real as well as

self-proclaimed power. In turn, the Grand National Assembly embodied the 'people's will' of the Party/State. Under his rule, their distinctions were skilfully consolidated to be used in the service of promoting the personality cult. In actuality, the Grand National Assembly was dominated by the party, many of whose Central Committee members served in it. As a result, they were able to exert control over the Assembly's activities; moreover, their presence ensured that the Grand National Assembly was complicit with state power, in the name of the Romanian people. Through its ritualized participation in original democratic politics, the Grand National Assembly legitimated the utopian goals of the Romanian Communist Party (Soare, 2013).

The rhythm of socioeconomic development in the Socialist Republic of Romania was metered according to the five-year plan. The five-year plan may be viewed as a centripetally oriented, hierarchically organized framework for controlled socioeconomic change, which targeted all aspects of the organization and functioning of society.

The plan operated in two interdependent contexts: that in which political decisions were made, and that in which these political decisions were translated into social and economic practices. Each new five-year cycle was formally authorized at the Party Congress that took place one year before the plan's functional institutionalization (a Party Congress was

held in the fourth year of any five-year cycle; after 1967 interim national party conferences were held to evaluate and adjust the plan's targets). The plan was implemented at each institutional level and in each state institution. In this manner, the five-year plan provided a blueprint for institutional control and for locating institutional complicity in time and space (Soare, 2013).

Every year, one of the standing commissions of the Grand National Assembly -the Commission for Health, Work, Social Security, and Environmental Protection- formulated a series of measures pertinent to these domains; upon enactment, they had the authority of law. It then fell to the appropriate ministries and specialized political bodies to flesh out the details of these measures and put them into practice. Concerns related to demography in general and to human reproduction in particular were accorded preferential status in the commission's deliberations. Illustrative of the kinds of directives issued annually were:

- acquisition of thorough knowledge of the evolution of demographic phenomena;
- periodic analysis of the means by which demographic indicators are realized and the implementation of measures to influence favourably this evolution;

- reduction of the number of interruptions of pregnancy, particularly of self-provoked abortions;
- discovery and combating of risk factors that endanger the health and lives of women and children;
- supervision and control over the execution of the laws pertaining to labour protection and women's health in socialist enterprises during a worker's pregnancy and maternity leave, especially for those who work in toxic environments or with pollutants;
- intensification of educational efforts about health with regard to the creation of families and the combating of sterility and infertility among couples without children;
- examination of the causes that contribute to the maintenance of a high level of general and infant mortality, and the introduction of appropriate measures to ensure the population's health and to combat risk factors;
- increase in the regulation, discipline and responsibility of the medical personnel for the quality and execution of medical practice; elimination of their violation of the laws regarding the interruption of the development of a pregnancy.

At face value, these general prescripts appear to be reasonably straightforward. They were not. The gap between political rhetoric and

its translation into everyday practices was in fact a rupture between appearance and experience. Semantic manipulation, especially through the usage of ambiguous formulations, became a regime trademark and functioned as an effective means of symbolic domination (Kligman, 1998).

When applied, the above directives roughly meant that all actively employed women between the ages of 16 and 45 were to be examined to determine whether they were pregnant or suffered from any condition that might negatively affect a pregnancy.

Those who had had abortions or who, in the first two years of marriage, had not produced a child were to have their medical histories followed. The state police and Attorney General's offices were to coordinate efforts to break up the networks through which illegal abortions were arranged. The medical commissions were to be under permanent surveillance to guarantee adherence to the Ministry of Health's instructions regarding the interruption of pregnancies and the treatment of incomplete abortions. The prescriptions and proscriptions designed to control reproductive activities contributed to an Orwellian organization of social reality (Kligman, 1998).

Official policy was instrumentalised through a constellation of public institutions and organizations whose administrative and political

activities were inter-coordinated in which the distinction between administrative and political functions was heuristic, the former being charged with the organizational implementation of policy, by definition political.

Among the diverse institutions and organizations engaged in carrying out demographic dictates were the Ministry of Health, the Red Cross, the National Women's Council, the Union of Communist Youth, the General Union of Romanian Trade Unions, the Ministry of Interior Affairs, the Attorney General's Office, the Schools of Medicine, the Institute for Maternal and Child Welfare, the Ministry of Labour, the Ministry of Tourism, the Council for Socialist Culture and Education, the Ministry of Education and Teaching, the Ministry of Justice, the Ministry of Food Industry, the Ministry of Chemical Industry, the (regional, municipal, city, and community) Popular Councils, etc. For example, the Ministry of Tourism's role in fulfilling reproductive norms was to encourage the use of natural cures offered at mineral spas for the treatment of and recuperation from gynaecological ailments. Together with the Ministries of Health and Labour, the Institute for Spa Therapy and Medical Recuperation, and others, the Ministry of Tourism was charged especially with combating sterility and infertility (Kligman, 1998). The institutional division of labour and responsibility with respect to these

policies was outlined in the *"Program pentru aducerea la indeplinire a sarcinilor si masurilor stabilite de Comisia pentru sanatate, munca, asigurari sociale si protectia mediului a Marii Adunari Nationale asupra indeplinirii cu mai multa fermitate si raspundere a directivelor de partid si a reglementarilor referitoare la cresterea demografica a populatiei"* (Program to carry out the tasks and measures established by the Commission for Health, Labor, Social Security and Environmental Protection of the Grand National Assembly on the more firm and responsible fulfilment of party directives and regulations on the demographic increase of the population) issued by the Ministry of Health in 1987.

To coordinate the activities of all of the institutions directly involved in implementing the policies related to natality, a supra-organization subordinate to the Grand National Assembly was created in 1971: the National Demographic Commission (NDC). This commission functioned for twelve years after which it was supplanted by the Higher Council on Health (HCH), which had been inaugurated in 1969 (Decree 541 of July 29, 1969, published in Buletinul oficial, Part 1, no. 81, July 29, 1969) to analyse the status of the country's health care and to propose measures to improve it. Despite these institutional efforts, the birth rate continued to decline. Although the number of institutions formally

associated with the demographic policies had grown, their efficacy had not.

The eclipsing of the NDC by the HCH did, however, produce a change in the hierarchy of power as well as in the means and modalities of executing institutional responsibilities. Comparison of these two different phases of institutionalizing demographic policies sheds light on the politics of their respective eras. Moreover, an understanding of the institutions that served the state's interests provides a partial context in which to understand how the intelligentsia participated in their own domination by the state and, in turn, in the reproduction of that domination throughout society (Kligman, 1998).

6.2. The National Demographic Commission

One of the primary reasons for creating the National Demographic Commission in 1971 was to have an institutional base from which to legitimate Romania's candidacy to host the World Population Conference in 1974 (Zlatescu et al., 1984). The constitution of the National Demographic Commission was formalized in Law 3, March 18, 1971, and published in *Buletinul oficial*, no. 35, on that day; it was modified by Decree 58 of the Council of State on February 27, 1974, and Decision 27 of the Council of State, March 5, 1974. Modifications spelled out the creation of county and municipal demographic commissions

subordinated to the National Demographic Commission.

Concerning the World Population Conference, seizing a diplomatic opportunity, Romania submitted its name for consideration. In 1973, after two years of negotiations, the UN Economic and Social Council conferred this honour on the Socialist Republic. The Romanians intended to demonstrate to their Western partners that the demographic measures taken in 1966 formed an integral part of Ceaușescu's socioeconomic development strategy. The World Population Conference held in Bucharest in August 1974 offered the Romanians useful tools for consecrating and extending their demographic initiatives (Kligman, 1998).

Article 95 of the World Plan for Action in the Domain of Population stipulated: "Population measures and programmes should be integrated into comprehensive social and economic plans and programmes, and this integration should be reflected in the goals, instrumentalities and organizations for planning within the countries. In general, it is suggested that a unit dealing with population aspects be created and placed at a high level of the national administrative structure and that such a unit be staffed with qualified persons from the relevant disciplines" (United

Nations, 1972, p. 166²⁵).

As noted in the UN regulations, the means by which these recommendations were applied in each country were to be determined by that country, thereby respecting the dictum of non-interference in the internal affairs of a sovereign state. In the case of Romania, the declaration of universal principles served as an umbrella under which diplomatic collusion with Ceaușescu's internal practices occurred (Kligman, 1998).

Such inadvertent international complicity facilitated the promotion of political, military, and economic interests; it also contributed to the widening distance between what was preached and what was practiced in Romania itself. At that time, the divergence between declarations of intention and the concrete means used to realize them was much less visible than it later became. Between 1966, when the anti-abortion law was introduced, and the beginning of the 1980s, Romania's experience was often cited in the demographic literature. Romania offered demographers an experimental context within which to test hypotheses about demographic factors, state policy, and development.

The Romanian policy is a classic example of a government's analysing

²⁵ *World Population Plan of Action, The Population Debate: Dimensions and Perspectives. Papers of the World Population Conference, Bucharest, 1974, vol. 1, New York.*

an existing demographic situation and concluding that a conflict exists between how individuals behave with respect to fertility and individuals' interests in their fellow citizens' behaviour. One may disagree with the outcome of the analysis, but that is beside the point.

Individual fertility decisions added up to a birth rate of 14 per 1,000 in 1966 in Romania. This was found socially inadequate and inconsistent with an aggregate population target identified as desirable by the end of the century. The government accordingly moved to modify individual behaviour and to make it conform to the perceived public interest (Berelson, 1979). For scientists, theoretical and technical issues apparently overshadowed other concerns, including ethical ones, which were to be taken up later (Berelson and Lieberman, 1979). Politically, the Western countries' tacit approval of Ceaușescu's demographic plans seems to have been as much compensation for his defiance of the Soviet Union as an attempt to gain an ally among adversaries particularly considering that after Romania announced its anti-abortion legislation in 1966, the USSR responded negatively.

The silence of the West in part reflected abortion politics there: France and the United States also had restrictive abortion laws (liberalized in 1975 and 1973, respectively). It was only after the World Population Conference that criticisms about the Romanian population legislation

began to circulate publicly. In 1974, while the liberalisation of abortion was being debated in France, an article in *Le Monde*, "Romania: Severity Reinforced," reported: "One year ago, the Ministry of Health issued a series of measures meant to stimulate natality. These reinforced the severity with which those who transgressed the 1966 law were treated. In effect, privileged women resorted to the services of doctors while the others have been forced to seek clandestine practices.[...] Conversely, the severity accompanying the application of this law, as has been seen in Romania after 1966 or in Bulgaria after the restrictive decision of 1968, translated into rapid increases in the birth rates. [...] In Bulgaria and Romania, the registered improvement [in the birth rate] was of short duration"²⁶ (Berelson, 1979, p. 164). France is pronatalist, although its population policies are encouraged through positive incentives rather than the draconian, coercive measures employed by the Ceaușescu regime. The ideologically grounded Reagan-Bush anti-abortion approach blinded the United States to the horrors provoked by the regime's banning of abortion (Kligman, 1998).

President Ceaușescu publicly unveiled his policies at the opening of the

26 This lengthy quotation reflects the serious consideration accorded Romania's population policy in the 1970s. Readers should note that China's demographic policies aimed at controlling overpopulation were not greeted in the West with similar detachment. China endorsed abortion as a means to enforce an anti-natalist policy in 'the public interest,' which conflicted with Western 'moral' discourse.

World Population Conference: "To address population problems, we consider it necessary to begin with the fact that man constitutes the determinant factor in social and economic progress. That is why the organization of society and the general politics of states must have as their supreme goal that of the well-being and happiness of [their] people, the safeguarding of human liberty and dignity, the fulfilment of their personalities, the participation of the masses in the creation of their own history" (Ceașescu, 1974, p. 3).

Those present did not question the principal means to be utilized to secure the well-being and happiness of people, the safeguarding of human liberty and dignity. Participants from Western industrialized countries, supportive of the objectives of population control, did not inquire whether Ceașescu's goals were to be achieved through relentless control of the private sphere. Participants from developing countries, critical of the West's insistence on curbing population growth as an end in itself, were able to interpret Ceașescu's remarks in terms of their own emerging agenda, which linked population concerns and development issues (Kligman, 1998).

During the days of the international congress, the UN Centre for Demography was opened in Bucharest. This teaching and research centre,

CEDOR²⁷, was devoted to the study of the relation between population and development. For a number of years, its activities were endorsed by the United Nations and the Romanian government. CEDOR provided an institutional context in which specialists, including foreigners, were able to contribute to the training of demographers and social scientists, especially those representing developing countries. The UN's choice of Romania for this endeavour implicitly legitimated Romania's approach to demographic matters and conferred formal recognition of Romania's role in international diplomacy-that is, of Romania's positioning in the Cold War confrontations between the superpowers and their spheres of influence (Kligman, 1998).

In addition to Romania's hosting the World Population Conference and CEDOR, the National Demographic Commission was itself very active in 1974. This institution implemented in Romania the principle embraced by the UN bodies charged with organizing 1974 as the Year of World Population: that demographic phenomena should be incorporated into development planning (Trebici, 1975)²⁸. The commission organized six

27 The creation of CEDOR in Romania was approved in 1973 (Comunicarea Cancelariei C.C. al P.C.R. no. 1635/1603, April 9, 1973, and no. 2810/2762, June 6, 1973). Elena Ceaușescu expressed her scepticism about the relevance of this centre at a meeting of the Executive Committee of the Central Committee of the PCR on July 3, 1974: "We don't have computers for industry but we're supposed to provide them for demographers!" (stenogram of the sedinta Comitetului Executiv, Arhiva MAN, vol. 1, no. 93). CEDOR was closed in 1984, presumably after allegations of espionage activities.

28 On December 11, 1970, at its plenary session, the UN General Assembly: "1) proclaimed 1974 as the Year of World Population, 2) recognized that the elaboration and application of demographic policies were internal to each state and, therefore, international actions in the realm of population had to adapt to the different needs and requests of member states, 3) asked the secretary general to

national symposia, published the monograph 'The Population of Romania', and prepared numerous radio and television programs and journal articles for specialists. The NDC enabled the Romanians to attach scientific and international blessings to what was, in actuality, a political strategy (Baban,1999).

In the first article of Law 3/1971 constituting the National Demographic Commission, it was stated that the NDC is an organ of the Council of State whose mission is to study demographic phenomena and to provide appropriate proposals to the Council of State regarding the demographic policy related problems that are of interest to the party and to the state. The objectives to be pursued by the NDC, especially as related to institutional practices, were (Zlatescu and Copil, 1984):

1. the description and analysis of demographic processes, including the reciprocal influences of economic and social contexts; analysis of the structural and dynamic impact of demographic phenomena on the development of: education, the workplace, health, habitat, the production of consumer goods, living standards, and services; evaluation of the effects of economic and social progress on the number, structure, and

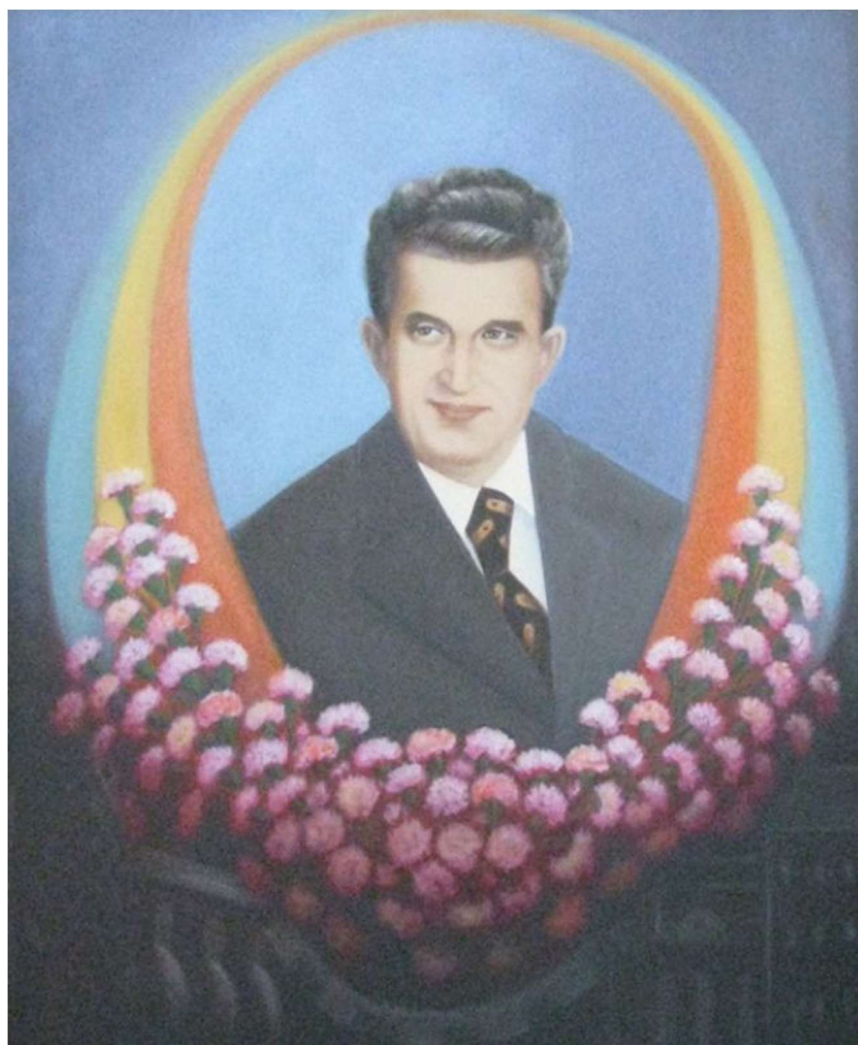
establish, in consultation with interested member states, a detailed program of activities and measures to be taken in 1974 [. . .] , 4) invited interested UN organizations to assist the secretary general in elaborating this program for the Year of World Population, 5) invited members states to participate in full in the Year of World Population according to their possibilities and political inclinations, 6) underscored that UN organs and interested member states should continue to offer their assistance upon request in the elaboration and application of dynamic political demographic programs".

evolution of the population;

2. the obligatory presentation to the Council of State of a coherent schedule of legislative, economic, financial, health, and cultural measures designed to create efficient mechanisms to promote the demographic interests of the state;
3. supervision of the means by which political decisions regarding demographic matters are implemented;
4. coordination of national institutions and the establishment of relations with international ones; and coordination of existing scientific and material resources that contribute to the fulfilment of the NDC's mandate.

Representatives of the following institutions and organizations figured among the 120 person membership of the NDC: the Committee for State Planning; the Ministries of Labour, Finance, Education and Teaching, Interior, Justice, and National Defence; the Council for Socialist Culture and Education; the National Women's Council; the General Confederation of Romanian Trade Unions; the Committee for the Problems of Local Councils; the Central Bureau of Statistics; the Academies of Social and Political Sciences, and of Medical Sciences; the Union of Communist Youth; and the National Union of Agricultural

Cooperatives for Production. The repeated enumeration of the organisms involved serves the purpose of demonstrating the systemic width of the plan at work (Zlatescu, 1984).



Example of propaganda: portrait in schools.

This institutional web was charged with enacting and enforcing commands from on high because the National Demographic Commission existed to legitimate the demographic politics of the regime and as an institutional front that lent scientific veneer to political interests also particularly useful in the realm of international relations. The

political appointment of a secretary general who was not a demographer but rather a loyal party activist who could be counted on to fulfil his duties corroborated this assessment of the NDC's function²⁹. Seemingly, what motivated the participation in the NDC of the diverse set of specialists was the recognition that effective policies depended on the analysis and circulation of accurate, representative data. However, in a command economy, feedback mechanisms were notoriously unreliable (Kligman, 1998).

Central planning required reliable information, but for reasons endemic to shortage economies, it was not consistently provided (Kornai, 1986). In consequence, decisions at the top of the political hierarchy were often the result of misinformed deliberations. Although the centre ultimately called the shots, the localized cynicism and self-interest of the institutions mentioned above contributed to the spiralling out of control of a formally rationalized yet structurally flawed system³⁰. The growing

29 This was customary practice. Assigning non-specialist activists in positions of institutional authority was a means of maintaining control and surveillance. Ritualized presentations of scientific arguments were well developed by the 1980s. Trebici recollected that on March 7, 1984, he and other specialists were invited to a meeting of the Central Committee. Lina Ciobanu (member of the Political Executive Committee and vice—prime minister of the government, charged with overseeing the Higher Council on Health) instructed them ahead of time on official protocol pertaining to the Ceaușescu's entrance into the room. Contrary to expectations that the discussion would focus on Romania's demographic situation, the participants were informed about the number of doctors arrested for performing clandestine abortions. Hours were spent discussing abortion and concerns related to it. At one point, Lina Ciobanu took the floor and, on behalf of her gender, proclaimed women's support for the party's programs. The meeting was as much about discipline and punishment as it was about conformity (Trebici, 1991).

30 Trebici recalled a chat with Emil Bodnaras who, in his role as mediator between Ceaușescu and the NDC, claimed that the NDC's demographic studies were stopped somewhere in the hierarchy before reaching Ceaușescu. Bodnaras, a vicepresident of the Council of State, had been charged with

formal authority of such institutions made the task of distinguishing what was real from what appeared to be real all the more difficult (Kligman, 1998).

This is not to say that the NDC did little in the years before its retirement from public life. Under its auspices, the NDC published a number of theoretical and empirical studies on the dynamics of demographic phenomena³¹. Although these works necessarily supported the party line, the demographic data seem to have been reasonably reliable. Regional and local analyses were often of scientific value to specialists in Bucharest (Kligman, 1998).

As required, the results of the NDC's diverse activities were communicated regularly to the Grand National Assembly and the Political Executive Committee of the party. The failure of the demographic strategy for which the NDC had ostensibly been established as the central pillar may be attributed to practical limitations of macroeconomic determinism. Economic development was assumed to be the driving force or '*motor*' (engine) in the ritualized language of the

coordinating the NDC's activities. Manea Manescu, also a vice-president of the Council of State, seems to have supplied the leader with demographic information. At the time, Manescu was politically responsible for the 'productivity' of the Central Bureau of Statistics. (He later became prime minister of Romania.) Trebici attributes the demographic policy measures to both Ceaușescu's peasant cultural mentality and the interested interventions of various counselors and ministers of health (Trebici, 1991).

31 Ceterchi, Zlatescu, and Copil 1974 and 1981; Zlatescu and Copil 1984; the NDC together with the Ministry of Health also carried out three national fertility surveys as part of a UN longitudinal project on world fertility patterns (Muresan et al., 1977).

official propaganda behind all forms of progress. As time wore on, the stimulatory economic measures that had been designed to increase fertility proved ineffective. This gave rise to the view that such investments were risky, which in turn affected the sums allocated, creating a vicious circle of inadequate investments and yields. In the end, it was deemed more expedient to replace the scientific approach to demographic growth with strong, rigorously enforced political measures. Tightening the screws of repression seemed like the quickest and least financially taxing way to increase the birth rate. Accordingly, the political supervision of demography had to be shifted to another institutional locus-the Higher Council on Health- this time directly controlled by the central nucleus of power (Kligman, 1998).

6.3. The Higher Council on Health

The Higher Council on Health had remained in the shadows of the National Demographic Commission until the mid-1970s, when it began to gain political weight. In the early years, this council had been incorporated into the structure of the Ministry of Health, including among its members medical researchers, teachers, and practitioners, each of whom served for three years. The Minister of Health acted as president of the Higher Council on Health until 1975, when the Council moved up in the institutional hierarchy (Baban, 1999).



Example of propaganda: painting for schools and orphanages: orphans who survived regularly reported that they were told that Nicolae and Elena Ceaușescu were their father and mother.

Its purpose was transformed, as was its constituency. The Higher Council on Health was ordained to contribute actively to the realization of party and state policies in this domain. A vice-president of the government replaced the Minister of Health as president of the Council (Council of State Decree 116, published in Buletinul oficial, no. 109, October 28, 1975, unnumbered). The Ministry of Health came under the purview of the Council, which was charged with making sure that the laws and normative acts pertaining to the continuing improvement of the population's health were obeyed. The consolidation of institutional power was well underway, as was the monopolization of power in Ceaușescu's extended family (Kligman, 1998).

The eclipsing of the NDC by the Higher Council on Health signalled a

shift away from pronatalist politics in which positive incentives were used to encourage procreation toward repressive demographic politics in which an obsession with the number of persons comprising the population became the *raison d'être* of demographic policy. The Political Executive Committee of the Central Committee of the Communist Party was meant to gain unmediated control over the human body and its reproduction (Kligman, 1998).

On August 1983, the Higher Council on Health became, by presidential decree, the apparatus to oversee and rigorously apply the pronatalist policies of the Socialist Republic of Romania (Presidential Decree no. 210, published in *Buletinul oficial*, no. 62, of August 13, 1983).

Demographic policy became synonymous with the politics of abortion, and demography became almost superfluous as a scientific endeavour.

The analysis of demographic phenomena became the analytic manipulation of the population. Statistical data were represented as quintessentially objective; all official rhetoric was laden with numbers (Kligman, 1998).

Propaganda spewed forth incontestable "representative" figures. Statistics captured the achievements of socialist progress; they also provided a legitimating discourse for repression. The message was that

the ‘numbers don't lie’. But those who supplied them did-out of fear, self-interest, and a complexly organized complicity with a system that structurally produced distortions of what scientists elsewhere refer to as empirical reality (Huff, 1954). As a result, statistical data, especially that produced during the last decade of the Ceașescu regime, are notoriously unreliable. Two institutions managed the collection and analysis of vital statistical data: the Central Bureau of Statistics and the Centre for the Calculation of Health Statistics.

6.4. The Central Bureau of Statistics and the Centre for the Calculation of Health Statistics

The Central Bureau of Statistics reported directly to the Council of State. Within the bureau, a section devoted to ‘population and the labour force’ coordinated nationwide statistical analyses. Bulletins containing codified data were prepared monthly at the county level and sent to the Central Bureau of Statistics in Bucharest, which then produced synthetic tables and national reports.

The Centre for the Calculation of Health Statistics was an institutional appendage of the Ministry of Health. It fell primarily to this unit to analyse the demographic statistics, especially with respect to natality, mortality, abortion, and infant and maternal mortality. The Ministry of Health's reports were then sent over to the Central Bureau of Statistics.

The prevailing political climate set the tone for what became either institutional collusion or competition. In interviews released after the fall of the Berlin Wall, prominent statistical analysts from the Central Bureau of Statistics stated that it had been known since 1982 that the abortion statistics had been 'worked over'. The number of abortions cited in the Ministry of Health's report was lower than indicated by the data received independently at the Central Bureau of Statistics. However, it was formally the job of the Ministry of Health to report on abortions; because the 'distortion' was also recognized as socially useful to women, to doctors, and even to the ministerial bureaucracy and no one contested the data. Statistical summaries were sent higher up and served to legitimate regime policies. Those that were useful were publicized; others, such as the data on HIV among infants, were deliberately suppressed. By the mid-1980s the *Anuarul Statistic* had become a slim volume, testimony to the politicization of statistics at the expense of scientific integrity (Huff, 1994).

Like history and demography, statistics were valued as instruments of power and were among the political arsenal of the Higher Council on Health which, armed with 'evidence', contributed to making the will of the state. Through the activities of this council, the intrusion of the state into the intimate lives of women and men alike deepened (Kligman,

1998).

By 1983 the birth rate had declined to the same level to which it had dropped in 1966. The difference between these two years was that before 1966 abortion had been legal, a circumstance to which the decline in the birth rate was incorrectly attributed. Successively restrictive demographic policies were instituted to alter that situation. Yet by 1983 the demographic picture had not changed. Rather than address the causes for the failure of its demographic strategy, the regime resorted to a tactic it regularly employed when the customary conspiracy of silence proved insufficient as a response: it found a scapegoat and then designated the Higher Council on Health as arbiter for the resolution of demographic problems. By any stretch of the imagination, this institution did not offer a kinder and gentler approach to fertility control (Kligman, 1998).

This council differed importantly from the National Demographic Commission in its composition and in its structural relations to the centre of power, thereby affirming the above-noted shift in institutional intention. Although the president of the NDC was a member of the government, the president of the Higher Council on Health was not only a vice-prime minister of the government, but also a member of the Political Executive Committee of the Romanian Communist Party. The president of the NDC figured among the regular members of the Higher

Council on Health. In addition to a president, the NDC was directed by three vice-presidents and a secretary; however, the council benefited from the accumulative tendencies characteristic of command economies: nine vice-presidents and a secretary were among those at the council's helm. With the exception of the Higher Council's president, personnel were mostly drawn from the medical system. Each of the council's 125 members had important functions in the bureaucracy of the state and/or party. Of them, 105 were engaged in the public health system. In part because of a reduction in the scope of its activities, the Higher Council on Health was able to operate more efficiently than its predecessor, the NDC. Even though the official discourse on demographic policy and the improvement of the population's well-being persisted, the council vigorously directed its institutional energy toward bettering the demographic statistics. In the ritualized wheel of power, the council was but one-spoke whose identity derived solely from achieving the demographic indicators (Kligman, 1998).

All writings pertaining to the council's activities contained this formulaic phrase; the titles of the council's periodic reports prepared for the Political Executive Committee of the Central Committee inevitably included demographic indicators. Of these, birth rates ranked the highest in importance, followed by infant mortality statistics. Herein lies a key

to understanding the focus of the council's more limited tasks. Understanding demographic trajectories, no longer required factoring in economic, social, or cultural variables. Instead, the production of acceptable demographic statistics was reconceived as dependent primarily on one domain of medical practice: obstetrics and gynaecology (Kligman, 1998).

A summary of the measures taken by the Higher Council on Health and the Ministry of Health illuminates the means by which the council exercised its responsibilities to discipline and punish infringements of the demographic policies. In the interest of increasing natality, the assurance of women's health, the amelioration of medical assistance for pregnant women, and the tracking of the development of a pregnancy and the curtailment of the interruption of pregnancy, the council through the Ministry of Health undertook the following (Kligman, 1998):

- to ascertain the general state of health of the female population between the ages of 16 and 45 through periodic examinations, especially in enterprises with a significant number of female employees;
- to intensify control [over the situation] through the early detection and recording of pregnancies, and the active surveillance of pregnant women;

- to accord special attention to prenatal consultations in the interest of preventing premature births and malformations;
- to scrutinize the means and efficacy with which health units treat women with risky pregnancies;
- to impose drastic measures against those who are guilty in the case of maternal death;
- to make sure that medical personnel hospitalize any pregnant women who, at the time of her pregnancy, suffers from an illness that may compromise her pregnancy so that she brings healthy and vigorous children into the world;
- to see to it that all pregnant women give birth in hospitals;
- to intensify efforts such that all women who have had incomplete abortions are formally registered and periodically examined to avoid abortive phenomena [spontaneous or deliberate];
- to ensure a reduction in the number of abortions due to medical causes through the increased vigilance of the activities of the commissions for the interruption of the development of a pregnancy;
- to accord special attention to newborns and to encourage breast-feeding;

- to organize spot examinations of the obstetrical and paediatric sections to determine that hygienic norms are respected and to prevent the circulation of intra-hospital infections;
- to punish medical personnel if the development of a child in the first year is unsatisfactory.

6.5. The Political Executive Committee of the Central Committee of the Romanian Communist Party

These measures were reaffirmed on August 3, 1987, at the session of the Political Executive Committee of the Central Committee of the Romanian Communist Party. This meeting's agenda addressed the manner in which the decisions regarding public health and demographic trends approved at the Thirteenth Party Congress in 1985 had been enacted.

In the report in which the measures listed above were cited, two words appeared repeatedly: control and surveillance. To fine-tune these activities, headquarters were established in each region of the country to enforce the Demographic policy measures³² that is, to ferret out those who were somehow engaged in abortion-related activities (Kligman,

32 This was proposed and finalized at the meetings of the Political Executive Committee on August 3, 1987, and the Plenary Session of the Central Committee on October 5, 1987.

1998).

The Political Executive Bureau of the Central Committee, itself at the highest level of party organization, centrally coordinated the activities of local commissions. Such commissions, comprising a broad representation of institutions, were charged with evaluating and deciding upon demographic issues in their area. At the county level, their decisions had the practical force of local laws, even though, formally, they were not made locally. These politically constituted bodies were directed by a president and included for each county: the secretary for social problems of the regional Party Committee, a representative of the Inspector General's Office of the Police, the president of the county Tribunal, the prosecutor, the director of the Department of Health, the director of the Department for Labour Problems and Social Welfare, the head inspector of the Inspector General's Office for Labour Protection, the president of the Organization for Women, the president of the county council of the General Confederation of Trade Unions, the inspector general for schools, and the director of the Department of Statistics. This group met weekly and was required to issue monthly reports on the achievements of the demographic measures in their respective locales (Kligman, 1998).

These reports were presented at a meeting attended by the county Executive Committee of the Consiliul Popular (People's Council) and the

county Committee of the Party Secretariat. The former was the local organ of state administration; the latter, an organ of political power. The reports contained information on the discovery and elimination of illegal abortion practices. Pursuit of this priority objective required time, energy, and organization (Kligman, 1998).

A county's population was screened and evaluated using combined information from the hospitals or electoral districts to which persons were assigned. Electoral lists provided biographical sketches of each adult. Health and statistical evidence offered a picture of the principal events of a woman's medical and reproductive life. Given this type of territorial differentiation, data from predesignated institutions could then be evaluated. The number of fertile women, again between the ages of 15 and 49, was compared with the number of pregnancies recorded in the medical dispensary records of the institutions, and with the number of incomplete abortions registered in the statistics of the Department of Health. If during a certain period the number of pregnancies was low but the number of incomplete abortions was high, then that area was considered a 'zone at risk'. The number of pregnancies and incomplete abortions was evaluated in terms of the area's fertility potential. In other words, it was suspected that abortion-related practices were functioning all too well. An analysis ensued of the zone's professional composition

and occupational structure. This was intended to call attention to persons who presumably possessed medical knowledge and those whose standard of living exceeded that made possible by their legal earnings. This sleuthing resulted in a list of persons suspected of abortion activities of one kind or another. Responsibility then fell to the local police and the prosecutor's office to verify the list (Kligman, 1998).

6.6. Disciplining and punishing the medical body

“It is necessary to act firmly to put a stop to the abusive interruption of pregnancy, and to respect uncompromisingly the laws of the country. Hospitals, dispensaries, and doctors, and all health personnel must devote themselves to the population's health and the natality figures. Where abortion exceeds 50 % relative to live births, it will be considered that the activities of the respective institutions and doctors are unsatisfactory, and corresponding conclusions will be drawn”. (Ceașescu, 1984, p. 12)

The Ministry of Health was responsible for operationalizing the pronatalist directives. To this end, the Ministry of Health and its subordinates devised a plan to secure the compliance of all medical divisions under their purview. By the 1980s, the health of the population had come to mean the reproductive health of the population, quantified and measured in terms of an increase in fertility statistics and a decrease

in infant mortality figures (Kligman, 1998).

Accordingly, the principal objectives and technical-organizational measures for protecting health referred to the measures regarding improvement of the protection of mothers, children, and youth.

Ensuring women's health presupposed the conformity of doctors and medical personnel with what may be viewed as the medicalization of repression- that is, the means by which the medical profession and medicine were used to legitimate repression of the body. Doctors were to be the principal propagandists in convincing women, taking care of them throughout their pregnancies, and encouraging them to have children (Kligman, 1998).

To (re)produce a natality rate of at least 18 to 20 live births per 1000 inhabitants, it was determined that women in their fertile years were to have regular gynaecological exams. This applied to all women actively engaged in the work force. Particular attention was paid to women who suffered from various illnesses so that appropriate therapeutic measures could be taken to restore their basic health. Moreover, any woman between the ages of 16 and 45 who was hospitalized for any reason was to be given a pregnancy test; if she was pregnant, that fact was recorded. The medical exam was one of the weapons by which the state invaded the physical bodies of its subjects (Baban, 1999).

The legitimating motivation behind the mandatory performance of gynaecological exams was the fact that reproduction "isn't only a personal matter, [...] but is of social consequence" (Gadea, 1966, p. 6). Regardless of appearances, the prescribed gynaecological examination subjected women of childbearing age to state control of their reproductive lives. Women working in or attending state institutions were given at least annual, and in some areas trimesterly, medical exams to verify that their reproductive health was satisfactory. If, through a routine checkup, a woman was discovered to be pregnant, the development of her pregnancy could then be closely monitored lest any untoward mishap occur. In rural areas, the local medical staff was expected to follow up on women's pregnancies through home visits, a practice resented by all involved (Kligman, 1998).

The intent of obtaining medical histories on women of childbearing age was to have "in evidence [...] all of the elements that might negatively influence the normal evolution of a pregnancy"³³. While annual medical check-ups as well as pre- and postnatal care may be commendable under normal circumstances, in the context of a coercive pronatalist policy such prenatal care was tantamount to policing the body, with doctors put in

³³ Anonymous, *Metodologia luarii precoce in evidenta a gravidelor si supravegherea medicala a sarcinii in primul trimestru*, *Muncitond sanitar* 17, April 4, 1987.

the position of aiding and abetting the interests of the state (Kligman, 1998).

Women were not always aware that they were being given pregnancy tests; annual exams were considered routine, simply another obligation. A follow-up session was scheduled so that the doctor could show that proper attention was being accorded her pregnancy. If in the interim she had chosen to abort and no telling signs remained, then, the doctor could record the pregnancy as lost to a spontaneous abortion. It is to be emphasized that it was naïve at best to think that periodic screenings would contribute to increasing the birth rate (Kligman, 1998).

Since the medical profession had been made officially responsible for improving the birth rate, the state-employed medical personnel became atone and the same time hostages to the plan and to their consciences (Kligman, 1998). From the standpoint of national planners, increasing the birth rate involved a 'production plan', as did all aspects of building socialism. Medical activists were required to see that their medical exam plans were fulfilled. Toward this end, they were assigned to examine women and to scrutinize all medical records. Again, if the reproductive norms were not met, physicians were taxed a percentage of their pay. To cover a factory population in a specified period of time, many doctors had to perform 50 to 60 gynaecological exams a day. This production-

line schedule was unbearable (Baban, 1999.

Reports were circulated internally among the appropriate government institutions, and many were earmarked for internal use only. As an example, one head of an obstetrics-gynaecology unit produced an official report titled *Informare asupra modului in care comunistii, toti oamenii muncii din clinica de obstetrica-ginecologie se preocupa de ameliorarea indicatorilor demografici, expresie a eftcientei muncii lor* (Information about the means by which communists and all workers in the obstetrics-gynaecology clinic strive to better the demographic indicators, an expression of the efficiency of their work). The continuing efforts of the workers in this unit were underscored.

Subtly embedded in this official report were veiled criticisms of the political-demographic policies, as well as of general conditions for medical treatment. It was suggested that better-equipped examining rooms be provided at factory clinics in order to increase efficiency. It was noted that health education throughout the country was inadequate and contributed to the high number of illegal abortions as well as to the number of maternal deaths due to them. The report stated forcefully that permanent control was to be exercised by responsible authorities to make certain that the legislation and rules regarding abortions were respected. Data had to be confirmed by the appropriate police authorities and the

prosecutor's office. Official reports from the provinces contained summaries of demographic activities in each zone of an administrative region: positive and negative aspects, and problems to be resolved in the medical units. These gynaecological assessments, for which medical party activists were responsible, were conducted at least annually and contained data on the number of births, infant mortality, abortions, and complications resulting from illegal abortions. The number of females examined was also reported (Kligman, 1998). Typical evaluations read:

“In community X in the first trimester of 1986, 500 female students, 1200 urban women, and 1500 rural women were examined. Of the urban women, 12 were diagnosed pregnant; 10 amongst rural women. There were no cases of pregnancy among the students, almost all of whom were virgins. In community Y there are 17 000 women between the ages of 16 and 45, of whom 7 % are unmarried; 10 % are childless; 13 % have one child; 20 %, 2; 13 %, 3; 19 %, 4 or more children. The periodic gynaecological exams have been conducted thus far on 1 900 students, all of whom are virgins” (Bongaarts, 1994, p. 254).

The details provided varied from community to community; the style of the report did not. Their contents were popularized for ideological purposes, and disseminated in the press. For example, it was recounted that periodic controls of workers were concluded one month before the

end of the year; all of the female workers were examined, especially the 6,500 women of childbearing age, of whom 500 were recorded to be in their first trimester of pregnancy. Those with problematic pregnancies were sent to the hospitals that deal with such problems. Sixty sterile couples began treatment (Petrescu, 1988).

The director of Bucharest's health department, in reviewing medical performance for 1986, pointed to the inadequacies of health-medical worker performance in the domain of demography: “We did not succeed in achieving the established demographic indicators [...] This reflects the weak commitment of the health-medical staff, a higher degree of formalism, aspects that are thoroughly impermissible and that must be thoroughly and seriously analysed. Although the number of abortions was 23 % less in 1986 than in 1985, we cannot consider this satisfactory. The incidence of abortion in such high proportions demonstrates that the organizational measures to control abortions were not applied resolutely [...] This year, we are firmly resolved to make all efforts to fulfil the plan [...] in this realm of activity that has deep significance for us, for problems [...] of professional conscience” (Coman, 1987, p. 121).

Such statements sent shivers throughout the medical community because they indicated that certain heads were likely to roll. The style of wooden language employed by the director was self-servingly protective. Being

firmly resolved meant that he would take an active role in keeping his eye on the actions of those beneath him in order to save his own position. Doctors were caught in a web of institutionalized surveillance. Yet, despite the consequences for disobeying the law, many doctors -at all ranks in the party hierarchy- became adept at manipulating both the official rhetoric and statistics. Strikingly, most people offered praise for the attempts doctors made to assist women and families during these harsh years. Many doctors took considerable risks and tried to hide a woman's pregnancy if she indicated she did not want the child. As one doctor recounted in the press anonymously after the fall of the communist regime, if a woman adamantly was against having a child, there was nothing you could do about it. She would risk dying rather than bear the child. So doctors tried to help. It wasn't difficult to read a woman's reaction to the news that she was pregnant. Doctors would ask her how many children she already had and about her living conditions. If she already had two or three children, it often became pretty clear she didn't want the pregnancy. Under such circumstances, doctors would reiterate that they thought she was pregnant but couldn't be absolutely certain, and suggest she come the following month to be sure. They would then tell her that if she was then indeed pregnant, her pregnancy would be officially recorded. Women knew how to decipher such messages. If a woman didn't want the pregnancy, she had been warned

that she had one month to do something about it (Bongaarts,1994).

When feasible, doctors took advantage of the existence of various ailments such as measles, recurrent fevers, hepatitis, tuberculosis, syphilis, malignant tumours, or diabetes, which qualified a woman for a legal abortion based on legitimate medical cause. Similarly, if a woman was receiving treatment or taking medications that were contraindicated for pregnant women (for example, chemotherapy, anticonvulsants), then her treatment for the pre-existing condition would be used as the excuse for an abortion. Given the pronounced lack of available medications in Romania by the mid-1980s, this excuse was not easily manufactured. Nonetheless, whenever possible, many doctors seemed to have done what they could to accommodate a woman's choice. One prominent obstetrician-gynaecologist remarked that he had always acted within the law and tried to save women 's lives. But what did acting within the law mean under such circumstances? If a woman died because the prosecutor's office did not respond, the doctor was legally protected. But what about the Hippocratic oath that is professionally self-defining? Again, this double-bind situation for gynaecologists ensured the perpetuation of Ceauşescu's demographic policies and resistance to them as well (Kligman, 1998).

Another institutional mechanism existed to maintain control over

medical personnel: the disciplinary board for health workers, which was made up of medical practitioners whose party loyalty was considered unquestionable. In each region, members of the disciplinary board were well positioned in the medical hierarchy. One journalist described the board as "the tribunal of medical ethics [which punishes] medical mistakes, sometimes very grave, that affect pregnant women, mothers, and infants (Lazarescu, 1988, p. 43). The same journalist penned an article titled "Discipline as an Expression of Professional Conscience." The disciplinary board provided a context in which professional comportment was held accountable to the norms of socialist medical ethics as dictated by the Higher Council on Health. The board met monthly; each session ended with an existential interrogation of the accused: have you understood where, when and how you have erred? Needless to say, most understood. These mini-medical show trials were reported in the official publication of the Ministry of Health, *Muncitorul Sanitar* (The Health Worker) and illustrate how such a public professional forum was used to cajole conformity among medical personnel and to shore up the dynamics of dissimulation (Kligman, 1998). In 1987, for example, the disciplinary board for health personnel for the region Ialomita heard 89 cases, 34 of which resulted in punishments; two of these were later annulled by the Central disciplinary board because the doctors in question were judged guilty of more serious crimes; all but 2

of the 32 who had been reprimanded -including 22 doctors and 10 medical assistants- were disciplined for their improper care of pregnant women and new-borns (Lazarescu, 1988).

Missing from such accounts was mention of the professional consequences an appearance before this board entailed. The punishments meted out by this medical ethics tribunal were noted permanently in one's file. Another case from the region of Braila illustrates this process of stigmatization: This is about what befell young Valeria 1, who worked at the factory for fibres, cellulose, and paper in Braila, and who in her sixth month induced an abortion that ended tragically. No health worker was implicated in the actual performance of this illicit act. Yet, with regard to this drama, three doctors from the dispensary-polyclinic for the chemical factory were called before the board. Why? Because, as was proven through the investigation, they don't examine women properly, especially those between the ages of 16 and 45, and they don 't follow the development of those who have had previous abortions (Lazarescu, 1987). For the sake of clarification, it is important to underline that none of these three doctors were gynaecologists; they were specialists in occupational medicine. Regardless of their specific expertise, all doctors (including dentists, as may be recalled) were required to fulfil the

demographic norms³⁴ (Kligman, 1998).

34 The activities of the secret police in the policing of the body are central to a full accounting of how the system functioned. This information is not yet available.

Legacies in Demography. Coercion and Reproductive Politics. Lessons from Romania

7.1. Coercion and personal trauma

Planned motherhood as dictated by the Ceaușescu regime affected the physical and emotional well-being not only of individual women, men, children, and families, but also of society as a whole. The consequences of the demographic policies cast a dark shadow over the radiant past of the Socialist Republic of Romania's 'golden era'. Social and biological reproduction had become daily dramas, increasingly in conflict with each other. Sexuality and intimacy were conjugated with fear of an unwanted pregnancy, of having a confidence revealed to the secret police. This often-intangible fear reverberated throughout the body politic that constituted Ceaușescu's Romania, making citizens simultaneously complicit with and resistant to the will of the Party/State.

With respect to pronatalist politics, among the tangible effects associated with resistance or complicity were an increase in the number of illegal abortions—and relatedly, maternal and infant mortality—and an increase in the number of unwanted children, many of whom were abandoned to the streets or to state institutions. An infant AIDS epidemic spread,

especially among the children in institutions, although this fact was deliberately hushed up lest the image of Ceaușescu's golden era be tarnished. Husbands and children too often found themselves widowers and orphans because a wife and mother had died in a desperate attempt to avoid bringing yet another innocent being into the harsh conditions of everyday life. A regime that celebrated women's contributions to the building of socialism, and that demanded the birth of children to that end, became the source of the deaths of too many women and children. In spite of the glittering rays of ideological propaganda, the multilateral deterioration of the physical, social, material, and spiritual conditions of life in Romania continued, officially unseen (Kligman, 1995).

Because the basic aims of research were politically manipulated, it became virtually impossible for scholars to evaluate the effects of the pronatalist policies. Empirical studies and reports ordered by the party hierarchy remained unavailable to the general scientific community, let alone the general public. Marked 'for internal use' or 'professional secret', their circulation was strictly regulated. However, since the fall of the Ceaușescu regime, its dark legacies—particularly regarding demography— have been revealed and are the subject matter of this chapter. Abandoned children, an infant AIDS epidemic, and international trafficking in children through private adoptions are but the most

internationally publicized consequences of state-orchestrated childbearing. Other medical and social problems, such as high maternal and infant mortality rates and the emergence of street children as an urban phenomenon, also resulted, at least in part, from the pronatalist policies (Baban, 1999).

7.2. AIDS in Romania

Demographic growth, combined in diabolical fashion with the wilful neglect of the general population's living conditions, contributed to the horror that became one of the most highly publicized legacies of the former regime: an infant AIDS epidemic. Infants abandoned to hospitals, orphanages, and the streets ended up in state institutions. The first case of AIDS was reported in 1985; however, knowledge about it was firmly and deliberately repressed by the regime. Despite this censorship, in 1988 a lengthy paper on the pathogenesis and diagnosis of AIDS was published by the Ministry of Health. It concluded with the instruction that it was forbidden to enter a diagnosis of AIDS or HIV infection on medical certificates; one was only permitted to refer to an opportunistic infection or pneumonia (Paun, 1988). Statistical evidence was again consciously distorted; medical practice was again subjugated to political interest.



Image of AIDS diagnosed children in the a Romanian orphanage, kept in isolation. 1990. Published in Adevarul on the 24th of January .

One result was that blood was not screened, which, in turn, served as a source of a quietly burgeoning infant AIDS epidemic. In one of the more cynical examples of a disinformation campaign, the dangers of AIDS transmission were minimized in a brochure issued by the Institute for Hygiene and Public Health:

“Persons at high risk for infection must be conscious that they can transmit this illness to others, and consequently they must be excluded from donating blood, plasma, organs, etc. Furthermore, the danger of transmitting AIDS through blood transfusion or the administration of blood-based preparations is practically eliminated through measures taken with respect to the selection of blood donors and exclusion of those contaminated with the HIV virus, laboratory screening of blood to

identify and exclude contaminated blood.” (Kligman, 1999, p. 125)



Pamphlets distributed during the communist regime of AIDS, indicating monogamy was the prophylaxis.

As discussed in the Helsinki Watch report 1990, Romania was not an obvious high-risk country for an AIDS epidemic. Drug trafficking through Eastern Europe was extremely limited during the socialist era (although Eastern Europe became an East-West corridor after 1989); moreover, most Romanians were too poor to support drug habits. Travel to and especially from Romania was insignificant, hence the handful of cases that appeared in the mid-1980s should still have been a handful—if not for the additional fact that some one or another of them donated blood (Helsinki Watch, 1990).

The insidious role of the demographic policies in contributing to a tragedy in the making was woven into the webs of institutional

complicity and negligence. To combat high infant mortality, doctors attempted to control the afflictions to which infants succumbed and for which they themselves could be held accountable. To this end, injections of antibiotics were routinely given. However, these injections were given with unsterilized syringes that were used repeatedly. Disposable needles did not exist, and those administering injections rarely took the time to sterilize a syringe after it had been used. This practice also contributed to an epidemic of hepatitis B in Romania. The incidence of acute hepatitis B in infants increased from 21.5 per 100,000 in 1984 to 192.7 per 100,000 by 1989; it also increased, but to a lesser degree, in children under the age of fourteen. Nonetheless, blood screening was not implemented (Nicholas, 1990).

Curiously, microtransfusions of blood were also given to failing infants. Microtransfusions were thought by some to endow these children with proteins, hemoglobin and antibodies, and boost the infant's immunological system and nutritional system (Helsinki Watch, 1990).

Instead, they challenged the fledgling immunological systems of their recipients. Recent data indicate that by the end of 1990 there were 1094 registered cases of infant/child AIDS (zero months—twelve years of age) although the mode of transmission varied (Anuarul statistic al Romaniei, 1994). The figures initially emerging from Romania were lower and

undifferentiated with respect to transmission mode. As is true for all of the available statistical evidence, the numbers cited in different studies do not match. For example, the data compiled by the General Directorate for Preventive Medicine and Health Promotion, December 31, 1994, for the World Health Organization, which gives the total number of AIDS cases among children as 2,715 (General Directorate for Preventive Medicine and Health Promotion, 1994). Ages are not specified. Social assumptions about the AIDS-afflicted compounded the problems of their treatment and care. Knowing that these children were doomed to death, most people saw no reason to waste scarce resources, including human affection, on them. Poverty and fatalism protected the living at the expense of increased anguish for the sick and dying (Scheper-Hughes, 1992).

It must be noted that because the available data do not distinguish between persons who are HIV-positive and those who have AIDS, it is difficult to make firm claims about the prevalence of AIDS in Romania.

After the execution of the Ceaușescus, the world learned of the institutionalised hell to which abandoned and orphaned children had been consigned. Medical personnel, human rights workers, and international organizations offered compassionate assistance to the Romanians. Western media were filled with heart-wrenching stories:

"Romania's AIDS Babies: A Legacy of Neglect"; "Fight against AIDS Lags in Romania"; "W.H.O. Emergency Team Is Sent to Romania to Assess AIDS Cases" (Bohlen, 1990). Foreign aid donations supplied disposable syringes. Romanian medicine became the focus of international attention, but the multiple problems confronting the medical profession and medical practice were daunting. Some physicians still insisted in 1990 that AIDS was not a real problem in their country, claiming that the epidemic among children was confined to that population (Bohlen, 1990).

Combined Romanian and international efforts may have stemmed the tide of the infant AIDS epidemic, as suggested by table 7.1.

Table 7.1. - AIDS cases by age group 1990-1993, Romania 1990-93

Age group	1990	1991	1992	1993
0-11 mths	392	461	469	475
1-4 y	700	1,124	1,588	1,860
5-9 y	0	9	39	121
10-12 y	2	5	5	5

Source: Ministry of Health, Romania reported to the World Health Organization

Although the infant/child AIDS epidemic may have been attributed largely to the consequences of the pronatalist policies (i.e., increased institutionalization of unwanted children) combined with the administration of microtransfusions of tainted blood and the use of

unsterilized syringes, the rise in the number of adult cases cannot be attributed to these same causes.

Nonetheless, it is worth noting that adult AIDS increased steadily after 1990. The deliberate suppression of HIV and AIDS data in the mid-1980s transformed the spread of adult AIDS into an unintended consequence of the demographic policies and raises familiar questions about the reliability of the number of cases reported, and about the incidence of maternal transmission of HIV/AIDS to infants. There was an official total of 75 adult AIDS cases reported in 1990; in 1991 the total rose to 106; by 1992 it had increased to 134; and by 1994 to 175 (Ministry of Health, Romania reported to the World Health Organization, 1994).

The total number of infant/child and adult cases reported between 1985 and 1994 was 3119. Of these, 92 %, or 2885, were among infants or children. The young also accounted for 92 % of the total AIDS deaths during this period: 1,067 children died out of a total of 1,157; among known adult cases, 87 died (World Health Organisation, 1995). The highest incidence among adults has been among heterosexual men and women, and among people living in Bucharest (52%) and the port city of Constanta (24%) (World Health Organisation, 1995). Radio Free Europe/Radio Liberty reported in one of its final editions (no. 240) that the Romanian Minister of health, Iulian Mincu, had proposed that

brothels be legalized as a means of combatting the growing incidence of adult AIDS.

7.3. Socio-Institutional Legacies: Abandonment, Institutionalization, and Adoption

*“You read this, reread it, and it's not possible to believe what's going on. [. . .] At this children's home, all manner of things [. . .] in flagrant contradiction of educational norms, of human decency ultimately, with the particular care accorded children by our country, especially children without parents.”*³⁵

Soon after the Ceaușescu regime fell, the plight of Romania's abandoned children surfaced. The demographic policies bore directly on the institutionalization of children, many of whom—unwanted by their families—were abandoned to the state that had demanded them. International humanitarian efforts mobilized quickly to help the Romanians deal with the macabre institutionalized care, which, like AIDS, had been kept hidden from public view. Organizations and individuals of all ages from the world over joined the Romanians in alleviating the immediate pain of these hapless ‘*ceausei*’—the children so named after Ceaușescu's pronatalist policies.

Abandonment and institutionalization are not recent phenomena in Romania or elsewhere; however, the conditions surrounding both are unique in Romanian history. The institutionalization of abandonment as

³⁵ *Scinteia*, 11 December 1988.

social practice forms part of the broader history of policing reproduction.

Romanians were a nuclear family-centred conservative society, and, during the communist regime, feared their government. Yet, during the later years of the Ceaușescu regime, there were more children than beds in the state institutions designated to care for them. A confluence of factors led to the overcrowding, among which were poverty, exhaustion, and perverse disinformation about the generosity of the state to its citizens, especially to those in need.

The establishment of surrogate ‘care’ and ‘educational’ institutions was consistent with the state's exercise of its paternalist obligations. If and when families did not fulfil their parental roles, then the state took on the ‘fostering’ of these children. In the 1980s abandoning a child was often the consequence of despair combined with an internalized dependence on the state for the basics of life: the state generally controlled when and how much heat, water, and light households and state institutions had. Centralized production and distribution affected what families had to eat. In this respect, the rise of the second economy paralleled that of illegal abortions; these were the means through which people managed their daily lives (David, 1988).

Some mothers left their infants in the hospital; others abandoned them to state institutions on a temporary or long-term basis; still others left them

to the streets (David, 1988). Infanticide is not common, although punitive statutes existed in the legal code, as in article 177. The care of children by people other than their biological parents is culturally embedded (Kligman, 1988). However, during the Ceaușescu years, increasing numbers of parents were unable either to call upon such networks or to support another mouth to feed. They frequently left their children at state institutions with the intent of bringing them home at a later date. Those who failed to find the children they had entrusted to the care of the paternalist state learned why—as did the rest of the world—when the regime collapsed (Dobbs, 1990). The squalor of human existence that lay hidden from sight did not figure in the rhetorical representations of the socialist public sphere and the role of the ideal socialist family within it. Tragically, that role was simultaneously exalted verbally and abused materially, to the detriment of generations to come.

7.4. The Institutionalization of Children

The institutions in which the fates of too many children had been sealed were not all orphanages. Some provided long-term residential care for diverse categories of children, among whom were orphans whose parents were dead or unknown to them. Many others were social orphans, children who have been abandoned or voluntarily given over to state institutions by living parents. Parents may jointly institutionalize a child;

in many instances, however, it is mothers—single or divorced—who did so. These women also tend to have limited financial, educational, and emotional resources to offer their children, the majority of whom are legitimate (in Romania, legitimacy was based on the father's formal recognition of his child, regardless of the parents' marital status) (Dobbs, 1990).

The Romanian institutional system was byzantine in organization, with the care of minors divided among the Ministries of Health, Education, and Labour depending on the child's age and physical and mental condition. The Ministry of Health was responsible for children aged one to three. A majority of these children had been abandoned at birth or as infants for socioeconomic reasons; over time and as a result of the medicalization of their care, what had been attributed to the social origins of many of their problems instead became medical cases. After the age of three (and until the age of eighteen), 'normal' children were transferred to children's homes overseen by the Ministry of Education or Labour, which was responsible for turning them into productive citizens through knowledge and work (Dobbs, 1990).



Orphans at a state institution in Grandinari, Romania in 1989, Adevarul, 24th of January 2011

Yet again, each ministry focused on its specialty—education or work—as the primary means of satisfying the needs of their wards (Sachs, 1990).

Some of these institutions housed children who had been diagnosed as unrecoverable. These children were disabled in various ways. Some were blind, others were mentally deficient, yet others had physical handicaps. Thought to be incapacitated by such ailments, these children were condemned by Darwinian notions separating the fit from the unfit. Labeled ‘non-productive’ in a society ideologically dependent on production, the handicapped were effectively sentenced to death. Those were places they went to die (Sachs, 1990).

Consigned to oblivion, the handicapped became the victims of systematic, institutional neglect. Many of the physically and mentally handicapped were assigned to the Ministry of Labour (rather than, for

example, the Ministry of Health). The logic behind this bureaucratic allocation was linked to the formation of productive new socialist citizens. However, as unproductive members of society, these children were virtually ignored. The Ministry of Labour was neither interested in nor professionally prepared to deal with their special needs. Conditions in these institutions exaggerated those on the outside. Heat, hot water, adequate clothing and food were even scarcer (Sachs, 1990).

The human needs of these youngsters had been officially obliterated by the designation of a label: unrecoverable. Their vacant stares and traumatized small bodies provided international photo opportunities, the results of which captured the hearts of the world and brought international assistance to post-Ceauşescu Romania. Journalists provided stomach-turning and poignant tales about the dire plight of the ‘handicapped’. It was clear to specialists that many of these children could have been productive members of society had they been offered therapeutic or rehabilitation programs and basic human warmth. Newspaper articles were filled with stories such as the following:

“Down the hall, other cribs hold smaller children, pale skeletons suffering from malnutrition and disease. Despite the heat of the day, several of the children are wrapped in dirty blankets. From one still bundle, only a bluish patch of scalp is visible. Asked if the child inside is

alive, an orderly says, "Of course," and pulls back the covers. The tiny skeleton stirs." (Battiata, 1990, Washington Post, June 7)

"Approximately 100 000 children and adolescents up to 18 years of age remain in the care of the state, many confined to institutions indescribable in their filth, degradation and misery—understaffed and ill-equipped nurseries, preschool orphanages and homes for the handicapped and 'unrecoverables'." (Nachtwey, 1990, New York Times, June 24)

Aid of all kinds poured in. Foreign and Romanian humanitarian organizations filled the reopened spaces of civil society. Some orphanages became home to groups from several different countries attempting to address the diverse needs of the orphanages: infrastructural rehabilitation, ranging from the painting and sanitizing of buildings to the installation of electrical and water systems and the acquisition of educational resources, care training, care giving, and the like. A multilanguage monthly newsletter underwritten by the UN Children's Fund (UNICEF) and the European Community in conjunction with the Ministry of Health was inaugurated, aimed at circulating information to governmental and nongovernmental organizations assisting children³⁶.

³⁶ *Engageons-nous pour les enfants roumains; Grija pentru copiii nostri; the Care of Romanian Children, Bucharest: Romanian Information Clearing House, 1998.*

In 1992 legislative measures were passed regarding the handicapped (Laws 53/1991 and 57/1992). After its establishment in March 1993 by governmental decision (Decision 103), the National Committee for Child Protection opened an office to help coordinate the activities of these organizations so that their efforts might be more efficient as well as beneficial to those most in need. By the end of 1994, more than 300 aid organizations were operating in Romania. Some deal specifically with orphans, some with foster care, others with street children or the handicapped; still others perform multiple humanitarian tasks (Kligman, 1995).

According to one official source, as of April 1993, there were approximately 158,078 institutionalized children. It is important to point out that the number of institutionalized children initially decreased after the fall of the regime, as a result of more adoptions and the legalization of abortion, and then began to increase again as a consequence of postsocialist economic instability. Although demography is no longer a primary factor leading to institutionalization, the hardships of daily life have continued. With growing marketization, class differentiation has become visible. Poverty compels many parents to institutionalize their children. The material conditions of these institutions have been enhanced since Ceaușescu's execution, although the prospects for long-

term infrastructural improvement warrant concern. In June 1995 the international relief organization Doctors without Borders announced that it would terminate activities in Romania, asserting that too little had been achieved on behalf of the institutionalized children. The number of children committed to institutions has continued to grow, yet the approach to their care remains too medicalized (Chatelot, 1995).

7.5. Children for Adoption, Children for Sale, Street Children

Caught up in the post-revolutionary fervour of 1989, foreigners began traveling to Romania with hopes of adopting the children whose images had inspired international humanitarian compassion (Kligman, 1992). The French and Belgians had previously reacted with outrage to media reports about Ceaușescu's village systematization plans by creating goodwill ties with villages in Romania; after 1989 they were among those who went to salvage the children incarcerated in institutions. In this small way, they joyously participated in the 'return to Europe' that was the promise of the day (Kligman, 1992).



Image of a child in a Romanian orphanage, 1990. Copyright JAMES NACHTWEY

Other prospective parents came from as far away as New Zealand. As the word spread among the international community of individuals and couples wanting to adopt, Romania became an adoption hot spot. It was projected that at least one-third of all international adoptions in one year's time would be from Romania. Law 11 of 1990 granted foreigners the right to adopt Romanian children. Yet for reasons elaborated below, provisions of this law proved inadequate to handle problems arising from the influx of adoptive parents. According to a report issued in 1991, foreigners had adopted 1457 Romanian children during only the three-month period between August and October, 1990 (Ministry of Justice, March 1, 1995). By the end of that year they had adopted 2951 Romanian children; another 1741 children had been welcomed into Romanian families (a development underplayed by the foreign media). The U.S. Embassy reported that by June, 1991, American citizens had adopted

1451 children, up from a total of 480 for all of 1990 while the Immigration and Naturalization Service claimed there had been 2287 adoptions by Americans as of September 1991 (Kligman, 1998). The 1991 figures also reflect what had become a lucrative business in privately arranged adoptions (Lawson, 1991).

Foreign adoption of Romanian children had been permitted in very limited numbers during the latter years of the Ceaușescu regime. This little publicized practice was another facet of the commerce in human flesh that had enabled Jews and Germans to be bought from Romania, Hungarians wanting to emigrate to Hungary were not so fortunate, the Hungarian currency not having been convertible. Children also had hard currency price tags attached to them and were among Romania's exportable goods, in direct contradiction to the stated ideological goals of the pronatalist policies (Dempsey, 1989). G. Dupoy's article "Romania: Ceaușescu even sells abandoned children," which appeared in *Le Quotidien de Paris*, took issue with Ceaușescu's cynical machinations: "With his great clairvoyance, he realized that many families in the West wanted to adopt children, and that the market was tight. But, in Romania there were beautiful blond babies with blue eyes. They would command a hefty price" (Galainena, 1989, p. 64). In 1981, French couples adopted 145 Romanian children; by 1983 the number had fallen to 92. Thereafter,

foreign adoptions became ever rarer, or simply better hidden (Kligman, 1992).

This changed dramatically in 1990, when foreigners flocked to Bucharest, as well as to other Romanian towns from which they might 'save' a child. Many whose journeys had been prompted by a humanitarian response to the media images projected around the world were nonetheless overwhelmed by the conditions they confronted face-to-face upon arrival at the state-run institutions. A British woman expressed her deep revulsion: "I have never believed in abortion but I did think that for many of them death would have been preferable to the way they were living" (Sarler, 1991, p. 22). Foreigners scoured the orphanages, looking for the child that would inspire an affective bond. Prospective adoptive parents often arrived in groups, each waiting to be shown available children. These were confusing, traumatic times, especially for Romanians. To cope with the increasing number of adoption requests, the Romanian government formed the National Adoption Committee in early 1990. Among its tasks was the coordination of data on institutionalized children eligible for adoption. However, lack of adequate staff and a computerized information system led to bureaucratic inefficiency and may well have encouraged institutional corruption.

Gradually, as the channels through which children were obtained

changed, the emotional rhetoric about the humanitarian rescue of children from the abysmal conditions in the orphanages lost its force. In its stead, a more generalized rhetoric emerged about saving children from the difficult living conditions in Romania and giving them the opportunity for a better life in the West. Before the July 1991 modification of the adoption law, which was designed to stop private adoptions and abuse, many if not most children were acquired via private connections, a fact usually overlooked in the media accounts of the baby trade in Romania (Kligman, 1995).

The creation of the National Adoption Committee inadvertently encouraged expansion of the private market, or what became known as trafficking in babies, rather than facilitating the adoption process. Hence, many foreigners eager to adopt a Romanian child opted for private networks. This route was faster than the official bureaucratic procedures; it was also more expensive, very arbitrary, and subject to coercion, corruption, and foreign complicity with these acts (Hunt, 1991).

For all of the legitimate adoptions, there were those that simply were not. Coercion of Romanian mothers happened in various ways. Many adoptive parents considered themselves at the mercy of adoption entrepreneurs; and indeed they often were.

To counteract the abuses that had surfaced as a result of the trafficking in

children, President Ion Iliescu signed Law 48/1991 on July 16, 1991.⁹⁸ This law modified the terms of Law 11/1990 granting foreigners the right to adopt Romanian children. Henceforth, foreigners would be able to adopt only children registered with the National Adoption Committee, meaning that the children were officially eligible for adoption. The intent of governmental regulation was to eliminate the profit motive, which had given rein to exploitation and corruption, as well as to slow the exodus of Romanian youngsters. Among the law's provisions is the necessary institutionalization of orphaned children as a means of preventing their sale and determining the legality of their legal adoption status. Children had to reside in an institution for a minimum of six months. This trial period gave the parents time—if the child was a social orphan—to change their minds or for adoptive families in Romania to be found (Kligman, 1995).

The number of adoptions in Romania has increased steadily since 1990, whereas the number of foreign adoptions has declined noticeably. However, a rise in the latter since 1994 may reflect the consequences of both increased bureaucratic efficiency and international diplomatic pressure.

The effects of Law 48/1991 may be seen by looking at the annual adoption figures (table 7.2).

Table 7.2 - Number of adoptions, Romania 1990-1994

Year	Adoption in Romania	International adoptions	Total
1990	1,741	2,951	4,692
1991	2,343	7,159	9,502
1992	2,647	157	2,804
1993	3,208	891	4,099
1994	4,830	2,038	6,868
Total	14,769	13,196	27,965

Source: Ministry of Health, Romania reported to the World Health Organization, 1997

In part as a concession to continuing international insistence, a critical legislative decision defining legal abandonment, Law 47/1993, was finally issued. The ambiguity about the legality of a child's adoption status had contributed importantly to bureaucratic procrastination on the part of the Romanians and frustration for foreigners (Pepel, 1994). Caught in the midst of a legal limbo, children remained institutionalized; they were neither claimed by their parents, some of whom had not made any effort to see them, nor eligible for adoption because their parents had not relinquished their rights. The new law specified that a court had the authority to annul parental rights after six months of evident lack of interest in the child.

Diplomatic pressure has had a positive influence on the formulation of certain legislative decisions. While all of the above laws have been necessary, the controversies surrounding the adoption of Romanian children have also brought to the fore the complexities of, and international engagement in, the global politics of reproduction. Despite

the tremendous benefits that international involvement has brought, not all of these efforts have been laudable. These latter raise questions about whose interests are at stake.

Not all abandoned children have been institutionalized, adopted, or reintegrated with their families. Others have joined the ranks of the world's urban street urchins, a phenomenon unknown in communist Romania. In the 90's they hovered around the streets, markets, and train stations of the capital city, which is said to host the greatest number of them.



Homeless child living in the Bucharest Underground Tunnels and Sewer. Copyright PEACE Fund.

Street children are a consequence of both the pronatalist policies that contributed to the birth of unwanted children and the economic turmoil that has affected so many families in the immediate post-Ceaușescu period of change. Among these children are the homeless who have lived

on the streets for several years, children who have recently fled their homes or institutions to live on the streets, and those who work on the streets to contribute to their families' incomes. Romanian authorities have noted that the inhalation of volatile substances has become popular, especially among street children, in 1993, 223 persons (42 under the age of fourteen, 170 between the ages of fourteen and eighteen, and 11 over eighteen years) were identified who had consumed these kinds of substances (*Conventia O.N.U. cu privire la drepturile copilului—stadiul aplicarii in Romania*, 1994).

The growing number of street children in urban areas suggests that this phenomenon warrants attention. To date, media, government, and socio-ethnographic interest has been limited. Yet the infrastructural problems that have contributed to the emergence of this urban phenomenon continue to exist. Children born to parents whose economic conditions have worsened may well find themselves living in the streets.

Conclusion

“In this climate of economic stability, we all celebrated the arrival of the child whose birth at the end of last year enabled our country 's population to surpass the threshold of 23 million inhabitants. We are a free people and masters of our own destiny. We have a wonderful country, with a strongly developed economy, fully involved in the process of modernization.” (Ceașescu, 1988, pag. 3)

Between 1957 and 1966 Romania had a very liberal abortion policy and abortion was a very common method of contraception. In 1966, the Romanian government abruptly made abortion and family planning illegal. In a desperate attempt to increase the population of Romania, Ceașescu banned birth control and abortion, and ordered Romanian women of child-bearing age to have five children each.

And yet biological and social reproduction rarely prove to be as straightforward as political or religious ideals represent them. Life circumstances intervene, complicating the interrelations between what is said, what is believed, and what is done. Reconciling competing interests and pressures often draws individuals into multi-layered acts of complicity and duplicity, demonstrated through Ceașescu regime and the demographic policies.

Furthermore, the effect of the suppression of birth control methods in Romania and its differential impact has received wide attention from demographers and economists around the world.

To enforce Decree 770, secret police were instated at hospitals, women were subjected to monthly tests by gynaecologists, sex education in schools and overall propaganda was refocused on the benefits of motherhood, and people were taxed for being childless. Women, of course, found themselves heavily criminalised if they did not comply with Ceaușescu's reproductive policies.

In some ways, the abortion and birth control ban worked: the Romanian population steadily increased, the demographic policy combined with the glorification of childbirth led to a huge baby boom –but the consequences were tragic and long-reaching.

Childbirth mortality rate became the highest of Europe, and many women died as a result of complications arising from illegal terminations. Countless others were left permanently maimed. Those who did have children found themselves unable to afford their upkeep. As a result, unwanted babies were abandoned to dire conditions in communist orphanages: those who lived until the age of 12 (and not many did) were reclaimed by their parents and put to work.

This policy was sustained, with only minor modifications, until December 1989, when following the fall of communism, Romania

reverted back to a liberal policy regarding abortion and modern contraceptives.

From a comparative perspective, nowhere in the Soviet sphere was the ‘marriage’ between demographic concerns and nationalist interests more extreme than in Ceaușescu's Romania. The Romanian case is different when compared to the Eastern Europe landscape because, unlike in other Eastern European countries, Romania restricted access not just to abortion but also to other birth control methods. It is in this case that women's bodies were increasingly used in the service of the state.

Ceaușescu's Decree no. 770 in 1966 put an abrupt stop to abortion as a primary and legal method of fertility control—and catapulted Romania into the limelight of the international demographic literature, at an incommensurable price for the individuals who lived that era and maybe for an entire people.

In post-Ceaușescu Romania, a demographic crisis of enormous proportions is looming. Transnational inequalities have emerged heavily and the rapid class differentiation accompanying the endless post-communist transition has affected reproductive practices in Romania at individual, local, national, and international levels. But, at least, women's reproductive lives are no longer subjected to the demographic policies that turned women into human machines that reproduced future workers.

In the short-term, the lifting of the restrictive ban in 1989 decreased fertility by 30%. Results from Romania's 23-year period of continued pronatalist policies suggest large increases in lifecycle fertility for women who spent most of their reproductive years under the restrictive regime (about 0.5 children or a 25 % increase).

These results are large compared to the 10 % reduction in fertility in other Eastern European countries following changes in their abortion laws in the 1990s (Levine and Staiger 2004) and the reductions in short-term and lifecycle fertility of less than 5 % in the United States associated with *Roe v. Wade* (Levine et al. 1999; Ananat, Gruber, and Levine 2007).

The results imply that at least in the Romanian case where there is a lot of demand for fertility control methods, the provision of birth control methods can have large effects on fertility levels.

When analysed in a synchronic perspective, the human drama caused by the Romanian policy is tragic: illegal abortion, infant and maternal mortality, child abandonment, infant AIDS, and international adoption.

When analysed in a diachronic perspective, what remains as legacy is the analysis of these specific policies of reproduction as a focused case study of the relations between the state and its citizens. These policies brought the state directly into its citizens' bodies and their intimate relations. As

such, the pronatalist policies may be viewed as indicative of the character of the era, of how the state conceived of and represented itself.

The analysis of the complex relationship between the official discourse about reproduction, the policies that translated this official rhetoric into state practices, and citizens' lived experiences enable us to understand the means by which the regime was perpetuated, by which compliance and complicity were systemically structured, and by which that state interfered into the social structure and anthropological organisation of a people to the point of dismantling it, leading to the prospect of an enormous demographic crisis in contemporary Romania, caused both by low births and by emigration.

Following the structure of this doctoral thesis, from an ideological and philosophical point of view, the totalitarianism of Romania's communist regime suffocated the very ideals that school of thought was founded on.

From a demographic point of view, the inhumane demographic policy during Ceaușescu's regime, in the short and mid-term perspective, produced results whose costs are not sustainable, even if the analysis is uniquely mathematical and takes into account numbers, figures and economic data. In the long term, it was entirely counter-productive leading to a contemporary demographic crisis of huge proportion, fuelled by very low birth rates and emigration. The modest demographic gains

of this policy vanished quickly after the collapse of communism. As in other former socialist countries of Central and Eastern Europe, fertility rates fell sharply in the post-communist period which, together with significant waves of emigration, led to a substantial demographic decline. According to census data, the Romanian population decreased by more than 3 million (14%) between 1992 and 2013 and its decline is projected to accelerate in the future (to almost 1/3 of the 1992 level by 2050).

From a political point of view, the activities associated with the governance of the country in the context of the demographic policy, and especially the debate inside the Romanian Communist Party and its branches demonstrated to be entirely bankrupt and morally compromised, leaving a legacy of corrupt leadership.

From a sociological point of view, the feminist progress that communism had promised, remained entangled in the contradiction of the women in the workforce, and the woman child-bearer throughout her entire fertile years. The contemporary consequences of the sociological implications of the demographic policy include the resistance of anachronistic socio-economic groups who remain last in society due to the inherited trap of 'more children than those you can raise'.

From an anthropological point of view, such intervention in the functioning of the nuclear family in a context in which society was

mainly rural and even possibly antiquated, may have broken the indispensable bricks of the social system, leaving behind a non-state representing a non-country.

The methods and the virulence of the Romanian systematization of repression have rendered this country an example in the large gallery of human atrocities, leaving it well-known for all the wrong reasons.

Last but not least, from the point of view of the singular individuals who have directly suffered the consequences of the demographic policy in analysis, no number can justify the horrors lived.

While agreeing that the aftermath of the second world war and the contextual demographic policies did indeed leave Romania in a disastrous situation, and conceding that the Socialist Republic of Romania did indeed coincide with an indispensable momentum of modernisation and industrialisation which did align Romania to the Zeitgeist of the Eastern Block (if not to the other nations of the world), and that particularly on the basis of the government's demographic policy, two points remain unvaried: (1) the cost of the 'experiment' for those generations who lived through it, for those generations that came after it and possibly for many generations to come was exorbitant and (2) with a purely calculating logic, attributing the modernisation of Romania to the communist regime is narrow-minded, for the phenomenon may

have been caused by the overall situation of universal changes and technological revolutions.

What this matter leaves us, from a holistic point of view, is where do we draw the line within which the collective human experience of society as a whole is more important than a single person's life.

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