TO FURTHER THE CAUSE OF EMPIRE: PROFESSIONAL WOMEN AND THE NEGOTIATION OF GENDER ROLES IN FRENCH THIRD REPUBLIC COLONIAL ALGERIA, 1870-1900

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Introduction

My work examines the ways in which the ideology of Republican motherhood, an understanding of gender roles that equated patriotism with motherhood, shaped both domestic policy toward women and girls and operated in colonial Algeria through the practice of French woman-to-woman medical care. Republican motherhood shaped state mandated girls’ education in metropolitan France, and these same ideals enabled French female physicians, educated in these French traditions, to practice in Algeria, particularly as guides for midwives who provided Algerian women with gynecological healthcare.

Republican motherhood was instilled in girls’ education and was based on the premise that women were not active citizens, but showed devotion to the republic through the teaching of their children. This model of womanhood did not allow for the professionalization of women, but the colonies presented an interesting case because getting to Bedouin society through colonial women required the use of women doctors. I argue that though Third Republic policy makers sought to instill republican values in women for the sole purpose of patriotic motherhood, these notions played out in a unique way within the colonial setting through the state mandated use of woman-to-woman medical care. Republican values of good citizenship and loyalty to France allowed Dr. Dorothée Chellier, a French woman, to transgress social norms, by having a profession within the medical field, and yet instill them in the indigenous women of Algeria through the French Republican woman-to-woman medical program. Chellier is thus a case study of how a woman in an unorthodox position could be allowed – even encouraged by – the
republican state because she had the unique ability to interact with women and thereby aid France’s mission to assimilate the Algerian population.

To understand the utilization of Republican motherhood within colonial policy, it is important to understand the intention behind this ideal in the metropole. Joan Landes’s work, *Women and the Public Sphere in the Age of the French Revolution*, illuminates how Republican ideology relegated women, as non-voting auxiliary citizens as important to the Republic only by virtue of their fertility and social role as a child’s first teacher.¹ Landes argues that the ideal of Republican motherhood was part of the French government’s gendered social stratification and delineation of citizenship based upon the Enlightenment era notion of “universal manhood” attributed to eighteenth-century French philosophes. In this Enlightenment-based definition of citizenship, universal suffrage did not apply to women; French Republicans would go on to justify this inequity by placing great significance on women’s biological and social role as mothers of Republican citizens. In Chapter one, I highlight the juxtaposition of Republican values with gendered bourgeois norms and demonstrate that patriotism, for women, was equated with French motherhood in French girls’ curriculum. By examining girls’ primary and secondary school textbooks, it is clear that this curriculum inculcated French girls in the belief that motherhood was the appropriate way to express patriotism for their country.

With the advent of compulsory primary education during the early Third Republic (1870-1940), girls’ education became the arena in which future mothers of strong French citizens would be exposed to a curriculum that reinforced the motherhood ideal. Linda Clark’s “The Socialization of Girls in the Primary Schools of the Third Republic” shows how the education of

young girls was one way that the government of the Third Republic sought to reinforce social norms alongside patriotic values within their curriculum.\textsuperscript{2} My study builds on Clark’s argument by emphasizing how Republican motherhood, in particular, which featured prominently in Third Republic domestic policies, was an additional goal of state-mandated education for girls. I examine the years of the early Third Republic (1870-1905), a period in which the secular state was attempting to jettison the religious education of the past and establish the republic through the schools. Despite this, many republican assumptions about women were consistent with earlier traditions. Through a side by side comparison of Catholic and secular textbooks for girls, I show how both educational systems used imagery and lessons that revolved around the social role of motherhood, even if they differed on the meaning behind these maternal images and school work. In religious textbooks, depictions of motherhood followed the Marian tradition, emphasizing piety, inner strength, and moral guidance for the family. Secular textbooks, on the other hand, favored images of women who raised future Republican heroes. For example, a biography of Mary Ball Washington, mother of George Washington, was extolled for her devotion to raising a strong and bright young man. Republicans believed that French girls, as future mothers, needed to receive a solid education, administered by the State, not for future professional purposes, but so they would be able to pass down basic bourgeois social values as well as devotion to the Republic and the importance of responsible citizenship to their offspring.

Generally, the professionalization of women was viewed as an interference with the proscribed social role of motherhood. However, as Karen Offen’s “The Second Sex and the Baccalauréat in Republican France, 1880-1924” demonstrates, teaching in primary and

secondary schools eventually became viewed as marginally acceptable for women because of the important role of imparting French social and cultural values to young children, which was similar to Republican motherhood. Sarah Curtis’s *Educating the Faithful: Religion, Schooling, and Society in Nineteenth-Century France* indicates that the Catholic Church also expressed tacit acceptance of women working as teachers. Curtis argues that the concept of the *feminization* of the Catholic Church, a term used pejoratively within secular Republican circles to indicate that the Church was the antithesis of Republican modernity and rationality, could also be used to describe the important positions within the Church that women held as nuns and as school teachers. The medical field, on the other hand, was a profession that continued to present many barriers to women.

By mid-nineteenth century, women in other countries, such as America and Britain, were entering medical programs. The *Faculté de medécin* in Paris did not allow women until 1870, and therefore Dorothée Chellier’s profession, as a physician, flouted the patriotic motherhood model. Though there was hardly an influx of women entering medical school in France after 1870, a dialogue within political circles in the metropole emerged and framed the work of certain female physicians in patriotic terms. Throughout Western Europe, “lady doctors” generally specialized in women’s health care, but there was still widespread social and economic concern about women within the medical field. A solution to the perceived economic competition and impropriety of female physicians emerged with the notion of sending them to the colonies to provide Western medical care and a “civilizing” presence to indigenous women. Historians have shown how the British practice of woman-to-woman medical care by “lady doctors” was

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predicated on the concept of European women spreading Western European modern medical and cultural practices to the women of India. Antoinette Burton’s “Contesting the Zenana: The Mission to Make ‘Lady doctors for India’, 1874-1885,” provides insight into the work of British female physicians within the colonial realm where the main objective of the ‘lady doctors,’ in addition to medical care, was to save the women from the confines of the zenana.4

While Karen Offen’s article demonstrates that teachers in the metropole practiced Republican motherhood through their profession, in chapter two I examine how lady doctors, as part of woman-to-woman health programs, similarly practiced Republican motherhood through their profession within the colonies. Within this chapter, I situate Chellier’s medical plan as part of the tradition and context of woman-to-woman health care and establish that her mission was also part of the French imperial goal of assimilation through indigenous Algerian women.

Chellier published a medical and cultural account of her time in Algeria and an examination of this work shows how her medical recommendations and attitudes were influenced by the ideology of Republican motherhood. Chellier used the metropole’s social ideal of motherhood within her woman-to-woman colonial medical program as a way “civilize” the indigenous population and benefit the colonial state by furthering Algerian assimilation to French social, cultural, and economic values.

I argue that Chellier’s medical services for Algerian Berber women went beyond simply imparting modern medical innovations and seeking to save Muslim women from the harems, though this was certainly an aspect of her work. The medical services provided by Chellier, more importantly, utilized Republican social ideals to fashion a solution to the vexing problem of

indigenous resistance to all French attempts to impart these values. Woman-to-woman health care in Algeria, under the regime of the Third Republic, was unique in that the specific goal of Chellier’s mission was to assimilate a historically fractious indigenous population to French social, cultural, and economic standards in order to ease the way to assimilation.

Some recent historical works have studied French colonial woman-to-woman medical care, including Sarah Curtis’s, “Emilie de Vialar and the Religious Reconquest of Algeria” and Ellen Amster’s dissertation, “Medicine and Sainthood: Islamic Science, French Colonialism, and the Politics of Healing in Morocco, 1877-1935.” Both of these works examine how the French often used woman-to-woman health care in the North African colonies because of the Islamic cultural practice of separate health care by sex. Curtis’s work gives great insight into the beginnings of French medical programs in Algeria, starting in the first decade after the French invasion in 1830. Curtis notes that this nascent medical program was led by Emilie de Vialar, a French nun, who went on to work in other French colonies after establishing a hospital, an orphanage, and a shelter for prostitutes in Algeria. Vialar tread lightly in regards to proselytizing to her Muslim patients, but her medical work was driven by religious doctrine.5 Ellen Amster’s dissertation analyzes the work of Dr. Françoise Legey, a French female physician in league with the Resident general of Morocco. Legey worked in similar conditions to Chellier in terms of the range of illnesses she encountered and how her work also involved mostly indigenous Moroccan women. Legey was charged with providing both medical care and French social values in order to uplift the Muslim women within the French Protectorate of Morocco.6


Chellier’s medical program differed in important ways from that of both Vialar and Legey, however. Chellier was careful to separate her work from that of the religious medical missionaries within Algeria, and she wanted her medical assistance to be associated with secularism. Though Chellier and Legey both offered secular medical care to Muslim women, Legey was working within a Protectorate, a legal status that allowed for the existence of a Moroccan ruling family, but which was in reality a colony with indirect rule by France. In Morocco however, there were no official colonial settlements or large numbers of settlers to protect from rebellious indigenous groups. Chellier’s work formed in the context of an erratic relationship between the French metropolitan government and several groups of people within Algeria: the colonial government, the Arabs within the urban areas, the mixed European communities, and the Bedouin groups that occupied the rural areas of Algeria. The political situation and diverse populations greatly affected the atmosphere in and the conditions of the medical civilizing mission on which Chellier embarked.

In my third chapter, I discuss Chellier’s medical mission as a case study of how her work in colonial gynecological health practices fits into the framework of Republican motherhood. She rejected the bourgeois social norm that guided the meaning behind a French republican woman’s patriotic duty, by pursuing a medical career in lieu of having children, but defined her work for the colonial government in Algeria as patriotic in nature. Her work and her position within French society made her unique and she believed that she was the only person who could bring together the need for assimilation and secularism through a French medical program that was based on gynecological health care.
Chellier’s observations, medical and cultural, during her Algerian woman-to-woman colonial medical mission was guided by social concerns within the metropole, such as women’s fertility and the importance of motherhood within French society. As James Lehning notes in his work, *To Be a Citizen: The Political Culture of the Early French Third Republic*, “The forms of control that operated in gender and sexual relations in France, were also used to construct domination of France over its colonial subjects.”

This is especially true regarding the French government’s use of woman-to-woman medical care for Algerian women to influence the indigenous population to assimilate to French social, cultural, and economic values. This concept was used in other French colonies, such as Madagascar under the rule of governor general Gallieni.

Margaret Andersen’s, “Creating French Settlements Overseas: Pronatalism and Colonial Medicine in Madagascar,” discusses how the colonial government sponsored health programs that specifically focused on the obstetric and gynecological care of indigenous women. These were developed by colonial governor Gallieni as part of an assimilation program that he dubbed *tâche d’huile*. Gallieni’s colonial policies provided social services, such as health care, to the colonial population, in order to raise their standard of living as a way to demonstrate the multiple benefits of French rule and achieve pacification of the indigenous population. Andersen also places Gallieni’s assimilation plans within the pronatalist dialogue between the metropole and colonies, as some regarded the colonies as a solution to France’s depopulation. Chellier’s health

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initiative was similarly part of the discourse between the metropole and the colonies, concerning the metropole’s ideas about women’s fertility and their position in society.

Chellier may have broken with the social norms of the metropole by becoming a physician and eschewing Republican motherhood, but she still applied elements of this ideology to her female indigenous patients. Republican motherhood in Algeria served a purpose similar to that in the metropole, as it instilled social control by indoctrinating bourgeois norms and republican values in Algerian women, who would in turn further the assimilation of the rest of the population. Chellier, imbued since elementary school with images of her proscribed social role as a Republican mother, broke with this gender norm in pursuing a profession in the male-dominated medical field. Despite her unorthodox approach to these normative gender roles, she was encouraged by the French government to pursue her field of work within Algeria, because of her special status as a woman, a physician, and staunch supporter of Republican values. Her gender allowed her to go into the *chez femmes* closed to previous French doctors, due to the Islamic practice of separate medical treatment by sex, and disseminated French social and economic frameworks to the Algerian women. Dorothée Chellier presents an interesting study in how, even though she changed the original intent of the proscribed role of Republican motherhood for herself, she still identified certain tenets of this model that did apply to her. She found that while the patriotic aspects of this model suited her purposes, the assumptions about motherhood as the foundation of a woman’s life did not. However, she utilized these same assumptions about motherhood in her own medical work with the indigenous women of Algeria, and in the process, she fulfilled the role of a French Republican patriot.
“Mothers are the true professors of morality”: Legislating Republican Motherhood in Nineteenth-Century Schoolgirl Curriculum

Defining the role of women in nineteenth-century French society was a politically charged endeavor that inspired great debate after the establishment of the Third Republic in 1870. One issue that exemplifies this increased politicization of women’s role within French society is the political and social dialogue that surrounded the education of girls during the nineteenth-century. While a few policy makers within the Second Empire (1850-1870) had introduced legislation aimed at providing standardized education for boys and girls, these early bills failed and this type of legislation was not introduced again until ten years later, under the auspices of the Third Republic.

Educational legislation introduced by politicians within the Third Republic was comprised of a compulsory government administered primary educational system for both boys and girls. Mandatory primary education became part of the republican effort to introduce an even distribution of modernity to the rural and urban areas within France. Seeking to create commonality within the entire population, the government educational system sought to promote a standardization of language in provincial schools, instead of the numerous dialects spoken throughout the many French provinces. Also, the system contributed to a rise in population literacy rates. Historian Laura Strumingher argues that one other effect of state-mandated elementary education of rural children is that this compulsory education created an intersection between economic classes and contributed to the urbanization and industrialization of France.

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along with appropriate gender roles in school age children. Strumingher credits the elementary curriculum, guided by bourgeois French Republican values, for instilling the dominant cultural values of “becoming civilized.”

Within the French metropole, the Catholic Church and anti-clerical politicians, at odds politically since the French Revolution, each held a specific stake in the administration of girls’ curriculum. While both institutions similarly looked to prepare young girls for marriage and motherhood according to bourgeois standards, a central tenet behind the schoolwork found in both parochial and secular primary school curriculum, their underlying motivations were disparate. An analysis of nineteenth-century girls’ textbooks, parochial and secular, as well as educational policies, demonstrates the various political and cultural influences behind the gendered schoolwork found within the curriculum.

The Catholic Church sought to shape young girls into virtuous churchgoing mothers and wives, while the Third Republic’s government officials wanted to instill modern liberal values and deep loyalty to the Republic in future mothers of strong French citizens. For both, educating girls was important because of the role they would eventually have in shaping future generations, whether it be as good Catholics or as good citizens. In effect, the secular government of the Third Republic expanded upon already existing understandings of women’s social role established by previous governments and the Catholic Church, while at the same time recognizing the potential political value of girls as Republican mothers contributing to the domestic and global goals of France.

**Politicization of Girls Education**

Historians have used the concept of Republican motherhood to describe the notion that mothers are not only the primary caretakers of their children, but also the single most influential intellectual and moral influence in their children’s lives, making them important, therefore, in shaping future citizens. The importance of educating girls for the sole purpose of raising future French citizens was realized even before the establishment of the republic, and was also voiced by government officials in France’s Second Empire. Many educators, politicians, and physicians also agreed that girls needed a basic education, but only to fulfill the social role of mother-teacher. Finally, Catholic Church officials also felt the imperative of educating girls as future mothers, though to the Church, women represented the single most important moral and spiritual influence on their children, rather than a means of creating politically fit citizens. For all concerned, the need to influence young people, and especially young men, through their mothers constituted a reason for standardizing girls’ education.

French government officials made the first attempt at a standardized educational code for girls and young women under the Second Empire, in 1867. This piece of legislation was put forth by the Minister of Public Education, Victor Duruy. In Duruy’s autobiography, *Notes et souvenirs, 1811-1894*, he recounts a letter he sent to Napoléon III, who had been elected president in 1848 before later crowning himself emperor, with remonstrations, “Sire,” he wrote “For twenty-five years we have a had a misdeed of democracy first raised in 1848...and this misdeed still continues in law.” The “misdeed” of democracy in question was that France did not have a unified school system for girls and that French children, “All must possess the simple elements

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3 Joan Landes, “The Gendered Republic” *Women and the Public Sphere in the Age of the French Revolution* (Ithaca: Cornell University Press, 1988), 169-188. Landes notes that the French Republic in the nineteenth-century constructed citizenship as a specifically male designation and that the expression of patriotism for women was solely through motherhood.
of knowledge that are provided in primary school.” Duruy argued, further, that as girls would grow up and become mothers to future Frenchmen, they needed a basic education.4

The clergy opposed Duruy’s educational reforms mainly because these government-directed programs encroached on the Church’s own efforts to influence the educational and moral efforts of women.5 The Bishop of Orléans, Félix Dupanloup, took such exception to some of the claims made by Duruy regarding the state of education for girls and young women that he published a rebuttal. Dupanloup was most outraged about a statement that Duruy made indicating that secondary schooling in France did not exist:

The point of departure between our views, Monsieur Duruy, is that ‘secondary schooling does not exist in France.’ If secondary instruction for the French youth does not exist in France, then what about the over three hundred secondary schools and universities? Assuredly, I do not pretend that all these programs are always executed with perfection. But perfection, what is that? I ask Monsieur Duruy, will his secondary schools always be perfect? And the instructors (at your schools) will they be more intelligent than our instructors?6

Duruy’s rather liberal views, in an era of a conservative empire, and the displeasure of the Catholic Church, forced him from office in 1869. Subsequently, little significant legislation regarding girls’ education emerged again until the 1880s. Lack of active legislation regarding female education did not mean that the government did not discuss the role of education in the lives of girls and women. The increase in public and official interest in women’s role in French society arose from the educational policies that emerged with the establishment of the Third Republic in 1870.

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The year 1870 was an especially tumultuous time for France, both politically and socially, and such instability contributed to the Third Republic’s motivation to seek rather rigid solutions to counteract the fresh memory of foreign and domestic upheaval. The invasion of France by German forces, the abrupt end of Napoléon III’s reign, and the communard uprisings against the national government contributed to the hasty formation of the Third Republic. The inauspicious beginning for the Third Republic ay have weighed heavily on the minds of officials and supporters of the administration and as such, many Republicans felt that strong government intervention in the social welfare of the French population was needed in order to regain both domestic stability and political standing within the global community.\(^7\)

The role of women and girls featured prominently in the Third Republic’s plans to reestablish social order, and also became an important part of this era’s political culture.\(^8\) Fearing instability, the government tried to maintain a precarious doctrine that delineated the role of the state in a way that limited popular sovereignty, a concept that evoked images of the bloody Commune uprisings, while still creating a strong, loyal French male citizen who could exercise his noblesse oblige and maintain an orderly State.\(^9\) Legislators also sought to define women’s role within the Republic as auxiliary citizens, nonvoting, but still integral to the state. The proposed primary role for women within the republic -- mothers of strong French citizens --

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\(^8\) Lehning describes the political culture of the Third Republic as government policies that were intertwined with the creation of identity and citizenship for the French. Lehning focuses on the first two decades of the Third Republic politics and participation by examining republican political culture, which he defines as consisting of a set of discursive practices within the civil society sector. Lehning further argues that these discursive practices defined and delineated a set of identities for population groups based on gender, class, race, and religion. These identities, reflected in the government’s value system, were also the basis for many domestic and colonial policies enacted within the early years of the Third Republic.

\(^9\) ibid, 5.
demonstrates how strictly limited was women’s role within the state. These limits characterized the gendered nature of the Third Republic’s political culture. According to dedicated Republican politicians, educated French citizens were only formed through a secular, Republican education. Young girls, viewed as future mothers, needed to receive a basic education so they could pass on the political and social goals of the Republic to their sons.\(^{10}\)

The ideology behind Republican motherhood also included the notion of the separation of sexes into corresponding spheres of influence. This followed from the bourgeois expectation that men were to fulfill their familial and citizenship duties by participating in the workforce and politics; the public sphere. Women achieved their social role within the private sphere by managing the household and raising children, and in the case of Republicans, raising them to be French citizens *par excellence*, by imparting an unwavering loyalty to the Republic. Though reality generally did not fully align with republican ideals, the concept of republican motherhood was thoroughly maintained throughout curriculum in schoolgirls’ textbooks.\(^{11}\)

Leading classical French economist and advocate of Republican social ideals Pierre Paul Leroy-Beaulieu’s written work often equated normative gender behaviors with the economic, moral, and physical health of French citizens. Leroy-Beaulieu and other staunch republicans felt that society was best served if women were active participants within the Republic only by virtue of their reproductive abilities and in their roles as nurturers and educators of new citizens. Though Leroy-Beaulieu conceded that many women were active in the public sphere, he also deemed such situations acceptable only if dire economic necessity was behind their

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\(^{11}\) Linda Clark, “The Socialization of Girls in the Primary Schools of the Third Republic” *Journal of Social History* 15 (1982): 685-697. Clark points to the education of young girls as one way that the Third Republican government sought to reinforce separation of the sexes into distinctly different spheres of influence.
participation.\textsuperscript{12} For Leroy-Beaulieu, women’s presence in public spaces was a threat not only to their natural gender role, but also to their patriotic role as caregivers of future French citizens acting within the safety of the “private sphere.” Leroy-Beaulieu’s sentiments about the social role of women were not only shaped by normative gender behaviors, but his socio-economic elitism. The Republican teacher-mother model was based on bourgeois gender norms, not necessarily on working class norms that acknowledged that women were frequently required to supplement their family’s income or entirely support the family with outside work.

The fact that Republican politicians deliberately encouraged all French women to eschew active participation in the public sphere and focus on educating their children as future French citizens might have been influenced by the significant role that women played in the communard uprisings in 1870. The \textit{pétroleuse}, a political caricature that gained global currency in the wake of the commune, represented the women who gave support to men and fought along the commune barricades. Though many women did participate in the fierce fighting along the barricades, the myth of the \textit{pétroleuse} was mostly predicated on the belief that the women who publicly spoke against the Versailles-based government and fought alongside their fellow communards were viragos and Amazons who not only set fire to Paris, but more disgracefully, “unsexed” themselves.\textsuperscript{13}

For Republicans, these unruly Parisian women also symbolized women who had forsaken their role as mothers, because any women who fought along the barricade was automatically neglecting her duty to provide and care for her children at home. A greater worry perhaps for the

\textsuperscript{12} Pierre Paul Leroy-Beaulieu, \textit{Le Travail des femmes au XIe siècle} (Paris: Ouvrage Couronne par l’Academie des Sciences morales et politiques 1873), 1.

Republicans, was that the communard women were instilling the wrong social values in their children, such as blatant disregard for government authority, and encouraging the concept of social leveling. The *pétroleuse*, in the eyes of Republicans, was the antithesis of Republican motherhood, and thus a detriment to a strong, orderly nation.

The establishment of compulsory primary and the availability of secondary education for girls would ensure that French girls learned Republican values and became shining examples of auxiliary French citizens. The prevailing sentiment among anti-clerical Republicans was that the Catholic Church not only had too much political power in French governance, but that the parochial school curriculum would produce girls who held greater allegiance to their faith than their country. This belief greatly contributed to the firestorm known as the secularization debates that peaked between the years 1880 and 1886. Despite the battle for political primacy, the Church and republican politicians did share many of the same views regarding the importance of shaping young girls for their future role as mothers. The Church and the state agreed that mothers were the first and most important teachers in their children’s lives and that this was a woman’s primary social role. Also, both institutions promoted patriarchy as the preferred family structure and a safeguard against social and political anarchy.

Since the Catholic Church and the state were the main arbiters of funding and curriculum for all levels of education for the French population in the nineteenth-century, the education of girls became a special point of contention between these two entities. The interactions between

14 Gullickson,159-189.

the state and the Church, and the stakes each group held in the education of young women, comprised an amalgam of competing interests regarding the welfare of the French population.

**The Catholic Church and Girls Education**

The French Catholic Church developed a standard curriculum for boys and girls decades before the Third Republic took up the mantle of championing education for both sexes. The Church’s primary interest in the education of girls was to help develop future familial arbiters of morality, as well as warm, nurturing mothers of future faithful Catholics. The foundational role of women within the Catholic Church, as both active parishioners and nuns, provides the best explanation for the Church’s early interest in the education of girls. In the nineteenth-century, women far outnumbered men in the practice of religion, and nuns were the majority of teachers in Catholic schools, both primary and secondary.16

This particularly close relationship between women and the Catholic Church in the nineteenth-century has been described as one of *feminization*, a term that indicates both the influence of the Church among French women and the influence women had within the Church.17 This reciprocal relationship between women and religion was often viewed pejoratively by anti-clerical Republicans, who felt that the Catholic Church promoted superstition, and thus amplified what was already considered to be the inherently irrational behavior of women.

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16 Curtis,8.

17 ibid, 8. Curtis’s concept of the *feminization* of the Catholic Church is two fold. First, she uses this idea to demonstrate that women held important positions within the Church as nuns and as school teachers. Secondly, this term denotes the greater attendance of women at Mass services and as organizers for Catholic charities. Curtis notes that on the whole, men during the nineteenth century experienced a greater crisis of faith than women, thus their attendance in religious services and religious beliefs were greatly diminished. Catholicism subsequently became more closely associated with women and vice versa.
Parish schools prepared girls to be the future moral guardians of their spouses and children with catechism lessons. As the curriculum in Ernestine Wirth’s series of textbooks *Livre de lecture courante des jeunes filles chrétiennes*, clearly demonstrates, girls were also instructed to follow normative gender behaviors. In the introduction page of *Livre de lecture*, a quote from the Cardinal Donnet confirms the clearly defined roles of the sexes in society: “Man and woman have different work to fulfill, thus need different knowledge.”

Despite the clearly delineated gender norms presented in Wirth’s textbook, many lessons were noteworthy for their selection of female protagonists, such as in the reflection “Portrait of a Strong Woman.” This piece indicated that Catholic girls were expected to eschew vanity, to be loving mothers and wives, and to put their faith in God everyday, until death. Noting,

> The heart of her spouse rests upon her with confidence…unlike frivolous women she prefers linen and wool…she wakes up early in the morning to provide the family with enough food.[On her death bed] she resolves to have a submissive heart to Providence and a radiant face.

The expectation that a model or “strong” woman would be both a gentle, caring mother and guide for Catholic doctrine confirms another facet of the feminization of the Church in girls’ education, which can be described as Marian piety. Teaching young girls to follow in the footsteps of Jesus’s mother Mary, the pinnacle of modesty, innocence, and virginity, was important, but to the Church, strong women also needed to be firm in their faith despite the secular influences of French Republican society.

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19 Wirth, 50.

20 Curtis, 93.
The nineteenth-century Catholic Church’s repudiation of the many values represented by secular society was directly related to the resurgence of the radical anti-clerical sentiment which had been a mainstay of Republican ideology since the French Revolution. The most effective way for the Church to ensure that girls would prioritize their Catholic faith in their daily lives, and to counteract the lure of secular Republican values, was by incorporating pointed criticisms of the dubious nature of these secular values in the curriculum of Catholic schools.

Moral criticisms of Republican values appear in the 1895 Catholic textbook, *Livres de morale des écoles primaires et des cours d’adultes*. One sharp commentary, on the important Republican value of freedom and how it was put into practice by Republicans, is discussed in a passage describing the various applications and definitions of freedom according to one’s station in life:

> Besides life, the most precious thing in a man’s life is liberty. It is said that this right is available to all...In their proper interest, children do not enjoy the full benefits of liberty according to adults, but they must respect the liberty of comrades and they must not act badly through intimidation or menace, such actions require a reprimand...An employer expects an employee to provide a certain service, but must not think to encroach on their employee’s privacy or personal liberty. Those who do not work voluntarily are in a sad state; they do not know the happiness that work can bring because they have never worked without constraint.21

The passage, though in a Catholic textbook, outlined the cherished value of freedom, a Republican value, and demonstrated that “freedom” was not equally applied to everyone and that social hierarchies had to be maintained in order to keep social order. The passage also noted that

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slaves were unhappy because they did not realize that work could bring personal satisfaction, rather than because they did not have social, civil, and personal freedom.

The Church and State not only clashed over the curriculum for girls and which institution held the higher moral ground, but also in regards to determining what should be the highest academic matriculation available to female students. What has become known as the “school wars,” or the conflict over secularization of French schools, began in earnest with the enactment of the Ferry Laws in 1881 and 1882. These were several pieces of legislation that involved national primary schooling. In addition, the Sée law involved secondary schooling for young women. Staunch Republicans Jules Ferry and Camille Sée both recognized the political and cultural advantages of establishing a standardized school system that did not rely on the Catholic Church.22

The most controversial and influential pieces of legislation within the Ferry Laws were the requirements that all primary educators possess a teaching credential known as the brevet de capacité, the establishment of a new national curriculum based on Republican principles, and finally, that all congregational and religious elementary faculty would be replaced by secular teachers.

The new state system of lycées and collèges, or secondary schools, for girls were established to ensure that French women would have access to secular public instruction. The curriculum of the collèges under Sée’s law included the humanist classics, history of civilization and art, modern languages, domestic economy, and hygiene. As Camille Seé noted, the goal of his educational bill was to promote well-rounded education to create women that were, “skilled,

well-read, and gracious wives and mothers” to be suitable companions for the new male republican ruling elite of France.23

Sée’s law was established in the belief that “The goal of these schools that we want to found is not to tear them [girls] away from their natural vocation, but to render them more capable of fulfilling their obligations as wives, mothers and mistresses of households.” Indeed, given the limited employment opportunities for educated women, it is likely that few women actually saw education as a means for developing employment skills; the majority of women saw outside employment not as a means for personal fulfillment, but to contribute to the family economy. These attitudes were consistent with the primary and secondary schools’ goal of shaping feminine behavior, as well as a commentary about the role that socio-economics played in how women perceived their education.24 Despite this, the educational laws did have the unintended effect of creating some opportunities for bourgeois and petit bourgeois families to enroll their daughters in secondary schools for vocational and career training purposes.

The most common and most socially acceptable vocation for girls to enter was education, either as elementary or secondary school teachers. The provision in Sée’s law for the brevet de capacité, a required teaching license distributed by the state, effectively ousted many religiously affiliated instructors, such as nuns and other clergy. At the same time, this bill also widened opportunities within the educational field and allowed for more teaching positions to be available to young women seeking employment.25

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23 M. Camille Sée, *Lyceé et colleges de jeunes filles, documents, rapports, et discours à la chambre des députes et au Senat.* (Paris: Léopald Cerf,1888). Sée discusses the best curriculum for these young girls extensively throughout his report, but page 149 specifically indicates that a well rounded education not only strengthens the family unit, but the Republic of France as well.

24 Clark, 693.

25 Curtis,107-140.
Sée’s law had its expected detractors in the Catholic Church, The Church’s opposition came from its monopoly on girls’ education through parochial schools and its traditional patriarchal world-view. It saw the Third Republic’s inclusion of public education as a challenge to its authority and a means of reinforcing secularism in France. More intriguingly, Hubertine Auclert, women’s suffrage and right to work activist, was also an outspoken critic. Auclert objected to the fact that the proposed law did not offer women many options for practical professional training, therefore leaving women vulnerable and economically dependent on husbands.

Secular textbooks such as *Le bagage littéraire de la jeune fille*, meaning a bag or wealth of literary knowledge for young girls, reflected prevailing social ideals, such as separate spheres of influence according to gender as well as Republic ideals such as Republican motherhood. *Le bagage* was one of the most popular textbooks printed in France in the nineteenth-century (it was in its eighteenth edition by 1900). Edited by Clarisse de Juranville, it was part of a series that catered to primary school aged girls and offered some lessons that were similar to Catholic textbooks. Despite this, *Le bagage* was a thoroughly secular book that frequently sought to influence French Republican patriotism in young French girls.

The preface in *Le bagage littéraire de la jeune fille* states that the purpose of this particular volume is to help prepare young ladies by inculcating the good taste and cultural refinement that comes with literary knowledge, as well as the ability to discuss the finer points of this knowledge through proper elocution. Several of the selections in this textbook are simply

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27 Wallach, 256.

samples of poetry to facilitate girls in the art of *precieuse*, while other pieces reaffirm standards of gender with short pieces praising the family unit and describing the importance of each family member following his or her proper social role.\(^\text{29}\)

By the nineteenth-century, the art of elocution or *precieuse* had been deemed an innocuous enough skill to include in an elementary text, but the cultural history of this highly stylized and witty form of communication was once considered politically threatening. *Précieuse* began as an elite form of oral speech, often practiced within the salon or at court during the eighteenth-century. It has been argued that this form of speech, associated with women, was stifled during the First Republic.\(^\text{30}\) Thus, if we take into consideration the successful efforts to stifle women’s political and cultural influence in eighteenth-century France through the denouncement of *precieuse* as irrelevant or frivolous, the inclusion of such elocution exercises in nineteenth-century government-approved textbooks indicates that girls curriculum was shaped to fit the limited intellectual needs associated with the role of bourgeois Republican wife and helpmeet.

The elocution exercises in Juranville’s textbook also reinforced the importance of motherhood, as demonstrated by a piece from Charles Daudet, “Nouveau Nés.” The sweetly worded poem describes the loveliness of babies, noting, “A day old infant, O newborns! Little mouths, Little noses...Trembling limbs, so fresh, so white, so pink!” The commentary that accompanies this poem explains that it is, “Poetically well rounded, extremely easy to memorize without too much contemplation. Graceful images abound. Meditations of parental love and a

\(^\text{29}\) *précieuse* can be described as a refined, yet witty style of speech or conversation. The ability to properly use *precieuse* in a social setting indicated not only economic status, but also an abundance of cultural capital.

contemplation of waiting, a sweet gift to this earth: the newborn!”

Taking into account that these lessons are for young primary school-aged girls, it would indeed be strange to expect Greek soliloquies as exercises, but despite this, such selections strongly indicate the importance of motherhood in Republican culture.

Another selection in the book, written by prominent advocate of secularization and colleague of Jules Ferry, Jules Simon, presents a shining example of the goal of female education. In the piece titled “Foyer Domestique,” Simon waxes lyrical about mothers as “the true professors of morals” who set an example for their children in lessons of courage and the even more difficult area of graceful resignation. Simon’s role within the political discourse surrounding secularization was prominent, and “Foyer Domestique,” represents a clear example of Republican belief in shaping future mothers of a strong French population through school work.

The curriculum found within the Juranville textbook reinforces not only the importance of the maternal duties of future French mothers and wives, but the idea that women demonstrate their patriotism by becoming expert mother-teachers to future French citizens. A clear example of this is shown by a brief biography of George Washington’s mother, Mary Ball Washington, included under the textbook’s section dedicated solely to the subject of patriotism. The piece, titled, “The Mother of a Great Leader,” demonstrates clearly the values of Republican motherhood in French secular curriculum. The selection claimed that, “Her firm manner during his [Washington’s] lessons, was softened when he showed great academic progress. A smile and a sweetmeat were immediately bestowed upon him [Washington].” This passage indicates that

31 Juranville, 11-12.
32 Ibid, 51-52.
the secular curriculum for girls venerated women as mothers who could inculcate their children, preferably boys, with Republican political values. This passage could also be seen as a demonstration to French girls that if they molded their behavior to be like Mary Ball Washington, a firm but kind mother-teacher, their little boys would become important defenders of the Republic of France.  

The curriculum and philosophy behind nineteenth-century girls primary school education, both secular and religious, demonstrated a similarity in gendered ideals on the part of both the Republican government and the Catholic Church, despite their supposed opposition. In some cases, Catholic Church leaders may have been able to find commonalities with leading Republicans regarding the content of girls’ education, such as in the promotion of patriarchal families and the role of mothers as principle educators of their children. Both institutions also held common beliefs about motherhood and the education of young girls as a means of benefitting future French children, and through them, the nation. Republican leaders, such as Jules Simon, promoted a view of maternity that has been described as “secular spirituality,” because, much like the Catholic Church, Republicans relied on images of maternal love and morality to promote the notion that women’s most important social contribution was to maintain both familial and social order. Motherhood was about giving love and moral instruction or influence to the entire family, and economically minded Republicans also argued that a well cared-for husband or father would be a better worker.  

33 ibid, 85-90.

The sharpest divergence between the Church and the French government was in the
different justifications each institution held for preparing girls to become future mother-teachers.
The Catholic Church and the secular leaders of the Third Republic also differed on their methods
of administration, including such issues as funding and accreditation practices for schools, but it
was the competing social values within each institution’s curriculum, whether to advocate piety
or patriotism, that prompted the political debate over the role of women in the early years of the
Third Republic.

**Educating Future Mothers of Modern and Healthy French Citizens**

Republican interest in shaping the French female population and its future progeny
through the educational system was based on the imperative of instilling the twin ideas behind
Republican motherhood: gender bourgeois norms as well as a host of republican values of
secularity, modernity and loyalty to the French Republic. Domestic social and political stability
also became equated with a girls curriculum that reinforced both aspects of this patriotic
motherhood ideal. Girls and women who maintained the social role of Republican mother and
subscribed to belief that secularism necessarily equated to rationality were viewed as paragons of
Republican motherhood. It became the imperative of politicians of the Third Republic to ensure
that French girls received an education that not only shaped gender behaviors to conform to
French bourgeois standards, but that this curriculum reflected republican tenets of a modern
society.

The value of modernity in French Republican thought was actually a matter met with
some ambivalence, or more accurately, with anxiety. Modernity was viewed by Republicans as
an important characteristic of a politically and socially progressive society, but, paradoxically, was also viewed as a social hinderance, because industrialization and lax urban morals were blamed for the social ills of France. Leroy-Beaulieu, economist and staunch supporter of Third Republican policies, connected the general social anxiety over women’s social role with increased industrialization in his work *Le travail des femmes au XIXe siècle*.

Among the numerous questions that challenge our industrialized society, none are more important than the work of women. This question touches in effect not only the working class, but the interests of the nation in general. The constitution of the family, the education of the nation’s young, the improvement or degeneration of the race, in other words: The moral, economic, and the physical health of the people are dependent on (how) political parties address (the issue of) women’s employment in this country.” 35

As Leroy-Beaulieu’s words demonstrate, it was a common belief that women’s role in society needed to be carefully considered in accordance with the changing landscape of cities. Throughout his work, Leroy-Beaulieu called for government intervention either through legislation or through changes within the factories themselves, such as a shortened work week aimed specifically at working women with children. He acknowledged that married women, and especially mothers, were not the ideal candidates for factory work, but that the exponential growth of industry dictated that perhaps older girls would be better suited for this type of work. “As sad as it may seem, we need the hands of young women (for factory work)).” 36 Leroy-Beaulieu’s pragmatic and economically-inspired response to industrial growth and modernization stands in contrast to Jules Simon’s treatise on modernity, industry, and women, titled *L’ouvrière*.

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36 ibid.,455.
Simon’s work about the female factory worker addressed the general anxiety about the social role of women in the age of industrialization with a remedy that focused on the moral changes within the working class rather than legislative changes addressed to factory owners. Simon used impassioned speech to demonstrate the sincerity of his worry about the growth of industry and families, “Raising wages will not bring an end to pauperism. This must also be accompanied by a profound moral reform.” Simon further stated that “families have suffered cruelly in the absence of women...the children go hungry.”

Simon, while demonstrating his sincere desire to remedy the social ills caused by industrialization, vilified both Leroy-Beaulieu and the Catholic Church:

It is curious that while the Catholic clergy who pursue the push to transform the fabric manufacturing business with a disinterested charitable attitude, certain economists also push for this, but for opposite reasons, namely, lowering the cost of fabric made by mechanized motors.

Industrialization, whether touted as beneficial for the entire French population or disastrous for the French families, was a political issue that focused once again on the role of women within the system. While Leroy-Beaulieu and Simon seemed to have a vast difference in opinion about adapting French culture to the industrial age, they both framed their arguments around the role of women and how they fit into this new paradigm. They both also addressed the role of women as mothers, with the insinuation that the French population could rise along with mechanization and working mothers (Beaulieu) or that the population would continue to fall because mechanization took mothers away from their children, who would eventually starve and become criminals due to motherly inattention (Simon). Thus, the issue of the French population


38 Simon,60.
and the role of women became a matter of political debate about the impact of modernization and motherhood, which in turn became a prominent theme in girls’ textbooks.

Political concern for the reproductive capabilities of future French mothers also gained cultural currency shortly after the Franco-Prussian war and continued for many decades thereafter. Depopulation, a drop in the nation’s birthrate, was an issue raised due to the defeat in the Franco-Prussian war. This concept spurred policy makers and medical professionals to reinforce the boundaries that defined both women’s participation in the public sphere and their activities in the private realm.39

Addressing domestic population concerns, the medical establishment and educators were in agreement that certain curricula could influence the health of both young girls and their future progeny. Many medical personnel worried that “too much brainwork during adolescence would endanger the reproductive capabilities of the future mothers of France.” 40 Practical lessons, such as lectures and coursework in health and hygiene, could offset the worry of “too much brainwork,” promote the skills necessary to a future mother-teacher, and reinforce the private sphere as the woman’s natural domain. The interest in health, found specifically in girls’ textbooks, was possibly related to Louis Pasteur’s work with germ theory. Pasteur’s work gained political support by the late 1870’s and also contributed to the belief that microbiology and other scientific advancements were modern solutions to the French problem of depopulation. Thus, medical advancements and reproductive capabilities of girls both became viewed as important to national security.


National concerns over the population’s health and the possible effects of industrialization on the family are addressed in *D’economie domestique: tenue du ménage, de la ferme, du jardin et de la basse-cour*, a primary school textbook. This elementary school textbook provided instruction to girls on the necessary skills for a “household manager,” whether in a home or on a farm. According to the book, basic lessons in cooking and sewing, as well as management of the health and hygiene of the whole family were the most important skills for a mother-teacher.

According to *D’economie domestique*, urban French families were sickly and needed to attain a regimen similar to the rural French, who were not only physically fit, but also had many children. The health lessons in the book are presented in the form of a dialogue between a city-dwelling mother named Françoise, and her physician, regarding the health of her family,

Dr: Unfortunately, the air surrounding your home is smoky from the exhaust fumes from streetcars, mixed together in this fermenting slurry is detritus of all sorts and this is what you and your family breathe.

Françoise: I recognize that your observations are correct. Tell me how the hygienic regimen I observe in the children and workers from the country maintain such a state of perfect health?

The regimen presented by the physician included a diet of several types of meat, fruits, vegetables, and cheese because, “It is both nutritious and not expensive.” The physician also noted that cold beverages should be avoided. Exercise and the clean fresh air of the country were also described as healthful. 41 The inclusion of this dialogue in a section about health and hygiene can be viewed as more than kindly medical professional giving commonsense advice to a

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worried city-dwelling mother. Upon closer examination, this section gives both a commentary on gender roles and concerns about the nation’s birthrate. Rural families were known to have large families, therefore they not only lived in the most pristine and healthful environment, but they could contribute to a strong and healthy French population. Based on what is known as the “cult of pastoralism” in the eighteenth and nineteenth century, agricultural workers were often viewed as the epitome of masculinity and health, while city-dwellers were generally viewed as weak and indulgent. 42

An entire section of the textbook was devoted to contrasting the health standards and regimen of agricultural workers with those of urbanites, who were characterized as sickly. The dialogue between the physician and mother is an example of how the worry about the physical effects of unsanitary and trash strewn streets and smoked-filled air on the growth of the French population became a worry about cultural values as well. Such concerns were common among leading Republican officials and other social commentators who blamed the country’s low birth rates on a rise in feminist ideology among French urban women. This supposedly included engaging in non-marital intercourse and using birth control, whether married or not. 43

After the Franco-Prussian war, physicians were known to deride women who participated in the public sphere as being neglectful mothers or for being unpatriotic if they avoided pregnancy. 44 Thus, the health and physical fitness of the family unit, and metaphorically,

42 J.G.A. Pocock, Barbarism and Religion volume four: Barbarians, Savages and Empires (Cambridge: Cambridge University Press, 2005). Pocock studies 18th century moralists and historians who followed stadial theory, the steps that a society must progress through to reach a state of civilization, pastoralism, was the most important indication of human progress. In the nineteenth and twentieth century, pastoralists became synonymous with strength and virility, while the urbanites who did not labor with their hands were considered weak and effeminate.

43 Cole, 639-672.

the nation rested on the shoulders of the mother. For young girls, who were future French Republican mothers, government mandated schoolwork promoted the importance of raising healthy large families and subscribing to the values of modernity and rationality as essential to their patriotic duty as auxiliary citizens. The political culture of the Third Republic expanded upon the already existing gendered constructions of womanhood and the social role of French women, by contributing a philosophy that equated motherhood with patriotism. Republican motherhood, under the Third Republican government, was added to the duties of French women as “auxiliary” citizens and became a guiding principle for domestic policy, such as girls education, industrialization and legislation, and also guided international matters, such as the proposed assimilation of the indigenous population of Algeria.
CHAPTER TWO

French Assimilation and Women’s Healthcare in Colonial Algeria, 1895-1905

I have often asked myself if a female physician could not help, by easing the introduction of our ideas into an environment---that has so stubbornly, so deliberately---turned us away.

Dr. Dorothée Chellier

By the end of the nineteenth-century, the government of the French Third Republic had reinforced already existing gendered constructions of womanhood by promoting French motherhood as an essential tenet of domestic social policy. The philosophy behind Republican motherhood equated gendered ideals of motherhood with patriotism. The ideology of patriotic motherhood became a guiding principle for not only domestic policy, including, as we have seen, girls education. It was also intrinsic to French colonial policy in Algeria. Through the use of a common nineteenth-century European practice known as woman-to-woman medical care, Dr. Dorothée Chellier, a French colonial settler who received her medical training and license from the Faculté de médecin in Paris. Chellier, a female physician acting with the support of the colonial government, provided medical care to indigenous Berber women in Algeria in hopes of assimilating the entire Berber population.¹ Chellier published multiple written accounts about her medical advocacy for indigenous women’s health care and her work clearly demonstrated that Republican motherhood was a factor in her participation in the medical missions.

¹ Chellier’s program focused solely on the Berber groups, known as the Kabyle and Chaouis. These populations were often characterized in the French colonial period as not only different than Arabs, which they were, but more importantly, these groups were often viewed by the French as superior to Arabs for ethnic, socio-geographic, and religious reasons. Patricia Lorcin argues that while nineteenth-century French ethnographers were accurate in their assessment that Berber groups were notably indifferent to their Islamic faith, the French attached these observations with a value judgment that the Berber’s secularity not only made them suitable candidates for assimilation, since their society’s attitude towards religion closely resembled the French, but that Berbers societies were inherently in opposition to the Arab population. Lorcin, 2-3.
Woman-to-woman health care in the nineteenth-century involved professional, medically-trained European women who were dispatched from the continent into European-held colonies -- especially throughout Asia, Africa, and India -- to provide medical care for indigenous women. Such medical missions provided a tidy solution to the question of what to do with women physicians within the metropole. For France, the medical missions led by Dorothée Chellier were also seen as potential solutions to the numerous clashes between indigenous Algerians and the colonial settlers. Chellier’s medical mission, like other European state-sponsored woman-to-woman medical missions, was a product of both domestic and colonial policies and undertaken for economic, political, and gendered reasons. She capitalized on the role of motherhood, within the Kabyle and Chaouis communities, as a way to persuade the entire Berber population to accede to French assimilation.

The French had wrestled with the “indigenous question,” a series of discourses that pondered the fate of the indigenous population within the French settler colony, since they first landed on Algerian shores in 1830. Often imperial powers such as France invested in assimilation programs if it had been determined that the elimination of an indigenous group was unlikely to occur during the invasion and formation of a settler colony. Benjamin Brower argues that the political and military philosophy known as pacification, or peaceful expansion, was a justification for the extended military presence of France in Algeria after 1830. Despite this, the

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2 Benjamin Brower, *A Desert Named Peace: The Violence of France’s Empire in Algerian Sahara, 1844-1902* (New York: Columbia University Press, 2009). Brower discusses other options pondered by the French, regarding the indigenous question that were recommended by a special government council in 1833. The choices for handling the indigenous Algerian population included “*doucet*” to seek the use of the indigenous and later merge them into the European population. This contrasts with the idea of ‘pushback’ a program to banish the indigenous from all the territory that the French occupied and ‘extermination’ through continual war. Though calls for banishment and extermination were raised in government circles and in the media, such as articles in the *Sémaphore de Marseille*, a news outlet that frequently called for such aggressive measures, Brower notes that the French colonial government as a whole did not embrace genocide as a viable policy.
French military often used aggressive measures, such as *razias*, scorched-earth style raids on rebellious indigenous villages, led by French General Bugeaud. These violent measures were justified by Bugeaud as simply part of military action, not long term solutions to the indigenous question. In fact, Bugeaud, believed that the indigenous population needed to be enfolded into the French liberal economic system to make Algeria a successful French colony.  

By 1895, more than sixty years after the French invasion, governor general Cambon was still seeking solutions to the indigenous question. Chellier’s medical proposal of bringing healthcare, and with it, French social norms to the Algerian population as a means towards assimilation, inspired Cambon to financially sponsor her six-week trip through the Aurès mountains.

French government officials in the metropole also encouraged Chellier’s work and asked that she submit her medical and cultural findings to Cambon and also to the Hygienic Superior Council in Paris. Chellier’s proposed woman-to-woman medical plan in Algeria aligned with the political culture of the Third Republic, which included an ideology that equated Republican motherhood with patriotism. This philosophy was carried over into the colonial context in several ways. First, the emigration of female physicians and midwives to French Algeria removed women, who did not personally fulfill the patriotic duty of motherhood, from the metropole. Subsequently, women in the medical field who wanted to demonstrate their devotion to the republic, such as Chellier, found the colonial situation as a means to express their loyalty to the French republic with the promotion of indigenous assimilation through woman-to-woman

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3 Brower, 25. Bugeaud’s belief in the economic assimilation of the Algerian population called for these groups to be blended into the French system in several ways, including involvement in a market-based economy and surplus-directed production as well as participation in the norms associated with private property and individual land tenure.

health care. Chellier’s plan to assimilate the Berbers, through indigenous mothers, mirrored the metropole’s reliance on the power of a mother’s influence on a child’s belief.

The principle behind this theory was, by sending female physicians into isolated areas of Algeria to provide medical care, specifically to the indigenous women, the indigenous women would in turn pass on the values of the munificent French government to their children. An indigenous population that was more sympathetic to the French cause would greatly decrease the number of skirmishes between the various bedouin clans and the colonial settlers in Algeria.

The potential political and cultural motivations for French woman-to-woman medical care in Algeria did not originate with the government of the Third Republic. The Catholic Church also saw the advantages of establishing a metropolitan-based medical presence in Algeria as early as 1835. Though the Catholic Church and the secular French government were rivals in establishing cultural hegemony in both the metropole and the colonies, the early years of military occupation in Algeria proved these institutions shared enough common ground to facilitate the establishment of some medical services for the indigenous population.\(^5\) Both the Church and the secular government felt that Western medical care would ensure a measure of indigenous assimilation to European social norms. The sisters of Saint-Joseph de l’Apparition, led by founder sister Emilie de Vialar, established charitable enterprises, both medical and educational, such as an infirmary and pharmacy, as well as three primary schools, an orphanage, and a refuge for prostitutes.\(^6\)


\(^6\) Curtis, 263.
These Catholic social services were originally founded for the purpose of attracting French settlers to the nascent colony, to provide medical care and educational services, and to help assimilate the mixed European colonial settler population to French norms. Vialar’s services, popular with the European colonials, were soon extended to the indigenous Jewish and Arab populations as well. The warm reception given to Vialar and her work by indigenous populations was due to Vialar’s distinct lack of aggressive Catholic proselytization. Vialar’s discretion in religious dogma was not only a response to the varied religious beliefs of her patients, but was also important to her medical mission as a whole. During the first decades of French rule in Algeria, religious tensions were especially inflammatory, because many indigenous groups rallied behind various rebellious leaders who invoked religious jihad against the French military. By removing the overt religious tones from her social work, Sister Vialar was able to focus on her service to others, such as running an infirmary that, “Quickly attracted up to one hundred patients a day, plus a gaggle of spectators drawn by the unusual sight of women religious binding up the wounds of Algerian men.”

While earlier religious medical missions sought to provide medical care for the entire indigenous population of Algeria, secular advocates of imperial medical care began to focus solely on the medical and social needs of indigenous women. This focus on the indigenous woman’s moral and physical health became intertwined with arguments for the intellectual and professional emancipation of women in the metropole. French feminists, such as Augustine Girault, felt that women physicians were needed in Algeria to fulfill a moral and cultural duty: To provide health care par les femmes, pour les femmes. For Girault, this meant female physicians

7 ibid, 267.
needed to ease the ailments of Arab women who would not seek help from male French physicians due to cultural restrictions. Girault, an activist and writer known under the nom-de-plume Mme. Gaël, produced several pamphlets citing cultural and moral reasons for her support of the medical training of French women.

Girault fiercely advocated that French women with aspirations of earning medical degrees should be trained in the metropole to use these medical skills to help the indigenous women in colonial Algeria. In 1868, Girault published a pamphlet, *La Femme Medecin*, that contained reprints of a series of letters between herself and Jules Duval, a publisher of the journal *l’Economiste français*, concerning the place of female physicians in French society.

Duval’s position on female physicians was rather negative, as he argued that the delicate nature of women would be compromised if they pursued medicine because they had to perform amputations and frequently work with cadavers. Girault responded that many women, such as American Elizabeth Blackwell, and Elisabeth Garett of London, both earned degrees that required rigorous studies in medicine and worked “without offending their delicate nature and did not suffer morally or physically, from this work.”

Girault further pointed out in one of her letters that female physicians would mostly practice in the colonies, rather than the metropole, so male physicians did not need to worry about competition for available positions in hospitals. More importantly, according to Girault, the colonies were in greater need of female European physicians than the metropole,

> Medical care given to women would be a great help for the Arab population; Thanks to the women(physicians) and the benefice of medical science, they will

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9 Gäel,12.
penetrate under the tent and in the Arab harem, where no French doctor has ever been admitted. I fervently believe, Sir, that the inauguration of this progress, so fruitful already, will have great benefits through the nineteenth and twentieth centuries, and all those who work there (Algeria) will be applauded for their great contribution to this civilization.

Girault’s argument for women physicians in the colonies relied on the cultural assumption that it was the duty of Europeans, in Girault’s case female physicians, to uplift the indigenous people of Algeria by saving indigenous Algerian women from a life in the “tent” or “harem.” French feminists such as Girault sought to not only change the gender dynamics between Arab men and women, but also looked to reassert bourgeois conventions of respectability in male colonial settlers who, some feared, were being negatively influenced by the immoral sexual practices of Arab men. This double sense of duty felt by Girault may have emerged from the erotically charged stories and images of Arab women that frequently made it into the metropole and informed the outlook of most Europeans regarding Arab culture and the treatment of women.

One example of this type of literature is the rather lengthy work of Édouard-Adolphe Duchesne. In his work, De la prostitution dans la ville d’alger depuis la conquête, Duchesne describes not only prostitution within the coastal cities of Algeria by European émigrés, but also categorizes and describes in remarkable detail the sexual practices of the indigenous women from the various inhabiting tribes. Such material was often presented to a credulous and prurient metropole audience as a work of science and hygiene.

Along with Duchesne’s dubious ethnographical “field work,” postcards featuring bare breasted Arab women flowed freely throughout colonial Algeria and back into the metropole.

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10 ibid, 24.

Whether written or pictorial, the male colonial gaze impacted the perception of indigenous Algerian women as exotic and erotic, thus contributing to the European objectification of indigenous women by both Arab and European men. From a French feminist perspective, such erotica no doubt influenced Augustine Girault in her desire to save indigenous woman from this plight and her feeling that French women, the moral arbiters of society, would be the most influential in providing health care and moral enlightenment. Thus, the indigenous woman was once again viewed as an object---but one of pity---from French women.

Such efforts to improve morality did not only apply to the indigenous population, but to the colonial settler community as well. As Ann Stoler notes, in colonial settings with an uneven distribution of European men and women, European men often sought temporary arrangements, such as concubinage or prostitution with indigenous women. Such arrangements were often tolerated by metropolitan governments in the early years of colonization because of the temporary nature of these relationships, but the increase in a métis, or mixed race, population blurred the line between “colonizer” and “colonized,” thus producing a potentially destabilizing presence in the colonial and metropolitan social order. A return to a social order in the colonies, including stronger boundaries between indigenous population and Europeans, relied on an emphasis of bourgeois sexual morality within the colonial realm. A passage from Duchesne’s work also hints at a disruption of social order that could occur in Algeria if European men continued to fall prey to the compromised morals of the Arab culture:

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The pronounced taste of Arabs for beastly acts is notorious in Algeria. It seems that the French here are inclined enough to do the same. A mulatresse named Zohra recounted to me that one night, near midnight, a knock at her door woke her up and she got out of bed to let the man (French) into her room, when to her great alarm he was accompanied by a young moorish girl. The (female) visitor explained why she was there and the Frenchmen accompanied this request with two extra 5 franc pieces to erase the scruples of Zohra. It resulted in a monstrous, simultaneous coupling.\textsuperscript{14}

Though Girault’s sincere advocacy for French female physicians in Algeria brought the subject into metropolitan discourse, her pamphlets did little to spur political action in 1868, the year she published \\textit{La femme médecin}. The ascendance of the Third Republic in 1870 brought with it a political culture that held great interest in social order. The government’s quest for social order began with the delineation of women’s role in the metropole, but these gendered concerns also became a part of the Third Republic’s social policy within the French Algerian colony.\textsuperscript{15}

The first major government policy or program involving French female physicians and midwives in the colonial context arose in 1895, when Dorothée Chellier, acting under the auspices of the colonial government in Algeria, was commissioned with providing a report on her medical findings in the Aural Mountain region to both the colonial governor and the Superior Council of Hygiene in Paris. Chellier’s study focused on indigenous women’s gynecological and obstetric health within the Kabyle, Chaouis, and Mozab tribes. Chellier herself noted that her status as both a female physician and a \textit{colon}, or colonial Algerian settler, made her the perfect candidate for this mission, stating that “Being of Algerian origin, and knowing the morals of the country, I asked myself if there was not a possibility of making progress in the field of gynecology as well as promoting the cause for the assimilation of these people which has been

\textsuperscript{14} Duchesne, 46-47.

\textsuperscript{15} Clancy-Smith, 154-156.
Currently impossible."\textsuperscript{16} Thus, Chellier’s words highlight the fact that she commenced her fieldwork knowing that her duties would include far more than simply providing health care, but also to foster assimilation by paying particular attention to the perceived influence of the mother in Algerian society.

Chellier’s program was praised by the print media, especially within the settler community, who covered her mission and openly speculated on whether her medical program could end some of the disputes between settlers and the indigenous population. In fact, Chellier’s work was considered noteworthy enough to be included in medical journals, such as the \textit{Gazette Medicale de l’Algerie}, published in 1895. Chellier’s work was also a sensation in metropolitan medical circles, as evidenced by the 1896 issue of the \textit{Gazette des hopitaux de Toulouse} that included a glowing article about Chellier’s medical missions in Algeria, but it was in the \textit{Gazette Medicale de l’Algerie}, that portrayed Chellier’s work as both a decidedly French effort to provide advanced medical care to the indigenous women who refused medical treatment from previous French physicians and also made clear that it was Chellier’s gender that facilitated her entrance into the rural homes of the indigenous people.

Sometime ago, we announced the departure to the Aurès mountains by Mademoiselle Chellier, a medical doctor from the Faculté de Paris, in charge of a medical inquiry in the Constantine province of Algeria. Everyone knows how the Arabs, who live far from the big cities, refuse entrance to (non relative) males into their homes and how difficult it is for a doctor to penetrate the Arab interior region. The majority of attempts by our doctors to penetrate this region, both civilian and military, have failed. Mademoiselle Chellier, an Algerian (of European extraction), is fluent in the Arabic language and obtained a medical

\textsuperscript{16} Dorothée Chellier, \textit{Voyage dans l’aures: notes un médecin envoyé en mission chez les femmes arabes} (Tizi-Ouzo: J. Chellier, 1895), 6. Chellier’s work is available through scanned images by the Biliothèque nationale de France website, BnF/Gallica. A more legible version of this text, with larger and clearer font, produced by Susanne Shell and Renald Levesque in 2005 is also available online. Though, I have studied both versions of Chellier’s text, the page numbers that I refer to throughout my footnotes correlate to the more legible version of \textit{Voyage dans l’aures}. 
diploma. She was immediately considered by Monsieur Cambon, governor general of Algeria, to use her medical knowledge in this region. 17

The Algerian journal makes clear that there was an imperative for French medicine to be introduced to the bedouin clans, who strictly regulated gendered interactions, particularly in intimate settings such as the home and in close bodily contact, which is a requirement of medical attention, especially in gynecological procedures. Chellier’s knowledge of Arabic would help her to communicate effectively with many of the tribes, though Chellier did note in her work that within the Chaouis tribal lands, she required the assistance of a young female translator.18

As groundbreaking as this woman-led and government-sponsored medical mission seemed, the Toulouse Gazette noted that the British had actually engaged in government-sponsored medical missions decades before Chellier was sent into the hinterlands of Algeria. Though Chellier’s work was more explicitly tied to the spread of both political and social values of the French Republican government, her early mission and later medical plans were indeed inspired by the English female physicians who trained at the London School of Medicine for Women.

The English “lady doctors” trained at the London School of Medicine for Women, traveled to India to provide woman-to-woman medical care in an effort to bring Western ideals of medical and social modernity, and worked in conjunction with the British government to practice medicine in the British colonies. Chellier notes that her proposals to Cambon, including dispensaries and maternity wards for Algerian women, were inspired by the medical programs established by the Countess Dufferin, a British aristocrat, and her organization, the National

17 Gazette Medicale d’Algerie, 1895.
18 Chellier, 18.
Association for Supplying Female Medical Aid to the Women of India. Dufferin’s organization had been working in India for about ten years, and in that time, the N.A.S.F.A.W.I. instituted numerous public medical facilities throughout many of the Indian provinces and major cities, such as Bombay and Madras.¹⁹

Chellier certainly hoped for a result in Algeria that was analogous to that of the British organization, even though she stressed, somewhat disingenuously, “Certainly we would not dream to consider results similar to their expansive enterprise, but we do engage in the same service work and share the cause of humanity and civilization.”²⁰ This shared cause of humanity and civilization that Chellier referred to revolved around the European imperative, felt by both Chellier and the British doctoresses, to rescue colonial women from sex-segregated spaces, whether the chez femmes or the “tent” in Algeria, or the Indian equivalent, the zenana, as both a national and imperial obligation.²¹

Despite the conceptual similarities between the British and French sponsored programs, there are many important differences to consider as well. The starkest and perhaps most striking difference between the British and French, was the implementation of and desired results from their respective woman-to-woman medical programs. Algeria, unlike the British colony of India, was a settler colony, while India was an administrative colony. The immense distance between Britain and India, compared to the relatively short distance between France and Algeria, greatly influenced the mode of colonial rule. The spatial distance between an Imperial nation and its

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²⁰ Chellier-Castelli, 32.

colonial holding dictated not only the degree of metropolitan intervention in the colonial administration, but also the whether a colony was slated for European settlements. Colonial Algeria, viewed as a convenient location for future thriving French colonial settlers, was far enough away to not be considered part of the metropole, but close enough to appear inviting to large groups of French emigrants.

The “Unsettled” Politics of Colonial Settler Algeria and the Metropole

The frequently tense political relationship between the metropole and the settler government greatly impacted Chellier’s health projects. The charged atmosphere between the colonial government and the metropole stemmed from many issues regarding governance, but contrasting beliefs about indigenous assimilation affected Chellier’s medical work the most. Her medical program was formed out of her patriotic desire to contribute to the French imperial goal of assimilating the entire indigenous population to French values and culture by shaping the opinion of indigenous mothers. This contrasted with how the settler community viewed this same issue. The settler community, composed of a variety of European origins, wrestled with forging its collective identity as naturalized French citizens who were regarded by many in the metropole as not quite French. The settlers’ collective anxiety over national identity, created two distinct philosophies regarding assimilation. For some colonial settlers, assimilation and French citizenship were the route to a concrete French identity, but for other colonial settlers, there was more interest in forging a separate cultural identity based on Ancient Roman settlements in North

Africa that would justify their primacy in politics and land ownership over Arabs. The commonality between the separate settler factions was that both believed that the various indigenous groups should not be assimilated. The government within the metropole disagreed with the settler groups in this regard and approved of Chellier’s plan to lay the ground work for indigenous assimilation by appealing to the health and welfare of indigenous mothers.

The political clashes between the national government in the metropole and certain settler groups that dominated the colonial government in Algeria occurred with regularity beginning when the administration of Algeria changed from the French military to the civilian government in 1870. The decision, that same year, to give three provinces within Algeria the status of département, a distinction that recognized them as legally part of mainland France, was at first popular among the colonial settler community. Originally, only French citizens in Algeria were allowed to vote in metropolitan elections, but French citizenship was extended to other Europeans, expatriates from various Western countries, and to the centuries-old Jewish community. The settler community became a mélange of various nationalities, social classes, and religions with growing political power within the local government. Settlers also gained political power by having representatives in the Assemblée Nationale, in Paris and promising these representative’s support to various factions within the national government in exchange for less oversight by the metropolitan government. For the settlers, colonial assimilation was a concept that differed greatly from the metropolitan ideal of a global expansion of French culture and governance. The appointment of Jules Cambon to the colonial governorship of Algeria in 1891

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was prompted by dispatches to Paris outlining the financial and bureaucratic abuses of leading members of the colonial government. Cambon was specifically placed in this position by leading politicians of the Third Republic because he was known as a reformer. It was hoped that he would bring order to a colonial political arena that was spiraling out of control due to Algerian cities filled with corrupt mayors. 25

Changes in social policy were also expected from Cambon’s leadership, along with the political changes. Republican leader Jules Ferry and famed economist and social commentator Paul Leroy-Beaulieu, both prominent in metropolitan politics, joined together to promote the radical Republican philosophy behind indigenous assimilation. Republican philosophy behind colonial assimilation was not predicated on equality, but rather the belief that the indigenous population in Algeria could become “French-like.” Those who held this philosophy wanted the indigenous Algerians to strive towards engaging in the same economic and social frameworks, and to obey the same laws as French citizens. This was by no means an effort towards métisage, or miscegenation, as some from both the metropole and the European settler community worried about, but rather an avenue towards a unified civil society in Algeria based on the French model. 26

Cambon’s philosophical leanings towards republicanism in the Algerian colony is evidenced by a passage from his autobiography, *Le Gouvernement general de l’algerie, 1891-1897*, comparing the work of France in Algeria to the British and their North American colonies,

25 Prochaska, 303.

We would like to apply a quote from (Edmond) Burke, to the work accomplished by France in North Africa, similar to England in America: ‘Our ancestors have turned a savage wilderness into a glorious empire, and have made the most extensive and the only honorable conquest, not by destroying but by promoting the wealth, the number, and the happiness of the human race.27

Despite the culturally tone deaf nature of Cambon’s statement, it is clear that he felt that it was his duty as governor general of Algeria to oversee the spread of French civilization by disseminating French social ideals to the indigenous population. For Cambon, these were attainable goals that could be achieved with a government-sponsored campaign introducing the Third Republic’s social policies, along with medical assistance. Cambon’s attitude is reflected in Chellier’s published work in which she notes that Cambon “explicitly asked for a study of the problems we have linked to the indigenous question.”28

Cambon’s policy of solving the “indigenous question” with the promotion of French social ideals, as part of an honorable conquest in the name of the glorious French empire, can be contrasted with the philosophy of a self-styled academic known as Louis Bertram. Bertram, a prolific writer and ideologue, produced many works in the late nineteenth century that labeled Algeria as the setting for a racial struggle between the “Latin race” and the Arabs. Bertram’s work, which has been described as the blueprint for colonial settler thought, contrasts with Cambon’s commission of Chellier’s medical work with the indigenous tribes.29 Unlike Cambon or Leroy-Beaulieu, Bertram felt that the assimilation of the indigenous population was a losing cause for the colons, or, as Bertram styled the European colonials, the Latino-Mediterranean

28 Chellier, 8.
29 Lorcin, 197.
race. Bertram’s ideology posited that Algeria was the land where Romans were the first vestiges of civilization and that Algeria was a continuation of this ancient Latin tradition. This line of reasoning saw settlers from the various Mediterranean European countries as heirs of the Roman Empire and asserted that settler claims to land were justified because their Latin roots predated Arabic rule. Bertram was not alone in espousing Latinate theories, but his philosophy contributed to the civilization versus barbarism dialectic within settler debates by specifically calling attention to the intractable nature of the Muslim, the enemy of civilization, as evidence that they would never be able to assimilate to the French societal standards.\(^{30}\)

Racial theories and assimilation were not simply the territory of racists such as Bertram. Liberal-minded individuals such as Chellier also indulged in racial theories, but her use of such theories was within the context of the promotion of assimilationist ideas in her medical mission. Throughout Chellier’s work, there are many areas that indicate that she believed that certain tribes, such as the rare and almost mythical Chaouis tribe, would be more inclined to embrace French efforts of assimilation. It can be posited that such theories stem from either the fact that the Chaouis tribe, a nomadic group, were more inclined to assimilation because of their non-Arab origins or for the more superficial reason that many Chaouis were blond and fair-skinned, thus possibly of Latin origin.\(^{31}\) Chellier’s numerous observations of the Chaouis population and villages that she visited indicated that she was highly impressed by this particular Bedouin

\(^{30}\) Lorcin, 196-205.

\(^{31}\) ibid, 155. Lorcin notes that the Chaouis were frequently a source of 19th C. French scholarly curiosity because of their mysterious origins and because many were blond and fair-skinned, leading some scholars to hypothesize that they were descended from the Vandals, thus Germanic rather than Latin in origin. Whether considered Latin or Germanic, such speculation hinged on the common idea that the Chaouis were the most suitable candidates for French assimilation.
society. She clearly demonstrates that she was evaluating these women for future assimilation programs,

It is apparent to me after this trip that I just came from, that these indigenous people, (the Chaouïas) distinguish themselves from other Algerian tribes by their intelligence, greater health and greater practicality and they present a higher degree of character that is often lacking in other indigenous tribes. The chaoui woman is more accessible than the female arab; she does not wear a veil and is not hidden from the sight of men, but like the others, she refuses to accept treatment from a physician who is not of her sex, it does not make a difference whether the practitioner is muslim or christian, she gives her entire trust to the woman.32

Chellier, a colon with metropolitan political sympathies, felt that her primary mission, providing medical care to the indigenous women, was necessary for her secondary mission---to create an atmosphere in the Aurés Mountain region that was open to the philosophy of assimilation under the French Empire. In contrast to the Chaouis women, Chellier describes the Kabyle population as recalcitrant, “One can’t ignore that despite the conquest of Algeria, our efforts for assimilating the Arabs have been nearly barren. Flatteries and rigorous work have not been successful. The Arab household has been resentful to all attempts of civilization.”33 Though Chellier does not use Louis Bertram’s fearful racial philosophy in her observations of the Arab bedouin women, she does share with him the common belief that as a culture, the Arabs were stubborn. Unlike Bertram, Chellier was confident that assimilation could be achieved with the introduction of French social ideals to the entire indigenous population, whether Arab or not.

Aside from the commonality of generalizations concerning the Arab disposition, most colonial settlers did not agree with either the financial or social reforms that governor general Cambon was charged with enforcing in colonial Algeria. The goals of Chellier’s medical mission

33 Chellier, 10.
---medical care to indigenous women in the hopes that they would in turn influence their children’s attitudes towards French rule, as well as provide an analysis of the readiness of certain tribes to become assimilated to French social and economic frameworks—clearly indicates that Chellier used the political ideals of the Third Republic as a framework for her observations and the care that she provided. Cambon’s enthusiastic support of Chellier’s medical mission was clearly an important part of Cambon’s introduction of assimilationist social programs within colonial Algeria.

**Metropolitan Social Ideals and Indigenous Algerian Women**

According to Cambon’s autobiography, by 1892, he had already applied his efforts at instilling Republican ideals in the indigenous males with the construction of elementary and secondary school education for boys and that he was interested in expanding his projects to include hospitals specifically for indigenous women.34 Cambon’s pragmatic approach to the separation of sexes, especially in medical care, was shared by Chellier, who wrote, “I think that it is in our best interest to respect the Arab custom of, for the woman by the woman.” 35 Together, Cambon and Chellier established a health study based on Third Republican ideals that would later develop into a full-fledged medical program solely using woman-to-woman care.

When Chellier embarked on her 1895 mission into the interior regions of Algeria, far from the bustling cities of Bône or Tizi-Ouzo, she immediately noted that these regions lacked not only the obvious medical advancements of the urban settings along the coast of Algeria, but

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34 Cambon, 39.
35 Chellier,14.
also lacked familiarity with certain French social ideals, such as education, bourgeois gender roles and morality. Chellier felt that the collective dearth of knowledge needed to be remedied in order for French assimilation to occur. Chellier connected French assimilationist goals to the social condition of the indigenous woman and her observations indicate her belief that the introduction of republican ideals, especially government-sponsored educational programs for indigenous girls similar to those introduced in France between 1870-1880, would indeed provide a measure of civility to the indigenous women.36 Chellier’s philosophy behind the introduction of education for indigenous girls in Algeria was similar to the reasoning behind the educational programs for girls in the metropole. The primary goal behind republican-sponsored girls’ education in France was to promote patriotic motherhood, a gender role predicated on both the bourgeois norm of separate spheres of influence according to sex and the republican value of imparting loyalty to the Republic to future children. Chellier relied on the assumption that republican educated indigenous girls would similarly impart loyalty to France to their children as well.

Throughout Chellier’s work, it becomes clear that she thought that assimilation would be possible if the indigenous young women received both a secular French education and inhabited a domestic sphere that aligned with French standards of modernity and sexual morality. Chellier no doubt recognized that there were maternal behaviors associated with the indigenous woman’s role within the family home that could be molded into the French social values, “In the homes of civilized people and primitive people alike, the woman is the one who truly allows access to the family.” and noted that she could capitalize on the “confidence of the mothers, who will in turn

36 Chellier, 10.
cooperate in the education of their children and will habitually follow our directions.” 37 Chellier also recognized that much like in European homes, the mother was the manager of the domestic area, and also the guardian of the home in terms of deciding who was allowed into the house. She also seemed pleased that many of the indigenous women, similarly to French or European women, were also viewed as their children’s first and most important teacher. Chellier and Cambon both relied on the notion that indigenous women would be happy with the medical attention by Chellier and in turn positively influence their children’s beliefs towards France and assimilation. 38 Chellier’s initial relief concerning the indigenous women’s basic abilities in the domestic realm quickly turned to barely concealed contempt as she further described a standard community practice known as bou-regoud. As she explained,

Another claimed herself pregnant despite the improbable time period, saying that her baby slept in her breast. I go over the reasoning behind her error with her. [Note 1: It is remarkable that this belief is very widespread in the homes of indigenous women and the number of times that I am obligated to dissuade them of this belief. This belief comes from a Muslim law of not wanting to abandon the baby of a divorced woman, who has become pregnant outside the previous marriage, who then attributes the paternity to her second spouse. It is called le ‘Bou-Regoud’ child who sleeps in the breast of the mother.] 39

Chellier’s words indicated exasperation with the biological ignorance of the indigenous women, and she further stated that both her medical knowledge and equipment would provide the health care and knowledge that the indigenous women lacked because, “Our place here, as part of an

37 ibid, 14.
39 Chellier, 21.
assimilation process, places indigenous women with female physicians who come to cure their suffering and to introduce to them all the benefits of our civilization.”

Since Chellier’s task was heavily steeped in the social values associated with the Third Republic, it is fair to say that her initial report about the women in the Aurès mountain area and her recommendations to the colonial governor, also sympathetic to the metropole’s social ideals and views on assimilation, were heavily supported by technological and financial help from Cambon. Unfortunately, Cambon’s status within the Algerian colonial political arena was tenuous at best due to his pursuit of the Bertagna brothers, who ran a political machine in Bone along with various business ventures. He was, in fact, ousted in 1897.

In her book published in 1906, Chellier recounted the difficulties of receiving government financial and political support to pursue the rest of her medical plans after 1897. She noted that M. Lépine, Cambon’s successor, was not receptive to her plans to establish hospitals for indigenous women, schools to train indigenous women in the art of midwifery, and dispensaries. Chellier wrote a quick dismissal of Lépine and his lack of support, but she did not broach the subject of why her plans did not receive any gubernatorial support in 1888. Chellier neglected to recount the social and political strife that occurred in Algeria during Lépine’s brief one-year tenure. The settler cities of Bone and Oran had experienced sporadic bouts of anti-semitism ever since the Cremieux decree in 1870, which gave the Algerian Jewish community French citizenship. Nevertheless, a massive five-day riot in 1898, days after Emile Zola published his famed article, J’accuse, shook the Jewish community in Algiers. Jewish shops were looted, two

40 ibid, 58.


42 Chellier-Castelli, 11. Chellier-Castelli simply writes that “During this brief period, there was neither the possibility nor the time to keep busy with the medical assistants let alone establish more hospitals.”
people died and hundreds were injured.\textsuperscript{43} Similar outburst occurred throughout the colonial urban centers of Algeria from 1898-1899 and politically, the colonial settlers refused most of Lépine’s directives and resented the continual political interference by the metropole.

Chellier had more luck with the subsequent governor general, Edouard Laferrière, who gave her the funding and political support to scout for possible areas to open dispensaries and a midwifery school for indigenous women.\textsuperscript{44} Laferrière’s support for Chellier’s work was no doubt influenced by the several letters she wrote to him and other French officials with her proposed hospital and maternity school plans outlined in assimilationist terms. She knew that by offering Laferriere a solution to one of Algeria’s biggest areas of social unrest, the indigenous population, he would gladly provide the funding and any logistical support to her. She believed that she could count on colonial support if her work would help ease the skirmishes between settlers and the indigenous.\textsuperscript{45}

Chellier’s proposed medical inquiry and further medical care plans were part of a French cultural tradition of sending women trained in medical care to the indigenous population of Algeria to propagate French values, reflected by the early ministrations of Sister Emilie de Vialar and the Soeurs de Saint-Joseph de l’Apparation. In a wider historical context, Chellier’s work, inspired by the British physicians in India, reflected the collective Western belief that it was the duty of “civilized” societies to uplift the colonists with European modern medical practices and social order. What made Chellier’s work so uniquely French, was that she used a blend of the metropole’s social ideals for the basis of her medical proposals and commentary within her

\textsuperscript{43} Prochaska, \textit{Making Algeria French}, 15.

\textsuperscript{44} Chellier-Castelli, 11-12.

\textsuperscript{45} ibid, 12-14.
published account and that her secondary goal was to facilitate the assimilation of the indigenous population into a French civil society.

Chellier’s government sponsored medical mission and larger medical plans as a physician in Algeria, was the forerunner to other female physicians in French North Africa. Dr. Françoise Legey, who also did extensive medical work in Algeria at the turn of the twentieth century, was recruited by Morocco’s Resident General Lyautey in 1910 to open a clinic and train indigenous midwives in modern medical practices. Chellier may have been a colon by birth, but her medical work relied on the sympathies of staunch Republican politicians in both the metropole and the colonial government. Her work, if viewed in a political context, may have also significantly contributed to the metropolitan government’s belief that the settlers were unable to assimilate the Algerian population without their assistance. In turn, this may have also provided the metropole with an excuse for greater intervention in colonial settler politics.

CHAPTER THREE

Republican Motherhood in the Desert: Dr. Dorothée Chellier’s Medical Mission to Provide Health Care to “l’indigène”

In 1895, Dr. Dorothée Chellier, a colonial settler and French trained physician, launched a six week traveling health initiative into the “far regions in the Aurès Mountains” located in northeastern Algeria and home to various Berber tribes. Chellier’s woman-to-woman medical mission, sponsored by Algerian colonial governor Jules Cambon, offered medical services to the women of these indigenous groups as part of the French government’s colonial mission to “civilize” and pacify a population that had historically rebelled against foreign invaders. Chellier provides a useful case study in how woman-to-woman medical care could be used to further the French policy of indigenous assimilation.

For the French, assimilation of the Berbers was essential because of the propensity of all of the indigenous Algerian groups to rebel against their rule included protracted fighting with the French military during the invasion of Algeria in 1830. In subsequent decades many bedouin groups were characterized as “stubborn” by the French, due to their lack of cooperation with French authorities and unwillingness to conform to French social and economic measures.\footnote{Brower, 18-19. Brower’s work provides insight into the social consequences of the violent atmosphere that pervaded interactions between the French, the colonial settlers, and the multiple indigenous groups in the decades following the 1830 French invasion of Algeria. Brower connects these discordant interactions with the uneven distribution of influence that French institutions and practices had within the various regions of Algeria.} Cambon, with the help of Chellier, looked to find new ways to bring recalcitrant indigenous groups under French rule without the violence that had plagued both the French and the indigenous groups since 1830.
Dr. Chellier published her findings from her medical mission under the title, *Voyage dans l’aures: notes un médecin envoyé en mission chez les femmes arabes*. Her findings, both medical and cultural, were greatly influenced by the metropole’s norms, and especially by Republican motherhood; an ideology that equated motherhood with patriotism. This gendered doctrine was a mainstay in girls education and reinforced the idea that French women’s social and patriotic function was to give birth to strong French citizens and impart to their offspring the importance of allegiance to the republic.

France was not the only European country to believe that it was its duty to “civilize” colonials through woman-to-woman medical care, Chellier’s program and proposals however, were unique because they clearly were influenced by values from the metropole, such as Republican motherhood, in their efforts to achieve Algerian assimilation in a settler colony. French administered woman-to-woman medical care was a practice inspired by the idea that French patriotism and bourgeois standards of womanhood, could be imparted to the indigenous women of Algeria, whose cultural beliefs mandated separate health care by sex. Chellier capitalized on the fact that she was a woman with modern French medical training, and thus in a unique position to spread her medical knowledge as well as to spread Republican ideals that might convince indigenous Algerians to conform to French social, economic, and cultural standards. Chellier’s published work demonstrates that she was aware that the ideology of Republican motherhood in the metropole served as a social cohesive and framework for social order. She sought to use this same ideology to produce similar social goals within the indigenous Algerian populace through her French Republican woman-to-woman medical program.
Nineteenth-Century France and Colonial Algeria

To understand the historical and geographical context that Chellier occupied, it is important to fully understand how imperial and domestic policies, political, military, and economic, influenced the initial conquest and ongoing occupation of a colony. The violent history of Algeria and the ensuing clashes between the indigenous groups were often tempered by relationships between French colonial administration and Muslim religious and village leaders that involved “bet hedging, implicit pacts and prudent retreats.” This artful negotiation with Algerians, known as “saints” or powerful religious and political leaders, meant a multiplicity of responses to French colonizers. These more subtle, and many times diplomatic, encounters between the Algerians and French are just as important as the bloody and violent military clashes in informing the historical account of Algeria and France in the nineteenth and early twentieth-centuries. Chellier’s position as a colonial settler with connections in both the metropole and to the colonial governor Cambon gave her great insight into previous solutions and negotiations between indigenous groups and the French.

Negotiations between the French and colonials hinged upon how each French nineteenth-century regime adjusted its own idea of colonialism in relation to what Algeria could provide for mainland France, whether as an economic trading partner or a chance to spread civilizing liberal Republican values. Historian Jennifer Sessions argues that the emergence and maintenance of

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2 Julia Clancy-Smith, Rebel and Saint: Muslim Notables, Populist Protest, Colonial Encounters: Algeria and Tunisia, 1800-1904 (Berkeley: University of California Press, 1994). Clancy-Smith discusses a lesser-known Algerian rebellion in 1849 and contrasts this skirmish with the more well known resistance lead by Abd al-Qadir in 1830-31. Though this lesser-known rebellion was crushed by the French military, the 1849 uprising actually spurred French forces to militarily penetrate further into the desert, to stop future rebellions. The strategy of colonial expansion into the desert within Algerian then spilled over into the lands of Morocco and Tunisia, adding more territories to France’s African empire, thus this small incidence of rebellion had far-reaching consequences not only for French colonial expansion, but also colored relations between indigenous groups (who followed charismatic religious leaders) and colonial settlers.
French colonial Algeria is inextricably linked to French domestic political legitimization throughout the many nineteenth-century French regimes, beginning with Charles X through the Third Republic. Algeria, therefore came to symbolize either French prowess or modernity (or both depending on political persuasion) for royalists, such as the absolutist Bourbons and meritocratic Orleans, the Bonapartists, and radical republicans of the Third Republic, alike.³ Clearly, Algeria played a role in legitimizing each French administration and also became a landscape where the dominant political elite influenced important policies regarding Algeria. Radical Republicans, politically dominant in the Third Republic, held the view that stringent social regulations on the French citizenry equated to a strong nation that would be able to defend itself against foreign imposition, especially after the humiliation of the Prussian invasion of Paris in 1870. As such, the social agenda of the Radical Republicans was reflected in the efforts to have Algeria become a settler colony because it could provide an agricultural “panacea for the manifold social ills” of the metropole due to industrialization and various political uprisings.⁴

Since the social role of women as auxiliary citizens, based upon their status as mothers of future French boys, was important within the political culture of Third Republic France, this concept would have indeed had an enormous amount of influence over colonial policy towards the treatment of indigenous Algerians and the manner that a settler colony was established and administered. Medical treatment aimed specifically at indigenous women would facilitate the removal of female physicians, who did not conform to the Republican motherhood model and represented competition for male physicians, from the metropole. Likewise, elements from the

⁴ Sessions, 183.
Republican motherhood model, such as the assumption that mothers are excellent conduits for passing on ideals and cultural practice to their children, were applied in the hopes that Algerian mothers would be grateful for French medical care and impart a willingness to assimilate onto their children.

Thus the proposed solution to the fractious atmosphere in Algeria, woman-to-woman healthcare, was both a contemporary solution to the resistance that the French government had struggled with since 1830, as well as a solution that saw the imposition of the Third Republic’s political culture from the metropole onto the indigenous women of Algeria. This solution involved medically-trained French women, such as Chellier, expanding existing indigenous woman-to-woman health care traditions and infusing these traditions with French medical services that were aligned with republican values of modernity and rational thought. Chellier’s mission to provide woman-to-woman health care was part of a larger French tradition of attempting to provide healthcare in the colonies for assimilation purposes, but Chellier felt that her work would succeed where previous missions had failed.

**Republican Motherhood and Indigenous Women’s Gynecological Health Care**

According to her 1895 work, *Voyage dans l’Aures: notes d’un médecin envoyé en mission chez les femmes arabes*, Chellier argued that existing public health programs in Algeria failed to achieve indigenous assimilation because they “always addressed the masculine element when trying to civilize the indigenous population.”[^5] Chellier believed that by addressing the “feminine” element of the indigenous population through French woman-to-woman health care traditions, the indigenous people would assimilate more quickly.

programs, the women would be more inclined to associate her work with the benefice of French rule. Chellier noted that, "The mothers of children pass down their perspective on life. If a girl is stubborn and ignorant from a young age, she will maintain this condition of ignorance...where we currently find it...This is the greatest of errors." Chellier hoped that her medical work would remedy the ignorance of the indigenous women and accordingly, the women, assured of French munificence, would in turn raise their children to embrace and adhere to French governance.

Contemporary medical journals such as the *Gazette medicale d’algerie* praised Chellier’s abilities---medical and linguistic---along with her gender, as the reason she was a natural choice to lead this medical mission. According to another medical journal from the mainland, *Gazette des hopitaux de Toulouse*, there may have also been a legalistic reason that sparked the commencement of Chellier’s medical mission. According to the *Gazette des hopitaux de Toulouse*, a medical law passed five years earlier, in Algeria on November 30, 1892, was being patently ignored by the indigenous population. The article stated that the law would only allow traditional midwives to practice childbirth on their “coreligionnaires” if they had the proper certification and paid their license fee. The article noted that these requirements were often ignored and thus, these practitioners without a license were operating illegally and were often criminally negligent. This particular article also mentions Chellier’s work and clearly indicated that Chellier’s report stimulated renewed government surveillance of the medical licensing program. The Toulouse journal also commended Chellier’s linguistic qualities and noted that her gender qualified her for her medical mission into Algeria.

Last year, imitating the practical English system within the English colonies, in a traveling mission in the south providence of Costantine, an algerienne,

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6 Chellier, 14.
Mademoiselle Chellier, doctor of medicine from the Faculté de Paris, was in charge of studying the obstetric practice in the Aures Mountain region...thanks to her feminine qualities and her perfect knowledge of the arabic language she was able to penetrate the interior indigenous peoples. In her report presented at the end of her mission, Chellier asked for an official order to dispatch French midwives to Algeria, charged with teaching the indigenous *matrones* the modern practice of childbirth and delivery. Monsieur Cambon adopted these recommendations of the report.7

For Chellier, her work had important implications not only for the indigenous women who relied on unlicensed medical personnel known as *matrones* and clan midwives, known as *toubibs*, but was also integral to the French Empire. She described her efforts as “Bringing the indigenous women aid, to lessen the dark and ruinous influence of the *toubibs*, who have both exploited the credulity of their coreligionists, but also work against their assimilation.”8 Chellier’s observations about the conditions that she encountered within the *chez femmes* confirm the negligence and dirty conditions that Cambon’s law tried to prevent. She witnessed one woman’s death due to a hemorrhage after giving birth at the hands of a *matrone*, or female indigenous healer. The *matrone* had been unable to remove pieces of the placenta and simply gave up on saving the patient’s life. This sad occasion provided Chellier with the excellent opportunity to demonstrate to the indigenous women that the patient would have been alive if she had access to France’s modern, hygienic medical practices and standards.9 For Chellier, the potential benefits for the indigenous women included both advanced medical care and social programs, such as education and sanitation, based on French Republican positivist belief that modernity necessarily equated to human progress.

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7 *Gazette des hopitaux de Toulouse*, August 22, 1896.
8 Chellier,11.
9 Chellier,43.
Chellier recorded daily events from her medical mission and published a work that was both a travel memoir and a medical report. The dual nature of Chellier’s *Voyage dans l’aurés* contains a wealth of information pertaining to French attitudes towards the role of women, both French and indigenous, various indigenous cultures and mores, and the role of modernity and health care in the metropole and the colonial context. Moreover, her commentary gives ample evidence that many of the metropolitan’s social and medical attitudes concerning women and motherhood shaped her medical findings and recommendations. Prevailing attitudes about the social role of women in nineteenth-century France are clear throughout *Voyage dans l’aurés*.

French women, according to these norms, were expected to conform to the standards of Republican motherhood, an ideology that equated motherhood with patriotism. The government of the Third Republic built on already existing frameworks for gender roles, especially motherhood, in its conception of separate spheres of influence according to sex. Such social roles formed the basis for an ideology that deemed the patriotic duty of the French woman was to fit the bourgeois ideal of domesticity and motherhood by teaching her children to conform to modern French social and political values.\(^\text{10}\) Chellier relied on this gendered concept of womanhood as the basis for her idea to help colonial governor Cambon assimilate the Berbers to French social, economic, and government systems.

Building upon the main assumption in the republican motherhood model, that a mother’s most important job is the influence that she exerts over the education and values of her children, Chellier also relied on the cultural mores of many of the indigenous tribes that specified that medical care could only be *par les femmes, pour les femmes* as part of her medical program. She

\(^{10}\) Landes, 189.
stated that, “It must be understood that the indigenous population does not ever permit male physicians near the genitals of their women.” The indigenous standards of separate health care according to sex allowed Chellier and her assistants into the homes and separate living areas of women, an area rarely seen by Europeans, and provided a space where the women were away from any influence or interference from their husbands. Chellier and her interpreter, a young woman whose services were engaged because Chellier did not know the Chaouis dialect, found themselves conversing freely with the women. According to her writings, the women, who rarely had contact with Europeans, were pleased to meet with Chellier. Curious to meet a female physician, they “asked many details about [her] mission and medical report.” The atmosphere of conviviality and curiosity among the Chaouis women, as described by Chellier, demonstrated that the villages were receptive to French woman-to-woman health care.

Chellier’s medical program demonstrates her ingenuity, because she found and capitalized on a commonality in republican and indigenous values: women, as mothers, exerted enormous influence over their children’s values and morals. Chellier based her project on a common assumption about the role of motherhood---the belief that all mothers are their children’s first and most influential life instructors and that children naturally follow their mother’s lead in social, moral, and political values. She blended her notion of republican motherhood with the indigenous practice of women only being allowed to receive healthcare from other woman. Chellier’s brand of woman-to-woman health care was a change from previous French medical care programs that were either only staffed with male physicians or led by French nuns. This blending and shaping of Republican and indigenous social values formed

11 Chellier, 59.
12 Chellier, 17.
the basis for Chellier’s health program with the potential to be well-received by the indigenous population while at the same time promoting their acquiescence to French rule. This program formed a relationship between the metropole and Algeria that followed a historical pattern of French and Algerian relations, where the French government was mainly interested in what Algeria could provide for mainland France, either as an economic trading partner or as a chance to spread civilizing liberal republican values.

While Chellier, a female physician, defied the metropolitan standard of Republican motherhood, her medical work in Algeria could be viewed as a form of proxy Republican motherhood. She saw herself as both a physician and an ambassador of the “benefices of [French] civilization”\textsuperscript{13}, and demonstrated that she viewed herself and work with the indigenous population as patriotic. In fact, Chellier was so confident that her skills and bedside manner would be helpful to her mission, that one of the first lines in her book begins with, “As I strike out on my mission, the sick have already eagerly come to solicit my services. I notice that I have their complete confidence [regarding] my treatments and hope that this will ensure a rapid acquirement of this same spirit [for further French social programs].”\textsuperscript{14} Chellier demonstrated a patronizing attitude towards the Algerian women, but she also believed that they were capable of following the tenets of Republican motherhood. As she wrote, “In the homes of civilized people and even more so in the homes of primitive people, [the household] operates in the spirit of the women. The education of children rests on us obtaining the confidence of the mother.”\textsuperscript{15} Her statement reflects her confidence that the universality of motherhood was shared by indigenous

\textsuperscript{13} Chellier, 58.
\textsuperscript{14} ibid, 8.
\textsuperscript{15} ibid, 14.
women in their natural maternal behaviors towards their own children. Chellier felt that if she could foster a sense of trust with indigenous mothers, she could create an atmosphere that would help France attain the goal of indigenous assimilation and eventual submission to French governance. “In a country that has become ours, the population is of course ignorant about the benefits of medical science.”¹⁶ Chellier knew that her medical training and modern equipment would be the key to her fostering an influence with indigenous women, especially if she could observe and assist indigenous midwives within the *chez femmes*, or harems.

Chellier’s travels throughout the *chez femmes* allowed her to observe gynecological and obstetric practices by the *matrones* and she felt that their lack of hygiene and antiquated medical knowledge often led to deadly infections such as puerperal fever, a uterine infection following childbirth caused by incomplete expulsion of the placenta. Chellier believed that the indigenous population, specifically the *matrones* and their obstetric practices, needed to be introduced to Western scientific methods such as sterilization of equipment and modern procedures for birth and delivery, to prevent the unnecessary deaths that stemmed from their use of outdated and unsanitary methods. Chellier, felt that the indigenous healers were hopelessly unaware of how to provide medical services that helped rather than harmed patients, and lamented the various illnesses and deaths that could have been prevented with hygienic practices:

The mortality of the women in this setting is very high because there is almost constant suffering from puerperal infections. How could it be any other way when they do not intervene when a placenta is not fully and spontaneously expelled? Without any effective intervention, it is difficult to help a woman who has not had a complete delivery. Also...[the *matrones*] should never try manual maneuvers, because introducing the hand in order to locate the lost placenta is quite savage.

¹⁶ Chellier, 54.
it not a deplorable sight to see someone succumb because of the ignorance of the assisting matrone? 17

It is not difficult to discern that Chellier found the matrone’s use of a hand to facilitate the removal of the placenta a unacceptable practice. Not only was Chellier concerned with practices that led to uterine infections, but also the fact that these practices often caused unnecessary pain, if not death, for the patient. A description of a post-delivery technique equally baffled and angered Chellier, “As soon as the patient delivered, instead of quickly washing the genitals, the matrone placed her foot in the perinatal area [of the mother] and performed a pulling and pushing motion that did not stop until she heard a cracking sound. [The matrone] explained that she did this to ‘put the pelvic bone back into place because it had shifted during pregnancy and labor’.” 18 Chellier noted that there was a high mortality rate among indigenous women during childbirth, and attributed this alarming condition to a puerperal infection that was “constantly present” in the birthing areas. 19

Many French physicians, Chellier included, were unable to conceptualize the notion that indigenous midwives and healers practiced a “real” brand of medicine, not one simply based on superstition and religious talismans, but based on the medical traditions founded by Islamic scholars who created medical frameworks that allowed them to reconcile their religious beliefs with Aristotelian logic. This perceived dichotomy in medical methods lay in the fact that Chellier’s medical training and practice were influenced by Pasteurian germ theory, which stressed the importance of good hygiene during medical treatment, especially within gynecology

17 Chellier, 54.
18 Chellier, 45.
19 Chellier, 53.
and obstetrics. Chellier’s assessment of the entire nature of the indigenous health system was based on the belief that the rationality and civilized nature of Western medicine naturally opposed the mystical and religious based medicine practiced within the indigenous population of French North Africa.\textsuperscript{20} Classicists such as Aristotle and the famed Galen were the models for European nineteenth-century medical methodology and were associated with rational and logical processes. While medicine practiced in nineteenth-century North Africa was often viewed as uncivilized and irrational in nature, especially the medicine practiced by midwives, who relied on a mixture of religion and culture within their medical practices. What many of the French medical personnel in Algeria and throughout other French colonies within North Africa did not realize was that indigenous midwifery practices were in fact part of a codified and literate medicinal tradition.\textsuperscript{21}

This tradition was based on many of the same Galenic and Aristotelian principles as Western medicine, but also allowed for an infusion of religious meaning and custom as part of a holistic practice.\textsuperscript{22} Simply put, indigenous midwives and healers worked within the same medical framework as the Islamic scholars and physicians who followed the medical traditions that emanated out of the famed House of Wisdom in Baghdad during the height of the Abbasid Caliphate around 950 C.E., but blended these Galenic-based medical systems with traditional Islamic doctrine, from the Quran and the hadiths, a set of religious writings based on proverbs

\textsuperscript{20} Edward Said’s \textit{Orientalism} could be applied to this medical belief, since his work states that many Western traditions defined themselves as the mirror opposite of Far or Near Eastern cultures. This would easily apply to medical traditions as well, especially in the nineteenth-century colonial context.


\textsuperscript{22} Amster, 53.
attributed to Muhammad. In fact, it has been argued that Moroccan midwives, who used similar medical techniques and traditions as Algerian women, were not only mediators between families and systems of healing, but also that this type of medical care was not necessarily in opposition to the neo-Classical medical framework used by Europeans, but rather drew on it and contributed to this medical system by practicing a form of popular medicine, that relied on intimate physiological knowledge of the female body. 23

Chellier herself did not follow the tenets of popular medicine, a practice that blends spiritual and emotional support along with medical care. Though she respected the cultural tradition of separate medical care for women and offered moderate understanding for the cultural beliefs of the indigenous people, she espoused republican values of secularism and modern medical knowledge. Curiously, her method of spreading the message of republican social values and the superiority of French medicine to the indigenous Algerians was startlingly similar to groups that looked to civilize indigenous populations through a religious agenda. 24

I feel that it may be possible to discard all the religious proselytization and respect their faith and bring relief to their illnesses. It is with resolve that the State looks to penetrate, what has been until now, their scientific avoidance and deficiency. We will rescue them from illnesses without a demand for a conversion or exchange in medicine. 25

Chellier’s belief in the superiority of Western, secular medicine over that of the indigenous healers can be attributed to the republican values of modernity that influenced her writings.

23 ibid, 54.
25 Chellier, 55.
Chellier felt that the role of religion within medicine hindered the healing process, and even contributed to the unhygienic conditions that she encountered,

The treatment was insufficient, this is generally the case, when [the treatment is only] a piece of paper with written verses from the Quran suspended near the neck of the woman. This seems to be their best resource and the woman had a hemorrhage that did not stop spontaneously, the woman was taken away. This was a case where the placenta stayed in the uterus, I said to the *matrone*, 'The lingering odor, the stomach of the woman is swollen and she is dead.'

Chellier’s statements reflect a myriad of emotions: she is clearly saddened by the death of the unknown woman, but it also clear that she is horrified by the *matrone’s* reliance on the Quran, as a remedy instead of employing efficient and scientifically proven medical techniques for a common incident in childbirth. Chellier’s observations concerning the tribal midwives may have been quite accurate, but her words and actions also reflected a bias, often found in Western thought, in which Europeans often formed their cultural identities as the mirror opposite of Eastern culture. To Chellier, the *matrone’s* reliance on mystical or religious talismans and these indigenous women’s belief in these traditional treatments, reinforced the belief that Islam and Arabic culture were irrational, thus the antithesis of how French medical personnel identified themselves as embodying the Western traits of modernity and rationality.

Chellier’s negative view of religion within medical treatment mirrored her views about her medical mission in general. She wanted to bring secular healthcare to the Kabyle and Chaouis tribes, this distinction made her mission the antithesis of other medical missionaries, such as other European and American medical workers who provided care in the colonies. Many of the previous Western medical care programs were just as, if not more, interested in the

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26 Chellier, 43.

spiritual health of the indigenous souls as their physical health. She felt that since her Algerian program was purely secular, keeping with the republican tradition of rationality and modernity, her work would be superior to other programs, such as one run by British female physicians who had a similar government sponsored woman-to-woman program in India, who according to Chellier, “The English have already created a hospital for women in India, run by doctoresses, but they blend their humanitarianism with a preoccupation with religious proselytism.” 28

Chellier’s skepticism regarding religious motivations behind care in Algerian hospitals extended to a French order of priests, referred to as Péres Blancs, who had already opened a hospital in one of the cities, Bourdj d’Arris, within the Aurés Mountains two years before Chellier had started on her journey. 29 Her disenchantment with the Péres Blancs came to an apex a few years later, when on her third journey into the Aurés she saw that all the sage femmes that she placed to work within several of their hospitals had been removed, “This was not only terrible for me, but sabotaged the entire enterprise. We clearly saw a change in direction concerning the treatment of patients.”30

Chellier’s disdain towards the inclusion of religion within medical care was matched by her reaction to the frequency and methods of abortion among the indigenous women. Chellier’s attitudes surrounding secular medical care reflected republican values in the metropole and similarly, her views matched the contemporary social values of many republican supporters regarding abortion. This was a matter of great discussion in contemporary France. Many believed

28 Chellier, 60.
29 ibid, 24.
women seeking abortions were one of the biggest reasons for the low French birthrate, an issue that provoked many opinions and anxieties within the metropole. The republican fascination with women’s fertility (or lack thereof) was directly related to dire warnings from demographers, such as Jacques Bertillon, who provided estimates of Western European population rates from several countries and positioned these numbers against France. 31 In short, the low birth rate in France caused significant anxiety about the country’s readiness to defend itself against further foreign invasion, particularly from Germany. Bertillon suggested a simple solution to the matter, noting, “The French family has on average three live births and the German family, a little more than four. Is it impossible for French families to produce a birth or two more? I do not think so.”32 Such solutions were common in the metropole where similar demographic studies and social commentaries also linked an individual woman's decision to even have children with the needs and requirements of the national community, thus reproduction came to be seen as not a choice, but a social and patriotic responsibility.33

Intense interest about the fertility rates of women within the metropole enhanced the already existing interest that the French medical community had in medical advances concerning the obstetric and gynecological health of women. Advancements within the field actually led to new knowledge of how to perform relatively safe abortions. Many physicians, especially those with Republican political and social sympathies, wrestled to use these medical advancements in


32 Bertillon, 12. Bertillon noted that according to his calculations for the year 1890, France’s population was 38.3 million, Austria-Hungary’s 43.2 and the German Empire 49.4. The shortfall of more than 10 million between the French and German Empire population, merely twenty years after the Franco-Prussian war, gave French demographers and the French government good reason to be anxious about the fecundity of French women compared to German women.

such a way that would also protect their reputations as reliable and socially responsible healthcare providers. The loophole that many physicians found as way to balance their professional duty to the patient while attending to their social duty as French citizens was to perform “therapeutic abortions,” or induced miscarriages, in order to save a mother’s life. This compromise was still considered controversial within physician circles, but physicians that did perform such procedures often defended their actions by noting that the mother’s life was usually a higher priority, since these woman, if the induced miscarriage was performed correctly, could still go on to produce more children.34

Given the intense scrutiny surrounding women’s fertility and patriotic duty in the metropole, it is unsurprising that Chellier expressed an interest in the various methods used by the Chaouias to induce abortions. She notes that the most common method used by the women to induce a miscarriage was to deliberately engage in extremely strenuous chores and activities within the village, such as gathering enormous amounts of firewood or carrying larger amounts of water from the village well in a single trip than was usual.35 For medically-induced abortions, assisted by matrones or done by the pregnant woman to herself, Chellier noted that:

They absorb cannon powder or also a substance called zedje, or sub-chloride of mercury, that they buy from Kabyle merchants who procure these items throughout the region. After the absorption of these substances, they become very ill; all the signs of mercury poisoning manifest and the abortion shortly follows. Another method they use here involves the direct agitation of the uterus. This procedure begins with embers thrown together with chili pepper powder. The ember mixture is then put into a funnel with a small opening and the mixture is placed near the entrance of the vagina and placed inside...In the city of Ménaâ,


35 Chellier, 39.
located past Chir, I knew a young girl who died after drinking an infusion of pink laurel after having tried other methods in vain.\textsuperscript{36}

Chellier further provides an assessment of how the body reacts to induced abortion by the methods previously described:

A strongly congested uterus is the consequence of this type of treatment, a hemorrhage enters into the uterus and the ovaries, becoming clotted at the back and then expelled. The cause of death is almost always a consequence of these maneuvers. Still, if she survives all this, the ensuing septic infection would eventually poison her.\textsuperscript{37}

A new type of profession within the metropole, known as the medico-legal expert, may have influenced Chellier’s commentary on the issue of abortion. These experts formed opinions based on a synthesis of medicine and French law. Many of these medico-legal experts wrote texts that focused on the reasoning behind the illegality of abortion. One such expert, Paul Brouardel, in his published work \textit{l’Avortement}, outlines the legality of interfering with the reproductive space, the uterus, and the ensuing criminalization of anyone who used their medical knowledge to disrupt it by poisons or other methods.\textsuperscript{38} Brouardel’s work, much like Chellier’s, included vivid descriptions of medically-induced abortions gone awry, and provided various scenarios that involved young women being tricked into taking poisons such as arsenic or pennyroyal, a plant with poisonous properties, from disreputable purveyors of abortion---usually described as women who were \textit{sage femmes} rather than physicians.\textsuperscript{39}

\textsuperscript{36} ibid, 49.

\textsuperscript{37} ibid, 50.

\textsuperscript{38} Paul Brouardel, \textit{L’avortement}. (Paris:Librairie J.B.-Bailliére et fils, 1901).

\textsuperscript{39} McLaren, 467.
The legal aspect of Brouardel’s work defined appropriate punishments to medical personnel who aided abortions, usually jail time, as well as legal punishments for the woman who sought the abortion. Many legal issues and punishments were weighted against not only the actual procurement and inducement of abortions, but also how many weeks pregnant a woman was when she sought such services. Chellier did not make such distinctions when she pronounced that, “Abortion is frequent in the Chaouïas chez femmes as well as the homes within the l’Oued-Abdi valley, where the morals are dissolute. The women have abortions in the early stages of pregnancy and they say this is not a crime to get rid of a fetus that has not quickened yet.”\(^{40}\) Clearly, Chellier felt that this was indeed a crime. Historian Ruth Miller has argued that medico-legal experts, such as Brouardel, contributed to a systematic belief that the sovereign power of a state (France) was defined by the ability to create, through government programs, an increase in the population. Thus, it would be in the interest of a government, particularly one with a low population rate, to claim the womb of its female citizens as part of its political space. Medical personnel who encroached on this space, therefore, perverted the state’s sovereignty and were subject to legal consequences. \(^{41}\) The belief that promoting population growth and punishing actions that contributed to the decline of the French population, was part of the republican government’s domain, no doubt guided many of Chellier’s medical assessments of abortion within her study, and were not an oddity among other leaders of French colonial medical programs.

\(^{40}\) Chellier, 48.

\(^{41}\) Ruth Miller, “Politicizing Reproduction in Comparative Perspective: Ottoman, Turkish, and French Approaches to Abortion Law” \textit{Hawwa: Journal of Women in the Middle East and the Islamic World} 5 (2007): 73-89. Miller uses the Foucauldian concept of bio-political sovereignty to make the argument that governments seeking to increase their population often make legal cases that place a woman’s uterus as part of their domain, thus actions such as abortion (or euthanasia and suicide) would be considered a crime against the state.
In the French colony of Madagascar, the Governor General Joseph-Simon Gallieni instituted a series of medical and social programs aimed directly at the population growth of the Merina, an indigenous group.\footnote{Margaret Andersen, “Creating French Settlements Overseas: Pronatalism and Colonial Medicine in Madagascar” \textit{French Historical Studies} 33 (2010): 417-444.} Many of the health initiatives made by Gallieni are similar to the ones proposed by Chellier in her report to Algerian Governor General Cambon. Though Gallieni’s government-sponsored population growth programs were also directly aimed at the gynecological and obstetric health of the indigenous colonial women, his policies were based on the belief that an increase in the indigenous population would serve as a workforce for arriving French immigrants, rather than Chellier’s goal of assimilating the population to French values in order to end hostilities in Algeria. The policies that Gallieni introduced in Madagascar were based on the idea of \textit{tâche d’huile}, a method of pacification that he had used as colonial governor in Indochine from 1892-1896. The idea behind \textit{tâche l’huile} was to bring the indigenous population under French control first through military force, followed by social programs such as medical care and education. Once the programs were introduced, the standard of living for the indigenous population was raised enough so that the population would be convinced of the benefits of French rule.\footnote{Margaret Andersen, “A Colonial Fountain of Youth: Imperialism and France’s Crisis with Depopulation, 1870-1940”(PhD.diss, University of Iowa, 2009).} The similarities between Gallieni’s methods and Chellier’s proposals to Cambon are remarkable. Gallieni’s work within the colonies was viewed by some as patriotic and this gained him a measure of popularity in the metropole. Gallieni’s growth programs for the Merina population were created specifically to serve as an important model of how the French government could reverse negative demographic trends in the metropole.\footnote{Andersen, “Creating French Settlements Overseas”, 444.} Chellier, was quite
aware of Gallieni’s programs because in a written proposal outlining the need for a dispensary and a school for indigenous midwives, she mentions that Gallieni used similar programs in Indochine and that he should be commended and emulated because he had “a great and daily sense of service for the civilizing cause.”

Chellier, like Gallieni felt that it was her duty to the French civilizing mission to impart the Republican belief in rationality and modernity to the Algerians. These values guided Chellier in her desire to share Western medical advancements, such as sterilization of instruments and remedies such as quinine, with indigenous women who seemed like-minded. Despite her general disdain for most indigenous healers and their ‘dissolute’ and unhygienic methods, Chellier did meet one matrone, Mekdour Hmama bent el Messaoud Amri, described as “talented and quick witted” and noted with appreciation that she was careful about her “reputation and character as a quasi-doctor.” Chellier did not just passively observe the alarming gynecological methods of the indigenous midwives, in fact, Chellier’s relationship with the matrone led her to demonstrate new techniques that Hmama would then be able to use herself and pass on to others.

I showed her to use a speculum and an injection and explained to her that the injections were filled with boiled water and brought back down to the temperature of 40° to 42°. These were to be used in a hemorrhaging uterus. I said to her that we would find the placenta when it rested in the uterus. I demonstrated our innovations in the case of a lack of a spontaneous expulsion with the fetus. She understood and her excitement was great.

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45 Dorothée Chellier-Castelli, L’assistance médicale féminine: chez les musulmens (Alger: Imprimerie agricole et commerciale, 1906), 42.

46 Chellier, Voyage dans l’aures, 48.

47 ibid, 61.
This type of medical care was based on Pasteurian science and bolstered not only the rate of healing, but was also for the French a source of national pride that had far reaching, universal applications. 48 This national pride also filtered into Chellier’s account with descriptions of the use of the vaccines and other modern medical equipment such as the speculum; both were essential tools in Chellier’s medical bag. At one point, Chellier, impatiently awaiting more medicine and supplies for her adult patients, debuted the “pride of France” amongst the indigenous children, explaining, “I confined myself to vaccinating a dozen infants with the vaccine that I received from the Pasteur Institute of Alger.”49

Chellier’s treatment of men, children and women with diseases also extended to her interpreter whom fell ill with malaria, the bane of earlier colonials throughout the African continent. Due to the seriousness of the disease, Chellier’s curt mention of her interpreter’s illness seems to be at odds with the vivid nature of her descriptions of other medical treatments, “My interpreter fell ill with a fever and pains in her stomach, I believed it was a simple case of malaria. I brought her some quinine: On June 3rd at three in the afternoon, we were back on our route, wanting to make Djemora before nightfall.” Chellier’s brusque description about her interpreter’s illness may have either stemmed from her plentiful access to quinine as a remedy for malaria or, more likely, from the common racial assumption that the indigenous populace were known for their “comparative hardiness in the face of disease” therefore Chellier may have felt there was no need for excessive worry about the fate of her interpreter. Such beliefs about


49 Chellier, 75.
race and disease dominated nineteenth-century colonial medicine, where racial difference was thought to have the most significant impact on a population’s immunity or liability to a disease.\textsuperscript{50}

Chellier also indulges in cultural and racial, rather than medically, based assumptions. The villages throughout the Aurés Mountains were populated by the Kabyle and Chaouis groups. The difference in Chellier’s description between the Kabyle, who were acculturated to Arab mores, and the Chaouis, of mysterious origin are pronounced. Chellier described the Chaouis villages and people in glowing terms and described the warm welcome and various entertainments provided by the people of the city of Ménaâ. “Every night they give us a spectacle of dances, proving that they are very happy that we and our remedies are here.”\textsuperscript{51} Despite the warm reception of the Chaouis women to Chellier’s medical treatments, their “lively dispositions” led to sexual and marital habits that would not have fit within the framework of Republican motherhood or a bourgeois marriage, both of which positioned a woman’s place in society according to her role as devoted mother and wife.\textsuperscript{52}

The morals of the residents of Ménaâ are very dissolute; it is a city of prostitution and the men truly accept this. The chaouis woman, as I have already said, gets married around twelve years old, but she could get divorced later, or marry again, or work as a prostitute if she does not want to marry again. I have seen some women who have been married twelve or thirteen times and are still quite young.\textsuperscript{53}

\textsuperscript{50}Warwick Anderson, “Immunities of Empire: Race, Disease, and the New Tropical Medicine, 1900-1920” \textit{Bulletin of the History of Medicine} 70:(1996) 94-118.

\textsuperscript{51} Chellier, 67.

\textsuperscript{52} Karen Offen, “Depopulation, Nationalism, and Feminism in \textit{fin-de-siècle} France” \textit{American Historical Review} 8: (1984) 648-676.

\textsuperscript{53} Chellier, 68.
Despite the perceived drawbacks of the moral character of the Chaouis women, Chellier felt that the population group as a whole would be more receptive to French Republican ideals than the Arabs, who, Chellier explained, “rejected all our attempts of civilizing initiatives.” The greater concern for the Chaouis women’s sexual habits and frequent marriages probably stemmed from a fear of the spread of venereal disease. For colonial doctors, venereal disease was believed to be the “enemy of modernity” and represented all that was wrong with the colonies. It was a disease associated with passion and backwardness, while the colonial medical mission emphasized reason and modernity. Chellier showed great concern for identifying and curing suspected cases of venereal diseases, especially gonorrhea and syphilis, in her patients, noting that “one can not imagine the ravages of syphilis in this region.”

Chellier used the identification of conditions such as salpingites, currently known as pelvic inflammatory disease, and métrites, or inflammation of the uterine wall, to make a diagnosis of venereal disease. In some villages she saw many cases of inflamed uteruses and pelvises, unsurprising considering the “dissolute” morals of the young women, but contrary to common colonial medical belief, Chellier did not solely blame women or their morals for the spread of these diseases. Surprisingly in the city of Ménaâ, known for its prostitutes, Chellier noted that unlike some of the other cities, inflamed uterine walls were not an issue, but “other inflammations related to their abortion habits” and that the rarity of venereal disease was

54 ibid, 10.
56 Levine, 46.
57 Chellier, 32.
58 Chellier, 51.
probably related to the cleanliness of the men’s genitals, “because they have access to abundant clean water for their daily ablution (Islamic) ritual.”\textsuperscript{59} The high number of patients that Chellier diagnosed as having “congenital” syphilis or gonorrhea, especially on the skin or eye, was most likely due to the presence of \textit{bejel}, a non-sexually transmitted disease with symptoms that closely resembled venereally contracted forms of syphilis. \textit{Bejel} was often found in children and adolescents, so therefore colonial doctors, such as Chellier, often used this diagnosis as a confirmation that the indigenous population as a whole was irrational and emotional, since there was evidence of widespread promiscuousness among the youth.\textsuperscript{60}

Stories of the indigenous propensity towards frequent abortion, widespread promiscuity, and unhygienic childbirth and delivery conditions all confirmed for Chellier that Cambon needed her medical services to bring Republican rationality, cleanliness, and bourgeois family roles to the Chaouis and Kabyle population. Though Chellier depicted the population of the Aurès mountains as unhygienic and morally wanton, she is also careful to note that these groups were eager for her services and seemed to be receptive to further French programs. Chellier viewed herself as the moral arbiter, a familiar metropolitan social role for women, to the wayward indigenous groups that needed her and the French for civilizing guidance. She not only provided medical care to the indigenous, but she initiated Republican motherhood in the desert as a way to persuade indigenous groups, that had historically been resistant and rebellious to previous French efforts, that France was a land of great munificence. Chellier’s work set out to demonstrate to General Cambon that her work would eliminate the vexing \textit{probleme d’ indigène}.

\textsuperscript{59} \textit{ibid}, 52.

\textsuperscript{60} Levine, 52.
Dr. Dorothée Chellier strayed from the accepted gender roles associated with Third Republic France when she pursued a career within the medical field, but she applied certain aspects of these standards through the propagation of Republican motherhood within the *chez femmes*. The ideology of patriotic motherhood reigned in the metropole and served as a guide, for politicians within the Third Republic, to restore social order after the destabilizing events associated with the Franco-Prussian war and the communard uprising. Chellier’s willingness to break with the rigid gender roles imposed on French women, by entering a male dominated professional field, indicates that she was aware of the powerful social delineation that Republican motherhood represented. This insight undoubtably inspired her proposal to the governor general: social order and assimilation in Algeria would be established by the same means as in the metropole, relying on her gender to persuade Algerian women to assimilate and persuade their offspring to follow suit. Chellier excluded herself from the basic parameters of Republican motherhood as the patriotic duty of every French women, but she billed her medical proposals--indigenous women were the route to indigenous assimilation--based upon her allegiance to the republic as woman. She may have believed that Republican motherhood did not apply to her, but she drew upon the patriotic definition of womanhood within French society’s highly organized social hierarchy that revolved around the regulation of women’s private behaviors and made this the foundation for her woman-to-woman medical care program.
CONCLUSION

My work has explored how the social and political ideal of Republican motherhood in late nineteenth-century France was used within domestic and colonial policy. This work has demonstrated that in the metropole, government officials believed that a mother had a powerful influence on her offspring, seeking to harness this influence, Republicans sought to shape the curriculum of school girls, as future mothers, to align with two important aspects of Republican motherhood---that it was a French woman’s patriotic duty to raise children, especially sons, to be loyal citizens and to adhere to the social concept of separate spheres of influence. This ideal did not include the professionalization of women, but my work has shown that there was in fact a small, yet significant shift in this belief with the creation of a state mandated woman-to-woman medical care program in Algeria.

Colonial based woman-to-woman medical programs, viewed within the framework of Republican motherhood, demonstrates that these medical programs relieved the metropole of women who deviated from the social norm of motherhood, by pursuing a profession. The case of Republican based woman-to-woman medical care led by Dr. Dorothee Chellier, shows that she used her position as a woman to provide care to the Algerian women within the chez femmes as an expression of her patriotic duty. Her plan sought to capitalize on indigenous women’s gratitude for the French medical care and she predicted that these women would in turn influence their offspring to assimilate to French social and economic frameworks. Thus, the Republican ideology of motherhood formed an important part of an effort to fortify social delineations in the metropole, through girls education, as well as within colonial Algeria. Chellier relied on these
same assumptions of motherhood to promote the assimilation of a frequently rebellious indigenous population. Chellier, like many Republican politicians, understood that the power associated with a mother’s influence on her offspring could be harnessed as a method to bring both social cohesion and adherence to French policies.

I believe that my work adds to French colonial studies because it seeks to illuminate the French colonial project in Algeria on many different levels. On a micro-level, I have demonstrated that Chellier’s woman-to-woman medical mission operated specifically within the framework of Republican motherhood and how the different manifestations of this womanly ideal, shaped one woman’s medical projects in Algeria. This work also demonstrates that it was possible for women to deviate from social norms within a very delineated society, yet still attain full government support if her divergence from social and gender normative roles facilitated imperial goals. In a larger context, this work ponders the nature and uses of “soft power” such as social or motherly influence to achieve military or political goals over the use of military strength. Chellier’s program was prefaced on this “soft power” rather than military might, and was viewed as an attractive option to Republicans who sought to end hostilities between the colonial settlers and the various indigenous groups. Chellier knew that Republicans had already relied on this type of power in the metropole to solidify their nascent regime as well as fortify French borders against invasion with the promotion of the Republican motherhood.

The main limitation encountered during my research, was that all the documents that I worked with were published materials. With my limited access to unpublished documents, I understood that I would only be able to capture the European point of view regarding the idea and usefulness of Republican motherhood in the metropole and colonial Algeria. With this
limitation in mind, I sought to offset this one-sided view by bringing a healthy dose of skepticism to my analysis of Chellier and Cambon’s texts. I also felt that it was important to include the section in chapter 3 that described traditional gynecological health care in North Africa as a way to highlight the fact that there was already a codified woman-to-woman medical system in Berber culture. Chellier chose to place her medical care in direct opposition to this tradition. In her written work, she may have amplified some of the more religious-based aspects of this type of care to further demonstrate to French government officials that the indigenous women truly needed her Western-based medical program not only due to issues of sanitation and hygiene, but also because these women needed secular not religious-based medical care if they were to properly assimilate themselves and their children to French social norms.

This work spans different continents, ties in policies from both the metropole and the colonial realm. It has also demonstrated the variation between the Republican government in mainland France, the complex political and social situation in colonial Algeria, and elaborated on the gendered and political aspects of Republican motherhood. As a result of the many elements that I have sought to bring to my historical narrative and the paucity of documentation available to me in Northeast Ohio, I believe that there are still many avenues that call out for future investigation regarding Chellier and her woman-to-woman medical program. Additional research in colonial archives could illuminate the biographical details of Chellier, the role of the *sage femmes*---French midwives---within Chellier’s program and the reaction of the Bedouin women to French woman-to-woman medical programs.
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