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Article no: IAHB_A_1134655

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6 SHORT REPORT

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9 Exploring poverty: skeletal biology and documentary evidence in
10 19th–20th century Portugal

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14
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17
18 Abstract

19 *Background:* The inference of the state of wealth or poverty from human skeletal remains is a
20 difficult task, as the limited number of skeletal changes are mediated by numerous other
21 physiological, biomechanical and pathological events. In recent years, identified skeletal
22 collections have become valuable resources in enabling aetiologies of these changes to be
23 understood while controlling for some known causative factors, e.g. age, sex and occupation.
24 This has favoured more rigorous data analysis and interpretation.

25 *Aim:* This study compares the presence of osteological makers of occupation—specifically
26 degenerative joint changes (DJC)—between socio-economically framed occupational groups
27 whilst controlling for age-at-death.

28 *Materials and methods:* A total of 603 individuals were distributed into seven occupational
29 groups used as a proxy for their socio-economic status.

30 *Results:* The results demonstrated that age was a contributing factor for DJC. Differences
31 between occupational groups were only found for the hips, right shoulder and ankle.

32 *Conclusions:* Differences found were not necessarily representative of low vs high socio-
33 economic status. Furthermore, there are limitations associated with the use of occupation-at-
34 death, based on documentary evidence, which does not necessarily reflect wealth-status.

35 Introduction

36 The World Health Organisation (WHO, 2015) calculates that
37 circa 1.2 billion people currently live on less than a dollar per
38 day and nearly 800 million people in developing countries are
39 under-nourished (OECD, 2003). This reality substantially
40 affects the immune system, contributing to an increase in the
41 incidence and severity of diseases, as well as to low life
42 expectancies, to which living conditions and exposure to
43 pollutants and lack of healthcare or social provision only
44 contributes (OECD, 2003). Such contexts have severe impli-
45 cations for a person's development and life course. A life of
46 famine and hardships may be seen in skeletons through
47 changes mediated by physiological and biomechanical stress
48 and ill-health. In fact, the relationship between certain
49 physiological stress markers and the living conditions of
50 past populations is an issue frequently addressed in the
51 palaeopathological literature (see Grauer, 2012, for detailed
52 bibliographic references). Numerous challenges remain when
53 using skeletal changes to infer socio-economic status or
54 wealth, nevertheless this remains common (for overall
55 summary see Grauer, 2012). In recent years, the use of

Keywords

Degenerative joint changes, occupation,
identified collections, skeletons, socio-economic status

History

Received 30 September 2015

Revised 10 December 2015

Accepted 14 December 2015

Published online ■■■

skeletal changes as proxies for wealth and health has been
scrutinised (Alves Cardoso, 2008; Roberts et al., 2012).
Recent palaeopathological approaches to human remains have
made it clear that this is a complex discipline and that bone
lesions should not be interpreted simplistically (Jurmain et al.,
2012).

One of the primary limitations associated with the study of
skeletal indicators of physiological and biomechanical stress
is the inability to precisely control for sex and age: variables
which have significant impact on human development and
homeostasis (Roberts et al., 2012). Despite the number of sex
and age-at-death assessment methods, these still lack accu-
racy (Falys et al., 2006). This growing awareness of the
limitations of using skeletal changes as proxies for external
stressors and the need for testing these methodologies and
interpretations while controlling for some variables is
becoming better understood (Alves Cardoso & Henderson,
2013).

Recently, bioarchaeologists (those studying archaeologic-
ally derived biological material, in this case human remains)
have turned more to human identified skeletal collections
(HISC) to test such relationships (e.g. Alves Cardoso &
Henderson, 2013; Henderson et al., 2013). HISC have made it
possible to access accurate skeletal biographical data, e.g. sex
and age-at-death. Such collections enable these variables to be
controlled, which would otherwise negatively impact upon
the accurate interpretation of the cause of skeletal changes

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121 (Alves Cardoso & Henderson, 2013). Furthermore, HISC
 122 enable the contextualisation within well-known historical and
 123 social contexts of these individuals facilitating rigorous data
 124 analysis and interpretation.

125 The combination of skeletal biological data with docu-
 126 mentary evidence based on probate records and other
 127 historical documentation provides an optimal scenario for
 128 the exploration of the relationship between socio-economic
 129 status and skeletal changes. This study aims to explore
 130 biological skeletal indicators commonly used to assess
 131 activity, specifically degenerative joint changes (DJC), and
 132 to determine if these are a good biological indicator of socio-
 133 economic status. Occupation as listed at death will be used as
 134 a proxy for wealth status based on contemporaneous docu-
 135 mentary evidence. The analysis will control for age-at-death
 136 and sex of the individuals. The hypothesis is that those with
 137 low socio-economic status will have physically harder occu-
 138 pations, poorer nourishment and worse living conditions,
 139 leading to higher DJC rates.

141 **Materials and methods**

142 Skeletons ($n = 603$: 300 males and 303 females) from two
 143 Portuguese identified collections covering the late 19th to
 144 early 20th centuries were selected for analysis: the Coimbra
 145 Identified Skeletal Collection (CISC) and the Luis Lopes
 146 Skeletal Collection (LLSC) (Cardoso, 2006; Rocha, 1995).
 147 For each collection, biographical data from death records
 148 provides each individual's name, age, cause of death, place of
 149 death, occupation and their address. The sample studied
 150 consists of individuals who lived and died between 1822–1965.
 151 The skeletons were selected based on the accessibility to
 152 biographical information, state of preservation and absence of
 153 pathological skeletal changes to avoid biasing the interpret-
 154 ation of DJC (for sample selection see Alves Cardoso, 2008).
 155 Seven major occupational groups were created (Alves
 156 Cardoso, 2008; Roque, 1988) aiming to contextualise the
 157 sample within the Portuguese social and economic frame-
 158 work. The socio-economic status (SES) of each occupational
 159 group was inferred based on the income values from the
 160 Annual Statistical Reports available, which were produced by
 161 the Instituto Nacional de Estatística (National Institute of
 162 Statistics: D.G.E. 1904–1906, 1919, 1929–1934; I.N.E. 1936).
 163 The reports were selected according to the year of death of the
 164 individuals, ranging from 1904–1936, and their availability
 165 for online consultation. Based on these income values, two
 166 broad categories, low and high incomes, were created to
 167 classify each occupational group (see Table 1 for details on
 168 occupational groups). Eight joints, upper and lower limbs
 169 combined, were scored (from 0–4) for DJC based on marginal
 170 lipping (i.e. changes occurring around the joint rim), porosity,
 171 eburnation and osteophytes on the articular surface (Buikstra
 172 & Ubelaker, 1994). These scores were added together into a
 173 single number (SUM_DJC) to quantify changes at the
 174 shoulder, elbow, wrist, hip, knee and ankle; the higher the
 175 value the more changes exist at that joint (Alves Cardoso,
 176 2008). Descriptive statistics were computed and differences in
 177 age between occupational groups were calculated using a
 178 Kruskal-Wallis test. Analysis of covariance (ANCOVA) was
 179 used to study the relationship of DJC for each occupation,

Table 1. Descriptive statistics of age-at-death and the sum of DJC scores (Sum_DJC) for each occupational group and joint.

Occupational groups	SES	Age at death								SUM_DJC LEFT												SUM_DJC RIGHT											
		n (♂/♀)	Mean	SD	Min.	Max.	Shoulder		Elbow		Wrist		Hip		Knee		Ankle																
							n	Mean	SD	n	Mean	SD	n	Mean	SD	n	Mean	SD	n	Mean	SD												
Government administration/Services	High	52 (5/47)	55.6	17.73	23	88	51	4.14	4.41	50	2.08	3.04	51	1.04	2.07	52	3.5	2.93	52	3.17	3.31	52	0.56	0.75									
Commerce/Transport	Low	85 (0/85)	51.26	17.5	20	85	84	4.32	4.34	83	1.89	2.88	83	0.69	1.33	84	4.14	3.49	85	2.73	3.77	85	0.61	0.91									
Skilled workers/Artisans	Low	102 (4/98)	48.76	18.32	20	88	102	3.58	4.09	102	1.37	1.96	100	0.79	1.52	102	3.19	3.16	102	2.48	4.21	101	0.37	0.91									
Farmers/Servants	Low	28 (18/10)	46.54	17.93	21	80	28	3.68	4.21	28	1.82	3.84	28	0.43	1.4	28	2.07	2.16	28	1.71	3.29	28	0.68	1.42									
Unskilled workers	Low	37 (0/37)	49.22	13.32	26	70	37	3.97	4.04	37	2.11	3.08	36	1.06	2.34	37	3.7	2.91	37	1.95	2.66	37	0.3	0.57									
Army/Navy	High	23 (0/23)	38.35	15.89	20	73	22	1.36	2.63	22	1.41	4.09	21	0.95	1.99	23	2.43	3.04	23	1.35	2.12	23	0.35	0.65									
Domésticas (housewives)	Low	276 (276/0)	56.74	19.59	20	98	275	4.87	5.6	270	2.75	4.53	264	0.78	2	273	3.6	2.94	275	4.16	5.22	276	0.58	0.92									
Total sample		603 (303/300)	52.88	18.89	20	98	599	4.27	4.9	592	2.2	3.75	583	0.8	1.84	599	3.49	3.05	602	3.23	4.5	602	0.52	0.91									
Government administration/Services	High	51	4.59	4.85	51	2.37	3.65	52	1.33	2.51	51	4.06	3.45	52	3	3.64	52	0.81	1.12														
Commerce/Transport	Low	83	5.08	5.09	84	2.27	3.43	81	0.77	1.3	85	4.13	3.15	85	3.13	4.03	85	0.8	1.17														
Skilled workers/Artisans	Low	102	3.93	4.42	101	1.48	2.02	98	0.88	2.19	102	3.37	2.98	102	2.85	5.39	101	0.53	0.93														
Farmers/Servants	Low	28	3.32	5.07	28	2.46	5.58	28	0.71	1.98	28	2.5	2.67	28	1.75	3	28	0.29	0.53														
Unskilled workers	Low	37	5.7	6.08	37	2.41	3.54	37	1.27	2.59	37	4.16	4	37	1.7	2.53	37	0.54	0.93														
Army/Navy	High	23	2.39	3.07	23	1.35	3.66	21	0.86	1.85	23	2.61	3.03	23	1.65	2.35	23	0.43	0.84														
Domésticas (housewives)	Low	273	4.76	5.4	269	2.75	3.93	263	0.86	1.98	275	3.92	3.62	275	4.49	5.55	272	0.49	0.84														
Total sample		597	4.55	5.13	593	2.35	3.66	580	0.91	2.03	601	3.77	3.42	602	3.48	4.93	598	0.56	0.94														

SD, standard deviation; Min, minimum age-at-death; Max, maximum age-at-death; SES, socio-economic status.

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241 while considering the effect of age and sex with post-hoc tests
 242 used to identify major differences in occupational groups. All
 243 data analyses were undertaken using SPSS software version
 244 14.04 for Windows (SPSS Inc., Chicago, IL).

245 Results

247 Significant differences in age-at-death existed between occupa-
 248 tional groups ($H=35.120$, $p<0.001$), with a significant
 249 emphasis on the differences between the army/navy (lowest
 250 mean value) and the government administrative/services and
 251 housewife categories (highest mean value) (Table 1).
 252 Therefore, a covariance analysis (ANCOVA) was used to
 253 explore the presence of DJC by joints, with occupational
 254 groups as a fixed factor and age as a covariant (Alves
 255 Cardoso, 2008: 105–109). The results showed that age-at-
 256 death had a significant impact on the development of DJC in

all joints observed ($p<0.001$). The role of occupation was
 generally non-significant, except for the right shoulder, hips
 and right ankle (Table 2). Post-hoc tests pinpointed which
 occupational groups exhibited major differences. The results
 showed that the highest DJC mean values were estimated in
 commerce and transport (hips, right ankle) and unskilled
 labourers (hips, right shoulder). Housewives (left hip, right
 ankle), farmers and servants (left hip) had the lowest values
 (Table 2).

257 Discussion

258 Occupation and socio-economic status are seen as closely
 259 interwoven, due to the close association with income.
 260 Therefore, studying the relationship of indicators of occupa-
 261 tion (e.g. DJC) in HISC should demonstrate whether this is
 262 a feasible approach to identify socio-economic status in

263 Table 2. ANCOVA test and post-hoc test results for the sum of DJC scores (Sum_DJC) by joints, considering age-at-death
 264 and occupational groups.

265 Joints	266 df	267 F-value	268 p value	269 Post-hoc test results
270 SumDJC_Left				271 Groups with significant interactions
272 Shoulder				
273 Age	–1.591	376.705	<0.001	
274 Occupation	–6.591	0.495	0.812	
275 Elbow				
276 Age	–1.584	134.157	<0.001	
277 Occupation	–6.584	0.795	0.574	
278 Wrist				
279 Age	–1.575	84.982	<0.001	
280 Occupation	–6.575	1.349	0.233	
281 Hip*				
282 Age	–1.591	372.693	<0.001	
283 Occupation	–6.591	3.354	0.003	>M = Gov. administration/Services & Unskilled workers <M = Farmers/Servants & Housewives
284 Knee				
285 Age	–1.594	235.931	<0.001	
286 Occupation	–6.594	1.305	0.253	
287 Ankle				
288 Age	–1.594	95.664	<0.001	
289 Occupation	–6.594	1.179	0.316	
290 SumDJC_Right				
291 Shoulder*				
292 Age	–1.589	376.632	<0.001	
293 Occupation	–6.589	2.469	0.023	>M = Commerce/Transport & Unskilled workers <M = Gov. administration/Services & Skilled workers/Artisans & Housewives
294 Elbow				
295 Age	–1.585	193.541	<0.001	
296 Occupation	–6.585	0.880	0.509	
297 Wrist				
298 Age	–1.572	97.023	<0.001	
299 Occupation	–6.572	1.550	0.16	
300 Hip*				
Age	–1.593	543.559	<0.001	
Occupation	–6.593	3.375	0.003	>M = Commerce/Transport & Unskilled workers <M = Gov. administration/Services & Farmers/Servants & Housewives
301 Knee				
302 Age	–1.594	214.061	<0.001	
303 Occupation	–6.594	1.782	0.1	
304 Ankle*				
305 Age	–1.590	70.560	<0.001	
306 Occupation	–6.590	2.957	0.007	>M = Gov. administration/Services & Commerce/Transport <M = Farmers/Servants & Housewives

307 *Statistically significant levels.

308 df, degrees of freedom; >M, higher value of estimated mean (M) based on the ANCOVA test; <M, lower value of
 309 estimated mean (M) based on the ANCOVA test.

non-identified skeletons. This study demonstrated that this is not a viable approach. Age-at-death was shown to be a stronger contributing factor with the mean values of DJC (Sum_DJC), reflecting the age-at-death of the individuals within the occupational groups and not occupation. This represents a serious limitation to applying the method to past populations because of the previously described problem of accurately determining age, thus biasing the interpretation of socio-economic inequalities. A further limitation is the presence of males and females in some occupation categories, however, 276 of the 303 were housewives and, of the remaining 27, there were 17 servants, one farmer, four seamstresses, one nurse, one proprietor, one post office employee, one student and one teacher (distribution according to occupational group is found in Table 1). These numbers do not affect the final results or interpretation (Cardoso, 2008). It is also necessary to consider the timing of events and how these physiological or biomechanical stressors may differentially impact upon the skeleton, i.e. the organism may react differently if individuals undergo events at an early compared to an older age (Karsenty, 2003; Roberts et al., 2012). The time of occurrence of the changes cannot be determined from the changes, although some, due to their expression, imply a cumulative response by the organism. This observation points to an added dimension when attempting to infer poverty using skeletal biology, i.e. that of an individual life course and its socio-economic context. What is observed in bones, at the time of death, is a freeze frame of a life lived and may not be representative of a lifetime of occupations or of biomechanical events (Henderson et al., 2013). This is valid both for the biological context of bone change, as well as the biographical data used to explore the aetiology of it, which in the present study relates to the use of occupation-at-death as an indicator of socio-economic status.

In the current study a significant association was found to exist between DJC and some of the joints analysed, when age was taken into account: namely the right shoulder, hips and right ankle (Table 2). The traditional assumption indicates that those with the highest values undertook the most physically demanding workload. Thus, it could be interpreted that those working in commerce or in unskilled labour were experiencing higher loading (whether repetitive or in absolute force) on these joints than housewives, farmers and servants. However, these differences are not necessarily representative of low vs high socio-economic status. In fact these interpretations are far from representative of the known historical socio-economic context of these occupational groups. According to data from the National Institute of Statistics, as well as other historical records (see Alves Cardoso, 2008, for details) farmers and servants represented some of the most economically challenged people within 19th and 20th century Portuguese society. Therefore, and in the current study, DJC are not necessarily representative of economic status and should not be blindly used in the interpretation of social inequalities.

Conclusions

The aim of this study was to utilise DJC, often interpreted as indicators of heavy workload (often attributed to the poorest

in society), to study socio-economic stress in 19th and 20th century Portugal. The skeletons used were from two HISC which span the socio-economic spectrum and, most importantly, have documentary evidence enabling their sex, age and occupation to be known. In this study occupation was used as a proxy for socio-economic status. The results demonstrate that age has a significant impact on the presence of DJC and must be taken into account in all such studies. The expected results, that individuals in lower socio-economic groups would have higher levels of DJC due to their heavier workload, were not supported. However, HISC do not provide a complete picture of economic variables, such as poverty, either from the directly available biographical data or from the indirect skeletal evidence. Occupation, in this sample, is not a direct indicator of wealth status and neither are DJC.

Acknowledgements

The authors would like to thank the curators and the Department of Zoology and Anthropology at the Lisbon Museum of Natural History, Portugal, and the Anthropological Museum of the Department of Anthropology, at Coimbra University, Portugal for access to the Lisbon and Coimbra skeletal collections. The authors would also like to thank the reviewers and editors for their helpful comments.

Declaration of interest

This research derived from the author's F. Alves Cardoso PhD thesis, supervised by Dr Charlotte Roberts (also Charlotte Henderson's supervisor), Dr Marga Díaz-Andreu and Dr Pam Graves at Durham University. F. Alves Cardoso's PhD and post-doctoral research were supported by the FCT—Fundação para a Ciência e a Tecnologia (ref: SFRH/BD/12683/2003 & SFRH/BPD/43330/2008), and Calouste Gulbenkian Foundation small grant award (ref: 90106). C. Henderson's contribution was funded by FCT grant SFRH/BPD/82559/2011. The content of this research was presented at the SSHB 2015 Symposium on Human Biology of Poverty, held at Lisbon, 2–5 September 2015.

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