

Chapter 17

Mortality in the Greek Community of Odessa in 1800–1920

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Mortality is the second important demographic process after fertility. Studies in mortality as a constituent part of biometry focus on how deaths influence a population, its size and structure. Mortality is generally referred to as a process of extinction of a generation and perceived as a mass statistical process composed of a number of individual deaths coming at different ages and defining in their totality a sequence of extinction of a real or a conditional generation. As a category of historic demographic process it implies examination of “a mass process composed of a number of individual deaths coming at different ages and defining in their totality a sequence of extinction of a real or a conditional generation”¹ or is referred to as “frequency of incidents of death in a social environment”.² Together with fertility, mortality shapes natural movement (reproduction) of a population.

Death is a primary vital event for which systems of demographic statistics collect and combine data. The principal data include, among others, annual indices and rates of mortality among a population, its age and sex structure, infant and child mortality and factors of generational change. These characteristics disclose the level of development of a society and permit making judgments about a population’s reproductive strategy.

The Greek community of Odessa is certainly a bright phenomenon, both in the history of the city and in the entire Greek world in general. Until recently, most of research has focused on studies in political and public history of the Greek presence on the coast of the Black Sea. It was only at the end of the 20th century that we began seeing a shift of research interests towards studies in everyday life, social structure and

1. Gennadiy Melikyan (ed.), *Народонаселение: Энциклопедический словарь* [Population. An Encyclopedic Dictionary], (Moscow: Bolshaya Rossiiskaya enciklopediya, 1994), p. 448.

2. Vladimir Borisov, *Демография: Учебник для вузов* [Demography: A Textbook for Universities], (Moscow: NOTA BENE, 1999), p. 196.

demographic features. For these, a very important corpus of sources is represented by so-called “records of mass registers”. When Greeks of Odessa are concerned, these include data from population censuses, where Greeks are presented both separately and among other social estates, primary statistical documents as well as entries from church registers and population records. The qualitative data on the Greek community have been published previously. Publications by many researchers, from Apollon Skalkowski to Patricia Herlihy, present general information about size and structure of the Greek community of Odessa and the dynamics of these characteristics. However, it is only the study of the above mentioned sources that shall allow of analyzing actual demographic processes and phenomena.

In addition to that, we shall refer to publications and electronic database of parish registers of the Greek Church of the Holy Trinity (1800–1920), compiled by the State Archives of Odesa Region in collaboration with the Branch of the Hellenic Foundation for Culture in Odesa.³ Studies of these sources shall allow of learning more details about some important historical and demographic characteristics of the Greek community of Odessa within a wide chronological range.

It has to be specified, however, that not all parishioners of the Greek Church of the Holy Trinity were mentioned in the parish registers, i.e. not all of them were of Greek origin. Nonetheless, if close attention is paid, one can easily mark out non-Greeks by their distinctive surnames such as Shevchenko, Kalinovskiy and so on. The parishioners found their way into the parish registers on three major occasions of their life: christening, wedding and death (funeral service).

Since our calculations come from just a single parish, we realize that they cannot be directly applied to describe the population of the entire city. Nevertheless, the size of our sample population exceeds 4%, which makes it fairly representative of the entire population (sociological research of the same scale normally operates with much smaller samples of 4 per mille (‰)).

3. Liliya Belousova et al., *Греки Одессы. Именной указатель по метрическим книгам Одесской Греческой Свято-Троицкой Церкви* [The Greeks of Odessa: Name Index According to the Metrical Books of the Greek Church of the Holy Trinity in Odessa], in 7 parts, (Odessa, 2000–2014).

General Trends and Indices of Mortality

Records of funeral services amount to just above one third of all records in parish registers of the Greek Church of the Holy Trinity (6225 entries, or 38,8%). This type of data, however, is obviously incomplete since it does not contain information about deaths that occurred outside of Odessa, among yet unbaptized infants and the like. Moreover, parts of parish records from individual years have been lost (e.g. 1801, 1810, 1873, 1884). For these reasons some computations presented in this paper are rather approximate figures. Correlation of this inaccuracy is achieved at the level of ten-year periods since such time range smoothes out the influence of incomplete data from individual years and permits making more adequate reconstructions.

In absolute figures dynamics of mortality in the Greek community of Odessa are presented below in Table 17.1 and Diagram 17.1.

Table 17.1. Mortality in the Greek Community by Decades, 1800–1920
(Total Number, Male Index (M) and Sex Ratio (C))

	1800–1810	1811–1820	1821–1830	1831–1840	1841–1850	1851–1860	1861–1870
F	67	159	279	197	352	208	280
M	103	236	372	235	460	241	383
Total	170	395	651	432	812	449	663
<i>M</i>	<i>0,606</i>	<i>0,567</i>	<i>0,571</i>	<i>0,544</i>	<i>0,567</i>	<i>0,537</i>	<i>0,578</i>
<i>C</i>	<i>153,7</i>	<i>148,4</i>	<i>133,3</i>	<i>119,3</i>	<i>130,7</i>	<i>115,9</i>	<i>136,8</i>

	1871–1880	1881–1890	1891–1900	1901–1910	1911–1920	Total
F	212	221	240	170	242	2627
M	289	306	321	239	413	3598
Total	501	527	561	409	655	6225
<i>M</i>	<i>0,577</i>	<i>0,581</i>	<i>0,572</i>	<i>0,584</i>	<i>0,631</i>	<i>0,581</i>
<i>C</i>	<i>136,3</i>	<i>138,5</i>	<i>133,8</i>	<i>140,6</i>	<i>170,7</i>	<i>138,8</i>

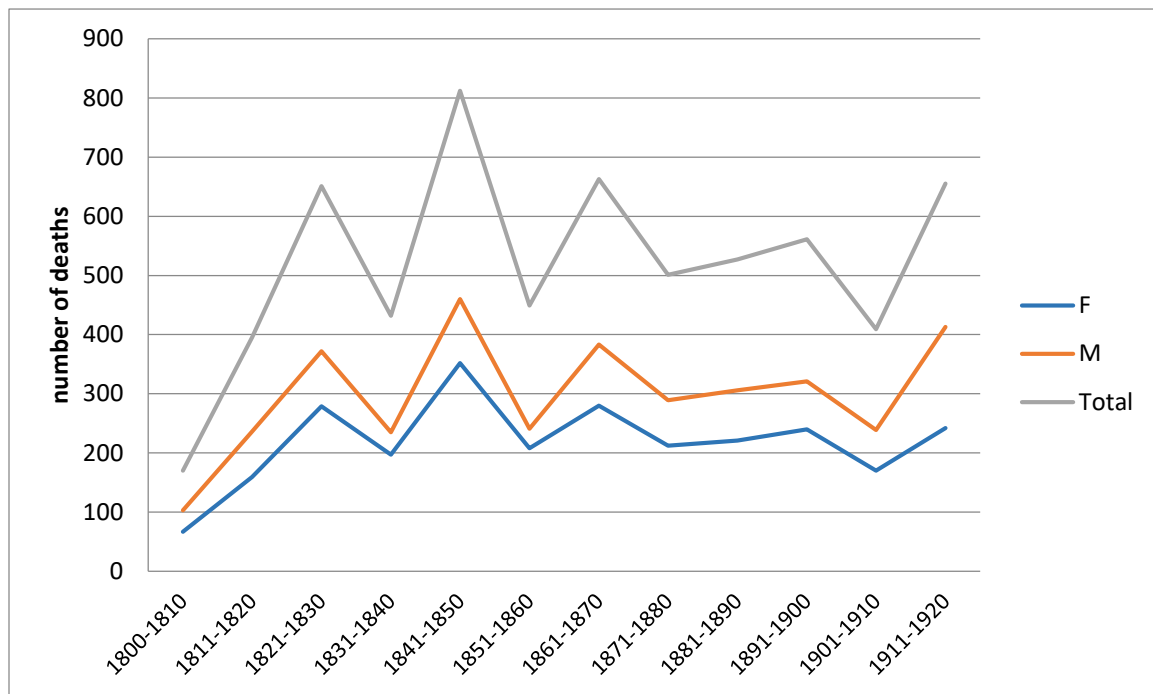
Diagram 17.1. Mortality in the Greek Community by Decades, 1870–1920

Diagram 17.1 demonstrates several principal points. It shows a clear prevalence of deaths among males over those among females (almost twice as many). This picture is typical of traditional populations in which mortality among men is generally higher than that among women. In the above series of data we see some exceptions represented by period of 1831–1840, 1851–1860 and 1901–1910. These decades show minimal prevalence of male mortality (respective mortality sex ratios show the lowest indices of 19%, 15% and 40%).

Disparity between different sexes appears even more pronounced in contexts of the calculated male index (where M is a number of man per 100 women) and the sex ratio (where C is an actual ratio of males to females multiplied by 100). These categories clearly indicate an exogenous (i.e. open) group. Not in a single examined time period does the group shows figures approaching average ones (110 for the male index). Such instances are referred to by researchers as under-registration of a specific sex.⁴ In our case (Diagram 17.2a and Diagram 17.2b), we are dealing with simply an open group since the

4. Louis Henry, Alain Blum, *Методика анализа в исторической демографии* [Methods of Analysis in Historical Demography], (Moscow, 1997), p. 27.

Greek community consisted of not only local residents but also a considerable number of incomers. It was this factor that brought about such high indices. Their rises coincided almost directly with periods of active migrations in 1800–1810 and 1900–1920, while fall of these indices in the 1830s and 1850s concurred with periods of emigration and stabilization of the Greek community of the city.

These falls among the Greek population of Odessa coincided with major unfavorable events for demographic environment of Kherson Guberniia including epidemics, wars, crop failures and droughts as demonstrated by military statistics of the first half of the 19th century.⁵

Diagram 17.2a. Mortality in the Greek Community by Decades, 1800–1920, (Male Index (M))

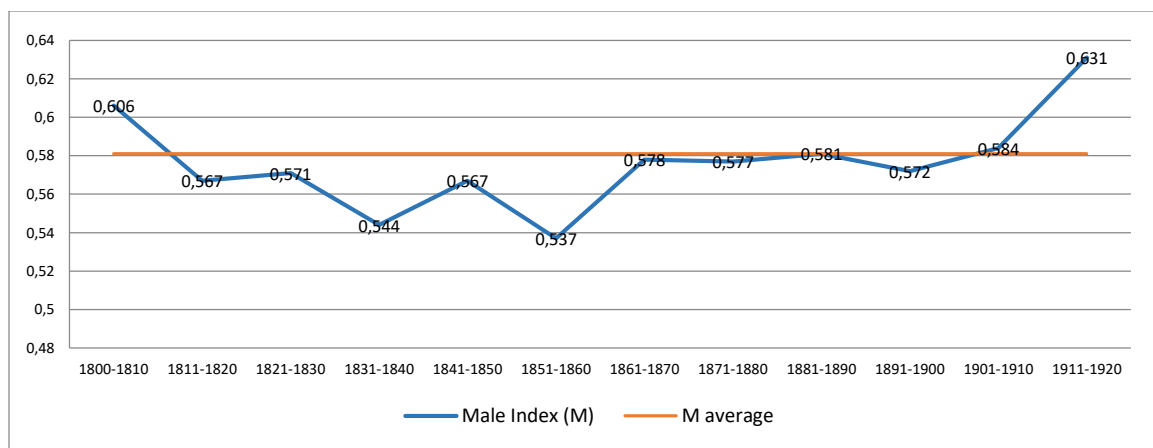
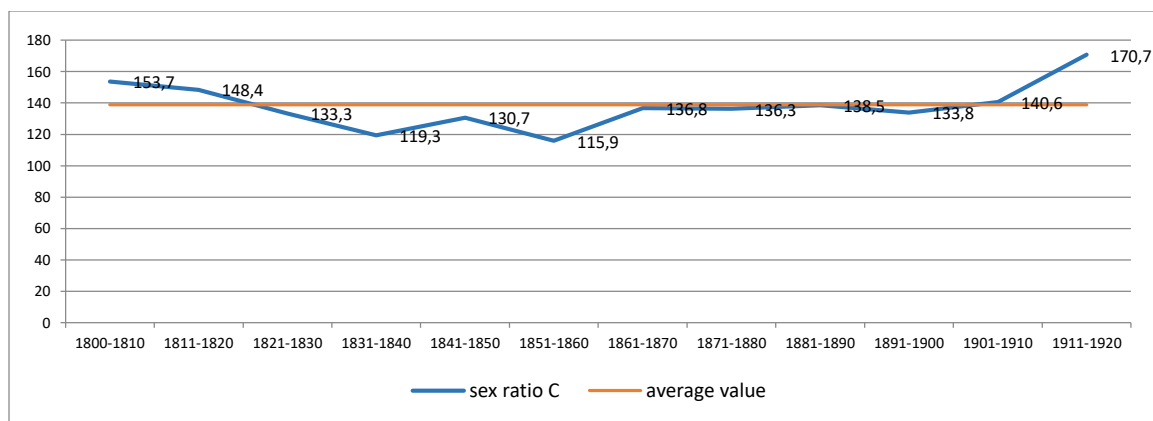


Diagram 17.2b. Mortality in the Greek Community by Decades, 1800–1920, (Sex Ratio (C))



5. Nikolai Obruchev (ed.), *Военно-статистический сборник* [Digest of Military Statistics], vol. 4, (St. Petersburg, 1871), pp. 51–52.

Comparison of indices of the Greek population of Odessa with those from the general regional context has proven informative. For example, similar indices for Kherson Guberniia in 1847 showed figures 111,6 and 0,527 (total number of the deceased amounted 40,476 people, of which 21,350 were males and 19,126 were females).⁶ The military statistical records demonstrate a similar ratio of male/female deaths – 1:0,88.⁷ In our case, these indices show figures of 113,6 and 0,531. In the Greek community of Odessa we observe higher indices than those in the region in general. This can be explained by the fact that average mortality rate in the city was somewhat higher than the regional one.

We believe that this also can indirectly explain the general situation with mortality in the Greek community of Odessa. The male population prevailed over that of females, and hence the number of deaths among men dominated. The majority of Odessan Greeks were migrants. It appears that the detected chronological ranges correlate with a decrease in number of the incoming Greek males, which naturally lowered the rate of mortality among Greek of Odessa and influenced general trends accordingly. The observed peaks of mortality in 1821–1830, 1841–1850, 1861–1870 and 1911–1920 must have been caused by some external factors. During the first three time periods high rates of mortality were caused by epidemiological factors such mass deaths of people from plague, cholera and typhus. This interpretation finds support from data for 1848 when, according to estimates by a contemporary, because of epidemics instances of death outnumbered those of birth by 1,638 people or nearly 5% of the overall volume of population movement (30,765 people died and 27,084 babies were born).⁸ Much is known about “plague” years in Odessa (1812–1813, 1829, 1835, 1837–1838).⁹ In our instance, however, we clearly see the consequences of one of 8 outbreaks of cholera (1823, 1829–1830, 1837, 1847–1848, 1852, 1865, 1892).¹⁰

6. *Новороссийский календарь на 1849 г.* [Novorossiia Calendar and Directory for 1849], (Odessa, 1848), p. 80, table 2.

7. Aleksandr Rogalev, August von Witte, Grigorii Pestov, *Военно-статистическое обозрение Российской империи* [Military Statistical Review of the Russian Empire], vol. XI: Kherson Guberniia, part 1, (St. Petersburg, 1849), p. 105.

8. Apollon Skalkowski, “О смертности и долговечности в Новороссийском крае” [On Mortality and Longevity of Life in Novorossiia Region], *Zhurnal Ministerstva Vnutrennix Del*, 1:XXIX (1850), p. 4.

9. Veniamin Belilovskii, Nikolai Gamaleya, Mikhail Burda, *Чума в Одессе* [Plague in Odessa], in 2 vols., (Odessa, 1904).

10. Konstantin Vasil'ev, Aleksandr Segal, *История эпидемий в России (материалы и очерки)* [History of Epidemics in Russia (Materials and Essays)], (Moscow, 1960), pp. 215–216.

It was one of the most dramatic outbreaks in terms of both number of deaths and geographical range. That time the epidemic spread over many European cities, and particularly those on the coast of the Black Sea.

Similarly, a high mortality rate during the last of these time periods (1911–1920) shall be explained by warfare and the Revolution of 1917.

Now, we shall attempt estimating a share of Greek mortality in the overall demographic process among the population of Odessa. In the middle of the 19th century mortality among the Greeks made up 1/25 or 4,3% of the total number of deaths in the city. Out of 2,509 deaths recorded in the municipal area,¹¹ 107 incidents fell on parishioners of the Greek church of the Holy Trinity.

In studies of mortality it is also important to estimate the number of deaths *per annum*. For these reconstructions, however, one needs to have complete data on the total number of the population for each year. In our case, we have such data only for 1892 and 1897. Therefore, we chose to make these estimates for the 1890s. We assume that an average number of parishioners of the Greek church of the Holy Trinity corresponded to a number of Greeks who resided in two central districts which roughly matched the boundaries of the parish area.¹²

The number of Greeks residing in Bulvarny and Aleksandrovskiy districts of Odessa amounted to 2,430 people (in 1892) and 2,472 people (in 1897). It is assumed that not all Greeks from these districts were parishioners of the Holy Trinity Church. However, it appears also reasonable to assume the quantity of the latter should have been compensated for by an approximately equal number of parishioners among foreign Greek non-residents of Odessa. Thus, the average number of parishioners of the church is estimated as 2,451 people.

The application of a formula for calculating the mortality index $m = (M / P \times T) \times 1000$ (where M is the number of deaths during a specific period, P is the average population size, T is longevity of a time period)¹³ gives us $m = (561 / 2451 \times 8) \times 1000 = 28,61\%$.

11. Apollon Skalkowski, “Пространство и народонаселение Новороссийского края в 1845 г.” [Territory and Population of Novorossiia Region in 1845], in *Новороссийский календарь на 1849 г.* [Novorossiia Calendar and Directory for 1849], (Odessa, 1848), p. 368.

12. This assumption shall be considered as reliable, see Herlihy, *The Greek Community in Odessa, 1861–1917*, p. 239.

13. *Демографический энциклопедический словарь* [Demographic Encyclopedic Dictionary], (Moscow, 1998), pp. 438–439; Viktor Medkov, *Демография* [Demography], (Rostov-on-Don: Feniks, 2002), pp. 232–233.

Table 17.2. Distribution of Greek Population in Administrative Districts of Odessa, 1892 and 1897

Greeks by native tongue						
District	1897			1892		
	M	F	%	M	F	%
Bulvarny	980	574	30,55	942	490	27,10
Aleksandriovskiy	548	328	17,22	602	438	19,68
Khersonskiy	601	379	19,26	656	411	20,19
Petropavlovskiy	359	214	11,26	327	209	10,14
Mikhaylovskiy	295	174	9,22	304	173	9,02
Peresypskiy	351	176	10,36	321	203	9,91
Port	32	2	0,66	93	4	2,65
Dalnitskiy	40	33	1,43	47	20	1,26
Total	3,206	1,880		3,292	1,991	

Sources: Anton Borinevich (ed.), *Результаты однодневной переписи населения г. Одессы 1 декабря 1892 года* [Results of the One-day Population Census of Odessa on December 1st, 1892], (Odessa, 1894); Nikolai Troinitskii (ed.), *Первая Всеобщая перепись населения Российской империи 1897 года* [The First General Census of the Russian Empire of 1897], in 89 vols., vol. XLVII: Odessa, (St. Petersburg, 1904).

Calculation of this index on the basis of direct data available for these years gives the respective figures of 33,9‰ and 28,9‰. These empirical estimates for individual years show somewhat higher values than the average figures for the decade.

In average, this index for the residents of Odessa in the middle of the 19th century amounted to 32,3‰,¹⁴ a little lower than that for the European part of Russia in general (35,0‰).¹⁵ For the purpose of comparison, we shall mention that in 1901–1913 this index demonstrated values of less than 17‰ in Scandinavian countries, 19‰ in England, 22‰ in

14. Calculated after Skalkowski, *Territory and Population of Novorossiia Region in 1845*, p. 368.

15. Vasilii Pokrovskii, Dmitrii Rikhter, “Население России” [Population of Russia], in *Россия: Энциклопедический словарь* [Russia: Encyclopedic Dictionary], (St. Petersburg: F. A. Brockhaus & I. A. Efron, 1898), p. 99; Boris Mironov, *Социальная история России периода империи (XVIII – начало XX в.)* [Social History of Russia in the Imperial Period (XVIIIth – Beg. XXth Century)], in 2 vols. 3rd ed., corrected and expanded, vol. 1 (St. Petersburg: Dmitrii Bulanin, 2003), p. 191.

France and 24‰ in Germany. The contemporaries related high values of this index in Russia with “poor cultural and sanitary standards in the country”.¹⁶

This comparative analysis of mortality indices characterizes that the Greek community of Odessa as the one in transition from a traditional state to modern properties. The Greek population showed a lower rate of mortality at the national level, but on the continental scope both Odessan Greeks and Russian society in general demonstrated dramatic differences from the population in West European countries (see Table 17.3).

Table 17.3. Mortality Indices in European Countries (Early 20th Century)¹⁷

Country	1901	1913	Difference	Country	1901	1913	Difference
Spain	27,8	22,1	–5,7	Scotland	17,9	15,5	–2,4
Hungary	25,4	22,3	–3,1	Ireland	17,8	17,1	–0,7
Austria	23,1	18,3	–4,8	Belgium	17,2	14,6	–2,6
Italy	22,0	18,7	–3,3	The Netherlands	17,2	12,3	–4,5
Portugal	21,1	20,6	–0,5	England&Wales	16,9	13,8	–3,1
Germany	20,7	15,0	–5,7	Sweden	16,1	13,7	–2,4
Finland	20,6	16,1	–4,5	Danmark	15,8	12,5	–3,3
France	20,1	17,7	–2,4	Norway	15,0	13,3	–1,7
Switzerland	18,0	14,3	–3,7				

Source: Pyotr Kurkin, *Рождаемость и смертность в капиталистических государствах Европы* [Fertility and Mortality in the European Capitalistic Countries], (Moscow: Soyuzorguchet, 1938), p. 26.

From the available annual records of deaths it is also possible to calculate the mortality index for the entire Orthodox population of Kherson Guberniia in the 1830s–1840s.

16. Grigorii Khlopin, Fyodor Erismann, “Современное состояние России” [The Current State of Russia], in *Россия: Энциклопедический словарь* [Russia: Encyclopedic Dictionary], (St. Petersburg: F. A. Brockhaus & I. A. Efron, 1898), p. 225.

17. Pyotr Kurkin, *Рождаемость и смертность в капиталистических государствах Европы* [Fertility and Mortality in the European Capitalistic Countries], (Moscow: Soyuzorguchet, 1938), p. 26.

Table 17.4. Mortality Among the Orthodox Population of Kherson Guberniia, 1838–1847

1838	1839	1840	1842	1843	1844	1845	1846	1847
26,991	31,466	31,109	36,478	4,0631	30,243	26,294	38,289	36,617

Total	Annual average
338,594	33,859.4

Source: Andrei Zablotskii, “Движение народонаселения России с 1838 по 1847 год” [Population Change in Russia from 1838 to 1847], in Mikhail Zablotskii (ed.), *Сборник статистических сведений о России, издаваемый Статистическим отделением Императорского Русского географического общества* [Collection of Statistical Data about Russia, Published by the Statistical Department of the Imperial Russian Geographical Society], Book 1, (St. Petersburg, 1851), pp. 76–79.

Considering that the population size ranged from 719,865 (in 1835) to 850,172 (in 1845),¹⁸ the average population size for this period can be estimated at the level of 785,000 people. Thus, the annual mortality index for this period is 47,9‰. We suspect that it might have been a little lower for urban Greek population but, in any case, toward the end of the 19th century we clearly observe a considerable (more than two-fold) decrease in the values of this index.

Table 17.5. Mortality in Russia, 1801–1860 (in ‰)

1801–1810	1811–1820	1821–1830	1831–1840	1841–1850	1851–1860
27,1	26,5	27,5	33,6	39,1	39,4

Source: Vasilii Pokrovskii, Dmitrii Rikhter, “Население России” [Population of Russia], in *Россия: Энциклопедический словарь* [Russia: Encyclopedic Dictionary], (St. Petersburg: F. A. Brockhaus & I. A. Efron, 1898), p. 92.

Comparing of these figures to those from other countries demonstrates that the mortality index in European Russia and Kherson Guberniia was two times higher than that

18. Skalkowski, *Territory and Population of Novorossiia Region in 1845*, p. 368.

in certain regions of Europe. For example, during this period this index showed values of 21,5‰ in Sweden, 23,1‰ in France and 20,3‰ in Denmark.¹⁹

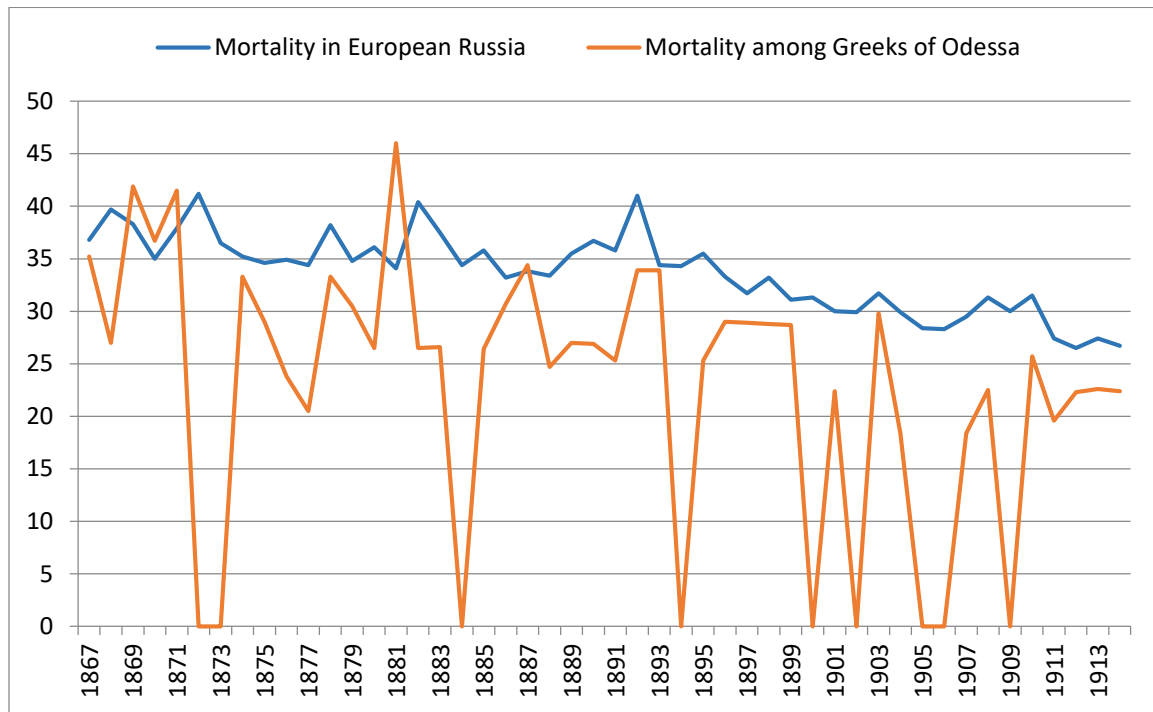
Table 17.6. Mortality in European Russia and the Greek Community of Odessa, 1867–1914

Years	Mortality (in ‰)		Child mortality (in ‰)	
	European Russia	Greeks of Odessa	European Russia	Greeks of Odessa
1867	36,8	35,2	24,3	1,7
1868	39,7	27,0	29,9	9,4
1869	38,3	41,9	27,5	12,9
1870	35,0	36,7	24,8	4,6
1871	37,9	41,5	27,4	11,6
1872	41,2	–	29,5	–
1873	36,5	–	26,2	–
1874	35,2	33,3	26,2	8,5
1875	34,6	29,0	26,6	4,8
1876	34,9	23,8	27,8	14,4
1877	34,4	20,5	26,0	11,0
1878	38,2	33,3	30,0	11,3
1879	34,8	30,5	25,2	5,3
1880	36,1	26,5	28,6	8,0
1881	34,1	46,0	25,2	6,5
1882	40,4	26,5	30,1	8,0
1883	37,5	26,6	28,4	8,4
1884	34,4	–	25,4	–
1885	35,8	26,4	27,0	14,6
1886	33,2	30,7	24,8	7,0
1887	33,8	34,4	25,6	12,8
1888	33,4	24,7	25,0	8,4
1889	35,5	27,0	27,5	8,7

19. Calculated from annual tables of mortality in: Kurkin, *Fertility and Mortality in the European Capitalistic Countries*, p. 31.

Years	Mortality (in ‰)		Child mortality (in ‰)	
	European Russia	Greeks of Odessa	European Russia	Greeks of Odessa
1890	36,7	26,9	29,2	7,5
1891	35,8	25,3	27,2	6,6
1892	41,0	33,9	30,7	7,6
1893	34,4	33,9	25,2	6,3
1894	34,3	–	26,5	–
1895	35,5	25,3	27,9	7,1
1896	33,3	29,0	27,4	8,5
1897	31,7	28,9	26,0	5,5
1898	33,2	28,8	27,9	8,5
1899	31,1	28,7	24,0	8,7
1900	31,3	–	25,2	–
1901	30,0	22,4	27,2	3,7
1902	29,9	–	25,8	–
1903	31,7	29,8	25,6	6,4
1904	29,9	18,4	23,2	7,3
1905	28,4	–	27,2	–
1906	28,3	–	24,8	–
1907	29,5	18,4	22,5	3,3
1908	31,3	22,5	24,4	5,5
1909	30,0	–	24,8	–
1910	31,5	25,7	27,1	5,0
1911	27,4	19,6	23,7	1,7
1912	26,5	22,3	–	8,1
1913	27,4	22,6	–	4,2
1914	26,7	22,4	–	4,2

Source: Kurkin, *Fertility and Mortality in the European Capitalistic Countries*, p. 83, Table 17; Frank Lorimer, *The Population of the Soviet Union: History and Prospects*, (Geneva: League of Nations, 1946), p. 34, Table 13; figures for the Greeks of Odessa are calculated from the metric books of the Holy Trinity Church.

Diagram 17.3. Mortality in European Russia and Among Greeks in Odessa, 1867–1914

Source: Kurkin, *Fertility and Mortality in the European Capitalistic Countries*, p. 83, Table 17; Frank Lorimer, *The Population of the Soviet Union: History and Prospects*, (Geneva: League of Nations, 1946), p. 34, Table 13; figures for the Greeks of Odessa are calculated from the metric books of the Holy Trinity Church.

Comparisons of the estimated annual mortality indices for the Greek community of Odessa from 1867 to 1914 with those for the Russian population in general show, at large, similar trends. Principal declines in mortality are related to the quality of our sources. Since we are dealing with an open society, part of the deaths represents a general tendency better than local factors do. This is confirmed by minimal values in 1877 and 1904. Military activities in those years “sealed” the community and, correspondingly, external circumstances exerted no influence on mortality rates.

The average mortality index for Russia in 1867–1914 was 33,7‰²⁰ while for the territory of Ukraine it showed somewhat lower values of 29,8‰²¹ (the same as the average index for Kherson Guberniia). The average mortality index among Greeks of Odessa during this period showed a lower value of 23‰. This, once again, points to a transitional character of the Greek community of Odessa.

Structure of Mortality

As far back as 1916 S. A. Novoselskii pointed out that one can make clear and explicit judgments about the nature and specificities of mortality only by examining mortality in each age group separately because at different ages people have different physiological resistibility to death.²² Following this approach, it is a common practice in historic demography to study the sex and the age structure of deceased people focusing on individual indicators (male and female mortality, age-related risks, infant and child mortality etc.).

In order to study dynamic changes in the sex and the age structure of the deceased through time, we refer to primary data presented in Tables 17.7–17.9.

The primary data from Tables 17.7–17.9 clearly show the uneven distribution of deaths among sexes and ages. We can also observe some characteristic features such as improvement in recording infant mortality starting from the 1860s, general decrease in mortality among children under 10 years of age by the end of the 19th century, general prevalence of male mortality over that among females, gradually increasing age at death etc.

20. Adolf Rashin, *Население России за 100 лет (1811–1913 гг.). Статистические очерки* [Population of Russia for 100 years (1811–1913). Statistical Essays], (Moscow: Glavstatizdatelstvo, 1956), p. 186, Table 114.

21. Mykhailo Ptukha, *Смертність у Росії й на Україні* [Mortality in Russia and Ukraine], (Kharkiv, Kyiv, 1928), p. 152.

22. Sergei Novoselskii, *Смертность и продолжительность жизни в России* [Mortality and Life Longevity in Russia], (Petrograd, 1916), p. 4.

Table 17.7. Sex and Age Structure of the Deceased in the Greek Community by Decades, 1800–1840

Age (years)	1800–1810			1811–1820			1821–1830			1831–1840		
	M	F	Total	M	F	Total	M	F	Total	M	F	Total
< 1												
1–4	33	37	70	118	101	219	165	154	319	85	89	174
5–9	6	1	7	7	7	14	28	16	44	20	20	40
10–14	1	5	6	3	2	5	6	15	21	7	5	12
15–19	1	2	3	4	2	6	12	13	25	4	11	15
20–24	1	3	4	7	9	16	9	8	17	7	3	10
25–29	3	4	7	10	10	20	10	10	20	12	12	24
30–34	7	4	11	16	2	18	16	8	24	10	7	17
35–39	14	3	17	8	6	14	18	10	28	11	8	19
40–44	9	1	10	13	5	18	29	8	37	16	5	21
45–49	4	1	5	7	2	9	12	5	17	4	6	10
50–54	5	2	7	11	2	13	10	6	16	8	4	12
55–59	4	1	5	7	2	9	3	3	6	5	4	9
60–64	3		3	7	1	8	17	6	23	12	6	18
65–69	5	1	6	3	2	5	4	2	6	3	2	5
70–74	2	1	3	4	2	6	11	7	18	9	1	10
75–79	2	1	3	4		4	1	1	2	2	3	5
80–84				2	2	4	13	3	16	5	4	9
85–89	1		1				4	2	6	8	3	11
90–94	1		1	1		1	2		2	2	2	4
95–99				2		2	1		1	1	1	2
100–104										1	1	2
105–109												
110–114								1	1			
115–119											1	1
Total	102	67	169	234	157	391	371	278	649	232	198	430

Table 17.8. Sex and Age Structure of the Deceased in the Greek Community by Decades, 1840–1880

Age (years)	1841–1850			1851–1860			1861–1870			1871–1880		
	M	F	Total	M	F	Total	M	F	Total	M	F	Total
< 1					1	1	28	27	55	44	24	68
1–4	168	136	304	78	79	157	78	62	140	45	39	84
5–9	23	19	42	7	9	16	8	16	24	17	12	29
10–14	10	13	23	4	5	9	6	6	12	4	2	6
15–19	14	25	39	3	10	13	12	14	26	9	11	20
20–24	21	23	44	11	10	21	13	14	27	12	14	26
25–29	18	17	35	8	10	18	21	16	37	12	10	22
30–34	6	8	14	11	8	19	18	12	30	8	8	16
35–39	17	14	31	10	7	17	19	17	36	6	5	11
40–44	17	15	32	7	7	14	19	6	25	18	6	24
45–49	19	14	33	7	3	10	25	10	35	15	6	21
50–54	24	13	37	15	12	27	11	8	19	23	7	30
55–59	22	9	31	14	7	21	22	13	35	16	10	26
60–64	23	9	32	21	10	31	16	12	28	16	10	26
65–69	22	3	25	14	7	21	22	9	31	8	13	21
70–74	13	9	22	11	9	20	12	16	28	9	11	20
75–79	10	5	15	9	7	16	23	9	32	14	4	18
80–84	10	5	15	5	2	7	8	3	11	5	9	14
85–89	9	2	11	3	3	6	13	2	15	3	4	7
90–94	7	5	12	2	1	3	6	4	10	1	4	5
95–99	3	3	6	1	1	2				1	1	2
100–104	2	1	3				1	1	2			
105–109							1		1	2		2
110–114								1	1			
115–119												
Total	458	348	806	241	208	449	382	278	660	288	210	498

Table 17.9. Sex and Age Structure of the Deceased in the Greek Community by Decades, 1880–1920

Age (years)	1881–1890			1891–1900			1901–1910			1911–1920		
	M	F	Total	M	F	Total	M	F	Total	M	F	Total
< 1	81		81	76		76	19	14	33	26	18	44
1–4	41	36	77	44	23	67	12	21	33	26	17	43
5–9	5	14	19	11	10	21	3	7	10	12	5	17
10–14	3	8	11	9	6	15	8	4	12	5	8	13
15–19	11	8	19	2	8	10	6	5	11	9	12	21
20–24	11	11	22	13	7	20	10	8	18	28	12	40
25–29	10	9	19	8	11	19	10	10	20	21	7	28
30–34	16	8	24	12	10	22	5	8	13	18	4	22
35–39	13	7	20	17	8	25	6	6	12	23	17	40
40–44	14	9	23	19	7	26	19	5	24	24	7	31
45–49	11	10	21	28	10	38	15	9	24	23	10	33
50–54	19	10	29	19	9	28	16	8	24	38	11	49
55–59	17	5	22	18	6	24	22	14	36	31	19	50
60–64	21	11	32	36	15	51	21	8	29	41	18	59
65–69	19	10	29	16	11	27	25	8	33	37	19	56
70–74	7	9	16	16	19	35	20	12	32	15	21	36
75–79	16	10	26	11	17	28	12	12	24	24	18	42
80–84	6	7	13	4	4	8	4	4	8	8	10	18
85–89	1	2	3	3	7	10	3	4	7	3	5	8
90–94	1	1	2	1	1	2	2	2	4		2	2
95–99	1	2	3		2	2					2	2
100–104		1	1				1		1			
105–109												
110–114												
115–119												
Total	324	188	512	363	191	554	239	169	408	412	242	654

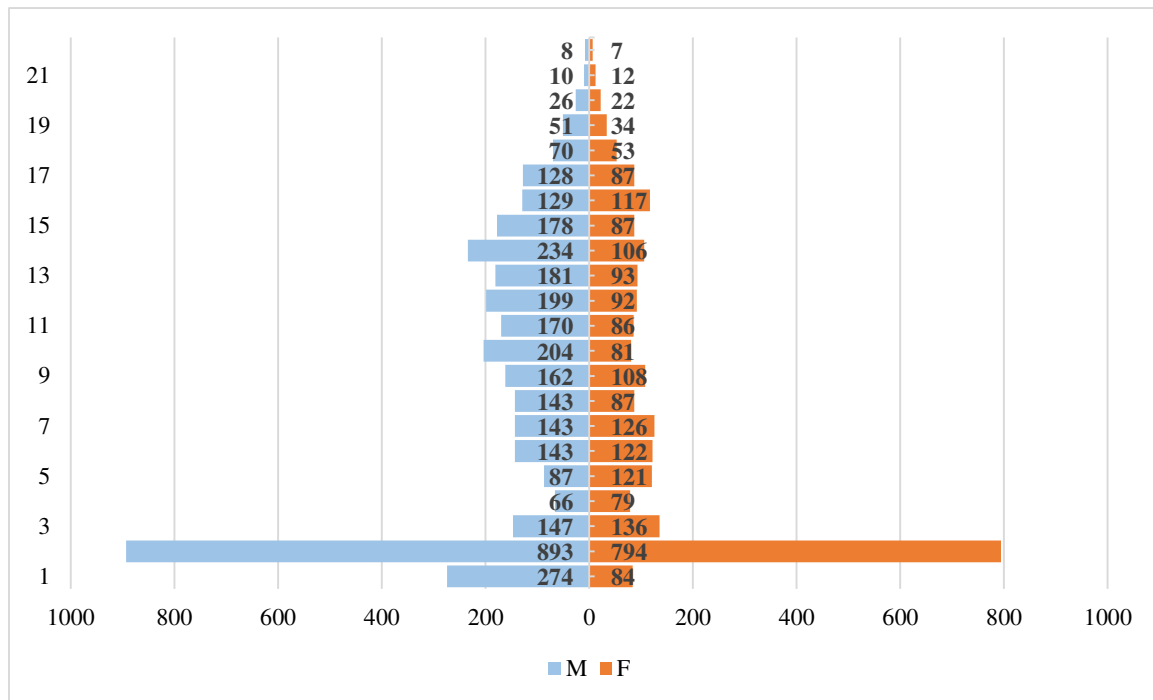
For the purposes of a more functional analysis, the same primary data have been combined into 20-year periods (Table 17.10, in 2 parts).

Table 17.10. Sex and Age Structure of the Deceased in the Greek Community by 20-year Periods, 1800–1920. Part 1 (1800–1860)

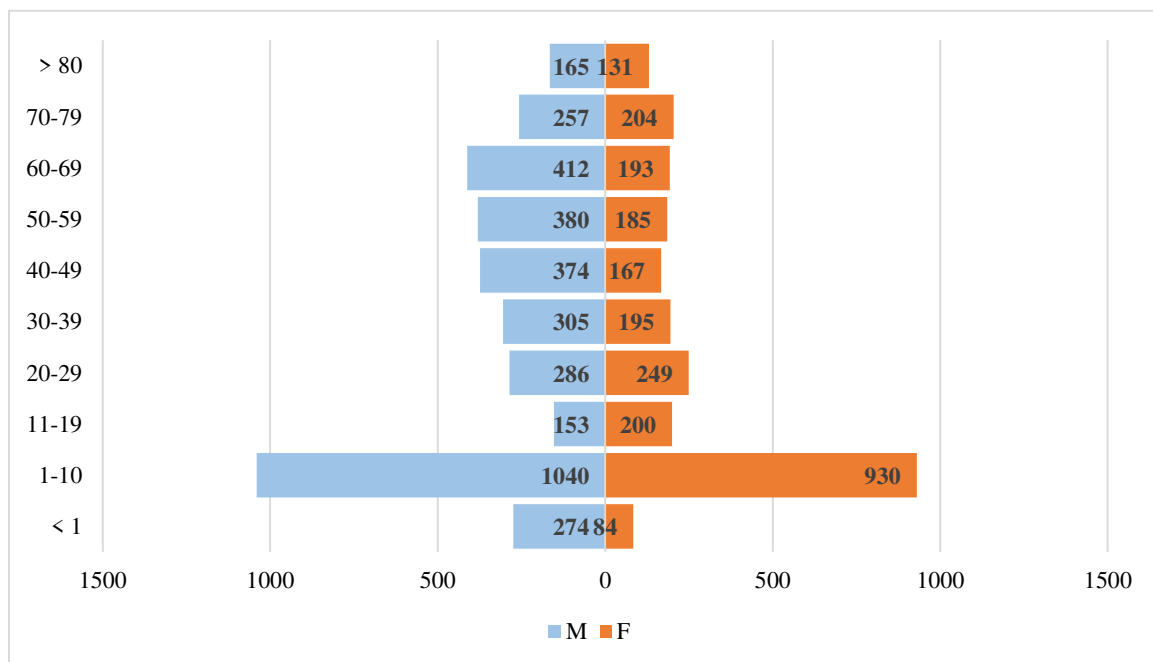
Age (years)	1800–1820			1821–1840			1841–1860		
	M	F	Total	M	F	Total	M	F	Total
< 1								1	1
1–4	151	138	289	250	243	493	246	215	461
5–9	13	8	21	48	36	84	30	28	58
10–14	4	7	11	13	20	33	14	18	32
15–19	5	4	9	16	24	40	17	35	52
20–24	8	12	20	16	11	27	32	33	65
25–29	13	14	27	22	22	44	26	27	53
30–34	23	6	29	26	15	41	17	16	33
35–39	22	9	31	29	18	47	27	21	48
40–44	22	6	28	45	13	58	24	22	46
45–49	11	3	14	16	11	27	26	17	43
50–54	16	4	20	18	10	28	39	25	64
55–59	11	3	14	8	7	15	36	16	52
60–64	10	1	11	29	12	41	44	19	63
65–69	8	3	11	7	4	11	36	10	46
70–74	6	3	9	20	8	28	24	18	42
75–79	6	1	7	3	4	7	19	12	31
80–84	2	2	4	18	7	25	15	7	22
85–89	1		1	12	5	17	12	5	17
90–94	2		2	4	2	6	9	6	15
95–99	2		2	2	1	3	4	4	8
100–104				1	1	2	2	1	3
105–109									
110–114					1	1			
115–119					1	1			
Total	336	224	560	603	476	1079	699	556	1255

Table 17.10. Sex and Age Structure of the Deceased in the Greek Community by 20-year Periods, 1800–1920. Part 2 (1860–1920)

Age (years)	1861–1880			1881–1900			1901–1920			Total		
	M	F	Total	M	F	Total	M	F	Total	M	F	Total
< 1	72	51	123	157		157	45	32	77	274	84	358
1–4	123	101	224	85	59	144	38	38	76	893	794	1687
5–9	25	28	53	16	24	40	15	12	27	147	136	283
10–14	10	8	18	12	14	26	13	12	25	66	79	145
15–19	21	25	46	13	16	29	15	17	32	87	121	208
20–24	25	28	53	24	18	42	38	20	58	143	122	265
25–29	33	26	59	18	20	38	31	17	48	143	126	269
30–34	26	20	46	28	18	46	23	12	35	143	87	230
35–39	25	22	47	30	15	45	29	23	52	162	108	270
40–44	37	12	49	33	16	49	43	12	55	204	81	285
45–49	40	16	56	39	20	59	38	19	57	170	86	256
50–54	34	15	49	38	19	57	54	19	73	199	92	291
55–59	38	23	61	35	11	46	53	33	86	181	93	274
60–64	32	22	54	57	26	83	62	26	88	234	106	340
65–69	30	22	52	35	21	56	62	27	89	178	87	265
70–74	21	27	48	23	28	51	35	33	68	129	117	246
75–79	37	13	50	27	27	54	36	30	66	128	87	215
80–84	13	12	25	10	11	21	12	14	26	70	53	123
85–89	16	6	22	4	9	13	6	9	15	51	34	85
90–94	7	8	15	2	2	4	2	4	6	26	22	48
95–99	1	1	2	1	4	5		2	2	10	12	22
100–104	1	1	2		1	1	1		1	5	4	9
105–109	3		3							3		3
110–114		1	1								2	2
115–119											1	1
Total	670	488	1158	687	379	1066	651	411	1062	3646	2534	6180

Diagram 17.4. Sex and Age Structure of the Deceased in the Greek Community, 1800–1920

(Y axis show age at death with a 5-year interval for females (left) and males (right))

Diagram 17.5.

(Y axis shows ages at death, in years: 1 – < 1; 2 – 1–10; 3 – 11–19; 4 – 20–29;
5 – 30–39; 6 – 40–49; 7 – 50–59; 8 – 60–69; 9 – 70–79; 10 – > 80)

Diagrams 17.4–17.5 demonstrate the highest mortality figures for the period of childhood (up to 4 years of age): 10,8% among boys and 2,3% among girls. Yet, 25,5% of the girls and 41,0% of the boys died before reaching 10 years of age. In their juvenile ages both sexes demonstrate almost similar rates of mortality with greater number of deaths among girls than among boys (200 to 153). Further risks are related with problems of child-bearing among females or hard labor among males. For the males, the prevalence of deaths at their reproductive and socially active ages (21–49 years) falls out of the traditional models of reproduction among populations. It is common that male mortality rates are lower than those among females,²³ but in the Greek community of Odessa the former is almost twice as much the latter. The reason for this appears two-fold. On the one hand, gynecological and obstetric services were in good condition in Odessa. On the other hand, a migratory character of the group promoted the prevalence of men and correspondingly increased absolute figures of male mortality. It seems that hard labor, perils of the sea and dangers of doing commercial business raised figures of mortality among males as well.

It is worth noting that the group shows a certain balance in a rather high share of deaths of elderly people over 80 years of age: 5,2% among females and 4,5% among males. Apparently, during the 19th – early 20th century mortality among the Greek population of Odessa was significantly influenced by exogenous factors (diseases, warfare etc.).

Dynamics of the observed trends are well seen when the data is combined into longer periods (Table 17.11).

23. Władysław Bortkiewicz, *Смертность и долговечность женского православного населения Европейской России* [Mortality and Life Longevity of the Female Orthodox Population of European Russia], (St. Petersburg, 1891), pp. 5, 13–14.

Table 17.11. Sex and Age Structure of the Deceased in the Greek Community by 40-year Periods, 1800–1920

Age (years)	1800–1840			1841–1880			1881–1920		
	M	F	Total	M	F	Total	M	F	Total
< 1	0	0	0	72	52	124	202	32	234
1–9	462	425	887	424	372	796	154	133	287
10–19	38	55	93	62	86	148	53	59	112
20–29	59	59	118	116	114	230	111	75	186
30–39	100	48	148	95	79	174	110	68	178
40–49	94	33	127	127	67	194	153	67	220
50–59	53	24	77	147	79	226	180	82	262
60–69	54	20	74	142	73	215	216	100	316
70–79	35	16	51	101	70	171	121	118	239
> 80	44	20	64	83	52	135	38	56	94
Total	939	700	1639	1369	1044	2413	1338	790	2128

Diagram 17.6a. 1800–1840

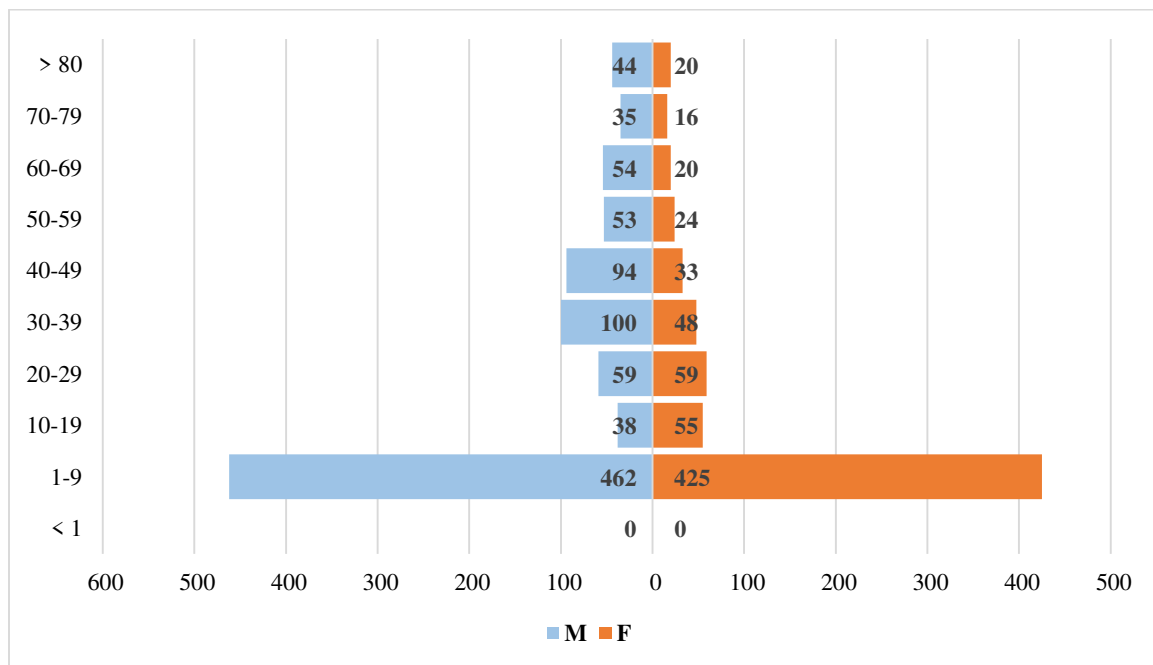
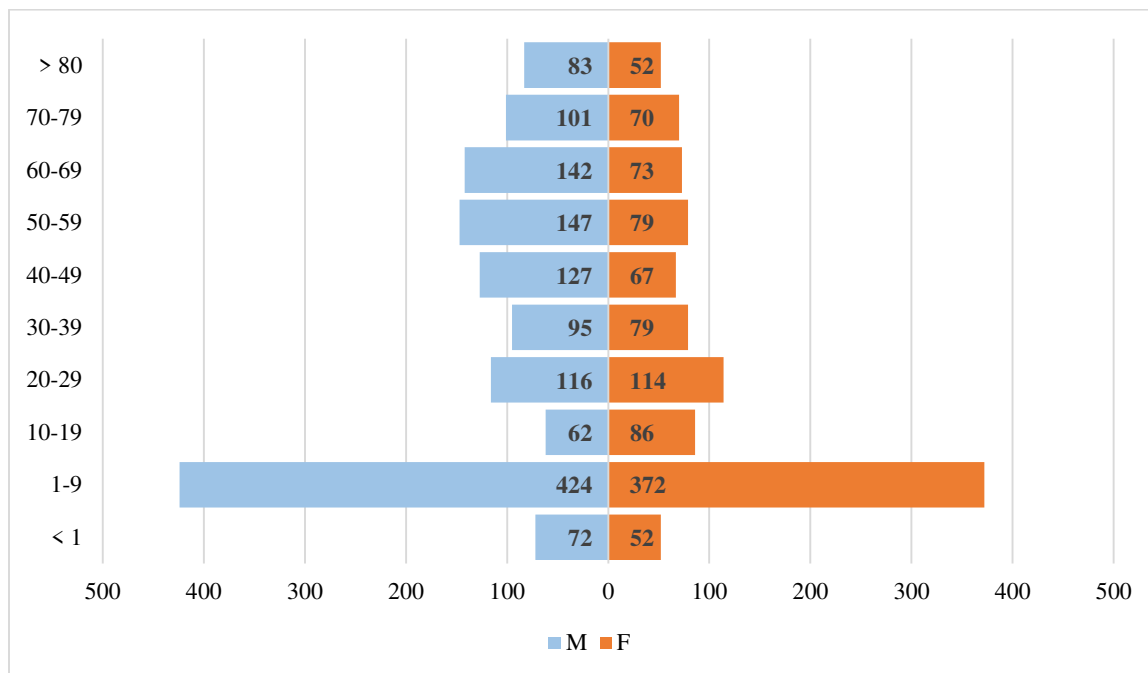
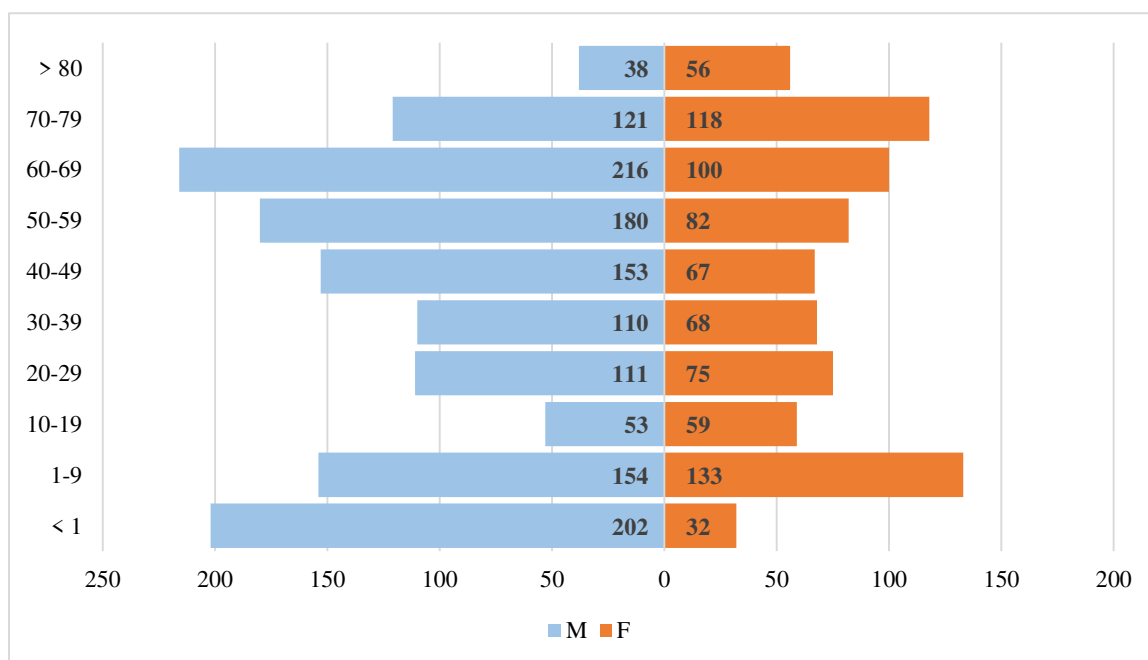


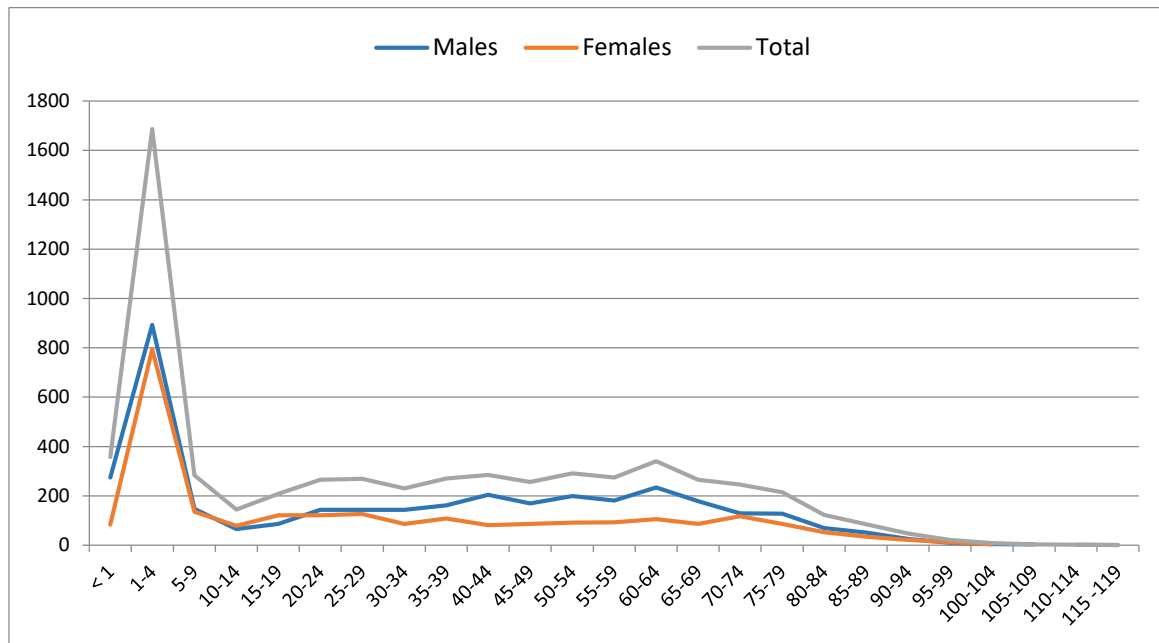
Diagram 17.6b. 1840–1880**Diagram 17.6c. 1880–1920**

The analysis of dynamics in sex and age composition of the Greek population of Odessa during the 19th – early 20th century (Diagrams 17.6a–17.6c) show a trend indicating its transition from a traditional to a modern pattern of reproduction. Indications of this are found in the relative decline of infant and child mortality rates and the increase in age of the deceased. However, the remaining high risk of dying before reaching 10 years of age suggests that Greeks of Odessa were yet to grow into a modern reproductive population. Similarly, death rates among females in their reproductive age remained as high as before. Prevalence of male deaths over those among females shows consistency through time.

When compared with the population of Russia of the second half of the 19th century in general, the above data reveal certain specificities of the Greek population of Odessa. Such features as lower child mortality, prevalence of deaths among men over those among women and relatively low rate of mortality among females at their reproductive age suggest that the Greek community represented a group in transition to the modern type of demographic reproduction.

These diagrams also clearly demonstrate improvements in recording system through time. Data from Diagram 3a show incomplete record and seem to demonstrate little balance just because of incomplete recording of deaths rather than due to some specific features of the Greek group.

Now we shall describe the distribution of mortality in sex-age groups. When presented graphically (Diagram 17.7), the data demonstrate uncommon distribution of deaths by age. In a traditional closed community the diagram shows a relatively smooth rise of mortality rate in accordance with aging of cohorts. In our diagram, on the contrary, we observe its gradual decline with minor spikes at the age of 20–25, 35–50 and 60, and both sexes demonstrate the same trend.

Diagram 17.7. Mortality in the Greek Community of Odessa by Age Categories, 1800–1920

(Y axis – number of deaths; X axis – death age at 4-year intervals)

The distribution of deaths among generations was a typical one for the population of the region in the 19th–early 20th century. Characteristic of Kherson Guberniia in 1847 were many deaths among infants under 1 year (6780), children from 1 to 5 years (5300) and people over 60 years of age (6890),²⁴ i.e. 35,7%, 25,9% and 38,4% of the respective age groups. These ratios for the Greek community of Odessa are showed in Table 17.12.

Table 17.12. Structure of Mortality in the Greek Community, 1800–1920

Age (years)	Males	Females	Total	Per cent	
				of age group size	of total number of deaths in Greek community
< 1	274	84	358	10,5	5,8
1–5	893	794	1687	49,6	27,3
> 60	834	525	1359	39,9	66,9
Total	2001	1403	3404	100,0	100,0

24. *Military Statistical Review of the Russian Empire*, p. 106.

The striking differences observed in ratios of child cohorts are related to clear undercount of infant mortality. Besides, it shall be taken into account that already in the late 19th century child deaths dropped significantly in their number and thus influenced the whole picture of mortality.

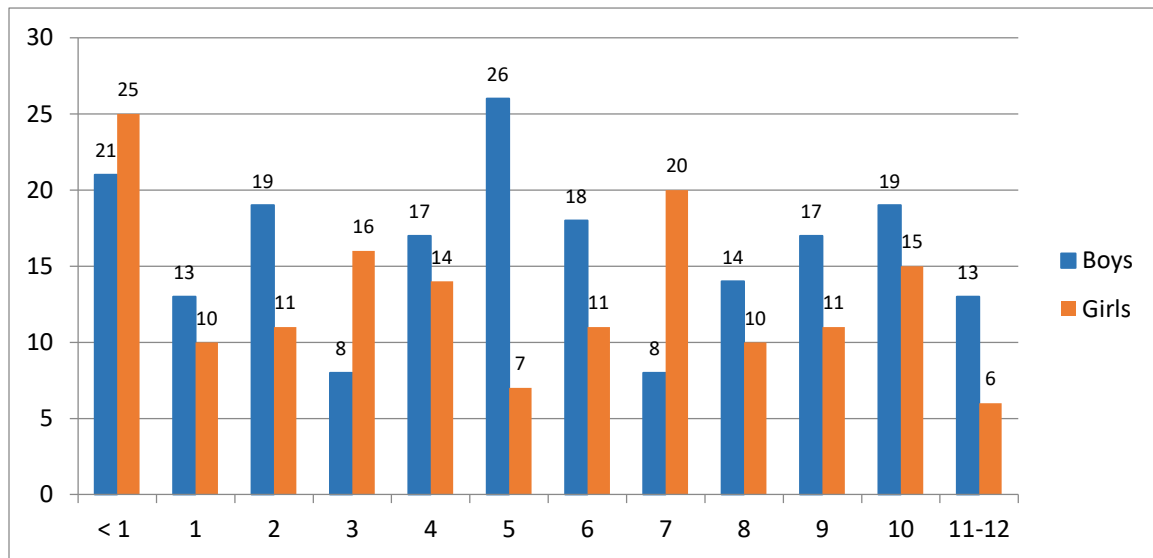
Infant and Child Mortality

This is a separate category of mortality indicative of a level of demographic behavior in any population.²⁵ The respective data is of fragmentary and occasional character in registers of births from the Holy Trinity Church of Odessa dated prior 1860s. After that time the registers already contained entries about deaths of all infants, not just baptized ones. Since 1860 even stillborns had been recorded in the church registers. Over a period of 60 years there were recorded 349 deaths of infants under one year of age (or 10,6% of the total of 3286 deaths recorded for that period).

Table 17.13. Infant Mortality in the Greek Community of Odessa, 1860–1920

Age, in months	Boys	Girls	Total	
			Quantity	%
< 1	21	25	46	13,2
1	13	10	23	6,6
2	19	11	30	8,6
3	8	16	24	6,9
4	17	14	31	8,9
5	26	7	33	9,5
6	18	11	29	8,3
7	8	20	28	8,0
8	14	10	24	6,9
9	17	11	28	8,0
10	19	15	34	9,7
11–12	13	6	19	5,4
Total	193	156	349	100

25. See, for example: Yordan Venedikov, “Метод определения интенсивности смертности в первый год после рождения” [The Method for Determining the Intensity of Mortality in the First Year After the Birth], in Leonid Darskii (ed.), *Методы демографических исследований* [Demographic Research Methods], (Moscow: Statistika, 1969), pp. 133–142.

Diagram 17.8

(X axis – age in months; Y axis – number of deaths)

In the middle of the first-year period we see a certain misbalance between sexes. Peaks of deaths among infants occurred at the ages of under 1 month, 2 months (especially among girls), 5–6 months (among boys), 7 months (among girls) and 10 months. At large, boys showed more liability to the risk of death at an infant age. In the infant group the ratio of girls / boys deaths was 1:1,24 while the overall male index showed figure of 0,808 (i.e. 808 boys to 1000 girls).

Almost every sixth infant died before reaching one month of age. Of the deceased in this age category 18 infants (or 5,2%) died in the perinatal period during the first week of life, 12 infants died within two weeks from their births and 16 infants died before reaching 4 months in age. In the neonatal period (up to 28 days from birth) there died 46 infants (or 12,2%) while the number of deaths among infants in the post-neonatal period (up to one year of age) amounted to 303 (or 86,8%).

On the basis of data from fertility and mortality tables for the region of Novorossiia, Skalkowski concluded that thousands of infants had died before reaching 5 years of age. He estimated that infant deaths amounted to over 1/3 of the total number of deaths, while those among children up to 10 years of age constituted 1/12 from the overall mortality rate.²⁶

26. Skalkowski, *On Mortality and Longevity of Life in Novorossiia Region*, p. 6.

Table 17.14. Infant Mortality in the Cities of European Russia, 1890–1894

Age at death (in moths)	1890	1891	1892	1893	1894	Average
<i>Number of deaths</i>						
≤ 1	19,729	18,379	17,058	16,591	16,696	17,691
1–2	15,294	14,438	14,627	13,762	13,355	14,295
3–5	13,612	13,873	15,029	13,354	12,927	13,759
6–11	18,269	18,330	21,383	16,951	17,229	18,432
Total for all age groups	187,023	190,770	223,134	196,200	183,000	196,025
Deaths before 1 year of age (quantity)	66,904	65,020	68,097	60,658	60,207	64,177
Deaths before 1 year of age (per cent)	36	34	31	31	33	33
<i>Age structure of infant mortality (in %)</i>						
≤ 1	29	28	25	27	28	28
1–2	23	22	21	23	22	22
3–5	20	21	22	22	21	21
6–11	27	28	31	28	29	29
Total	100	100	100	100	100	100

Source: Alexandre Avdeev, “Младенческая смертность и история охраны материнства и детства в России и СССР” [Infant mortality and the history of maternal and child health care in Russia and the USSR], in: Mikhail Denisenko and Irina Troitskaya (eds.), *Историческая демография* [Historical demographics], (Moscow: MAKSS Press, 2008), p. 16.

Skalkowski related this enormously large number of deaths among infants to “the absence of necessary childcare as well as to the deficit of educated midwives and lack of sufficient medical allowances for parents, which have been among the major beneficent concerns of our government”. Similar views have also been expressed by modern researchers of historical and cultural aspects of obstetrics.²⁷ In 1848 there were only 18 officially practicing midwives in Odessa populated by 70,000 inhabitants.²⁸

27. Olena Boriak, *Баба-повитуха в культурно-історичній традиції українців: між профанним і сакральним* [Midwife in the Cultural and Historical Tradition of Ukrainians: Between the Secular and the Sacred], (Kyiv, 2010).

28. *Novorossiia Calendar and Directory for 1849*, pp. 327–328.

Let us now compare infant mortality among Greeks of Odessa to that in other cities of Russian Empire. In the latter, in general, 13,2% of infants died during the first month of their age, 13,8% at the age of 1–2 months, 25,3% at the age of 3–5 months and 46,3% at the age of 6–11 months. While these figures show a rather even distribution of deaths among different age categories within the infant group, mortality figures for Greek infants from Odessa demonstrate that the majority of their deaths occurred during the second half of the first year of their lives. This trend in Greek mortality might indicate better pediatric conditions in Odessa compared to those in other cities. Such a suggestion also finds indirect support in generally lower figures of mortality among Greek infants of Odessa (5,8%).

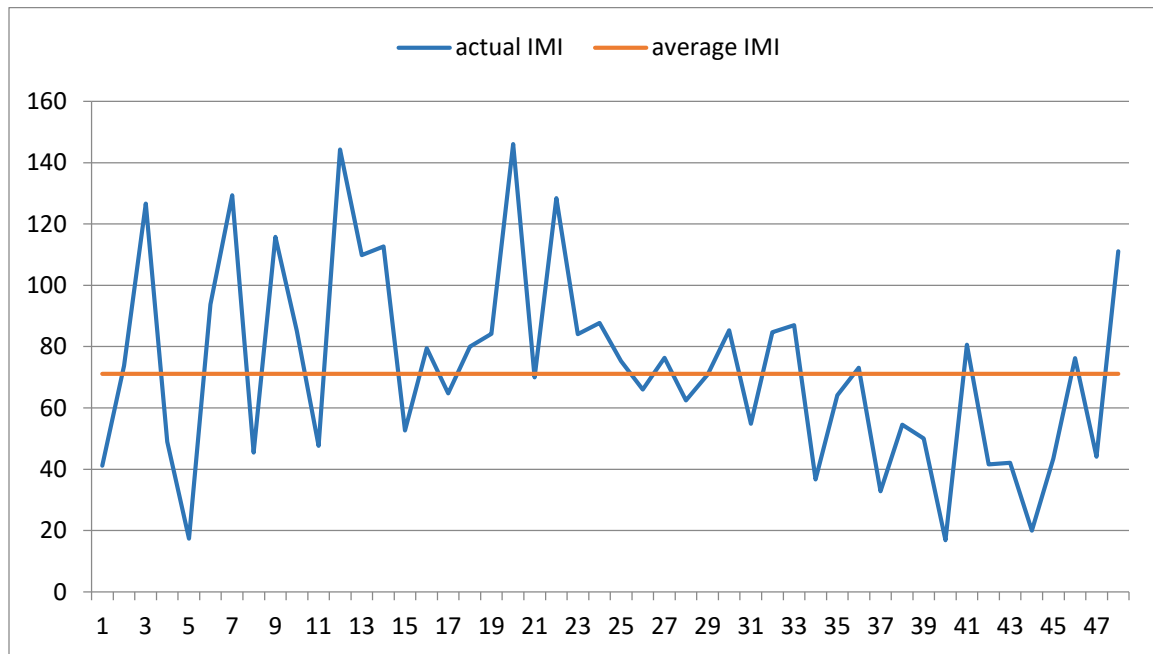
Now we consider a ratio between child deaths and child births. We shall do this by calculating the infant mortality index (IMI) which shows how many infants died before reaching one year of age. For the purposes of comparison, we calculated it in *per mille* according to a general method of Laplace.²⁹

Table 17.15. Infant Mortality Index Among the Greek Population of Odessa, 1861–1919

Year	Number of infant deaths (under 1 year of age)	Number of infant births	IMI, ‰
1861	4	97	41,2
1863	7	95	73,7
1864	10	79	126,6
1866	5	102	49,0
1867	2	115	17,4
1868	12	128	93,8
1869	11	85	129,4
1870	4	88	45,5
1871	11	95	115,8
1874	8	94	85,1
1875	4	84	47,6
1876	14	97	144,3
1877	9	82	109,8
1878	8	71	112,7
1879	7	133	52,6

29. Novoselskii, *Mortality and Life Longevity in Russia*, p. 17.

Year	Number of infant deaths (under 1 year of age)	Number of infant births	IMI, ‰
1880	7	88	79,5
1881	7	108	64,8
1882	6	75	80,0
1883	8	95	84,2
1885	13	89	146,1
1886	7	100	70,0
1887	14	109	128,4
1888	9	107	84,1
1889	10	114	87,7
1890	7	93	75,3
1891	7	106	66,0
1892	9	118	76,3
1893	9	144	62,5
1895	10	141	70,9
1896	11	129	85,3
1897	8	146	54,8
1898	10	118	84,7
1899	12	138	87,0
1901	4	109	36,7
1903	6	113	64,1
1904	8	109	73,1
1907	4	122	32,8
1908	6	110	54,5
1910	1	20	50,0
1911	2	118	16,9
1912	10	124	80,6
1913	5	120	41,6
1914	4	95	42,1
1915	2	100	20,0
1916	4	92	43,5
1917	8	105	76,2
1918	6	136	44,1
1919	3	27	111,1
Total	353	4963	71,1

Diagram 17.9

(X axis – years from 1861 to 1919; Y axis – IMI)

In general, we see that in 1861–1919 the IMI in the Greek community of Odessa showed rather low figures, from 20‰ (in 1915) to 146‰ (in 1885) with the average index of 71,1‰. There is also no gradual decline in the index figures towards the end of the period. Most likely, the data are influenced by poor registration of deaths among infants. The data also indirectly point out to unfavorable years of 1864, 1868, 1871, 1876–1878, 1885, 1887 and 1919 when the actual IMI approached the average index for the entire period.

In the late 19th century Russia less than one half of the children survived until the age of twenty.³⁰ Only 556 in a thousand newborn boys and 593 in a thousand newborn girls managed to survive until after five years of age, while a quarter of all respective deaths occurred during the infantile period.³¹

30. Anatolii Vishnevskii and Andrei Volkov (eds.), *Воспроизводство населения в СССР* [Reproduction of the Population in the USSR], (Moscow: Finansy i statistika, 1983), p. 297.

31. Mikhail Ptukha, *Очерки по статистике населения* [Essays on Population Statistics], (Moscow: Gosstatizdat, 1960), pp. 194–204.

Conversion of the IMI into percentages produces extremely low figures. The average infant mortality rate stands at 7,1% which is half as much as that in Europe during the same period.³² Even in the successful Switzerland this index measured from 15% to 17%, while in England it ranged from 13,8% to 16,6% and in Germany fell between 21% to 24%. In the 1880s, this index for European Russia, in general, ranged from 25,45% to 30,1% (on average – 28%).³³

Seasonality of Deaths

Studies in this aspect of mortality permit to identify the presence of exogenous factors in populations' place of residence. Due to specific climatic, environmental and economic conditions, each human habitat favors its own peaks of mortality representing risks which certain environments impose upon people living in them. Were there such risks in Odessa? Did they change through time during the 19th – early 20th centuries?

In order to address these questions, we compiled a table of death incidents by months and decades which show the distribution of mortality in the Greek community of Odessa throughout the entire 19th and the beginning of the 20th centuries.

Tables 17.16 and 17.17 show both general seasonal indices and their dynamics. At large, unfavorable periods are confined to March and June – August. During these four months the data demonstrates 39% of deaths, or 8,3% for each of these months which is a little higher than the generalized average index. The lowest number of deaths occurred in October (6,7%) and December (7,1%). Peaks of mortality are observed during months with uncomfortable climatic conditions (summer heat favored propagation of heart diseases) and unfavorable economic factors (the most laborious working period for residents of Odessa).

In the middle of the 19th century contemporaries mentioned an increasing number of deaths in summer seasons. One of them observed that “frequent atmospheric changes, summer draughts, shortage of good water, residents' lifestyle and their practices such as consumption of meat and hot drinks, which doesn't conform to the local climate, and excessive eating of fruits give rise to various kinds of diseases which result in an increasing mortality”.³⁴

32. Kurkin, *Fertility and Mortality in the European Capitalistic Countries*, pp. 35, 37.

33. *Ibid.*, p. 82.

34. *Military Statistical Review of the Russian Empire*, p. 105.

Table 17.16. Seasonality of Deaths in the Greek Community of Odessa, 1800–1920, (in absolute figures)

Table 17.16.a

Month	1800–1810	1811–1820	1821–1830	1831–1840	1841–1850	1851–1860	1861–1870
January	13	18	48	53	67	37	63
February	14	42	49	34	60	41	50
March	14	34	47	53	75	37	70
April	13	41	58	23	46	36	53
May	11	17	31	42	58	40	43
June	13	19	55	34	77	37	68
July	21	50	87	54	132	47	76
August	21	55	79	34	89	44	56
September	9	42	64	33	74	31	40
October	17	33	34	21	32	26	44
November	19	23	57	26	44	40	48
December	5	21	42	25	58	33	52
<i>Females</i>	67	159	279	197	352	208	280
<i>Males</i>	103	236	372	235	460	241	383
Total	170	395	651	432	812	449	663

Table 17.16.b

Month	1861–1870	1871–1880	1881–1890	1891–1900	1901–1910	1911–1920	Total
January	63	40	58	45	42	67	514
February	50	49	55	42	24	54	473
March	70	48	43	63	36	77	560
April	53	55	48	36	33	48	454
May	43	40	38	46	30	65	421
June	68	60	51	37	25	54	493
July	76	38	50	48	34	47	637
August	56	43	39	42	43	52	553
September	40	38	27	51	30	37	445
October	44	27	34	54	45	52	393
November	48	35	42	47	30	53	424
December	52	28	42	50	37	49	409
<i>Females</i>	280	212	221	240	170	242	2419
<i>Males</i>	383	289	306	321	239	413	3357
Total	663	501	527	561	409	655	5776

Table 17.17. Seasonality of Deaths in the Greek Community of Odessa, 1800–1920, (in %)**Table 17.17.a**

Month	1800–1810	1811–1820	1821–1830	1831–1840	1841–1850	1851–1860	1861–1870
January	7,6	4,6	7,4	12,3	8,3	8,2	9,5
February	8,2	10,6	7,5	7,9	7,4	9,1	7,5
March	8,2	8,6	7,2	12,3	9,2	8,2	10,6
April	7,6	10,4	8,9	5,3	5,7	8	8
May	6,5	4,3	4,8	9,7	7,1	9	6,5
June	7,6	4,8	8,4	7,9	9,5	8,2	10,3
July	12,4	12,7	13,4	12,5	16,3	10,5	11,5
August	12,4	13,9	12,1	7,9	11	9,8	8,4
September	5,3	10,6	9,8	7,6	9,1	6,9	6
October	10	8,4	5,2	4,8	3,9	5,8	6,6
November	11,2	5,8	8,8	6	5,4	9	7,2
December	3	5,3	6,5	5,8	7,1	7,3	7,9
<i>Females</i>	39,4	40,3	42,9	45,6	43,3	46,3	42,2
<i>Males</i>	60,6	59,7	57,1	54,4	56,7	53,7	57,8
Total	100	100	100	100	100	100	100

Table 17.17.b

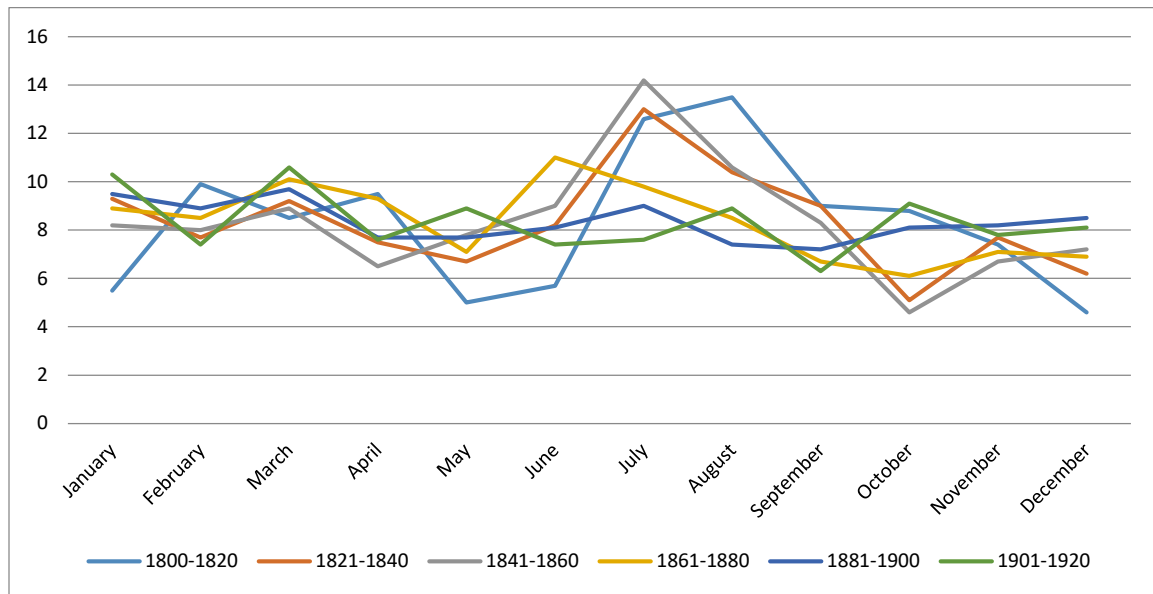
Month	1871–1880	1881–1890	1891–1900	1901–1910	1911–1920	Total
January	8	11	8	10,3	10,2	8,8
February	9,8	10,4	7,5	5,9	8,3	8,2
March	9,6	8,2	11,2	8,8	11,8	10
April	11	9,1	6,4	8,1	7,3	7,8
May	8	7,2	8,2	7,3	9,9	7,4
June	12	9,7	6,6	6,1	8,3	8,5
July	7,5	9,5	8,6	8,3	7,2	11
August	8,6	7,4	7,5	10,5	7,9	9,5
September	7,5	5,1	9,1	7,3	5,6	7,6
October	5,4	6,4	9,6	11	7,9	6,7
November	7	8	8,4	7,3	8,1	7,4
December	5,6	8	8,9	9,1	7,5	7,1
<i>Females</i>	42,3	41,9	42,8	41,6	36,9	42,2
<i>Males</i>	57,7	58,1	57,2	58,4	63,1	57,8
Total	100	100	100	100	100	100

Breaking this index down by decades shows a gradual progress in overcoming negative effects of these ecological and social conditions. For example, summer months demonstrate a little-by-little reduction in risk factors through time from outbreaks of epidemic diseases in the first half of the 19th century to more safe medical conditions in the early 20th century. The same is apparently also responsible for a decrease in the percentage of deaths in September from 9,8–10,6% in the 1810s–1830s to 5,6% in the 1910s.

Table 17.18. Seasonality of Deaths in the Greek Community of Odessa, 1800–1920 (in %, by 20-year periods)

Month	1800– 1820	1821– 1840	1841– 1860	1861– 1880	1881– 1900	1901– 1920	Total
January	5,5	9,3	8,2	8,9	9,5	10,3	8,9
February	9,9	7,7	8,0	8,5	8,9	7,4	8,3
March	8,5	9,2	8,9	10,1	9,7	10,6	9,6
April	9,5	7,5	6,5	9,3	7,7	7,6	7,9
May	5,0	6,7	7,8	7,1	7,7	8,9	7,4
June	5,7	8,2	9,0	11,0	8,1	7,4	8,5
July	12,6	13,0	14,2	9,8	9,0	7,6	11,0
August	13,5	10,4	10,6	8,5	7,4	8,9	9,6
September	9,0	9,0	8,3	6,7	7,2	6,3	7,6
October	8,8	5,1	4,6	6,1	8,1	9,1	6,7
November	7,4	7,7	6,7	7,1	8,2	7,8	7,4
December	4,6	6,2	7,2	6,9	8,5	8,1	7,1
<i>Females</i>	40,0	44,0	44,4	42,3	42,4	38,7	42,2
<i>Males</i>	60,0	56,0	55,6	57,7	57,6	61,3	57,8
Total	100	100	100	100	100	100	100

The above trends appear more evident when the data are analyzed at the level of 20-year intervals (Table 17.18). As the time scale approaches the beginning of the 20th century, the mortality percentage lines run in more harmony with each other. However, the 1901–1920 line is already fundamentally different from its nineteenth-century counterparts. Here, spikes in May and October show directly inverse position to drops in other lines. On the contrary, the February drop in 1901–1920 concurs with a general accession of other lines.

Diagram 17.10

(X axis – seasonality of deaths by months; Y axis – percent of mortality)

Even more obvious these trends show themselves if analyzed at longer time intervals, namely, two major periods before and after the mid-point year of 1860 (Table 17.19).

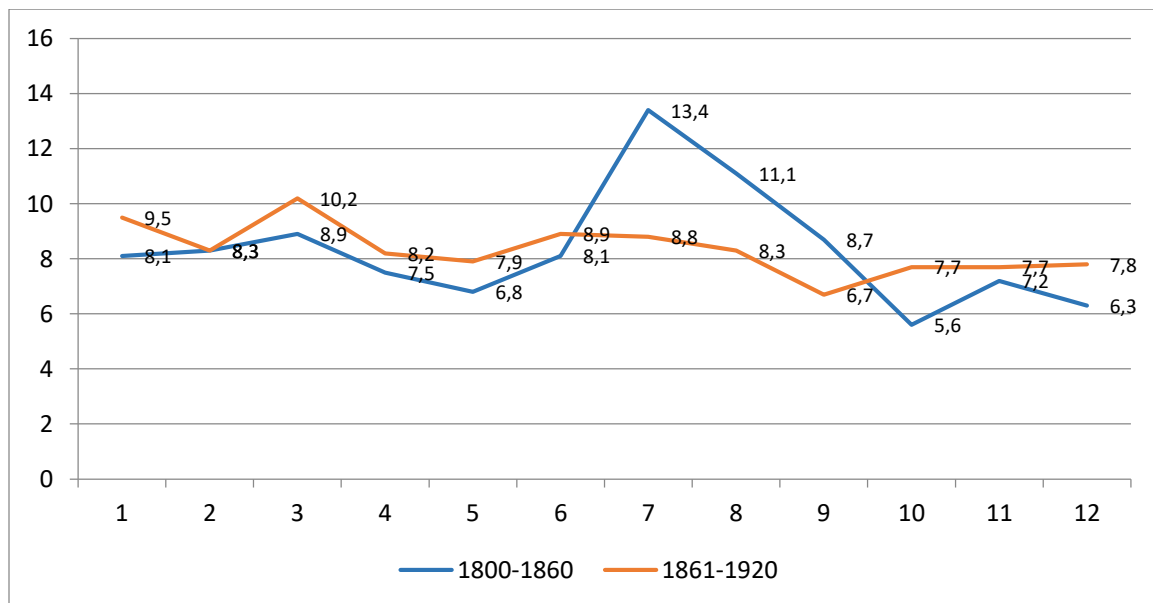
The high mortality rate was typical for Odessa in general. In his work about the population of the entire Region of Novorossiia in 1845 A. A. Skalkowski reports that ratio of births to deaths in the Municipality of Odessa amounted to 0,77 which was much higher than that in the Guberniias of Kherson (0,64) and Tauris (0,53).³⁵ He, however, warned against unmindful use of these figures arguing that the increase in number of deaths was connected with the advancing of hospitals and medical establishments into which large numbers of wounded and ill people had been coming and thus putting the health of the urban population at additional risk.³⁶ Therefore, like in other cities, newcomers and visitors could not help playing their adverse role in rising mortality rates in Odessa. It is obvious that the petty bourgeois of Greek decent were subjected to this deadly influence as well.

35. Skalkowski, *Territory and Population of Novorossiia Region in 1845*, p. 368.

36. *Ibid.*, p. 369.

Table 17.19. Seasonality of Deaths in the Greek Community of Odessa, 1800–1920

Month	1800–1860		1861–1920		Total	
	<i>Number</i>	<i>%</i>	<i>Number</i>	<i>%</i>	<i>Number</i>	<i>%</i>
January	236	8,1	315	9,5	551	8,9
February	240	8,3	274	8,3	514	8,3
March	260	8,9	337	10,2	597	9,6
April	217	7,5	273	8,2	490	7,9
May	199	6,8	262	7,9	461	7,4
June	235	8,1	295	8,9	530	8,5
July	391	13,4	293	8,8	684	11
August	322	11,1	275	8,3	597	9,6
September	253	8,7	223	6,7	476	7,6
October	163	5,6	256	7,7	419	6,7
November	209	7,2	255	7,7	464	7,4
December	184	6,3	258	7,8	442	7,1
<i>Females</i>	1262	43,4	1365	41,2	2627	42,2
<i>Males</i>	1647	56,6	1951	58,8	3598	57,8
Total	2909	100	3316	100	6225	100

Diagram 17.11

Death Factors

In traditional societies the majority of population dies in consequence of the so-called endogenous death caused by diseases. In historic demography it is commonly accepted that diseases are related to such factors as poor nutrition, hard labor, insanitary living conditions, absence of hygienic standards and medical knowledge.³⁷ Based on this comprehension, we will further focus on the identification of factors which caused deaths among the Greek population of Odessa and analyze their character.

To address the issues, we have two sets of data at our disposal. These come from the years 1800–1827 and 1892–1904 when corresponding information on causes of deaths was recorded in the church registers. It shall, however, be mentioned that causes of deaths were recorded not by professional doctors but deacons on the basis of information received from relatives of the deceased. Therefore, their identification expressed rather an understanding of diagnoses by the Greeks themselves than the official medical knowledge of the time, and as such shall be referred to as “oral” or “folk” in character.³⁸ This is particularly well seen during the earliest period when the recorded “diagnoses” showed little resemblance to real diseases.

From all church registers available for the two periods we collected respectively 1758 and 643 records of diseases which caused deaths. The first period (1800–1827) turned out to be among the most hazardous times in the history of medicine in Odessa suffering from several epidemics of infectious diseases and lack of effective infrastructure of medical services. On the contrary, the second period (1892–1904) was relatively safe in terms of epidemics or any other cataclysms which might have caused massive deaths in Odessa. Besides, contemporaries have also left positive accounts of medical services in the city during this time. In spite of the observed differences, analysis of mortality structures from the two periods reveals features typical of urban communities (see Tables 20–21 and Diagrams 17.12–17.13).

37. Anatolii Vishnevskii, *Демографическая революция* [Demographic Revolution], (Moscow: Statistika, 1976), p. 57.

38. For details see: Yuliya Arnautova, *Колдуны и святые. Антропология болезни в средние века* [Sorcerers and Saints. Anthropology of Disease in the Middle Ages], (St. Petersburg: Aleteiya, 2004), p. 20.

Table 17.20. Causes of Deaths in 1800–1827

General category	Number	Original diagnoses	Number
Mechanical injuries	8	Murdered by villains	1
		Drowned	2
		Murdered with a stone	1
		Choked with charcoal fumes (carbon monoxide)	1
		“accidentally, from excessive bleeding after phlebotomy at night”	1
		Hanged him(her)self	1
		Killed him(her)self with a knife during hypochondriac attack	1
In childbirth	18	In childbirth	18
Children’s deaths	554	From diarrhea (over 40 died before reaching one year of age)	455
		From angina (“ <i>zavalka</i> ”) ³⁹	30
		From measles	32
		From convulsions (“ <i>rodimets</i> ”) ⁴⁰	30
		From general health problems among infants	4
		From asthenia at birth	2
		From dental problems	1
Age-specific diseases	395	“died naturally”, “natural death” ⁴¹	380
		“sudden death”, “died suddenly”	8
		“from old age and weakness”, “from old age”, “from old age sickness”	7
Infectious diseases	381	From scarlet fever	1
		“from black disease”	1
		From “pestilence”	1
		“From fever” (<i>goryachka</i>), “from nerve fever” ⁴²	303
		From smallpox	60
		From cholera	5
		From fever (<i>likhoradrka</i>)	10
Diseases of internals	33	From internal disease	2
		From hernia	1

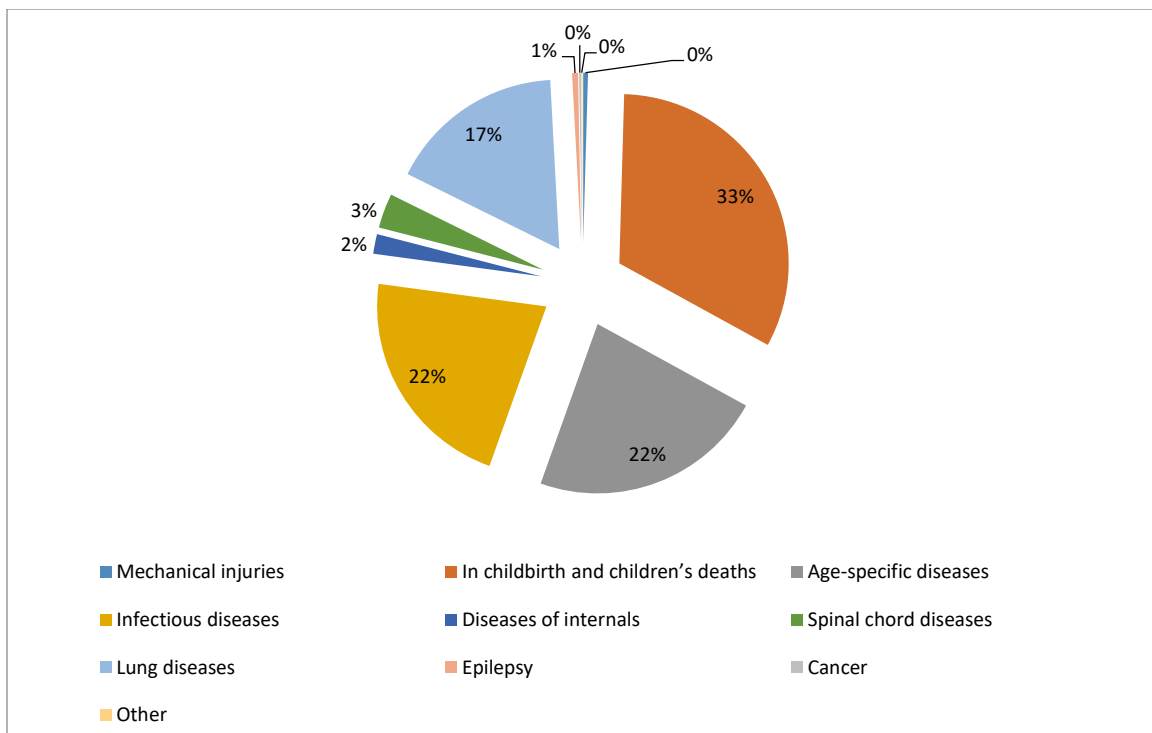
39. *Zavalka* is a folk name of angina.

40. Also known as eclampsy.

41. Including all natural deaths, not only those at old age (near one third of all these deaths occurred among people in their young and even infant ages).

42. “Nerve fever” (*nervnaya goryachka*) is an old Russian name of typhus.

General category	Number	Original diagnoses	Number
Diseases of internals		From bleeding	1
		From dropsy ⁴³	29
Spinal chord diseases	58	From ache	3
		From tabes	55
Lung diseases	296	From asphyxia	1
		From consumption	119
		From cough	75
		From cold	94
		From pneumonia	7
Epilepsy	10	From epilepsy	8
		From apoplectic stroke	1
		From paralysis	1
Cancer	3	From cancer	3
Other	2	“from <i>zhaba</i> ” (stenocardia?)	2

Diagram 17.12

43. Also known as edema, an abnormal accumulation of a fluid in the interstitium, located beneath the skin and in the cavities of the body.

Table 17.21. Causes of Deaths in 1892–1904

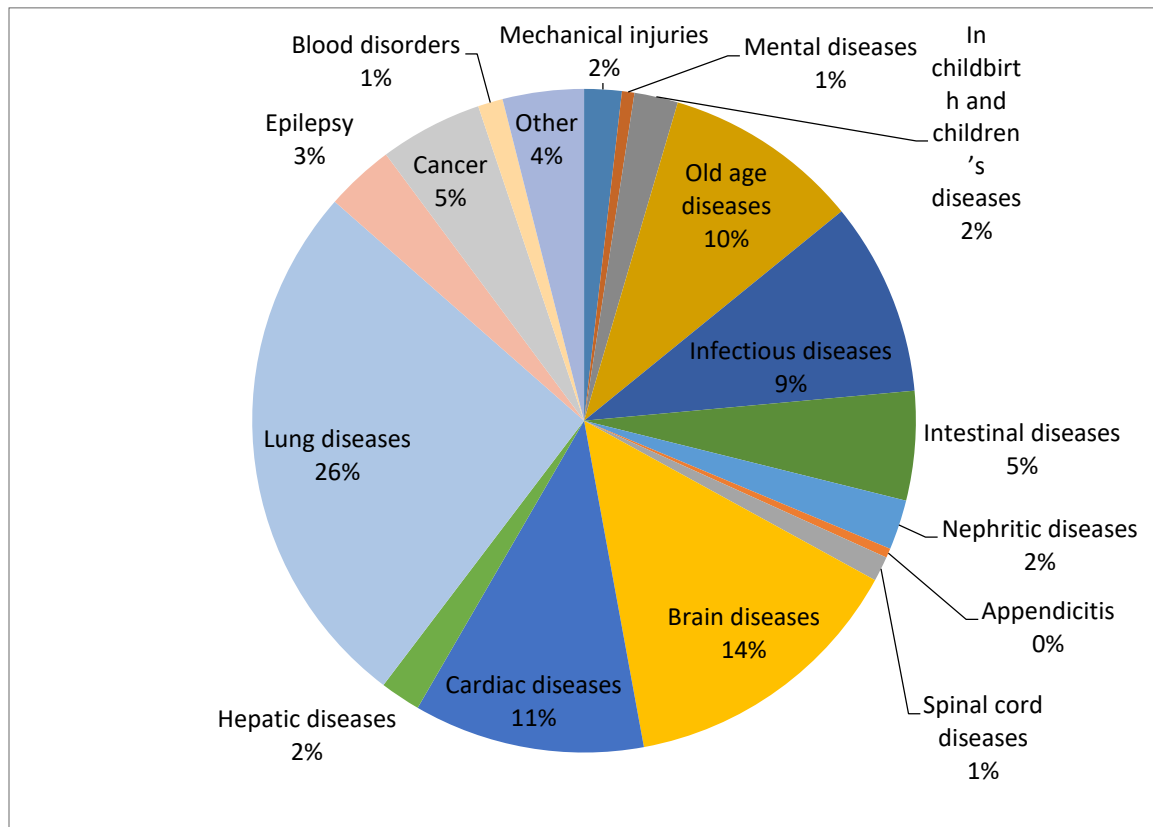
General category	Number	Original diagnoses	Number
Mechanical injuries	12	From bullet wounds in heads and necks	1
		From body burns	2
		From shooting him(her)self	3
		From gangrene of fingers (toes) resulting from frostbite	1
		Ran down by a tramway car	1
		Drowned by accident	1
		From skull cracking	1
		From brain concussion	1
		Choked with charcoal fumes (carbon monoxide)	1
Mental diseases	4	From hanging him(her)self being in an abnormal psychic state	1
		From <i>dementia consecutiva</i>	1
		From going mad	1
		From mental disorder of a brain tunic	1
In childbirth	5	From puerperal fever	3
		From eclampsia of pregnancy (an infant 8 days of age and a woman 32 years of age)	2
Children's diseases	9	From childish convulsions	1
		From childish diarrhea	5
		From childish dryness	1
		From hypoplasia (infants 12 days of age)	2
Old age diseases	63	From marasmus	7
		From old age	5
		From old age emaciation	5
		From senile marasmus	7
		From senile infirmity	12
		From old age sickness	13
		From senile emphysema of lungs and intestinal hemorrhage	1
		From senility	12
		Natural death	1
Infectious diseases	62	From malaria	2
		From typhus	2
		From smallpox	2

General category	Number	Original diagnoses	Number
Infectious diseases		From influenza	2
		From measles	5
		From whooping cough	3
		From scarlet fever	9
		From galloping consumption	1
		From dysentery	4
		From dyspepsia	1
		From diarrhea	17
		From typhoid	11
		From diphtheria	2
		From face erysipelas	1
Intestinal diseases	35	From chronic catarrh of intestines	3
		From chronic diarrhea	2
		From acute gastric inflammation and enteritis	1
		From disorders of intestines	2
		From inflammation of peritoneum	7
		From inflammation of intestines	2
		From gastroenteritis	5
		From gastrointestinal catarrh	1
		From catarrh of intestines	4
		From disorders of ventral glands	1
		From tuberculosis of peritoneum	1
		From tuberculosis of intestines	1
		From indigestion	1
		From chronic inflammation of intestines	1
		From acute gastrointestinal catarrh	2
		From feeding disorders	1
Nephritic diseases	16	From chronic nephritis	3
		From nephritis	10
		From tumors in urinary bladder and intestines	1
		From blennocystitis	2
Appendicitis	3	From inflammation of a blind gut	1
		From peritonitis	2
Spinal cord diseases	8	From inflammation of spinal cord	1
		From disorders of a spinal column	1
		From disorders of spinal cord	1

General category	Number	Original diagnoses	Number
Spinal cord diseases		From tuberculosis of vertebral joints	1
		From hemorrhage in vertebral canal	1
		From spinal dryness	1
		From osteomyelitis in a sacral bone	1
		From dryness	1
Brain diseases	93	From degeneration of vessels and a heart; hemorrhage in cavity of skull	1
		From acute brain fever	1
		From brain tumor	1
		From brain stroke	1
		From insufficiency of a butterfly valve and cerebral apoplexy	1
		From meningitis	6
		From hemorrhage of the brain	1
		From brain stroke	11
		From cerebral apoplexy	1
		From tuberculosis and meningitis	1
		From dryness of the brain	1
		From tuberculosis and inflammation of brain tunic	1
		From cerebral hemorrhage	4
		From meningitis	1
		From brain fever	27
		From inflammation of brain tunic	1
		From cerebral hemorrhage	1
		From embolism of cerebral vessels	1
		From disorders of a parotid muscle	1
		From brain stroke	1
		From acute hydrocephaly	1
		From brain disorders	4
		From arteriosclerosis	1
		From apoplexy	21
		From progressing paralysis	2
Cardiac diseases	74	From degeneration of heart and vessels	1
		From cardioplegia	13
		From cardiac rupture	4
		From valvular defect	38

General category	Number	Original diagnoses	Number
Cardiac diseases		From inflammation of cardiac muscles	1
		From inflammation of heart	1
		From chronic inflammation of heart	2
		From heart diseases	2
		From chronic myocarditis	1
		Died from cardioplegia in Munich and transferred for burial to Russia	1
		From myocarditis and arteriosclerosis	1
		From aortic aneurysm	3
		From chronic valvular defect	1
		From stenocardia	5
Hepatic diseases	13	From chronic hepatitis	1
		From hepatitis	2
		From disorder of liver	1
		From hepatocirrhosis	6
		From degeneration of liver	1
		From liver abscess	1
		From acute parenchymatous hepatitis	1
Lung diseases	172	From chronic lung consumption	1
		From pulmonary emphysema	10
		From lung disorders	1
		From pneumonia	41
		From (chronic or acute) bronchitis	6
		From bronchopneumonia	2
		From lung catarrh	1
		From croup	1
		From lung consumption	1
		From (purulent) pleurisy	2
		From purulent inflammation of pleura	1
		From capillary bronchitis	2
		From catarrhal pneumonia	6
		From croupous inflammation	11
		From pulmonary hemorrhage	2
		From pulmonary consumption	5
		From tuberculosis (of lungs)	22
		From chronic pneumonia	12

General category	Number	Original diagnoses	Number
		From edema of lungs	3
		From consumption	39
		From capillary bronchitis	1
		From gastric ulcer and tuberculosis of lungs	1
		From tuberosity	1
Epilepsy	22	From epilepsy	1
		From convulsions	18
		From falling sickness	1
		From paralysis	2
Cancer	33	From cancer (of gullet, stomach, uterus)	27
		From sarcoma	3
		From malignant tumor of rectum	1
		From foot inflammation	1
		From fungous inflammation of a knee joint	1
Blood disorders	8	From sepsis	1
		From putrefactive inflammation of neck	1
		From pancreatic diabetes	2
		From hyperglycemia	2
		From insular (pancreatic) diabetes	1
		From chronic anemia	1
Other	26	From emaciation	4
		From asthenia	3
		Sudden death	2
		From an unknown disease	11
		From English disease (rickets)	1
		From Basedow's disease	1
		From chest disease	1
		From dermatitis and formation of deep abscesses	1
		From common dropsy	1
		From adipose degeneration	1

Diagram 17.13

Only a small number of natural deaths took place as a result of accidents both in the first third of the 19th century (8 instances, or 0,5%) and in the later period (12 instances, or 1,87%). In 1800–1827 these included people who were murdered “by villains” or “with a stone”, who “drowned” and “choked with charcoal fumes” and died “accidentally, from an excessive bleeding after phlebotomy at night”. In the late 19th – early 20th century these died from “bullet wounds in heads and necks”, “body burns”, “gangrene of fingers (toes) resulting from frostbite” and “skull cracking”, “drowned by accident” and “choked with charcoal fumes” or were “ran down by a tramway car”.

Only two deaths in the earlier period bore suicidal character – “hanged him(her)self” and “killed him(her)self with a knife during a hypochondriac attack”. Similar causes of deaths were recorded almost a century later among four people – “shot him(her)self to death” and “hanged him(her)self being in an abnormal psychic state”. The later period also saw a small number of deaths (0,62%) caused by mental disorders (“from *dementia*

consecutiva”, “from going mad” and “from mental disorder of a brain tunic”). Noteworthy, these latter diseases were not recorded as causes of deaths in the earlier period.

Deaths caused by diseases associated with a generally low level of obstetrics and pediatrics were common for that time. Causes of infant and child mortality are demonstrated by records of deaths from “childish convulsions”, “childish diarrhea”, “childish dryness” and “hypoplasia”. Women died from “puerpetal fever” and “eclampsia of pregnancy”. In the beginning of the 19th century these deaths amounted to 572 instances (or 32,5% of all deaths in the earlier period). It is also characteristic that a large number of children died from “diarrhea” (under one year of age), “*zavalka*” (angina), “*rodimets*” (eclampsy), “general childish diseases” and “asthenia at birth”. During the later period the number of deaths recorded in this category decreased to only 2,18%. This figure, however, seems to represent a significant underestimation of a factual number of deaths in this category since the church registers very rarely contained entries about yet unbaptized infants.

In the later period the “old age diseases” form a quite large group of death causes amounting to 8,24%. This means that almost every tenth Greek of Odessa survived into his (her) elderly age, at which he (she) died from “senile marasmus”, “senility”, “senile emaciation”, “senile infirmity”, “senile sickness” or “by natural death”. However, it appears impossible to compare figures from this category through time. In 1800–1827 the relevant entries in the church registers referred to not only old people but also young ones and even children. Among these, the old age (senile) diseases proper formed only a small group of causes. During that time all inexplicable fatal outcomes were interpreted as “natural” or “sudden” deaths which amounted to 22,5%. This figure, however, makes an erroneous impression that every fifth of the deceased “survived into his (her) senility” and died without apparent cause.

Similar number of people (21,7%) died from infectious diseases. This figure, however, does not seem to account for mass victims of plague, cholera and smallpox epidemics which periodically took lives of hundreds of residents of Odessa in the first third of the 19th century (three pandemics of cholera took place in 1823, 1829–1831 and

1846–1848).⁴⁴ In our data direct evidence for such causes of deaths (“from black disease” and from “pestilence”) during these times are found in only 2, 5 and 60 cases respectively. Insufficient medical knowledge seems responsible for the low percentage of deaths from scarlatina and fever (*likhoradka*). Deaths from another kind of fever (“*goryachka*”) amounted to 303 cases.

It is also possible to calculate the actual losses of population from outbreaks of these epidemic diseases among all residents of Odessa. In 1848, according to medical statistical records, 5,541 residents of Odessa got infected and 1,793 people died.⁴⁵ Among the entire Odessa’s population of 77,778 people at that time these figures represent 71,2‰ and 23,1‰ respectively. The comparison of these figures to the annual index of population loss at that time (2,509 people⁴⁶ or 32,3‰) demonstrates that epidemics raised mortality rates by over 70% taking almost as many lives as natural causes of death did. In a similar vein, the population loss by 7,61‰ in the Kherson Guberniia in 1848 was related to the concurrent scurvy and the crop failure.⁴⁷

Data from the late 19th – early 20th centuries show drastic lowering of these indices. Although the number of people fallen in various infectious diseases remained rather high at the level of 9,64‰, it clearly decreased more than two times. The range of such diagnoses also widened indicating rising levels of medical knowledge and service. Nearly a half of all diagnoses of infectious diseases falls down to “typhus” and “scarlatina”. These are followed by “measles”, “dysentery”, “pertussis”, “erysipelas” and other diseases. Under this category also fall numerous cases of death from “consumption”, which is a disease of infectious and epidemiological character. Of all lung diseases (296 cases or 16,8% of all lethal outcomes in the first third of the 19th century and

44. Skalkowski, *On Mortality and Longevity of Life in Novorossiia Region*, p. 2.

45. Об эпидемической болезни холере в городе Одессе и его уезде в 1848 году [Concerning the Epidemic Disease of Cholera in the City of Odessa and its District in 1848], in *Новороссийский календарь на 1849 г.* [Novorossiia Calendar and Directory for 1849], (Odessa, 1848), p. 402.

46. Skalkowski, *Territory and Population of Novorossiia Region in 1845*, p. 369.

47. Vasilii Pokrovskii, “Влияние колебаний урожая и хлебных цен на естественное движение населения” [Influence of Fluctuations in Harvests and Grain Prices on the Natural Movement of the Population], in: Aleksandr Chuprov and Aleksandr Posnikov (eds.), *Влияние урожаев и хлебных цен на некоторые стороны русского народного хозяйства* [The Influence of Harvests and Grain Prices on Some Aspects of the Russian National Economy], in 2 vols., vol. 2, (St. Petersburg, 1897), p. 190.

172 cases or 26,44% 70 years later), almost a half of cases (119 and 72 respectively) show references to consumption and tuberculosis.

The rest of deaths in this category occurred from catarrhal diseases such as “pneumonia”, “bronchitis” and “bronchopneumonia”. The early 19th century medical diagnostics appear rather poorly developed registering deaths “from cough”, “from cold” and from “fever” (*likhoradka*). A contemporary wrote that “In spite of the southern climate, cough is a commonplace disease here in winter... The affection of mucous tunics frequently declare itself as the intermittent fever when very strong attacks sometimes pass into general physical exhaustion... Different kinds of intermittent fevers are rife and rampant everywhere... they represent the native and often mass epidemic disease in the region”.⁴⁸ In the early 20th century every year deaths from acute respiratory diseases (influenza) constituted nearly 2% of all death cases.⁴⁹

Table 17.22. Structure of Diseases with Lethal Outcomes, 1906

Disease	Number of deaths in a part of Russia (69 million people), in thousands	%
<i>Scarlet fever</i>	108,2	27,0
<i>Typhus</i>	67,1	16,7
<i>Pertussis</i>	63,0	15,7
<i>Measles</i>	58,4	14,6
<i>Diphtheria</i>	50,0	12,5
<i>Smallpox</i>	36,3	9,1
<i>Dysentery</i>	17,6	4,4
Total	400,6	100,0

Source: *Отчет о состоянии народного здоровья и организации врачебной помощи в России за 1906 г.* [Report on the State of Public Health and Organization of Medical Care in Russia for 1906], (St. Petersburg, 1908), p. 23.

48. *Military Statistical Review of the Russian Empire*, p. 107.

49. Boris Ulanis, *История одного поколения (социально-демографический очерк)* [History of One Generation (Socio-Demographic Essay)], (Moscow, 1968), p. 60.

Table 17.23. Structure of Causes of Deaths in Russia, 1906

Cause of death	Number of deaths (in thousands)	%
<i>Infant diseases</i>	1600	38
<i>Acute infectious diseases</i>	800	19
<i>Malignant tumors</i>	800	19
<i>Diseases of cardiovascular system</i>	300	7
<i>Tuberculosis</i>	120	3
<i>Violent death</i>		1
<i>Croupous pneumonia</i>		2
<i>Other causes</i>		25
Total	4300	100

Source: *Отчет о состоянии народного здоровья и организации врачебной помощи в России за 1906 г.* [Report on the State of Public Health and Organization of Medical Care in Russia for 1906], (St. Petersburg, 1908), p. 23.

The actual percentage of infectious diseases should be supplemented with some diseases of internals such as bowels, kidneys and liver, but there is no direct evidence for their etiological nature. These diseases caused deaths in every tenth case (10,42%). Other diagnoses included diseases of intestine (35 cases), kidneys (16 cases) and liver (13 cases) as well as appendicitis (3 cases). These figures, however, demonstrate rather unskilled diagnoses than the real medical situation. Most frequently, these included “dropsy” or “water sickness”.

Almost all deaths from infectious diseases took place in summer. This observation supports the foregoing assumption concerning the influence of this factor on general mortality among the Greeks during the time period under study.

Among main causes of deaths were diseases of spinal cord and brain. These causes were responsible 15,55% of all deaths among Greeks of Odessa in the late 19th – early 20th century, while in earlier times they constituted only 3,3%. Later in the 20th century medical science got over many of these diseases, but more than a hundred years ago they remained formidable foes to human health.

Another large group of causes that led to lethal outcomes were cardiac diseases responsible for 11,51% deaths in our data sample. It is notable that corresponding records contained both professionally stated diagnoses (“myocarditis”, “arteriosclerosis”, “aortic aneurysm”) and their folklore counterparts (“heart rupture”, “breast pang”). In almost a half of the cases (34 of 74) there are references to “heart disease”. When compared with a general situation in Odessa, we observe that in 1906 from diseases of the circulatory system there died 789 people (8,19%).⁵⁰ Clearly, in the early 19th century no such diseases were diagnosed.

Epilepsy (“falling sickness”, “convulsions”) caused 0,6% of deaths in 1800–1827 and 3,42% in 1892–1904. The development of medical knowledge is clearly demonstrated in the field of oncology. Oncological diseases were diagnosed as causes of deaths in only 0,2% of all cases in the earlier period, while later in time their proportion rose to 4,82%. Of all 9637 death cases in 1906, the number of deaths caused by malignant tumors amounted to 475 (or 4,93%).⁵¹ It appears that in some of these cases the diagnoses were made rather inaccurately. A similar situation is observed among deaths from blood diseases in the late 19th century (1,24%).

In a considerable number of death records, however, the available information presents practically no diagnoses or causes of deaths but rather general statements like “sudden death” or “death from an unknown disease” (4,04%). Into this category we also include singular cases of “English disease” (rachitis), “common dropsy” or “Basedow’s disease” and social diseases such as “cachexia” or “asthenia”.

The general structure of causes of deaths among the Greeks of Odessa in the late 19th – early 20th century shows a pattern very similar to that observed among the middle class population of the city of Bremen (Germany) in 1901–1910.⁵² Similar percentages of “diagnoses” suggest similarity in living conditions in European cities at that time. The only exceptions concern rates of lung diseases (related to environmental factors), violent

50. *Отчет о состоянии народного здоровья и организации врачебной помощи в России за 1906 г.* [Report on the State of Public Health and Organization of Medical Care in Russia for 1906], (St. Petersburg, 1908), p. 23.

51. *Ibid.*

52. Kurkin, *Fertility and Mortality in the European Capitalistic Countries*, p. 48.

deaths and suicides which show smaller percentages among the Greeks of Odessa compared to residents of Bremen.

Our study in causes of deaths among the Greek population of Odessa in 1800–1920 has also showed a high percentage of accidental deaths, which gradually decreased throughout the period in question. Anatolii Vishnevskii noted that “The essence of a turnover in mortality lies in a radical change in the structure of causes from which people die. Before the turnover most people had died from causes related to external living conditions – hunger or malnutrition, epidemics, infectious and parasitical diseases, tuberculosis, violent death, etc. These so-called exogenous causes of deaths, external as opposed to natural processes taking place inside a human body, are neither inherent in a growing organism nor connected with its congenital malformations”.⁵³ Prematurity and eliminability of this kind of mortality resulted in appearance of the modern type of mortality in which accidental deaths were minimized. The Greeks of Odessa were at the stage of transition.

Social Characteristics of the Diseased

The class and social composition of the diseased along with information about their descent and citizenship is summarized in the Table 17.24.

Table 17.24. Socio-Territorial Composition of the Diseased, 1800–1920

Descent and citizenship of the diseased	1800–1860		1861–1920	
	Number	%	Number	%
Foreign citizens	1464	50,8	2500	75,4
Ottoman citizens	684	43,7 ⁵⁴	632	25,3
Greek citizens	339	21,6	1756	70,2
Ionian natives	72	4,6	9	0,4
English citizens	103	6,5	22	0,9
Foreign Greeks	102	6,5		

53. Anatolii Vishnevskii, *Избранные демографические труды* [Selected Works in Demography], vol. 1, (Moscow: Nauka, 2005), p. 42.

54. Hereinafter figures in *italics* show percentage from the overall value in a category.

Descent and citizenship of the diseased	1800–1860		1861–1920	
	Number	%	Number	%
Austrian citizens	100	6,5	37	1,5
Moldavian and Wallachian citizens	25	1,6	7	0,3
French citizens	12	0,8	8	0,3
Danish citizens	6	0,4	4	0,1
Neapolitan citizens	2	0,1	11	0,4
Foreigners ⁵⁵	121	7,7		
Bulgarian citizens			2	0,1
German citizens			2	0,1
Spanish citizens			2	0,1
Montenegrin citizens			8	0,3
Military personnel (active and retired)	112	3,9	17	0,5
Priests and their family members ⁵⁶	16	0,6	13	0,4
Meschane	239	8,3	200	6,1
of Odessa	197	82,4	160	80
of Akkerman	13	5,3	9	4,9
of Ovidiopol	10	4,0		
of Grigoriopol	4	2,0		
of Dubossary	9	3,9		
of Kiev	2	1,0		
of Mogilev	3	1,4		
of Moscow	1			
of Chisinau			20	10,0
of Kerch			11	5,1
Other categories of Greeks	130	4,5	48	1,4
Citizens of Balaklava	17	13,0	6	11,5
Greeks of Nezhin	102	78,5	37	77,1
Colonists from Maly and Bolshoy Buyalyks	11	8,5	5	11,4

55. People with no indication of their citizenship, of whom 102 persons are directly referred to as “Greek” and 2 persons as “Bulgarians”.

56. First of all, priests and service staff of the Holy Trinity Church.

Descent and citizenship of the diseased	1800–1860		1861–1920	
	Number	%	Number	%
Nobles, civil servants, hereditary citizens	89	3,1	118	3,6
Merchants	340	11,8	201	6,1
Peasants	22	0,8	26	0,8
Other	53	1,8		
Armenians	6	11,3		
Arnauts (Albanians)	2	3,8		
Bulgarians	3	5,6		
Solitary residents and their children	40	75,5		
Gypsies	2	3,8		
<i>Unspecified</i>	<i>416</i>	<i>14,4</i>	<i>190</i>	<i>5,7</i>
TOTAL	2881	100,0	3313	100,0

The social structure of the diseased was determined by the character of the Greek community of Odessa in the 19th – early 20th centuries. As we have already demonstrated, it was composed basically of foreign incomers, and their part in the community increased significantly from 1800 to 1920. If before 1860 they had constituted just over a half of all the diseased for whom funeral services were held in the Holy Trinity Church, in the later period of similar duration they represented three fourth of the size of the community population. Of all the foreigners in Odessa the largest increase is shown by Greek citizens, from 21,6% to 70,2%. The number of Ottoman citizens remained rather stable showing only a slight decrease from 684 to 632 people. Other numerically significant groups included citizens of Italy, England, Austria and other European countries. By the end of the 19th century the geographic limits had expanded for account of citizens of Bulgaria, Spain, Montenegro and Germany. This geography reflects a wide range of economic activity of the Greek community of Odessa. At the same time, one shall keep in mind that no less than a half of all foreigners belonged either to the second generation of Odessans or among people living in the city for a long time.

Prior to 1892 the majority of the diseased had been buried at the First (Old) Christian Municipal Cemetery, and only some were buried at the cemetery in Slobodka area. Later in time, after 1892, burials took place at the Second and Third Municipal Cemeteries. The

Old Cemetery remained still in use by the upper classes of population (nobles, merchants and honorary citizens). Some honorary and pious figures were buried by the Church of Ascension in the Fontan area and in the fence around the Convent of the Dormition in Bolshoy Fontan area. These distinctions reflected socio-territorial stratification within the Greek community of Odessa as well as a well-developed infrastructure of funerary services in the city experiencing a need of new territories for cemeteries.

To sum up our research, several conclusions can be made. First, there is a strong evidence for refinement of the system of death recording in the church statistical documents throughout the first half of the 19th century. Second, these novelties had led to the rise in mortality indexes for the Greek community from 22‰ to 37‰. In general, this index is somewhat lower than that for the entire Guberniia and European Russia. This may indicate a more favorable urban environment in Odessa during that time period. Third, most of the deaths were caused by diseases. The evidence indicates a very low level of medical services in general, not to mention unrecorded infant and child mortality. Fourth, our study in seasonality of deaths has revealed a specific local pattern in which the spikes reflect living conditions in Odessa. Finally, in the Holy Trinity Church there were held many funerary church services for the dead foreign citizens. This underscores the complex structure of population in Odessa and, simultaneously, the economic activity of its residents.

Weights and Measures

1 chetvert (1 quarter), unit of volume of bulk materials (grain): $209.91 \text{ L} \approx 0.21 \text{ m}^3$

(not to be confused with *chetvert* as measure of length, or measure of weight, or measure of liquid materials)

1 desyatina, unit of area: 1.09 ha

1 feet, unit of length: 0.3 m

1 kile, unit of volume of bulk materials (grain), variable; in Bessarabia equal to 2.0725 Russian *chetverts*: $435.038475 \text{ L} \approx 0.44 \text{ m}^3$

1 pood, unit of weight: 16.38 kg

1 sazhen, unit of length: 2.13 m

1 vershok, unit of length: $4.445 \text{ cm} \approx 0.045 \text{ m}$

1 versta, unit of length: 1.067 km

List of Abbreviations

DAARK	State Archives in the Autonomous Republic of Crimea (Ukraine)	Державний архів в Автономній Республіці Крим (Україна) [Derzhavnyi Arkhiv v Avtonomnii Respublitsi Krym (Ukraina)]
DADO	State Archives of Donetsk Region (Ukraine)	Державний архів Донецької області (Україна) [Derzhavnyi Arkhiv Donets'koi Oblasti (Ukraina)]
DAKhO	State Archives of Kherson Region (Ukraine)	Державний архів Херсонської області (Україна) [Derzhavnyi Arkhiv Khersons'koi Oblasti (Ukraina)]
DAMO	State Archives of Mykolaiv Region (Ukraine)	Державний архів Миколаївської області (Україна) [Derzhavnyi Arkhiv Mykolaivs'koi Oblasti (Ukraina)]
DAOO	State Archives of Odesa Region (Ukraine)	Державний архів Одеської області (Україна) [Derzhavnyi Arkhiv Odes'koi Oblasti (Ukraina)]
ECD	European Commission of the Danube	
FO	Foreign Office	
GARF	State Archive of the Russian Federation Moscow (Russia)	Государственный архив Российской Федерации (Россия) [Gosudarstvennyi Arkhiv Rossiiskoi Federatsii (Rossiya)]
GBAO	Greek Benevolent Association of Odessa	Греческое благотворительное общество в Одессе [Grecheskoe Blagotvoritel'noe Obshchestvo v Odessa]
IMI	Infant Mortality Index	
NARM	National Archive of the Republic of Moldova	

PSZRI	Complete Code of Laws of the Russian Empire	Полное собрание законов Российской империи [Polnoe Sobranie Zakonov Rossiiskoi Imperii]
RGIA	Russian State Historical Archive (Russia)	Российский государственный исторический архив (Россия) [Rossiiskii Gosudarstvennyi Istoricheskii Arkhiv (Rossiya)]
ROPiT	Russian Society of Steam Navigation and Trade	Русское общество пароходства и торговли, РОПиТ [Russkoe Obshhestvo Parokhodstva i Torgovli]
T.I.Co	Russian Transport and Insurance Company	Российское транспортное и страховое общество [Rossiiskoe Transportnoe i Strakhovoe Obshhestvo]
TNA	The National Archives of the United Kingdom	
TsDIAK	Central State Historical Archives of Ukraine in Kyiv (Ukraine)	Центральний державний історичний архів України, м. Київ (Україна) [Tsentral'nyi Derzhavnyi Istorychnyi Arkhiv Ukrainy, m. Kyiv (Ukraina)]

Glossary

Birzha (биржа): market exchange

Census lists (ревизские сказки): documents reflecting the results of audits of the taxable population of the Russian Empire in the 18th and 1st half of the 19th centuries

Chernozem (чернозём): black earth, the highly fertile land

City Duma (городская дума): City Council

Governorate-General (генерал-губернаторство): an administrative-territorial division of the Russian Empire, usually consisting of a set of Guberniias

Governor-General (генерал-губернатор): governor of the Governorate-General

Guberniia (губерния): administrative unit of the Russian Empire, imperial province comprised of uezds

Liman (лиман): landform, enlarged estuary formed as a lagoon at the wide mouth of one or several rivers, where flow is constrained by a bar of sediments

Mayor (городской голова): elective office in the Russian Empire, head of the city self-government

Meshchanin, pl. *meshchane* (мещанин, мещане): urban middle class (petite bourgeoisie)

Mestechko (местечко): historical type of a market-like urban settlement, with a significant or even predominant Jewish population, had a special administrative status other than that of town or city

Plenipotentiary Governor (полномочный наместник): position in the Russian Empire, the head of a large administrative-territorial unit

Treasury (казённая палата): administrative and financial institution in the Russian Empire

Uezd (уезд): administrative unit (district) of the Russian Empire, subdivision of Guberniia, comprised of volosts

Urban Prefect (градоначальник): an official who ruled the Urban Prefecture

Urban Prefecture (градоначальство): administrative territorial unit of the Russian Empire consisting of a city and its adjacent territory

Uyezdnoye zemstvo (уездное земство): elected body of the uezd self-government

Viceroyalty (наместничество): administrative territorial unit of the Russian Empire

Volost (волость): smaller territorial administrative unit (canton), subunit of the uezd

Zaporozhian Sich (Запорожская Сечь): the administrative center of the Zaporozhian Cossacks

Zemstvo (земство): elected body of local self-government

Biographical Notes

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