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**The Regulation of Female Fertility and the Maternal
Body in French Medical and Literary Writing, 1870-1914**

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The University of Kent

Thesis submitted in fulfilment of the requirements of the degree of
Doctor of Philosophy in French at the University of Kent.

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Short Abstract

This thesis examines the regulation of female fertility and the maternal body in medical and literary writing from 1870 to 1914. Drawing upon a wide range of sources, including medical, literary and popular texts, it situates female fecundity and its impact upon the body within the depopulation crisis of late nineteenth-century France, using historicist and Foucauldian approaches to study representations of the female body and interrogate how its regulation can be linked to broader socio-political goals. It argues that, during this period, ideologies of fertility and the maternal body become invested with anxiety over depopulation, neo-Malthusianism, feminism and industrial changes. By focusing on forms of corporeal, spatial, social and medical regulation, it extends recent work on disciplinary knowledge and boundaries by situating fertility within the nineteenth-century focus on orderly and productive bodies. Included in this focus is analysis of ideologies of the leaking and unstable maternal body as I examine fantasies and anxieties of regulation and leakage, alongside new medical technologies and methods of fertility management. Studying medical engagement with female fertility and the maternal body, including the medical discipline of puericulture, the thesis challenges notions of ‘medical progress’ through examination of methods of fertility management and growing anxiety over medical malpractice and corruption. This thesis expands previous scholarship through its broad range of source material, particularly its use of popular sources, including *romans sociaux* and quasi-medical pamphlets and handbooks. Furthermore, its focus on the regulation of fertility extends recent scholarship on gender and maternity by arguing that nineteenth-century representations of leakage and corporeal boundaries can be situated within a much broader contemporary focus on (re)productivity and the distribution, circulation and economy of bodies, liquids and resources. Through this study, I posit that, from 1870-1914, the regulation of female fertility and the maternal body is a marker of medical, social and political upheaval, and becomes a locus for anxieties over the future of France. The thesis recontextualises discourses of female fertility and the maternal body, broadening understandings of how disciplinary power and the socio-political anxieties of late nineteenth- and early twentieth-century France became manifested within representations of the female body.

Long Abstract

This is a study of the regulation of female fertility and the maternal body in medical and literary writing in France during the period of 1870 to 1914. Tracing the birth of the Third Republic and the loss of the Franco-Prussian War to the onset of the First World War, this period was marked by an increasing fixation upon women's ability to reproduce, a topic which became a locus for a multitude of discourses, from political engagement with depopulation and the growing practice of fertility limiting techniques, to the establishment of the medical specialty of puericulture. The onset of *fin de siècle* fears of social degeneration and decadence were accompanied by increasing medical interest in distinguishing between 'orderly' and 'disorderly' female bodies, determining and regulating who could, or should, reproduce. This study of fertility and the maternal body engages with this period of reproductive uncertainty and anxiety, interrogating how a contemporary focus on the organisation and structure of knowledge, society and labour became manifested in representations of the female body. Drawing upon a broad source of literary, medical and popular texts, it will explore how the intersecting and often contradictory imperatives of pronatalist politics, medicine, neo-Malthusianism and feminism shaped ideologies and impacted on representations of female fertility and the maternal body.

Taking a historicist approach by situating texts within their discursive context and drawing upon Michel Foucault's comparative work on sexuality, gender and capillaries of discursive power, I will situate my arguments within a wide range of sources, from medical treatises and canonical novels to *romans populaires* and medical pamphlets and manuals. This source material expands the scope of previous studies on maternity and female sexuality, avoiding the prioritisation of medical or canonical sources over popular texts and acknowledging the value of popular novels and vulgarised medical sources as cultural artefacts, recognising their contribution to the dissemination and construction of 'knowledge' on female fertility and the maternal body.

Within its focus on regulation, the study will place particular emphasis on representations of boundaries and limits, not only physical, but metaphorical and epistemological. Through this approach, I will interrogate how the boundaries of the female body were represented, including a sustained analysis of how ideologies of the 'leaking' body influenced representations of female fertility and justified the female body's regulation and limitation.

Examining these representations through this lens, I will link its regulation to medical and literary fantasies of control over bodily fluids and anxieties over a lack of regulation or excessive ‘leakage’. This approach expands on recent studies on regulation and circulation in the nineteenth century, illustrating how the nineteenth-century frenzy of epistemological and professional classification and regulation can be extended to the maternal body and ideologies of fertility.

I will argue that this particular focus on regulation provides a new understanding of fertility and the maternal body and fresh insight into the construction of ideologies surrounding motherhood and female sexuality. The thesis is structured thematically, as each chapter isolates and examines one or two facets of fertility or features of the maternal body. Chapter One examines representations of contraception or ‘*fraude conjugale*’, interrogating the female role in male- and female-centric practices and techniques of fertility limitation, and arguing that liquid metaphors play a key role in understanding the perceived impact of contraception upon the body, family and society. This analysis of liquid metaphors, is continued in Chapter Two, which introduces representations of abortion and childbirth as contrasting examples of ‘productive’ or ‘unproductive’ bodily leakage. This study also includes an examination of the figure of the female abortionist, interrogating how representations of ‘monstrosity’ can be linked to the pronatalist medical and political rhetoric of that period. Chapter Three explores representations of ovariectomy (female sterilisation) and artificial insemination, acknowledging a growing anxiety towards medical malpractice and the figure of the ‘corrupt’ physician. As a form of fertility regulation, I will situate ovariectomy alongside theories of eugenics and compare ideologies of social class and civic responsibility with notions of industrial and biological (re)productivity.

The following chapters then investigate the regulation of the maternal body, placing particular emphasis on bodily, physical regulation, in addition to the regulation of women’s circulation and movement within public and private spaces. Chapter Four explores representations of pregnancy, linking the parallel tension and dialectic between women’s sexual and maternal roles with their presence in public spaces and the domestic home. This regulation is accompanied by an examination of the fecund stomach, in which I link anxiety over the expanding yet absorptive pregnant belly to women’s increased presence in the public sphere. Finally, Chapter Five interrogates representations of breastfeeding, drawing attention

to the ideologies surrounding the production, circulation and distribution of milk. Examining the regulation of both maternal and mercenary (wet-nurses') milk, reveals the influence of broader hygienic, economic and spatial regulation. This latter form of regulation will also be linked to the dialectic between the breast's maternal and sexual value, when I link the preoccupation with this tension with women's increasingly public presence in urban areas.

Through the analysis of this variety of different sources, the thesis comes to the following conclusions: firstly, that fertility and the maternal body become sites of great contestation and anxiety during the period between the establishment of the Third Republic and the start of the First World War, as political, medical and popular ideologies were increasingly inscribed upon the female body and presented as 'truth'. Second, that representations of fertility and the maternal body can be situated within a much broader contemporary fixation with regulation. Viewing the female body through this lens reframes understandings of how maternity, sexuality and gender roles were shaped by the wider discursive climate. Finally, that these representations of fertility and the maternal body disrupt notions of 'medical progress', revealing resistance to regulation and a growing fear towards the medical corruption and malpractice. From these conclusions, the regulation of female fertility and the maternal body can be viewed as an important mirror of late nineteenth- and early twentieth-century upheaval, anxiety and fear.

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Conventions

The referencing style used is the MHRA Author-Date system. The first mention of a primary text is followed by its original publication date or first appearance in printed form, subsequent references will refer to the edition cited in the bibliography. All primary sources are quoted in their original language. Any alterations to quotations such as spelling or punctuation are given in square brackets. Some French words are italicized, such as *fin de siècle*, *flâneur*, *fraude conjugale*, *détraquée* and *ventre* when they have a specific usage and relevance within this period and cannot be accurately or concisely translated into English.

List of Abbreviations

ABBL	Administration du bureau de bienfaisance de Lille
<i>Fécondité</i>	<i>Les Quatres Évangiles: Fécondité</i>
<i>Le Couteau</i>	<i>Le Couteau, essai dramatique sur les limites du droit chirurgical</i>
<i>Les Femmes eunuques</i>	<i>Les Déséquilibrés de l'amour: Les Femmes eunuques</i>
<i>Le Fruit</i>	<i>La Famille: Le Fruit</i>
<i>La Graine</i>	<i>La Famille: La Graine</i>
<i>La Grappe</i>	<i>Les Trois crises. La Grappe</i>
<i>La Jeune mère</i>	<i>La Jeune mère ou l'éducation du premier âge</i>
<i>Le Mal nécessaire</i>	<i>Les Dangers sociaux: Le Mal nécessaire</i>
<i>Sésame</i>	<i>Sésame, ou la maternité consentie</i>

Introduction.

The Regulation of Female Fertility and the Maternal Body in French Medical and Literary Writing, 1870-1914

The end of the long nineteenth century was a period in which women's ability to reproduce became a locus for a multitude of discourses, from political engagement with depopulation, to the popular dissemination of contraceptive and abortive techniques. In France, the combination of a decreasing birth rate and high infant mortality resulted in the declaration of a depopulation 'crisis' when, in 1890-93 and 1895, French deaths surpassed births (Armengaud 1971: 51).¹ Although France's European neighbours also experienced a drop in birth rates, their populations continued to grow at a healthy rate (Offen 1984: 251). These demographic concerns were mirrored in a medical fixation on distinguishing between 'orderly' and 'disorderly' female bodies, translating into a multitude of recommendations on how fertility and the maternal body should be managed and regulated. Drawing on medical, literary and popular sources, this thesis examines representations of women's fertility and the maternal body during this era, asking why these topics were placed at the forefront of so many discourses and exploring how they were shaped by medical, political and social change. Through this examination, the project reveals how classical and eighteenth-century ideologies of the 'leaking' female body were appropriated and employed during the depopulation crisis in France, drawing attention to how imagery of regulation, circulation and economy operated within these discourses.² Through this analysis, the thesis recognises the importance of female fecundity as a marker of French medical, social and political upheaval at the end of the long nineteenth century and signifies an important

¹ Contemporary texts engaging with this 'crisis' include Bertillon (1911), Brochard (1873a), Cazals (1903), Maurel (1896) and Mayer (1873).

² See Duden (1990) and Kukla (2005) for an examination of these eighteenth-century ideologies.

recontextualisation of literary discourses, revealing the construction and dissemination of ‘knowledge’ about women’s fertility.

A fixation on female fertility and maternity can be seen as one of the defining features of the second half of the century, as Jules Michelet states: ‘[ce] siècle sera nommé celui des maladies de la matrice’ (1859: IV). Indeed, the century was marked by ‘ideologies of maternity and the politicisation of the birth rate as an indicator of national prestige’ (Downing et al. 2007: 10). However, the humiliating defeat by Germany in 1871 placed a new emphasis on France’s military, economic and European future, an emphasis which influenced how women’s bodies and reproductive ability were viewed. With the establishment of the Third Republic and the resurgence of republican values, France witnessed a sustained political, legal and medical focus on reproduction and the family.³ From a legal perspective, the late nineteenth century marked the introduction of the Roussel Law in 1874, which aimed to institutionalise the nursing industry by regulating nurses and registering every child placed with a nurse, in addition to the Ferry Laws (1881-82) which established secular, free and universal primary schools (Norris 2000), the Child Labour Laws of 1874, and the 1889 and 1898 laws protecting children against abuse and reducing the power of the father in favour of State intervention (Heywood 1988).⁴ Meanwhile, in the domain of medicine, the contemporary recognition of medical specialties prompted the creation of puericulture by Dr Alfred Caron in 1865, identified as ‘la science d’élever hygiéniquement et physiologiquement les enfants’ (1866).⁵ Despite its initial focus on post-natal care, puericultural texts extended the discipline’s scope to include gynaecology and pre-natal care. This expansion is in itself pertinent, as it reveals how epistemological boundaries of maternity were broadened and appropriated by medical discourse, implying that the welfare of children legitimised medical intervention even before conception.

³ For an examination of the persistence of the republican tradition in the nineteenth century see Agulhon (2001) and Pilbeam (1995). Cook Anderson also examines the importance of the French empire and its colonies in pronatalist policies (2015). Whilst Germany also went through a resurgence of republican values during this period, when French texts link republican ideologies with reproductive debates they frequently compare France’s depopulation statistics with that of its German neighbor (Brochard 1873b: 3; Canu 1897: 155; Segay 1878: 9).

⁴ For more information about political and legal involvement in the family and reproduction see Accampo et al. (1995), Cole (2000), Donzelot (1979) and Ronsin (1980).

⁵ The term is originally referenced in *Introduction à la puériculture et l’hygiène de la première enfance* (1865) but is most clearly defined in Caron’s 1866 work.

These social, legal and medical changes were consequently taken up by literary authors, who reflected an increasing popular engagement with this focus on female fertility and maternity. Although most notably espoused in Émile Zola's *Fécondité* (1899), an evangelical glorification of pronatalist practices and vehement denunciation of anti-natalist practices such as abortion and contraception, this literary engagement extended well beyond canonical literature, as male and female authors such as Alexandre Boutique, André Couvreur, Armand Dubarry, Émile Goudeau, Justine Mie d'Aghonne and Jane de la Vaudère, reflected a growing popular interest in fertility and maternity, dedicating entire novels to these topics. Similarly, this engagement went beyond simple literary acknowledgement or brief reference to these changes, as works were wholly devoted to the exploration of changing medical and social practices, as evidenced in their titles. Whilst the titles of Couvreur and Goudeau's novels *La Famille: La Graine (La Graine)*, *La Famille: Le Fruit (Le Fruit)* (Couvreur 1903 and 1906) and *La Graine humaine* (Goudeau 1900) indicate a focus on reproductive capability, other novelists focus explicitly on the role of women in these contemporary changes: *Les Malthusiennes* (Boutique 1893), *Une Faiseuse d'anges* (Mie d'Aghonne 1881), *Les Déséquilibrés de l'amour: Les Femmes eunuques (Les Femmes eunuques)* (Dubarry 1898) and *Les Demi-sexes* (La Vaudère 1898). This non-exhaustive list indicates the breath of literary engagement with these topics and introduces the importance of this study.

Drawing upon the increased medical engagement with gynaecology and puericulture, combined with this broad range of literary texts, I will argue that the topics of female fertility and the maternal body become the epicentre of competing socio-political goals and anxieties specific to the latter half of the long nineteenth century. Placed at the intersection between studies of sexuality and maternity, the project unlocks a new area of research focusing on the fertile potentiality of the female body and methods of regulating this fertility.⁶ Furthermore, the focus upon the maternal *body* distinguishes the project from studies of the maternal *experience* (Sohn 1996; Fuchs 1992), by interrogating how representations of the maternal body reveal perceptions, assumptions and ideologies on the female body and sexuality, in

⁶ Notable studies of sexuality in literature of this period include Beizer (1994), Brooks (1993), Matlock (1994) and Hustvedt (2011). Badinter (1980), Fuchs (1992), Cova (1991) and Hennessy (2006) constitute the most relevant historical and literary studies of motherhood in this period, whilst Krakowski (1974), Borie (1974), Bertrand-Jennings (1977) and Gural-Migdal (2003) represent broader studies of female figures, including mothers, in literary representation.

addition to broader gender and social roles.⁷ This approach concentrates on a specific trend in representation; a desire to regulate female fertility and the maternal body, illustrated through male fantasies of control and fears of unregulated or uncontrolled women, whether physically, sexually or socially. This desire for regulation is linked to broader attempts to regulate women in contemporary society and the growing male anxiety towards the emancipatory potential of women's changing gender roles, feminism and neo-Malthusianism.⁸ In doing so, the project constitutes a new area of research, reconceptualising debates over gender, sexuality, maternity and the family by framing them within discourses of regulation and revealing how the fertile potentiality of the female body became a site of intense contestation during this period.

Within the project's focus on regulation, I necessarily place great emphasis on representations of boundaries, limits and peripheries, not only physical, but also metaphorical and epistemological. Similarly, the focus on fertility leads to a sustained emphasis on how the boundaries and limits of the female, and more specifically maternal, body are represented. In particular, I maintain a sustained examination of how the notion of the 'leaking' female body is manifested in discourses of fertility and the maternal body. Making reference to eighteenth-century ideologies, such as theories of fungible fluids, the project places a particular focus on how medically disproved theories of female fertility are nevertheless continually deployed and manipulated, by both medical and literary authors, to justify and sustain modern medical and political imperatives. I argue that reading representations of female fertility and the maternal body through this lens reveals how medical and political anxieties became embedded within ideologies of the female body, altering perceptions of reproduction and maternity during the nineteenth century. Furthermore, this approach expands the existing framework of studies on regulation and circulation in the nineteenth century to include fertility, illustrating how the nineteenth-century frenzy of epistemological and professional classification and regulation was extended to the maternal body and ideologies of fertility.⁹

⁷ For example, Chapter Five's study of breastfeeding does not explore the role of Eros in the act of breastfeeding as there is a lack of representation of this trend in the male-dominated medical and literary source material. This lack of representation has been acknowledged recently by Rose (2018: 86-89).

⁸ Neo-Malthusianism refers to the advocacy of population control to ensure sufficient resources for current and future populations. A key difference between neo-Malthusianism and Malthusianism is that the former advocated the used of contraception as a means of controlling the population, whilst the original movement, based upon the writings of Thomas Malthus, advocated abstinence.

⁹ See Duffy (2005 and 2015), Vigarello (1978) and Law (2010).

For the scope of this project, I consider the period from 1870 to the end of the long nineteenth century (1914). Although several medical and literary texts predate this period, the increased attention to fertility and puericulture prompted by the loss of the Franco-Prussian War is largely responsible for the breadth of available sources. Furthermore, it is after this military defeat that significant concerns over depopulation began to be raised, prompting the reevaluation of maternity and fertility justifying this research. The decision to look beyond the end of the century and include the period predating the First World War acknowledges the wealth of source material engaging with female fertility in the first decades of the twentieth century, particularly in relation to the quantity of *romans populaires* representing abortion and ovariectomy. Equally, the onset of the First World War dramatically altered the nature of discourses surrounding fertility and the maternal body and as such, constitutes a different area of research.

Beginning with an examination of methods of fertility management, Chapters One to Three examine contraception, abortion and ovariectomy, with the latter two topics including comparisons with representations of childbirth and artificial insemination respectively. Maintaining the same methodological approach and focus, the last two chapters then shift to an examination of the maternal body through studies of pregnancy and breastfeeding. Regarding the overall structure of the thesis, the decision to start with methods of fertility limitation does not intend to project any personal or current-day ideology onto the topic, as was criticised in Simone de Beauvoir's decision to open her study of motherhood with a discussion of abortion (1984). Instead, the structure of the thesis is based around the grouping together of three forms of fertility management and the contrasting phenomena of conception and childbirth, followed by two chapters which change the focus to representations of the fertilised maternal body. Indeed, the thesis opens with these chapters, and more specifically that on contraception, because these topics most clearly reveal contemporary interest in and anxiety towards female fertility. Beginning with these chapters allows the methodology to be developed in such a way that I am able to argue for its continuation within representations of the maternal body in the last two chapters. Furthermore, I argue that gaining an understanding of how methods of fertility management impacted representations of the female body permits a more developed understanding of how the maternal body is consequently represented.

Sources and Literature Review

The key motivation for this project, and a key element of its contribution to the field of nineteenth-century studies, is its source material, a large proportion of which is currently unstudied. The recent digitisation of archival material, particularly from the Bibliothèque nationale de France onto Gallica, has facilitated my access to smaller, previously unexamined texts, particularly those such as pamphlets which may have been overlooked before because of their popular readership. Furthermore, OCR conversion of papers and other journalistic documents has facilitated the searching and identification of smaller, yet still important, references to contemporary legal cases, publications and controversies. Considering the subject matter of many of the project's chapters, this ability to contextualise elements of women's fertility and examine their popular reception is key to understanding how ideologies of female fertility and the maternal body were transmitted through a wide range of sources.

This digitalisation of material therefore facilitates my examination of a broad range of sources, extending the scope of previous studies of women's sexuality, gender and maternity and challenging our understanding of how women's fertility and bodies were understood, represented and transmitted throughout a wider disciplinary area. Also included in this range of unexplored sources are visual media, including art, caricature and medical illustration. Within the thesis, for the sake of clarity, I frequently refer to broad classifications of 'literary', 'popular' or 'medical' sources. As will be examined shortly, there are limitations to the use of such terms; principally that they risk oversimplifying the material within these texts and imply rigid, impenetrable disciplinary boundaries. Such oversimplification would of course be contrary to the expressly interdisciplinary and intermedial approach of the project. These terms are therefore used simply to refer to notional understandings of the *primary* genre of texts and their intended readership. For example, even when incorporating medical discourses, texts containing a fictional plot or including the title *roman* are identified as literary.

Literary Sources

The choice of literary texts included in the project extends the canon of previously studied works and challenges notions of literary and historical 'importance' by extending literary

study to ‘middle-brow’ literature, texts adhering to the description given by Peter Cryle, as ‘best defined not by [their] documentary authenticity or by [their] aesthetic qualities, but by [their] place in a milieu of publication’ (2008: 116). This thesis argues that these ‘middle-brow’ texts, comprised of *romans de mœurs*, *romans parisiens* and *romans contemporains*, were equally as important in the production and dissemination of ‘knowledge’ surrounding female fertility and maternity. There has been no comparative study of these popular literary texts, and many have not yet received any academic attention, providing the opportunity to reveal new trends of representation and acknowledge the importance of these popular sources as cultural artefacts.¹⁰

Regarding more canonical authors such as Guy de Maupassant, the included texts, such as *Idylle* (1884) have received very little academic attention. However, I argue that, when viewed through the framework of fertility regulation, these texts are valuable sources to understanding contemporary anxieties surrounding gender roles, female labour and depopulation. Furthermore, the works of Zola also constitute an important source within this project. Hannah Thompson (2007) draws attention to the significant amount of scholarly interest in gender and sexuality in Zola’s work, interest which is fuelled by the author’s inconsistencies in representation (Schor 1987). Many have directed their attention towards representations of sexuality and female hysteria in Zola’s work (Beizer 1994; Brooks 1993; Hustvedt 2011), highlighting the ‘flood of texts’ (Matlock 1994: 7) surrounding the bodies of the hysteric and prostitute (Brooks 2005). Building upon other studies of women in Zola (Bertrand-Jennings 1977; Borie 1974; Gural-Migdal 2003; Krakowski 1974), Susie Hennessy’s more recent study of mothers in the *Les Rougon-Macquart* series (2006) also argues that Zola’s representations of mother figures are often contradictory and cast doubt upon the maternal role. Since ‘Les Rougon-Macquart’ has been the focus of much attention in the studies above, it receives less within my own study.¹¹ When I do draw upon and analyse these texts, it is to identify a gap in this scholarship or to challenge previous understandings of texts within that cycle.¹² Despite the multitude of existing studies on these texts, I go

¹⁰ Le Naour and Valenti’s study of abortion contains references to some popular literary texts (2003). However, the texts are not analysed or viewed comparatively.

¹¹ See Beizer (1994), Bertrand-Jennings (1977), Borie (1974), Brooks (2005), Donaldson-Evans (2000), Gural-Migdal (2003), Hennessy (2006), Krakowski (1974), Thompson (2004) and White (1999).

¹² This can be seen in Chapter Four, where I draw upon *Pot-Bouille* and *Au Bonheur des Dames* to examine representations of pregnancy. As will be established in Chapter Four’s introduction, my use of these texts presents alternate lenses through which to understand representations of the female body.

beyond previous studies on sexuality or motherhood by examining the intersection of the two domains within the topic of fertility. Indeed, although both maternity and female sexuality have both been studied, I draw together elements from both topics, revealing the importance of women's ability to reproduce during this period of time and introducing and comparing a multitude of new sources to this much-studied *œuvre* of texts.

Moving beyond Freudian, psychoanalytical readings of the maternal figure (Borie 1974), and shifting away from the focus on the social and cultural implications of the Rougon-Macquart family tree (Hennessy 2006), I examine representations of female fertility and the maternal body alongside contemporary *medical* discourses, whilst viewing these representations within a wider framework of regulation, circulation and economy. Furthermore, in my examination of Zola's *Fécondité*, I build upon and extend David Baguley's seminal study of the text (1973) and more recent studies (Malinas 1986; Mayer-Robin 2007 and 2006; Seillan 2001) by acknowledging, yet looking beyond, the medical sources present in Zola's *dossiers préparatoires*, identifying links with the wider discursive network. Furthermore, whilst previous studies of gender in Zola's work have omitted *Fécondité* due to its altered style and representation of motherhood (Hennessy 2006), this project posits that the novel can be situated within a broader literary trend. Examination of this trend reveals links between *Fécondité* and other novels by Caruchet (1900), Couvreur (1903 and 1906) and Goudeau (1900) which demonstrate a similar preoccupation with female fertility, situated within family dramas and contextualised in contemporary natalist debates.

Therefore, in addition to its use of popular sources, I draw upon canonical texts such as *Fécondité* to acknowledge their value in contributing to the wider representations of female fertility and the maternal body, while at the same time addressing gaps in previous scholarship and reframing these texts through my focus on regulation and circulation. The importance of this framework determines the structure of the thesis, which focuses on thematic trends of representation instead of specifying the contents of a particular text. Within each chapter, several sections are devoted to extended literary analysis, often of an individual text, to ensure that the same analytical rigour is applied within a thematic approach. However, within this literary analysis, I continue to draw links between sources, illustrating how one particular literary example is representative of, or a challenge to, a broader trend.

Medical Sources

Alongside these literary texts, a large body of the project's source material is of a 'medical' genre. The role of medicine is paramount to the investigation of fertility and maternity in any period, but particularly in post-1870 France, in which 'the tendency to view [the nation] as fundamentally disease-ridden prompted the new Republic to look to physicians to solve those socio-medical afflictions believed to be at the root of military, economic and moral weakness' (La Berge and Feingold 1994: 1).¹³ It is important to distinguish what is meant by 'medical', particularly when referring to broader terms such as 'medical discourse' or 'medical text'. In addition to referencing 'knowledge' or sources relating to the science or practice of medicine, my use of the term also encompasses pharmaceutical and paramedical discourses, or those which originate from health professionals.¹⁴ However, female practitioners, notably midwives, have been excluded from this generalisation and their representation is identified separately. This is not to say that they did not influence or form part of medical discourse, but that their controversial role within the project's study of abortion, contraception and breastfeeding is reflected in separate trends in representation worthy of identification and acknowledgement.

In the project's use of medical texts, there is the further important distinction of target readership. Whilst many of the medical sources used in this thesis were written by physicians for the intended readership of the medical community, one particular focus of this thesis is the direct dissemination of medical ideas and rhetoric from physicians to women.¹⁵ Andrew Mangham and Greta Depledge highlight the importance of these popular sources, since 'people of any given period are more liable to encounter science and literature in forms that are most accessible to them and are likely, therefore, to make judgements about the value and weight of scientific knowledge based on these discourses' (2012: 8). Indeed, the end of the nineteenth century marked a pivotal time for the publication of popularised medical

¹³ See La Berge and Feingold for an overview of the medicalisation of France and, in particular, Paris, during the nineteenth century (1994).

¹⁴ Throughout the thesis, the use of 'knowledge' is employed to indicate the use of the word in a Foucauldian sense; a subjective notion that is shaped and constructed by disciplinary power.

¹⁵ Ramsey traces the popularisation of medicine in France from 1650-1900 (1992).

discourses, in the form of self-help manuals or pamphlets.¹⁶ Rising literacy and new, cheaper printing techniques contributed to this increase, broadening both the audience and scope of these publications (Ramsey 1992: 113-14). This trend can be situated within the period's focus on disciplinary knowledge, as authors such as Mme Millet-Robinet produced a wide range of popular pamphlets on topics from housekeeping and fruit preservation to breastfeeding and puericultural care (Robertson 1974: 409).

From a more specialised medical background, one particularly prolific author in this respect was Dr André-Théodore Brochard. Representative of the many physicians-turned-politicians of the post-war period, Brochard linked together medicine and national values (La Berge and Feingold 1994: 1), drawing upon his experience with wet-nurses and as a crèche inspector to argue for increased regulation of the wet-nursing industry and promote the pronatalist cause. In addition to his political and public speeches and reports on infant mortality, Brochard also published multiple puericultural handbooks and guides for mothers, including a monthly journal from 1873-1905 entitled *La Jeune mère ou l'éducation du premier âge (La Jeune mère)*. These handbooks and journals reveal the transmission of medical, puericultural ideals from the medical domain to the domestic and the gradual normalisation of maternal ideologies. This normalisation is exemplified within his 1881 publication, *L'Éducation de la poupée*, which is a puericultural handbook for children. It instructs little girls on how to be 'good' mothers to their dolls; for example, 'la poupée ne doit jamais coucher avec sa maman' (1881: n.p) and 'une poupée sale est une honte pour sa petite maman' (1881: n.p). This advice extends to vaccinations, teething and weaning, demonstrating Brochard's attempts to teach elements of hygiene from childhood and incorporate puericulture into children's games. Examples linking a lack of hygiene with 'bad' mothering illustrate how young girls were introduced to the civic duty of mothering at an early age. In addition to accessing women of all ages, Brochard was also concerned with reaching all social classes, as 'c'est surtout dans les classes populaires qu'il faut faire pénétrer de saines notions sur cette hygiène' (Brochard 1877: 2), a need which is reflected in his creation of *L'Art d'élever des enfants* (1877), a pamphlet summarising his recommendations and notions of hygiene and puericulture, aimed at the working classes.

¹⁶ This trend is not exclusive to France at this time, and has been identified in English and American studies of contraception, abortion and medicine (Brodie 1994; Rosenberg 2003).

Although the breadth of Brochard's writing is impressive, including the publication of eight texts on maternity and breastfeeding, in addition to hundreds of editions of *La Jeune mère*, this *œuvre* is deceptive because Brochard often recycles the same information, frequently transcribing entire chapters from one text into another, and many articles found in *La Jeune mère* are copied verbatim from his larger works. However, despite this repetition, Brochard's dedication to the topic of puericulture and female fertility is representative of a broader trend at that time and, as evidenced by the wide range of medical handbooks used within this project, these texts form an important body of sources in our understanding of gender, sexuality and culture during this period.

'Medical' and 'Literary'

As stated previously, the identification of 'medical' and 'literary' discourses or texts is inherently problematic within a project motivated by inter-disciplinary, intertextual and intermedial goals. Examining how medical discourses were incorporated into literary texts not only prioritises medical 'knowledge' or presents it as 'truth', but also ignores the concept that 'scientific theories, no less than literary theories and literature, are social constructs that reflect the prevailing concerns of the culture' (Otis 1994: 216). To destabilise this hegemonic relationship between 'medical' and 'literary' texts, the project consistently emphasises the dynamic and reciprocal influence between all forms of text, including literary and medical. In its analysis of female fertility and the maternal body, it seeks out and illustrates how ideological, literary or extra-medical traditional practices influenced or altered medical representations and texts. For this approach, *fin de siècle* France is a particularly key period, as medicine took advantage of new printing techniques to promote itself to the public. Newspapers 'featured columns authored by physicians, alongside serialised fictions by well-known writers. It was inevitable that a certain cross-fertilization would occur' (Donaldson-Evans 2000: 10). Therefore, although the thesis contains extended examination of literary texts, it does not prioritise these over other sources in terms of quality or value. Indeed, all sources used are treated equally as cultural artefacts situated within what Larry Duffy calls 'a constellation of discursive coordinates' (2015: 14).

As cultural artefacts, I also acknowledge the importance of literature in both the representation and shaping of cultural ideologies. As highlighted by Jann Matlock, novels were viewed as ‘potentially more disruptive than “scientific” and “factual” texts’ (1994: 15).¹⁷ Within novels, the margins of literature and medicine became increasingly blurred as authors such as André Couvreur, a physician himself, penned explicit and grisly scenes of surgery, containing detailed references to organs, tools and medical methods. With the exception of portrayals of military surgery, such as those found in *La Débâcle* (1892), authors such as Zola had previously chosen to brush over scenes of surgery and medical intervention with minimal references to blood and surgical instruments. However, the popularisation of hygiene and popular medicine encouraged more sensationalist authors such as Couvreur to maximise the theatricality and literality of modern surgery and medicine. In addition to this, many texts make explicit references to factual surgeons, theories and criminal trials, supporting their claims of representing contemporary issues.¹⁸ My use of these popular and quasi-medical, quasi-literary sources focuses on the notion that medical sexual writing during this period ‘fell somewhere between the official and the unofficial, between high- and lowbrow, between upper and lower middle class’ (Moore and Cryle 2010: 247). My choice of sources, both ‘medical’ and ‘literary’, aims to reinforce and illuminate this complex web of influence and, in doing so, concretises my arguments about the regulation of female fertility and the maternal body within a wide range of evidence.

Medico-Literary Plagiarism and the *Roman Populaire*

A perfect example of this reciprocal influence can be found in the works of Jean Fauconney and Jean-Louis Dubut de Laforest. In 1908, Fauconney published *Ovariologistes et faiseuses d’anges: la chasse aux ovaires, l’ovariotomie sans nécessité, la débauche défavorisée, les avorteuses* under the pseudonym Dr Jaf.¹⁹ Despite its medical title, the text is multi-genre,

¹⁷ This notion is particularly evident in Ernest Alfred Vizetelly’s English translation of Zola’s *Fécondité*, which was heavily edited to avoid accusations of indecency. This edit emphasises the novel’s potential for disruption and scandal, as Vizetelly’s father was imprisoned for his publication of Zola’s works in English (Viti 1996).

¹⁸ For example, in *Le Mal Nécessaire*, within the fictional plot, Couvreur references Charcot, the Hungarian physicist Gruby and Anton Mesmer (1899: 149).

¹⁹ As noted by Cryle, Fauconney published under several pseudonyms including Dr Caufeynon and Dr Jaff (2008: 117). It is also pertinent to note, as have Moore and Cryle, that although those who did not have a doctorate in medicine could not practice under the title *docteur*, there were no laws against publishing under this title (2010: 248).

containing a novel, the main plot of which traces the unsavoury practices of the steriliser Dr Jovis, followed by a shorter moralistic tract entitled ‘Fécondation artificielle’, and finishing with a brief medical exploration of insemination, with references to medical tracts, entitled ‘Resultats pratiques’. The blending of popular novel with popularised medicine is typical of this period, in which authors aimed to build on the controversy of the topic, whilst avoiding accusations of indecency through the justification of medical and instructive content. However, Fauconney’s text provides a fascinating case study, as the literary part of his text is plagiarised. An almost entirely identical version of the novel appeared around 1898, the seventh tome of ‘Les derniers scandales de Paris: grand roman dramatique inédit’, entitled *Le Docteur Mort-aux-Gosses* by Jean-Louis Dubut de Laforest.²⁰

In his study of Fauconney, Cryle has already commented on the habitual plagiarism of pseudo-physicians, linking this plagiarism to the ‘looseness, [and] the uneven, shifting relation between medical and literary writing’ (2008: 116). However, Cryle comments on plagiarised paragraphs and sections of texts on sexual pathology and frigidity which circulated throughout the texts of several authors. This particular text of Fauconney’s displays a much larger and almost completely plagiarised text.²¹ Indeed, examining the changes made to the text indicates the reciprocal influence between literary and medical texts, immediately noticeable through the change in title, as Dubut de Laforest’s sensational reference to ‘Mort-aux-Gosses’ is transformed by Fauconney to a medicalised title which somewhat conceals the literary plot within, presenting the text as a medical treatise or pamphlet.

Summarising the changes made within the novel itself, Fauconney’s text reveals attempts to medicalise and de-sexualise Dubut de Laforest’s plot. Explicitly villainised names such as ‘Le Docteur Mort-aux-Gosses’, the title given to the protagonist Hylas Gédéon, and his assistant ‘Le Microbe’, which are juxtaposed against the heroic and pronatalist ‘Docteur

²⁰ The exact publication date of the novel is unclear, the BnF catalogue dates the text from 1885 whilst Cahen references the publication date as 1900 (2016: 51). However, the *Dictionnaire thématique du roman de mœurs en France, 1814-1914: J-Z*, states the date as 1898 (Hamon and Viboud 2008: 107 and 403). Aligning this date with a reference to the novel’s upcoming publication in the 1897 *Les Romans inédits* (1897: 890), the 1898 date seems most likely and will be referenced in this thesis.

²¹ I have found no references to this plagiarism in contemporary sources. It is pertinent to note that Fauconney’s novel was published six years after Dubut de LaForest committed suicide in 1902. Considering that Dubut de Laforest was a well-known and established author, there is therefore no possibility that the two authors are the same person.

Leblanc', are replaced with subtler titles, downplaying caricatured representations of the abortionist and steriliser. Furthermore, the original novel contains several subplots which are removed in Fauconney's text; in the former, a significant portion of one chapter presents the voyeuristic and sexual exploitation of an English woman, 'Miss Buggy'. Taking advantage of her short-sightedness, Monsieur Romanet dresses up as Miss Buggy's maid in order to administer her daily massage. The lewd comedy is unrelated to the main plot and is in fact a variation of a short story previously published by Dubut de Laforest in *Contes pour les hommes* (1892). The scene, seemingly deemed too coarse to make Fauconney's cut, has been removed in its entirety, indicating attempts to de-sexualise the text and place more focus on the medical content. Indeed, these changes made to the plagiarised novel indicate a sustained effort to medicalise the literary plot and reduce its sexual content. As evidenced by the change in title, Fauconney continues his broader literary trend of drawing upon medical discourses to justify controversial and salacious topics. The irony of these changes is, of course, that the advertisements following Fauconney's novel reflect the exact content which he removed, promoting pornographic texts and detailing how and where to purchase contraceptives such as condoms.

Despite these seemingly contradictory changes, this particular example of literary plagiarism illustrates how literary texts were copied and manipulated to serve the particular anxieties of the day. As will be examined in the chapter on ovariectomy, the turn of the century marked a particular increase in fears of sterilisation which would not have surrounded Dubut de Laforest's original novel. Furthermore, in line with broader links between pornographic texts concealed within medical discourse, Fauconney's pseudo-medicalisation of the plot reveals how medical discourses, particularly relating to issues of women's fertility, were disseminated broadly through society through the use of popular novels concealed beneath medicalised titles. In doing so, this example of plagiarism indicates just a section of the complicated and reciprocal networks of influence and exchange between the literary and medical domains towards the end of the nineteenth century.

Forms of Regulation

A key aspect of this project's originality is the particular emphasis on regulation, as discussed previously. Within this broader trend, I examine female fertility and the maternal body alongside literal and metaphorical imagery of circulation, distribution and economy. The multiple meanings of this latter term are particularly pertinent, as economy can refer to both a system of trade or industry, and the act of saving or conserving.²² Throughout the thesis, close readings of texts draw attention to how these notions underpin representations of female fertility and the maternal body, arguing that this perspective allows gender and reproductive debates to be situated alongside and within a wider scientific, technological and medical focus on boundaries and limits.

As demonstrated by a recent focus on disciplinary knowledge (Duffy 2015), the nineteenth century was marked by increasing attention to the organisation of knowledge, evidenced by the growing power and importance placed upon disciplinary knowledge, as famously represented in Gustave Flaubert's *Bouvard et Pécuchet* (1881). Within this broader reshaping of disciplines, the contemporary creation of puericulture, in addition to specialist wards and charities for pregnant women and mothers attests to the delineation of a specific gynaecological and medical focus on women's fertility. However, within this delineation, as well as other boundaries laid out within women's fertility and maternity, is the central paradox of what Duffy calls 'the nineteenth-century *découpage des savoirs*' (2015: 10); whilst physicians attempted to regulate and separate discourses of female fertility and maternity, they themselves expanded over and into multiple disciplinary areas. As the thesis will explore, representations of female fertility and the maternal body illustrate medical appropriation of, and establishment within, discourses of domesticity, fashion, literature and pedagogy. Indeed, the breadth of sources used within the project, from pamphlets to popular illustration, attests to how medical theories on these topics were integrated into a broad disciplinary area.

Within this focus on organising and shaping disciplinary knowledge was a particular emphasis on the female body, which became a surface on which the concerns and anxieties of society were played out (Brooks 1993), as explored by Georges Vigarello (1978), who

²² Poovey traces the historically changing meanings of economy (1995: 5-7).

traces the contemporary desire to straighten or rectify the body. Thomas Laqueur has noted that anthropologists such as Jacques-Louis Moreau attempted to ‘derive culture from the body, everywhere and in all things, moral and physical, not just in one set of organs’ (1990: 149) and Henri Mitterand also draws attention to the importance of the body in the second half of the nineteenth century (1984: 342).²³ Physical appearance and the clear, visible distinction between genders played an important role in representing sexual difference (Laqueur 1990). As highlighted by Tamar Garb: ‘If boundaries were transgressed, chaos could ensue’ (1998: 11), linking notions of transgressive femininity with the *fin de siècle* crisis of masculinity.²⁴ My study of female fertility and the maternal body therefore draws upon broader studies of sexuality (Laqueur 1990; Gallagher and Laqueur 1987), in addition to linking to contemporary ways of thinking about how individual bodies related to the social body or the body politic, as medical and sanitarian movements provided ‘a model for thinking about the individual body as a social resource, a model that was infinitely more manipulable for ideological purposes’ (Law 2010: 10).

The Regulation of Liquids and the ‘Leaking’ Female Body

However, in addition to interrogating the female body’s external boundaries, I look beyond what Vigarello identifies as ‘le corps redressé’ (1978), extending my study beyond the physical boundaries of the body to include its emissions. Reflecting a recent academic focus on the representation of internal bodily processes and illness (Mathias and Moore 2018; Wilson 2020), I examine how the regulation of fertility and the maternal body was manifested within treatment and management of the body’s emissions or products, consisting of numerous forms of production: physical (miscarriage, semen, blood etc.), reproductive, industrial or economic. This notion of productivity or re-productivity has been acknowledged by Mark Seltzer, who comments on the presence of ‘an insistent anxiety about production and generation – generation of lives, powers and representations – that marks [naturalist fiction]’ (1992: 25). Mary Poovey also recognises this trend in relation to contemporary chloroform debates, commenting that ‘representing woman as an inherently unstable female

²³ Studies which acknowledge the role of bodies within French fiction include Beizer (1994), Brooks (1993), Thompson (2013) and Matlock (1994). Following the routes taken by Beizer and Thompson, in this study I avoid Freudian readings of these bodies and instead draw upon a Foucauldian approach.

²⁴ On the topic of the ‘crisis’ of masculinity, see Forth (2004), McLaren (1997), Nye (1993) and Surkis (2006).

body authorises ceaseless medical monitoring and control. But on the other hand, this representation of woman as always requiring control *produces* her as always already exceeding the control that medicine can exercise' (1987: 147). I build upon this argument through analysis of literary fantasies of fertility regulation and fears of excess and destabilisation.

From the viewpoint of biological products or emissions, attention has previously been drawn to the representational instability and leakage of the female body, particularly in relation to its fecund potentiality. Although traceable back to antiquity (Valenze 2011; Warner 1985: 254), medical representations of the leaking female body, examined by Barbara Duden (1991), Rebecca Kukla (2005) and Margaret Shildrick (2002), have also been linked to nineteenth-century literary portrayals of the hysteric (Beizer 1993: 190-91). Building upon these approaches, I situate my analysis of female fertility and the maternal body alongside this ideology of the leaking female body, which is so frequently associated with permeable, unstable boundaries. However, in Chapter One, I will also challenge Kukla's assertion that the 'leaking' female body is seen as 'a troubling counterpoint to the mythical, well-bounded, fully unified, seamless masculine body' (2005: 3), by examining scenes of male leakage and floods of mingled male and female 'seed' alongside medical representations of masturbation. More broadly across the thesis, viewing elements of female fertility and the maternal body with ideologies of leaking and permeability, provides a framework in which to situate representations of regulation, circulation and economy, facilitating the establishment of links between traditional ideologies and *fin de siècle* anxieties.

In order to link these two previously disparate elements, I draw upon Jules Law's work on fluids in Victorian England (2010), in which he traces contemporary obsession with fluid management, tracing the literary fantasies and anxieties which accompanied sanitarian and medical discussions of fluids. Drawing upon Law's link between liquids, the body and public spaces, and Anne La Berge's link between prostitution and the public health movement (1992), my own analysis of liquids links the representation of fertility and the maternal body with anxieties over fluid management and regulation. In doing so, I want to challenge studies of the leaking body in representations of hysteria by illustrating that contemporary anxieties over female leakage go beyond menstruation and birth, and that they are, in fact, established

within a much broader and more complicated intersection of discourses, which extends beyond the medical and sexual.

In its study of the leaking female body, Chapter Three draws attention to female bodies that no longer ‘leak’ due to medical sterilisation. However, it is important to note a contemporary concern with a broader sterility in both men and women and its relevance within contemporary theories of social degeneration. As will be examined in Chapter One, contraceptive practices and masturbation were linked with sterility, implying that an excessive emission of bodily fluids would result in a scarcity later on. However, it is particularly pertinent to highlight that the latter half of the nineteenth century saw a dramatic increase in medical treatises on the topic of female sterility, indeed a much larger percentage than those dealing with male sterility.²⁵ Originating with the theories of Bénédict Morel who cited sterility as one of the consequences of degeneration (1857: 581), other notable works on the same topic, such as that by Max Nordau also mention sterility (1894: 532). Consequently, this sterility was linked to the depopulation crisis (Sinéty 1892: 1). Excluding surgical sterilisation, female sterility will not be explored within this thesis due to lack of representation in literary texts. However, *Fécondité* provides an exception from this dearth in literary representation and is worth mentioning briefly in relation to these discourses of social degeneration. The novel’s first example of sterility is present in the married Angelins. The contraceptive methods used by the couple throughout their marriage are blamed for their sterility, presented as a form a punishment for ‘le long égoïsme de leur plaisir’ (1899: 429). In line with medical texts, this representation indicates that ‘defrauding’ the reproductive organs would result in their deformation or malfunction. However, although the novel’s second example of sterility is also blamed upon contraceptive practices and sexual corruption, this influence is inherited through observation. The Seguins, who employ contraceptive methods and practice other, unnamed, sexual deviancies, have three children. After spying on her mother’s adulterous liaison and inheriting her parents anti-natal views, their daughter Lucie evinces ‘un dégoût croissant des sensations charnelles’ as she is ‘révoltée de terreur et de répugnance, devant le flot de sang qui la faisait femme’ (1899: 412), wishing instead to enter a convent. Consequently, the physician Boutan laments that the anti-fecund practices of parents results in ‘les filles de douze ans mystiques, hystériques, jetées

²⁵ Examples of such texts include Alibert (n.d.), Caufeynon (1903), Gérard (1888), Hutin (1859), Schultz (1902) and Sinéty (1892).

avant l'âge au dégoût de toute fécondité, aspirant à la mort charnelle du couvent' (1899: 425). Zola's novel consequently intersects with contemporary medical discourses, linking sterility with 'fraudulent' sexual practices, in addition to linking social degeneration with hysteria and sterility.

Spatial and Mobility Regulation

Returning to the project's focus on forms of regulation, in addition to disciplinary, liquid and corporeal regulation, I also view female fertility and the maternal body alongside attempts to regulate spatial and geographical circulation. Duffy has commented that the nineteenth century can be characterised by 'changing patterns of mobility' (2005: 14) accompanied by what Corbin (1999) has identified as a reactionary anxiety over instability. Philippe Hamon has previously linked representations of the rail network with a literary focus on 'la représentation de l'espace et [...] l'exploration de ses modes de maîtrise' (1994: 43) and Poovey makes broader claims that 'modern industrial capitalism was characterised by a new organisation of space and bodies in space' (1995: 25). Throughout the thesis, I interrogate how efforts to regulate female fertility and the maternal body can be situated within these changing spaces. Indeed, if as Duffy asserts, the world and society were viewed 'in terms of systems, networks and organisms' (2005: 15), then my own study wishes to draw attention to the boundaries and limits of those structures. Within these physical, corporeal and metaphorical zones, I link the spatial regulation of women to external national changes such as industrialisation, the decline in population growth and the culture of republicanism, which all contributed to changes in how politicians viewed women (Accampo et al. 1995). During this period, the family and its reproductive capacity were moved to the forefront of national and medical policies (Hildreth 1994: 189; Offen 1984: 652-53; White 1999).²⁶ As such, motherhood moved from the private, domestic sphere, into public, medicalised and politicised spaces, as it was required to 'serve the state for purposes of repopulation, civic education, national self-esteem, military strength, social control, and defence against the all-pervasive sense of degeneration' (Accampo et al. 1995: 26).²⁷

²⁶ Heywood (1980) and Norris (2000) also trace the importance of childhood during this period.

²⁷ Jacobus argues that this same movement takes place in the eighteenth century (1996).

Aligning broader studies of motherhood (Beauvoir 1984; Rich 1976), particularly those which examine eighteenth- and nineteenth-century France (Badinter 1980; Cova 1991; Fuchs 1992), with the growing literary representation of the medical ‘encounter’ (Donaldson-Evans 2000), the thesis traces the anxiety caused when extra-medical influences were not deemed conducive to broader pronatalist goals, examining the impact of feminism and neo-Malthusianism upon these wider representations (Accampo 2003 and 2006; McLaren 1983; Ronsin 1980). In particular, I examine the influence of these movements upon methods of fertility management such as abortion and contraception, going beyond historical studies of these practices (McLaren 1990; Le Naour and Valenti 2003) to view the representational impact on the female body caused by the conscious or unwilling manipulation of the female body’s ability to reproduce.

I therefore argue that representations of the regulation of fertility and the maternal body reveal significant anxiety about the spaces in which women moved. The shifting of motherhood into public, medicalised spaces, was also accompanied by women’s increased presence in other public areas. My thesis posits that this second shift was seen as a threat to medicine’s regulation of fertility and the maternal body, and was met with attempts to limit women to the domestic sphere whilst maintaining medical and political access and influence within maternal and fertility discourses. Contemporary anxiety surrounding women’s roles in public and private spheres has been acknowledged (Cova 1991; Mansker 2011), particularly in work on women’s circulation within urban environments (Nesci 2007). The 1890s marked the establishment of crowd psychology, and Gustave le Bon’s *La Psychologie des Foules* (1895) reveals broader anxieties surrounding the violent, criminal and sexual potentiality of crowds (Barrows 1981). These changes coincided with a broader focus on women’s inferiority to men in physiology, intelligence and physical and moral strength, providing ‘a scientific rationale for the domestic captivity of women’ and the conclusion that ‘women entered the arena of public life at their extreme peril’ (Barrows 1981: 59). Indeed, as highlighted by James McMillan, the restriction of the female to the domestic space is, by no means, exclusive to the nineteenth century. However, ‘what was new in the nineteenth century was not the ideal of the “woman by the hearth” in itself, but the unprecedented scale on which it was propagated and diffused’ (1981: 9). I extend previous scholarship by examining how female fertility and the maternal body intersected with this propagation,

linking the regulation of the female body with the broader regulation of women in public and private spaces.

Methodology

By situating sources within the network of surrounding discourses, I adopt a new historicist approach, acknowledging that every representational act, whether literary, medical or popular, is inseparable from its particular context (Hamilton 2006), but that both literary and contextual information should be given equal weighting. As discussed previously, this is particularly pertinent at the end of the long nineteenth century in France, when medical and literary discourses were increasingly intertwined. Within the analysis of literary texts, I seek out the historical discursive conditions to best understand how female fertility and the maternal body are understood and represented. I therefore employ a genealogical approach which examines the medical sources drawn upon by authors, but to the extent that, as summarised by Duffy, the thesis is ‘less concerned with the transfer of information from outside the text to within the text than with a dynamic relationality between discourses’ (2015: 13). Instead of compiling multiple, disparate pairs of links, each comprised of a different text and its discursive context, the thematic structure of the thesis and wide range of literary sources deliberately situates a multitude of texts within a complicated net of wider influences and discourses. In doing so I avoid prioritising certain sources above others and aim to reveal the interconnectivity and reciprocal relationship between literary, medical and popular texts. As noted earlier, although certain chapters may dedicate a significant section to individual texts, these are intended as case studies, indicative of broader trends and backed up with other sources. In making links between different sources, I do not presume direct linkage or textual relation, unless stated explicitly. Indeed, one key aim of the thesis is not to focus on the origins or research background of individual texts, but to demonstrate unequivocally how ideologies surrounding female fertility and the maternal body were broadly disseminated and normalised across social, textual and discursive boundaries.

Foucault and the Body

The work of Michel Foucault is central to my interdisciplinary approach, drawing upon his work on sexuality, gender and medicine within the nineteenth century, found most notably in *Naissance de la Clinique* (1963) and the first volume of *Histoire de la sexualité, La Volonté de savoir* (1976). In line with his view that the discourses of a specific time period reveal the relationships between institutions, knowledge and power, I specifically examine how medicine and the pronatalist objectives of *fin de siècle* politics interacted and operated within ideologies and representations of the female body to manufacture ‘knowledge’ about female fertility and the maternal body. In my examination of these relationships, I also interrogate areas in which the creation of ‘truths’ was met with resistance or encountered difficulties, this conflict revealing where and how the ‘capillaries’ of power functioned. In terms of source material and perspectives, Foucault advocates the need for an interdisciplinary approach:

Mais si on isole, par rapport à la langue et à la pensée, l’instance de l’événement énonciatif, ce n’est pas pour disséminer une poussière de faits. [...] *Faire apparaître dans sa pureté l’espace où se déploient les événements discursifs*, ce n’est pas entreprendre de la rétablir dans un isolement que rien ne saurait surmonter; ce n’est pas le refermer sur lui-même; *c’est se rendre libre pour décrire en lui et hors de lui des jeux de relations*. (Foucault 1963: 41; my emphasis)

This approach is central to this thesis, particularly with regard to my literary analysis, in which I avoid psychoanalytical interpretations of the authors’ intent. Furthermore, as stated previously, although the known sources of a novel’s medical or political content may be acknowledged, the intent of the thesis is to draw broader links between wide ranges of sources, whether or not the author knowingly or intentionally adhered to a trend in representation or contradicted a wider pattern of metaphor or imagery. Furthermore, by drawing links between literary and medical discourses, including a much broader emphasis on regulation and circulation, I mirror Foucault’s approach by elucidating the relationships between vastly different discursive groups in order to demonstrate how female fertility and the maternal body can be situated with a wider extra-medical and literary pattern.

I also adopt a Foucauldian approach in my perspective of the female body. Just as Foucault comments on channels of disciplinary power in *Surveiller et Punir* (1975), in studying female fertility and the maternal body, I examine how disciplinary power, notably that of medicine,

was applied to the female body in order to direct and regulate fertility. In doing so, I draw upon Foucault's statement that 'ce qu'il a d'essentiel dans tout pouvoir, c'est que son point d'application, c'est toujours, en dernière instance, le corps' (Foucault 2003: 15). As is evident in the focus of each chapter, much of my analysis focuses upon representations of the female body, asking how these representations reinforce or resist the regulation of fertility. Although any examination of fertility necessarily implicates the body, my focus interrogates how discourses of fertility resulted in the physical regulation, control, domination and manipulation of the maternal body. This becomes manifest most explicitly in my concentrated focus on ideologies of the leaking female body, which play an important role in the application of disciplinary power.

Furthermore, implied within this approach is a focus on the 'medical gaze', its supposition of 'truth' and the construction of medical 'knowledge' in the Foucauldian sense. In *Naissance de la clinique* (1963), Foucault develops this concept, arguing that in the nineteenth century, 'les médecins ont décrit ce qui, pendant des siècles, était resté au-dessous du seuil du visible et de l'énonçable' (1963: viii). Throughout the thesis, but particularly in my studies of pregnancy and ovariectomy, my attention to the female body reveals this contemporary desire to view and describe the newly visible female body through medical illustration and surgery. Furthermore, Foucault's assertion that the development of the 'medical gaze' in the nineteenth century led to a dehumanisation of the patient, reducing them to a catalogue of symptoms and illness and invalidating the subjective experience of the patient (Foucault 1963: 17), is linked to a broader silencing of the female patient during this period, as already commented on by Carol Mossman's study of birth (1993). In my analysis of how 'knowledge' of fertility and maternity is applied to the female body, I draw attention to how this reduction and dehumanisation is facilitated by contemporary medical discourse, and illustrate how previous examinations of the silent and inarticulate female patient can also be situated within a much broader trend of representation in which the medical gaze is a mode of power with a capillary reach, shaping both 'truth' and 'knowledge' of women's bodies.

Moving Past the ‘Primal Scene’

In addition to drawing upon Foucauldian methodologies, my examination of female fertility and the maternal body also employs approaches from the field of Medical Humanities, particularly its *inter-disciplinary* approach, as advocated by H. M. Evans and J. Macnaughton, allowing me to ‘integrate the viewpoints of whichever disciplines seem more relevant to the questions [...] [I] am asking’ (2004: 1). The discipline’s particular focus on the interrogation of boundaries provides tools with which to approach the topics of regulation, maternity and female fertility. Indeed, as noted by Des Fitzgerald and Felicity Callard:

The medical humanities does not need to break down boundaries, but rather to understand how practices of making, breaking and shifting boundaries *constitute* illness and healing. [...] An entangled medical humanities does not ask for differences to be overcome; it asks how differences have come to matter in sickness and health; it tries to think how their mattering might be brought into richer understanding through specific moments of intervention. (2004: 42-43)

This approach is central to my examination of the regulation of female fertility and the maternal body, in which I seek to acknowledge the shifting boundaries and discursive limits of society, medicine and politics during a specific historical period, in order to elucidate the impact that these shifting boundaries and regulation had upon representations of female fertility and the maternal body.

Throughout the project, the incorporation of medical discourses into literary novels is also key to understanding trends of representation. Consequently, representations of the doctor-patient encounter are undeniably significant, particularly in studies of sterilisation and abortion, the controversy of which implicated so many physicians and surgeons. However, alongside examinations of the medical encounter, I look beyond this ‘primal scene’ wherever possible, as advocated by Anne Whitehead and Angela Woods (2016), and explore other manifestations of the medical and alternate representations of female fertility and the maternal body. Particularly in Chapters Three and Five, my study extends representations of medical dominance to illustrate resistance to the regulation of fertility and the maternal body, disrupting narratives of ‘medical progress’ which present nineteenth-century medicine as all-powerful. This challenge also extends to my use of source material. Within the previously discussed expansion of sources used within this project, I include female authors whenever

possible, including those who wrote medical or quasi-medical texts. Diversifying the range of primary material in this way is particularly important during this period, when Madeleine Brès was the first French woman to gain a medical degree in 1875 (Brès 1875).²⁸ Her subsequent work on breastfeeding (1877), alongside other female authors such as Cora Millet-Robinet (1884) and Augusta Weiss (1897), illustrate women's growing influence in puericulture, fertility and maternal discourses. Although these female authors are inevitably outnumbered by the predominantly male-authored source material, they are included to mark the growing influence of female health-practitioners.²⁹

Furthermore, in my analysis of female fertility, in Chapter Two, I place particular emphasis on the representation of female health-practitioners such as midwives and herbalists to examine how women's professional presence and influence on fertility was, in itself, regulated and controlled. I also draw attention to irregularities in the representation of male and female abortionists in Chapter Two, before examining a growing resistance to the medical regulation of fertility in Chapter Three. This approach also extends to my examination of wet-nurses, who represent the challenging figure of women who are both personally and professionally implicated in debates on fertility and its regulation. To this extent, I draw attention to how contemporary gender debates not only apply to the female 'patients' which are examined within this thesis. Instead, I challenge previous studies of the male-physician and female-patient encounter, to illustrate that women's professional roles also largely influenced debates and anxieties surrounding female fertility and the maternal body.

In addition to the importance of gender, some representations of the 'primal scene' remain pertinent to this project, particularly those in Chapters Three and Five which cover topics in which patients and physicians came into close contact. Within these encounters, I focus on the bodily manipulation of the female patient, viewing the physical interactions as a manifestation of regulation. Within examinations of doctor-patient encounters, I also

²⁸ Brès was the first French woman to qualify as a doctor, but not the first woman in France to do so, as the British Elizabeth Garrett Anderson obtained her medical degree at the Sorbonne in 1870 (Ogilvie 1986: 30).

²⁹ This ratio of male to female authors indicates the aforementioned medical appropriation of women's health. Furthermore, although these texts indicate an increased female authorship, Millet-Robinet's guide is co-authored by Doctor Émile Allix and Weiss's text advertises a foreword by a Doctor Morache who endorses her writing by stating that the author '[a] voulu répandre et rendre plus intelligibles les règles générales que les sciences médicales mettent à notre disposition' (1897: VIII). As such, these texts do not challenge the prevalent male, medical rhetoric on these topics.

examine the role of new medical technologies and procedures within representations of female fertility and the maternal body. For studies of abortion and ovariectomy this perspective is key to understanding how changing medical procedures altered contemporary perceptions of fertility. However, this approach is important throughout the thesis because my study juxtaposes new medical and scientific technologies such as anaesthetic and pasteurisation against the use of traditional or inherited practices. This last component is key to this project, which places particular focus on how non-medical or historical ideologies of the female body persisted within popular texts, contradicting new medical technologies or being appropriated in manners which reinforced new scientific or medical beliefs. In doing so, I examine notions of medical ‘progress’ by revealing both medical and popular unwillingness to abandon traditional and medically disproved perceptions of fertility and the female body.

Thesis Overview

This thesis examines seven elements of female fertility and the maternal body within five chapters. Structurally, the thesis begins with three chapters which focus primarily on elements of female fertility, followed by two chapters on the maternal body.³⁰ Chapter One opens with a study of contraception, investigating increasing female agency in representations of both male and female-centric forms of contraception alongside its role in prostitution. This is followed by an interrogation of the term *fraude conjugale* and analysis of liquid metaphors within representations of contraception; an analysis which establishes and demonstrates my framework of viewing fertility as ‘regulated’. This framework is employed in Chapter Two which, I argue, reveals how representations of abortion and birth appropriate classical notions of the ‘leaking’ female body to reinforce women’s supposedly ‘biological’ destiny of reproduction. As in Chapter One, I examine the ‘mismanagement’ of bodily fluids in abortion and the link between this management and contemporary legal and sanitarian concerns, including an interrogation of the figure of the abortionist. This imagery of ‘leakage’ is continued as I juxtapose and compare these representations of abortion with

³⁰ Chapters Two and Three nevertheless heavily implicate the maternal body through their respective analysis of childbirth and artificial insemination.

literary scenes of childbirth, examining the importance of the physician in the regulation of labour and the maternal body.

In a final examination of fertility-limiting practices, Chapter Three examines the practice of female sterilisation, referred to as ovariectomy, alongside a brief analysis of representations of conception.³¹ As with Chapter Two, this chapter also acknowledges a growing anxiety towards immoral or corrupt physicians, examining the non-consensual sterilisation of female patients and application of theories of eugenics, interrogating how notions of (re-)productivity and class influenced the regulation of fertility through surgical intervention. In line with previous chapters, I also analyse the significance of social class, revealing its impact upon how the female body and its reproductive capabilities were viewed and treated. In line with this focus on surgical abuse and reproductive ‘capability’, Chapter Three also examines representations of artificial insemination, interrogating similarities between these two divergent surgical practices.

Moving from methods of limiting fertility to the consequences of a successful conception, Chapter Four focuses on representations of pregnancy. Examining the regulation of women within public and domestic spaces, I focus on the parallel tension and dialectic between women’s sexual and maternal roles, incorporating representations of ‘transformative’ pregnancy. Continuing this theme, I situate ideologies of the mentally and physically unstable female body within discourses of pregnancy, linking anxiety over the expanding yet mysteriously absorptive female *ventre* to women’s increasing presence in the public sphere. In addition to analysis of literary, medical and popular representations, this chapter also includes study of medical illustration, in which the ‘objective’ medical gaze is complicated by the same anxieties towards the maternal body.

Chapter Five examines representations of breastfeeding, including those of wet-nursing and the breast. Within the project’s focus on regulation and liquids, the production of milk and its distribution, circulation and quality are loaded with ideological, political and medical implications. Interrogating contemporary control and ‘ownership’ of both maternal and mercenary (wet-nurses’) milk, in addition to anxieties over purity and quantity, reveals how

³¹ As will be discussed further in Chapter Three, the term ovariectomy is used to refer to the removal of one or both of a woman’s ovaries through a surgical procedure. An ovariectomy was sometimes accompanied by a hysterectomy from 1895 onwards. However, in literary texts there is often a lack of specificity when describing these procedures.

the regulation of fertility was also influenced by broader hygienic, economic and spatial regulation. Indeed, I also analyse how the latter form of regulation is explicitly manifested in representations of the breast in both private and public settings, examining how the breast's sexual and maternal 'roles' are implicated in women's increasingly public presence. Furthermore, I link the public display of the breast and broader descriptions of the wet-nurse with contemporary anxieties over the transmission of syphilis and social contamination. Finally in the conclusion, I draw together these five different elements of fertility and the maternal body, aligning my arguments to situate these topics within the broader contemporary focus on regulation and organisation. As an embodiment of this focus, I also briefly examine Guy de Maupassant's short story *Idylle* (1884) which, I argue, weaves together several of the themes picked out in this thesis and illustrates how a popular rendering of the maternal body reveals surprising links to infrastructural changes and perceptions of changing gender roles and morality.

Conclusion

Overall, this thesis argues that female fertility and the maternal body became sources of extreme anxiety at the end of the long nineteenth century in France, and that the female body's ability to reproduce was increasingly invested with wider political, cultural, social and medical concerns. By drawing upon a broad range of sources, I posit that literary, medical and popular representations of fertility and the maternal body can be aligned with a much broader contemporary fixation upon regulation, reframing how we understand maternity, sexuality and female gender roles. Furthermore, through this lens, I argue that these attempts of regulating fertility become physically and metaphorically inscribed upon the female body, as traditional ideologies of the leaking body were adopted and employed to counter neo-Malthusian and feminist practices and to reinforce the pronatalist rhetoric of the depopulation crisis. Departing from previous studies through its focus on regulation, its interdisciplinary approach, and the use of a broad range of sources, this thesis acknowledges the nineteenth-century preoccupation with fertility and the maternal body and places the spotlight on representations of the female body's contested, complicated and extraordinary ability to reproduce, revealing to what extent this biological process became a mirror of *fin de siècle* upheaval, anxiety and fear.

Chapter One.

Les Fraudes Conjugales: Contraceptive Practices and the Circulation of Seed

Introduction

In the latter half of the nineteenth century, advances in science combined with the rising influence of feminism, positivism and bourgeois individualism prompted increased awareness and availability of contraceptive devices and practices. Relating to this movement, it is possible to trace the clash between those who believed science should ‘exert further control over the human body and its processes’ (Accampo 1996: 351) and those who prioritised traditional or religious values, rejecting anything that interfered with the body’s natural processes. In France, family-limiting practices such as contraception had been increasingly used for over a century (McLaren 1983: 1). However, concerns surrounding depopulation and the falling birth rate placed these practices at the forefront of the medical and political agenda. Elinor Accampo has argued that contraception was not appropriated and desexualised by the medical profession in nineteenth-century France in contrast to in America and England (Accampo 1996: 352) and was instead mostly opposed or ignored in medical discourses. This claim of medicine may be true, with fewer texts published on the topic in contrast to other areas of sexual health or maternity, and a lack of popular and journalistic coverage due to the topic’s social stigma. It can certainly not however be extended to the literary domain. As this chapter will explore, literary engagement with contraceptive practices was wide-ranging, playing a central role in novels exploring gender roles, depopulation and sexuality.

In addition to broader historical studies of contraception (Corbin 2010 and 2015; Finch and Green 1963; McLaren 1990; Riddle 1998), the diversity of birth control practices employed

in the nineteenth century has been studied in great detail by social historians (Cook 2004; Gordon 1977; McLaren 1978; Sohn 1996; Stengers 1971; Woycke 1988), particularly those who focus on changing gender roles in the Third Republic (Fuchs 2008; Offen 2017). Notably, many have homed in on the importance of contraception in neo-Malthusian and proto-feminist discourses (Accampo 1996; McLaren 1983; Ronsin 1980). These studies, alongside others that explore contraception within prostitution (Corbin 2015) and the public health movement (La Berge 1992) are also invaluable in situating birth control within a complicated intersection of political, medical, sexual and social discourses.

However, from a literary perspective, there has been little study of representations of contraception within contemporary literary texts, excluding Baguley's (1973) references to fertility limiting practices in *Fécondité* and Melanie Hawthorne's (2012) brief study of *Sésame ou la maternité consentie (Sésame)* (Corday 1903). This chapter aims to remedy this lack of study, drawing together a broad range of literary sources, from canonical literature to popular novels, with contemporary medical and popular sources, to interrogate how representations of contraception were influenced by, and consequently influenced, broader discourses of depopulation. Although predominantly focusing on women's use of contraception, this study also aims to encompass male-centric forms of contraception, interrogating if, and how, this affected their representation. In doing so, and in-keeping with the broader thesis, it will draw upon Law's theories on the social regulation of fluids, viewing the control and management of fertility and semen within this framework of control and circulation (Law 2010). Overall, this chapter aims to unpick representations of birth control and interrogate how the manipulation of fertility influenced wider discourses of maternity and depopulation.

Contraception in Nineteenth-Century France

Hervé Le Bras and Emmanuel Todd highlight that the history of birth control use in France is '[une] histoire secrète' (1981: 89) because data on contraceptive practices were so difficult to collect. Anne-Marie Sohn has commented on this difficulty, highlighting that '[les] moyens efficaces ne sont souvent connus que par l'insaisissable bouche à l'oreille' (1996: 817) and Angus McLaren notes that 'most wives were told of fertility control methods by

their mothers, sisters, or female friends' (1990: 203) but that these links also crossed social boundaries, with domestic staff advising their employers, or vice-versa. However, although the use of these practices is not easily discoverable, some first-hand accounts demonstrate that unmarried women sought out methods of avoiding pregnancy. For example, an unmarried charwoman from Compiègne recalls that she asked her married sister: 'est-ce qu'elles ne peuvent pas prendre quelque chose pour ne avoir tant d'enfants?' (In Sohn 1996: 818).

One of the exceptions to this gap in historical information is Jacques Bertillon's, *La Dépopulation de la France: ses conséquences, ses causes, mesures à prendre pour la combattre* (1911), which identifies some of the methods of contraception commonly used (Figure 1):³²

(UNITÉ : Une opinion émise par un des médecins interrogés)

Dans les campagnes.	Crime d'Onan.	Injec- tion.	Contre nature.	Eponge ou Pes- saire.	Préser- vatif de Condom.	Avor- ment crimi- nel.	Autres moyens.	To- taux.
Très fréquent	90	5	1	1	4	2	3	106
Assez fréquent	3	23	1	3	4	11	2	47
Rare mais notable . .	2	5	4	8	8	9	3	39
Très rare ou inconnu .	»	4	1	1	46	2	»	54
Totaux	95	37	7	13	62	24	8	216
Dans les villes ou dans les familles riches.								
Très fréquent	15	6	1	»	1	1	»	24
Assez fréquent	2	7	2	4	4	5	3	27
Rare mais notable . .	»	1	»	2	4	2	1	10
Très rare ou inconnu .	»	1	»	»	4	»	»	5
Totaux	17	15	3	6	13	8	4	66
Totaux.								
Très fréquent	105	44	2	1	5	3	3	130
Assez fréquent	5	30	3	7	8	16	5	74
Rare mais notable . .	2	6	4	10	12	11	4	49
Très rare ou inconnu .	»	5	1	1	50	2	»	59
Totaux	112	52	10	19	75	32	12	312

Figure 1: Table showing methods of contraception and the frequency of their use (Bertillon 1911: 99)

It is important to highlight that these figures are based upon 'une opinion émise par des médecins interrogés' and therefore cannot be viewed as representative of actual practices. In another of Bertillon's studies, 110 out of 156 physician correspondents believed that the

³² Bergeret's *Des Fraudes dans l'accomplissement des fonctions génératrices: dangers et inconvénients pour les individus, la famille et la société* (1870) also identifies many types of contraceptive devices or practices.

withdrawal method was the most commonly used form of contraceptive, making the practice vastly more popular than its use in other countries (Sohn 1996: 822).³³ This opinion is mirrored in Dr Mayer's 1851 text in which he declares that the withdrawal method was 'en usage presque général' (1851: 154).

There were two broad groups of contraception used in nineteenth-century France; firstly, the withdrawal method, which was the most commonly used, as emphasised in Bertillon's table where it is referred to as 'Crime d'Onan'.³⁴ This technique was used by all social classes, but particularly those in rural areas and the working classes, who were often not aware of, or did not have access to, devices included in the second category: 'Dans la classe ouvrière, on se contente en général, de l'opération d'Onan [...] Le peuple connaît peu l'usage de cette enveloppe inventée par le Docteur Condom et qui a conservé son nom' (Bergeret 1870: 12).

This second group is comprised of mechanical devices such as the 'condom, sponge, pessary or douche' (McLaren 1983: 22). Condoms or sheaths were first employed to protect men from catching venereal diseases from prostitutes and were not originally used to prevent pregnancy (Brennus 1906: 59), perhaps suggesting why their use was later accompanied by a certain social stigma.³⁵ These devices were commonly used and sold in urban areas, with condoms sold at *marchands de tabac* or at bordellos (McLaren 1983: 23), products of what Dr Brennus calls 'un commerce secret' (1906: 59). Dr Dartigues stated that these objects were mainly used by the rich and were generally unknown to the poor (in McLaren 1983: 23). However, at the turn of the century, the neo-Malthusian *Ligue de la régénération humaine* attempted to engage with the working classes in their promotion of contraception through pamphlets such as *Aux Femmes*, *Aux gens mariés* and *Moyens d'éviter les grands familles* (In McLaren 1983: 104). These pamphlets contained practical guidance on how to

³³ Its popularity in France is also highlighted, as it was known as '[le] péché français' and Dutch neo-Malthusians called it the 'franse methode' (Stengers 1971). McLaren's *A History of Contraception* (1990) gives details of the types of contraceptive used across nineteenth-century Europe such as condoms, diaphragms, pessaries, spermicides and douching (1990: 183-85).

³⁴ Although, in nineteenth-century France, the term onanism was used primarily to refer to masturbation, the 'wasting of the male seed' through coitus interruptus was designated as a sub-category of onanism and was often referred to as 'conjugal onanism.' According to McLaren, the lack of specific term demonstrates that, despite popular use, the withdrawal technique 'had not yet won sufficient public acknowledgement to warrant a distinct appellation' (1983: 54).

³⁵ See Chevallier (1995) and Finch and Green (1963: 46-57) for a history of the condom.

carry out douching or make a pessary and were accompanied in 1905 by a series of propaganda labels which advised women to have fewer children.

Indeed, Fernand Kolney's pamphlet *La Grève des ventres* (1908), calls for the working classes to resist capitalism and exploitation by reducing the number of children that they have: 'Te donner en exemple la Bourgeoisie qui, pour ne pas morceler la fortune, s'est déterminée à la quasi-sterilité' (1908: 14). Central to this argument was the belief that, through capitalism and industrialisation, working-class children were viewed as 'la chair à l'exploitation, la chair à canon, la chair à prostitution'. The popularity of this slogan is evident through its frequent repetition, in various forms, in literary texts (Zola 1899: 746; Kolney 1909: 8; Couvreur 1903 59). As will be evident in the following study, the practices employed by different social classes and how they were represented were key to debates surrounding contraception and shaped broader discourses of depopulation and gender roles.

Within this debate, the rise of feminism and neo-Malthusianism aligned with increased availability of contraception to permit women to eschew their socially ordained biological function and to manage their own fertility. Eugenicists and those who believed in theories of social degeneration advocated contraception as means of restricting those who could reproduce and 'improving' the quality of the population. McLaren highlights the complexity of these intersecting discourses, arguing that '[c]ontraception had a dual potential: it could have been an instrument for greater freedom or it could have permitted greater social control' (1978: 13). These two notions are key to the following study; was contraception represented as aiding emancipation from women's supposed biological 'predestination' of reproduction, or as incorporated into existing systems of disciplinary power, permitting the manipulation of fertility to benefit political, social or medical goals?

Gender Roles in Contraception

Within representations of contraception it is particularly important to analyse gendered roles in the implementation of contraceptive devices or practices. Sohn argues that 'la contraception relève de la responsabilité masculine mais sans doute plus pour des raisons

techniques qu'idéologiques' (1996: 817).³⁶ Physically and technically, men were responsible for employing contraceptive methods such as the withdrawal method and using condoms. However, this study aims to interrogate the use of male-centric contraception in a broader manner, asking if women were passive or reliant on their sexual partner's use of them, or if they played a more active role in controlling their fertility with these methods. If so, it then seeks to examine the implications or motivations for their employment; did women employ contraception for purely practical reasons or to improve their sexual experience? Furthermore, when they were employed, did they impact upon sexual pleasure and thus influence sexual practices? Moving away from male-centric contraceptive practices, this section will then interrogate female-centric contraceptive devices, asking how these representations differ and what this suggests about contemporary discourses on contraception.

Female Control of Male-Centric Models

Despite Sohn's assertion that contraception remained under male control, contemporary testimonies and literary representations suggest that this was not strictly the case and that women took an active role in the employment of male-centric forms of contraception, particularly the withdrawal method. McLaren highlights how even the Catholic Church acknowledged the role of women in the contraception debate and 'if French men were to be returned to the faith, it would have to be at the instigation of wives and mothers' (1983: 38). The introduction of the sponge and diaphragm in the later decades of the nineteenth century gave women greater control of their fecundity and will be examined shortly. However, even in the working classes, where the withdrawal method was still mostly practiced, the assumption was 'that family planning should remain the woman's responsibility' (McLaren 1990: 204). In the use of coitus interruptus, although the impetus remained with the male partner, contemporary sources emphasise women's role in reminding or prompting them to withdraw. For example, in Sohn's collection of case studies, one unmarried servant recounts

³⁶ It is pertinent to note that the majority of examples used by Sohn are dated after 1920. Although several first-hand accounts of women's contraceptive practices in the nineteenth century have been located, the small sample size limits the extent to which they can be viewed as represented as common social practices or views.

that, when sleeping with her lover, ‘j’avais prié G., qui n’était pas mon premier amant, d’être prudent dans les rapports sexuels’ (1996: 818).

This same notion is present in the opening chapters of Zola’s *Fécondité*, through the characters Beauchêne and his wife Constance, who have an only child, Maurice. As with other couples in the novel, their decision to have a single child is rooted in financial greed and social ambition. Defending himself against the protagonist Mathieu’s pronatalist arguments, Beauchêne, the owner of the agricultural machinery factory, justifies his familial decisions on his own upbringing and family circumstances:

Il raconta comment l’usine avait failli être dépecée, anéantie, parce qu’il avait eu l’ennui d’avoir une sœur. [...] La dot d’abord, puis le partage exigé, à la mort de leur père, l’usine sauvée par un sacrifice d’argent considérable, qui en avait compromis longtemps la prospérité. (1899: 16)

For the Beauchênes, multiple offspring would mean repeating the same split of inheritance and fortune, the same ‘embarras mortel’ (1899: 16) in reducing the wealth of their only son.

Although their decision is rooted in Beauchêne’s history, it is his wife, Constance, who is the driving force behind this decision and who is determined to see her son as ‘un de ces princes de l’industrie, maîtres du monde nouveau’ (1899: 16). This adoration of her son emphasises the social ambition at the heart of their decision, the desire to see Maurice ascend further up the social and financial ladder. As the couple’s ambition to improve their son’s future status is driven by Constance, the wife also drives the practicalities of limiting their family size. Although not explicitly mentioned, it is implied that the couple employ the withdrawal method as a contraceptive practice. While this practice implicitly relies upon the male sexual partner, Beauchêne notes, when talking to his son, that ‘si le papa s’oubliait, la maman est là qui veillerait’ (1899: 16), suggesting that Constance reminds him of his responsibilities. His wife’s conviction is again highlighted by Beauchêne: ‘Il savait sa femme plus têtue qui lui, plus résolue à limiter la famille’ (1899: 16), suggesting that she has a level of control over her husband’s bodily emissions and is able to control his use of them.

This difference in the married couple and the employment of this technique leads to adulterous consequences. In an attempt to maintain marital relations without risking a pregnancy, Constance comes up with ‘les menus amusements, les compensations incomplètes pour tromper cette continuelle faim’ (1899: 66). Beauchêne tells Mathieu: ‘Vous

ne vous imaginez pas les précautions qu'elle prend, c'est à dégoûter un homme' (1899: 66). Her attempts to keep her husband's fidelity are described as inefficient, and 'la gaillardise achevait de lui enflammer le sang' (1899: 66), emphasising his red-blooded and unsatisfied lust. Despite his affection for his wife, Beauchêne, 'décidé à se faire la vie bonne, fraudait assez maladroitement dans l'alcôve conjugale, allait au dehors pour le reste; et peut-être le savait-elle, tolérante, fermant les yeux sur ce qu'elle ne pouvait empêcher' (1899: 17). Thus, in this representation, the controlled and cold calculations of his wife repel him from the marital bed. For Constance, the price of limiting her family size is the endurance of her husband's adulterous relationships as he becomes 'le mari fraudeur, le mâle affamé, et qui portait ailleurs la semence' (1899: 23).³⁷

In the same text, another couple, Morange and his wife Valérie also employ the withdrawal method in order to limit their family size to just one daughter. As with the Beauchênes, this is motivated by Valérie's past, and when she gives birth to her only daughter: 'elle se vit, si elle recommençait, avec quatre filles sur les bras, comme sa mère' (1899: 25). In order to provide their daughter Reine with a substantial dowry, they attempt to avoid further offspring.³⁸ In contrast to the adulterous compromise reached by the Beauchênes in their employment of the withdrawal method, the Moranges remain loyal to their wedding vows. Employing the contraceptive technique, they continue marital relations. However, they cannot shake off '[la] terreur sur les conséquences d'un oubli toujours possible' (1899: 71). Similarly to the Beauchênes, it is the female Valérie who is presented as enforcing the contraceptive technique: 'Elle, toujours en éveil, prenait ses précautions' (1899: 125). The text again foregrounds the female role in employing contraception, emphasising her alertness to any transgression that could jeopardise the family's finances through an unwanted pregnancy. However, in line with the previous description of the Beauchênes, the text emphasises the lack of sexual enjoyment gained by these practices: '[il] faut frauder, frauder encore, le joujou infécond des époux fidèles, bien décidés à se contenter des caresses sans péril' (1899: 71). What is common in both of these representations is that women are

³⁷ This emphasis on adulterous consequences and the displacement of 'semence' will be examined later in the chapter.

³⁸ Their motivation is attributed by the protagonist as a mark of the negative consequences of social mobility and capitalist society (1899: 30), a concept mirrored by Bergeret who argued that, alongside a decrease in religious belief, depopulation was due to increased wealth in the middle classes who 'aiment mieux jouir, en égoïstes, de leur position acquise, que de se donner le souci d'élever une famille nombreuse' and that they limited themselves to one child '[p]our éviter une trop longue lingée' (1870: 3-4).

presented as in control of their fecundity. Whilst much of the politics surrounding birth control in Europe ‘intensified cultural fears about loss of male control over female sexuality’ (Accampo 1996: 352), Zola’s representations of male-centric forms of contraception such as the withdrawal method suggest that women already had some control over their own sexuality and their husband’s actions.³⁹

To take a different literary example, in *Les Florifères* (1898) Pert represents similar imagery of a married couple with a single child, Edmond. The senator recounts that his wife is ‘une femme qui jamais ne s’oublie dans vos bras!... qui, pendant dix ans, ne m’a pas épargné que fois le cri de precaution: “Pense à Edmond!...” Oh! cette risible et terrible recommandation, qui vous revient malgré soi, même auprès d’autres.’ (1898: 95). Here again, the text emphasises that the withdrawal technique is enforced by the wife, reinforcing her attentiveness and dedication to the avoidance of pregnancy. However, as with Zola’s examples, from the husband’s perspective, although he theoretically approves of the limitation of his offspring, he dislikes the invasion of domestic matters in moments of sexual pleasure.

Therefore, even with male-centric forms of contraception, there are frequent references to how a woman ‘s’arrangeait’ when ‘[elle] ne voulait pas d’enfants tandis que son mari en voulait’ (Zola 1899: 29). In contraceptive practices and the decision to have more children, the wife is presented as over-riding the husband. There is also a marked contrast between the calculating and logical behaviour of these women who, even in the midst of sexual intercourse, ‘s’arrange[nt]’ so that a pregnancy can be avoided, alongside their husbands whose sexual urges prevent them from acting rationally. The repeated use of ‘s’arranger’ when discussing fecundity suggests that a woman’s reproductive capabilities are viewed as an optional and easily manipulated faculty, a concept which can be linked to neo-Malthusian beliefs and early first-wave feminism, both of which will be discussed shortly. Historically Rousseauian and Micheletian imagery of woman often presents her as instinctual and passive, reliant on the active and rational man (Rousseau 1848: 534; Michelet 1859: 29), these examples seem to present an inverse relationship, emphasising the supposed asexual but rational nature of the wife in contrast to her lustful and instinctual husband. These

³⁹ This perspective is mirrored by McLaren who argues that in the nineteenth century, although withdrawal was a male form of birth control, women were actively involved and often reminded their husbands of their responsibility (1978: 22).

representations also endow the female sexual partner with an element of autonomy and power, as she is presented as enforcing control over her husband's bodily fluids through the withdrawal method.

The Consequences of Contraception

In addition to the negative consequences of the withdrawal technique examined above, other literary examples which seem to eschew the female position of dominance in this matter also illustrate contemporary perceptions of how these methods could physically and morally affect both women and men. One variation to this trend of female control can be found in *L'Ensemencée* by Caruchet (1900) which traces the role played by contraceptives and emmenagogic drugs in the marriage of Marelle and Armande.⁴⁰ Neither want a child, however, in this text, Marelle is able to take control of traditionally female-centric methods of contraception due to his medical connections: He seeks out:

Des avis, des moyens, auprès d'anciens camarades. Un étudiant en médecine lui nommait des plantes. Alors, c'était l'achat subreptice, par petits doses, en des quartiers divers, des drogues conseillées, l'essai lamentable d'expédients à la vérité anodins, mais en lesquels, dans leur ignorance, ils mettaient un espoir toujours renouvelé, toujours déçu. (1900: 33)

It is he who administers these substances to his wife, such as: *une mixture bizarre, une boisson d'un rouge orangé, à l'odeur amère et forte*' (1900: 31). However, although these scenes suggest a male dominance in this regard, the text actually represents their use of contraception as a topic of negotiation and collaboration. Armande willingly takes any drugs offered to her (1900: 34) and the text juxtaposes their teamwork against nature, describing their attempts as *'une lutte sournoise, enragée, s'engageait entre la toute-puissante nature et ces deux volontés humaines, lutte secrète dont personne ne pouvait se douter*' (1900: 33). Their external appearance of *'une jeune couple très heureuse*' conceals the truth of *'deux complices ligués pour l'anéantissement d'une ennemi caché, mystérieux*' (1900: 33).

⁴⁰ The distinction between contraceptives and emmenagogues (substances which stimulate menstrual flow) is often blurred in nineteenth-century texts; some women would routinely take emmenagogues as a contraceptive. However, if successful, these substances would not prevent a pregnancy but instead prompt a very early miscarriage. I have included these here as a form of contraceptive as they were taken routinely before knowledge of conception.

At first, the novel implies that this collaboration and complicity somehow enriches their relationship as it adds ‘à leur passion sensuelle les subtiles délices d’une communion de l’intelligence’ (1900: 35). However, after their third unwanted child, the novel mirrors other representations of the withdrawal technique, suggesting that it damages their relationship and leaves Marelle sexually unsatisfied. During sex: ‘L’éternel péril était conjuré, mais au prix de quel infime plaisir, plaisir avorté, qui laissait l’amant nerveusement las de l’élan subitement maîtrisé, et l’amante désespérée de ne plus pouvoir donner toute la joie’ (1900: 220). Therefore, despite the novel’s initial representation of an egalitarian use of contraception, it consequently reinforces imagery found in other texts. That is, through the constant threat of pregnancy, the loss of sexual pleasure negatively impacts marital relations.

An alternative representation is the third, and final married couple examined in *Fécondité*’s exploration of contraceptive practices: the Séguins, a wealthy couple who have two neglected children. With regard to her two children, Valentine highlights that ‘je suis en règle envers la patrie, que toutes les femmes aient, comme moi, un garçon et une fille’ (1899: 60). She tells the protagonist Mathieu that she does not wish to have another child as ‘je ne veux pourtant pas devenir un objet de répugnance pour mon mari’ (1899: 60), a concept which links to fears of unsightliness and unattractiveness that women appeared to experience during pregnancy and breastfeeding.⁴¹ However, although the contraceptive devices or practices employed by the couple are not identified explicitly, when Mathieu criticises ‘les fraudes conjugales’ he notices ‘les regards rieurs de la jeune femme à son mari dirent un peu des secrètes pratiques de leur alcôve, la débauche conjugale dont il la fatiguait et la dépravait’ (1899: 61).

In contrast to the representation of the determined and rational wife as previously examined, Valentine is represented as corrupted and manipulated by her husband. In their conjugal habits, Valentine is described as ‘toute la fille de plaisir qu’il avait faite de l’épouse’ (1899: 61). Just as the withdrawal method is shown to be detrimental to a husband’s health, the frauds committed in the Seguin’s marital chamber leave Valentine ‘brisée, la cervelle à l’envers, accoutumée aux pires déchéances’ (1899: 61). This representation emphasises the passivity and manipulation of Valentine. However, for the Seguins, these conjugal habits not only serve to avoid an unwanted pregnancy, they are also encouraged by their social habits

⁴¹ This will be examined in Chapters Four and Five.

and pleasure-seeking pastimes, which corrupt their sexual practices. The association between the use of contraception and debauchery and corruption can also be found in medical texts, where physicians assert that ‘les pratiques frauduleuses favorisent beaucoup le libertinage’ (Bergeret 1870: 186), and that by removing woman’s reproductive ability, contraception removes the respect that men have for them. Bergeret asks ‘[e]st-ce respecter la femme que d’en faire l’instrument d’ignobles convoitises?’ (1870: 187), providing similar imagery to that seen in the representation of the Séguins where Valentine is described as moulded and corrupted for her husband’s use as a ‘fille de plaisir’ (1899: 61) instead of his wife or mother of his children.

Furthermore, these practices are unsuccessful. When Valentine falls pregnant, Séguin accuses her of infidelity, ‘convaincu d’avoir pris les plus minutieuses précautions’ (1899: 129). However, the knowledgeable Doctor Boutan informs them ‘comment ses précautions si minutieuses avaient pu ne pas suffire, lui citer vingt cas où, dans des conditions pareilles, il y avait eu grossesse’ (1899: 129). The inefficacy of these practices is also highlighted in medical texts: ‘[il] arrive quelquefois que les sujets fraudeurs, malgré les précautions qu’ils ont prises, ou cru prendre parfaitement, voient, à leur grande surprise, la femme devenir enceinte’ (Bergeret 1870: 71). Fauconney argues that the withdrawal method is ‘certainement le moins sûr, car il suffit de quelques gouttes de sperme pour opérer la fécondation’ (1903: 98), whilst in one case study of a young woman, Bergeret also highlights that despite ‘les fraudes les plus attentives, la conception se produise’ (1870: 19).⁴² During a discussion on contraception in *Les Malthusiennes* (1893), one woman asserts that ‘je connais une dame, moi, qui a essayé de tout, et qui en est au troisième mois bientôt’ (Boutique 1893: 89), emphasising that women would commonly use more than one form of contraception in an attempt to avoid pregnancy.

In *Fécondité*, the representation of these three couples creates a grounding criticism of conjugal fraud which continues throughout the entire novel, intersecting with wider discourses of depopulation and degeneration theory. In contrast to historical studies which argue that the popularity of birth control methods could be attributed to a growing belief in ‘the right to sexual enjoyment and the separation of sexuality from reproduction’ (Accampo

⁴² See Introduction and Chapter Three for a discussion of the pseudo-medical works and various pseudonyms of Fauconney.

1996: 351), Zola's text presents the use of contraception as simply a method to reduce family size or to ensure the sexual pleasure and fidelity of husbands. Furthermore, none of the three wives who make use of contraception are presented as sexually or romantically benefiting by this separation of motherhood and sexuality. Similarly, despite a progressive representation of a married couple's joint attempts to prevent pregnancy, Caruchet's novel presents these techniques as ultimately both harmful and ineffective, leaving the withdrawal technique as the only remaining option, despite its detrimental effects on the marital relationship.

Female-Centric Forms of Contraception

Alongside these literary examples of male-centric contraception, towards the very end of the century, other female-centric forms of contraception were gaining popularity, such as douches, sponges and pessaries. Although increasingly popular throughout the nineteenth century, douching was mostly only available to middle and upper-class women due to the cost of the apparatus needed (McLaren 1983: 24). In addition to these hygienic devices, other mechanical devices such as sponges and pessaries are mentioned in contemporary medical and popular texts (Brennus 1906: 60-67; Forel 1911: 485-90). In 1891, Dr Auguste Lutaud advocates sponges as the best female-centric form of contraception (1891: 6). However, as with condoms and douches, the cost and availability of these items limited their use to the wealthier classes. The social limitation of such techniques was not only due to the expense of the apparatus, but also the hygiene required for their safe employment and maintenance: Lepage notes that douching was not possible in the working classes as 'ils ignorant encore l'usage de l'eau claire et ne se débarbouillent qu'une fois par semaine' (1898: 11).

Increased representation of these methods seen at the end of the century was influenced by their growing visibility in popular and commercial discourses as they were increasingly advertised in papers (McLaren 1983: 23). However, due to their cost and prevailing taboos regarding their use, for example the association of condoms with prostitution, the majority of couples continued to rely upon the withdrawal techniques, particularly in the working classes and in rural areas where their advertisement was less common.⁴³ Indeed, despite the

⁴³ In Zola's *Fécondité*, Santerre mocks the ignorance of rural populations in relation to contraceptive methods and the attempts of physicians to reduce the use of them through the publication of a book condemning conjugal fraud: 'il est arrivé qu'il [...] a simplement apprises aux paysans [les moyens de contraception], qui jusque-là,

increasing discussion of contraceptive devices in papers, literary texts attest to the sustained usage of stereotypes regarding the women who employed these devices. This is most evident in literary representations of courtesans. Although broader attitudes to prostitutes' fertility will be examined later, the public display of contraceptive devices in their homes recurs in several texts. Couvreur's *Les Dangers sociaux: Le Mal nécessaire (Le Mal nécessaire)* (1899) provides one such example, through the figure of Mathilde who is the mistress of Doctor Caresco and a successful courtesan. In the midst of the cluttered and gaudy décor of Mathilde's apartment, a gold clyster-pump is proudly displayed (1899: 89). Although the clyster-pump was popular for enemas, it could also be used as a contraceptive douching device. This reference is particularly pertinent as it suggests several things about the practice of contraception. Firstly its public display, placed next to a Tanagra figurine and other bric-a-brac, presents it as an ordinary domestic object. However, this display also presents it as a signal and advertisement of Mathilde's courtesan services, in addition to verification that she will not 'trouble' her clients with unwanted pregnancies. The notion that it is gold or gold-plated also emphasises that she has been successful in her career and generously rewarded by her satisfied customers. This lavish contraceptive device thus becomes both an ornamental object and advertisement; a status symbol within her profession and declaration of fertility control.

Goudeau's *La Graine humaine* (1900) also presents a similar example of contraceptives use in prostitution through the description of a brothel visited by Georges: 'Il vit aussi une chambre avec un grand lit orné de glaces, tandis qu'en un cabinet de toilette très éclairé, miroitaient des ustensiles divers en métal anglais, incassables' (Goudeau 1900: 285).⁴⁴ As before, the public display of these devices, intentionally well-lit and placed in view of the bed, advertises their use to the customer. They illustrate again that such contraceptives were perceived as a guarantee of the prostitute's sterility, releasing the customer from responsibility over his actions. However, as before, the text notes their material, likening the

avaient ignoré comment on s'y prenait, de sorte que la natalité a décré de moitié dans le pays' (1899: 61). Whilst mocking the inefficacy of physicians as they attempted to counter depopulation and the use of contraception, this literary example also reemphasises that the transmission of knowledge on contraception was commonly through 'word of mouth' and outside of the physician's professional experience, leading to a lack of medical understanding of couples' conjugal habits.

⁴⁴ It would also be possible to read these objects as sex-toys. However, the use of the word 'ustensile' which was commonly used in descriptions of contraceptives, in addition to the text's broader focus on contraception and fertility regulation, rather than sexual practices, implies that they are contraceptive devices.

glittering display to that of jewellery in a sales display, designed to show off the material in its best light, in addition to emphasising the cleanliness and hygiene of the tools.

In another of Couvreur's novels, *La Graine* (1903), although not publicly displayed, the text emphasises the importance of contraception to a prostitute's work. When Hector meets with a prostitute he notices that 'le sac en s'entr'ouvrant [*sic*] laissa deviner une batterie de toilette intime et d'autres ustensiles qui étaient des appareils de protection. Tout cela était méticuleusement rangé et emballé' (1903: 188).⁴⁵ This example reinforces how these tools allowed women to continue working by avoiding pregnancy. Emphasising women's ability to take control of their fertility, the prostitute, Mina, asserts that 'Son corps était son capital, et elle le soignait, en s'entourant de mille précautions, en évitant les contagions' (1903: 188), further indicating how sanitarian discourses and fears of syphilis had infiltrated into prostitution and highlighting the importance of hygiene in regulated prostitution.

These texts reinforce the importance of contraceptive devices in the prostitution industry, illustrating how they became a status symbol and advertisement of a woman's ability to control her fertility. Although these representations could be seen to suggest a level of female sexual emancipation, allowing women to work in the sex industry without suffering from frequent pregnancies or dangerous abortions, the ineffectiveness of many of these techniques and continued likelihood of contracting a venereal disease which could prevent a woman from working in an increasingly regulated industry, detracts from the liberating claims of these devices. However, these examples attest to the continued link between prostitution and the use of female-orientated contraceptives and the reinforcement of the figure of the sterile prostitute which will be examined in more detail shortly.

Depictions of female-centric contraception also extend beyond the figure of the prostitute, and some late nineteenth-century texts present their growing use in the middle classes. One such detailed example can be found in Boutique's *Les Malthusiennes*, which contains a description of a modern device for douching after sex. The middle-class La Lilloise describes:

[Un] appareil hygiénique monumental – une réduction du réservoir de Montsouris
– scellé au mur de son alcôve et capable d'inonder la maison si les crampons

⁴⁵ Hector notes that he has seen the same tools used, ineffectively, at the brothel of Madame de Berge (1903: 188).

venaient à se rompre [...] Avec cela au-dessus de sa tête, et, sur la table de nuit, les ustensiles accessoires, elle s'endormait tranquille, même après les extravagances de son monsieur. (1893: 83)

La Lilloise argues that it is the height of the water which makes the device so successful, as 'ça a plus de force...' (1893: 83) and that she finds it more indispensable than any of her furniture or ornaments. The text emphasises the target market of these devices as middle and upper-class women (the device costs twenty-five francs) and suggests that their efficacy was questionable: 'son réservoir de Montsouris pouvait un jour trahir' (1893: 87).

However, this literary representation and its use of water can be linked to a nineteenth-century shift away from Catholicism and Religious morality towards an advocacy of Malthusian and scientific beliefs. When singing the praises of her 'réservoir de Montsouris,' La Lilloise,

Eut un geste de triomphe, les bras levés, comme pour atteindre à son réservoir au-dessus de son lit, à la place du Christ et du bénitier des familles de l'ancien temps. Ah! comme elle bénissait son eau claire et abondante, qui n'était pas de l'eau bénite (1893: 88).

Contraception is satirically deified and transformed into a neo-Malthusian crucifix. La Lilloise's prayer-like exultation, arms raised to the contraption highlights, in a tongue-in-cheek manner, to what extent the ability to regulate fertility could be revered by women. The description of the water contained within the reservoir transforms the religiously cleansing function of holy water contained in a stoup, to a physically and medically cleansing function of the douche, as it cleans male seed from the woman. The use of holy water in baptisms is ironically subverted as science and medicine repurposes it for preventing pregnancy instead of cleansing and blessing an infant through religious ceremony. Additionally, the fungibility and corruptibility of liquids is heavily emphasised; water, a typically cleansing and hygienic liquid is mixed with seminal fluid, diluting and transmuting its 'life-giving' properties. Furthermore, the use of douching disrupts the boundaries of the body through the 'force' of water dispensed by the device, creating a suggestive image of insemination.

This control over fertility could be linked to the early-feminist movement in late nineteenth-century France, in which women such as Nelly Roussel attempted to reconcile neo-Malthusian beliefs with nineteenth-century feminism, including contraceptive practices

(Accampo 1996).⁴⁶ Indeed, this sympathy towards women's control over their fertility is found throughout *Les Malthusiennes* which presents both contraception and abortion in a more compassionate light than other contemporary novels. Nevertheless, whether sympathetic or not, all of these texts provide evidence of an increasing discussion surrounding female-centric methods of contraception, highlighting their increased visibility in non-medical discourses and importance in debates over fertility, prostitution and gender roles.

Consenting Maternity in *Sésame*

A particularly interesting exploration of this notion is Corday's novel *Sésame* (1903), which opens with the protagonist receiving a letter from his recently deceased father. This letter reveals that André's physician father had created an effective contraceptive which would allow women to easily and safely control their fertility. However, as he reveals to his son, after its creation he was unable to decide whether to reveal his new invention or not, fearful of its implications to society and morality. Passing the decision to his son, the novel traces André's exploration of neo-Malthusian beliefs, and that of opposing pronatalists, in order to educate himself and make a decision about the elixir's usage.

The title of Corday's novel is particularly interesting. The choice of *Sésame*, refers to the phrase 'open sesame' from 'Ali Baba and the Forty Thieves' in *One Thousand and One Nights* (1704). This is referred to in the text by André's father, who writes that the contraceptive elixir could be 'l'instrument de la maternité consentie, la clef d'elle même... Ainsi le "Sésame" de la légende ouvrait et fermait seul la porte merveilleuse' (1903: 3). In a novel which is based upon medical discovery and a pragmatic and philosophical exploration of contemporary France, depopulation, Malthusianism and feminism, this mythic component is particularly interesting. Firstly, it presents the female body as a mythical cave, in which fertility is the treasure. Without delving into a Freudian interpretation of this representation of the female body, the notion of giving women a key to open or close the 'porte

⁴⁶ Roussel was introduced to the ideas of Paul Robin and, combined with her own experiences of painful and dangerous birth and a rejection of the idea of original sin, she gave many speeches (which were also read by a wide audience) in which she discussed female pain and advocated women's ability to regulate their fertility. See Accampo (1996 and 2006).

merveilleuse' of fertility suggests female empowerment, through which the phallic key appears to be given to women, to utilise or conceal their 'treasures' as they see fit.

However, this emancipatory imagery of 'maternité consentie' has limitations. Firstly, access to this elixir is controlled, originally by the creator physician, then by his son André, illustrating that this magical key remains firmly in male control, a notion which is emphasised by the latter's final decision to continue concealing the contraceptive. Secondly, through this superficially emancipatory imagery, Corday's title reinforces contemporary ideologies of the female body. Presenting it as Ali Baba's cave portrays the female body as a vehicle or receptacle for male 'treasure' and the emphasis on the password which makes it open and close defines it in terms of its ingestions and emissions, reinforcing ideologies of the female body's instability and flux. Beyond its implications towards gender, the use of 'sésame' in the title also suggests that, despite the existence of the elixir, it remains hidden away, through André's awareness of its value and import. In keeping it hidden, locked in a wardrobe in his family home, the elixir almost becomes a mythic treasure itself, inaccessible to women because André, its guardian, continues to conceal its existence.

The title and its reference to myth and legend is also important when situating the novel in its contemporary context. Despite its naturalist engagement with contemporary Malthusian and pronatalist discourses, these mythic inferences and the vague, mostly non-existent, science behind the creation of the 'elixir' gives the novel a hint of fantasy or science fiction. When reviewed in 1903 by Jeanne Caruchet in *La Fronde*, she comments that 'ce titre est à lui seul un signe des temps' (1903: 2), implying the importance of contraception and fertility in contemporary debates. However, Caruchet continues the review by critiquing the novel as a fantasy from a fairy tale, a reaction which, as noted by Hawthorne, is an indicator of how impossible the notion of such an elixir seemed at that time (Hawthorne 2012: 178). However, Caruchet criticises the fact that Corday does not fully explore or see through the notion of this 'elixir', attributing this to a lack of female perspective in solving the problem: 'l'elixir qui doit rénover le monde, c'est notre volonté' (1903: 2).

This argument, raised by Caruchet, reinforces the notion that, although the elixir found in the novel is full of possibilities and potential, its creation is followed by male indecision and evasion. The plot of the novel is defined by this indecision, beginning with that of the father, who passes on the responsibility of the elixir's use to his son. Although André does not use

the elixir, he does not destroy it either, asking: ‘Un moment viendrait-il où l’éducation aurait préparé l’avènement de l’élixir?’ (1903: 278). This novel emphasises that, even in representations of medical control over fertility, male employment or distribution of these means are allayed by indecision and a lack of specific intent. This is in contrast to the other representations of women’s manipulation of fertility, such as *Les Malthusiennes*, in which women actively try and employ varied techniques and methods.

Overall, representations of contraception in literary texts consistently emphasise women’s involvement and drive in both male and female-centric forms of contraception. This is perhaps not surprising, given the different impacts of a pregnancy on men and women. However, the trend is interesting, given the contemporary shifts in sexual health and puericulture, which were increasingly appropriated by medicine. Representations of the withdrawal method emphasise women’s active role in policing their husbands, whilst representations of female-centric contraceptives, such as in *Les Malthusiennes*, emphasise the displacement of religious beliefs with neo-Malthusian theories which allow women to eschew their supposed biological and religious ‘function’ of reproduction. Although representations of contraception within prostitution emphasise continued stigma surrounding its use, they also help to trace increasing regulation and hygiene within the industry, and contraception’s role in allowing prostitutes to avoid pregnancy and advertise this skill to clients. Finally, Corday’s quasi-mythic creation of a contraceptive elixir in *Sésame* is a particularly telling indication of contraception’s status at the turn of the century. In its representation of the male-designed and controlled elixir, the text comes to the conclusion that even if medicine and science could *allow* women to control their fertility, its application would not be amenable to patriarchal society. The protagonist concludes that use of the elixir ‘déchaînerait en méfaits inconscients, comme un gamin terrible’ (1903: 279).

Contraception and the Circulation of ‘Seed’

The negotiations between gender roles in discourses of contraception are accompanied by a repeated emphasis on the use, distribution and circulation of male seed. The prominence of this notion illustrates a preoccupation with how contraceptive methods could alter or disrupt the transmission of semen through legitimised and fertile sex between husband and wife.

When this transmission is disrupted, whether through retention or displacement, texts display anxiety around the broader implications of this disruption, interrogating and presenting how it impacts the social, national and moral fabric of nineteenth-century society.

As emphasised by Law, literary representations of liquids can be linked to the growing management of fluids in the nineteenth century, prompting emotions of both confidence and anxiety. Central to this concept of managing fluids is the idea of ‘waste’ and ‘spillage’, leading to an unproductive agriculture, sewage system or social body. Biologically, leaked bodily fluids also suggest an inefficient and unproductive body, specifically in relation to reproduction. Law asserts that ‘the task of producing citizens fit for empire hinges on the regulation of fluids’ (Law 2010: 131) and this section will draw upon this approach in examining various literary texts to interrogate how representations of seminal circulation and ‘wastage’ are linked to debates on contraception and broader social, medical and hygienic discourses.

The Etymology of *Fraude Conjugale*

By the end of the nineteenth century, in religious, medical and literary texts alike, the term *fraude conjugale* became synonymous with debates surrounding depopulation, individualism, capitalism and degeneration. However, the establishment of the use of *fraude*, and subsequently *fraude conjugale*, in addition to its increased popularisation towards the end of the nineteenth century raises questions on its origin and etymological development. Interrogating when this term was established, in addition to examining the accompanying ideological, social and religious connotations, is key to understanding its popularity and use.

The term implies cheating or swindling, the prevention of receiving ones due, raising questions of who is being cheated, and of what? The definition of ‘fraudulent practices’ varied somewhat between medical texts. However, across most representations, sexual fraud included the use of contraception, the withdrawal technique, onanistic activities or sodomy. In contrast to abortion, these practices were not criminal, but were heavily criticised by physicians and the Church, in addition to being accompanied by varied levels of social stigma or taboo.

From a nineteenth-century religious perspective, engaging in any form of extramarital sexual intercourse or onanism was in itself fraudulent, as it did not adhere to the Catholic belief that the ‘only lawful purpose of intercourse was reproduction’ (Bouglé 1915: 89 and McLaren 1983: 32). In contrast to extra-marital intercourse, McLaren emphasises that from a nineteenth-century Catholic perspective, ‘onanism was of course worse because it represented a crime against God and nature; it symbolised man’s futile striving for omnipotence and the triumph of destruction over production’ (1983: 35).

Within marriage, sexual intercourse was legitimised, but only for its procreative purpose.⁴⁷ Conjugal fraud took place when married couples sought to engage in sexual intercourse while avoiding its procreative purpose. Religious texts remind young women that ‘*refuser l’honneur de la maternité dans des circonstances où Dieu l’impose est manquer gravement à l’appel de Dieu*’ (author’s italics n.a 1883: 19). However, in its criticism of conjugal fraud, the Church was concerned primarily with morality rather than population size or health concerns (McLaren 1983: 37). Therefore, from a religious perspective, sexual fraud (whether conjugal or not) was fraudulent towards God, in addition to threatening the social and moral order. Texts condemn groups of ‘sectaires matérialistes qui, n’admettant ni Dieu ni morale, déclarent licites toutes les infractions à la loi naturelle (Surbled 1909: 120). Furthermore, physicians argued that the decreasing influence of religious morality was partially responsible for the increased use of fertility-limiting practices across all levels of society (Bergeret 1870: 209) and that conjugal fraud originated in ‘une aberration du sens moral,’ born from ‘la désertion des pratiques religieuses, [et] de la perte de la foi’ (Surbled 1909: 98).

However, as the century progressed, these frauds, considered sinful by the Church, became offenses against nature instead of against God: ‘le risque n’étant plus la damnation mais la désorganisation de la fonction, la maladie et la mort’ (Corbin 2010: 186), a notion which is at the very heart of Zola’s *Fécondité* with its juxtaposition of wasted seed against responsible and ‘natural’ reproduction. In relation to masturbation, the fraud is presented as against the self (Corbin 2010: 186) as it cheats the body of ‘real’ sexual pleasure and makes legitimised sexual intercourse impossible. For example, medical texts highlight that ‘[les onanistes] ne

⁴⁷ McLaren (1983) emphasises that some publications showed sympathy for couples who wanted to avoid unwanted pregnancies.

sont jamais satisfaits, rassasiés par l'intensité même, la violence des sensations qu'ils provoquent et prolongent à volonté' (Garnier 1896: 152). Nevertheless, Corbin identifies a distinction between medicine's attitudes towards the use of *fraudes* outside of marriage and those used within, designated as *fraudes conjugales*. This distinction is also evident in medical texts as the inclusion of *conjugale* is frequently accompanied by different discourses.⁴⁸ For sexual fraud outside of marriage, in extra-marital affairs, by single men and women, or by prostitutes, although these situations were not sanctioned, physicians pragmatically acknowledged that contraception could reduce the negative consequences which could impact morality and damage the family unit (Corbin 2010: 226).

However, medical texts demonstrate a very different attitude towards conjugal fraud. On this topic, 'le clergé devance le corps médicale' (Corbin 2010: 226) in denouncing conjugal fraud. Importantly, as attested by Corbin's sub-title 'le tardive émergence de la "fraude conjugale"' (2010: 225), medicine was late in criticising this topic. The Church had been explicitly critical of these practices since the end of the eighteenth century, whereas it was only in the 1860s that the term *fraude conjugale* became popular in medical discourse. The use of this term in medical and literary texts soars throughout the late nineteenth century, particularly in the 1890s. The first medical text to use the term *fraude* in relation to sexual practices was Alexandre Mayer's *Des rapports conjugaux considérés sous le triple point de vue de la population, de la santé et de la morale publique* (1851). In this text the term 'fraudes conjugales' (1851: 117) is accompanied by another use of 'fraudes' (1851: 268) to refer to practices which could limit conception.⁴⁹ Corbin argues that the popularisation of *fraude conjugale* can be seen as stemming from 'une pathologie spécifique' (2010: 227), originating in discourses surrounding masturbation and premature ejaculation. Similarly to religious and medical discourses on masturbation, physicians argued that couples cheated through the use of conjugal fraud and abused reproductive organs would become unable to conceive a child, a concept which also appears in literary texts and will be examined shortly.⁵⁰

⁴⁸ Examinations of sexual fraud or vice normally relate to onanism in young men or women or to sexual crimes. In contrast to examinations of conjugal fraud which are mostly studies of *amour conjugal* or familial practices with less emphasis placed upon criminality or degeneracy. Surbled is an exception to this trend and argues that conjugal fraud and abortion are both equally criminal acts (1909: 59).

⁴⁹ By the beginning of the twentieth century, some authors such as Surbled, replace 'fraude conjugale' with 'vice conjugal' (1909), emphasising the criminality which was associated with many fertility limiting practices.

⁵⁰ In Zola's 'dossiers préparatoires' for *Fécondité*, the author cites Bergeret's *Des Fraudes dans l'accomplissement des fonctions génératrices: dangers et inconvénients pour les individus, la famille et la*

These literary and medical examples demonstrate that, although medicine adopted elements of religious morality in relation to conjugal fraud, this was followed by an alteration of the accompanying ideological discourses. Previously, these acts had been presented as defrauding god and marital vows. But through medical appropriation of this discourse, in addition to harming the body's reproductive capabilities, conjugal fraud was transmuted into a social and civic crime, presented as '[un] vaste effort du néant' (Dufieux 1854: 467) which, 'ronge sourdement la société et prive de sève les générations futures' (Corbin 2010: 229). It is this shift that could help to explain the medical profession's adoption of the term *fraude conjugale* at the same time that medicine and the State became increasingly concerned with the health and future of the French nation. Fraud is extended from cheating-the-self to cheating-the-nation as medical consequences of conjugal fraud were used to reinforce the wider pronatalist movement taking place in nineteenth-century France.

However, the concept of fraud also reinforces the notion that there was a correct and incorrect way of reproducing or applying one's fertility. As noted throughout this thesis, this distinction reinforces the argument that medicine was focused upon detecting between orderly and disorderly maternal bodies (Kukla 2005: 95). However, in discourses of contraception, this statement can be extended to both sexes, as discourses of conjugal fraud involve the disorderly and fraudulent bodies of both male and female sexual partners. Thus, in an exploration of contraception's role in the circulation of seed, the term *fraude* plays a pivotal role, emphasising that the very nomenclature of birth control methods reinforces the notion of correct and incorrect bodily function and flow.

Displacement of Seed

Returning once again to Zola's *Fécondité*, the novel repeatedly emphasises that, through the use of the withdrawal method, sperm is not withheld but simply displaced. Men such as Beauchêne who sought to release their desire away from the marital bed, 'courait le risque de faire à une autre l'enfant dont sa femme ne voulait pas' (1899: 70). The result of his actions is that his lover Norine falls pregnant with an unwanted and illegitimate child. Thus, just as

société (1868) (Zola n.d.: 225), demonstrating that he was familiar with the use of 'fraude' within medical discourses of contraception and abortion. This familiarity becomes increasingly evident throughout *Fécondité*, where the term is central to the text's exploration of depopulation and conjugal practices.

the sperm is displaced to another woman, the potential life that would have given Beauchêne's only son Maurice a sibling is not prevented, but displaced. These actions, undertaken by married men, capable of financially supporting another child, are represented as being partially responsible for the amount of illegitimate infants abandoned and given up by their mothers, an action which frequently resulted in their deaths. Contemporary texts equally assert that conjugal frauds could lead 'à l'inconstance, à l'infidélité [et] à l'adultère' (Bergeret 1860: 171). The displacement of seminal fluids through contraceptive practices not only leads to biological consequences through a lack of legitimised reproduction, but also has moral and social ramifications. The mismanagement of seminal fluids thus becomes a double crime against the future of France, and the morality of the country.

As examined earlier in the chapter, another couple in this novel, the Moranges, attempt to avoid a second pregnancy by employing contraceptive techniques. However, they live in constant fear that Valérie will fall pregnant and consequently, each month finds them 'très inquiets parfois à la suite d'une imprudence, comptant les jours, attendant l'époque qui doit les rassurer pleinement' (Zola 1899: 71). The use of contraception and displacement of seminal fluid is therefore accompanied by anxiety and concern which can only be allayed by the return of the 'natural' emission of menstrual fluids. Concerns over the fungibility of bodily fluids in the nineteenth century were not only founded on fears that one liquid could transform into another, but also that one bodily liquid could influence another in or outside of the body (Law 2010: 3). The Moranges fear that their disruption and manipulation of seminal fluid will fail, influencing and disrupting Valérie's menstrual flow through conception.

Therefore, in *Fécondité*, the use of the withdrawal method is represented as being practised in two different manners. The first is to abstain completely from marital relations, a practice which leads to the husband '[portant] ailleurs la semence' (Zola 1899: 23). The second is to employ the withdrawal method, perhaps alongside other forms of contraception. Although the second method is represented as less threatening to the traditional family unit and marriage, its inefficacy leads to an unwanted pregnancy which results in Valérie seeking out an illegal abortion. Furthermore, Zola implies that these methods result in health problems, saying that 'toutes les fraudes en usage dans les honnêtes lits bourgeois [...] [finaisaient] par rendre infirmes la moitié des dignes épouses' (1899: 67).

These explorations of different ‘fraudulent’ techniques and their consequences become manifested on a broader scale by the narration of Mathieu’s walk through Paris, transforming pronatalist concerns surrounding conjugal fraud into imagery of the city itself. The protagonist notes that it is not only the three couples who were defrauding nature: ‘Paris entier frauderait avec eux. L’abstention réfléchie, érigée en loi, gagnait la foule, s’élargissait, envahissait les boulevards, les rues voisines, les quartiers, l’immense ville’ (1899: 74). In his examination of its causes, the protagonist denounces Parisian culture, ‘exaspéré de nervosisme littéraire, fanfaron des opinions extrêmes’ (1899: 75) alongside the pursuit of pleasure, identifying that ‘le spasme infécond était la fin souhaitée du monde’ (1899: 72).

However, as Mathieu’s walk continues, representations of the fraudulent city are translated into the agricultural imagery running throughout the novel. He views the streets of Paris as ‘le champ pierreux, la terre calcinée où la semence se desséchait, jetée au hasard de la rue, en haine de la moisson’ (1899: 74). This imagery is repeated as ‘le flot de semence détourné de son juste emploi, tombé au pavé où rien ne poussait’ (1899: 75), emphasising the dual meaning of *la semence* (seed) as both grain and semen, a double meaning which is at the core of the entire novel and permits the corresponding examination of agricultural and human reproduction. Traditional depictions of seed fertilising the earth are reversed, as the wasted seed of Paris is ‘mal ensemencé’ (1899: 75) leading to barren ground, alongside paradoxical imagery of the seed as liquid or ‘[un] flot’, which nevertheless leads to dry, parched ground.

Viewing the description of Parisian streets, where ‘le flot de semence détourné de son juste emploi, tombé au pavé où rien ne poussait’ (Zola 1899: 75), through this lens reemphasises the mismanagement of male seed; nothing can grow, no baby can be conceived, through these spillages and fraudulent acts. The depiction of Paris ‘mal ensemencé’ (1899: 75), prioritises the ‘correct’ way of using bodily fluids over the fraudulent and ‘incorrect’ methods which have led to the spillage or ‘flot’ of seed, wasted through fraudulent acts. Emphasising the link between bodily liquids and society, *Fécondité*’s paradoxical imagery of the flood of seed leading to barren, dry ground, presents reproduction as a civic duty, in which an individual’s bodily fluids should be used to serve the State and create future citizens. Fraudulent acts and a rejection of reproductive function are presented as unpatriotic, and barren, unproductive wombs are directly associated with barren and unproductive land.

These representations of wasted seed and mismanagement of bodily fluids are heavily contrasted against the marital relations of Mathieu and his wife Marianne. On returning from barren Paris to the fertile countryside, Mathieu kisses his wife, noticing the springtime atmosphere that enters through the window:

La sève de la terre montait, procréait dans l'ombre, embaumée d'une odeur de vivante ivresse. C'était le ruissellement des germes, charriés sans fin par les mondes. C'était le frisson d'accouplement des milliards d'êtres, le spasme universel de fécondation, la conception nécessaire, continue de la vie qui donne la vie. Et toute la nature, une fois encore, voulut ainsi qu'un être de plus fût conçu. (1899: 103)

Imagery of fertile sap and a willingness to conceive is placed in direct contrast with the desire for 'le spasme infécond' (1899: 72) found in Paris. Extending this imagery further to the Froment's love-making, Zola emphasises its 'completeness' in contrast to the other couples' fraudulent and interrupted relations: 'Eux se donnaient l'un à l'autre tout entiers, sans aucune restriction de cœur ni de chair, et c'était à la vie de faire son œuvre, si elle le jugeait bon' (1899: 104). Additionally, in this representation the decision of whether or not to conceive a child is placed in the hands of deified Life and removed from the individual will of the couple or woman. Continuing the comparison again, the result of their coupling is described thus: 'Voilà la semence jetée au sillon, dans un cri de délirant bonheur: qu'elle germe donc et qu'elle fasse de la vie encore, de l'humanité, de l'intelligence et de la puissance!' (1899: 104). Descriptions of the completeness of the act, along with representation of a seed planted in the furrow, re-emphasises the 'correct' management of bodily liquids as no seminal fluids is wasted, directed non-fraudulently towards its supposed function of producing the next generation of citizens.

Indeed, this emphasis on fluid wastage is evident from the very beginning of Zola's conception of *Fécondité*, in the article 'Depopulation', published in *Le Figaro* in 1896. In this article, Zola lays out plans for a new novel entitled '*le Déchet*' (1906: 643), emphasising that from the very beginning, his focus was directed towards imagery of fluids and waste, incorporated into broader agricultural imagery. After noting the wastage of seed present in several forms of animal and plant reproduction, he comments: 'Et, quand on arrive à l'humanité, les mêmes pertes se constatent, un extraordinaire gaspillage de la semence, le meilleur de la graine humaine jeté au vent, noyé dans les eaux, dispersé sur les roches

infécondes' (1906: 643). This illustrates how, from its infancy, the concept of fluid management was at the very heart of the novel.

The focus on waste and fluid management also highlights a contemporary focus on the importance of male 'seed' and its distribution and management. Contemporary texts play into the multiple definitions and interpretations of 'la graine'; agricultural imagery is frequently employed to veil potentially salacious references to semen, whilst the term's implications of potential reinforce its role within discourses of depopulation and national regeneration. This can be linked to a broader association between puericulture and agricultural imagery; for example, Caron argues that 'la Puériculture n'est en définitive, qu'une des branches de l'agriculture; la qualité des fruits dépend des soins et des aménagements que l'on sait apporter dans les différentes espèces que l'on se propose d'acclimater' (1873: 16). The importance of the terms 'graine' and 'semence' in Zola's *Fécondité* has already been highlighted above, particularly within the term's use of agricultural imagery to mirror agricultural expansion against reproductive expansion and waste. However, it is important to note that this is a broader literary trend employed from the 1890s onwards. Most explicitly marking this trend are Goudeau's *La Graine Humaine* and Couvreur's *La Graine*. The former situates an exploration of the inherent hypocrisy of repopulationist politicians who have one or no children, within a family drama. The novel represents the use of agricultural imagery within pronatalist discourses, for example: '[Du] moment que le grain de blé a été semé, il faut que la vigilance sociale s'exerce, amène l'épi et recueille la moisson' (1900: 26).⁵¹

Interestingly, within a broader exploration of the management and circulation of human seed, the novel repeatedly foregrounds imagery of rivers and water. This ranges from smaller, yet repeated, references to the 'fluvial' beard of the pronatalist politician M. Trévières, which is presented as indicative of his political hypocrisy: 'cette sterile barbe d'un fleuve faussement herculéen' (1900: 11), to a general but repeated reference to the ocean. Drawing attention to the ocean as a source of inexhaustible fertility, which is controlled by the ecosystem within, Dr Ribon cries: 'Voyez comment agit la puissante faiseuse de semences, la Mer, avec son écume vivante d'où est sortie Vénus, déesse de l'amour. Elle [la mer] joue avec tous ces germes, et les disperse à profusion, sans souci' (1900: 177). Linking the ocean with the management of human seed, Goudeau's reference to the birth of Venus is also

⁵¹ Variations of this imagery are present throughout the novel.

particularly pertinent; born from the castrated genitals of Uranos which, flung into the sea, fertilised the water and birthed her. The inclusion of this mythic reference again re-emphasises the notion and consequences of management of 'la graine'. As the Trévières repeatedly return to their coastal home, the ocean and its fertile potentiality foregrounds the novel's exploration of the management of human seed within discourses of contraception, abortion and sterilisation, reinforcing that this management is founded upon the management of fluids.

Moving from Goudeau's work to *La Graine* by Couvreur, this second novel similarly explores debates surrounding reproduction and the distribution of human seed through the lens of a family drama. However, whilst Goudeau focuses on political engagement with these discourses, Couvreur's novel concentrates on the role of scientific advancements of sterilisation, artificial insemination and theories of eugenics and degeneration. The novel traces Claude Fargeaud's battle with illness and his dilemma of deciding whether to marry and risk passing on his illness to a child, or encourage his fiancé to marry his healthy friend Raoul. Notably, the novel relies heavily on imagery of the natural world to explore the notion of 'well-directed' seed, showing many similarities to *Fécondité*. In a similar fashion to Zola's novel, Couvreur emphasises the notion of waste when discussing male seed. Comparing man with animals and plants, Claude says: '[l'homme] dissémine bestialement sa graine, il la confie à des champs indignes de la féconder, quand il ne la gaspille pas ou quand il ne l'égare pas' (1903: 123). In addition to relying on agricultural metaphors to present sexual imagery, the choice of vocabulary such as 'gaspiller' and 'égarer' reinforce that there is a correct and incorrect method of managing bodily fluids. As in representations found in *Fécondité*, contraception is presented as one such form of 'waste', with the novel describing a prostitute's use of contraception: 'la belle graine se gaspillait, se dispersait, s'écartait du but originel' (1903: 189).

However, Couvreur expands upon similar imagery found in *Fécondité*, extending the notion of waste to include responsibility over the health of offspring. The sickly Claude, who believes that his parents should not have conceived him, knowing that he would be sickly, is presented as 'issue d'une semence inconsidérément pullulante, débordante de son infinité, jaillissant aveuglément, sans mesure, sans réflexion, jusqu'au crime' (1903: 234). The text therefore incorporates theories of eugenics into imagery of wasted seed, implying that, even

when legitimised by marriage, procreation itself could be a mismanagement of seed when it produces a sick child. Indeed, the novel describes one character as ‘prototype des civilisations dégénérées où les fluides abâtardis’ (1903: 284), introducing theories of degeneration into the correct management of bodily fluids.

Towards the very end of the novel, Claude provides an overview or method of classifying the various forms of fluid management employed by different characters and his summary of their use of seed: ‘Les spécimens de chaque champ de culture humaine, de chaque façon d’y faire la semaille’ (1903: 423). In this method, the actions and practices of each character are broken down into judgements upon the management of their reproductive capabilities:

Graine active et bienheureuse avec le sage docteur Bouret; graine avide avec les Servant; graine réparatrice avec les Duverdon et les Fortin, avec Julia, la fille de ferme; graine égoïste avec Mme de Berge et Louis, le valet de chambre; graine viciée et tueuse avec son père Antonin Fargeaud, [...] mais autour de celles-là, le monde pullulait encore d’autres graines magnifiques qui se neutralisaient dans des cloîtres, ou s’éteignaient dans le célibat. Autour de celles-là il y avait les semences malades, les semences corrompues que la Nature mauvaise laissait éclore au lieu de les tuer dans l’œuf. (1903: 423-24)

This summary of the different mismanagements of ‘semence’ truly emphasises the novel’s preoccupation with identifying the circulation and distribution of seed and, more specifically, its impact across the entire social body. As we have seen, this preoccupation is part of a much broader literary focus on this topic, from *Fécondité*’s flooded Paris, Goudeau’s representation of political hypocrisy and Couvreur’s distribution of ‘graine humaine’, these texts illustrate the centrality of bodily fluids to the topics of contraception and depopulation in nineteenth-century France. However, Couvreur’s detailed identification of these various forms of mismanagement also emphasises a different element of this trend, that of classification. Through breaking down and categorising these different usages, or wastages, the novel implies a desire to separate and interrogate these different ‘flows’ of bodily fluids.

Similarly, in Law’s studies of fluids in nineteenth-century England, he identifies contradictory imagery of fluid segregation and merging, or ‘the specificity of fluids versus a generic fluidity’ (2010: 7). Attempts to keep an individual’s bodily fluids separate from those of others are followed by an indistinguishable merging into a collective mass of liquid. Despite the identification of different uses of seed found in *La Graine*, the repetition and

structuring of this list emphasises that it is in fact a large social group, whose relationships and practices are intertwined by the plot of the novel itself. Returning to Zola and *Fécondité*, the flood of wasted seed previously examined could also be seen as an anxiety-provoking merging of individual's liquids. Whilst the preceding narrative examines the fraudulent practices and 'wasted seed' of individuals. Mathieu's subsequent view of Paris as 'le champ pierreux, la terre calcinée, où la semence se desséchait, jetée au hasard de la rue, en haine de la moisson' (1899: 74) marks a shift to the general and anonymous flood of wasted seed, along with society's inability to trace it back to any individual man.

Adultery and Prostitution

The fear over the generalised mingling of individual fluids can be linked to the aforementioned displacement of seminal fluid through conjugal fraud, manifested through adultery. Due to the displacement of seminal fluid and resulting illegitimate conceptions, the traditional family unit and link between father and child becomes blurred. The generic mixing of fluid and loss of the individual also marks contemporary concerns with paternity and the right of *filles-mères* to a paternity search (*Recherche de la paternité*). As anxiety over the depopulation crisis grew, many politicians called for paternal responsibility for children born out of wedlock, prompting concerns over how this would affect marital relations (White 1999: 95). Even when paternity suits were legalised in 1912, they were only permitted if the alleged father was unmarried (Fuchs 2008: 2), thus protecting marital harmony.⁵²

In Zola's *Fécondité*, on the same night that Mathieu imagines the flood on the streets of Paris, he witnesses Beauchêne meeting with his lover Norine, his lust displaced from the fraudulent marital bed. When Norine later becomes pregnant, Beauchêne is indignant and claims that the child is not his, saying: 'sûrement, elle-même ne sait pas de quel monsieur il est, ce beau cadeau' (1899: 167) and that 'ce petit-là peut chercher un autre père' (1899: 166). This uncertain paternity is mirrored in the mixing of 'wasted seed', reinforcing bourgeois patriarchal fears surrounding adultery and paternity, in addition to concerns on the dissolution of the traditional family unit. Nicholas White argues that for adulterous husbands, 'the uncertainty of paternity is in fact a source of fantasy or a way of escaping the biological fate

⁵² See Fuchs (2009) for an examination of these legal changes.

of [their] actions' (White 1999: 73). Whilst Beauchêne uses uncertain paternity to try and avoid paternal responsibility, it is this lack of responsibility that concerns Mathieu, whose anti-Malthusian stance advocates that, 'il était juste que chaque homme apportât sa richesse, créât sa subsistance, n'enfanterait-il pas, avec chaque enfant nouveau, le nouveau champ de terre féconde qui le ferait vivre, sans rien coûter à la communauté' (Zola 899: 237). The generic mixing of seminal fluid and its accompanying confusion of paternity, makes Mathieu's ethos impossible as no individual paternal responsibility is claimed.

In addition to its representation in *Fécondité*, the displacement of seed and lack of aid given to unmarried women is also emphasised in Couvreur's novel *Le Fruit*, which presents a clinic in Paris where pregnant women go to avoid giving birth in the street: 'la cinquième partie des épaves que le courant d'amour parisien amenait aux grabats de la charité était drainée par les salles d'autopsie' (Couvreur 1906: 10). Presenting these women as flotsam reinforces their powerlessness as they are fertilised by the generic seed of this 'courant' of extramarital sex. The novel continues this imagery further, presenting the flood of seed as continuing on to the mortuary, emphasising that its misdirection is not only un-productive, in a socially legitimised sense, but that it is actively destructive. Indeed, the very title of the novel, *Le Fruit*, emphasises that the correct and incorrect distribution of seed could create different kinds of produce.

Another strand of this novel follows Antoinette's decision not to reproduce for fear of producing a sickly child, leading her to impose abstinence on herself and her husband, despite her awareness of 'des moyens très laids de s'abîmer dans ce que l'on appelle un mariage blanc...' (1906: 149). Although her abstinence is medically legitimised through discourses of eugenics and social Darwinism, Couvreur emphasises that, as in Zola's *Fécondité*, her husband's reproductive ability is merely displaced rather than repressed as he begins to visit prostitutes (1906: 165). Indeed, when examining adultery and prostitution in discourses of contraception, there is a distinct difference in how they are represented. Whilst both are strictly portrayed as 'unproductive' displacements of seed, some texts imply that prostitution should be used and legitimised as a means of reducing unwanted or irresponsible births, that is, that it should be used as a form of contraception.

These discourses are also influenced by an association between prostitution and the sewage system. Prostitutes were viewed to be 'unclean' through fears surrounding venereal disease,

particularly syphilis. In this respect, the stereotype of prostitutes as disease carriers and spreaders encouraged links to the dirt and uncleanness of the sewage system, in addition to the moral threat that they posed which led to their representation as ‘l’ordure morale’ (Corbin 2015: 42).⁵³ However, during growing medical engagement with public health, particularly relating to water quality and disposal (La Berge 1992), this perception was linked to sanitarian attempts to ‘assainir les cloaques eux-mêmes et [...] de rendre l’ordure productive’ (Corbin 2015: 42). The extension of this notion to prostitution was led by the work of Alexandre Parent-Duchâtelet, who published the first sociohygienic work on prostitution in 1836 and argued that the industry was an unavoidable part of urban life which should be regulated instead of stigmatised.⁵⁴

This change was encouraged by the regulationists, who promoted the registered brothel, known as a *maison de tolérance* (Corbin 2015: 103) and negated some of the sexual immorality and venereal risk associated with employing a prostitute: the brothel ceased to be ‘le lieu de plaisir pour devenir un simple exutoire physiologique’ (2015: 44).⁵⁵ The shift medicalised and, to some extent, legitimised male use of prostitutes and endowed the industry with a new connotation of ‘l’égout séminal’ (Fiaux 1888: 212).⁵⁶ Through this new viewpoint, regulated prostitution was viewed as a literal and moral drain for male sexual desire, literally siphoning off ‘unwanted’ male seed, preventing it from causing unwanted births or adulterous affairs.⁵⁷ These changes, particularly those relating to the work of Parent-Duchâtelet, were firmly linked to discourses of hygiene and sanitarianism, specifically in relation to sewage and waste management. Therefore, despite discussions surrounding the

⁵³ It is worth noting that this link does not only apply to prostitution. Contemporary texts also linked the sewage system with abortion and infanticide. This link will be explored in Chapter Two.

⁵⁴ See La Berge (1992), particularly pages 260-66 for an overview of Parent-Duchâtelet’s work on prostitution. The work referred to is *De la Prostitution dans la ville de Paris, considérée sous le rapport de l’hygiène publique, de la morale et de l’administration* (1857).

⁵⁵ See Corbin (2015) for a detailed study of the regulation of prostitution over the nineteenth century

⁵⁶ This is not to say that the practice became socially acceptable, but that, with increased regulation, the chances of contracting a venereal disease was reduced and that the behaviour and language of the prostitute was brought in line with more respectable bourgeois standards (Corbin 2015: 44).

⁵⁷ It is pertinent to note that these texts make few references to the potential fertility of the prostitutes, operating under the understanding that they were either sterile or sufficiently well-practiced in contraceptive or abortive manoeuvres. When questioned on this by Mathieu in *Fécondité*, Beauchêne replies ‘ces filles qui s’amuse[n]t n’en font jamais d’enfant, c’est connu. On les paye, d’ailleurs, c’est à elles de s’arranger, de prévoir les risques du métier’ (Zola 1898: 68). Similarly, in Corday’s *Sésame*, Aquin refers to ‘la prostitution nécessaire et douloureuse’, saying that the industry performs a vital role as ‘par un miracle inexpliqué, la fille publique est inféconde’ (1903: 142).

morality of prostitution, sanitarian discourses were more heavily focused upon the simple management of fluids.

Imagery of this association is mentioned explicitly in literary texts, particularly those which already employ extended metaphors relating to seed, grain and the life-force of the French nation. Returning to *La Graine* by Couvreur, a novel focusing on the ethics and morality of heredity, fertilisation and sterilisation, observing the offspring of a poor family, Claude notes how one daughter, Alphonsine, ‘tombée sur l’asphalte de Paris en fille pratique, commercialisait l’amour, soutirait à la fois la graine et l’argent. La graine, déchet de son industrie, elle la rejetait au néant; l’argent, fruit de son travail, elle le thésaurisait’ (1903: 422). The use of ‘soutirer’ here emphasises how the prostitute was perceived as a vessel for excess seed, profiting from her ability to process this ‘waste’ in a non-productive way. This role of sewer, in which she safely filters this potentially destructive bodily fluid away from society also reinforces contemporary notions of the female body as sponge and concepts of fungibility. Although not specifying if she is sterile or employs contraception or abortion, the text foregrounds the notion that she is able to control her own fecundity, to the extent that she can negate male fertility.

In the novel *La Graine humaine*, representations of prostitution are also linked to sewage and the filtering of male seed. Brothels are referred to as ‘[les] endroits où se peut disperser la graine humaine’ (Goudeau 1900: 261) and even the pronatalist Trévières grudgingly admits their use for young men: ‘Après son service militaire accompli, période essentiellement malthusienne, où la Graine Humaine, la bouillante sève jeune se dépense... vous savez où...’ to which the doctor replies: ‘Aux temples de la Prostitution, ce mal nécessaire encore, puisque les sciences des prostituées stériles sont inconnues aux fécondes femmes de Armorique ou de l’Auvergne’ (1900: 305). Referring to prostitution as a necessary evil emphasises its role in providing a safe outlet for men who were too young or poor to legitimately reproduce through marriage. However, despite this confession, the novel continues to present the prostitution industry with revulsion and contrary to pro-natalist beliefs: ‘La Prostitution éternelle, laide ou jolie, parée ou répugnante, poursuivait son labeur de pieuvre. La sève des races roulait à l’égout, mêlée à l’eau savonneuse; et le vivant phosphore allait se perdre dans la mer qui n’en a pas besoin’ (Goudeau 1900: 350). Moving beyond the metaphor of prostitution as a sewer, Goudeau also represents the actual sewer

alongside the means with which prostitutes disposed of this seed; 'l'eau savonneuse' referring to contraceptive douching and phosphorus which was ingested to prompt an abortion.

Emphasising that male seed is drained by 'sewers' implies that it is perceived as waste needing to be siphoned off in a safe manner so that it cannot contaminate other sections of society. This notion of perceiving it as waste, alongside the sanitarian trend of classifying liquids, as examined by Law, can be linked to Mary Douglas's theories on dirt as 'matter out of place' (2002: 4). She emphasises that there is no such thing as dirt which only 'exists in the eye of the beholder' (2002: 2) and that rejecting or reviling it is a positive movement which demonstrates attempts to classify it. I would argue that the nineteenth-century shift in representing unproductive 'wastes' of semen with discourses of sanitarianism and hygiene demonstrates attempts to classify and control it. Representations of flows of seed, as found in imagery of the flood in *Fécondité*, emphasise that, when not classified or appropriately directed, male bodily fluids are polluting and threatening. Semen's reproductive potential, when uncontrolled is 'destructive to existing patterns [...] [and symbolises] both danger and power' (Douglas 2002: 117). This danger takes many guises in literary representations; irresponsibly used seed can pass on inherited illnesses, disrupt marital happiness, provoke debauchery and threaten the nation through illegitimate pregnancy. As emphasised in many of these texts, the polluter 'becomes a doubly wicked object of reprobation, first because he crossed the line and second because he endangered others' (Douglas 2002: 172). Parallel to this imagery of pollution, representations of prostitution illustrate that, although identified as 'waste', unproductive male seed is controlled and placed within the existing system of classification through matching it with the 'sewer' of prostitution. This dual classification reveals nineteenth-century attempts to regulate both sexuality and bodily fluids.

Leaking Bodies: A Male Exception?

Notions of displacement, circulation and wastage in relation to male bodily fluids inevitably implicate concepts of leakage, that is, the unintentional or unwanted emission of liquids. Although this thesis will mostly concentrate on representations of leaking female bodies, this analysis of seminal fluid provides a pertinent opportunity to view a rare example of the

leaking male body, and analyse it against similar female counterparts in the same discourses. Expanding imagery of pollution and classification to the body, Douglas notes that:

Both male and female physiology lend themselves to the analogy with the vessel which must not pour away or dilute its vital fluids. [...] Males are treated as pores through which the precious stuff may ooze out and be lost, the whole system being therefore enfeebled (2002: 156).

Although this comment is made in reference to the Hindu Caste system, Douglas's description and perspective of the male body is particularly interesting in relation to contraception and other 'wastages' of seminal fluid. In relation to the withdrawal technique, the supposed consequences of this fraudulent practice vary between the two sexes; for women, its practice could produce 'toutes les maladies de l'appareil générateur, depuis la simple inflammation jusqu'aux dégénérescences, aux désorganisations les plus graves' (Bergeret 1870: 14). In the multiple case studies given by Bergeret, by being denied full sexual intercourse, the female reproductive system is presented as rebelling and becoming inflamed or infected, suggesting that as it cannot complete its 'natural' function, it breaks down. These consequences are in keeping with broader representations of women's reproductive health, which present it as requiring balance and enumerate the ways in which any rejection or avoidance of fecundity would result in a disruption of that balance.⁵⁸

However, for men, the main consequence of conjugal fraud is cited as impotence and sterility (Bergeret 1875: 66 and 85), placing emphasis on theories of degeneration, in which reproductive 'abuses' such as frauds would impact or, quite literally, prevent the creation of future generations.⁵⁹ *Fécondité* also mirrors the concerns found in medical and religious texts surrounding the long-lasting physiological impact of conjugal fraud. Doctor Boutan argues that 'on ne trompe pas impunément un organe. [...] Toute fonction, qui ne s'accomplit pas dans l'ordre normal, devient un danger permanent de troubles' (1899: 410).⁶⁰ After the death

⁵⁸ Chapters Three and Five will elucidate this further.

⁵⁹ Chapter Three in McLaren's *Sexuality and Social Order* (1983) provides an excellent overview of how the dangers of masturbation and coitus interruptus were emphasised by Quacks in order to sell potions and cures (1983: 55-58). Chapter Five in Corbin's *L'harmonie des plaisirs: Les manières de jouir du siècle des Lumières à l'avènement de la sexologie* (2010) also traces medical discourses surrounding masturbation and its negative consequences.

⁶⁰ These representations also prioritise the biological function of the female reproductive organs. Discussing the consequences of conjugal fraud upon the female reproductive system, Doctor Boutan emphasises that 'cet organisme dupé, bousculé, détourné de son usage, se déclarent de terribles désordres, les déchéances, les perversions' (1899: 411). As will be discussed later in reference to abortion, these examples present imagery of a female body which becomes sick and unbalanced if prevented from carrying out its reproductive function.

of their only son Maurice, the Beauchênes abandon their contraceptive practices and attempt to conceive another child. Their lack of success in conceiving is directly attributed to their previous employment of conjugal fraud:

Les fraudes restaient les grandes désorganisatrices, même lorsqu'elles prenaient une sorte de caractère normal, dans les prudes alcôves bourgeoises. Par leur fréquence, par les secousses dont elles ébranlaient l'organisme, elles déterminaient les pires ravages, elles amenaient des occlusions chroniques. Le docteur en soupçonnait une, surtout depuis qu'il avait soigné Constance pour une inflammation locale. Et la stérilité devait en être l'inguérissable résultat. (1899: 496)

The doctor concludes to Beauchêne: 'Vous avez brutalisé l'arbre, il est infécond' (1899: 497), emphasising both the damage caused by conjugal fraud and the genealogical implications of that sterility.

These assertions form part of a broader discourse, in which the use or misuse of semen is linked to both the health of the individual and the nation. Inspired by the work of Dr Auguste Tissot in *L'Onanisme: ou dissertation physique sur les maladies produites par la masturbation* (1760), many nineteenth-century physicians argued that a man's seminal fluid was a resource, the loss of which would physically drain him of energy and health.⁶¹ In addition to Laqueur's history of masturbation (2003), McLaren traces the historical development of this 'spermatic economy', which posited that a man's vital fluids should be prudently discharged (1983: 53). After listing the dangerous and varied side-effects of onanism, Tissot asks: 'comment une très grande émission de semence produit-elle tous les maux que je viens de décrire?' (1905: 54). In similar imagery to that found in female descriptions of ovariectomy, which will be discussed in Chapter Three, the spilling of male seed is represented as vitally draining the health of a man, as well as preventing him from reproducing. A prime example of this was an anonymous document produced in 1830, entitled *Le Livre sans titre*, in which eight illustrations demonstrate the degeneration and physical decay of an onanistic young man (Figures 2 and 3):

⁶¹ This concept was not new to the nineteenth century and Tissot traces how it originated in the work of Hippocrates and was consequently built on by other philosophers and physicians (1905: 56).



Figure 2: Illustration of healthy young man, before onanism begins to affect his health (*Le Livre sans titre* 1830: 1)

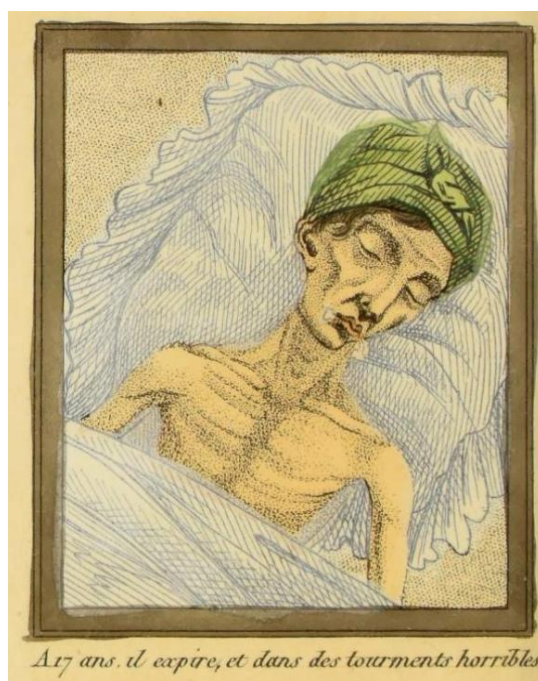


Figure 3: Illustration of the final impact of onanism, representing the young man's emaciated corpse (*Le Livre sans titre*. 1830: 84)

Notably, the wastage of seminal fluid through onanism is presented as engendering further leakage of other bodily fluids. Elucidating on the consequences of masturbation, Xavier Pradel notes: 'On trouve chez le masturbateur moins un être vivant qu'un cadavre gisant sur la paille, maigre, pâle, sale, répandant une odeur infecte. Il perd souvent par le nez un sang décoloré, aqueux, une bave sort continuellement de sa bouche' (1875: 22). After wasting his seminal fluid through masturbation, the man in Pradel's example begins to 'leak' through his nose and mouth, highlighting the destabilisation of his body. This destabilisation is extended further as the blood issuing from his nose is discoloured and watery, its abnormality further emphasising the breakdown of barriers between water and blood, interior and exterior. Equally, in *Le Livre sans titre*, the young man's deterioration is accompanied by spitting up blood which later escalates into vomiting blood (Figures 4 and 5).



Figure 4: Illustration presenting spitting up blood as a consequence of masturbation (*Le Livre sans titre*. 1830: 24)

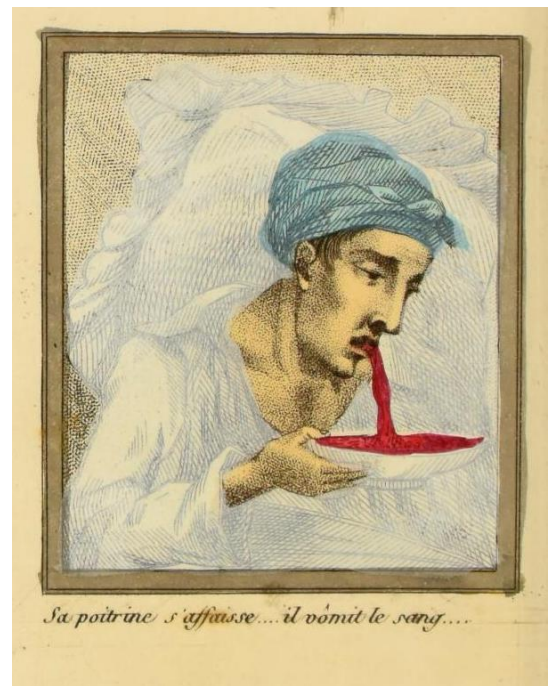


Figure 5: Illustration showing the vomiting of blood (*Le Livre sans titre*. 1830: 46)

As in Pradel's text, the blood which is vomited is examined by a physician who announces that the fluids are 'noires et fétides' (1830: 46). This corruption and destabilisation of bodily fluids emphasises Law's assertion that realisations of fluids' manipulability were inevitably accompanied by concerns on their fungibility (Law 2010: 2).⁶² Finally, the author asks '[est]-ce que donc un vampire, qui, pendant la nuit, a épuisé ses veines du sang qu'elles renfermaient?' (n.a 1830: 62), reinforcing to what extent onanism has drained the man's bodily fluids.⁶³

Although representations of female onanism contain many of the same consequential illnesses and side-effects as male masturbation, such as interrupted sleep and hysteria, because the female body does not tend to disseminate fluids during masturbation, these representations naturally do not place the same heavy emphasis on consequential bodily leakages. Tissot asserts that onanistic women are prone to 'des pertes blanches, dont l'âcreté

⁶² In her study of early modern England, Gail Paster has also examined the fungibility of fluids (1993).

⁶³ See McClaren for a more detailed examination of nineteenth-century attitudes towards masturbation and excessive sex (1983: 51-56).

est une source continuelle de douleurs les plus cuisantes' (1905: 46).⁶⁴ However, representations of female onanism make no reference to the leakages of blood and the other bodily fluids so heavily emphasised for men.

These representations suggest that a loss of liquid during masturbation results in other fluid losses, drawing upon beliefs held about seminal fluid as 'la plus parfaite et la plus importante des liqueurs animales' (Gorter in Tissot 1905: 58). Hippocrates, Galen and Tissot all assert that seminal fluid is of key importance in the body and should only be released in small quantities for procreative purposes (Hippocrates and Galen in Tissot 1905: 55-58). In contrast, women's bodies are presented as accustomed to emitting fluids through menstruation and breastfeeding, and, as such, masturbation does not 'perturb' the body to the same extent. For example, Tissot argues that men's bodies are not designed to excrete fluids in such large amounts, and that when secretions caused by masturbation 'devient excessive; toutes les autres en souffrent' (1905: 59). The aforementioned anxieties surrounding the fungibility of bodily fluids extend to concerns on how the disruption of one bodily liquid could affect others, leading to an unbalancing of the body. It is this precarious balance and link between the different liquids of the male body that Tissot argues is responsible for the dramatic variety of symptoms exhibited by onanistic men.

Therefore, although discourses of onanism provide a rare example of the 'leaking' male body, these representations nevertheless reinforce contemporary ideologies of gender and sexual difference by confirming the habitual 'leaking' of the female body. Tissot's narrative reinforces imagery of a female body that is accustomed to leaking fluid, so 'la trop grande sécrétion ne nuit qu'en diminuant trop la quantité des humeurs' (1905: 59). Contrastingly, he argues that 'la semence est liqueur active, dont la présence produit des effets nécessaires au jeu des organes, qui cesse si on l'évacue' (1905: 59). When situated alongside the other representations of bodily leakage discussed in this thesis, these examples of masturbation illustrate how sexual difference pervaded and shaped medical discourse. Furthermore, they reinforce how bodily emissions, whether positive or negative, were considered to significantly influence and impact other bodily emissions and the 'balance' of fluids within

⁶⁴ Garnier also cites 'des flueurs blanches' as a symptom and consequence of female onanism (1896: 341).

the body, a notion which will recur throughout the various aspects of female fertility and the maternal body discussed in this thesis.

Conclusion

Representations of conjugal and sexual fraud in both medical and literary texts contain multiple perspectives on contraceptive practices as well as ideological examinations of the management of bodily fluids and civic duty. Whilst the douching apparatus portrayed in *Les Malthusiennes* can be linked to the displacement of traditional religious morality by positivistic and neo-Malthusian beliefs, the contraceptive practices portrayed in *Fécondité* can be linked to contemporary social aspirations and the population crisis in France. Both literary texts demonstrate fantasies of bodily fluids and their displacement and regulation, imagery which is extended in *Fécondité* by incorporating agricultural metaphors. These representations indicate that during the latter half of the nineteenth century, contraceptive practices became a topic of negotiation within the marriage. Despite the dominance of the female opinion in most of these literary representations, all of the couples communicate and discuss their familial preferences. Sohn notes that despite the contraceptive options available to women, *il leur fallait, [...] partager avec leur conjoint la même conception de la famille, s'entendre sur le nombre d'enfants désirés ainsi que sur les techniques utilisées*' (1996: 801). Broader representations of the withdrawal method also illustrate women's active role in male-centric forms of contraception, whilst those of female-centric methods frequently emphasise their role as status symbol in prostitution, attesting to the enduring association between contraception and sex work.

However, the use of the term *fraude* or *fraude conjugale* to refer to contraceptive practices designates that fertility was increasingly viewed as property of the nation, and that through 'cheating' and avoiding procreation, individuals were harming both themselves and France. This notion is evident in a contemporary focus on the circulation and distribution of seed; most notable in literary representations of contraception which imply that through diversion or withholding of sperm, the life-giving potential of the seed is 'wasted'. However, within these discourses, it is possible to trace a shift in the purpose and function of prostitution, as regulation of the sex industry, aligned with the public health movement, increasingly present

registered prostitutes as ‘égouts séminaux’; a means of disposing of unproductive or unsuitable seed in a safe and regulated manner. Drawing together these arguments alongside representations of the consequences of contraception and onanism for each sex, it is possible to view these discourses as emblematic of the difference in how male and female bodies were perceived in the late nineteenth century. Although both capable of leakages, male leakage is presented in a substantially different manner to the supposedly consistently absorptive and leaking female body.

As highlighted earlier, although this focus emphasises women’s increasing control over their own fertility, this emancipatory imagery of contraception continued to be limited by a legacy of disreputable associations with prostitution and contemporary medical and political opposition. McLaren has commented on this negotiation, arguing that physicians and politicians who opposed the use of contraception ‘opposed not so much birth control itself but rather the lack of social discipline which it symbolised’ (1983: 5). In line with *Sésame*’s naïve visualisation of ‘*maternité consentie*’ the wealth of literary representations of women’s control over their fertility could perhaps be viewed, not only as a mark of the topic’s controversy, but as an indicator of shifting gender roles and changing attitudes towards women’s sexuality and their reproductive role.

Chapter Two.

Bodily Leakages: Criminal Abortion and Regulated Childbirth

Introduction

Edward Shorter asserts that ‘since the dawn of time women have been able to get rid of unwanted pregnancies’ (1991: 177) and that abortion, in varying forms, has been practiced since antiquity.⁶⁵ However, within this general and timeless human practice, the procedure, including the tools and methods used, the practitioners and recipients who undertook it, and surrounding discourses such as its social or legal legitimisation, greatly altered how abortion was perceived and represented in different historical periods. Even within a single historical, geographical and cultural milieu, the practice of abortion is shaped, amongst other things, by social class, gender and wealth (Usborne 2007: 11). However, despite these differences, which will be examined in this chapter, it is possible to detect certain broader shifts in the practice in nineteenth-century France, which marks the generalisation of abortion and ‘son extension massive à toutes les couches sociales’ (Le Naour and Valenti 2003: 13). Within a broader study of fertility, this topic is particularly pertinent, as it involves an explicit rejection of the body’s fecund potentiality which not only defies social norms, but also transgresses the law.

⁶⁵ For other elements of maternity such as pregnancy and breastfeeding, medical and popular medical texts make frequent reference to antiquity, particularly the Ancient Greeks or Romans, idolising these societies for their progressive and democratic attitudes towards medicine, women and the family. However, despite a multitude of historical sources which discuss how abortion was permitted in certain situations of overpopulation, texts on abortion make no reference to this (La Naour and Valenti 2003: 9). Cazals comments that abortions were commonly carried out in ‘savage’ civilisations, presenting the practice as a mark of an un-modern and unsophisticated civilisation (1903: 15).

Historically, abortion received little attention from scholars.⁶⁶ However, McLaren was one of the first to engage in the subject with his examination of the topic (1978). More recent studies of abortion in America demonstrate a recognition of the complexities surrounding illegal abortion in society, medicine and the law (Gordon 1977; Brodie 1994; Reagan 1997).⁶⁷ Broader studies, such as that by Shorter, provide comprehensive histories detailing examples of the herbs and methods used to achieve abortions (1991).⁶⁸ From a European perspective, abortion in the nineteenth century has been examined in Germany (Usborne 2007) and France, with the latter studies focusing on feminist reactions (Pedersen 1996) and situating the practice within broader fertility debates that took place at the end of the long nineteenth century (McClaren 1983). Some feminist approaches, such as that taken by Judith Walkowitz, which argue that abortion gave women an increased freedom over their bodies (2002: 404), have also been criticised by Jean-Yves Le Naour and Catherine Valenti for warping the distress and anxiety experienced by these women (2003: 82). Despite the involvement of some feminist groups in the abortion debate towards the beginning of the twentieth century (Le Naour and Valenti 2003 68-77), contemporary documents continue to demonstrate the social stigma attached to an illegitimate pregnancy and abortion.⁶⁹

Within these historical studies, Cornelia Usborne highlights the importance of representing women's 'experiences' of abortion when possible, contrasting them with popular and medical discourses on the illegal practice (2007: 127). This approach is particularly notable in Sohn's *Chrysalides: Femmes dans la vie privée* (1996), which contains a section on abortion, representing a critical resource in this chapter's examination of representations of

⁶⁶ McLaren posits that this lack of scholarship was due to the topic's lack of 'respectability' (1978: 231). However, Usborne suggests that it could also be linked to abortion's association with sexual immorality and disturbing violence (2007: 8-9).

⁶⁷ A historical perspective of abortion in twentieth-century England is also provided by Brookes (2012), who offers insight into the ways women reacted to changes in abortion law and how popular information on fertility limiting practices was transmitted.

⁶⁸ However, Shorter's assertion that after 1880 major breakthroughs in medicine gave all women 'the possibility of reasonably safe abortions' (1991: 191), leans towards a deterministic approach to abortion and a generalisation that overlooks the different treatments available in different social classes, in addition to the many women who continued to die from criminal abortions. Furthermore, his assertion that abortion became safe and 'a common means of birth control' (1991: 191) further ignores the continued risk of infection, in addition to the suffering and pain endured by these women; an element of abortion which is emphasised in Sohn's study of women's experiences in which the vast majority of women confirmed that they felt significant pain during the procedure (1996: 893).

⁶⁹ For example, a 1907 edition of *L'Assiette au Beurre* entitled 'Les Faiseuses d'anges', illustrates how pregnancy is rejected by all echelons and sectors of society; from a bourgeois 'Père de famille', a department store manager, a mother-in-law and even a priest, each illustration shows how women were driven towards an abortion from every side, no matter their social class, wealth or marital status.

the practice. Her historical study collates a wide range of censorial, judicial and medical information, in addition to women's first-hand accounts of abortion, making it possible to compare and contrast this information with corresponding literary, medical and popular artefacts.

From a literary perspective, Leonard Koos examines abortion literature at the turn of the century in France, drawing pertinent comparisons between different *fin de siècle* texts, including Zola's *Fécondité*, and highlighting some general features of these representations of abortion (2001).⁷⁰ However, Koo's chapter does not have the scale to examine these representations alongside medical texts, or to draw out broader themes and motifs in these representations. The most recent work on abortion in France is Le Naour and Valenti's *Histoire de l'avortement: XIXe-XXe siècle* (2003), which provides a comprehensive study of historical, medical and political attitudes towards abortion from the nineteenth century through to the end of the twentieth century. This text refers to multiple literary sources from canonical through to popular novels. However, it does so in order to reinforce popular arguments or beliefs, and does not apply literary analysis to these representations of abortion and abortionists. Despite the wide array of nineteenth-century literary texts which engage with abortion, the breadth of which will be examined shortly, there has been a surprising lack of study in this area. An exploration of this *œuvre* would be profitable to the understanding of how these medical, legal and social changes to abortion were manifested in literary texts.

As highlighted by many studies of abortion, a culture's stance towards and regulation of abortion was linked to and informed by the shifting negotiations of power and relationships between physicians and women, religion and medicine, private and public domains, legal policy and traditional beliefs. In his study, McLaren highlights how it is not only important to ask who was involved in the debate, but 'how the social and cultural concerns of the different sectors of French society necessitated their adoption of particular stances on the issue at particular times' (1983: 4). Focusing on representations of abortion in a range of cultural artefacts such as literary, journalistic and medical texts, this chapter aims to build upon previous scholarship to explore how previously unexamined discourses on abortion

⁷⁰ However, in Koo's chapter there is significant confusion between the legitimate midwife, La Bourdieu, and the abortionist-midwife La Rouche (Koos 2001: 267-68). Descriptions of La Rouche and her establishment are mistakenly attributed to La Bourdieu, confusing and ignoring the text's comparison between the legitimate practice of midwifery and its criminal alternative taken up by many midwives in the late nineteenth century.

present the female and maternal body. It seeks to ask how, through the debate on abortion, it is possible to view a wider discursive struggle, and how medical, legal, hygienic and cultural beliefs manifest themselves upon representations of abortion and abortionists. Within this broader struggle, this chapter will also specifically focus on the role played by gender, in both domestic and professional domains. In addition, since other studies of abortion have only briefly examined and analysed literary texts, this chapter aims to give them equal weighting to medical and popular texts, interrogating how the fertile potentiality of the female body and the active management of that fertility became an entryway into other discursive debates that were taking place in nineteenth-century France.

Finally, this analysis of abortion will be contrasted by a smaller comparison with scenes of childbirth. Since birth is perhaps the most notable ‘leakage’ of the fertile female body, this section will argue that representations of childbirth can be aligned with those of abortion to illustrate how notions of the ‘leaking’ female body were appropriated and manipulated to suit pro-natalist ideology and medical influence. In doing so, this analysis builds upon existing work on birth by Beizer (1994), Fuchs (1992) and Mossman (1993), particularly the former’s emphasis on the physician’s role in representations of birth and the silencing of the female body.⁷¹ However, whilst acknowledging the silencing of the labouring body in a broader range of sources, this study moves beyond psychoanalytical readings of labouring women and focuses instead on the regulation and control of the ‘leaking’ female body, examining the role of liquids and bodily emissions in these representations of birth.

Abortion in Nineteenth-Century France

During the nineteenth century, the increased practice and widespread nature of abortion in France have been attributed to multiple factors: industrialisation, the decreasing influence of religious teachings, urbanisation, individualism and an increasingly capitalist society are just some of the influencing factors (McLaren 1983: 14; Le Naour and Valenti 2003: 13).⁷²

⁷¹ For the construction of ‘knowledge’ of childbirth in France see Gélis (1984) and McTavish (2005).

⁷² See Le Naour and Valenti (2003: 87) for a detailed examination of the causes of abortion in the nineteenth century, including urbanisation and morality. McLaren also argues that towards the beginning of the twentieth century, changing attitudes to abortion could also be attributed to the increasing popularity of feminism, leading to a more sympathetic perception of women who sought out abortions, and increased support and mutual assistance between women (McLaren 1983: 145).

Furthermore, with the ascent of positivist thought and the increasing power of medicine and science, many women rejected religious teachings, including the threat of eternal damnation for crimes such as abortion, and sought the opportunity to end unwanted pregnancies, arguably making the practice of abortion, amongst other things, ‘le fruit de l’individualisme libéral et de la déchristianisation’ (Sohn 1996: 908).

Although abortion was increasingly practiced through the nineteenth century, Sohn asserts that it was only the depopulation crisis in the latter half of the century that belatedly prompted physicians to recognise that abortion had become a common social practice (1996: 828). This realisation that ‘[on] n’a pas d’enfant, parce qu’on n’en veut pas’ (Cheysson 1891: 7), provoked ‘une floraison d’ouvrages’ (Sohn 1996: 828) by physicians, moralists, neo-Malthusians and politicians.⁷³ Much of the political debate was centred upon the neo-Malthusian *Ligue de la régénération humaine* which was seen, alongside abortion, as one of the main causes of depopulation (Le Naour and Valenti 2003: 37-42). However while many contemporary medical texts engaged with depopulation and morality, they were predominantly concerned with the medical dangers, effects and consequences of abortion, in addition to its criminality. Moreover, much of this literature is repetitive, with most texts drawing heavily upon several canonical works such as Mathieu Orfila’s *Traité de médecine légale* (1823), which influenced Ambroise Tardieu’s more detailed study *Étude médico-légale sur l’avortement* (1881).⁷⁴ One important exception is Spiral’s *Essai d’une étude sur l’avortement considéré au point de vue légal et spécialement de l’article 317 (1°, 2° et 3°) du code pénal relativement au concubinat suivi de l’examen de l’art. 340 du code civil* (1882) which was one of the first texts to heavily criticise the legal stance towards abortion. Notably in this text, Spiral shows sympathy to seduced or poor women, arguing that the code ‘conduit à la misère’ (1882: 11) by prosecuting women who had often been seduced and abandoned. This multitude of medical texts, in addition to the variety of texts published by non-specialist authors, resulted in a body of works which is described by Sohn as ‘décevant’ and which contains discourses that were ‘éloigné[s] [...] de la réalité’ (1996: 828). Despite the repetitive arguments found in many of these texts, their quantity attests to an obsessive and determined engagement with abortion, in addition to its importance and controversy in late nineteenth-century France.

⁷³ Le Naour and Valenti trace the involvement of the neo-Malthusians in the debate (2003: 37-49).

⁷⁴ Other notable names mentioned by Sohn are Alexandre Lacassange and Adolphe Pinard (1996).

Literary authors similarly engaged with abortion towards the end of the nineteenth century. The criminal abortion industry plays a central part in Émile Zola's vilification of fertility limiting practices in *Fécondité*, alongside contraception and ovariectomy. In keeping with Zola's focus on the depopulation crisis, other literary texts also incorporate abortion as a central plot feature in order to engage with neo-Malthusian discourses and focus on the sensationalist nature of the crime, including Fernand Kolney's *Le Crime d'engendrer* (1909) and Camille Pert's *L'Autel* (1907). As will be examined further in the later chapter on ovariectomy, some authors focused their work on the figure of the immoral physician who carried out illegal abortions, such as Maurice Landay's *Les Trois Crises: La Grappe (La Grappe)* (1904), Édouard Lepage's *L'Âge d'or* (1907) and Gaston Tournier's *La Fabrique d'anges* (1907). Novels such as Alexandre Boutique's *Les Malthusiennes* engage not only with neo-Malthusian discourses, but also emphasise the legal ramifications for women who sought out an abortion. In a similar manner, other texts such as Eugène Brioux's *Maternité* (1904) and Paul Bru's *Le Droit d'être mère* (1901), stress an increasing acknowledgement of women's right to manage their fertility and a sympathy with how these women were treated by society and the law. Expanding upon this, Mie d'Aghonne's *Une Faiseuse d'anges* uses representations of abortion to engage with contemporary debates surrounding modernity and women's changing role in society and in the domestic space. The popularity of the topic attests to its centrality in discourses of maternity and illustrates how authors took advantage of abortion's notoriety and taboo-status for literary effect.

Within these medical and literary texts, representations of abortion were also inevitably shaped by social, legal and religious perspectives and discursive shifts which took place throughout the nineteenth century. During this period, the domain of abortion was viewed predominantly as 'une affaire de femmes' (Sohn 1996: 907), a notion which will be examined in greater detail shortly. However, towards the end of the century, this emphasis on the female role was seemingly offset by the increased legal, medical and religious intervention in the practice. The large amount of medico-legal texts published on abortion in the latter half of the nineteenth century attests to the difficulty of charging women with having undergone an abortion, or of having carried one out, in addition to emphasising medicine's heavy involvement in the legal process and attempts to tackle the abortion industry. This new medical preoccupation also reflected contemporary concerns over depopulation; before Napoleon I's 1810 penal code, the post-revolutionary code of 1791 'ne prévoit aucune peine

à l'encontre de la femme avortée' (Le Naour and Valenti 2003: 12) and only abortionists were threatened with incarceration (Léauté 1979: 76). However, the 1810 penal code transferred legal responsibility back onto the expectant mother, as well as the abortionist, making abortion 'un acte contraire aux intérêts de la société et de l'État' (Le Naour and Valenti 2003: 13). Indeed, the crime of preventing a life and its consequences shifted away from the individual and their body towards the larger social body, permitting politicians, physicians and populationists to take a greater interest.⁷⁵ McLaren argues that the supposed rise of abortions in the nineteenth century was greatly exaggerated: 'what gave rise to such an impression was the fact that, as society modernised, acts which had once been largely confined to a private female world began to be observed and make part of a male-dominated public world' (1990: 190).⁷⁶

These legal changes were prompted by shifting political, cultural and social attitudes towards birth control and abortion. Understanding of foetal development, specifically the new science of embryology which demonstrated the gradual development of a fertilised egg into an embryo and then a foetus (Riddle 1997: 222), contradicted the Aristotelian theory of staged development, and popular beliefs in quickening (the moment at which the foetus was seen to be 'alive') complicated the medical and legal distinction of if and when abortion was tantamount to homicide (Gordon 1977: 53).⁷⁷ Leslie Reagan illustrates how, previously, in the eighteenth and early-nineteenth centuries, induced miscarriages that took place before the foetus had 'quickened' were not commonly viewed as abortions (1997: 8) and that concepts of when a foetus was 'alive' rested on the expectant mother's account of her sensations.⁷⁸

Similarly, until 1869, the Catholic Church decreed that abortion was only homicide if it was committed after hominization (the ensoulment of the foetus), which was believed to take

⁷⁵ Despite this shift, the Napoleonic code did not permit the death sentence for abortion, and juries were given the authority to show leniency towards women who had sought out an abortion (Léauté 1979: 77). This leniency was mostly maintained until the 1923 reforms when all abortion cases were brought before a magistrate instead of a jury in order to minimise leniency (Léauté 1979: 76).

⁷⁶ Whilst the code did not specify what punishment would be given to women who had undergone, or attempted to undergo an abortion, it stated that any healthcare professional, including physicians, pharmacists and midwives, who was found guilty of administering an abortion or abortive substances would be transported to a penal colony (Riddle 1997: 209).

⁷⁷ The definition of 'quickening' varies between different sources. However, the majority of texts define it as 'the point at which a pregnant woman could feel the movements of the foetus' (Reagan 1977: 8). This is based upon the Aristotelian theory that human life began at the point of animation (Keown 1988: 3).

⁷⁸ Duden also asserts that, before the nineteenth century, 'what a woman felt determined whether she was in the state of being pregnancy' (1991: 160).

place forty to eighty days after conception (McLaren 1990: 187; Osborne 2007: 7).⁷⁹ Nevertheless, in 1869, Pope Pius IX's *Apostolicae sedis* stated that abortion, at any stage of pregnancy, was homicide and grounds for excommunication (Hurst 1989: 2; Warner 1976: 223).⁸⁰ By labelling all abortions as homicide, regardless of the stage of pregnancy, Pope Pius IX's edict implied immediate hominization, or that a foetus had a human soul from the moment of conception.⁸¹ This shift can also be viewed as a reinforcement of Pope Pius IX's earlier 1854 declaration in the papal bull *Ineffabilis Deus* that the Immaculate Conception was doctrine.⁸²

It is unclear whether these decisions were intended to bring the Church in line with new scientific discoveries or if they were attempts to counter neo-Malthusian beliefs and the use of birth control (Riddle 1997: 223). McLaren argues that this Catholic engagement with the topic was a response to the involvement of physicians in reproduction and that Pope Pius IX 'was clearly launching the Church in a campaign against medical interventions in childbirth' (1990: 197). He also convincingly argues that medical and religious attacks on abortion were not only prompted by changes in embryology but were 'part of each group's attempt to shore up claims of professional competence. Each was seeking to impress upon the laity that it alone was qualified to judge the legitimacy of terminating pregnancy' (1990: 188). The definition of 'quickening' relied solely upon a mother's sensations and experience of pregnancy, rendering the physician as interpreter to her account. For this reason, by the mid-nineteenth century, physicians cited advances in embryology as their justification for displacing this female role, '[asserting] simply that only medical men could authoritatively discuss issues related to physiology' (McLaren 1990: 194).

Although medicine led the way with redefining the beginning of a foetus's 'life', it then found itself strongly opposed by the Church on the issue of therapeutic abortion. Whilst

⁷⁹ Male embryos were believed to be hominised after 40 days, whilst female embryos were believed to take 80 days according to Aristotelian tradition which was adopted by Saint Thomas Aquinas (Léauté 1979: 80).

⁸⁰ See Riddle for more detailed coverage of the scientific discoveries and debates which preceded this religious change (1997: 220-22), in addition to providing an overview of the Western response (1977: 223-27).

⁸¹ Pope Pius IX does not make explicit reference to hominization in the *Apostolicae sedis*, however it is viewed at the first implicit Catholic endorsement of immediate hominization (Hurst 1989: 19).

⁸² 'We declare, pronounce, and define that the doctrine which holds that the most Blessed Virgin Mary, in the first instance of her conception, by a singular grace and privilege granted by Almighty God, in view of the merits of Jesus Christ, the Saviour of the human race, was preserved free from all stain of original sin, is a doctrine revealed by God and therefore to be believed firmly and constantly by all the faithful' (Pope Pius IX 1854). The 1869 implication of immediate hominization thus reinforced the conception of Mary as immaculate from 'the first instance of her conception,' in addition to labelling all abortion as homicide.

investigating abortion in nineteenth-century France, it is pertinent to note that alongside a fixation on criminal abortions, a multitude of medical texts were preoccupied with the notion of therapeutic abortion.⁸³ This was only practiced in Paris after 1830 (McLaren 1990: 197) and in 1853, the Académie de Médecine recognised the distinction between therapeutic and criminal abortion (Koos 2001: 263).⁸⁴ Thus, from the middle of the nineteenth century, physicians began to carry out therapeutic abortions when a woman's pregnancy seriously threatened her life (McLaren 1983: 141), as stated by the *Gazette Médicale de Lyon* in 1851: 'il faut songer à conserver l'arbre en sacrifiant le fruit' (1851). In contrast to a caesarean which placed both the infant and the mother's lives in danger, therapeutic abortion prioritised the life of the mother; a prioritisation which was opposed by the Catholic Church (McLaren 1983: 142).⁸⁵

Whether therapeutic or criminal, the aim of an abortion was the same – to terminate a pregnancy by causing a miscarriage. However, criminal abortion encompassed several different techniques and procedures for achieving this aim. As referenced by the majority of contemporary medical texts, Article 317 of the Code Pénal of 1810 states:

Quiconque par aliments, breuvages, médicaments, violences ou par tout autre moyen, aura procuré l'avortement d'une femme enceinte, soit qu'elle y ait consenti ou non, sera puni de la réclusion. [...] La même peine sera prononcée contre la femme qui se sera procuré l'avortement à elle-même ou aura consenti à faire usage des moyens à elle indiqués ou administrés à cet effet si l'avortement s'en est suivi [...]. Les médecins, chirurgiens et autres officiers de santé, ainsi que les pharmaciens qui auront indiqué ou administré ces moyens, seront condamnés à la peine de travaux forcés à temps, dans le cas où l'avortement aura eu lieu. (Brennus 1895: 41)

⁸³ Examples of such texts include Caufeynon (1903), Désormeux (1905), Ferdut (1865), Vanvert (1878) and Vesine Larue (1866).

⁸⁴ See Le Naour and Valenti (2003: 17-36) for a more detailed history of therapeutic abortion in France. McLaren also traces how these legal and medical shifts took place much earlier in England (1990: 195). Additionally, it was made clear that no individual doctor should make the decision to undertake a therapeutic abortion without consulting his fellow physicians and gaining their approval. Presumably this was to regulate the practice and avoid the risk of accusations of illegal abortion.

⁸⁵ Before immediate hominization was canonised, some Catholic scholars showed some support for therapeutic abortions that took place before the ensoulment of the foetus, if it avoided some greater evil such as the death of the mother (McLaren 1990: 187). However, the 1869 bull *Apostolicae Sedis*, condemned all abortions, no matter the state of the pregnancy. Then in 1895, the Church explicitly condemned therapeutic abortion (Reagan 1997: 7), taking a clear stand against the increasing medical interest in the practice.

The representations of the different methods of achieving an abortion, the women who sought one out, and the variety of men and women who sold emmenagogues (substances which prompted menstrual flow) or carried out the procedure, are all accompanied by different contemporary discourses which contribute to the larger image of how fertility and the maternal body were represented in nineteenth-century France. In most representations, the different forms of abortion were tried in sequence until the desired result was achieved, or the woman decided to continue with the pregnancy.⁸⁶ Firstly, women would attempt to prompt a miscarriage through easily concealed means such as: ‘Émissions sanguines locales ou générales; Pédiluves, manuluves, grands bains, bains de siège; Exercices forcés, fatigues; Coups, chutes, constriction de la taille à l’aide de corsets’ (Ferdut 1865: 78).⁸⁷ If these attempts failed, then women would purchase an emmenagogue and consume it, often through a tisane or infusion. However, as will be discussed in greater detail later, the effects of these potions and chemicals varied widely and Le Naour and Valenti argue that with the increased use and more widespread nature of abortions, outdated techniques such as the use of emmenagogues began to be replaced by surgical and mechanical procedures (2003: 14; Fine 1986: 136; Shorter 1991: 189).⁸⁸ These surgical and mechanical operations were the most dangerous option but gave the best chance of successfully terminating the pregnancy, with Tardieu describing them as consisting of ‘[les] opérations plus ou moins grossières, pratiquées sur la matrice’ (1881: 53). Towards the end of the nineteenth century there were two popular mechanical abortive procedures.⁸⁹ The first was the piercing of the amniotic sac with a metallic instrument, the second was to detach the egg by injecting liquid into the uterus

⁸⁶ As highlighted by Shorter, women normally progressed from ‘the least to the most dangerous procedure, stopping at whichever worked’ (1991: 178). Correspondingly, the least dangerous methods rarely worked (1991: 178).

⁸⁷ These same techniques are referenced by Tardieu (1881: 27). Shorter (1991: 178-80) demonstrates examples of how these techniques were commonly used before and during the nineteenth century in Europe. Deliberately wounding a woman in order to prompt an abortion was also a crime (Brennus 1895: 44) and was a practice endured until the 1930s (Sohn 1996: 851). In one legal case, a man was sentenced to imprisonment ‘pour avoir tenté de procurer l’avortement de la femme Sevin, par une violence exercée sur elle’ (Cour de cassation 1817 10: 255). In 1860, in addition to carrying out abortions on three women, La Femme Petit-Imbert was found to have ‘volontairement porté des coupe et fait des blessures à ladite femme Guillaumier’ (Cour de Cassation 1860 65, 8: 374). Similarly, in Zola’s *Thérèse Raquin* (1867), Thérèse allows Laurent to beat her, deliberately directing his blows towards her stomach to end her unwanted pregnancy (Zola 1868: 278).

⁸⁸ Shorter suggests that the varied results achieved by emmenagogic herbs and plants can be attributed to the varied quantities of natural oils produced in different harvests and to how potency was altered by extended storage or different methods of preservation (1991: 187-88). He argues that these variable factors contribute to representations of herbal abortion as capricious and dangerously unpredictable (Shorter 1991: 188).

⁸⁹ Shorter argues that this method of abortion was not new to the nineteenth century, but that medical and hygienic advances made it less hazardous (1991: 198). Tardieu also claims that electric shocks were used in order to provoke premature contractions (1881: 55), but there is limited evidence of this practice in other sources.

(Le Mée 1886: 93), a technique which did not become popular until the mid-nineteenth century (Shorter 1991: 199).⁹⁰ Representations of the different methods of achieving an abortion are each accompanied by different ideas on and assumptions about the female body and will be examined later in this chapter. However, in examining representations of these methods, it is critical to recognise the format in which they were presented and to interrogate why medical, legal and literary texts were so fascinated with this topic.

Legal Preoccupation with Abortion

In her examination of the attempts taken to counter depopulation, Sohn highlights that the legal emphasis on abortion was founded in the belief that it was ‘beaucoup plus facile à repérer que le malthusianisme conjugal’ (1996: 828). Due to its criminality, abortion could be identified and the guilty could be charged, in contrast to social norms and practices which were deeply embedded and difficult to alter. Nevertheless, most abortions still went unpunished (Le Naour and Valenti 2003: 57). Although the law was only seen to affect ‘des malchanceuses’, those who were punished were ‘presque toujours des ouvrières, des bonnes, des petites paysannes’ (Le Naour and Valenti 2003: 57) because they could not afford to avoid accusations by traveling or by visiting expensive doctors. Ferdut highlights that upper- and middle-class women ‘prennent les plus minutieuses précautions, et ne confient leur secret qu’à des personnes dont elles connaissent le triste talent et la discrétion’ (1865: 76) whereas working-class women did not have money to pay for discretion or the same network of guidance: ‘Privées de conseils, d’instruction et de fortune, elles s’adressent à de viles créatures’ (1865: 76).⁹¹ This difference between social classes led Tardieu to comment throughout his study that, not only were the abortion statistics misleading due to the amount of undetected crimes, but that they also included inaccurate representations of the women involved (Tardieu 1881).⁹²

⁹⁰ Tardieu gives a comprehensive overview of how injections were used to provoke abortions (1881: 54). A literary representation of this practice can be found in Dubarry’s *Les Femmes eunuques* (1898), where it is performed by the midwife Mme Louchaud who is known as a ‘laveuse’ (1898: 75) for how she ‘washes out’ the foetus with her injections.

⁹¹ This successful concealment of upper- and middle-class abortions is referred to in Ferdut’s assertion that ‘la majeure partie des avortements procurés dans un but criminel passent inaperçus, et sont voilés dans l’ombre des consciences coupables et discrètes’ (1865: 75).

⁹² Jones has commented that this is also the case in England (2011: 197).

At the beginning of the nineteenth century, there was a rise in the number of abortions that were prosecuted and it has been argued that this rise was due to the shift from traditional to mechanical abortive procedures (Fine 1986: 107). These modern procedures were easier to identify and prosecute as opposed to the potions and liquids used in previous centuries. However, it was still difficult to detect the traces of these procedures. If a woman died from an abortion then her body could be examined through autopsy. However, prosecuting and charging surviving women for having an abortion remained problematic. Injuries to the womb were not always visible through a speculum and Lemoine notes that ‘c’est souvent en dehors de l’expertise médicale que la justice a trouvé les éléments nécessaires pour démontrer la culpabilité des inculpées’ (1897: 47). Often, in abortion trials, it was the presence of peritonitis which demonstrated that an illegal abortion had taken place, the inflammation and infection resulting from the use of an instrument during the procedure (*Gazette des hôpitaux de Toulouse* 1887).

Equally, whilst the increasingly popular surgical and mechanical abortive procedures ensured a more reliable outcome than emmenagogic potions or drinks, the risks accompanying the procedures also increased. Specifically, the introduction of a foreign body and the puncture of the amniotic sack dramatically increased the risk of developing peritonitis or sepsis (Orfila 1823: 354 and 347). Additionally, as an illegal operation, surgical procedures were easier to detect and as Tardieu notes, ‘ils laissent des traces matérielles évidentes’ (1881: 52). These traces of the crime preoccupied physicians who were often tasked with the legal responsibility of investigating whether or not a woman had procured an abortion. If a woman died from the dangerous procedure then an autopsy was possible, increasing the chances of spotting the ‘traces’ or evidence of the abortion. However, if she survived the procedure and if she, or an accomplice, succeeded in disposing of the body of the aborted foetus, physicians would attempt to prove or disprove the allegation of abortion through an examination of the woman’s body and an interpretation of marks, symptoms and injuries. As noted by Tardieu, the conclusion of a successful abortion did not mark the end of the ordeal for women: ‘c’est là, au contraire, que le danger commence, car c’est par leurs suites funestes que se trahissent en général ces sortes de crimes’ (1881: 60).

The Fragile Body

When advising physicians on how to detect the evidence of an illegal abortion, many medical texts give guidance on ‘reading’ the female body, but in doing so contain seemingly paradoxical images of feminine anatomy. Initially, many of the texts emphasise that spotting the traces of an abortion is incredibly difficult and often unsuccessful (Ferdut 1865: 75). Tardieu highlights that ‘[quant] à rechercher dans la profondeur des organes les traces d’une opération, ni le toucher, ni même l’exploration à l’aide du speculum ne peuvent fournir aucun résultat certain’ (1881: 66). In these examples, the female body is presented as complex and rejecting medical interpretation or diagnosis. However, alongside this imagery of a reticent and enigmatic body is a contradictory and repeated emphasis on the fragility and sensitivity of the female reproductive organs.⁹³ Medical texts on criminal abortion also focus on the fragility of the female reproductive organs and encourage physicians to look for marks, injuries or scars on a woman’s internal organs. In his description of the dangers involved in abortive procedures, Dr Brennus highlights:

[La] nature a fait les organes génitaux de la femme avec tant de soin, leur a donné tant de délicatesse et de sensibilité, les a rendus si fragiles, qu’un attouchement quelconque surtout à cette époque de conception, peut les briser, les flétrir et amener leur destruction. (Brennus 1895: 11)

Equally, Dr Halmagrand advises that ‘le produit et ses membranes sont importants [*sic*] à examiner, puisqu’ils peuvent présenter les traces de l’instrument employé’ (1844: 75). Physicians are therefore advised to search for these marks and read them, interpreting the lesions on the female body and transforming them into legal evidence which could be used against the women in a criminal trial. Newspaper articles demonstrate the use of these marks as evidence of illegal abortion. In 1845, the *Gazette des hôpitaux civils et militaires* refers to a young woman charged with having undergone an abortion, ‘portant encore sur sa figure les traces des souffrances par elle endurées’ (1845: 1). In a literary example taken from *Fécondité*, after his daughter dies from an injury sustained during an abortion, Morange fears the prospect of ‘sa fille traînée en justice, son corps ouvert, étalé devant tous avec sa souillure’

⁹³ This sensitivity has previously been examined in Janet Beizer’s exploration of dermatographism on the skin of hysterical women (Beizer 1994: 20-29). In addition to creating a physical manifestation of the female body as text, dermatographism reinforced medical claims that the female body was sensitive and easily marked.

(Zola 1899: 395). The fear of autopsy and the scandal caused by a trial are accompanied by the same emphasis on the physical stain or mark left upon Reine's body by the procedure.

This fragility of the female body is also emphasised in representations of the banality of the tools used by abortionists. Whilst physicians owned professional tools which did not elicit suspicion, Ferdut highlights that non-medically trained women and some midwives used commonplace objects that would not arouse suspicion if they were inspected: 'les sages-femmes ont recours ordinairement à des objets plus ou moins grossiers, dont la possession ne saurait être aussi compromettante que celle d'une sonde à dard' (1865: 85). Tardieu also argues that in order to avoid suspicion, 'les armes les moins suspectes sont les préférées' suggesting that 'le génie du crime suggère les inventions les plus inattendues' (Tardieu 1881: 54). Furthering this notion, in *La Grappe*, Landay presents how a woman gives herself an abortion with a hat-pin (1904: 200) and Jones argues that the use of domestic objects such as knitting needles represented the disturbance of the domestic and traditional family home: 'Even the family hearth is not safe from the polluting touch of the abortionist' (2011: 208).

However, these crude and improvised tools are still shown to puncture or pierce the fragile female body. In *Fécondité*, the inconsolable Morange recalls his wife's abortion to Mathieu:

[La] tringle de rideau, le fer ignoble et banal, dirigée pourtant par une main experte, mais qui devait s'être trouvée devant un organe descendu très bas, et qui l'avait perforé d'un coup trop vif. Une hémorragie s'était aussitôt produite, contre laquelle la sage-femme avait d'abord lutté vainement. (Zola 1899: 200)

Emphasising the 'banal' nature of the tool used during the abortion and its everyday use highlights the unhygienic and amateur nature of the procedure which nevertheless prompts an unstoppable haemorrhage. However, in Morange's confession, the voice of the mid-wife is omnipresent and it is clear that he is repeating what he has been told by the abortionist. The 'main experte' which performed the procedure and the 'organe descendu très bas' shifts the cause of Valérie's death away from the abortionist, blaming the tragedy on the irregular and fragile body of the victim.

Stereotypes of Victimisation

When discussing and representing these different methods of abortion, medical and medico-legal documents appear to present a method of ‘reading’ the female body, examining the marks, symptoms and stains and constructing a narrative in which the woman is either innocent or guilty. This constructed narrative is most explicitly evident in fictional descriptions of these women, revealing medical preconceptions and attempts to understand why women would seek out an illegal abortion. A prime example of this can be found in Ferdut’s medico-legal treatise:

Lorsqu’une malheureuse femme, après avoir entretenu des relations intimes avec un homme dans des conditions illicites, ne voit plus ses règles, lorsque ses seins se sont modifiés, lorsqu’elle a éprouvé tous les troubles sympathiques de la gestation, lorsqu’enfin elle est assurée d’être enceinte, n’ayant pas le courage de sa position, elle nourrit dans son cœur, avec le remords, la pensée d’un crime qu’elle craint d’accomplir. Au moyen d’exercices violents, de marches forcées, ou à l’aide d’autres petits procédés, elle espère faire revenir ses règles tant désirées; mais la nature inexorable déjoue ses tentatives, et, par l’évolution de phénomènes non trompeurs, elle vient lui donner la certitude de la position, si elle doutait encore. Elle refuse vainement de comprendre cette sentence, elle hésite toujours... (Ferdut 1865: 77)

The narrative continues as the woman approaches a midwife who prescribes emmenagogic drinks, and when they do not work, the midwife ‘annonce dans un langage expressif qu’une seule ressource subsiste: “*Décrocher l’enfant, puisque rien n’a pu le faire couler*” (1865: 77). Whilst still condemning abortion, this ‘identikit’ of a woman who undergoes the illegal procedure presents her as a victim, who only rejects maternal instinct and moral virtue when she is pushed to take desperate measures. In these narratives, physicians focus on a stereotype which reinforces supposedly natural female qualities of maternal love, empathy and sensitivity, blaming their decision to seek an abortion on social norms and economic factors. In his polemical text on abortion, Dr Brennus reinforces that ‘je ne blâme les malheureuses, les délaissées qui payent de la honte et de la réprobation publique, leur faiblesse aux tentations irrésistibles de l’amour’ (Brennus 1895: 5). Thus, the majority of medical examinations of abortion present a stereotype of a young woman who, seduced and

abandoned by her lover and fearing society's condemnation and marginalisation, is pushed to the desperate measure of seeking an abortion.⁹⁴

In addition to this stereotype of the seduced and abandoned young woman, some texts present married women, pressed into seeking an abortion through poverty. In an article in *Le Figaro*, Zola writes:

Une femme qui, de trois accouchements, avait eu quatre enfants, était assise sur le banc des accusés; elle s'était aperçue un jour qu'elle était enceinte de nouveau. Son mari est portefaix et gagne très peu. Désolée elle va trouver une voisine et lui raconte son malheur; et tout à coup une idée lui vient – si je savais comment faire passer ça! – La voisine ne sait pas le moyen, mais elle connaît une femme qui le sait; elles vont la chercher au lavoir... Elle plonge une grande aiguille, et l'avortement est obtenu; comme elle est pauvre, elle ne demande que quelques sous et l'ouvrière lui donne ce dont elle peut disposer, 4,50 fr. Et voilà les trois femmes en Cour d'Assises. Auriez-vous le courage de condamner ces trois femmes, qui entre elles avaient neuf enfants et qui pleuraient? Moi je n'ai pas eu ce courage. (In Lombroso 1896: 176)

As in previous examples, the married woman is not presented as rejecting maternity, but instead as seeking an abortion to avoid the suffering of her existing children. These women are represented as remorseful and pitiable, prolonging imagery of victimhood. In many representations, the women are also presented as being pushed into an abortion by their lover or husband. In reports from abortion cases, it was frequently highlighted that 'l'amant est celui qui prend en charge l'avortement, achetant lui-même breuvages et produit abortives' (Gouwy in Le Naour and Valenti 2003: 89). Equally, in a literary representation found in *Les Malthusiennes*, it is Diane's lover Maurice who pressures her into an abortion by purchasing emmenagogic substances and organising the abortion (Boutique 1893: 19 and 34), whilst Diane, 'prise au piège de son amour illicite et acculée au crime, a accepté la situation triste et périlleuse' (1893: 34). Therefore, in addition to becoming victims of society and poverty, these women are frequently presented as being coerced into seeking an abortion by a man, again reinforcing gender differences and exculpating women from their actions.

⁹⁴ Referring to nineteenth-century English legal changes, McLaren argues that new bills making abortion illegal attempted to present abortion 'as a form of murder in which the victim was not the foetus but the woman' (1990: 191) due to increased deaths from dangerous abortifacient pills.

However, although populationists such as Ferdut, Brennus and Zola present a sympathetic image of women who underwent abortions due to illegitimate pregnancies or poverty, in the latter half of the century, physicians became aware of a growing proportion of middle and upper-class women who sought out abortions for different reasons. Rather than unmarried women, seeking to avoid social disapproval, these women were married, financially secure and fully able to raise a child (Le Naour and Valenti 2003: 83; McLaren 1983: 140). In a study of 726 trials for abortion and fifty-two abortion attempts between 1890 and 1914, Sohn cites that thirty-seven percent of women were married (1996: 829) and an article in the *Gazette des hôpitaux de Toulouse* notes that ‘les avortements deviennent de plus en plus fréquents, que toutes les classes de la société se rendent coupables de ce crime, que les femmes mariées le consomment avec la permission de leurs maris’ (1891: 23). This ‘agreement’ of the husband demonstrates an increased acceptance of abortion as a legitimate means of limiting family size, rather than a crime committed only by desperate and ashamed women. In fact, in women’s accounts and justifications for seeking an abortion, Sohn comments that from the 1890s onwards, accused couples increasingly did not invoke misery or poverty as their justification, but instead referred to ‘la gêne’ (1996: 834). References to financial difficulty or expense emphasises middle-class views and priorities on respectability and lifestyle. As commented upon in the previous chapter on contraception, many couples in Zola’s *Fécondité* embody this desire to limit family size and avoid the scandal and financial drain of numerous offspring.

In a rare example of the representation of an abortion trial, the third act of Brieux’s *Maternité* is set in a court house during the trial of an abortionist and the women accused of employing her services. The judge is portrayed as naively misunderstanding the reality of women’s lives and poverty, holding their actions up against a moral code that is presented as inapplicable to early twentieth-century French society. Consequently, the counsel for the defence does not defend the crime of abortion, but defends the women’s actions through his claim that, ‘en ne considérant pas comme respectable toute maternité quelle qu’en soit l’origine, la Société s’est enlevé le droit de condamner un crime rendu excusable par l’hypocrisie des mœurs et l’indifférence des lois’ (Brieux 1904: 178). The play ends with a revolutionary uprising of the accused women and their defence, their legal representative shouting over the complaints of the judge, ‘Leur crime n’est pas un crime individuel, c’est un crime social’ (1904: 225), whilst the abortionist and other women in court chant: ‘Les coupables, ce sont les hommes,

les hommes! Tous les hommes!’ (1904: 227).⁹⁵ Whilst this progressive and feminist perspective of criminalised abortion emphasises the hypocrisy in social norms and the legal system, it nevertheless perpetuates representations of women as victimised by society and the law.

It is therefore evident that these representations of abortion attempt to reinforce contemporary gender differences, presenting women as victims and refusing to deny their supposedly instinctively ‘maternal’ natures. However, in the late nineteenth century, some studies and texts begin to present this stereotype as limited and incomplete, emphasising that many women and couples chose to undergo an abortion despite the pregnancy’s social legitimacy and financial stability. Although some studies of abortion warn against placing too much emphasis on the increased freedom over the body engendered by abortion, representations of women as victims of society and medicine risks achieving the opposite extreme.

The Leaking Body

Alongside the victimisation of women in these representations, texts also appear to contain two contradictory representations of the female body; one in which the body is hidden and secretive and another in which its fragility prevents the concealment of criminal acts. Through these marks and traces, the reproductive organs seem to ‘betray’ the woman and reveal her illegal activity. However, when trying to conceal the evidence of an illegal procedure, the female body betrays itself in another way, through the lack of control over bodily fluids. As Beizer comments on representations of hysterical bodies: ‘[The] doctors repeatedly paint woman as incontinent slave to her secretions, unable to control her dripping, flowing, spurting, oozing bodily fluids’ (1994: 41).⁹⁶ Similarly, medical representations of criminal abortion place great emphasis on female bodily fluids, primarily blood or lochia (post-partum discharge). Whereas in other stages of women’s reproductive cycle, the leaking of bodily fluids is viewed with male suspicion and distrust (Kukla 2005), in abortion it acquires legal significance as evidence of a crime.

⁹⁵ This sympathetic treatment of abortion can be linked to Spiral’s *Essai sur l’étude sur l’avortement* (1882) which was one of the first texts to be openly sympathetic of abortion in some cases.

⁹⁶ Rebecca Kukla has similarly argued that in literary and medical texts, pregnant and newly maternal bodies ‘leak, drip, squirt, expand, contract, crave, divide, sag, dilate and expel’ (2005: 3).

Liquid Evidence

Whilst the establishment of a woman's pregnancy depended on a lack of menstruation: Agnès Fine argues that the findings of an abortion trial depend on 'l'absence ou [...] la présence des règles' (1986: 113). However, the presence of a large amount of blood or lochia could indicate an abortion or miscarriage. In Dr Alibert's *L'Avortement* (1907), the author places emphasis on blood as a symptom of the procedure: 'Une perte sanguine modérée ou abondante accompagne constamment le travail de l'avortement. [...] La perte sanguine est même le phénomène dominant et souvent le seul signe appréciable de l'avortement des premières semaines de la conception' (1907: 31-32). Dr Garimond also notes that the presence of lochia could be used as evidence that an abortion had taken place and that, when inspecting a woman's body, physicians should look for 'taches de sang ou des liquides amniotiques' (1873: 421).

In the unusual text *Considérations medico-légales sur l'avortement: suivies de quelques réflexions sur la liberté de l'enseignement médical* (1844) by Dr Charles Halmagrand, the author recounts the legal procedure after he was accused of carrying out an abortion on a young woman. The text contains reports from other physicians involved in the investigation, many of which emphasise the importance of blood and liquids in the gathering of evidence: 'Sa chemise est salie par de nombreuses taches d'un blanc grisâtre' (Devergie et Ollivier in Halmagrand 1844: 62). Additionally, two quantities of linen are collected as evidence by the police and the various marks and stains upon them are examined in great detail by the physicians:

Nous avons examiné deux paquets de linge saisis par M. D***, commissaire de police, à l'effet de déterminer s'ils peuvent être rattachés au fait d'un avortement; cette opération a eu lieu le seize avril mil huit cent quarante et un. L'un des paquets porte pour étiquette trois chemises et un torchon déposés par la femme G***. L'une des trois chemises est ensanglantée dans sa moitié inférieure. Au milieu des taches de sang se trouvent quelques caillots de sang noir, épais, dont le volume varie depuis une noix jusqu'à celui d'un petit œuf de poule; ces caillots ne renferment AUCUN EMBRYON OU DÉBRIS D'EMBRYON, DE PLACENTA OU DE MEMBRANE. Les deux autres chemises présentent de nombreuses taches de sang pur ou de sang mêlé de sérosité. Il en est de même du torchon, qui est sali dans une grande partie de sa surface par les mêmes liquides. L'autre paquet

est étiqueté: deux chemises, une serviette et un torchon saisis au domicile de la fille P***. La serviette est salie dans presque toute sa surface par des taches jaunâtres du genre de celles qui produiraient les suites d'un avortement ou d'une couche, lorsque l'écoulement sanguin est supprimé par le développement de la fièvre de lait. Sur les deux autres chemises existent, tant en avant qu'en arrière et au voisinage des parties génitales, des taches dont les unes sont sanguinolentes et les autres séreuses. (Olliver and Devergie in Halmagrand 1844: 62-63)

The length of this description attests to the importance placed upon the liquids and stains, whilst an emphasis on colour, texture and viscosity re-emphasises the variety of liquids produced by the female body and the importance of differentiating between them.

In other medical texts, physicians also note the stains or marks on the linen of women who were suspected of having undergone an abortion and these fabrics were used as evidence in trials. For example, Dr Troudes noted that when investigating a suspected abortion, he noticed that 'du sang frais tache la chemise' (In Alibert 1907: 70). Newspaper reports also confirm the use of stains or liquids as evidence of abortion. In 1887, the *Gazette des hôpitaux de Toulouse* reports that 'des linges maculés' were used as evidence to prove that an abortion had taken place, as 'il y a eu nécessairement expulsion de l'œuf, hémorragie plus ou moins abondante, [et] écoulement de lochies' (1887: 5).

These examples demonstrate a medical practice of viewing female bodily fluids and interpreting their origin and meaning, leading to a form of reading in which the physician linked the 'clues' or 'traces' into a narrative, revealing whether a woman had undergone an abortion or suffered from an unprovoked miscarriage. Discussing how abortion was presented as invading the domestic space with its use of banal objects, Emma Jones argues that 'it is only when the domestic is sanitized by science, and when the evidence is submitted to forensic examination and analysis, that order can be restored' (2011: 208). This process and the relevance of bodily fluids is also evident in literary representations of illegal abortions. In Boutique's *Les Malthusiennes*, the abortionist and herbalist Madame Vireloches performs procedures on her own bed at the back of her shop. After the customers have left, '[elle] fait la couverture de ce lit sur lequel deux clientes encore se sont confiées à sa dextérité ce jour même, et dans lequel, tout à l'heure – il se fait minuit – elle s'endormira paisiblement' (Boutique 1893: 146). The making of the bed indicates a changing of linen, the removal of any evidence and a return to the domestic. The importance of the stains and expelled foetus are re-emphasised when it is revealed that to dispose of any evidence of the procedures, the

abortionist hides the remains of the foetus and bodily fluids ‘dans des pots de fleurs, qu’elle ou Madeleine allaient déposer sur des tombes’ (Boutique 1893: 156). In a nightmare, the abortionist sees herself before a skeletal judge and jury: ‘Les mains sans chair, sans muscles, les mains qui ne sont plus que de cliquetants osselets, se repassent un pot de fleur, pris sur la table des pièces de conviction’ (Boutique 1893: 156). This literary example is evidently inspired by the criminal trial of Constance Thomas, the ‘avorteuse des Batignolles’.⁹⁷ Reporting on the trial, *La Lanterne* reports that in addition to disposing of a foetus by putting it into a sewer opening, the abortionist’s accomplice and lover:

Achetait un grand pot de fleurs, plaçait au fond l’objet encombrant et plantait par-dessus un superbe pied de reines-marguerites, puis le visage contrit, et la larme à l’œil, il partait, son pot de fleur sous le bras, au cimetière de Clichy, où il le déposait comme une pieuse offrande sur une tombe de belle apparence. (1891b)

This legal trial clearly attracted literary authors since, in addition to Boutique’s references in *Les Malthusiennes*, Brioux’s representation of an abortion trial in *Maternité*, names the accused abortionist Madame Thomas. Tournier also refers to the trial in *La Fabrique d’anges* when an abortionist physician and his accomplice discuss how to dispose of the evidence: ‘Il y a bien le truc de ce confrère célèbre qui, pour de débarrasser d’un foetus trop encombrant, l’enterra un jour sous une belle plante au fond d’un pot de fleur, et s’en alla d’un ait recueilli le déposer sur une tombe déserte’ (1907: 67).

Indeed, in *La Fabrique d’anges*, the legal significance of abortion’s evidence is a recurrent motif throughout the novel. After performing an abortion on his lover, a young physician views the resulting foetus: ‘sur un rayon, roulé dans le torchon qui lui sert de linceul, l’enfant, une fille, est là’ (1907: 34). Indeed he becomes fixated by this evidence of the crime: ‘Il lui faut disparaître ce foetus. [...] il lui semble que le foetus exhale déjà une odeur pénétrante et insupportable’ (1907: 34). Emphasising the unprofessional methods used in the abortion and lack of foresight, the physician hides the foetus in an old biscuit tin and puts it in the back of a wardrobe (1907: 34). However, as the novel progresses, his gaze repeatedly returns to the wardrobe and the biscuit tin as the foetus decomposes (1907: 66), a repeated motif which emphasises the criminality of his act and its legal ramifications. The physician becomes increasingly preoccupied with how to dispose of evidence of his crimes, particularly when

⁹⁷ Le Naour and Valenti give an overview to this trial (2003: 136-37).

he begins to perform abortions on other women, finally deciding to burn the evidence, a scene which is accompanied by gruesome descriptions of decapitation (1907: 70-74). This recurrent theme of the disposal or destruction of evidence emphasises not only the importance of this evidence in legal trials, but also the extent to which reports of contemporary legal trials inspired and influenced sensationalist literary plots which focused on the more salacious details to capture the public imagination.

La Fabrique d'anges is particularly notable for its explicit use of contemporary details. Whilst other texts such as *Les Malthusiennes* make veiled allusions to contemporary trials, Tournier's novel makes these references explicit. Mentions of the exact texts of Tardieu and Brouardel which inform the protagonist how to perform abortions, and references to the 'Avorteuse des Batignolles' trial, are also accompanied by detailed documentation of all the contemporary abortion cases which inspired the novel, found in an appendix at the end of the text (1907: 225-37). More than ever, this novel reinforces how literary representations were inspired by contemporary discourses whether explicitly admitted or not. Furthermore, these journalistic and literary representations of abortion emphasise the importance of attempts to conceal the evidence and stains of the procedure and a fear of their discovery, highlighting that female bodily fluids constituted criminal evidence which could betray both the abortionist and the accused woman.

Abortion as a Mismanagement of Bodily Fluids

This use of fluids as evidence and anxiety around their concealment can be connected to Law's assertion that 'the task of producing citizens fit for empire hinges on the regulation of fluids' (Law 2010: 131). In abortion, blood and other bodily matter expelled with the foetus are the ultimate mismanagement of fluids; not only has the female body rejected its biological function and the opportunity to produce a new citizen, but it has also uncontrollably leaked blood and liquids, particularly in the frequent cases where the procedure caused haemorrhaging. A fatal example of this mismanagement can be seen in Zola's *Fécondité* when the pregnant Valérie is fatally injured by an abortion. During the procedure, 'une perte s'est déclarée, si forte, qu'il a été impossible d'arrêter le sang' (Zola 1899: 199). The description of the haemorrhaging Valérie as 'blanche' and 'glacée' (1899: 200) attests to her

loss of blood and the protagonist notes that her beautiful face has ‘une pâleur de cire, comme si tout le sang de son corps s’en était allé par la criminelle blessure’ (1899: 202).⁹⁸ Through these descriptions, the text presents the ultimate, unintentional mismanagement of female bodily fluids, as Valérie’s attempts to eschew her reproductive function escalates into an unstoppable and fatal leak of her blood. Equally, when Valérie’s daughter Reine later undergoes an abortion, the protagonist Mathieu is informed that ‘la pauvre petite [mourait] dans un bain de sang...’ (1899: 388), reemphasising the haemorrhaging that followed the procedure and the fatal mismanagement of bodily fluids. This is explicitly reinforced when Mathieu sees her corpse and, in an almost identical description to that used for her mother, Reine’s face is portrayed as having ‘une paleur de cire, tout le sang de son corps s’en étant allé par la criminelle blessure’ (1899: 397). Viewing the hastily cleaned up blood, for Mathieu, the entire procedure and tragedy for both mother and daughter is symbolised in ‘cette grande tache humide sur le plancher, mal essuyé et rougeâtre encore’ (1899: 397). Thus, in this text, rejection of a pregnancy is strongly associated with a mismanagement of one’s bodily fluids, escalating into a fatal draining of the body.

A similar, yet more extreme, representation of this notion can be found in Lepage’s *L’Âge d’or. Avortée*. In this text, Pierre gives his lover, Simone, an abortion after discovering that he has syphilis which he is unwilling to pass onto a child. With his medical experience the procedure appears to go well: ‘sans douleur, sans fatigue’ (1907: 134), seeming to contrast against a violent and painful backstreet abortion. However, Pierre falls asleep and when he awakes, Simone appears to be dead. She is ‘pâle, pâle, le visage cireux, les yeux clos, la bouche ouvert’ (1907: 138). Similar to imagery found in *Fécondité*, Simone is repeatedly described in terms of her paleness, extending to the surrounding area which is bleached of colour: ‘Sur la blancheur des draps, on distinguait à peine, – on percevait, à cause de l’auréole des cheveux blonds – sa tête blanche où la lueur de la bougie allumait des reflets d’ivoire’ (1907: 138). However, as with Zola’s novel, this imagery of lightness is suddenly and violently contrasted with a scene of extreme bodily leakage as Pierre tears off these white bedsheets:

⁹⁸ It is possible to see a link here between pure, white skin and moral corruption, bringing to mind Nana’s ‘cuisses de neige’ (1882: 205) between which she corrupts and infects all social echelons of Paris. Just as Valérie loses her blood through the criminal and morally condemned act of abortion, on Nana’s death bed, her decomposing corpse reveals and loses its corrupted contents: ‘C’était un charnier, un tas d’humeur et de sang, une pelletée de chair corrompue, jetée là sur un coussin’ (1882: 455). See Bernheimer (1997) for an examination of the links between *Nana*, prostitution and imagery of corruption in nineteenth-century France.

Ce fut un éclaboussement terrible... Du sang! du sang! du sang écarlate! du sang partout! sur les jambes, sur la chemise et dans les draps. Simone était inondée de ce sang qui avait ruisselé sur elle, qui s'était glissé sous elle, qui la vêtait, qui l'enveloppait, qui l'ouatait d'un coussin pourpre. (1907: 138)

Despite the implausibility of the text's suggestion that the unstained, white sheets were somehow plugging this flood of blood, the literary comparison highlights the scale and speed with which this leakage occurs, emphasised through dynamic, liquid vocabulary of 'inondée', 'ruisselé' and 'glissé'. Similarly, the implication that she is surrounded and cushioned by this pool of blood serves to reinforce this mismanagement of bodily fluids in the reversal of internal and external, whereby she becomes clothed in her internal fluids.



Source gallica.bnf.fr / Bibliothèque nationale de France

Figure 6: 'La Salamandre': Illustration of an abortionist packing away her implements after the procedure (Hermann 1907)

This fluid imagery and expansion continues beyond her own body: 'sa main à lui aussi était sanglante. Il la regardait. Il la sentait. Sa chemise aussi, couverte de sang, ses bras, son coude... Il se pencha hors du lit... Il y avait du sang sur le parquet, du sang coagulé sur quoi

son pied glissa.’ (1906: 138). This continuation and spread from Simone’s body onto Pierre reinforces his own guilt and responsibility in injuring her and causing this flood. This extreme representation of abortion and blood loss, drives home how the procedure and its rejection of pregnancy was interpreted as a mismanagement of bodily fluids, in addition to emphasising the perceived liquid potentiality of the female body, which is presented as producing such an extensive amount of blood that other members of the guest house are able to identify the room in which the accident has taken place: ‘C’est à la chambre 9! Du sang coule par-dessous la porte’ (1907: 140).

This emphasis on blood is also vividly evident in an illustration in *L’Assiette au Beurre*’s issue entitled ‘Les Faiseuses d’anges’ (1907) (Figure 6). In this image, the vivid, red splash of colour on the abortionist’s hands and linen, in addition to the distress of the woman, highlights the trauma of the procedure and the stains that remain from the loss of blood. As suggested by this image, even when an abortion is successful, texts present the female body as destabilised by the loss of bodily fluids; among other long-term effects of an abortion, Cazals lists ‘les irrégularités périodiques [et] les flueurs [*sic*]’ (1903: 17). In a later chapter, the same author enters into a lengthy description of a woman who has undergone multiple abortions, representing her as a dehumanised zombie:

Voyez ce teint blême et terreux qui semble déjà touché par la mort, ces yeux caves, ces joues creuses, cette démarche chancelante, ce regard oblique fuyant tous les regards, cette bouche ravagée laissant échapper par intermittence une sorte de salive impure. (Cazals 1903: 27)⁹⁹

The drained skin and empty eyes of the woman presents her as physically drained by her abortions and reduced to a cadaverous ghost, whilst the instability of her bodily fluids is emphasised through her leaking mouth in which even her saliva has become contaminated. The rejection of her reproductive ability is represented as reducing her to the status of animal as Cazals changes ‘femme’ to ‘femelle’ (1903: 27-8), later correcting himself, stating: ‘Elle a fait ce qu’aucune femelle des animaux les plus inférieurs ne fit jamais, tant il est monstrueux d’éteindre la vie là où la nature voulut qu’elle d’éveillât et qu’elle allumât son flambeau’ (1903: 28). The loss and mismanagement of bodily fluids through abortion is therefore not only attributed to physical injury but also to civic and moral damage.

⁹⁹ Cazals refers to the woman as ‘une faiseuse d’anges’ however it is evident that she is not an abortionist but a woman who has had multiple abortions.

This notion is present in *L'Autel* when, after undergoing an abortion, Suzanne suffers from multiple haemorrhages. Madame Féraud comments that ‘tout est déséquilibré en elle...’ (1907: 274), an instability which she attributes to the body’s confusion over the removal of the foetus: she asserts that despite removing the foetus, the woman’s body still thinks it is pregnant, leading to its confusion and destabilisation (1907: 274). This bleeding and drainage of bodily fluids is also extended to a sensation of emptiness experienced by Suzanne as she complains: ‘Je n’ai plus de forces, plus de ressort... et ma tête... ma pauvre tête est si vide...’ (1907: 161). Abortion is presented as having taken more than her foetus, it is implied that it has continued to drain her, both physically and mentally. This notion, in addition to the comments made by Madame Féraud, suggests a reinforcement of the concept that women’s ‘natural’ function is to reproduce, implying that, having been robbed of this task, her body is in disarray and unstable.¹⁰⁰

Taking a different perspective on the representation of liquids within abortion, the verbs used within these narrations also emphasise the movement and fluidity involved in the procedure. Sohn notes that ‘avorter’ did not become commonly used in women’s accounts of abortion until the end of the Belle Époque (1966: 891); before this verb entered common usage, other vocabulary was used to refer or allude to the procedure. Alternative vocabulary served a variety of purposes; some verbs such as ‘débarasser’ were codewords between abortionists and potential customers (Sohn 1996: 888), whereas others served to downplay the severity and risks of the procedure. Through the use of such language, some women cited their own ignorance when accused of an abortion: ‘Je ne savais pas ce que c’était un avortement, je croyais qu’on vous ouvrait le ventre’ said one worker in 1880 when accused of having an abortion (In Sohn 1996: 836). When women chose to have an abortion, ‘[souvent] elle a été décidée en termes assez vagues, on a promis à la femme de “décrocher, de faire couler son enfant,” et celle-ci peut rester dans l’ignorance des pratiques qu’elle aura à subir’ (Tardieu 1881: 54). This is reflected in *Les Malthusiennes* when, advertising an abortion, the entremetteuse Madeleine Chamois tells the customer that the procedure is ‘une bagatelle’ (Boutique 1893: 100).¹⁰¹

¹⁰⁰ Chapter Three also explores this notion.

¹⁰¹ This coded language was also present in advertisements for abortion. As it was illegal to advertise abortions in texts, abortionist mid-wives advertised they they were able to take ‘pensionnaires à toutes époques. Discrétion absolue’ (Retronews.fr; emphasis in original). Tournier represents a similar advertisement in *La Fabrique d’anges*: ‘Règles. Le Traitement merveilleux des sages-femmes les fait revenir radicalement et sans

The verbs commonly used in descriptions and accounts of abortion vary in their forcefulness and emphasis on movement and fluidity. In women's accounts studied by Sohn, and in medical texts like Tardieu's, the verbs 'débarasser' and 'décrocher' highlight to what extent the foetus was viewed as 'une charge, une importune, un parasite même dont il convient de se libérer' (Sohn 1996: 888). In contrast to representations which paint women as unwilling victims of the abortion industry, these verbs, in addition to more violent terms used such as 'crever' and 'ficher', present the animosity that these women felt towards the foetus and their strong desire to have it removed.¹⁰² Moreover, all of these terms emphasise the physical cut or piercing that was required to detach the foetus from the mother's body. In addition to these terms, Sohn has noted other, less violent, verbs used in women's accounts; for example, 'faire passer', 'faire glisser', 'faire sauter' are all used to refer to the procedure. Whilst these verbs all emphasise the movement and rapid expulsion of the foetus, 'faire glisser' in particular emphasises non-violent and fluid movement. However, the active associations of all of the verbs used, reinforce the desire to expel bodily fluids and substances from the body and also suggests some of the sales-patter used by abortionists to normalise the procedure and skirt round the taboo vocabulary surrounding abortion.

Public Fluids and Sanitarianism

In addition to the language used in representations of abortion, the politicisation and regulation of bodily fluids, specifically female blood, is evident in the public washing of dirty linen. For women of all social classes, dirty linen was frequently viewed by others. Working-class women would often wash their linen publicly, whether in the wash-house as seen in Zola's *L'Assommoir* (1877) or in fountains or rivers (Fine 1986: 114).¹⁰³ Correspondingly, middle and upper-class women would send their linen to a washerwoman or it would be

danger' (1907: 17). Gordon and Riddle also examine similar means of advertising emmenagogues or abortions in nineteenth-century America (Gordon 1977: 54; Riddle 1997: 232-38).

¹⁰² 'Crever' is also used in relation to an abortion in *Les Malthusiennes* (1893: 147).

¹⁰³ *L'Assommoir* presents how, due to crowded and overpopulated accommodation, intimate and private linen and washing becomes publicly displayed: 'Les fenêtres sans persiennes montraient des vitres nues, d'un vert glauque d'eau trouble. Certaines, ouvertes, laissaient pendre des matelas à carreaux bleus, qui prenaient l'air; devant d'autres, sur des cordes tendues, des linges séchaient, toute la lessive d'un ménage, les chemises de l'homme, les camisoles de la femme, les culottes des gamins; il y en avait une, au troisième, où s'étalait une couche d'enfant, emplâtrée d'ordure. Du haut en bas, les logements trop petits crevaient au-dehors, lâchaient des bouts de leur misère par toutes les fentes' (Zola 1996: 93).

handled and viewed by maidservants. The presence or lack of menstrual blood and other stains was therefore visible and public, making it harder for women to conceal a pregnancy or miscarriage. The public visibility of linen gave stains a legal weighting as evidence for or against abortion and during the nineteenth century, ‘il est quasi impossible à une servante de cacher ses ‘mois’ à sa patronne; très difficile à une fille de les cacher à ses sœurs et à sa mère’ (Fine 1986: 114).

These observations often prompted accusations of abortion. Addressing physicians, Ferdut states that cases were often prompted by ‘des dénonciations particulières ou par la rumeur publique’ (1865: 89).¹⁰⁴ In another case cited by Fine, the mistress of an accused servant was questioned by the judge and revealed that one chemise was stained by ‘une perte extraordinaire’ (In Fine 1986: 114), whilst in another report, the *Gazette des hôpitaux de Toulouse* narrates how a servant was interviewed and asked if she had been in the presence of ‘des linges maculés’ (1887). Despite the servant’s assertion that she had not seen anything, the prosecutors replied that ‘[ce] n’est pas possible’ as ‘[le] caleçon porte les traces du premier écoulement qui a succédé à l’opération. Les linges, les traces de l’avortement et de l’inflammation qui en a été la suite’ (1887). The testimony of other women was therefore increasingly used to confirm or deny unusual quantities or a lack of blood on women’s linen. In particular, washerwomen were seen as ‘indicatrices’ for concerned mothers, mistresses and the justice system ‘qui sollicitent systématiquement leur témoignage’ (Fine 1986: 114).¹⁰⁵ Therefore, the public presence of menstrual blood through hygienic practices of laundry permitted female bodily fluids to be politicised and viewed as evidence in legal trials. The use of bodily fluids in a legal and medical capacity links to Law’s assertion that bodily fluids connected an individual to society and that, during the nineteenth century, fluids were viewed as ‘objects proper to discipline and manipulation in the name of civic and collective interests’ (2010: 2).

This politicisation of fluids, as evident in representations of blood and lochia, can also be linked with representations of water and contemporary anxieties surrounding contamination and abortion. Jones has argued that definitions of abortions as unclean ‘reflected enduring

¹⁰⁴ Testimonies of public figures such as concierges were often included in abortion trials, for example in the trial of La Fille Michel in 1875 (*Le Petit journal des tribunaux* 1875: 1).

¹⁰⁵ Fine includes multiple examples of when the testimony of washerwomen was used in abortion trials (1986: 115).

popular beliefs concerning the pollutant capabilities of the female body and its reproductive substances' (2011: 208), specifically 'decomposing' matter such as lochia and postnatal blood. David Barnes comments that through texts such as the *Annales d'hygiène publique et de médecine légale* (1829-1922), it is evident that French sanitarians had 'a nearly obsessive focus on human waste and its disposal (or, more generally, on the threat of contamination in the urban environment)' (2006: 67).¹⁰⁶ This threat of contamination led to an emphasis on the separation and careful containment of different fluids (Barnes 2006: 67 and 100, and Law 2010: 4) and can be found in representations of abortive potions and drinks, emmenagogic substances that supposedly restarted menstrual flow, thus stimulating a miscarriage.¹⁰⁷

The four most commonly used substances were Chinese Juniper (savin), rue, wormwood and mugwort (Tardieu 1881: 31); all substances that had legitimate medical uses and were therefore commonly owned by midwives and pharmacists (Tardieu 1881: 39). These emmenagogues would commonly be made into a tisane (Le Naour and Valenti 2003: 96) and drunk by expectant women. In Landay's *La Grappe*, three male characters watch a poor and emaciated woman enter the bar and order an absinthe, commenting:

Voilà, une qui va se drogue pour éviter une grossesse. En sortent d'ici, elle va aller chez le pharmacien. Ah! Je le connais, ce tout d'achat-là: huit sous d'absinthe, six sous de safran, un semi-setier de vin blanc et partez dans le plomb!... D'ici une heure, elle aura avalé sa mixture et ce soir ou demain matin, elle sera soulagée. Si ça ne réussit pas, en avant le vinaigre et l'eau de savon... Ma bourgeoise l'a fait plus de dix fois. (1904: 5-6)

Boutique's *Les Malthusiennes* also includes representations of many of these substances and methods. When the prying concierge Madame Balduc enters the apartment of the pregnant Diane, she notices:

Sur un meuble le safran, l'absinthe, le lierre terrestre, dont Maurice espérait des effets si énergiques et qui n'ont fait que donner des nausées; ou bien la rue, l'armoise et la sabine dont il va falloir en une épreuve dernière, boire l'odieuse tisane, nul doute que le secret ne fût au trois quarts découvert. (Boutique 1893: 37)

¹⁰⁶ See Goubert (1986) for a detailed study of sewage in the nineteenth century.

¹⁰⁷ The majority of contemporary physicians claim that these substances were ineffective unless they were taken at such strengths that they also poisoned the mother. In *Les Malthusiennes*, during a discussion on the different substances that could be taken by women, one woman comments: 'Pourquoi pas, tout de suite, un flacon de laudanum ou d'acide prussique! L'enfant et la mère avec' (1893: 90). Ferdut also states that '[j]amais ces substances n'ont procuré la fausse couche' (Ferdut 1865: 81).

Later in the text, Madame Balduc finds the same substances in her own daughter's room, confirming her suspicions of pregnancy (1893: 51) and highlighting that the use of these substances was omnipresent in all social classes.

Imagery of poisoned and contaminated water is evident in representations of these emmenagogic tisanes. On looking around Diane's apartment, Madame Balduc spots 'de traces de drogues', noticeable due to the marks 'laissées par leur concoction dans les vaisselles de cuisine' (1893: 42). These traces and residues attest to the contamination of the water and the concept that the tisane is so harmful that it marks and stains the vessels used to prepare it. Madame Balduc also comments on 'certain bain de pieds sinapisé, dont la preuve ne s'était pas entièrement perdue dans les eaux ménagères' (1893: 42).¹⁰⁸ This imagery of infused tisanes and altered bathwater can be linked to concepts on the fungibility of liquids (Law 2010: 3 and 7). These concepts appear to be present in the consumption of and bathing in contaminated waters. Laqueur traces how Hippocratic ideas on fungible fluids presented the body as needing a balance of fluids; pregnant women and nursing mothers 'did not have a surplus and therefore did not menstruate' (1992: 36).¹⁰⁹ These nineteenth-century representations appear to suggest that by resetting this balance, menstrual flow will return, thus ending the pregnancy. It is therefore possible to view the consumed tisane as converted into a restarted menstrual flow, whilst the soaking and absorption of the mustard infused water is also transformed into blood. The quantity of liquid remains the same but its nature and function is transmuted by the female body.

This fungibility and fears of contamination are also present at a non-corporeal level through the disposal of these liquids. Similarly to the previously examined representations of stained linen, the concept of discoloured or contaminated water constitutes evidence of an attempted abortion. However, the disposal of the mustard bathwater in 'les eaux ménagères' (1893: 42) raises imagery of poisoned or contaminated water entering the water system and polluting it, denying nineteenth-century sanitarian attempts to regulate and contain different liquids. Anxiety around this issue can also be located in criminal attempts to dispose of the evidence of abortions. In the notorious trial of the 'Avorteuse des Batignolles', it was noted twice that

¹⁰⁸ Hot foot baths and mustard baths are listed as commonly practiced methods for attempting to prompt a miscarriage (Tardieu 1881: 26).

¹⁰⁹ Shorter also notes that, until the 1930s, physicians operating under theories of humoral medicine misguidedly provided women with abortifacient herbal remedies and emmenagogues (1991: 180).

when the abortionist's accomplice went to dispose of a fœtus, '[il] se rendit près d'une bouche d'égout, et, après s'être assuré que personne ne l'observait, sortant le fœtus du panier dans lequel il l'avait apporté il le lança dans l'égout' (*La Lanterne* 1891b). Indeed, sources abound with links between sewers and the disposal of foetuses: in Zola's *Fécondité*, as the protagonist Mathieu is disgusted by abortion, adultery and the fraudulent sexual practices of society, he comments that 'tous les égouts de la grande ville roulaient des petits cadavres' (1899: 211). Similarly in *L'Enfance Malheureuse* (1896), Strauss comments that: 'la police ne découvre qu'une faible partie des embryons jetés à l'égout ou au ruisseau' (1896: 32).

Koos argues that the concept of the sewers as a dumping ground for aborted foetuses became an exaggerated urban legend in *fin de siècle* France alongside 'the idea of the sewers as the spatial accomplice of the abortionist' (2001: 268). However, even if exaggerated in sensationalist press articles and literary texts, the association between illicit criminal activity such as abortion and the sewage system demonstrates social and hygienic anxiety surrounding the disposal of criminal evidence and the spatial potential of the sewage system. Jones has also commented that, in the nineteenth century, 'the labelling of abortionists as dirty, and as carriers of infection, reflected not only growing [early] twentieth-century concerns of public health but it also associated the lack of cleanliness with dubious morals' (2011: 205).

Nowhere is this more clearly evident than in the career of Alexandre Parent-Duchâlet, studied by Corbin and Bernheimer. His co-focus of the sewage system and prostitution reveals that, to Parent-Duchâlet, 'prostitution is another kind of sewer, a place of biological decomposition and moral decay' (Bernheimer 1989: 15). The contemporary belief that work in the sewers allegedly exacerbated venereal disease leads Corbin to assert that, in Parent-Duchâlet's mind, 'the virulence of the illness transmitted by female sewers, by the vaginal filth of fallen women, is naturally linked to the mire and to excremental effluvia' (Corbin in Bernheimer 1989: 16). These representations demonstrate concerns around the different types of criminal 'waste' that were entering and contaminating the water and sewage system. Barnes identifies how workers who lived in filthy conditions were seen to resist the tenets of modern bourgeois identity, such as: 'cleanliness and order in public and domestic spaces [...], moderation and self-control, [...] containment and disposal of bodily substances; and [...] a progressive distancing of individual human bodies from natural functions, from

animals, and from one another' (2006: 93). However, it is possible to see the criminal evidence and results of abortion as threatening these tenets of modern hygiene, in addition to prompting imagery of social contamination as the criminal legacies of abortion openly mingled with the regulated and 'hygienic' bodily substances of 'respectable' bourgeois families.

This association between abortion and sewage is also explicitly evident in literary representations of abortionists' establishments. Returning once more to the portrayal of abortion in *Fécondité*, representations of the midwife and abortionist La Rouche's establishment are associated with dirt and poor hygiene, such as the entrance, described as 'pareille à un fond de citerne' (1899: 201). Described as 'une maison noire du vieux Paris' (Zola 1899: 172), Koos comments that the text associates the abortionist's establishment with pre-Hausmannian Paris, relegating abortion to 'an ominous, pre-urban dark age' (2001: 267) whilst contrasting it with the 'natural' fertility of the protagonist Froments, who are associated with the industrial and colonising future of France. This leads to a somewhat contradictory representation of abortion in *Fécondité*. On one hand it is presented, alongside the use of contraception, ovariectomy and other means of reducing family size, as a modern phenomenon, associated with the dark side of industrialisation, individualism and unregulated medical advances. However, these same descriptions link it to a dark, savage and pre-modern Paris, which is morally and medically under-regulated.

Combining these different portrayals, when investigating abortion, the medical gaze is presented as overcoming the female body's concealment of illicit acts and of reading upon its bodily fluids a narrative in which the woman is judged to be innocent or guilty. Not only do these representations reinforce wider imagery of the woman as a leaking vessel, but they attest to the importance of bodily fluids in the criminal investigation of abortion, in addition to presenting the criminal procedures as a mismanagement of bodily fluids which leads to instability and often fatal haemorrhaging. The vocabulary used to describe these procedures reinforces the movement and fluidity involved and these same representations can be linked to the contemporary sanitarian movement in the late nineteenth century, embodying anxiety around contamination and the fungibility of liquids. This emphasis on female bodily fluids could also be viewed alongside 'a more general concern to bring the most intimate areas of private life within the pale of public policy' (McLaren 1983: 4), a move which was

accompanied by comparisons between pre- and post-Haussmannian Paris and contemporary ideologies of modernity and cleanliness. It is therefore evident that liquids, specifically, blood and lochia, play a hugely important role in representations of abortion, whilst reinforcing wider beliefs on the nature of the female body and supporting contemporary political and medical pro-natalist ideologies which rejected all forms of family limitation or fertility regulation.

Regulated Childbirth

In comparison to the other texts examined in this thesis, in which elements of fertility or maternity are the central plot focus, childbirth is only occasionally represented in a sustained fashion or with any great detail. Although present in Zola's *Pot-Bouille* (1882), *La Joie de Vivre* (1883) and *Fécondité*, popular novels have a tendency to skim over scenes of birth, with the exception of Bru's *Le Droit d'être mère* and Couvreur's *Le Fruit*. This lack of representation in popular novels can perhaps be attributed to a general lack of male presence during childbirth, as most births continued to take place under the supervision of a midwife and mostly without the presence of the male lover or husband (Brodsky 2008: 67). Furthermore, childbirth also lacked the sensationalist and controversial impact which accompanied discourses of abortion, contraception or sterilisation. However, with the discovery of germ theory and resultant lowering of fatality rate in maternity hospitals, an increasing number of women gave birth in these institutions under a considerable level of medical supervision (Fuchs 1992 121-23).¹¹⁰ As such, medical awareness and visibility of childbirth increased dramatically during this period as the growing availability of social welfare and charitable *asiles de maternité* resulted in greater contact between physicians and labouring mothers. This medical visibility is reflected in popular literary engagement with the topic, as with both of the popular novels examined here which were written by authors with medical experience; Bru was the director of a number of hospitals, whilst Couvreur had qualified as a physician. This reveals why these popular authors described scenes of childbirth in such detail, while also suggesting why the scenes place such emphasis on medical regulation.

¹¹⁰ See Fuchs for a detailed description of these hospitals and the process of admittance (1992).

The Leakage of Birth

In line with discourses of sterilisation to be studied in Chapter Three, literary representations of childbirth often illustrate a silencing of the female body beneath the hands of the physician. As exemplified by Beizer in her analysis of birth in *La Joie de Vivre*, the labouring Louise's lapse of consciousness and her bared genitals 'constitutes a gap that the doctor/narrator can fill in with his own words' (1994: 201) and her body consequently becomes 'ventriloquized'. This same silencing can be observed in the use of anaesthetic during birth in Bru's *Le Droit d'être mère*. As Louise succumbs to chloroform 'elle ne remua plus que faiblement les lèvres et resta, immobile étendue, incapable d'accomplir aucun mouvement' (1901: 171). This silencing allows the physician to turn the infant inside her and birth it using forceps, emphasising both the verbal and physical passivity of the labouring mother.

However, looking beyond this silencing, aligning representations of abortion and birth reveals that the female body's ability to leak becomes a balancing act between too much or too little leakage, or between the 'right' and 'wrong' kinds of leakage. As has been established in Chapter One, a contemporary trend of viewing bodily fluids and emissions as a national resource presents 'unproductive' leakage as wastage and drainage. However, whilst representations of abortion employ imagery and metaphors of leakage and floods to reinforce the consequences of un-(re)productive sex, these same devices are accompanied by imagery of liberation in representations of childbirth, as the 'leakage' is legitimised by its (re)productive goals. This is explicitly referenced in *Fécondité*, when Mathieu, who has just visited Valérie's corpse at the abortionist with her husband Morange, returns to his wife Marianne who is in labour. As he kneels to comfort her: 'il se rappela que c'était là le geste de Morange, posant, d'une même caresse, sa joue brûlante contre la main glacée de Valérie morte' (1899: 216). Through this comparison the text emphasises the difference between Valérie's 'main de marbre' (1899: 216) – whiteness representing contraceptive and abortive practices – and the quivering, trembling hand of his living and labouring wife, whose vitality embodies her and her husband's pronatalist creed.

However, this balance between different forms of reproductive leakage is precarious, as scenes of 'positive' leakage quickly escalate into threatening floods of blood, particularly

when poverty or illness has resulted in a less than ideal pregnancy. In Couvreur's *Le Fruit*, for one woman, childbirth becomes unbalanced by poverty and misery, transforming into a lethal leakage by post-partum hemorrhaging. In similar terms to descriptions of abortion, the novel traces 'la source rouge, qui avait traversé le lit et gagné le parquet' (Couvreur 1906: 8), resulting in death. Equally, in Bru's novel, Louise's suicide attempt during an illegitimate pregnancy is linked to post-natal haemorrhaging caused by the afterbirth (1901: 175). Linking to discourses of pregnancy which will be examined in Chapter Four, this fluid instability and precarious balance between productive and unproductive is presented as a defining feature of the fertile female body which is used to justify and legitimise medical intervention. For example, in contrast to scenes of abortion where abortionists are unable to halt the haemorrhaging of their patients, Bru's novel presents the value of medical intervention: 'Et replongeant la main dans le corps meurtri de la parturiente, il [le médecin] décolla le placenta et l'attira à lui' (1901: 175). As the final act in a gory and bloody childbirth scene, this re-plunging hand embodies the total and brutal medical manipulation of Louise's body and the cessation of the haemorrhaging.¹¹¹ Linking these scenes of post-natal haemorrhaging with imagery of abortion and contrasting it against the 'productive' leakages of childbirth situates this scene alongside the discourses on ovariectomy and pregnancy to be examined in Chapters Three and Four, in which medical and political pro-natalist rhetoric places emphasis on who *should* or *should not* reproduce, according to social class and wealth. As is mirrored throughout *Fécondité*'s evangelical emphasis on prudent and responsible reproduction, Couvreur and Bru's representation of post-partum complications recommends maternal 'responsibility' during pregnancy whilst reinforcing the instability and fragility of the maternal body, presenting the speed with which productive emissions could become excessive and turn to fatal leakage.

¹¹¹ This scene of childbirth, published at the beginning of the twentieth century, is comparable to that found in the Goncourt Brother's *Germinie Lacerteux* (1865) which not only traces the agony caused by the use of forceps, but also illustrates the impact of their use before anesthetic and antisepsis were employed during childbirth, resulting in the death of many women. Furthermore, comparison between the two novels illustrates the hygienic advancements made to maternity hospitals, as the earlier text reinforces the unexplained spread of puerperal fever and the complete lack of cleaning or basic hygiene (1890). Bru's later novel depicts the hygienic precautions and cleanliness of these modern hospitals, comparing the light, spacious and clean wards with the 'batiments sales, couverts de lèpre malgré des grattages successifs' (1901: 1) of the past.

Regulation of Labour

Within these similar trends in representation, the distinction between the leakages of childbirth and abortion can be viewed within descriptions of the maternal body and the infant. Whereas representations of leakage and bodily expansion in abortion, contraception and pregnancy present the threat of an uncontrolled or unregulated body, representations of birth present the body as ready and prepared for this ‘leakage’. In *Le Fruit*, as Bouret examines the heavily pregnant Antoinette, he comments that her breasts were ‘déjà impatients de leur fonction prochaine’ (1906: 306) and he listens to the infant’s heartbeat, ‘battant comme un rappel lointain, le galop de la vie qui approchait’ (1906: 306). Furthermore, Couvreur’s descriptions of post-partum bodies appear to reverse imagery of the unstable, leaking body, presenting pregnancy as a delayed ‘blockage’ or dam. One new-born infant stretches, released from his ‘longue captivité’ (1906: 7) in the womb, and when delivering Antoinette’s afterbirth, Bouret describes it as ‘les membranes, les parois de la prison fœtale entre lesquelles le fœtus avait grandi, qu’il avait si souvent battues de ses membres impatients’ (1906: 311).

However, what is particularly significant to these representations is that the ‘leakage’ caused by childbirth is medically regulated and controlled. In *Le Fruit* the ‘natural’ process of childbirth is emphasised through links between labouring women and animals: in the maternity hospital Bouret hears ‘une plainte de bête meurtrie, les hurlements brisés d’une femme que l’on délivrait’ (1906: 13), whilst during Antoinette’s labour, ‘elle exhalait sa souffrance dans des hurlements de bête torturée’ (1906: 307).¹¹² However, despite these references to the body’s instinctive contractions and its link to other mammals, all scenes of childbirth in Couvreur’s novel, are accompanied by medical supervision. This supervision is key to distinguishing between scenes of positive, productive, yet regulated, ‘leakage’ and scenes of unproductive or negative leakage.

One contrasting example of the latter can be found in Zola’s *Pot-Bouille*.¹¹³ When the servant Adèle gives birth in secret in her attic room, the moment of parturition is described as an uncontrolled flood of liquids and baby:

¹¹² These references are comparable to the birth scene in *La Terre* (1887), in which Lise’s labour is mirrored by that of the cow La Coliche who gives birth simultaneously (Zola 1895: 253-61).

¹¹³ Beizer briefly studies this scene, linking Adèle’s excremental leakage to the servant’s disposal of kitchen waste and sewage from the ‘polluted’ house (1994: 193).

Par moments, la tête qui sortait semblait vouloir rentrer, repoussée par l'élasticité des tissus, tendus à se rompre; [...] elle eut la sensation épouvantée que son derrière et son devant éclataient, n'étaient plus qu'un trou par lequel coulait sa vie; et l'enfant roula sur le lit, entre ses cuisses, au milieu d'une mare d'excréments et de glaires sanguinolentes. (Zola 1998: 450-51)

This illicit childbirth, which takes place alone and unsupervised, is presented as an uncontrolled leakage, and the mother's rejection and eventual abandonment of the infant is foreshadowed as it mingles with excrement and other bodily fluids. In contrast, the childbirth scenes in *Fécondité* and *Le Fruit*, illustrate medical control and regulation of the process, through the medium of the physician.

This is most explicit during Antoinette's birth in Couvreur's *Le Fruit*, where the scene's tempo is dictated by the movements of the physician, Doctor Bouret, rather than Antoinette's contractions. After examining her dilation, Bouret repeatedly oscillates between the bed and window during the labour, contrasting his observation of external nature with the childbirth taking place inside. Observing the 'legs inlassable' and 'labeur énorme' of the natural world, 'une plainte d'Antoinette ramena Bouret vers le lit' as her waters break (1906: 306-07). The tempo of the labour is set by the physician as he tells the mother 'bientôt... bientôt' as 'il retournait à son observatoire, près de la fenêtre, devant la nature' (1906: 307). Antoinette's contractions continue to be linked to the natural world as the pace increases: 'quel mouvement intense de création et d'éternité! Le monde se dilatait' (1906: 308). Finally, at the moment of parturition, the physician closes the window and returns to the bed, marking the impending completion of the labour and continuing to regulate and control the birth:

Bouret protégeant de la main droite la paroi inférieure contre la rupture, et modérant de la gauche l'élan de l'être nouveau. [...] Alors, Bouret enfonça les doigts, dégagea le cordon nourricier enroulé autour du cou de l'enfant, attira un bras qui résistait; et le reste du corps, propulsé à nouveau, suivit, dans un flot de sang, avec un bruit de pierre qui s'esclaffe dans l'eau. (1906: 309)

Contrasting this scene against that in *Pot-Bouille*, the physician's rhythmic oscillation between the window and bed acknowledges the instinctive contractions of the female body through comparison to external nature, whilst also superimposing the physician's medical rhythm over these bodily functions. Furthermore, Bouret's guiding and handling of the infant, employing terms such as 'modérer' and 'dégager', illustrates his key role in regulating the labour and process of birth. Although this imagery is not sustained to the same extent in

Zola's *Fécondité*, during the labour of his wife Marianne, the protagonist Mathieu enters the bedroom to see 'le docteur, en tablier blanc, qui, de ses mains d'opérateur sacré, aidait la venue de l'enfant, au seuil de la vie' (1899: 221). Glorifying the dexterity and skill of the physician's hands as he handles the infant mirrors Couvreur's similar representation of Bouret's skill, emphasising the medical role in regulating and controlling the birthing process at the crucial moment.

Even the nature of the expelled liquids surrounding the infant reveals this medical influence. In contrast to the 'mare d'excréments et de glaires sanguinolentes' (1998: 450-51) found in *Pot-Bouille*, the bodily fluids emanating from Antoinette are identified by the doctor as her broken waters and described as appearing 'par les voies naturelles un flot clair, mêlé de sang' (1906: 307). Indeed, despite both infants appearing in the same flood of liquid, Zola's references to wastage and mingled fluids are replaced in Couvreur by imagery of nature as the emission arrives 'avec un bruit de pierre qui s'esclaffe dans l'eau' (1906: 309), reaffirming the link between Antoinette's labour and the natural scenery observed by Bouret from the window. Furthermore, these scenes include emphasis on the hygienic and clean environments of medically-sanctioned births: in contrast to the dark, filthy room and old oilcloth on which Adèle gives birth in *Pot-Bouille* (1998: 450), Marianne's birth in *Fécondité* is accompanied by 'une telle gerbe épandue de soleil' and 'un luxe de linge blanc, toute une neige de linge' (Zola 1899: 221 and 214), and Couvreur's Dr Bouret washes his hands before his inspection, 'les ayant plongées dans une solution antiseptique' (1906: 306).

Overall, these descriptions of childbirth provide a fascinating counterpoint to representations of abortion, because although childbirth constitutes the exact opposite of abortion, the similarities between both processes result in similar trends of representation which reveal similar acts of bodily emission. However, the differences between these two scenes reveals how ideologies of the female body were manipulated to suit pronatalist rhetoric and glorify medical intervention and regulation. Although continuing to emphasise the medical 'colonisation' of birth, these novels reveal alternate ways in which the physician regulated this process and how this regulation became manifested within representations of the maternal body.

Representations of the ‘Monstrous’ Abortionist

Moving away from the role of liquids in scenes of both birth and abortion, representations of the individuals who worked in the abortion industry are highly relevant to an examination of the practice, and likewise reveal contemporary perceptions on the female and maternal body. The gender, profession, motivation and fee of different abortionists varied greatly. However, representations of abortion commonly distinguish between male and female abortionists (regardless of profession), and between those with a professional health qualification (physicians, health officers and midwives) and ‘non-professional’ women. Before the nineteenth century, abortions were rarely carried out by those with medical or health training (Sohn 1996: 866). However, due to increased demand, these figures became increasingly involved in the practice and Sohn argues that they fell into two groups: ‘les malthusiens et les profiteurs’ (1996: 866), distinguishing between those with moral or charitable motivations and those with purely pecuniary interests.¹¹⁴ As will be examined, the distinction between these two groups can also be aligned with gender, revealing disparities between how medical and literary texts represented male and female abortionists and how these representations were influenced by broader changes to medicine, maternity and popular concerns.

A Female Industry?

Despite the involvement of male physicians in the abortion industry, medical and journalistic texts in the latter half of the nineteenth century principally focus on female abortionists. Despite the professional distinction between trained midwives and back-street abortionists, these representations tend to group female abortionists in the same category. For example, the term ‘faiseuse d’anges’ was originally used to refer to non-professional or ‘back-street’ abortionists. However, by the end of the nineteenth century, it was also commonly attributed to any female abortionist, including midwives. Abortion was presented as a predominantly female industry (Sohn 1996: 871) and Ferdut similarly argues that abortion is ‘une véritable industrie de matrone ou principalement de sages-femmes, dans laquelle viennent s’associer quelques rares médecins’ (1865: 76). Other contemporary texts argue:

¹¹⁴ See Sohn for details on how prices varied between different social classes (1996: 898).

Lorsqu'une femme a envie de se faire avorter, elle trouve toujours au moins une sage-femme sur trois qui est toute disposée à pratiquer cette abominable manœuvre; la discussion ne roule que sur le prix de ce honteux marché. (*Gazette des hôpitaux de Toulouse* 1888)

Equally, in representations found in popular texts, abortionists are also chiefly female; For example in an edition of the satirical paper *L'Assiette au Beurre* entitled 'Faiseuses d'anges' (1907), all depictions of abortionists are female.

These assertions of a female dominated industry do not match with historical data collected by Sohn, in which physicians are shown to be the fourth most common figure to carry out abortions (1996: 866). In her study of 523 abortion cases, forty-five were carried out by physicians. Although this seems a low figure, it is only preceded by midwives (148), 'ouvrières' (54) and housekeepers (46). Taking account of the number of physicians in comparison with the other female roles, this study suggests that physicians certainly played a role as abortionists. Indeed, although medical texts, such as those cited above, attested to the negligible role of physicians in the industry, newspaper reports reference their involvement and, by the turn of the century, literary texts began to recognise the figure of the male physician abortionist.¹¹⁵ These representations can be divided into two categories; the neo-Malthusian disciple and the corrupt physician.

Examining the first of these categories, the neo-Malthusian disciple refers to an array of literary physicians who engage with abortion in order to reduce poverty, hardship or shame for women who have illegitimate pregnancies. In line with the neo-Malthusian advocacy of population planning in order to ensure adequate resources, abortion is viewed as providing the opportunity to reduce the economic hardship of these women. Koos has commented that a common characteristic of literary texts featuring representations of abortion are the male physicians who attempt to repair 'the medical problems created by poorly performed abortions, but also seek to appropriate the procedure itself for the territory of medical knowledge and practice' (2001: 269). Before the turn of the century, novels such as *Les Malthusiennes* presented physicians who show sympathy and understanding towards those who seek out abortions, but refuse to carry them out due to its illegality (Boutique 1893: 120). However, by the beginning of the twentieth century, authors began to present

¹¹⁵ Examples of physicians' involvement in abortion can be found in *Gazette des Tribunaux* (1831) and *La Lancette Française: Gazette des hôpitaux civils et militaires* (1845).

physicians whose neo-Malthusian beliefs justified their practice of abortion. For example, Kolney's *Le Crime d'engendrer* represents a physician who carries out abortions as he believes that the only way to relieve poverty is to '[donner] aux humbles le moyen de se dérober à la procréation' (1909: 7). Similarly, in Lepage's *L'Âge d'or*, a physician espouses the belief that abortion is the solution to stop those with inherited illnesses from passing on their flaws and creating ill or unhealthy children (1907: 28).¹¹⁶ Consequently, the protagonist Pierre, who has medical training, performs an abortion upon his pregnant fiancé after learning that he has syphilis (1907: 134), justifying the illegal procedure through an unwillingness to pass on the disease.

In regards to the other group of physician-abortionists, this literary character is defined by their betrayal of the Hippocratic Oath and abuse of medical knowledge. For example, in *La Fabrique des anges*, a young doctor teaches himself how to perform an abortion on his pregnant lover from the texts of Tardieu and Brouardel, illustrating how these medical studies could be abused (Tournier 1907: 30). Another notable example of this is Dr Saraille in *Fécondité*, who performs an abortion on Reine and is motivated by a desire for the fame and success of his mentor Dr Gaude (1899: 393). This secondary group can be situated within a broader literary trend at the end of the long nineteenth century, in which the morality and power of the physician was questioned, leading to vilified representations of the corrupt or depraved physician.¹¹⁷

Although further study of these figures would be fruitful, for the scope of this project, it is sufficient to note that, despite the condemnation of their actions, the only male abortionists present in literary works are physicians, whose criminal actions are justified through their system of beliefs, ambition, or the personal desire to stop the pregnancy of a lover. These justifications are juxtaposed against representations of female abortionists, who are mostly presented as motivated by financial gain. Furthermore, although not legitimising the abortions of physicians, these texts serve to reinforce medical dominance and value medical knowledge. Firstly, many of these physicians argue that abortion is a moderately safe procedure if carried out by a physician, as illustrated by Dr Flex in *La Grappe* who argues: 'Certes, souvent, nous voyons des malheureuses, surtout dans les basses classes, mourir des

¹¹⁶ This belief alludes to an increasing medical emphasis on theories of eugenics which will be examined in Chapter Three.

¹¹⁷ This trend will be examined in greater detail in Chapter Three.

suites d'un avortement. Neuf fois sur dix, cela ne provient pas de la gravité de l'opération, mais des conditions sanitaires dans lesquelles elle est pratiquée.' (Landay 1904: 98-99).¹¹⁸ This contrast between the 'qualified' physician and clumsy, dangerous midwife is also reinforced in the methods used to carry out the abortion.

Even when representations of female abortionists suggest the use of hygienic, medical equipment, this is offset by their physical abilities. For example in the same novel, Landay presents the tools used in the abortion: 'un paquet d'ouate hydrophile et de la gaze iodoformée. Une serviette-éponge et des linges étaient posés sur son bras. Dans sa main gauche, une tige brillait, entre ses doigts noueux' (1904: 237). Here, the use of medical equipment is contradicted by the knotted and arthritic hands of the abortionist, suggesting that despite the appropriation of medical tools, the female abortionist is incapable of performing the procedure safely. This concept is emphasised by the consequences of the abortion, as the patient is 'victime d'une main inhabile, [qui] avait utérus percé de part en part' (1904: 247). The only literary examples of abortion which specify the use of injection are carried out by physicians, found in *Le Crime d'engendrer* (Kolney 1909: 8) and *Le Droit d'être mère* (Bru 1901: 16). In the latter, the new use of injection is explicitly contrasted against more traditional techniques, as Louise's sister tells her: 'Ce n'est pas comme autrefois quand on vous piquait avec une aiguille à tricoter... c'est beaucoup plus simple... deux ou trois injections qui décollent l'œuf et allez-y... ça y est' (1901: 16). Whilst abortions carried out by mid-wives are accompanied by descriptions of the banal, unhygienic and inappropriate tools used to puncture the amniotic sac, these representations of 'medical' abortions are distanced from traditional techniques through the use of the 'modern' injection.

These literary examples illustrate a discrepancy between medical and literary texts. Whilst the former identify abortion as the domain of women, literary representations of the physician abortionist emphasise that this was not the case. This discrepancy could be viewed as medicine's unwillingness to acknowledge the role of physicians in the practice. Indeed, despite the journalistic evidence of physician abortionists, their medical training and legitimised presence at the bedside of pregnant or miscarrying women made a conviction of abortion difficult. Nevertheless, when situated alongside the medical sanction of therapeutic abortion, the neo-Malthusian justification of several of these physician abortionists can be

¹¹⁸ A similar argument is presented in *L'Autel* (Pert 1907: 7).

viewed as part of what Kolney identifies as the medical appropriation of the practice (2001: 269). These representations of male abortionists are pertinent when examining their female counterparts, as they reveal discrepancies between historical data and literary and medical representations, illustrating how the figure of the abortionist was shaped by broader medical shifts and contemporary discourses on gender.

The ‘Faiseuse d’anges’

As emphasised previously, the involvement of midwives in the abortion industry is a key aspect of nineteenth-century literary and medical texts, presenting their impact as a threat to the future populations of France. This threat is evident in the police surveillance and legal restrictions applied to midwives and their businesses. The law of 19 Ventôse, year XI (March 10, 1803), required the registration of all health professionals, including midwives (Burton 2007: 87; Lemaire 2003) and in 1892 midwives were restricted further to only assisting with births that had no medical complications (McLaren 1983: 143). In cities it was common practice for midwives to take in pregnant lodgers and charge them for their stay, assistance during birth and additional duties such as finding a wet-nurse or taking the infant to a hospice. The women who frequented these businesses were often unmarried and from rural areas or abroad, coming to larger cities to conceal their pregnancy and the birth of their child.¹¹⁹ These midwives were often subject to police surveillance: ‘La tentation est grande en effet, compte tenu de leur clientèle, de pratiquer des avortements’ (Fine 1986: 108). In *Fécondité*, the midwives La Rouche and La Bourdieu both complain about the police surveillance directed at their respective establishments (Zola 1898: 174 and 212). In the same novel, the fear of discovery is also evident in Valérie’s abortion; Morange recounts that the operation is done by the light of a candle in order to avoid suspicious lights attracting interest from the dark street (Zola 1899: 200). Abortionists took additional measures in order to avoid attracting attention to their premises. Tardieu states that after the procedure has taken place, abortionists encouraged women go to for a brisk walk or to undertake other exercise. This instruction was motivated by a desire to distance the woman from the abortionist and also ‘comme rien ne

¹¹⁹ Wealthy women from England were also regular customers at these establishments, Doctor Gaillot writes: ‘Les Anglaises sont les principales clientes’ (1884: 101) and that the ‘maisons d’avortement’ gained the French capital ‘une certaine renommée’ (1884: 101). Doctor Blondel equally asserted that these visitors would only need to stay for a weekend before they could return home (in Le Naour and Valenti 2003: 57).

s'oppose le plus souvent à ce qu'une femme puisse se soutenir et marcher aussitôt après avoir subi les manœuvres [de l'avortement]' (Tardieu 1881: 58). This harmful advice not only demonstrates a desire to distance the two, but was also a technique to conceal any 'marks' that had been left by the abortion.

Backstreet abortionists who did not have midwife training were harder to locate and thus subject to less police surveillance. Often they had other jobs or professions: 'L'usine, le travail aux champs, le voisinage, le débit de boisson, lieu de sociabilité par excellence, lui assurent une clientèle fidèle et locale' (Sohn 1996: 871). Due to the number of female 'customers' visiting them, many concealed their illicit activities behind a female-orientated business. Despite the popularity of midwives as abortionists, Pinard cites a case in which one of his patients confides that to obtain an abortion, she did not visit a midwife, instead: 'je suis allée trouver ma voisine qui ne fait que cela. Elle est concierge et elle fait bien trois ou quatre avortements par jour' (In Berthélemy 1917: 40). In one examination in the Haute-Garonne, some of those who were suspected of carrying out abortions were medical professionals such as midwives. However, their number also included 'une tisserande, une blanchisseuse et une femme de gendarme dont les réputations d'avorteuses étaient établies dans leur quartier ou leur village' (Fine 1986: 108). Likewise, in an account of an abortion trial found in *Le Petit journal des tribunaux* (1875), the abortionist was a woman with 'la profession de somnambule. Parfois, même, elle aurait exercé celle de sage-femme' (1875: 1).

Similarly, in Boutique's *Les Malthusiennes*, the abortionist Mme Vireloches owns a herbalist shop, in which the majority of her customers are already women and in which therefore, 'sans le crier sur les toits, elle pratiquait l'avortement' (1893: 105). The herbalist shop provides the perfect frontage for her illicit activities, concealing a back room for consultations and, 'prenant jour sur une cour où madame Vireloches avait seule accès, se trouvait, bien isolée, la propre chambre à coucher de l'avorteuse' (1893: 114). The inclusion of a separate exit for women to leave after the procedure decreased the chances of suspicion being raised. Other female-focused or mobile businesses also lent themselves to the concealment of illegal abortions, for example that of 'porteuse de pain' which allowed women to travel through the streets and build a rapport with a variety of their, predominantly female, customers.¹²⁰ In the

¹²⁰ This concept also reinforces how the transmission of knowledge of abortion was predominantly through word-of-mouth. Sohn highlights that advertisement of abortion relied on 'la sociabilité féminine et les conversations informelles' (1996: 837) and that private conversations 'insaisissables, donc irrépressibles,

trial of ‘l’avorteuse des Batignolles’, *La Lanterne* reports that it was her employment as ‘[une] porteuse de pain chez plusieurs boulangers’ in which ‘elle se trouva en rapport avec un grand nombre de domestiques’ (1891a).¹²¹

This focus upon the concealment of abortion behind female-orientated business is particularly interesting as it presents the abortion industry as part of a female network which defies the intervention of the male-domains of medicine and the law. This network is presented as facilitated by commerce and the housewife’s ability to come into contact with a wide range of women. This is particularly evident in Boutiques’s *Les Malthusiennes*, which presents a network of women and emphasises how advertisement of abortion is transmitted from the abortionist to her clientele. Notably the first three chapters of the second part of the novel ‘L’Ombre de Malthus’ illustrate this network through their structure. Chapter one, ‘La Porteuse de Pain’ opens with a group of housewives exchanging knowledge about contraception and means of restricting fertility. The bread-seller Madelaine Chamois, who touts for the abortionist Madame Vireloches, enters and hints at the skills of an abortionist (Boutique 1893: 77-92). The second chapter traces the continued movement of the bread-seller, as she visits a large, poverty stricken family, ostensibly to deliver bread, but also to convince the pregnant mother to have an abortion (Boutique 1893: 93-103). This movement is concluded by the third chapter, in which the bread-seller finishes her journey at the herbalist’s shop of the abortionist (1893: 104-15). The structure of these chapters, populated with exclusively female characters, presents a network of women, in which knowledge and advertisement of abortion is circulated and facilitated by women’s industry. Indeed, the mobile nature of Madeleine Chamois’s employment, which constitutes another nod to the ‘Avorteuse des Batignolles’ case, facilitates this transmission, as does the gathering of housewives in shops. This network is explicitly contrasted by the subsequent chapter ‘Entre docteurs’ which presents two physicians discussing theories of Malthusianism, reflecting on the use of abortion in society (1893: 116-25). This male-populated chapter thus juxtaposes the theories of Malthusianism, discussed and debated by medicine, with the physical application of them in women’s lives. Whilst physicians are presented as educated on the

l’emportent largement sur la propagande officielle des professionnels’ (1996: 848). These exchanges of knowledge also relied on intermediary women who would advertise the abortionist and give information to customers. In one study involving forty-four cases of abortion, Sohn identifies that thirty-three included an intermediary between the pregnant woman and abortionist (1996: 841).

¹²¹ Equally, her touts and assistants were identified as a bar owner, a ‘porteuse de pain’ and a butcher’s wife (*La Lanterne* 1891b).

topic, the novel suggests that these discourses have already been put into practice by women. Indeed, the very title of the novel, *Les Malthusiennes*, implies the female appropriation and application of neo-Malthusian practices, emphasising that in doing so, the male-dominated medical and political popularisation of these principles is transformed to suit women.

Alongside these implications of women's role in the abortion industry, many sources focus on the motivation of these abortionists. The involvement of midwives in abortion is attributed predominantly to profiteering and financial causes, a motivation which is presented as just one element of their immorality or 'monstrosity', which will be examined in due course. However, some literary texts provide exceptions to this form of representation. The first is in Brieux's *Maternité* in which the abortionist Madame Thomas is presented sympathetically and as a figure of charity who only takes the payment her client can afford. She justifies her actions by stating that abortions prevented the worse crimes of suicide and infanticide, listing these as the consequences for the women she turned away (1904: 211). Alternatively, some texts emphasise that many midwives were pushed into carrying out abortions because of a lack of business. In one report, an abortionist midwife is defended with the statement that 'les sages-femmes sont trop nombreuses dans les grands villes [...] pour qu'elles puissent toutes vivre uniquement de leur profession' (*Gazette des Hôpitaux de Toulouse* 1888). Another edition of the same paper later comments in 1891 that 'le nombre de sages-femmes est trop considérable pour qu'elles soient honnêtes' and that 'la sage-femme n'est criminelle que parce qu'elle meurt de faim et qu'elle n'a pas le courage de changer de profession' (1891). McLaren also demonstrates that due to the increased restrictions on when midwives could work, in addition to competition from physicians, many midwives could not turn down the money offered by abortions (1983: 143). In fact, in the 1890s it was common for a midwife to earn more income from abortions than from births (1983: 143). Thus, although practice of the crime was illegal and widely condemned, many women found abortion to be a profitable means of supporting their income as a midwife.

A second literary example of these motivations can be found in Boutique's *Les Malthusiennes*, as the herbalist-cum-abortionist Madame Vireloches' motivations are presented more sympathetically than is normally the case in literary and medical texts. Although motivated by financial gain, she does not ask more than her poorer patients can afford. Despite her 'brevet et [son binocle]' (Boutique 1893: 107), she is not a medical

professional and is heavily critical of pharmacy which, she asserts, ‘ne demande pas au client “la bourse ou la vie”’; plus exigeant, il prend les deux’ (Boutique 1893: 104). She sees herself and other herbalists more flatteringly as they ‘vous laisse la vie sauve, mais il ne vous dévalise pas’ (Boutique 1893: 104).¹²² In her past she is described as having had an abortion carried out by her physician ex-lover, and later, after failing her midwifery exams, she makes the decision to become an abortionist: ‘Au lieu de collaborer à la population, à l’accroissement des familles, ce serait, sinon pour la dépopulation complète, du moins pour la maternité restreinte qu’elle opérerait’ (Boutique 1893: 111). Even in Zola’s *Fécondité*, the abortionist La Rouche justifies her actions by saying she cannot refuse when desperate and mistreated women beg her for abortions: ‘Ah! Monsieur, si je pouvais vous cacher dans ce cabinet, si vous entendiez les malheureuses qui s’y présentent, vos idées changeraient’ (1899: 207). Indeed, she refers to her work as ‘l’aide charitable’ (1899: 208) which prevents infanticide: ‘Est-ce que, si nous refusions, le nombre des infanticides ne doublerait pas?’ (1899: 208). However, these justifications are undermined by Mathieu’s pronatalist perspective and the description of La Rouche and her establishment which label her as ‘cette basse et lâche assassine’ (1899: 211).

The ‘Monstrous’ Abortionist

Accompanying these representations of female abortionists, it is also possible to detect frequent associations with monstrosity. A person who is monstrous is defined as ‘one who deviates from normal or acceptable behaviour of character’, ‘a threatening force’ or ‘a person of unnatural or extreme ugliness, deformity, wickedness, or cruelty’ (Merriam Webster). Similarly, Cohen defines the Monster as ‘an embodiment of difference, a breaker of category, and a resistant Other’ (1996: x), whilst arguing that the Monster is cultural and that, etymologically, *monstrum* means ‘that which reveals’ and ‘that which warns’ (1996: 4). Examining representations of abortionists through the lens of these definitions, suggests that the figure of the abortionist had become the antithesis of the ‘good’ mother, reinforcing pronatalist beliefs through oppositional denunciation. As argued by Sinfield, in attempting to

¹²² In Cazals’ study of ‘faiseuses d’anges’ he argues that ‘les herboristes et les botanistes [...] [peuvent être] plus habiles que certains pharmaciens à utiliser les poisons végétaux, qui [...] laissent très peu ou ne laissent point de traces à l’analyse’ (1903: 19).

reproduce themselves and refute oppositional views, ideologies (such as pronatalism) must inevitably represent what they seek to contradict: ‘It has to invoke those structures to oppose them, and therefore can always, ipso facto, be discovered reinscribing that which it proposes to critique’ (Sinfield 1992: 47). In line with Cohen’s etymological examination of the monster, Francus also argues that these monstrous ‘points of dissent are the loci for narrative, as ideology turns repeatedly to sites of disruption in an attempt to resolve, subordinate, or incorporate difference’ (2012: 10). These perspectives underline the narrative focus on abortionists in literary, medical and journalistic texts; representations in which they are painted as the ‘auteurs principaux de la dépopulation de la France’ (Cazals 1903: Title) who reject maternity in their actions, personality traits and appearance. This monstrosity is immediately evident in their names; the late nineteenth-century trend of calling an abortionist *une faiseuse d’anges* emphasises the innocence of the foetus in contrast to the criminality of the abortionist. Furthermore, as pertinently observed by Koos, despite the involvement of male physicians in the abortion industry, *une faiseuse d’anges* had no corresponding male form (2001: 265). Notorious abortionists gained sensationalist nicknames such as: ‘La Mère Tiremonde’ (*Le Temps* 1867), ‘La Mort Aux Gosses’ (*La Lanterne* 1891a), ‘La Cacheuse’ (*Le XIXe siècle* 1874) and ‘Le Plieuse de Mort’ (McLaren 1983: 143); names which villainise them and present them as monstrous.¹²³

Through their decision to terminate pregnancies, it is implied that abortionists are able to control, and subsequently reject, women’s supposedly ‘natural’ function of reproduction. In this deviation from ‘natural’ acts, the abortionists are consequently painted as ‘unnatural’, particularly in their personality traits and inability to express empathy. In a text denouncing the acts of ‘faiseuses d’anges’, Cazals refers to ‘leurs monstrueuses et immondes manœuvres’ (1903: 13), emphasising not only the ‘unnaturalness’ of abortions, but also the monstrosity of those who carried them out. Narrating the scandalous trial of the abortionist ‘La Cacheuse’, *Le Pays* and *Le XIX siècle* both highlight that Jeanne La Cacheuse had a dual profession as one who shrouds a corpse and undertakes its vigil, and as an abortionist (Both 1874). Both papers emphasise the morbid nature of both of her industries, describing her as ‘un oiseau de

¹²³ ‘Madame Tiremonde’ was urban argot for midwife (Académie française 1881: 1200), however the notoriety of the abortionist La Fille Marière, known as ‘Le Mère Tiremonde’ appears to shift the term’s meaning towards a midwife who carries out abortions. In *Le Mouvement médical: journal de l’enseignement médical, pharmaceutique et vétérinaire*, the term Madame or Monsieur Tiremonde is used as a generalised term for abortionist (1879).

nuit' and 'un chacal' (*Le Pays* 1874).¹²⁴ La Fille Marière, known as 'La Mère Tiremonde', is equally likened to 'une vieille sorcière sexagénaire' (*Le Temps* 1867), linking her post-menopausal age with the unproductive practice of abortion.

In Zola's *Fécondité*, this monstrosity is embodied in the abortionist La Rouche, who is presented as unnaturally cold and unfeeling. This lack of empathy is reemphasised when she is presented with the newly widowed Morange and, despite the illegal death in her establishment, she retains 'son air doux et tranquille' (Zola 1989: 203). Mathieu is astounded that: 'elle semblait simplement pénétrée de commisération pour le pauvre mari, écroulé près de la morte. Son regard aimable disait: "Quel accident, quelle tristesse, comme nous sommes peu de chose devant les hasards fâcheux de la vie!"' (Zola 1899: 203). This coldness and lack of empathy is contrasted with the idealised maternal figure of Mathieu's wife Marianne, who is consistently defined by her warmth, empathy and gaiety: 'elle rayonnait elle-même de santé, de force et d'espoir' (1899: 109) and it is these attributes that make her 'la fécondité elle-même' (1899: 109).

In addition to representations of their 'unmaternal' personality traits, physical descriptions and representations of abortionists explicitly link them to ideas of the 'monstrous'. In a fictional narration of an abortion, referring to the abortionists, the unwilling customer says 'quels monstres! Ils me font horreur!' (Fauconney 1908: 87). In other texts, abortionists are also referred to as ogresses (Landay 1904: 215 and 241; Mayer 1973: 18), notably in Tournier's documentation at the end of *La Fabrique d'anges*, where he refers to 'l'ogresse de la rue Tiquetonne' who is described as 'lourde et vulgaire, avec des traits épais et des yeux sans expression' (1907: 229). Equally, in the heavily-publicised trial of Constance Thomas, *La Lanterne* refers to 'un procès monstre' and refers to prostitution and abortion as 'deux véritables monstres' (1891a). To reinforce the 'monstrosity' of their actions, physical descriptors of abortionists emphasise ugliness, irregularity and deformity, in addition to suggesting that their figures are 'nonmaternal'.¹²⁵ The aforementioned Constance Thomas

¹²⁴ The notoriety of this trial is evident in the number of papers which reported it. In addition to *Le Pays* and *Le XIX siècle*, *La Presse* also included a lengthy column on the trial (1874).

¹²⁵ Madame Vireloches from *Les Malthusiennes* is an exemption from this trend, as part of the narrative is presented from her perspective, including her justifications for carrying out abortions and she has a daughter who she financially supports and loves. However, she gives birth to the child before she becomes an abortionist and sends her child to be raised by a relative, pretending that she is the child's aunt (1893: 89). Therefore, even in the more sympathetic representations of abortionists, found in Malthusian texts, the practice of abortion and maternity are presented as incompatible and irreconcilable.

(The *Avorteuse des Batignolles*) is described as ‘[une] hideuse figure’ (*La Lanterne* 1891a) and as ‘cette hideuse petite vieille que deux yeux brillants dans l’ombre, comme les yeux d’un faucon’ (*La Lanterne* 1891c). These predatory associations are common and even when women appear ‘normal’ and do not have any distinguishably ‘monstrous’ features, texts reinforce that this is simply a deceitful façade: one abortionist is described by Fauconney as ‘cachant sous les apparences d’une évangélique douceur la cruauté d’une hyène’ (Fauconney 1908: 80).

Whilst predatory descriptions reinforce the supposed cruelty and voracity of abortionists, their monstrosity is also linked to their own unwillingness or inability to reproduce. Describing abortionists as ‘dangereuses mégères’ (Cazals 1903: 24), reinforces their ‘unmaternal’ personalities and appearances. In *Fécondité*, the villainised La Rouche is described as having ‘[un] grand nez fureteur’ and always wearing ‘son éternelle robe noire’ (Zola 1899: 203). She is contrasted against the law-abiding midwife La Bourdieu who is described as ‘[une] belle femme brune, un peu grosse et courte, mais d’une large et gaie figure, très blanche, qui l’avait singulièrement aidée à réussir, à doter sa maison d’un bon renom de propreté’ (1899: 173). In addition to her beauty and cleanliness, references to her daughter and her rounded figure attest to her positive engagement with her own fertility as well as that of other women.

This representational trend is also apparent in other texts. In both *Une Faiseuse d’anges* and *La Graine*, the abortionist is imbued with predatory features, in the former, the face of the abortionist Victoire Estafiel ‘avait quelque chose de pointu, de toujours en quête, absolument comme le museau d’une belette autour d’un poulailler’, her eyes are described as ‘cauteleux’ and her teeth ‘ressemblaient à celles des carnassiers’ (Mie d’Aghonne 1881: 8). In the latter novel, observing the abortionist Mme Poupe, the pregnant Mme Rolande notices ‘l’avidité aiguë de ses yeux, de son nez en bec d’aigle courbé sur une large bouche énergique, violente, à désignation féroce, au milieu de la graisse mauvaise’ (Couvreur 1903: 347). Again, similarly to representations found in *Fécondité*, both abortionists are ‘constamment vêtue de noir’ (Mie d’Aghonne 1881: 8) as this black attire associates the abortionists with the figure of the un-reproductive spinster and suggests a state of permanent mourning for the victims of the establishments.¹²⁶

¹²⁶ In *La Graine*, Mme Poupe says ‘d’ordinaire, je suis vêtue de soie... de soie noire’ (Couvreur 1903: 347).

In *Fécondité*, the monstrous appearance of La Rouche is also reinforced by descriptions of her premises. The initial description of the building in which the abortionist works reinforces the corrupt nature of her business:

[En] quittant la gai soleil qui tiédissait la radieuse matinée, les demi-ténèbres de l'allée puante, aux murs lézardés et moisissés. Puis, ce fut la cour verdâtre, pareille à un fond de citerne, et l'escalier gluant, empoisonné par les plombs, et la porte jaunâtre, que la crasse des mains avait noircie. Par les beaux temps, la maison suait plus encore son ignominie. (Zola 1899: 201)

Indeed, this same imagery is mirrored in a similar scene in Couvreur's *La Graine*, which represents the dark and filthy street littered with 'les débris accumulés' and 'les suintements troubles des murs' (1903: 346). Both novels emphasise the popularity of the procedure by drawing attention to the quantity of previous customers, the 'crasse des mains' found upon the door, and the furniture 'de velours rouge usé' (Zola 1899: 204) found in La Rouche's office are mirrored in the 'escalier [...] lamentablement usé' (Couvreur 1903: 346) and the almost identical 'sièges [...] en velours rouge usé et gorgé de poussière' (1903: 347). Engaging with the contemporary popularity of the sanitarian movement and germ theory, imagery of darkness and poor hygiene also associate the building with a 'den' or 'lair' in which the monstrous abortionist works. Couvreur's novel summarises that 'rien ne pourrait définir le malaise dû à cette ameublement misérable et prétentieux, où, par-dessus tout, flottait un écœurement de choses vieilles et négligées, mêlé à des relents d'antiseptiques et de cuisine' (1903: 347), whilst in Zola's novel, the protagonist Mathieu describes the establishment as '[un] antre' (1899: 378) and the procedure room as '[la] chambre de terreur et d'horreur' (1899: 202).¹²⁷

Similarly monstrous representations of the abortionist can be found in various editions of *L'Assiette au Beurre*, a satirical paper which engaged with contemporary social, political and moral debates. In a 1902 edition entitled 'Les Monstres de la société', one of Léandre's illustrations portrays an abortionist, labelled as 'le monstre des monstres' (1902a: 1326) (Figure 7). The submissive pose, emaciated appearance and exaggerated stomach of the customer is heavily contrasted against the aggressive stance, width and overweight stature of

¹²⁷ This representation is also heavily contrasted with La Bourdieu's legitimate business which is described as spacious, clean and light (Zola 1898: 173) and, as already examined, Mathieu notes the difference between the 'bassesse immonde' (1899: 202) of La Rouche's procedure room and the 'gai soleil' and 'linge blanc' of his wife's bedroom in which she is giving birth (1899: 214).

the abortionist. Equally, her rolled-up sleeves and the jars behind the abortionist reinforce the physical and violent nature of her employment.¹²⁸ Whilst overweight, she is presented as a monstrous ogress, embodying non-maternal characteristics in both her appearance and her professional practice. Equally, on the cover page of the 1907 edition of *L'Assiette au Beurre* (Figure 8), the size of the abortionist dwarfs that of her pregnant customer and the latter's distress is not reflected in the passive and unsympathetic face of the former. As in Figure Seven, her stance is dominant and implies that she is coercing her customer into entering her 'laboratoire.'



Figure 7: 'Le Monstre des monstres': Illustration of the 'monstrous' abortionist with a heavily pregnant customer (Léandre 1902a)

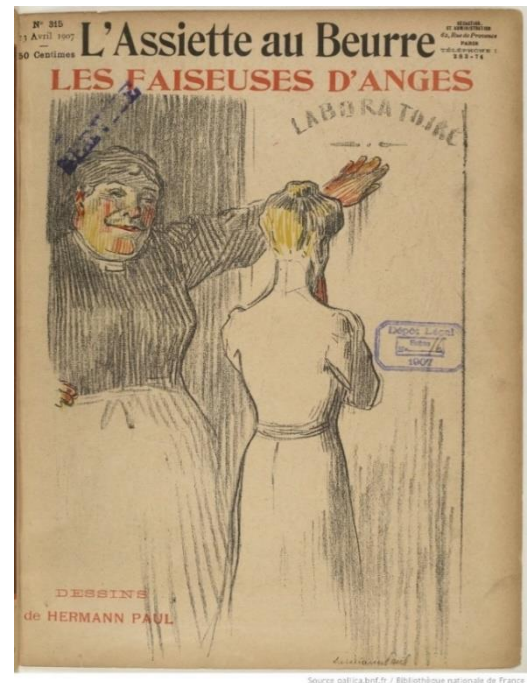


Figure 8: Illustration of an abortionist leading a customer into her laboratory (Hermann 1907)

¹²⁸ Representations of fetuses preserved in jars are frequently associated with medical charlatanry or quackery. In Gustave Flaubert's *Madame Bovary* (1856), the pharmacy of Homais contains 'les fœtus du pharmacien, comme des paquets d'amadou blanc, se pourrissent de plus en plus dans leur alcool bourbeux' (1966: 108). In a similar reference to pharmacists, in Tournier's *La Fabrique d'anges*, the abortionist physician sells fetuses to his pharmacist accomplice, who pickles and sells them. Perhaps more strangely, in *Les Femmes Eunuques*, next to her diploma for midwifery, La Louchaud draws her customer's attention to 'un bocal contenant un fœtus noyé dans l'esprit de vin' (1898: 78). She informs prospective clients that this is the foetus from her only pregnancy, reinforcing the efficacy of her contraceptive 'lavages aromatiques' (1898: 79).

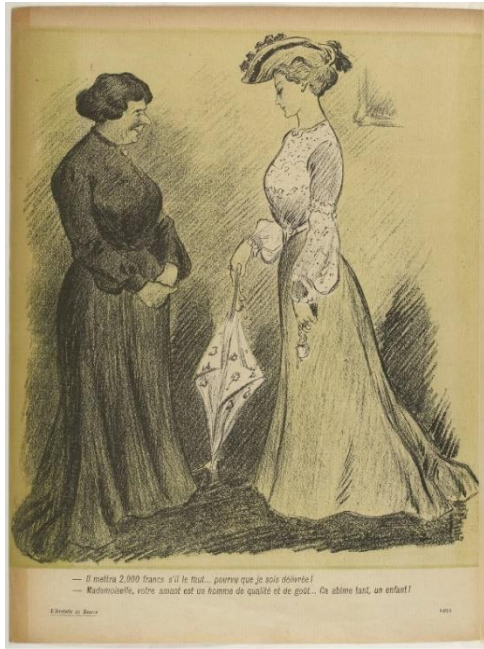


Figure 9: Illustration representing the sales pitch of an abortionist to a wealthy client (Couturier 1902b)

Another edition of *L'Assiette au Beurre* from 1902 entitled 'Les Filles-mères', illustrated by Couturier, presents an image of an abortionist strikingly similar to that found in *Fécondité* and *Une Faiseuse d'anges* (Figure 9). The portrayal of the abortionist's larger nose appears similar to that found in *Fécondité*'s La Rouche, whilst her modest black clothing also likens her to the figure of the spinster. Although appearing less monstrous than Léandre and Hermann's abortionists, she is markedly contrasted against the beauty, youth and health of her pregnant customer. However, her dominant stare in contrast to the young woman's avoidance of eye contact distinctly marks the power relation that exists between the two, whilst the caption illustrates the sales-pattern and flattery used on upper-class women: '— Il mettra 2000 francs s'il le faut... pourvu que je sois délivrée! — Mademoiselle, votre amant est un homme de qualité et de gout... Ça abîme tant, un enfant!' (Couturier 1902).

As suggested by Cohen's theses of 'Monster Culture', it is possible to read a culture from the monsters that they construct (1996). Literary, journalistic, and medical representations of the abortionist create a mythic stereotype of the abortionist which is frequently repeated. The previously mentioned string of abortion trials, the notoriety and villainisation of the accused women, and the literary reproduction of these figures, suggests a sequence of reincarnations of the mythic and monstrous abortionist. This figure is represented as a monstrous and

excluded 'Other', manifested in the abortionist's threat to maternity and the male domain of medical science. In this respect, the construction of the monstrous abortionist is also used as a marker of difference to reinforce accepted and sanctioned gender norms. This assertion can be aligned with Baldick's analysis of monstrosity in which he states that 'the monster is one who has so far transgressed the bounds of nature as to become a moral advertisement' (1987: 12).

Furthermore, the increased regulation of the midwife industry throughout the nineteenth century places further emphasis on the monstrosity of midwife abortionists, who are presented as betraying medical and professional values in addition to those of their gender. Monstrous representations of the abortionist and their victims reinforce contemporary gender norms by portraying the fatal consequences of women who attempt to shun maternity. Equally, these representations attempt to cement male dominance in the medical domain, delineating the borders of medicine and specifying how and through whom, women should access approved medical care. This delineation of women's access to medicine emphasises that 'fear of the monster is really a kind of desire' (Cohen 1996: 16). As 'the monster is continually linked to forbidden practices, in order to normalise and enforce' (1996: 16), the monster inevitably also attracts. Whilst condemned and rejected by medicine and the law, the abortionist embodies escapist fantasies of fertility regulation and the circumvention of gender norms.

Although this notion will be examined in the later chapter on ovariectomy, the escapist possibilities of abortion can be seen in a broader literary trend in which, at the turn of the century, literary authors begin to explore the possibilities of modern medicine and fantasies of how it could be applied to fertility regulation. Just as Corday's *Sésame* (1903) presents fantasies of contraception, the figure of the abortionist facilitates fantasies of non-reproductive and adulterous sex as her ability to undo or nullify the consequences of socially prohibited acts permits the transgression of social and cultural norms. However, these fantasies are mostly presented as unfulfilled by the female abortionist due to an inadequacy of medical knowledge, reaffirming male dominance in this area. As has been seen in the examination of contraception, and will be examined further in the study on ovariectomy, fantasies of fertility regulation or sterilisation are only made possible by the male physician. Therefore, the figure of the abortionist represents an ideal of eschewing maternity, which is

unfulfilled, but marks the beginning of a growing literary trend which focuses on these fantasies.

When drawing together these various representations, there appears to be a contradiction in how the abortion industry is presented. Texts featuring physician abortionists attest to the acknowledgement of their role in the industry, refuting the imagery found in other novels such as *Les Malthusiennes* which affirms that abortion was the domain of women and resisted medical or legal interference. However, this contradiction can be resolved by considering the chronology of these texts alongside broader shifts in medicine and literature. In texts such as *Les Malthusiennes*, published in 1893, the abortion industry is presented as a female network which is facilitated by circulation of women outside of the domestic space and female-owned businesses. This is presented as a threat which attempts to defy the intrusion of medicine and the law. However, in texts published after the turn of the century, representations of male physicians challenge this notion of women's industry. This sudden shift could be attributed to a broader medical move in which the role of medicine in society began to be questioned. It can also be seen as part of the increasing trend of representing the vilified physician, which will be examined in the next chapter, a trend which extended into discourses on women's reproduction, including abortion. As such, the notion of the abortionist physician, the scandal of which gripped the public through journalistic accounts of abortion trials, was exploited by literary authors. Indeed, to some extent, a common feature of all these representations of the abortionist is that they illustrate how literary authors exploited contemporary anxieties. Earlier representations of 'faiseuses d'anges' can be seen to play into fears of women's circulation outside of the domestic space and within industry. They represent a female network which defies medicine and the law and takes fertility management into its own hands. However, by the turn of the century, similar novels begin to draw upon a different fear, that of the corrupt, excessively ambitious physician, reflecting a reactionary movement against the increasing power of medicine, including its appropriation of abortion.

In addition to this negotiation between practitioners, it is also productive to review the representation of female abortionists alongside different interpretations of the monstrous. Constituting the rejected and reviled 'Other', their decision to terminate women's pregnancies becomes manifestly evident in their appearance and manner. In addition to abortionists' non-maternal appearances, frequent references to their predatory nature

villainises both the women and their criminal industry. By representing caricatures and fixed ‘types’ of non-maternal women, these texts ultimately reinforce ‘good’ maternal and feminine qualities whilst employing scaremongering tactics to discourage women from seeking an abortion. However, by examining these monstrous representations, it becomes evident to what extent this figure threatened society, medicine and the law, and how representations of abortionists were influenced by both the agendas of these fields and the public imagination.

Conclusion

As the nineteenth century marked an increased generalisation of abortion in all levels of society (Le Naour and Valenti 2003: 13), the dramatic multiplication of related medical, legal, literary and journalistic texts reflects society’s resolute engagement with the criminal industry and attests to the extent that it was deemed to threaten the future of France. Within discourses on degeneration, industrialisation, morality and individualism, abortion was presented as a key problem that needed to be addressed through medicine, the law and social norms. Medico-legal texts demonstrate attempts to generate a popular narrative of abortion which victimised the women involved, rather than acknowledging a conscious rejection of maternity. These same narratives and texts also demonstrate a fixation with reading the female body in attempts to diagnose whether an abortion had taken place or not.

Similarly to the aforementioned popular narratives, these representations reinforce contemporary ideologies of the female body as both resistant to the medical gaze and betraying its secrets through leaking and fluid secretions. These bodily fluids and secretions are key in representations of abortion, and contemporary texts reinforce their importance during legal and medical investigations, in addition to highlighting links between abortion, menstrual fluid and difficulties in keeping stained or dirty linen private. These attempts to keep bodily liquids away from public view can also be linked to the late nineteenth-century sanitarian movement, in which contaminated water and products of abortion were viewed as a threat to the bourgeois hygienic doctrines of separation and containment. It is also possible to view scenes of childbirth alongside these representations of fluid management, as they represent a ‘productive’ bodily leakage which nevertheless cannot shake off broader

ideologies and anxieties surrounding the 'unstable' maternal body. Increasing representations of maternity hospitals and scenes of post-partum haemorrhaging, halted by medical intervention, are accompanied by medical regulation of the birthing process, revealing how these notions of fluid management and bodily leakage were manipulated to legitimise medical appropriation of a historical feminised process which would take place unaccompanied by men.

This rejection of female health practitioners, legitimate or not, is also manifested through representations of abortionists, presented as the antithesis of the 'maternal woman' and as monstrous, in attempts to villainise the industry and discourage women from seeking out their services. Consequently, through these varied representations of abortion, it is evident that the criminal industry did not only influence and impact upon reproductive issues such as depopulation and fertility management, but also perpetuated contemporary medical perceptions of the leaking female body and, through contrast with the 'monstrous' non-maternal abortionist, encouraged medically sanctioned maternal qualities and behaviour. Finally, associations between abortion, liquids and the sanitarian movement begin to illustrate how these seemingly separate discursive areas were intricately linked, in addition to reinforcing the importance of abortion and, more broadly, maternity, in shaping the medical, legal, hygienic, journalistic and literary landscape of late nineteenth-century France.

Of all the topics discussed in this thesis, abortion most clearly reveals the complexity of the relationship between literary, medical and popular discourse. Whilst the impact of medical treatises upon literary work is clear, the notoriety and impact of contemporary abortion cases upon literary and medical representation, in addition to popular renderings of the abortionist, reveals that this influence was not one-sided. Fictional medical narratives of the 'victimised woman', medico-literary narratives of the procedure, vulgarised medical information in reports of court proceedings, and satirical renderings of abortionists combine to destabilise and challenge notions of the medicalisation of abortion. Indeed, when this broad range of sources is aligned, it reveals the importance of literary, artistic and popular discourses in the construction of ideologies of both female fertility and the figure of the abortionist.

Chapter Three.

Medical Malpractice and Technologies: the Abuse of Ovariectomy and Artificial Insemination

Introduction

It has been argued that, of all the innovations in nineteenth-century gynaecology, ‘ovariotomy was undoubtedly the one which met with the greatest opposition from medical practitioners and the lay public’ (Moscucci 1990: 134).¹²⁹ The ovaries were perceived to represent the very essence of femininity and fertility, and their voluntary or involuntary removal inevitably indicated a change in that woman’s social role and responsibility. Contemporary medical texts attest to the controversiality of ovariectomy; whilst Eugène Koeberlé refers to the procedure as ‘une conquête de la chirurgie moderne’ (1865: 1), other physicians argue:

[II] n’est plus d’intervention à propos de laquelle on ait commis plus d’abus. D’ailleurs, les succès opératoires ne sont pas toujours ce que les statistiques tendent à les faire croire, et les résultats thérapeutiques, dans un très grand nombre de cas, sont loin d’être considérés comme une guérison. (Tutfier in Canu 1897: 9)

The juxtaposition of these two statements, over thirty years apart, emblematises the controversy and changing attitudes towards the procedure during this period.

¹²⁹ I use the term ovariectomy throughout this chapter to refer to the removal of one or both of a woman’s ovaries through a surgical procedure. However, elsewhere the term is used interchangeably with oophorectomy and ovariotomy. Several texts distinguish between an ovariectomy to remove diseased or damaged ovaries with a ‘normal ovariectomy,’ which refers to the removal of seemingly healthy ovaries. The practice of ovariectomy was eventually mostly replaced by hysterectomy which coexisted and was occasionally used as an auxiliary treatment with the practice from around 1895 (Barker-Benfield 2000: 121). When texts such as *Fécondité* refer to how a surgeon ‘enlève tout’ (Zola 1899: 34) it is suggested that this involved both an ovariectomy and a hysterectomy. However, in literary texts there is often a lack of specificity when describing these procedures.

In addition to broader studies of the procedure (Moscucci and Clarke 2007), the importance of ovariectomy in the construction of femininity in nineteenth-century England has been studied, including some comparison of the differing views on sterilisation in France and England (Moscucci 1990). Historical studies have examined sexual surgery in nineteenth-century America (Barker-Benfield 2000) and France (Erlich 2007; Finn 2009). Ovariectomy has been studied in the novel *Les Demi-sexes* (La Vaudère 1897), with a focus on the role of physicians and the procedure's threat to binary sex (Linton 2018; Mesch 2008). More broadly, Michael Finn briefly traces the representation of ovariectomy in a number of literary sources, illustrating the breadth of source material (2009).¹³⁰ However, there has been no sustained study of these sources and no examination of how this manipulation of women's fertility is manifested within representations of the female body. Indeed, literary engagement with this topic is explicit in the titles of many middle-brow novels; for example: *Stérile* (Riche 1890), *L'Autel* (Pert 1907), *Les Trois crises: La Grappe (La Grappe)* (Landay 1904), *Les Florifères* (Pert 1898) and *Les Déséquilibrés de l'amour: Les Femmes eunuques (Les Femmes eunuques)* (Dubarry 1899). This overt literary engagement with women's fecundity and the medical removal of this ability to reproduce is a clear mark of the topic's controversy and prominence within contemporary debates. It also provides a wealth of material with which to study the topic further.

This chapter will draw on this wide range of literary sources, situating them within broader medical and popular contexts, to interrogate how representations of female sterilisation were shaped by broader debates on gender roles and theories of eugenics and degeneration. Within this, it will specifically focus on the notoriety of the practice, examining how it became emblematic of a broader fear surrounding the figure of the immoral physician and anxiety over medical malpractice. Reflecting this trend, the chapter will include a brief examination of artificial insemination and its abuse in literary texts. In the removal of fertility, the study will finally examine how sterilisation was presented as changing or altering the female body, how removing a woman's ability to reproduce altered her perceived role in society, and how this alteration was manifested in representations of physical appearance or behaviour. Within this broader examination of the control and regulation of fertility, ovariectomy provides a divergence from other topics examined in this thesis. Rather than the mere adjustment or

¹³⁰ Despite the acknowledgement of the range of literary sources available, due to the scope of the article, Finn does not develop literary analysis or argument.

temporary halt in fertility, as caused by contraception or abortion, sterilisation marked the permanent restriction of a woman's ability to reproduce. As such, the stakes were significantly higher; the procedure could permit direct and complete control over a woman's fertility, particularly those individuals whom medicine deemed 'unsuitable' for reproduction. However, if misused or applied outside of medicine's control, sterilisation had potentially devastating consequences for an already depopulated France.

Ovariectomy in Nineteenth-Century France

In 1862, Nélaton and Demarquay undertook the first attempt at ovariectomy in France, despite significant criticism and backlash from the Académie de Médecine (Deschaumes 1896: 177). However it was not until 1872 that the removal of normal ovaries for a non-gynaecological disorder became increasingly common (Studd 2006: 412; Erlich 2007: 183).¹³¹ Although sterilisation did not influence depopulation to the same extent as abortion and contraception, texts on the topic frequently link the depopulation crisis and female sterilisation, citing it as one of the causes of the crisis. Étienne Canu argues that '[ovariectomie] est le principal facteur [de la dépopulation]' (1897: 142) whilst Roland Pichevin asks: 'L'intérêt patriotique à défaut d'un autre, ne doit-il pas nous inviter à sauvegarder, autant que faire se peut, les organes de la génération?' (1890: 29), reminding his fellow physicians that removing the ovaries of a healthy woman actively contributed to the decline in France's birth rate.¹³² As with other elements of fertility, frequent comparison is made to other European countries, linking the practice to broader anxieties surrounding France's future military strength and position in Europe. Physicians referenced France's recent crushing defeat against the Prussians and argued that France was still at the mercy of the Prussian threat. For example, Canu reminds his readers that the Parisian hospitals practicing ovariectomy 'ont fait à la France, depuis une dizaine d'années, plus de mal que les balles prussiennes en 1870' (1897: 155).

¹³¹ This procedure was first performed by Alfred Hegar of Freiburg in 1872, but it became known as 'Battey's Operation' or 'Tait's Operation' after the first American and English surgeons to perform it (Studd 2006: 412). In France, the first two operations conducted to treat hysteria took place in March 1882 and June 1883 (Finn 2009: 27).

¹³² Despite this assertion, Canu also acknowledges that increased use of contraceptive 'lavages vaginaux' and abortion resulted in an increase of women needing reproductive surgery (1897: 148).

The only statistics which report the number of sterilised women are provided by Canu who posited that forty thousand Parisian women and a wider fifty thousand women across the whole country were sterilised between 1883 and 1885 (1897). Although this number was quickly taken up and shared by a wide number of sources, it has since been described as ‘inflated’ and Finn argues that Canu ‘twisted his data to enhance public concern’ (2009: 29).¹³³ However, more reliable data are not available for that period, perhaps because of the diverse ailments treated by sterilisation, in addition to the variance in procedures and nomenclature. Equally, an accurate estimation of sterilised women was made impossible due to the amount of procedures carried out in private clinics or outside of the hospital. As this chapter also examines, the procedure’s associations with criminal abortion and as means of permanent contraception led to its concealment, particularly among the upper classes. The true impact and scope of sterilisation is therefore very difficult to gauge.

Despite the lack of reliable data, the topic was taken up by physicians towards the end of the century, when a series of works was published on the topic of female sterilisation, most notably by Étienne Canu (1897), Ami Magnin (1886), Max Nordau (1882), Roland Pichevin (1890) and Dominique Pila (1901). The most significant of these was Canu’s thesis, because its estimation of the number of sterilisations was accompanied by its publication during a particularly significant period for debates over the population when the opinions of both pronatalists and Malthusians were discussed publicly (Finn 2009: 30). In addition to the dissemination of Canu’s text within journalistic texts, the 1890s also saw an increased literary uptake of the theme of ovariectomy, as authors engaged with the topic’s sensationalism and the opportunity to represent marginalised female figures, condemned by a society in the midst of a depopulation crisis.

The relationship between these texts and literary novels is evident in the preparatory notes for Zola’s *Fécondité*, which contain lengthy notes on Canu’s thesis and observations from Dr Vaucaire on hysterectomy (Zola n.d.: 296 and 326). The notoriety of ovariectomy and its use of ground-breaking medical techniques, such as asepsis, was exploited by many literary authors who wished to engage with contemporary debates on depopulation and degeneration, in addition to those who deployed medical discourses to justify the representation of salacious

¹³³ An important source which drew upon and widely publicised this figure is Honnorat’s article ‘Les Abus de la chirurgie: Graves accusations’ in *XIXe siècle* (1896).

themes. Whilst canonical texts such as Zola's *Fécondité* incorporated discourses of female sterilisation to reinforce the broader dialectic between pronatalism and fertility-limiting practices, other *romans sociaux* or popular novels drew upon ovariectomy in order to represent contemporary concerns regarding the role of medicine in contemporary society, or as an accompaniment to representations of a degenerate and corrupted society in which traditional familial and marital structures were threatened by women's ability to limit fertility. This is also accompanied by a focus on questioning *who* should reproduce, marking the incorporation of theories of eugenics, which will be examined in due course. Within these popular novels, the notoriety and sensationalism of the topic was exploited, reactions to which are evident in literary reviews. *Les Demi-sexes* is described as akin to the label 'Hazardous' found on a bottle of poison, containing 'toutes les sensations brutales de la vie, toutes les ivresses féroces, toutes les jouissances farouches, toutes les sensations corrosives, avec les raffinements et les avidités d'êtres qui veulent connaître, voir et sentir' (*La Presse* 1897). Similarly, *Le Rappel* describes it as 'ce livre terrible qui eut tant de retentissement' (1898). *Le Tintamarre* asserted that *Les Femmes eunuques* portrays 'les aberrations des sens, si complexes et si terribles' (1899) and *Le Journal Amusant* references 'des pages audacieuses' (1903) in which *La Graine* represents artificial insemination.

The Role of Medicine within Representations of Reproductive Surgery

When representing ovariectomy, the majority of literary sources identify the procedure as a modern surgical 'invention', a mark of scientific 'progress' which illustrated complete medical (and therefore male) control over women's fertility. Consequently the role of medicine within representations of ovariectomy is particularly important, not only in interrogating how the profession applied and justified the procedure, but also in examining the interactions between physician and patient. This section seeks to ask how and why the medical practice of ovariectomy was adopted into literary texts, and what these literary representations illustrate about broader perceptions and anxieties surrounding medical practice at that time.

A Treatment for ‘Modern’ Feminine Ailments

Tracing the history of ovariectomy, John Studd comments that, during the nineteenth century, ‘[o]variectomy became the measure of a surgeon’s ability at a time when most advances in abdominal surgery were performed in women with gynaecological disorders’ (2006: 412). After Jules Péan developed the procedure in France (Finn 2009: 27), women’s ovaries were increasingly removed for ‘menstrual madness, oophoromania, hysterical vomiting, epilepsy, dysmenorrhea, [...] nymphomania and masturbation’ (Studd 2006: 412); the popularity of this operation leading to annexes of psychiatric hospitals being dedicated solely to the procedure (Studd 2006: 412).¹³⁴ In *Les Femmes eunuques*, Dubarry summarises contemporary perceptions of ovariectomy, stating that ‘les chevaliers du couteau et des ciseaux jur[ent] que la castration est la panacée infaillible’ (1898: 151) before listing the myriad of ailments that it was supposed to cure.¹³⁵

Indeed, ovariectomy was also presented as a mandatory treatment to cure illnesses and injuries caused by ‘modern’ female habits:

La précocité, les affections contagieuses, l’anémie, la corruption du sang, le stupide corset, l’épuisante machine à coudre, l’abus de la bicyclette sont devenus les pourvoyeurs de nos habiles chirurgiens. La science a été réduite à supprimer un organe malade qu’elle ne pouvait plus guérir. (Deschaumes 1896: 177)

This statement references all social classes, from the intense labour of seamstresses, to the emancipatory bicycle and fashionable corset, presenting female-specific illnesses as universally present within French society. These ‘modern’ lifestyle habits and practices were put forward as threatening the ‘natural’ functioning of the female body (Deschaumes 1896: 177) and ovariectomy was thus presented as a very modern procedure, designed to cure equally modern feminine problems.

¹³⁴ The propensity to perform abdominal operations on women is not only attributable to trends in medical belief, it was also financially productive. Summarising the reputation of Dr Boisieux, a lawyer recalls that the physician extorted five thousand francs from a rich young woman for an exploratory diagnostic laparotomy, which he claimed needed to be followed by another, more expensive, procedure. Another surgeon, consulted by the patient’s disgruntled family, refuted these claims, stating that the young woman needed a simple, and non-surgical, course of treatment. The second surgeon’s advice was followed and the young woman was promptly healed (Lèbre 1897: 346).

¹³⁵ Pichevin also notes that ovariectomy is seen as ‘une panacée à tous les maux des pauvres femmes qui souffrent’ (1890: 32).

However, mirroring this notion of ‘modern’ ailments, many sources also present the abuse of the procedure as caused by ‘modern’ medical advancements, particularly the recent discovery of antiseptics and sterilisation, in addition to the increasing popularity of the laparotomy (*La Semaine gynécologique* 1905).¹³⁶ Whilst some argue that antiseptics made ovariectomy ‘une des opérations les plus simples et le plus bénignes de la gynécologie’ (Barozzi 1907: 688), Pichevin states that the abuse of ovariectomy is a chapter of history defined by ‘des méfaits commis sous le couvert de l’antiseptie, par quelques opérateurs qui semblent professer que la laparotomie est l’alpha et l’oméga de la chirurgie’ (1890: III). Canu argues that the supposed success of ovariectomies is ‘un mirage par les brillants succès opératoires que l’antiseptie permet d’obtenir’ (1897: 142).

For both medically approved and unjustified ovariectomies, the practice was extremely controversial, dividing the medical profession. Much of the criticism aimed at the procedure posited that women were sterilised without any physiological injuries or illnesses, prompting Pichevin’s assertion that ‘jamais opération ne fut plus décriée que la castration de la femme; jamais aussi opération ne fut plus souvent et plus inutilement pratiquée’ (1890: II). Attempting to define the procedure and the symptoms it was said to cure, Pichevin also identifies multiple ways that the procedure had been wrongly used, including the removal of healthy ovaries and the provocation of early menopause. The vaguest definition given was that the procedure could be applied for ‘le changement artificiel de vie’ (1890: 15). This definition was perhaps intended to encompass the myriad of nervous symptoms or hereditary illnesses which were said to be cured or halted by sterilisation, or could be seen as a veiled reference to the use of the procedure as a permanent form of contraception.

Regardless of the illness and its location, it was common practice to remove the entirety of a woman’s reproductive organs, rather than only removing what was necessary. In many cases, it was possible for surgeons to remove cysts without removing the entire organ, or to leave behind one ovary, ensuring the continued fertility of the patient (Pichevin 1890: 31). However, many surgeons appear to simply remove both ovaries, unnecessarily sterilising the woman. This is in contrast with male sterilisation, where men often retained ‘un testicule

¹³⁶ This emphasis is evident in literary texts, such as in *La Graine*, where Dr Domesta advertises his services, repeating frequently throughout the novel: ‘stérilisée la seringue, oui, signor, stérilisée à l’autoclave!’ (1903: 78), emphasising the irony that his sterile syringes contain his own semen with which he fertilises his clients, often without their permission. Similarly, *Le Mal Nécessaire* makes frequent references to sterilisers and sterilised sheets (1899: 91-100).

moral' (Pichevin 1890: 31). This unnecessary removal of ovaries is summarised in Dubarry's *Les Femmes eunuques*. When Mme Eugénie undergoes the procedure, the surgeons marvel: 'Les ovaires, l'utérus sont intacts, je l'aurais certifié; ni tumeur, ni adhérences, et le bassin à la perfection de forme d'un vase antique' (1898: 180). Having undergone the procedure on the advice of her mother-in-law and physicians, who warned of traumatic birth and degenerate offspring, Eugénie's organs are, in fact, perfectly shaped and suited to produce healthy offspring. Similarly, in *Fécondité*, if Dr Gaude 'avait erreur de diagnostic, s'il se trouvait en présence d'un organe sain, il enlevait tout de même quelque chose, ne voulant pas recoudre sans avoir coupé' (Zola 1899: 364).

Medical Celebrity

This unnecessary removal of healthy ovaries can be situated within a broader anxiety surrounding medical practice and the power of the surgeon. The article, 'Les Abus de la Chirurgie' (*Le XIXe Siècle* 1896) indicates a growth in criticism of physicians and surgeons, questioning how the practice of medicine was regulated and in what manner new techniques and medical discoveries were being employed in France. This anxiety was further developed from the 1890s onwards, leading to publications in the early twentieth century with such titles as: *Défends ta peau contre ton médecin* (Soller and Gastine 1907) which put forward the irresponsibility of surgeons: 'Le médecin, sous le prétexte de guérir un simple "bobo" ou un mal imaginaire, peut impunément, ruiner la santé de qui vient le consulter; il peut l'éventrer, l'amputer, le tuer à son gré – pourvu que ce soit dans les "formes médicales"' (1907: VII). This criticism came from both within and without the medical profession, as affirmed by Gaston Lèbre, who states that 'la chirurgie moderne tout entière a été prise à partie' (1987: 337) by the topic's controversy.

Although this increasing fear of the physician's influence is a broader trend within medical and popular discourses, it was particularly prominent in discourses of women's reproduction. Within this trend, ovariectomy and other reproductive surgeries were commonly foregrounded alongside imagery of immoral or corrupt medicine, particularly amongst literary representations of sterilisation. Contemporary texts were concerned with the regulation of the procedure, particularly with regard to the power and accountability of the surgeons who undertook it (Linton 2018: 581). This concern is emphasised in literary texts

which repeatedly foreground the figure of the ‘celebrity’ surgeon, founded upon physicians who became famous for their practice of ovariectomies. During this period, female sterilisation became a vogue through which ambitious surgeons could gain notoriety and fame, a trend which is heavily criticised by Canu, who condemns hospitals where ‘on châtre les femmes d’une manière indigne, coupable, soit pour acquérir quelque notoriété, soit par intérêt direct’ (1897: 140). One such celebrity surgeon was Jules Péan, who was celebrated for his work on women’s reproductive illnesses, as well purportedly operating upon over 777 women (*Le XIX siècle* 1896). The fame of these surgeons was assisted by newspapers in which they published their successes and statistics. Such statistics were heavily criticised by fellow physicians, who argued that a large proportion of operations were not reported and that physicians were unlikely to publish those which ended in death (Nordau 1882: 55).¹³⁷

Reports of excessive sterilisation raised criticisms over the financial greed of many physicians, and Pichevin criticised that ‘la soif des richesses n’a certainement pas été étrangère à l’orientation imprimée à la chirurgie dans ces dernières années’ (1890: IV). Within the broader villification of ovariectomists in literary texts, many emphasise the financial extortion of patients. Jaf describes the apartment of a corrupt surgeon which is situated above his clinic: ‘En haut, c’était propre, luxueux; en bas, dégoûtant, ignoble’ (1907: 6).¹³⁸ In the same text, the wealthy ovariectomist wishes to convince the moralistic but poor Dr Lhomond to join him in his exploitative practice:

Vous vous rebiffez en votre science de chirurgien et votre conscience d’honnête homme! Mais c’est stupide! C’est ridicule! Votre intérêt commande... Obéissez! docteur, c’est l’avenir! docteur, c’est le bien-être, la richesse même, pour votre femme chérie et vos enfants adorés!... Pour vous, c’est la gloire! (Jaf 1907: 18)

¹³⁷ This notion is evident in *Le Mal nécessaire*, in which Dr Caresco attends conferences to ‘raconter des succès opératoires impossibles à contrôler, étaler des statistiques commodes à fausser’ (Couvreur 1899: 171). Zola’s *Fécondité* also illustrates the use of advertisement through Dr Gaude: ‘Les journaux s’occupaient constamment de lui, il montrait au plein jour de la publicité ses opérées sans importance, ce qui encourageait les belles dames à tenter l’aventure’ (1899: 35). By advertising simple and routine operations that were successful, and remaining silent on those that were not, Dr Gaude lures women into his clinic. The novel also suggests that new printing techniques facilitated the promotion of Gaude’s operations: ‘Des peintures, des gravures, des dessins l’avaient popularisé, au travail, le grand tablier blanc noué sur la poitrine, les poignets nus, beau comme un dieu qui tranche et dispose de la vie’ (1899: 364).

¹³⁸ See Introduction for an examination of Jaf’s (Pseudo. Fauconney) plagiarism of Dubut de Laforest’s novel. Because the plagiarised version is more specifically angled towards the debates surrounding sterilisation in the early twentieth century, and includes pertinent pseudo-medical additions, I will reference this later text rather than the original. Equally, references to the author will refer to Jaf rather than Fauconney, as this was the name the novel was published under. As discussed in the Introduction, Jaf was just one of the many pseudonyms used by Jean Fauconney.

Similar motivations are represented in in *Les Demi-sexes*, in which Dr Richard's trial brings to the public's attention 'l'existence dans Paris d'officines suspectes, où, sans aucun contrôle, certains médecins pratiquent journallement des opérations bizarres, destinées uniquement à leur rapporter la forte somme' (La Vaudère 1898: 281). Equally, in *Le Mal nécessaire*, Dr Caresco exploits his wealthy clientele in order to fund his expensive mistress (Couvreur 1903: 167), whilst in *Les Florifères*, Dr Trajan constantly invents new reasons to operate on his wealthy clients (Pert 1898: 79).¹³⁹

In addition to this emphasis on financial greed, literary texts also contain many representations of the immoral physician, testifying to the controversy and popularity of the topic. These representations interrogate the morality, greed, ambition and even sexuality of these physicians, presenting the multiplicity of their corruption. Notable among these representations are those which emphasise the figure of the 'celebrity' surgeon and their elevated status in society, as emphasised in Espé de Metz's novel, *Le Couteau, essai dramatique sur les limites du droit chirurgical (Le Couteau)* (1910), which opens with a medical student announcing that a surgeon, wielding a scalpel, 'est le roi du monde moderne, que rien, rien entendiez-vous, Messieurs, ne peut arrêter son ambition, contenir son essor, briser son élan' (1910: 10). In *Les Demi-sexes*, Dr Richard embodies this figure through his excessive sterilisation of rich women. In his portrait: '[il] 'semblait sourire au ruban rouge de sa boutonnière' (La Vaudère 1898: 3-4). The irony of this reward for civil merit, the légion d'honneur, is manifest in his 'uncivic' acts of denying France the offspring of its female civilians, emblemising the escalating power of medical institutions at the end of the nineteenth century (Linton 2018: 580). At the dinners of the 'demi-sexes' – the women sterilised by Dr Richard – the physician is the only man present and is treated like an idol and god: 'À lui allaient tous les sourires, toutes les actions de grâces' and he can choose any of the women to be his lover (1898: 283).

This representation of the sterilising physician as deified, particularly amongst his female clients, is a recurrent theme within literary texts. In *Les Florifères*, the surgeon Dr Trajan appears amongst a crowd of his patients as 'le maître, le véritable Dieu de ces Parisiennes

¹³⁹ Within these sources, this fear of the corrupt physician is accompanied by a nostalgia for 'traditional' medicine which is presented as moral, reliable and just. The corrupted Dr Gaude is juxtaposed with the older, wiser and more traditional physician Dr Boutan in *Fécondité* (Zola 1899), whilst in *Le Graine*, Couvreur praises 'le bon sourire, le sincère accueil de l'honnête praticien, tout auréole de la couronne blanche des cheveux et des favoris écartés, avec lesquels contrastait la jeunesse des yeux arqués de sourcils noirs' (1903: 160).

s'empessant autour de lui' (Pert 1898: 13). Although these representations originally appear to align the surgeon with a benevolent god-like figure, who liberates women from their reproductive 'destiny', each novel reveals that the surgeon is motivated by money, ambition or power. In *La Grappe*, Dr Frex originally believes his duty is 'affranchir les femmes de leur mission, se faire leur confesseur et leur donner l'absolution du bistouri, lui apparait comme une sorte de sacerdoce antisociale peut-être, mais quasi-divin' (Landay 1904: 145). As their liberator, Frex views himself as a god-like saviour of woman-kind. However, he soon becomes fixated upon the power he experiences when sterilising his patients:

Et ce fut alors chez lui de la manie, une sorte de délire inhumain, une griserie. La *Grappe* d'ovaires d'égrainait sous ses doigts. Toute femme qui souffrait dans ses sources intimes laissait entre ses mains sa raison d'être et devenait l'inutile hochet de la jouissance de l'homme; 'l'androgyné indépendante, l'affranchie meurtrie. (Landay 1904: 145-46)

This excerpt suggests that, despite the original intention of working for women's sexual freedom, his mania for the procedure becomes motivated by the domination of their bodies, a repurposing of their sexual organs for male pleasure without the consequence of pregnancy.

This fixation upon the domination of the female body through surgery is an omnipresent theme throughout representations of sterilisation. Moscucci notes that 'the conquest of ovarian disease by surgery became subtly blended with the domination of the passive female patient by the brutal male surgeon' (1990: 156). Although this notion will be further examined shortly in an exploration of non-consenting patients, it is also present in literary representations of sterilisation which implicate the sexuality of the surgeon when left alone or unsupervised around young women. In *Les Femmes eunuques*, Dr Wenceslas, observed by Dr Chandart, shaves the pubis of his unconscious female patient 'non sans avoir prisé, en paillard de race, ce qu'il venait de dévoiler, ce que, de son coin, Chandart lorgnait sournoisement' (Dubarry 1898: 176). Firstly, the shaving of the pubic area prefigures the upcoming ovariectomy, which will rid the patient of her fertility, implying that she will return to a pre-pubescent state. However, key to this scene is the voyeuristic gaze of the two doctors, who take advantage of the patient's unconscious state for their own arousal. Through this scene, the novel presents the mingling of the supposedly objective medical gaze with male

sexual desire, illustrating that beneath the guise of medical professionalism, male sexual desire is not fully repressed.¹⁴⁰

In addition to fuelling concerns around female patients left unsupervised amongst male physicians, this literary example also emphasises concerns surrounding medical regulation outside of the hospital. At the end of the nineteenth century, many physicians ran private clinics, establishments which were less subject to the regulation governing public hospitals. In *Fécondité*, Dr Boutan highlights that, despite attempts at regulation in private clinics: ‘il n’y a ni témoins gênants, ni contrôle d’aucune sorte’ (Zola 1899: 369). Similarly in *Les Femmes eunuques*, Dubarry argues that physicians in such establishments are ‘placés hors des atteintes du code, libres de se laisser aller à leur quintes, de mutiler, bannissant la compassion sottie, ils se comportent avec autant de sans- façon que le boucher à l’étal’ (1898: 148).

In addition to anxiety surrounding the lack of regulation within private clinics, literary texts represent physicians’ ability to perform surgery within the domestic space, emphasising a blurring of the domestic and clinical, public and private. In *Les Demi-sexes*, Camille’s ovariectomy takes place at her home; the bed is moved to the window to let in light and ‘sur les meubles s’étalaient des compresses, des pinces, de l’ouate et des instruments d’acier de forme redoutable dont l’éclat attirait le regard (La Vaudère 1898: 79). This placement symbolises the invasion of medicine into the domestic space, the juxtaposition of the domestic and the medical reinforcing the illicit nature of the procedure, wherein the bedroom is converted into an operating theatre. Similarly, in Pert’s *L’Autel*, during an abortive procedure, the domestic and clinical are swiftly blended, emphasising the practiced repetition of the procedure:

Cinq minutes [...] suffirent au docteur et à l’interne pour transformer la salle à manger en une salle d’opération: les chaises portées dans les pièces voisines, la table dégarnie de son tapis, des cuvettes, des linges, des instruments disposés sur l’étagère et sur le buffet. (1907: 830)

¹⁴⁰ This notion can also be found in Couveur’s *Le Mal nécessaire*, in which Dr Caresco rapes his unconscious prospective patient Madeleine when she faints during an excursion. Caresco later performs an abortion and ovariectomy upon her, concealing the pregnancy caused by the rape (1903: 63). Madeleine’s body is therefore dominated and exploited in both a sexual and medical manner. The sexual crimes of Dr Caresco continue to be represented in *Caresco surhomme* (1904), in which he rapes women whilst they are unconscious on his operating table.

Pert's description of the procedure reinforces the appropriation of domestic objects for clinical use; the table becomes the hospital bed and the dresser is transformed to display surgical instruments.

This association between the medical and the domestic is employed more broadly to contrast the legal practice of ovariectomy within hospitals with illegal sterilisations and backstreet abortions (Couvreur 1903: 71) as Péan compares the sanitary clinic with 'des chambres étroites et mal disposées au point de vue de l'aération et de la lumière' (1867: 4). In fact, in the above example from *Les Demi-sexes*, despite the experience of the surgeon performing the ovariectomy, the domestic environment of Camille's procedure prompts links to a backstreet abortionist: 'elle se vit pantelante, inanimée, couverte de sang' (La Vaudère 1898: 73). Medicine's attempts to distance medically legitimised ovariectomy from illegal abortion were dogged by links to illicit sterilisations and corrupt physicians. Therefore, literary and popular association between medical 'techniques' and backstreet abortion, long associated with butchery and death, reveals significant anxiety around medical 'progress' and the popularity of the ovariectomy.

Concealment of Abortion

Included in this anxiety were concerns that the procedure could be performed to conceal a pregnancy and function as an abortion. Moscucci highlights that diagnoses of ovarian disease or tumours may have frequently been used to conceal pregnancy, particularly by wealthier clients who could afford to pay for a discreet physician (1990: 146-47). He argues that most medical texts avoid this topic due to the taboo and illegality surrounding contraception and abortion (Moscucci 1990: 146). However, as seen in literary texts, this deliberate misdiagnosis and concealment remained a significant part of public and popular debates on the topic of ovariectomy.

The most iconic example of this deceit is the Boisleux-La Jarrige trial. In this case, two physicians, Boisleux and La Jarrige, were accused of multiple abortions and unjustified abdominal operations.¹⁴¹ Denying that they had intentionally carried out an abortion on a

¹⁴¹ Lèbre's *Revue des grands procès contemporains* (1897), presents a detailed report of the crimes and subsequent trial. The wide range of publications that reported on the trial attests to its notoriety; a report of the case was included in the 1910 edition of Tardieu's *Étude médico-légale sur l'avortement*, as well as being

Mlle Thomson, La Jarrige stated that he did not believe the woman to be pregnant, whilst Boisieux protested his ignorance of the pregnancy, stating: ‘l’examen que j’ai fait m’a fait croire à l’existence d’une tumeur!’ (*Le Figaro* 1897).¹⁴² Boisieux had previously published a medical pamphlet entitled *Des Blessures de l’utérus dans l’avortement criminel* (*Le Figaro* 1897) signalling how academic interest in the topic could lead to the practice of the manoeuvres for financial gain.

From a literary perspective, in Jaf’s *Ovariectomie et faiseuses d’anges*, Dr Jovis performs an abortion on a young woman with an illegitimate pregnancy, stating:

Par l’ovariotomie, moi et les autres nous détruisons en bloc la grappe humaine qui doit féconder la virile semence... Nous supprimons, et sur une personne, le germe de tous les enfants... Or, à votre requête, on n’en supprime qu’un! et encore une embryon, un rien! et on laisse la source de vie. (1908: 38)

Dr Jovis instructs his pregnant patient to visit him with her father and to complain of abdominal pains: ‘je diagnostiquerai une affection nécessitant une opération légère et ordonnerai le séjour de la malade dans une maison de santé’ (1908: 40). Canu similarly recounts how some women, ‘se trouvant enceintes et croyant également qu’ultérieurement elles pourront agir sans craindre une déception, simulent des douleurs, harcèlent le chirurgien pour se faire enlever un utérus gravide’ (1897: 126), recounting another example of a woman’s lover convincing her she has a tumour when she is pregnant, involving a complicit physician (1897: 162).¹⁴³ A similar deceit takes place in Zola’s *Fécondité* when, on

reported in multiple newspapers such as *Le Radical*, *Le Figaro*, *Le Grand écho du nord et du Pas-de-Calais*, *Gil Blas*, *Le Matin*, *Le Pays* and *Le Temps*. The significant depth in which non-specialist newspapers reported on the trial reinforces public interest and the trial’s relevance to contemporary debates on depopulation and fertility regulation.

¹⁴² It is interesting to note that this case also presents a reversal of the stereotyped roles of physicians and midwives vis-à-vis abortions; In this case the pregnant Mlle Thomson visited the midwife Bielawska who ‘refusa de prêter l’oreille aux propositions qu’elle lui fit’ (Lèbre 1897: 334). Rejected by the law-abiding midwife, the reticent Mlle Thomas and her lover returned to the physician Boisieux who was willing to undertake the abortion, thus contradicting the frequently presented dialectic between the moralistic physician and the avaricious and immoral midwife. The Boisieux-La Jarrige case also provides an opportunity to observe the difficulties of regulating physicians and the practice of these operations. In *Le Figaro*’s report of the trial, despite the qualifications of the physicians, it is revealed that Boisieux’s clinic was ‘dans un état de saleté repoussante’ and that his staff were ‘inexpérimenté’ (*Le Figaro* 1897). The room at his home, where the illegal operations were carried out, is described as similarly unhygienic (Lèbre 1897: 334) and the operation on Mlle Thomson was assisted by ‘le cocher de La Jarrige et la bonne de Boisieux’ (*Le Figaro* 1897). During the trial and subsequent reports, this lack of hygiene is used to prove ‘l’insouciance criminelle avec laquelle le docteur Boisieux traitait ses malades’ (Lèbre 1897: 334).

¹⁴³ This same situation is replicated in *Le Mal nécessaire*, in which Caresco wishes to abort the foetus of Camille, who he raped, without her discovering the truth. To do so, he uses an inexperienced assistant ‘sous les

discovering Reine's pregnancy, Séraphine decides that 'sa jeune amie devrait bien profiter de l'occasion pour se faire opérer comme elle, ce qui, d'un seul coup, la débarrasserait de son mauvais cas et la guérirait à jamais de la maternité' (1899: 380). Visiting Dr Sarraille, Reine is told to simulate abdominal pains, whilst a payment of a thousand francs ensures that the doctor 'finit par diagnostiquer une tumeur' (1899: 382). The implied complicity of the physician in this process reflects the anxiety surrounding immoral medicine and the difficulty in regulating those who carried out reproductive surgery.

The breadth of texts portraying immoral physicians undertaking illegal or unnecessary operations forms part of a wider discourse in which the position of medicine and physicians in society was under interrogation. By representing individual physicians, working alone in private clinics, these texts emphasise concerns surrounding the regulation of medical professionals and reflect contemporary criminal trials in which this danger was broadly advertised to the public. This wide variety of sources from different disciplinary areas consistently presents ovariectomy alongside imagery of corrupt medicine and malpractice anxiety. The procedure was seen as a 'modern' treatment, aligned with the recent increase in fears of medical corruption. Just as medicine's growing power had reached potentially threatening levels, ovariectomy was seen as an associated threat, resulting from advances in medical practice. Aligned with surgeons' ability to gain fame and wealth from the popularity of the procedure, the notion of the 'celebrity' surgeon highlighted that, for some, financial or social gain might be prioritised above adherence to the Hippocratic Oath. In particular, implications of sexual assault during examinations or procedures reinforce contemporary fears surrounding the reliability of the 'objective' male gaze, in addition to emphasising the control and dominance of the male physician over the female patient. Representations of this ambition and immorality coincided with the lucrative possibility of concealing abortions with other reproductive surgeries, highlighting that those with the correct training could perform criminal abortions undetected by the authorities, implying that they were, to some effect, above the law.

yeux duquel il pourrait escamoter l'opération, faire passer l'uterus gravide pour une de ces tumeurs fibreuses si fréquentes' (Couvreur 1899: 283).

The (Re)Productivity of the Female Body

The evidence of medical dominance over the female body in representations of ovariectomy is similarly manifested in descriptions of patients and the justifications given for the procedure. The nature of sterilisation and its implications on a woman's fecundity inevitably raised discussions of which women should, or should not, be reproducing, a line of enquiry which intersected with contemporary belief systems such as theories of degeneration, social Darwinism and eugenics. This debate consequently placed an increased emphasis on women's reproductive ability, an emphasis foregrounded in the titles of contemporary novels: Landay's *La Grappe* emphasises that 'La mode est à l'ablation des ovaires. [...] *La Grappe* est cueillie avant d'être mûre' (1904: 152). Meanwhile, the title of Pert's *Les Florifères* denotes women in contemporary society: 'Elles sont telles que certains arbustes créés par la culture moderne, aux admirables fleurs qui ne portent point de fruits' (1898: 26). As discussed earlier in the examination of contraception, many literary authors leaned upon agricultural imagery to represent women's fecundity, a theme which is also manifested in ovariectomy discourses through references to fruit and harvest. Despite 'natural' imagery, these references suggest the necessity of a form of horticulture; a level of human control or management to correctly control fertility. In discourses of ovariectomy, this control is enacted by medicine and this section will examine the ways in which a woman's 'right' to fertility was assessed and regulated according to her health, social class and productivity.

Sterilisation and the Application of Eugenics and Social Darwinism

Theories of who should or should not reproduce are also implicated in women's reproductive surgery at the end of the nineteenth century. Alongside criticisms of women who sought out sterilisation as an opportunity to avoid motherhood or conceal abortion, nineteenth-century medical, popular and literary texts contain a rhetoric citing sterilisation as a means of halting degeneration and controlling the reproduction of the nation. The growing influence of social Darwinism in France, as traced by Clark (1984), heavily influenced medical discourses and practices, both of which consequently affected familial norms and popular beliefs (Hildreth

1994: 191).¹⁴⁴ In 1883, the term ‘eugenics’ was coined by Francis Galton, referring to the improvement of human stock through breeding (Richardson 2003: 2). Despite the growing popularity of Darwinism, the persistence of the Lamarckian tradition in French biology greatly influenced how French eugenicists attempted to improve the human race (Schnieder 1982: 269) and Hildreth reinforces ‘that the notion that the acquired flaws of one generation, such as alcoholism and syphilis, could doom subsequent generations [...] had a profound impact on the medical understanding of certain diseases and symptoms.’ (1994: 198).¹⁴⁵

In this respect, Lamarckism intersected with degeneration theory, popularised in France by Max Nordau (1895), Benedict Morel (1857) and Gabriel Tarde (1886).¹⁴⁶ This popularity placed a greater emphasis on the negative consequences of allowing the reproduction of those living in poverty, vice, illness or disease. Combined with the popularity of social Darwinism, these theories of degeneration, popularised by French alienists, sociologists and anthropologists, began to be incorporated into discourses on eugenics. Some social Darwinists such as Jules-Louis Fauvelle contended that the drop in the birth rate was due to ‘poor selection of mates’ and wished educators to ‘teach that physical and mental health should be the major criterion for choosing a spouse’ (Clark 1984: 142). Overall, the intersection of these discourses in the late nineteenth century resulted in a popular, but controversial, belief that through the encouragement or restriction of breeding, the French nation could counter degeneration and improve the future of the race. The growing popularity of ovariectomy provided a means of enacting that restriction upon women who were deemed ‘unsuitable’ for reproduction.

Many literary representations of ovariectomy imply that the procedure could be used as a means to halt degeneration and prevent the spread of disease or illness. This notion is at the heart of Couvreur’s *La Graine*, with its central motif of ‘badly-sown seed’ as examined

¹⁴⁴ Social Darwinism refers to the application of Darwinism to Sociology and Politics, the notion that the strongest in society would triumph over the weak. As poverty was seen as a sign of weakness, this included denying aid to the poor (‘Social Darwinism’ in *Encyclopædia Britannica*), a concept which was aligned with Malthusian beliefs.

¹⁴⁵ The use of Lamarckian refers to Lamarckism, named after the French biologist Jean-Baptiste Lamarck and denoting the evolutionary theory that ‘physical changes in organisms during their lifetime – such as greater development of an organ or a part through increased use – could be transmitted to their offspring’ (‘Lamarckism’ in *Encyclopædia Britannica*).

¹⁴⁶ See Nordau’s *Dégénérescence* (1894), Morel’s *Traité de dégénérescences physiques, intellectuelles et morales selon l’espèce humaine* (1857), *Traité des maladies mentales* (1870), Magnan’s *Leçons cliniques sur les maladies mentales* (1893) and Legrain and Magnan’s *Les Dégénérés, état mental et syndromes épisodiques* (1895).

earlier in the chapter on contraception.¹⁴⁷ However, it is examined more explicitly in other texts such as Corday's *Sésame* though the character of Mme Hélie who becomes pregnant before her husband is taken away to an asylum. The legacy of the father's mental illness is manifested in the child who is 'fragile [et] étioilé' (1903: 20) and the novel traces his repeated illnesses; linking 'la folie du père et la faiblesse de l'enfant' (1903: 77). Discussing the child, one physician argues: 'il y des hommes qui ne devraient jamais avoir d'enfants. Ceux-là, quand ils deviennent pères, commettent un crime' (1903: 77). Despite this focus on male degeneration, it is highlighted, through the mythical contraceptive and sterilising liquid, that the halting of degeneration should be enacted through the female body.¹⁴⁸

Although not explicitly about ovariectomy, Lepage's representation of abortion in *L'Âge d'or. Avortée* also present similar justifications for allowing women to control their fertility. One physician argues that abortion is a means of stopping those with inherited illnesses from passing them on: 'il faut permettre l'avortement dans certains cas, bien définis, et le proscrire expressément dans certains autres' (1907: 29). He argues that society cannot stop syphilitics and alcoholics having sex, yet 'je vous défends d'avoir des enfants; je les tuerai dans l'œuf et si vous en créez je les tuerai plus tard, car vous n'avez pas le droit de leur imposer l'épilepsie, la tuberculose, la syphilis' (1907: 29). Through this rhetoric, Lepage's novel can be seen as the antithesis of the cult of fertility found in Zola's *Fécondité*. Whilst Zola glorifies fecundity in all forms, condemning abortion and sterilisation, Lepage's novel presents a new opposing religion as the physician says: 'L'Avortement d'un côté, la Paix de l'autre, voilà les deux pierres fondamentales sur lesquelles je bâtirai mon église laïque, le temple magnifique de la société idéale, à l'âge d'or' (1907: 39).

This trend is further illustrated in Dubarry's *Les Femmes eunuques*, wherein ovariectomy is presented as a eugenicist method of avoiding degeneration. Touting for the surgeon Dr Wenceslas, Dr Chandart proclaims:

On ne supprimera l'aliénation mentale qu'en châtrant les folles, les fous, les tuberculeux, les ivrognes, les ivrognesses, les hystériques, les progénitures des

¹⁴⁷ Couvreur's *Le Fruit* also discusses similar concepts of 'badly sown seed'; the idea that those in poor health should not reproduce and pass on their defects (1906: 145-148).

¹⁴⁸ See Chapter One for an examination of this contraceptive 'elixir'. It is pertinent to note that sterilisation and depopulation are presented as problems curable by women's sterilisation, despite the fact that the first vasectomy had been performed in France in 1885 by Félix Guyon (Serna 2013).

dégénérés et tous les individus atteints d'une maladie chronique quelconque.
Châtrez! Châtrez! est sa turlutaine. (Dubarry 1898: 31)

His theory that 'Il faudrait stériliser les neuf dixièmes de la chrétienté' (1898: 35) is promulgated by the surgeon, and they both profit from the procedure.¹⁴⁹ These fears of degeneration manifest themselves in the sterilisation of Mme Eugénie after her mother-in-law becomes convinced that, due to the mental illness of a relative, she should be sterilised to prevent the birth of a child 'condamné ou condamnée, par la loi implacable de l'hérédité, à être un fou ou une folle' (1898: 84).¹⁵⁰ The sales-patter of the two physicians even extends to giving Mme Eugénie's mother-in-law a tour of an asylum, illustrating the consequences of degenerate reproduction and the belief that 'rien n'arrête l'hérédité, rien que la castration' (1898: 85). These literary texts indicate the increasing intersection of social Darwinism and theories of Eugenics and social degeneration in representations of ovariectomy, in addition to illustrating increased medical involvement in women's fertility. These discourses therefore assume male responsibility for women's bodies, incorporating social and ethical theories into practical surgery and viewing women's fecundity in terms of the health of their 'produce' or offspring.

Non-Consenting Patients

Continuing to focus on how ovariectomy patients and procedures were represented, there is a considerable discrepancy between the way in which ovariectomy is presented in different social classes, revealing deeply embedded assumptions and preconceptions about women's bodies, and the role that they were expected to play in society. Whilst several scholars have examined working-class women's lives in nineteenth-century France, there has been very little research into how working-class women's bodies were viewed and treated by physicians and, more specifically, surgeons.¹⁵¹ Linking back to the earlier focus on an anxiety

¹⁴⁹ This is a rare reference to sterilisation in both men and women. However, despite the distinction between 'folles' and 'fous', 'ivrognes' and 'ivrognesses', the text makes no further reference to male sterilisation.

¹⁵⁰ The term used to refer to the relative's illness is 'un ramollissement du cerveau' (1898: 31) which could refer to encephalomalacia (the softening of the brain) or more informally as 'going soft in the head'. Either definition would have resulted in the patient being considered an 'aliéné'.

¹⁵¹ For example, Fuchs (1992), explores pregnancy, abortion and infanticide for working-class women in nineteenth-century France. However, Fuchs ignores sterilisation and ovariectomy, focusing instead on women's interactions with welfare and charitable institutions. Practicing medical techniques on the poor before

surrounding immoral physicians, in addition to concerns surrounding surgeons' motivations, contemporary texts also highlight a growing fear of medical exploitation, particularly within the working classes. Hilbeth recounts that a Dr Divernesse warned 'workers that if they entered the hospital they would be subject to the experiments of the savants as well as providing practice material for interns' (Hildreth 1995: 197). In literature, authors such as Léon Daudet presented villainised, vivisectioning physicians, who carried out gruesome experiments upon their citizens, as found in *Les Morticoles* (1894); a trend which was strengthened by the publication of H. G. Wells' *The Island of Doctor Moreau* (1896).

Fears over the misuse of ovariectomy linked into these fears of experimentation, also revealing how women from different social classes were treated by physicians. As will be examined in due course, the literary texts examining upper-class women frequently furnish them with a narrative in which their motivations for seeking an ovariectomy (whether criticised or not) are explored and examined in detail. The same justification is lacking in representations of working-class women, who are occasionally portrayed after the procedure, but not before, preventing any opportunity to present their motive. This literary silence suggests a broader silencing of the working-class female body in reproductive surgery, specifically sterilisation, revealing medical and popular attitudes towards the role of fertility in the working classes.

Nowhere is the disregard for women's consent more evident than in Canu's compilation of case studies. Despite the purported inaccuracy of his statistics, the case studies used in this source are a rare example of directly reported speech from working-class women, who make up the vast majority of the cases.¹⁵² From the 38 cases, 25 indicated whether consent was given or not. Of those 25, 18 women did not give their consent to be sterilised, whilst four women gave their consent to surgery, but were not informed of what the procedure was, or of the consequences. In the total of 38 cases, only three women explicitly consented to be sterilised, understanding the consequences for their fertility. The vast majority of these working-class women did not give consent and were not given the choice in limiting their fertility, despite Canu's assertion that many could have been cured through therapeutic

employing them on wealthy patients did not originate in the nineteenth century, as Duffin provides evidence that it was carried out in late eighteenth-century Britain and early nineteenth-century America (1994: 137).

¹⁵² The social class of the patient is only clearly indicated in 24 cases (out of 38). Examples of the women's professions are washerwoman, charwoman, seamstress, concierge, midwife etc. There is only one indication of an upper-class or wealthy patient, whose parents paid five thousand francs for the procedure.

treatment and without recourse to surgery.¹⁵³ This lack of consent is heavily criticised in popular journalistic texts, and *Le XIX siècle* comments: ‘ce qui est plus révoltant que tout, c’est que dans la majorité des cas, l’opération a été faite sans le consentement de la malade, quelquefois même contre sa volonté formellement exprimée’ (1896). Even after surgery, women were frequently left in ignorance of their new condition, even when they sought out information. In one example, after asking a medical intern what had been done to her, she was told ‘qu’elle n’avait pas besoin de le savoir’ (n.a. in Canu 1897: 52). Many others found out that they were unable to bear children after reading their own medical charts or asking fellow patients.¹⁵⁴ Another woman reported: ‘C’est deux jours après l’opération que j’ai appris n’avoir plus d’ovaires’ (n.a. in Canu 1897: 35).

Within literary texts, the non-consent of patients is represented, emphasising medical dominance of their bodies. In Riche’s *Stérile* (1890), when discussing an ovariectomy, Renée’s husband tells the physician: ‘Elle ne consentira jamais’ to which he replies ‘elle ne s’en apercevra même pas. [...] Dans aucun cas je ne préviens mes malades’ (1890: 39). Indeed, even after the operation she remains ignorant, telling her husband: ‘si je savais que, sous prétexte d’un pansement sans conséquence, il m’a fait une opération, cause de mon état, je ne vous le pardonnerais point’ (1890: 52). Although this sterilisation is condemned by another doctor, who declares ‘c’est le couronnement de l’infamie!... On mutile une femme! On la rend à jamais stérile, sans s’inquiéter de savoir si elle y consent!’ (1890: 74), the novel presents Renée as helpless against the power of medicine and her husband.

Renée’s body and fertility are repossessed by both the male physician and her husband since the novel suggests that this dispossession is so complete that she is ignorant of her own body after the procedure. The notion that what she believes to be ‘un pansement sans conséquence’ is in fact a serious surgical procedure can be seen as the consequence of modern medical treatment of the female body. As shown by Duden (1991), historically, medicine relied upon women’s bodily experience and testimony, which was then interpreted by the physician. Riche’s novel illustrates a reversal of that notion, wherein chloroform renders the woman utterly ignorant of her own body, which is controlled by the physician. This emphasis on the

¹⁵³ Canu’s opinion is reflected in *Fécondité* where Dr Boutan condemns the work of the surgeon Dr Gaude and advises his patient Euphrasie that rest and therapeutic treatments will cure her instead of sterilisation (Zola 1899: 358).

¹⁵⁴ The woman recounts that she only discovered what had taken place afterwards ‘lorsque j’ai demandé la signification du mot ovariectomie écrit sur ma pancarte’ (*Le XIX siècle* 1896).

silencing power of chloroform is reemphasised in Pert's *Les Florifères* when one sterilised woman states:

Les médecins croient avoir tout découvert parce que, avec le chloroforme, ils peuvent vous disséquer sans que l'on bouge!... Mais, les jours d'avant, les jours d'après, les suppriment-ils?... Et, ce sont ceux-là les plus cruels, ceux qui vous brisent... ceux qui usent les nerfs... détraquent les cerveaux. – Avec leur antiseptique d'aujourd'hui, ils osent tout!... (1898: 239)

Emphasis on the silencing of the patient with chloroform is accompanied here by references to its effects on women after the procedure and the pain they experience, as referenced in *Les Femmes eunuques* and *Le Mal nécessaire*. These texts represent how, after ovariectomies, women are given excessive amounts of morphine to keep them in a pliable state, often resulting in drug addictions when they are finally discharged (Dubarry 1898: 18 and 193; Couvreur 1899: 140).

Abuse of Artificial Insemination

These same themes are also present in representations of an alternative new medical technology, that of artificial insemination. Although the first successful pregnancy from artificial insemination took place in 1776 (Mukherjee and Chakravarty 2012: 382), the first successful birth did not take place until 1884, its controversy causing ethical, theological and medical debates worldwide. This controversy originated in Professor Pancoat's decision to inseminate a woman under anaesthetic with the semen from one of his medical students. At the time, neither the patient nor her husband were aware of what had taken place. However, when the Professor later confessed to the patient's sterile husband, they both conspired to keep the truth from the pregnancy woman and she consequently gave birth (Mukherjee and Chakravarty 2012: 382). This notion that women could conceive whilst unconscious had been a topic of legal, ethical and medical debate for some time. Using examples where women were drunk, narcoleptic or under the influence of ether or anaesthesia, one text highlights that, without any knowledge or physical action, women could become pregnant (Richard 1875: 207). For Richard, this physically unresponsive nature during conception highlighted woman's passivity during the creation of life and suggested that the 'action' originated in the male sperm. This respective activity and passivity of sperm and egg is

consistently reinforced throughout nineteenth-century medical texts, in which terms such as ‘activité’ and ‘animé’ are contrasted against ‘passif’ (Hayès 1891: 61; Vin Lint 1902: 9).¹⁵⁵

These same discourses and the notorious case of Professor Pancoat are taken up in Couvreur’s *La Graine*, through the character of Docteur Domesta who specialises in artificial insemination. In line with the broader plot of the novel, which hinges upon the male decision of whether or not to reproduce, a key subplot traces Rolande and her husband Julien. The former is repulsed by maternity, in opposition to her husband who longs for a child. Taking matters into his own hands, Julien tricks his wife into visiting Dr Domesta for a check-up. On entering Domesta’s clinic, Rolande becomes increasingly silent and passive, taking comfort in ‘la predominance masculine’ (1903: 247) of her husband. Indeed, the subsequent narrative repeatedly emphasises her silence. When she begins to raise objections over her examination, she is silenced: ‘Elle en resta interdite, abasourdie, ne comprenant pas et, à bout de résistance, elle céda brusquement’ (1903: 248). When she lets out a single cry of pain, even this is masked by ‘le bruit d’un orchestre de tziganes’ (1903: 248) put on by the doctor. Indeed, Rolande is finally silenced through the use of anesthetic, after which she is unknowingly and unwillingly inseminated by Domesta.

In line with representations of female sterilisation, this narrative reinforces female passivity during the regulation of fertility. It equally emphasises that anaesthetic both permits and facilitates the complete silencing of the female body and complete medical power; not only is Rolande unconscious during conception, reinforcing the contemporary notion that the female played a passive role in the act, but she is also tricked into the medical procedure of artificial insemination, silenced by both her husband and the operating physician. Later when recalling the operation, Domesta notes that ‘l’ovule peut s’obtenir sans le consentement de la femme’ (1903: 443). This domination is also evident in Julien’s behaviour when viewing his wife’s expanding stomach; the ‘ironie victorieuse’ of his smile, his ‘joie de ravisseur en

¹⁵⁵ In 1893, Alfred Fouillée published a review of literature on the evolution of sex in which he emphasises the different actions and energy of human gametes. In this analysis, the sperm represents the ‘catabolic’ principle of energy expenditure; it is defined by its movement, speed and agility. However, the female egg is described as ‘anabolic’, due to its conservation of energy and passivity. Fouillée notes that ‘[l]’œuf, volumineux, bien nourri et passif, est l’expression cellulaire du tempérament caractéristique de la mère’ (1893: 401). This method of discussing fertilisation is commonly found throughout medical texts and it became common to refer to the egg as conservative and the sperm as progressive, or as Fouillée puts it: ‘L’un est la tradition spécifique, l’autre est l’innovation personnelle’ (1989: 406).

regardent l'épouse qu'un subterfuge ramenait à lui' and 'la vaincue de cette lutte amoureuse' (1903: 331).

Indeed the text appears to extend male-centric forms of conception to medical-centric methods, as Domesta appropriates insemination as a medical technique. Indeed, he refers to one child as 'cet enfant de la seringue' (1903: 441), erasing both paternal and maternal roles in the process. At the end of the text, Domesta's medical capabilities border on charlatanism as he makes increasingly bold claims about his ability to artificially inseminate women. He claims: 'j'ensemence le sexe à volonté, sans augmentation de prix. [...] Je donne aussi la teinte sur commande: des blondes, des bruns, des roux' (1903: 441). This notion extends to his experimental harem, in which he takes six women who are 'inaptes à la reproduction' and produces eight babies in nine months (1903: 441). Couvreur's novel highlights how literary texts incorporated notorious medical cases and increasingly emphasised the role of anaesthetic and passivity of the female body. Despite artificial insemination constituting the exact opposite of female sterilisation, the similarity in representations illustrates the breadth of concern over medical abuse and the scope of ideologies surrounding female passivity and medical dominance during the regulation of female fertility.

(Re)Productivity of the Working Classes

In addition to these examples of medical exploitation, Zola's *Fécondité*, heavily inspired by Canu's collection of case studies, provides a particularly interesting representation of the practice of sterilisation in different social classes.¹⁵⁶ The perception of working-class women's bodies as objects or opportunities for experimentation is evident in the characters of the aristocratic Sérafine and the working-class sisters Euphrasie and Cécile. Whilst Sérafine's motivations for seeking sterilisation will be examined shortly, Euphrasie's operation is explained by the 'douleurs affreuses' suffered since her childbirth (1899: 357). However, the latter's operation is justified and couched within terms which highlight the importance of her body in serving the State. The newspapers' focus on 'cette jeune ouvrière mariée, honnête, atteinte d'un effroyable mal, et sauvée de la mort certaine, et rendue à son

¹⁵⁶ Canu's work is listed in Zola's preparatory documents (Zola n.d.: 296) and Baguley documents how several case studies given by Canu inspired the plot of *Fécondité* (1973: 115-18).

mari, à ses enfants, plus saine, plus vigoureuse que jamais' (1899: 357), emphasises her industrial, marital and reproductive productivity, indicating that, as she has already given birth to three children, the task of her body is required to shift away from producing new citizens to raising them and returning to her employment. The goal of sending her back to her family and job 'plus vigoureuse que jamais' (1899: 357), appraises the working-class body in terms of its strength and productivity.

The physicians do not explain to Euphrasie about what the operation entails and she has to deduce this from the patients surrounding her (1899: 359). However, it is through the character of her sister Cécile that Zola furthers his representation of the treatment of working-class women in ovariectomy. Cécile is given the same operation as her sister, despite her symptom of head pain which extends to her back and legs (1899: 363). Several days after the successful operation, Mathieu informs the visiting Sérafine that Cécile is distraught because 'on vient seulement de lui apprendre que, si elle se marie, elle n'aura jamais d'enfant' (1899: 365).

In contrast to her sister, who has three children, Cécile is a virgin. However, as with Euphrasie, Cécile's new condition is defined by its productivity: 'Elle n'ignorait rien de l'amour, ni de la maternité, une fille de la rue, restée vierge au travers des souillures voisines' (1899: 365). Whilst her sister's operation ensured her marital, reproductive and industrial productivity, the text suggests that a lack of reproductivity results in a lack of marital or industrial production. This emphasis on productivity can be linked to the shift in how the working classes were perceived during and after industrialisation, particularly by public hygienists and medicine.¹⁵⁷ However, these representations of productivity also indicate popular and medical conceptions of marriage, reinforcing Mesch's assertion that, in nineteenth-century medical and literary texts, 'procreation legitimises marriage; childless spouses are characterised as delinquent' (2008: 92). Canu asserts that 'une femme châtrée est une inutilité sociale, à laquelle il faut songer quand on a du superflu, si elle est sans enfant.' (1897: 127). Similarly, in some of the cases cited in Canu's text, husbands refer to the 'inutilité' of their sterilised wives: one man arguing that the surgeon 'm'a rendu une femme dont l'inutilité est accablante dans mon ménage' (n.a. in Canu 1897: 30). Faced with two

¹⁵⁷ La Berge examines the medical interest in the working classes, specifically linked to industrialisation and urban industries (1992: 149 and 159-70).

starving women, one sterilised and the other ‘intacte’, Canu reveals that he would save the intact woman, as ‘sur elle repose une partie de notre securité nationale et sociale. La seconde n’est plus qu’un parasite’ (1897: 127). Thus, despite his sympathy and acknowledgement of how working-class women were deceived and tricked into undergoing ovariectomies, Canu still evaluates working-class women in relation to their reproductive productivity.

This emphasis on productivity links with contemporary discourses on eugenics and degeneration, based upon the concept that there was a difference in fertility ‘between the prosperous and healthy, who limited their births, and the diseased and destitute masses of the poor, who bred like rabbits’ (Nye 1984: 333). Angelique Richardson comments that the poor were seen as ‘reckless in reproduction but idle in production’ (2003: 13). However, these assertions, placed alongside literary and medical representations of ovariectomy, suggest an attempt to reach a balance between reproduction and production within the working classes. The decreasing birth rate prompted encouragements to reproduce which were tempered with eugenicist theories of degeneration attempting to improve the industrial productivity of France. These representations demonstrate how sterilisation was used to enforce this balance by perceiving working-class women in terms of their reproductive and industrial productivity.

Working-Class Experimentation

Alongside this emphasis on productivity, both medical and literary texts suggest that working-class women’s bodies were seen as a means to hone techniques for future clients. One English review of a midwifery text states that in France:

Patients, at least those among the poorer classes, seem to be regarded, not so much as fellow-creatures that have the same hopes and fears and the same feelings and desires as ourselves, but rather as objects, so to speak, of natural history, which the learned doctor has to speculate and experiment upon. (n.a. in Moscussi 1990: 142)

This perception of working-class women's bodies is an omnipresent theme in discourses on ovariectomy.¹⁵⁸ Their bodies are regularly presented as objects which physicians can operate and experiment upon without their consent (Finn 2009: 27). Canu discusses the different treatment given to upper- and working-class women:

Il est nombre d'établissements privés où on acquiert le droit d'opérer en payant largement; le riche étudiant étranger y trouve le moyen d'imiter nos grands maîtres en montrant sa bourse. Pendant les périodes où la clientèle studieuse abonde, on opère gratuitement. On racole les femmes faciles à convaincre, plus crédules, plus hypnotisables, car il faut des sujets (Canu 1897: 164).

This concept of the rich, paying customer, interspersed with 'experimental' working-class patients, is examined in detail in *Le Mal nécessaire* through Dr Caresco and his poor and less-successful physician father. From his free clinic, attended by the poor and desperate, his father refers his more 'interesting' surgical cases to Caresco, so his son can practice and hone his techniques. Caresco visits him and asks 'qu'as-tu à m'offrir aujourd'hui?' (1899: 57) and 'Il me manquera un crâne. As-tu un crâne à m'offrir' (1899: 57-58). In exemplifying the exploitation of working-class patients' ignorance and poverty, the text illustrates the complicity between different branches of medicine in the process of extracting money and experimenting with new techniques. Caresco recounts his early career working at his father's dilapidated and unhygienic clinic, operating on 'les créatures dont son scalpel venait de violer la chair, des déshéritées, des pauvresses toujours, qui n'offraient plus pour lui aucun intérêt une fois l'opération terminée, quand il s'était fait la main *in anima vili*' (1899: 53). This clear distinction of working-class women as '*in anima vili*' is referred to as the 'hécatombe' (1899: 53) necessary to hone his technique and ensure his professional success.¹⁵⁹

Fécondité's plot involving the three women directly reflects how this was practiced. The wealthy and aristocratic Sérafine visits the two working-class women, reviewing their recovery and appearance before undertaking the procedure herself (Zola 1899: 357 and 363). As surgeons are criticised for experimenting and refining techniques on the bodies of working-class women, Zola presents the upper-class clientele as complicit in this exploitation, as Sérafine views the 'experiments' as a guarantee of the desired surgical

¹⁵⁸ Moscucci provides other sources which reinforce that this attitude was common in the English medical community (1990: 143).

¹⁵⁹ Later in the text, when assessing his recent operations, he notes his success, excluding 'une pauvre morte sous sa main – maigre souci, une pauvre!' (1899: 194).

results. When Sérafine and Gaude are introduced, they reach ‘une entente immédiate, dès les premiers regards’ (1899: 366) as their conversation takes place in front of the bed of the distraught, newly-sterilised Cécile. During this exchange, Cécile ‘ne répondait plus, n’entendait plus’ (1899: 367) embodying the silence and mistreatment of her body in the facilitation of Sérafine’s ovariectomy.

The novel also reflects how false statistics, gathered from poor women’s bodies, are exploited to attract wealthier clients. The newspaper reports which promote the success of ovariectomy, describe Euphrasie’s operation as ‘ce dernier triomphe du célèbre chirurgien’ (1899: 357). However, the text later describes how, despite her apparent recovery to full health, the long term consequences of the operation leave her weak, emaciated and unable to care for her family (1899: 449-50), causing Mathieu to comprehend ‘les vrais résultats de ces belles opérations victorieuses’ (1899: 453). The disregard for working-class women’s permission or opinion, combined with the emphasis placed on their productivity, leads to an objectification of the body which permits and sanctions medical dominance. This objectification is evident in Dr Gaude’s surgery, in which ‘Il ouvre tranquillement un ventre, comme on ouvre une armoire; il regarde dedans, enlève tout; puis, il le renferme, et la femme est guérie.’ (Zola 1899: 34). The woman’s body is presented as an object which can be opened, emptied, and closed at will, requiring no input from the patient herself. Similarly, in Fauconney’s fictional text, one patient describes how she was ‘vidée comme une brebis à l’étal’ (1908: 62). In *Les Femmes eunuques*, this medical dominance and objectification of the working-class body becomes realised on a physical level, as Dubarry cites several real examples where medical instruments, gauze wadding and miscellaneous objects were left inside patients after ovariectomies. One example of this included an instrument that was 23 centimetres long and remained in a woman’s abdomen for a year (Marchand in Dubarry 1899: 320).

The ease with which surgery permits the opening and objectification of the female body is further reinforced in *Le Mal nécessaire*, which narrates a hysterectomy in great detail. This narration emphasises the speed at which Caresco cuts open the patient: ‘D’un seul jet, le chirurgien avait mené son bistouri juste à l’endroit où il voulait le faire aller’ (1903: 100). The unruliness of the patient’s internal organs, described as ‘un flot d’entrailles qui jaillit’, and the tumour which ‘surgit à son tour de la cage qui l’emprisonnait, vint flotter à la surface

de l'enorme plaie béante' (1903: 101) are presented as easily controlled by the surgeon's hands. The scene describes how Caresco's hands were 'plongées dans le ventre' (1903: 103); in fact the adverb 'plunged' is repeated seven times in the five pages describing the operation. Three times, Caresco's hands are described as plunging into the patient's body, whilst four times 'plongée' is used to describe the action of a needle, several compresses and the removal of the tumour. This specific choice and repetition of vocabulary reinforces imagery of the patient's body as incapacitated, objectified and violently dominated by the surgeon and his equipment. This medical dominance is also evident in descriptions of operating rooms as, in the same text, a nurse marvels at the operating table 'qui lui semblait si élégamment construit, facilement mobile en tous sens, perfectionné dans ses moindres détails, et apte à donner au corps du patient les positions les plus diverses, selon les nécessités de l'intervention chirurgicale' (1899: 92). This ability to move and pose the unconscious body further emphasises this medical dominance in which even the patient's ability to control their body is manipulated and appropriated.

Examining representations of ovariectomy through the lens of social class reveals how the procedure was perceived as more than a new surgical technique. It reveals how sterilisation facilitated the application of social Darwinism, eugenics and degeneration theory, inscribing these philosophies onto the female body. This comparison also exposes how industrial and medical changes placed a greater emphasis on the productivity of the working-class body, leading to an objectification through which medical dominance was permitted, to the detriment of women's individual will. Concurrently, experimentation on poorer women is presented as collateral damage for medical 'progress' which ultimately only benefits the wealthy.¹⁶⁰ Although part of a broader theme in nineteenth-century literature, these examples demonstrate the centrality of ovariectomy to contemporary anxieties of medical experimentation and exploitation.

¹⁶⁰ It is pertinent to note that, in *Fécondité*, these women eventually exact their revenge on Dr Gaude. Towards the end of the novel, Mathieu discovers that Dr Gaude has been murdered and was found 'sur le divan, dévêtu, mutilé, sanglant' (Zola 1899: 593). Sérafine's assertion that 'nous y étions toutes' conjures an image of 'une bande, une armée, un peuple, une ruée de cent milles infécondes dont auraient craqué les murs du cabinet de consultations, dans la sauvagerie de leur vengeance' (Zola 1899: 592).

Sterilisation in the Upper Classes: Mental, Sexual and Physical Consequences.

Alongside these representations of working-class exploitation and experimentation, ovariectomy was also prevalent in the upper classes. In the *fin de siècle* era of *dégénérescence* and decadence, as defined by Nordau (1894), the fertility and sexual practices of upper-class women were increasingly interrogated and criticised. Ovariectomy provided an opportunity to examine and regulate both, as it prevented pregnancy and could be seen to encourage non-procreative sex. Keeping in mind the earlier discussions of working-class women's experiences of sterilisation, an examination of their upper-class sisters reveals a marked drop in sympathy and empathy. Where industrialisation and capitalism viewed working-class women in relation to their biological productivity, this section will explore how the upper-class body was represented when it was no longer reproductive. In doing so, it will examine how women were perceived to be mentally, sexually and physically affected by the procedure, interrogating how these representations fit within broader medical and popular ideologies of women's role in society. However, it is important to note that the removal of the ovaries or reproductive organs did significantly affect the female body, both hormonally and physically. In pre-menopausal women, the procedure could trigger the side-effects of menopause in addition to a range of other symptoms associated with major surgery. This section seeks to identify which consequences were real and which are constructed, interrogating how and why both are incorporated into representations of ovariectomy.

Upper-Class *Détraquées*

As discussed previously, working-class women were commonly represented as physically exploited by medicine, which valued them in terms of their productivity in both a reproductive and industrial sense. Representations of their upper-class counterparts indicate financial exploitation by ambitious physicians and, although some of these women were unwillingly operated upon, as represented in Riche's *Stérile* (1890), many literary texts emphasise that these women sought the operation themselves.¹⁶¹ Indeed, the figure of the

¹⁶¹ The prime example of financial exploitation of wealthier women can be found through the character of Dr Gaude in *Fécondité*, who runs 'une exploitation des riches clientes' (1899: 363). Equally in *Le Couteau*, when

wealthy woman seeking sterilisation becomes a central motif in multiple texts of the 1890s and 1900s. In Jaf's novel, when questioned about why he performed an ovariectomy on a woman, Dr Jovis replies: 'Parce qu'elle l'a voulu!... Elles le demandent; elles en veulent toutes de l'opération débarrassante!... Ah! on voit bien que vous ne les connaissez pas, ces détraquées!... Elles me supplient, elles me conjurent!...' (Jaf 1907: 19).

Similarly to representations of abortion in the upper classes, novels suggest that wealth allowed women to bribe physicians for unnecessary surgery, as found in *Le Couteau*: 'Si elle a en tête de se faire châtrer, qui donc l'en empêchera?' (Espé de Metz 1910: 79). Due to the increased involvement of wealthy women, becoming sterile became a trend, permitting access to a society of sterilised women, such as in *Les Femmes eunuques*, in which 'des dames huppées' are sterilised 'parce que l'ovariotomie a de la vogue' (Dubarry 1898: 152). Even in 1890, before most authors engaged with the topic, Riche's novel, *Stérile*, presents young women discussing the growing trend in sterilisation: 'Germaine m'a dit qu'elle venait de se faire faire une opération, - une opération très à la mode depuis quelque temps, - celle de l'ovariotomie' (1890: 21). Equally, Dubut de Laforest's *Le Docteur Mort-aux-Gosses* (1885) comments that 'Les ovaires, ma chère, c'est comme les crinolines et les manches ballon, ça ne se porte plus!' (1885: 42).¹⁶² These references to a social trend further reinforce the differences between upper-class and working-class engagement with ovariectomy; for the former, the impetus for the operation is placed upon the woman, often without medical necessity. As examined previously, representations of working-class women reverse this power structure, where medical authority trumps women's individual consent or understanding of the procedure.

While terminology used to describe working-class women's experience of ovariectomy is couched in terms of physical illness and productivity, within the same discourses, upper-class women are represented as motivated by their mental or moral attitude, as texts suggest that they are somehow unstable, an instability which manifests itself through the term *détraquée*. This instability facilitates surgeons' success, since they are able to become 'l'idôle couverte d'or, le châtré souverain de toutes les détraquées millionnaires' (Zola 1899: 364). The use

discussing the operation with a wealthy young woman, one doctor progressively raises the cost from 200,000 to 400,000 francs by adding various assertions of discretions and security (Espé de Metz 1910: 173-74).

¹⁶² Dubut de Laforest's novel is quoted here instead of Fauconney's plagiarised text as this quotation has been omitted from the latter's version.

of this term is consistent throughout contemporary sources, and is exclusively used to refer to wealthy or upper-class women. *La Grappe* describes ‘ces détraquées qui sont à peu près toutes comme des fleurs fanées incapables de porter leurs fruits de bonheur, de tendresse touchante et infinie’ (Landay 1904 : 152-53), linking the rejection of a woman’s fertility with a mental flaw. The use of this term and its repetition throughout novels reinforces the notion that a woman who sought out sterilisation without a pre-existing medical condition must be somehow mentally unstable or ill. Other texts reverse this imagery, implying that this ‘madness’ was the illness that could be fixed, drawing upon contemporary theories of hysteria and linking the functioning of the womb with a woman’s mental health.

Hysteria and Female Instability

Ovariectomy as a treatment for hysteria was a contentious topic in the late nineteenth century, and opinion was divided amongst the medical community. Many promoted the link between the female body and mind, concluding that ‘puisque traiter le bas-ventre d’une femme revient à traiter son esprit, nous [les médecins] sommes les mieux placés pour le faire’ (Fauvel 2013: 9). At that time, Charcot, the leading figure in hysteria studies, distanced himself from the notion that the seat of hysteria was the womb (Finn 2009: 28). However, Nordau references his work, stating that in several forms of hysteria ‘il existe de l’endolorissement de l’un ou des deux ovaires’ (1882: 30).¹⁶³ Other physicians such as Hagar and Simpson continued to reject any link between hysteria and the health of the ovaries, leading Nordau to assert that other than the ovary’s role in producing eggs, its importance was ‘entouré d’obscurité’ (1882: 31-33).

Despite medical division on the topic, the majority of literary texts imply that the procedure *caused* hysteria instead of curing it, a position which justified the critical condemnation of the practice and expanded on contemporary fears of medicine which have already been examined. This notion was backed by physicians such as Canu and Pichevin (1897: 109; 1890: 69-80), summarised by Dubarry’s statement that ‘elles sont multitude les malheureuses eunuques devenus folles’ (1898: 156). Within literary texts, the designation of these women

¹⁶³ Dubarry uses Charcot’s work to argue the opposite, saying that there was no evidence to suggest that sterilisation cured mental illness (1898: 155 and 160-61).

as *détraquées* was continued after the operation, which was commonly believed to exacerbate nervous ailments or neurological illnesses. In *Les Demi-sexes*, looking at the other women in the waiting room of the ovariologist Dr Richard, Camille notes ‘que leurs yeux fiévreux avaient de larges cernures sombres, que leur démarche était languissante, leurs mains agitées d’un léger tremblement’ (La Vaudère 1898: 5).

In *Le Couteau*, Dr Lenoir refuses to undertake the operation, saying he disagrees that ‘une femme saine et normale devienne ce que ne tarde pas à devenir toute femme châcée sans nécessité... un être pervers ou détraquée’ (Espé de Metz 1910: 81), whilst in *Les Florifères*, the protagonist is able to spot the signs of sterilisation and can pick out the clients of Dr Trajan: ‘aucune ne portant sur son visage une marque distinctive, bien que, par un point ou un autre, on les sentis anormales’ (1898: 14). What is particularly pertinent is that these descriptions do not refer to specific symptoms which would be experienced by women after sterilisation, whether physical or behavioural; they simply identify that the woman becomes ‘different’ in a negative way, marking a shift in her appearance and behaviour without identifying a specific change.

This notion of abnormality, aligned with descriptions of women who are *détraquées*, presents the procedure as unnatural and harmful. However, the term *détraquée* not only designates mental illness, it is also used to refer to something that is broken or faulty, whilst the verb *détraquer* can also mean to perturb or upset.¹⁶⁴ Aligning representations of physical and mental perturbation alongside these literary suggestions of abnormality or perversion, the procedure is presented as warping women in a medically indefinable way, reinforcing the difference between physiological and ideological symptoms. The identification of sterile women, or those who wish to be sterile, as *détraquée* can therefore be situated within a much broader trend of defining female bodies as orderly or disorderly; that is, distinguishing which women’s bodies were functioning according to the tenets set out by both modern medicine and pronatalist politicians. The consequences of the operation are described in Pert’s *Les Florifères*, when physicians discuss its consequences, noting that the women seem ‘inquiètes, fiévreuses, ou d’une apathie morbide; nerveuses, ou veules... toutes désorientées, dépolarisées’ (1898: 127). Whilst some of these changes could be due to recovery from the

¹⁶⁴ In *Nana* (1880), Fauchery’s ‘la mouche d’or’ describes how the courtesan’s blood is polluted by generations of alcoholism ‘qui se transformait chez elle en un détraquement nerveux de son sexe de femme’ (Zola 1982: 204). This *détraquement* can therefore be aligned with the hereditary *fêlure* of the Rougon-Macquart family.

surgery or hormonal changes, the choice of terms continues to emphasise imagery of drainage and imbalance.

Alongside these descriptions, literary texts also reinforce women's maternal 'function' using implications of regret and religious imagery. In *Le Couteau*, one woman refers to her sterilisation as 'mon péché' (Espé de Metz 1910: 218) for which she attempts to atone by opening an orphanage: 'il me faut un millier d'enfants, je veux être le mère de mille enfants' (1910: 22). However, it is in *Les Demi-sexes* that the notion of sin is fully explored: When first approaching the steriliser Dr Richard, the protagonist Camille admits that she does not suffer from any symptoms, yet 'toutes les femmes, plus tard, sont atteintes par des souffrances fatales, originelles... par la maternité... Je veux échapper à ces misères' (La Vaudère 1898: 6). Whilst undergoing sterilisation, as the chloroform causes her to lose consciousness, Camille confusedly rambles:

Tiens, des pommiers... des pommiers en fleurs... à côté des fleurs il y a des fruits... Ils ont mûri bien vite, bien vite!... Non, je n'en mangerai plus... Cette odeur me fait mal!... Il y a des vers dans les pommes!... Oh! une bête m'a piquée... Voyez, il y a du sang!... Elle monte, elle monte... Enlevez-la!... (1898: 83)

Contextualised alongside the novel's references to original sin, this drug-induced reverie appears to present the Fall. Tempted by the apple and the knowledge of good and evil it represents, Camille's consumption of this fruit reflects her decision to undertake an ovariectomy and rejection of fertility.¹⁶⁵ The consequences, hidden beneath the rotten fruit's tempting exterior, are manifested by worms, foreshadowing Camille's eventual regret and tragic end. Thus, where the physician Dr Richard was 'poised to become a kind of feminist saviour' (Mesch 2008: 98) who liberates women from their fertility, he becomes the opposite, the tempter who leads Camille into 'sin'. After her recovery, Camille views maternity as an unachievable salvation: 'Elle voyait dans un enfant ce je ne sais quoi de céleste qui console et qui guérit; un petit ange de délivrance sorti des fautes humaines pour les racheter et les effacer' (La Vaudère 1898: 260). When the truth of Camille's operation is revealed to her ex-lover Julien, the novel continues to repeat imagery of the Fall:

Elle n'a plus de la femme que ce qui grise et affole, le charme pervers qui prend le mâle et le soumet en dépit de l'expérience et du mépris. Elle est tombée au-

¹⁶⁵ Linton argues that this description also insinuates that chloroform 'somehow infringed on divine power' (2018: 582), as the procedure would be impossible without it.

dessous de la honte, au-dessous de la nature même. De chute en chute, elle a ramassé les amours qui se dissipent en une nuit, ce qui passe, ce qu'on rencontre, ce que le hasard d'une soirée ou d'un dîner fait trouver à la créature qui cherche... (La Vaudère 1898: 273)

Ultimately, this change and 'fall' results in the novel's ambiguous ending, where the liberation of Camille's fertility is negated by her inability to have a child.

Through vocabulary of destabilisation, accompanied by religious imagery, texts represent ovariectomy as akin to a loss of more than fertility. Representing women who regret their sterilisation and links to the Fall and original sin offsets the procedure's emancipatory potential. Furthermore, the notion that a sterilised female body is 'broken' or 'destabilised' illustrates attempts to continue valuing the female body in terms of its ability to reproduce and concretises traditional gender roles which defined women's biological 'function' as that of reproducer. It also further reveals the classification and regulation of the female body through identification of dysfunction or *détraquement*.

Sexual Drive and Non-Procreative Bodies

This reinforcement of traditional gender roles is explicit in representations of the moral and sexual consequences of the operation. The removal of a woman's fertility raised discussions over sexual drive and if it would be removed, reduced, or increased by the removal of reproductive organs. Canu's study implies that removing a woman's fertility removes her libido, as he reports that the majority of sterilised women found that their sexual drive had lessened since the procedure (1897: 102). Medically, this judgement is possible, due to changing hormone levels after an ovariectomy, which could reduce sexual drive.¹⁶⁶ However, where women did not report a decrease in sexual drive, Canu's interpretation is particularly interesting. He consistently presents extenuating circumstances for these women, arguing that if their sexual drive had not decreased, then it is because they weren't 'entirely' sterilised. He notes that some continued to menstruate, whilst others had been sterilised for less than a

¹⁶⁶ More recent studies have reported that the majority of women do not experience a drop in libido after surgery (Thaker 2015). However, as these studies are based upon modern procedures, with different aftercare and surgical methods, it would be problematic to assert that the same result was true at the end of the nineteenth century.

year, leading to the assertion that the procedure temporarily caused ‘une surexcitabilité des organes génitaux’ (Canu 1897: 103), but that these women would be unable to orgasm and satisfy this desire: ‘le spasme est remplacé par une crise nerveuse et la femme reste inassouvie’ (1897: 103).

Continuing this denial further, Canu asserts that women who reported no change to, or an increase in, their libido were simply embarrassed to admit the truth: ‘Il y aurait donc une certaine honte, chez la femme à avouer son impuissance; l’opérée devient d’autant plus jalouse qu’elle est plus impuissante’ and that because of this, the husband had ‘l’obligation de chercher des suppléantes’ (1897: 105). This last example in particular reveals how Canu extends the hormonal changes in some women into a blanket rule, revealing attempts to deny female sexuality and libido when sex was knowingly non-procreative. The manipulation of women’s testimonies by asserting that they were lying maintains the perception that women’s biological function was procreation, and that, when a woman was sterile, sexual intercourse became unnecessary. This notion is continued through Canu’s work where he repeatedly draws attention to how women were abandoned by their husbands after the procedure, due to their change in appearance or lack of sexual drive (1897: 18 and 40).

Pila also represents case studies of women who lose their sexual desire after the procedure (1901: 11-15). However, he draws attention to other patients whose sexuality and behaviour became exacerbated and ‘warped’ by the procedure; for example one woman who ‘devient insupportable et rend son mari et ses enfants malheureux’ (1901: 16) and another in whom ‘les désirs génésiques sont augmentés et pervers’ (1901: 12). This difference between frigid patients and those with ‘perverted’ tastes exemplifies the contradiction at the heart of these representations, which imply that the procedure removes a woman’s libido, reinforcing her physiological ‘purpose’ of procreation, whilst also suggesting that resulting non-procreative sex leads to sexual immorality, excess and debauchery.¹⁶⁷ The latter remains in keeping with broader discourses of the hysterical and *detraquée* upper-class woman who sought out sterilisation, implying that many did so in order to enjoy sex without the risk of pregnancy.

Within literary representations, there is a similar dialectic between these two surgical consequences, and authors’ attempts to reconcile the two arguments in order to condemn

¹⁶⁷ See Moore and Cryle (2010) for a study of the rapidly changing notions and definitions of frigidity at the *fin de siècle*.

sterilisation and its abuse in the upper classes. A frequent figure in novels examining this topic is the debauched upper-class woman, who seeks out sterilisation so that she can engage in extra-marital or excessive sex without the risk of pregnancy. These women are characterised by their sexual excess, which manifests itself in their appearance and actions. One such example of this figure is Sérafine in *Fécondité*, whose very name implies vitality, fire and an excess of passion: '[Sérafine] était une rousse, belle, grande, élégante, avec une gorge magnifique, connue de toute Paris. Ses lèvres rouges riaient d'un rire triomphant, et dans ses grands yeux bruns, pailletés d'or, brûlait une flamme inextinguible de désir' (Zola 1899: 32). Throughout the earlier chapters of the novel, Sérafine's flaming red hair, flashing eyes, irrepressible vitality and immorality are frequently emphasised (1899: 32, 37 and 349). Her immorality and sexuality are manifested in her physical appearance which embodies a lack of moderation in its continual excess.

However, in line with contemporary medical texts and emphasis on 'abnormality' and destabilisation after sterilisation, Sérafine is similarly affected by the procedure. Where previously defined by her youth, beauty and vitality, after sterilisation, she is seemingly drained. On seeing her post-surgery, Mathieu describes her as 'une dame âgée [...] si décharnée, si flétrie, qu'elle avait cent ans' (Zola 1899: 478). He wonders: 'Quel vent terrible l'avait donc détruite, pour la vieillir brusquement ainsi, d'un néant de spectre, comme si la mort avait déjà passé, et qu'il vit se lever là devant lui, le squelette décharné de la femme triomphante qu'il avait connue!' (1899: 501).

The procedure seems to have emptied her physically, because, in addition to having her ovaries removed, she consequently loses weight as well as her hair, teeth, hearing and, eventually, sanity (Zola 1899: 502-03). Sterilisation thus becomes equated with loss, reinforcing the notion of 'tota mulier in utero' as the removal of her fertility is equated to a removal of biological purpose and health, as her body begins to decay, described as 'vidée, tel qu'un fruit trop mûr qui tombe et se gâte' (1899: 503).¹⁶⁸

¹⁶⁸ Descriptions of aging or loss of beauty after sterilisation are also found in other literary texts. in *Les Femmes eunuques*, Mlle Berthe Rachon is described as having undergone an ovariectomy in order to conserve her 'taille de guêpe' (Dubarry 1898: 27). However, the procedure is represented as aging her and later in the novel she is described as increasingly stout and portly as 'l'engraissement est une des conséquences de la castration' (1898: 270-271). Equally, in Jaf's text, one potential customer airs her concerns on sterilisation: 'On dit que ça rend laide! [...] Que ça vieillit! (1908: 31).

However, despite this physical and mental loss, the procedure's effect on her libido is not correspondingly reduced. In fact, she reports after the operation: 'elle avait senti d'abord ses désirs croître' (1899: 502). However, although her libido has been exacerbated by the procedure, she is unable to satisfy it and has lost the ability to orgasm: 'Elle en qui le désir irrité, inassouvi, brûlait toujours, et qui n'arrivait plus à le contenter' (1899: 504). The description of the nervous crises following sex were evidently inspired by a case found in Canu's medical text, which reported a patient in whom 'les désirs vénériens ont considérablement augmenté. L'opérée reste inassouvie. Le coït se termine toujours par [*sic*] une crise nerveuse, qui suit immédiatement le spasme vénérien, et qui quelquefois le remplace' (Canu 1897: 80).¹⁶⁹

An example of the fatalistic punishment inflicted upon Zola's fertility-eschewing characters, Sérafine's unassuageable libido reinforces the stereotype of the decadent and corrupt aristocratic woman. However, this example also continues to reinforce class differences within representations of abortion. As examined earlier, the working-class Euphrasie and Cécile's bodies were viewed in terms of their productivity, contrasted against Sérafine who sought out sterilisation for pleasure only. The consequences of the operation also continue to reinforce this notion; as Sérafine's excessive sexuality is enhanced but unsatisfied, embodying the excesses and decadence of the upper classes. Meanwhile, the libido of Cécile and Euphrasie is seemingly completely removed. As their reproductive ability has been removed, Euphrasie is described as having '[le désir] si anéantie, la chair froide' (1899: 504), whilst Cécile is 'cette vierge qui n'avait jamais rien connu, qui ne connaîtrait jamais rien' (1899: 504). Cécile's physical appearance reflects this virginal state as: '[elle] était restée mince et chétive, poussée en longueur, avec des bras, des épaules, une gorge de petite fille' (Zola 1899: 364), implying that she will remain in a prepubescent state.¹⁷⁰

Through these two descriptions, Zola presents the two contradictory outcomes suggested by medical texts: that the procedure could both remove and exacerbate sexual drive. By extending imagery of draining through to the libido, he implies that the health of the female

¹⁶⁹ Some studies have posited that a minority of women who have had their cervix removed experienced reduced or incomplete orgasms (Komisaruk et al. 2011).

¹⁷⁰ This association with permanent pre-pubescence is mirrored in *Les Femmes eunuques* when Mme Eugénie is sterilised. On waking after the operation, she becomes afraid that her shaved pubis will remain bare (1898: 184) and later, during a feverish hallucination, she has a vision that her 'pubis rasé ne sera plus le jardin ombreux d'antan' (1898: 193).

body is dependent upon fertility. Those such as Sérafine who sought out non-procreative sex, were punished with a kind of Sisyphean libido, the promise of ‘plaisir sans fin, de plaisir libre’ (1899: 504) which could never be satisfied. Meanwhile, working-class women, judged in terms of productivity, were presented as divested of their sexuality, having no need of it without its attendant fertility.

Although these two perspectives, which highlight sterilised women’s frigidity and excessive sexualities, originally appear to contradict each other, they reinforce women’s reproductive function, implying that by removing fertility, women become ‘destablised’ and become either prepubescent or post-menopausal, implying that a woman’s appearance and health is inextricably linked to fertility. They reinforce contemporary beliefs that ‘female sexual pleasure needed to be procreationally purposeful in order to be healthy’ (Finn 2009: 43) and that the body would be damaged if this purpose was ignored. Literary authors also align these two perspectives by presenting forms of sterile sexual excess, women with high sexual drives, but who are unable to be sexually satisfied, further implying the historical belief that female orgasm was linked to conception. Through this literary figure, authors align their representations with contemporary medical texts, whilst also incorporating ovariectomy into broader discourses on decadence and degeneration, presenting sterilisation as part of the larger debauchery present in the upper classes.

Sterility and Threatening Sexuality

In line with these literary themes, the focus on excessive sexuality and the possibility of nonprocreative sex is also presented as threatening contemporary gender roles and forming part of a larger anxiety towards ‘the potential autonomy of female desire’ (Finn 2009: 42). Ovariectomy facilitated this autonomy, allowing women to avoid pregnancy and the scandal of illegitimate conception. This is highlighted in Espé de Metz’s *Le Couteau* when the Princess Téuff, discussing her upcoming sterilisation, asks the doctor: ‘Et ce sera l’indépendance, la liberté... une latitude... complète?’ (1910: 61). The completeness of this ‘liberté’ reinforces sterilisation’s effectiveness in comparison to contraceptive methods, but also extends beyond the avoidance of pregnancy, as the focus on ‘l’indépendance’ foregrounds the broader implications of the procedure, which allowed women to pursue

social lives and seek pleasure and sex, whether marital or not, without the commitments of children. In doing so, they gained a level of autonomy which is often represented as threatening patriarchal society, and, in particular, marital relations.

This autonomy is emphasised in *Les Demi-sexes* through Nina and Camille. Similarly to Séraphine in *Fécondité*, Nina, the leader of the group of sterilised women, is presented as the embodiment of energy and sexuality:

Sur son beau visage, dans ses traits expressifs se mêlaient la décision, la crânerie, l'énergie et l'insouciance, toutes sortes de sensations vives que tempérait, à de certains moments, un air de câlinerie féline. Avec ses cheveux noirs luisants, son costume presque masculin, elle était charmante et terrible à la fois, dans son inquiétante séduction. (La Vaudère 1898: 80)

This notion of physical excess, present in both her energy and appearance presents her as challenging the boundaries of aesthetic beauty and, through her clothing, gender roles. It is this challenge which appeals to the protagonist Camille, who seeks to emulate her mentor by becoming sterilised:

[Je] veux troquer mon salut [...] contre toutes les jouissances et tous les plaisirs. Au lieu de couler longtemps entre deux rives monotones, je veux que ma vie bouillonne et se précipite comme un torrent!... La caresse matérielle est, sans doute, au corps, ce que sont à l'âme les rêves mystiques. L'ivresse des sens doit plonger en des extases plus grandes encore... Je connaîtrai toutes les ivresses et toutes les extases! (La Vaudère 1898: 52)

Camille reinforces the perceived freedom of sterilisation as the repetition of 'tout' in its various forms marks the promise of autonomy and liberty from both maternity and broader social boundaries.

In the novel's exploration of this theme, La Vaudère combines representations of ovariectomy with those of lesbianism, intertwining the two discourses to imply an equal threat to contemporary society.¹⁷¹ In *fin de siècle* literary, medical and popular texts, lesbianism, degeneration and sterilisation are frequently linked. In the 1888 poem 'Papillons Noirs', Lemoyne states that lesbianism or sapphism was a sign of a degenerate and dying race (1888: 78-79) suggesting that this was manifested through ovariectomy, as women

¹⁷¹ See Linton for a study of sterilisation in the novel (2018).

rejected the need for a male sexual partner both romantically and biologically. By the end of the century, literary representations of lesbianism abounded.¹⁷² However, as noted by Nicole Albert, the majority of these authors were male, who ‘endowed the lesbian with a whole rhetoric about sexual deviance and tried to track her down in the urban landscape as well as in the underworld and in her most secretive places, to which they bragged about giving readers access’ (2016: XIII). The multitude of literary representations indicates a level of voyeurism and a public fascination with this female figure who transgressed traditional social and sexual boundaries. Combining these representations with that of ovariectomy, degeneration and feminism permitted authors to create villainised characters who transgressed and threatened the social order and future of France, in addition to honing in on public voyeurism and the notoriety of the topic.

As has already been examined, sterilised women were often represented as losing their femininity alongside their fertility, leading to descriptions of aging or pre-pubescence. This loss is extended to sexuality, implying that a rejection of fertility is a rejection of the male role in sexual intercourse. This results in a level of autonomy, as emphasised by Philippe in *Les Demi-sexes* who states that ‘ces femmes-là ne sont plus faites pour nous!’ (La Vaudère 1898: 183). Albert argues that in *fin de siècle* literature, ovariectomy is seen as a Sapphic rite of passage and that the sterile lesbian is ‘associated with nothingness because she does not try to preclude the fear of death through procreation’ (2016: 230). In *Les Femmes eunuques*, representations of ovariectomy are extended to include lesbianism, which is perceived to alter women’s gender in a similar way:

Depuis qu’on s’évertue à la séparer de l’homme dont la rapproche la loi de nature, et sans lequel elle n’est qu’un être incomplet, elle tourne à l’androgynie, altère les qualités de son sexe sans acquérir celles du sexe masculin, crache sur l’intérieur familial, et le noble rôle d’épouse aimée, aimante, de mère, de reine de foyer conjugal, prétend qu’il est au-dessous d’elle de supporter les saintes charges de la maternité, renverse l’amour, voit en l’homme un tyran, et aussi internationaliste que l’anarchiste butor, vilipende la Patrie. (Dubarry 1898: 163)

Here, Dubarry links the rejection of maternity with a rejection of the domestic space and reliance on the husband, leading to social chaos. However, he also hints at the political

¹⁷² Albert (2016) examines popular, literary and artistic representations of lesbianism, specifically interrogating how the figures are often concurrently demonised and poeticised.

consequences of this change, implicating the growing feminist movement and its rejection of patriarchal society.

This link between sexual liberation, through both sterilisation and lesbianism, and socio-political freedom, emphasises to what extent female sterilisation was viewed as a contributory factor in changing gender roles and their threat to patriarchal society. During a report on the Boisleux-La Jarrige trial, the doctor and novelist Jules Claretie defended the medical profession, criticising sterilised women ‘qui prominent, souriantes, l’indépendance de leur stérilité et vantent à d’autres les beautés de cet état d’affranchissement. Cette fin de siècle appartient aux *insexuées*’ (in Lèbre 1897: 338). In addition to critiquing these women for flaunting their sterility, Claretie extends his concerns onto feminism, adding that if women were given the vote, they would proclaim their right to sterility: ‘Elle rêve de devenir un être hybride’ (in Lèbre 1897: 338).¹⁷³ This fear is manifested in *Les Demi-Sexes* as Camille proposes a toast: ‘Buvons à la femme, buvons à nous-mêmes, buvons à l’abolition de l’esclavage qui nous a si longtemps courbées dans une honteuse soumission!...Buvons à la gloire de notre règne qui commence!...’ (La Vaudère 1898: 154).

Within these representations, it is particularly interesting to note how ovariectomy, and its facilitation of non-procreative sex becomes intertwined with other discourses which emphasise female autonomy. These texts emphasise how the physical exuberance and excess of some sterilised upper-class women also extended to a transcendence of gender roles with sexual, social and political implications. Although this could be seen, to some extent, as a simple literary exploitation of controversial and salacious topics, it continues to reinforce the importance of female fecundity within gender roles and the threat that liberation from this role was seen to pose to broader French society.

¹⁷³ This notion is extended further in *Les Femmes eunuques* which presents several of the sterilised women as spies for France’s European neighbours. Feminism provides the cover for these infiltrators, but sterilisation is presented as essential to their work: ‘il leur était loisible de se livrer “au plaisir” sans redouter d’être bloquées par des grossesses’ (Dubarry 1898: 121). Dubarry therefore presents sterilisation as a threat to national security, as well as a threat to the domestic home and the political landscape of France.

Conclusion

Although the range of medical texts on the topic of female sterilisation remains small in comparison to other aspects of women's reproductive health, the breadth of literary texts which feature ovariectomy attests to its notoriety and importance in late nineteenth-century France. The consistent representation of the procedure as abused by medicine and practiced by corrupt physicians illustrates to what extent it was perceived to be a threateningly 'modern' procedure, the regulation of which had not yet been properly established. It provided a means for surgeons to gain celebrity and wealth, further exacerbating fears of immoral practice within a growing anxiety towards the power and influence of the physician in society. These same discourses are also present in the opposite process of artificial insemination, as *La Graine*'s representation of the procedure can be linked to concerns over its abuse and the implications for female patients.

Within these same sources, examining ovariectomy in the working classes reveals how it was employed to facilitate the application of social Darwinism, eugenics and degeneration theory, viewing the female body in terms of its ability to produce healthy offspring. In representations of medical exploitation of the working classes, literary texts present the working-class female body in terms of its (re)productivity, reinforcing how industrialisation and labour values were incorporated into discourses of fertility and women's health. This emphasis on the industrial productivity of the working-class body is juxtaposed with portrayals of willingly sterilised upper-class women, who are consistently defined by their unstable mental state. Drawing upon contemporary discourses of hysteria, these representations prioritise women's reproductive capacity in a different manner, implying that through its removal, the female body becomes 'destabilised' and sick, leading to a *détraquement*. This notion of destabilisation is extended into depictions of women's sexuality and libido, as literary and medical texts emphasise that non-procreative sex harmed the female body and led to debauchery, aligning ovariectomy with contemporary condemnations of degeneration and decadence in the upper classes of French society. This is particularly explicit in links between ovariectomy, lesbianism and feminism, which reinforce the threat of female sexual, social and political autonomy.

Combined, these various themes illustrate several notions about how women's fertility and fecundity were portrayed and discussed in both medical and literary texts. Firstly, across

social classes, literary texts employ representations of ovariectomy to reinforce women's maternal 'role' or 'duty', consistently illustrating the regret or suffering endured by these women, offsetting the sexual or social liberation offered by the procedure. Within this, these depictions continue to reinforce the ideological notion of the 'unstable' female body through examinations of the physical and mental consequences of sterilisation. Medical texts in particular demonstrate a manipulation of these consequences, reframing the physiological and hormonal effects suffered by some to reinforce broader notions of 'woman is womb' and negate the appeal of non-procreative sex. This interpretation and appropriation of medical discourses is evident in literary texts, which consistently emphasise how a woman's external physical attributes mirror her internal infertile state, defining women's beauty and health in terms of their ability to reproduce.

Within this broader study of women's fecundity and reproductive health, the incorporation of ovariectomy into political, ethical and medical debates can be seen as a reflection of the importance of women's fertility to contemporary French society. Alongside representations of contraception and abortion, which were littered with inefficiency and failure, the ability to irrevocably and completely remove a women's fertility clearly fixated the nation, provoking great anxiety about who had the right to decide who was fertile or sterile, and what effect it could have upon France's future citizens. However, in an epoch when theories of eugenics were gaining popularity and traction, examination of ovariectomy reveals how the regulation of fertility was beginning to be forcibly acted out upon the female body.

Chapter Four.

‘La Femme est mère’: The Boundaries and Limits of the Pregnant Body

Introduction

Pregnancy marks the point of successful conception, the moment at which female fertility is converted into the beginning of a new life.¹⁷⁴ It also marks the point at which the female body is seen to transform, nourishing the foetus and adapting as it grows until the point of birth. Consequently, pregnancy is often seen as a catalyst for profound change; a physical, social and ideological transformation. As noted by Kukla, pregnant and newly maternal bodies ‘leak, drip, squirt, expand, contract, crave, divide, sag, dilate and expel’ (2005: 3), verbs which emphasise the movement, fluidity, permeability and productive aspects of the pregnant body, and hint at the problematic and contested process of defining and representing it.

With a particular focus on these notions of instability and permeability, this chapter will draw together a variety of medical, literary and popular sources to examine the importance of regulation within discourses of pregnancy, tracing the emphasis placed on the physical and ideological boundaries of the maternal body. Within contemporary sources, these boundaries are both ideological, marking the delineation between woman and society or maternity and sexuality, and physical, tracing the expansion of the female body and describing or blurring the delineations between pregnant woman and foetus. Indeed, this blurring is emphasised in the use of *ventre* in this chapter to refer to the French term’s dual meaning of both stomach and womb.¹⁷⁵ Consequently, as this chapter will argue, the process through which one body

¹⁷⁴ See Chapter Two for an examination of nineteenth-century medical and religious beliefs on when a foetus was hominised or believed to be alive.

¹⁷⁵ Throughout the chapter, I use the term *ventre* to draw attention to the importance of the expanding womb in that specific context. Elsewhere, the term ‘pregnant stomach’ is used to draw attention to the body’s exterior expansion, rather than its interior transformation.

produces another complicates attempts to regulate the maternal body, as the unstable and changing boundaries defy definition and control.

Both Duden (1997) and Kukla (2005) have examined pregnancy in the eighteenth century, drawing attention to the imagery of expansion, absorption and leaking which accompanies representations of this process. Indeed, Duden (1997) also draws attention to the imagining of the body's interior as a site of movement and fluidity, and the role of the physician in 'interpreting' this interior. From a literary perspective, Beizer (1994) briefly examines the pregnant boot-stitcher in Zola's *Pot-Bouille*, linking her representation to ideology of the 'unsound vessel' and Mossman (1993) makes brief reference to the representation of Marianne Froment's pregnant stomach in Zola's *Fécondité*. However, excluding these smaller studies of the topic, there has been no sustained study of pregnancy which draws upon multiple literary texts or incorporates popular sources.

Furthermore, despite the focus on representations of the unstable and leaking pregnant body in the eighteenth century, there has been no exploration of the longevity of this trend as it extends into the nineteenth century. This chapter will posit that the existence of ideologies of leaking and absorption are not simply a continuation of this trend; they are irrevocably altered by new medical technologies. Duden's focus on what people 'thought about the insides of the body, about the hidden sphere under the skin' (1997: vii) combined with the eighteenth-century medical reliance on the patient's words (1997: 84), is based upon the difficulty of viewing the interior of a living patient's body: 'the body [...] is opaque. It is a place of hidden activities' (1997: 106). However, as has been already examined in Chapters Two and Three, by the nineteenth century this was no longer the case, as surgical techniques and anaesthetic permitted the easier opening and increased visibility of the body.

More specifically for pregnancy, eighteenth-century medicine focused on the pregnant body, interpreting its external symptoms to gauge the health of the foetus (Graves 2001). However, from the nineteenth century onwards, medicine began to focus on the health of the foetus, interrogating its heartbeat with the stethoscope (Cazeaux 1844: 119) and palpating the stomach to examine and move the foetus (Pinard 1889). Alongside these techniques, anaesthetic and antiseptics made the caesarean section safer and consequently increasingly practiced (Delotte et al. 2007). These medical technologies illustrate how the eighteenth-century 'opacity' of the body was becoming more transparent. However, as this chapter will

examine, despite this increased transparency and understanding of the process, the health of the foetus remained largely out of physicians' control and was reliant upon the health and practices of the mother. As such, in both medical and literary texts, the pregnant *ventre* continues to elicit suspicion and an aura of mystery.

This chapter will constitute a study of how these new medical technologies impacted upon representations of the pregnant body in the nineteenth century. Drawing upon medical, literary and popular texts, it will ask how medical discourses of pregnancy were shaped by broader socio-political goals and in what ways these impacted popular and literary representations of the female body. More specifically within this approach, it will examine how eighteenth-century notions of the unstable, leaking pregnant body were aligned or contrasted with new medical 'knowledge' of pregnancy. Beginning with an examination of the social implications of pregnancy, the chapter will examine the relationship between sexuality and maternity, followed by a study of representations of the expanding pregnant body and links to other forms of instability and expansion. Continuing on from this concept, the chapter will then examine these representations of expansion alongside concurrent suggestions of absorption, asking how and why the two seemingly disparate notions of the female body combine within discourses of pregnancy. Finally, drawing together these representations of pregnancy, the chapter will examine how threats of expansion and absorption were met with attempts to regulate and control the pregnant body through discourses of pre-natal care and fashion, but also through medical discourse itself, manifested through medical illustration of pregnancy and female anatomy.

Contemporary Interest in Pregnancy

As already noted, despite the multitude of medical discoveries surrounding female physiology and reproduction in the nineteenth century, physicians retained many of the same concerns surrounding pregnancy, and the health of the foetus continued to rely heavily on the mother's behaviour and practices. Addressing this reliance on the mother, the 1870s onwards saw a great increase in the quantity of manuals and guides for expectant mothers,

texts which began with pregnancy and continued on to infant care and feeding.¹⁷⁶ Demonstrating medical interest in the topic, even during healthy pregnancies, which previously wouldn't have involved a physician, these guides clearly situate pregnancy within the medical domain of puericulture, and establish a popularised regime for pregnancy which is similarly represented in each text. In literary texts, the representation of pregnancy is somewhat dissimilar to representations of abortion, contraception and ovariectomy, in that the topic is not commonly accompanied by associations of taboo or criminality. Exceptions to this rule are representations of illegitimate pregnancy which are attended by inferences of social stigma and scandal. However, while *romans populaires* and *romans de mœurs* engaged heavily with the more salacious elements of women's fertility, pregnancy and breastfeeding were found more consistently through a wider range of texts. As will be examined shortly, several novels in Zola's *Les Rougon-Macquart* series contain extended representations of pregnancy, as does Caruchet's *Ensemencée*.

Although this study will predominantly focus on literary and medical representations of pregnancy, it is pertinent to note the centrality of the figure of the suffering mother, which stems from religious discourses and the notion of original sin. Literary representations of pregnancy, accompanied by imagery of pain and suffering, indicate that the pregnant stomach is '[la] marque indélébile de la faute originelle' (Bertrand-Jennings 1977: 21), a reminder that Eve ate the forbidden fruit in the Garden of Eden. According to Genesis, in response to this transgression, God said to Eve, 'I will make your pains in childbearing very severe, with painful labour you will give birth to children' (Genesis 3: 16), painful labour referring to the whole process of childbearing, from conception to birth. Even when no longer referenced in explicitly religious terminology, this Christian belief forms the foundation of medical and literary representations of female suffering during pregnancy, in which discomfort and pain are frequently presented as women's trial, to be rewarded by maternity.

As exemplified in Michelet's *L'Amour* (1859), the suffering of original sin is manifested as soon as a woman reaches sexual maturity and menstruates: 'Le flux et reflux vital, le profond renouvellement qu'elle subit avec tant de douleur, en fait le plus doux, le plus modifiable des

¹⁷⁶ Examples of such texts include: Allix (1884), Blanche (1882), Gausseron (1886), Hayès (1891), Triaire (1874) and Weiss (1897).

êtres' (1859: XVII).¹⁷⁷ This pain and suffering is also evident in medical texts: 'Avant de naître, l'enfant fait souffrir la femme, en naissant il la fait souffrir encore' (Weiss 1897: 3) and Dr Gourrier asserts that 'la douleur est le lot de la femme; parce qu'elle ne peut y échapper; parce qu'elle est porte-graine; *Quia fructus ventris sui*, parce qu'elle est chargée de l'enfantement' (1875: 72).¹⁷⁸ Mossman argues that the combination of religious and medical discourses allows authors such as Michelet to straddle 'the Romantic and Positivist' (1993: 210), thus presenting the sanctified mother as opaque, whilst the medical mother becomes visible through the scientific gaze. This duality is evident in Zola's *Fécondité*, a novel equally populated with idealised natalist and medical discourses. Enduring painful pregnancies and birth in order to contribute to her husband Mathieu's principle of responsible (re)production, after giving birth, Marianne's bedroom is described as: 'cette chambre de combat et de victoire, dans laquelle Mathieu rentra, comme dans une gloire triomphale! Elle restait frémissante de la souffrance passée, mais quelle souffrance sainte, cette souffrance de la vie en éternelle besogne!' (1899: 222).

Identification of 'souffrance sainte' explicitly references original sin, aligning this suffering with militarist imagery of combat to reinforce the rewards of glorified motherhood. Aligned alongside the novel's broader use of medical imagery, this incorporation of Christian discourse illustrates Zola's 'evangelical' focus of 'Les Quatres Évangiles', of which *Fécondité* constitutes a key text. Similar to discourses on breastfeeding, which will be examined in Chapter Five, representations of pregnancy posit that suffering during pregnancy and birth is part of women's civic responsibility and that it is medically unavoidable. These representations also illustrate how religious ideology became manifested within broader neo-Malthusian and pro-natalist medical discourses.

¹⁷⁷ Indeed, a large amount of Michelet's work is dedicated to the concept that 'la femme est une malade' (1859: 408) who undergoes pain from menstruation, pregnancy and then birth.

¹⁷⁸ This concept of suffering and sacrificial motherhood has been explored by Badinter who asserts that, in the nineteenth century, 'le sacrifice maternelle était ancrée dans la nature féminine et que la bonne mère était une "sainte"' (1980: 267).

From Lover to Mother

The emphasis on civic responsibility and sacrifice also ties into the role of female sexuality during pregnancy and the negotiation between the role of mother and lover, or, for married women, mother and wife. As their bodies transformed, women were expected to likewise alter their behaviour and practices, often resulting in feelings of dispossession or loss. While this phenomenon is, by no means, exclusive to the nineteenth century, the increased prioritisation of maternity and puericulture placed the notion of ‘good’ or ‘bad’ mother at the forefront of medical and popular discourse, resulting in growing pressure to adhere to medical advice. Furthermore, by the end of the century, this pressure intersected with competition from neo-Malthusianism and proto-feminist discourses, which advocated the separation of female sexuality and fertility. The clash between these competing discourses is particularly relevant when examining representations of pregnancy, and the following section will examine how literary and medical texts represent the transition or negotiation between the two roles of mother and lover, interrogating the role of sexual desire or pleasure within discourses of pregnancy.

A Physical and Mental Transformation

Throughout nineteenth-century medical texts and puericultural manuals, discourses on pregnancy consistently reinforce the notion that through becoming pregnant a woman is transformed into a mother: ‘Lorsqu’une femme devient enceinte, elle ne s’appartient plus. (Brochard 1882: 118). This transformation is presented as both physical and mental. Reinforcing the physical change, in Pert’s *L’Autel*, Madame Féraud states:

Deux ou trois jours seulement après la conception, il se passe une incroyable révolution en nous... En quelques vingt-quatre heures, le cours régulier, normal de notre sang, est renversé... il y a comme une révolte en nos veines, avant que cette sève suprême se précipite vers le point intime où elle alimentera avec générosité l’existence du mystérieux parasite qui s’y développe... Une semaine, quinze jours s’écoulent, et le nouveau cours est résolument établi. La femme est mère en toutes ses fibres, en toutes ses cellules. (Pert 1907: 273)

From this perspective, the female body undergoes a complete and utter transformation, centralised around the ‘parasitic’ infant, whereby the entire physiology is redirected towards

the womb.¹⁷⁹ Despite the quasi-medical vocabulary used here, this transformation is still presented as clouded in mystery, referred to as ‘une incroyable révolution’. Nevertheless it reinforces the transformation that has taken place, emphasising that ‘la femme est mère’ in her entirety, signalling that woman and mother are two separate and distinct roles.

Several other novels emphasise this involuntary and instinctual transformation, such as Bru’s *Le Droit d’être mère*. When the seduced and pregnant Louise arrives on the maternity ward of the hospital, she views ‘un superbe bronze de Paul Dubois [représentant] la *Charité allaitant de petits enfants*’ (1901: 133) and, through this reminder of civic virtue, ‘l’amante s’était désormais transformée... Elle devenait mère...’ (1901: 133). Whereas Pert’s novel emphasises the physiological change, Bru emphasises the mental and moral transformation and revelation as Louise rejects her old role of lover and embraces maternity, the latter of which is aligned with civic responsibility and duty through its link to the statue. Equally, in Couveur’s *La Graine*, Rolande becomes unwillingly pregnant through artificial insemination.¹⁸⁰ Completely opposed to motherhood, she originally seeks out an abortion. However, whilst at the abortionists, she undergoes a transformation, described in detail over several pages:

Un étrange remuement intime, une manifestation nouvelle de la grossesse la cloua sur place. C’était venant battre les parois de ses flancs, un choc, puis plusieurs, les premiers appels de l’être qu’elle portait. [...] Quelle lumière tout à coup, quel avertissement de la nature, proclamant, en cette minute de drame, qu’il ne fallait point contrarier ses lois, qu’aucune puissance humaine n’avait le droit de s’opposer à une éclosion dans ses prémices! [...] L’enfant avait frappé, l’enfant s’était révélé, et l’instinct maternel, jusqu’alors dévié par le vice, étouffé par une odieuse amitié, tressaillait enfin, et son éclat rejetait bien loin, dans l’ombre, le mensonge énervant de ses passions mortes. (1903: 361)

This shortened excerpt from her transformation illustrates the revelatory nature of the change, as she transitions from corrupted and debauched to devoted mother. Importantly, this change is presented as originating with the foetus, which is described as a catalyst for her instant rejection of the crime of abortion and of her previous lifestyle and vices. Furthermore, this change is presented as a cure for her ‘nervous’ illness and vices, which were caused by the

¹⁷⁹ This implication of the ‘parasitic’ infant can be linked to Beauvoir’s view of maternity and its changes to the body (1984).

¹⁸⁰ See Chapter Three for a study of this process.

irresponsible reproduction of her parents. At the novel's conclusion, the protagonist muses that having been inseminated without her knowledge or consent:

L'en avait guérie malgré elle; elle allait maintenant évoluer normalement autour de l'enfant sauveur dont les premières palpitations avaient acclamé sa délivrance. Par lui, elle reconquerrait la santé et ses instincts, le jeu normal de l'organe autour duquel se concentre la sensibilité de la femme, qui en est le second cerveau. (1903: 420)

In line with broader medical and hysteria discourses, *La Graine* presents maternity as a cure for nervous illness and vice, linking the function of the womb with the brain, a trend which recurs throughout the texts examined in this thesis. Similarly, utilising medical terminology further locates the 'transformation' of woman to mother as the remit or medicine, whilst references to how she continued to 'évoluer normalement' naturalises and normalises this transformation.

Although many of the documents discussing this transformation are medical or quasi-medical, there is a repeated emphasis that a pregnant woman must not only alter her physical health and hygiene, but also her mental attitude, lifestyle and morality: 'Toutes ses pensées, toutes ses actions ne doivent avoir qu'un but, le développement normal de l'enfant qu'elle a conçu (Brochard 1882: 118). These transformations, present in literary and medical texts, indicate a consistent reinforcement of the notion that, once pregnant, a woman's body no longer belongs to herself, prioritising the life of the foetus over a woman's other responsibilities or roles. This rhetoric also establishes ideological notions of the 'good' and 'bad' mother, permitting the criticism of those who did not follow new puericultural guidelines. This classification of maternal roles is evident in one medical pamphlet's advice on the use of coaches during pregnancy:

Un ami à moi, grand et célèbre gynécologue, divise les omnibus de Paris en deux classes: les petits, à deux chevaux, et les tramways, qui sont doux, glissent uniformément sur des rails, ou dont les cahots n'ont qu'un retentissement fort limité: ce sont là les voitures des honnêtes femmes, dit-il, des bonnes mères de famille. Mais ces énormes machines à trois chevaux qu'on appelle des omnibus monstres, et qui communiquent au voyageur leur trépidation continue en l'ahurissant de leur vacarme, que celles-là y montent qui ne veulent pas avoir d'enfants. (Gausseron 1886: 5)

The metaphor of this anecdote is clear, identifying ‘des bonnes mères’ as those who obey medical advice and ‘glissent uniformément’ through pregnancy, whilst those who ignore advice and fill their days with ‘[le] vacarme’ and lively activity, will miscarry or lose their ability to have healthy children.

Sexual and Maternal Tension

Taking a broader look at literary representations of motherhood, the dispossession and abandonment of behaviour, morals and lifestyle are central to the representation of women, their sexuality and motherhood. However, whilst contemporary medical texts frequently place emphasis on the positive examples of this transition and the power of the doctor, literary texts demonstrate the tension and trauma caused when a woman is unable to make this transition. This conflict is often manifested in a clash between a woman’s sexuality and her role as a mother. Medical texts emphasise that once she has become pregnant, a woman ‘devra s’abstenir des plaisirs du mariage’ (Clément 1873: 59) and suppress any sexual desire that she may experience. According to these texts, sexual intercourse jeopardised the pregnancy and ‘la moindre pression sur les flancs et sur le ventre peut blesser le fœtus’ (Clément 1873: 58-59).¹⁸¹ Female sexual desire is therefore reframed and restricted, as advice recommends that sex should be employed only as a means of satisfying the husband and thus preventing adultery.¹⁸² These discourses reinforce women’s supposedly reproductive ‘function’ as, once pregnant, sexual intercourse becomes superfluous: ‘Ce n’est pas en portant les fruits de l’amour qu’il convient d’en savourer les plaisirs’ (Halmagrand 1867: 11).

This tension is central to Caruchet’s *L’Ensemencée*, in which Armande attempts to avoid pregnancy through contraceptive practices. However, when inviting her husband to bed, ‘les bras ouverts, en cette pose abandonnée de l’amante qui désire, et qui d’avance se promet...’ (1900: 54-55), Armande’s pregnancy abruptly makes itself known: ‘tout à coup, elle se redressa, comme affolée. Ses mains tendues retombèrent, son visage contracté pâlit jusqu’aux lèvres. Brusque, irréprouvable, une odieuse nausée la soulevait’ (1900: 55). The onset of

¹⁸¹ However, whilst ‘l’homme soit assez raisonnable pour le comprendre,’ (Clément 1873: 59) the doctor explains that many husbands are unable to repress their desire.

¹⁸² Michelet explores the tension between husband and foetus by identifying the latter as ‘Le Rival’ (1859) who disrupts the family home and diverts the wife’s attention (1859: 166).

nausea, juxtaposed against her sexual desire, signals the commencement of her maternal role, which immediately impedes her role of lover. Armande is presented as out of control of her own body, as the pregnancy is dominated by ‘cette terrible et subite nausée qui avait jetée hors de son lit la triste amoureuse, palpitante d’un dégoût sans mesure...’ (1900: 58), and the polarisation of lover and mother is repeatedly emphasised, as the couple’s previous worship of ‘l’amour et la beauté’ is juxtaposed against ‘des misères et des laideurs de la procréation’ (1900: 58). The novel therefore illustrates how the beginning of pregnancy causes, and even forces, the rejection of a woman’s sexuality and role of lover. In *L’Ensemencée*, this is symbolised through Armande’s nausea which can be viewed as both the discovery of her pregnancy, but also as a disgust for sexual intercourse which is incompatible with her maternity. The novel presents women’s roles of mother and lover as completely incompatible, signalling that as soon as maternity begins, woman is incapable of remaining her husband’s lover.

***L’Œuvre*: A Clash between the Maternal and Sexual**

This same concept is present in Zola’s *L’Œuvre* (1886), a novel which traces Christine’s struggle between her role as the artist Claude’s muse and lover, and her unforeseen, unwanted, role of mother. Whilst they are lovers, their relationship is happy and functional, based upon their sexual and romantic desire for each other. However, the discovery of Christine’s pregnancy disturbs this tranquillity as ‘elle ne s’en apercevait qu’au troisième mois, dans son insouciance d’amoureuse’ (1998: 189). The assertion that her love prevented the identification of this pregnancy hints at the incompatibility of a sexual relationship and maternity as ‘elle saisie d’une angoisse qu’elle ne s’expliquait pas, comme si elle eût craint que cet accident-là ne fût la fin de leur grand amour’ (1998: 188).

Once her child is born, Christine rejects the maternal role and prefers to ‘se jeter aux bras de son cher amour: c’était son refuge, cette poitrine de l’homme qu’elle aimait’ (1998: 191), her sexual desire mirroring the maternal act of cradling a child. Indeed, she initially rejects her maternal role:

Elle n’était qu’amante, elle aurait donné vingt fois le fils pour l’époux. Une ardeur même l’avait reprise après la délivrance, une sève remontante d’amoureuse qui se

retrouve, avec sa taille libre, sa beauté fleurie. Jamais sa chair de passion ne s'était offerte dans un tel frisson de désir. (1998: 190)

As soon as the physical requirements of pregnancy and birth have passed, Christine attempts to quickly return to her sexual role of lover and muse. However, later in the novel, her 'cœur s'ouvrit, plus large, et une mère se dégagea de l'amante' (1998: 256). As she begins to engage with maternity, she is unable to maintain her sexual role, as her romantic attempts are met with '[l]es caresses d'habitude, données ainsi qu'une aumône aux femmes dont on se détache' (1998: 256). Indeed, whilst in her maternal role, she also loses her role of artistic muse; when she volunteers to model for Claude, the artist comments that 'le ventre et les seins [...] ça se gâte' (1998: 308) and 'quand on veut poser, il ne faut pas avoir d'enfant' (1998: 310). Claude's sexual gaze cannot look beyond her maternity and, in a mirror image of her first Pygmalion experience of modelling in which she was transformed from cold idol to living lover, she turns back into stone: '[E]lle gardait la rigidité d'un marbre, elle retenait les larmes dont se gonflait son cœur, réduite à cette misère de ne pouvoir même pleurer' (1998: 310).¹⁸³ The loss of her role of lover and muse causes her to develop 'une colère sourde contre le pauvre être, pour qui sa maternité ne s'était jamais éveillée, et qu'elle haïssait maintenant, à cette idée qu'il avait pu, en elle, détruire l'amante' (1998: 310).

It is ultimately Christine's attempts and failure to unify her roles of mother, lover and muse that lead to the death of her child and the breakdown of her relationship. Like many other literary examples, she is 'punished' for rejecting her maternal duties and refusing to suppress her sexuality. Bertrand-Jennings comments that sexual desire is often accompanied by a sense of the tragic and imagery of 'cadavre séparant les amants', an insurmountable barrier that prevents a couple's happiness and foreshadows their unhappiness (1977: 102). Whilst this notion originated in *Thérèse Raquin* (1868), in *L'Œuvre* this 'cadavre' is reimaged by Christine's son Jacques. Her maternal role is presented as incompatible with sexual desire and she is unable to reconcile her love for her husband and her son.

These representations of tension between the maternal and sexual roles of women indicate how medical and social notions of the 'good' mother were manifested within literary texts. The separation of these two roles reveals the construction of ideological boundaries defining

¹⁸³ Marble is traditionally a marker of frigidity, emphasising this Pygmalion transformation and Christine's loss of sexual appeal in her husband's eyes.

how women's bodies and behaviour were viewed. By presenting pregnancy as a bodily and aesthetic impediment to sexual desire and relations, the female body is defined by its fertility and reproductive capabilities, as female sexual desire and pregnancy are represented as mutually exclusive. As has been traced throughout this thesis, particularly in Chapter Three, maternity is commonly represented as the only productive 'function' of the female body during this period, in line with contemporary pronatalist political imperatives. As such, these representations of incompatibility and constructions of boundaries between sexuality and maternity can be viewed as a manifestation of the regulation of the maternal body, in line with puericultural recommendations that a mother should be wholeheartedly dedicated to the health of her foetus or child.

The Expansion and Instability of the Pregnant Body

Moving past ideologies surrounding women's maternal and sexual roles, regulation of the maternal body is also present in representations of the pregnant body. Indeed, in addition to examining the sexual and social implications of pregnancy, medical and literary sources also reveal a considerable preoccupation with the instability and expansion of the pregnant body and mind. As previously discussed, Duden (1991) and Kukla (2005) have studied the instability and 'leakage' of the maternal body in the eighteenth century, contrasting the opacity of the eighteenth-century body with the increased medical 'visibility' of the nineteenth-century body. However, despite this increasing visibility and supposed strength of the medical gaze, texts continue to illustrate a preoccupation with the mysterious space within the pregnant stomach or *ventre*. Beizer has previously highlighted that many nineteenth-century literary texts utilise the iconographic concept of the female body as a 'leaking vessel' (1996: 191), arguing that this is manifested through menstruation, pregnancy and breastfeeding. This concept has been built upon by Margaret Shildrick, who argues that, during the late nineteenth century, women's bodies 'exemplify an indifference to limits' and that during pregnancy they are 'visibly deformed from within' (2002: 31). This section therefore seeks to examine the effect of new medical technologies on this historic trend of representation, asking how and why eighteenth-century understandings of the female body as 'out of control, uncontained, unpredictable, [and] leaky' (Shildrick 2002: 31) continue to be represented in both medical and literary writing.

Mental Instability during Pregnancy

Medical texts in particular focus heavily on the mental instability of pregnant women, translating the eighteenth-century mysterious *ventre* into inexplicably unstable and irrational behaviour. Just as the pregnant body changed and expanded during pregnancy, texts repeatedly draw attention to the resulting instability and unreliability of women's behaviour and mental state during this time. Whilst many of these changes can be explained by hormonal changes provoked by pregnancy, the way that they are represented can be linked to broader ideologies on the instability of the female body and attempts to restrict women to the domestic sphere.

Multiple medical texts make reference to 'folie' in pregnant women, and some, such as Marcé (1868), dedicate entire texts to this mental illness. This raises the question of 's'il existe des connexions entre l'état utérin et les désordres de l'intelligence' (Marcé 1858: 7-8).¹⁸⁴ David confirms this link, commenting that during pregnancy, disruption between the uterus and brain could lead to 'la folie puerpérale' (1868: 86). Indeed, Morel also dedicates a small section of his treatise on mental illness to a discussion of madness during pregnancy, commenting on the wide variety of irregularities in behaviour during this time, and demonstrating that this could even lead women to commit criminal acts (1860: 201). Despite the already 'nervous' nature of the female sex, pregnancy is presented as exacerbating this sensitivity and causing 'dans tout l'organisme une perturbation' (Allix 1884: 61), particularly during the first half of the pregnancy in which there is 'un changement dans le caractère et souvent même une certaine perversion de l'intelligence' (Pénard 1874: 39).

Key to the representation of women's emotional instability during pregnancy are *les envies*, or pregnancy cravings. Just as Pénard noted that pregnancy could cause 'une perversion de l'intelligence' in women, there are frequent explanations in medical documents of 'la perversion du goût' (Brochard 1882: 118) which is cited as a common first symptom of pregnancy. Most manuals recommend that if alimentary cravings are not harmful to the mother then they should be indulged. However, there are frequent examples of the bizarre

¹⁸⁴ See also Jouin (1880). This notion is examined more thoroughly in Chapter Three in the link between sterilisation and madness.

and dangerous cravings of expectant mothers such as ‘de[s] femmes enceintes qui dévoraient des anguilles, des écrevisses vivantes, des poissons tout palpitants’ (Clément 1873: 60). Whilst these cravings are commonly viewed as alimentary desires or changes in appetite, many medical manuals assert that these desires could manifest themselves behaviourally. Clément lists various strange *envies* such as a woman who longed to throw eggs at her husband’s face, a woman who wanted to be beaten by her husband and an expectant mother who ate plaster and rotting meat, believing that the former would whiten the skin of her child (1873). Behind these extreme and graphic examples, intended, no doubt to shock the reader, there is a repeated emphasis on the unpredictability of pregnant women and an undercurrent of paternalistic tolerance of their supposed ‘irrationalities’ and ‘nervous’ nature.

This same attitude can be located in *Au Bonheur des Dames* (1883) through the commercial excitation and over-stimulation of women’s desires, in particular in those who are pregnant. Within Mouret’s new department store, theft is rife and the shopwalker, Jouve, spends his days identifying and accosting shoplifters. Despite the impact on his profits, the owner Mouret is excited and interested by the forms of theft that take place, discussing ‘les voleuses par manie, une perversion du désir, une névrose nouvelle qu’un aliéniste avait classé, en y constatant le résultat aigu de la tentation exercée par les grands magasins’ (2009: 318).¹⁸⁵ This female desire to possess and own the goods on sale is embodied in Madame de Boves, who is eventually caught for shoplifting. However, this new mental neurosis is linked specifically to pregnant women ‘dont les vols se spécialisaient: ainsi, chez une d’elles, le commissaire de police avait découvert deux cent quarante-huit paires de gants roses, volées dans tous les comptoirs de Paris’ (2009: 319). There is a distinction between the desire to own what one cannot afford to buy and a true form of kleptomania; stealing without desire for profit or gain.¹⁸⁶ The concept that pregnant women steal one type of product and descriptions of the quantity of gloves found in the woman’s home emphasises the irrationality, futility and mental instability at the heart of these women’s *envies*. Thus, a

¹⁸⁵ The medical classification of this feminine form of crime can be found in Laségue’s ‘Le Vol aux étalages. Esquisse medico-légale’, published in *L’Union médicale* in 1879.

¹⁸⁶ See Thompson (2004: 90-93) and O’Brien (1983) for an examination and contextualisation of kleptomania in Zola’s novel and in nineteenth-century France.

practice which is criminal but scientifically explained for women such as Madame de Boves, becomes absurd and pointless through the mental disturbance of pregnancy.¹⁸⁷

Through the medical explanation of this form of *envie*, pregnant women are relieved of responsibility for their actions. In *Au Bonheur des Dames*, this feminine form of crime is indulged by the paternal management and even when women are caught, they are often released without prosecution.¹⁸⁸ As in the medical documents discussing *les envies*, this male tolerance of female crime suggests that women, particularly those who are pregnant, are not in control of themselves or their actions, and can thus be excused from criminal activity. Indeed, in a medical study of madness during pregnancy, Marcé dedicates a chapter to the legal responsibility and accountability of pregnant women, identifying *des envies* as ‘des désirs irrésistibles qui lui enlèvent sa liberté morale et la rendent irresponsable de certains actes’ (Marcé 1858: 120). However, Marcé also argues that the popular belief in this notion is manipulated by ‘certaines femmes extravagantes et rusées’ (1858: 122), citing multiple examples where pregnant women used *des envies* to defend theft (Marcé 1858: 125-26).

Overall, both medical and literary texts reinforce the mental instability of pregnant women, emphasising the link between the uterus and brain, a link which prioritised women’s reproductive capabilities in addition to highlighting notions of the unstable female body. Furthermore, these texts emphasise that when women were permitted to indulge their *envies*, it could result in physical or even criminal damage. In *Au Bonheur des Dames* in particular, consumerism and new forms of commerce are represented as exacerbating pregnancy cravings, presenting public spaces such as shops as hazardous to the mental health of pregnant women.

¹⁸⁷ This irrational form of theft is emphasised in David’s study of *folie puerpérale* in which he comments that some women suffer from ‘la monomanie’ (1868: 88) to such an extent that they commit criminal acts to satisfy their urges.

¹⁸⁸ Mouret recounts that ‘[n]ous avons eu, la semaine dernière, la sœur d’un pharmacien et la femme d’un conseiller à la cour. On tâche d’arranger cela’ (2009: 320). In the case of Madame de Boves, she is effectively blackmailed into making a donation to charity and then the crime is forgotten.

Expanding Bodies in Literary Representations of Pregnancy

In addition to a medical and literary emphasis on the mental instability of pregnant women, other literary texts consistently represent the excessive expansion of the pregnant body, placing emphasis on the physical space taken up by the *ventre*. Zola's *Fécondité* glorifies 'responsible' pregnancy, idealising the maternal beauty of the protagonist's wife Marianne. Indeed, on revealing his wife's pregnant stomach, Mathieu 'le contempla, si blanc, d'une soie si fine, arrondi et soulevé comme un dôme sacrée, d'où allait sortir un monde' (1899: 109). Its beauty is aligned with the broader pronatalist ideals of the novel. However, the fine silk of its exterior, although beautiful, suggest fragility, movement and a lack of fixed boundaries. This lack of boundaries is reinforced by the reminder that the stomach 'allait sortir un monde', leaking its contents through birth. Furthermore, other women, such as Constance, view Marianne's stomach with:

[Un] regard de blâme ironique et dédaigneux. [...] Cette femme de nouveau enceinte, à ce ventre débordant d'où la vie allait germer encore. Elle en était blessée, répugnée, irritée même, comme d'une indécence, d'un attentat contre tout ce qu'elle respectait, la mesure, la prudence, l'ordre. (1899: 121)

Describing the stomach as 'débordant' brings to the fore the notion of expansion and unstoppable overflowing, again reinforcing the notion that Marianne's body will eventually 'leak' the infant within. Furthermore, linking the pregnant stomach to the notion of a lack of respectability and control suggests that this instability also triggers anxiety surrounding the breakdown of boundaries and limits, both socially, through the Froments' scandalously large family, and physically, through the breakdown of physical limits and boundaries of the female body. Constance's reaction embodies contemporary society's perception of, and anxiety towards, the pregnant stomach, suggesting that revulsion towards the stomach's expansion was based upon its ability to transgress limits and boundaries.

A similar example can be found in Armande's disgust of her own pregnant body in Caruchet's *L'Ensemencée*: 'les seins aux veines gonflées, gros fruits douloureux, tachés de brun, jusqu'au ventre élargi, dont le poids la rejetait en arrière, les reins creusés...' (1900: 64). Even beyond the growing *ventre*, the text reinforces the general enlargement and deformation of the body. However, it is with Armande's second pregnancy that these notions become more explicitly manifested in the description of her body:

Elle était néanmoins l'esclave douloureuse de son ventre gonflé, la servante passive de la nature. L'embryon qu'elle portait n'était ni aimé, ni voulu, et pourtant elle le sentait son maître; il élargissait ses flancs, changeait son teint, sa santé, ses goûts, transformait sa vie et jusqu'à son caractère, que des crises nerveuses d'impatience et d'irritation rendaient inégal et heurté. Et elle était humiliée de cet asservissement animal sous lequel elle pliait. (1900: 180)

In this example, the expansion of the pregnant body is explicitly blamed on the foetus, who is presented as a parasitic presence within the body. However, as before, Caruchet suggests that the notion of expansion and instability goes beyond the pregnant stomach to the entirety of the female body. As emphasised earlier in this section, the novel refers to the mental and behavioural instability caused by pregnancy, as well as the physical changes experienced by the growing foetus.

These literary examples view the pregnant body's ability to expand and, eventually leak, as fraught with anxiety and treated with repulsion. Whilst they illustrate different perspectives, as Zola's novel shows external criticism whilst Caruchet portrays a woman's experience of the process, both sources illustrate anxiety towards the maternal body's ability to expand, placing focus on the breakdown of physical boundaries and bodily limits. In particular Constance's references to 'la mesure, la prudence, l'ordre (Zola 1899: 121) indicate how ideological and corporeal boundaries are influenced by social norms as, in both texts, bodily expansion and excess is seemingly linked to social and moral impropriety.

The Pregnant Boot-Stitcher in *Pot-Bouille*

In addition to these literary examples, Zola's *Pot-Bouille* also contains an extended representation of the pregnant body through the character of the Boot-Stitcher. This lodger, who arrives during the funeral of Monsieur Vabre, later appears 'poussant devant elle un ventre énorme de femme enceinte, exagéré encore par la maigreur malade de son cou et de ses jambes' (1998: 318). Interpreting this episode, Beizer contends that it is the contents of this woman's stomach, 'the probability that inside and outside cannot be maintained as different categories' (1994: 194), that disturbs the concierge to such an extent and that the repeated evocation of her profession in which she makes holes emphasises her permeability and the concept that she is an 'unsound container' (1994: 194). Indeed, the concierge,

Monsieur Gourd, is horrified and outraged at the presence of the pregnant woman in the house and convinces the landlord to evict her before she can give birth.

However, this analysis can be expanded further to references of the woman's body as the scandalous nature of her physical appearance is manifested through her *ventre*:

Le ventre, maintenant, lui semblait jeter son ombre sur la propreté froide de la cour, et jusque sur les faux marbres et les zincs dorés du vestibule. C'était lui qui s'enflait, qui emplissait l'immeuble d'une chose déshonnête, dont les murs gardaient un malaise. A mesure qu'il avait poussé, il s'était produit comme une perturbation dans la moralité des étages. (1998: 320)

The spatial expansion of the pregnant *ventre* is presented as both physically and morally threatening. Imagery of the belly casting a shadow and swelling over the building not only actualises male fear of visible female sexuality, but also demonstrates concerns over the limits of a pregnant stomach's expansion. This is evident in Monsieur Gourd's description of the pregnancy:

[D]ans les commencements, ça se voyait à peine, c'était possible, je ne disais trop rien. Enfin, j'espérais qu'elle y mettrait de la discrétion. Ah bien! oui, je la surveillais, il poussait à vue d'œil, il me consternait par ses progrès rapides. Et, regardez, regardez aujourd'hui! elle ne tente rien pour la contenir, elle le lâche... le porche n'est plus assez large pour elle! (1998: 319)

Imagery of the pregnant *ventre* dominating and enveloping the building are accompanied by criticisms of the lodger's inability to contain or control her own body. Indeed, the emphasis on the stomach's expansion continues later in the novel when the protagonist Octave waits for his lover Berthe in a servant's bedroom. He hears:

Une plainte continue, une voix de douleur geignant dans la fièvre d'une insomnie. Il finit par reconnaître la voix de la piqueuse de bottines. Est-ce qu'elle accouchait? La malheureuse, toute seule, agonisait sous les toits, dans un de ces cabinets de misère, où il n'y avait même plus de place pour son ventre. (1998: 331)

This last reference actualises the fear that her *ventre* would fill up the space available, with imagery of her body pushing against the boundaries of her room.

Drawing together these literary examples of expanding maternal bodies and viewing them alongside eighteenth-century emphasis on the unstable pregnant body, although the trend in representation continues into the nineteenth century, the anxiety surrounding these representations originates from a different cause. Duden, in particular, emphasises the eighteenth-century focus on the opacity of the maternal body and attempts to interpret the space within (1997: 106), giving rise to anxiety over the mysterious contents of the *ventre*. Medical representations of mental instability in pregnancy certainly appropriate these discourses, but transform the mystery of the pregnant *ventre* into that of the unstable mind. However, regarding representations of the body, these literary texts show that by the second half of the nineteenth century, representations of expansion and instability appear to be more concerned with the boundaries and external limits of the pregnant body, rather than its internal contents. As has been addressed in the introduction to this thesis, this focus on boundaries and transgression of limits can be linked to the contemporary focus on identifying orderly and disorderly bodies. As implied in these literary examples, representations of expanding stomachs are linked to a sense of impropriety and implications of social or moral transgression rather than the unknowability of their contents. Indeed, when the Boot-Stitcher is finally evicted in *Pot-Bouille*, the relieved Monsieur Gourd asserts that ‘ce ventre emportait le malaise de la maison’ (1998: 339). The use of ‘emporter’ jointly references the removal of any scandal from the house, but also implies that concern with the *ventre*’s contents was limited to their threat to middle-class respectability.¹⁸⁹ Altogether, this illustrates how pre-existing ideologies of the maternal body were adapted to reinforce contemporary anxieties and justify the regulation of the maternal body.

Absorption during Pregnancy

As has been demonstrated, throughout literary representations of pregnancy, authors place repeated emphasis on the instability of the pregnant woman, both mentally and physically. Literary representations consistently draw attention to the boundaries of the unstoppably

¹⁸⁹ This is reinforced later in the novel when the boot-stitcher’s large stomach is presented as criminal evidence for her infanticide after she is forced into poverty and kills the infant. The wealthy gentlemen discussing the case note that she was ‘stupide avec ça! car, sans même s’aviser que ce ventre la dénoncerait, elle s’était mise à couper son enfant en deux, pour le garder ensuite au fond d’une caisse à chapeau’ (1998: 461).

expanding *ventre*. However, this trend of representation is complicated by a seemingly contradictory, secondary thread of imagery which presents the pregnant body as absorptive. In contrast to other critics who examine the leaking female body, Peter argues that nineteenth-century physicians discovered that ‘[Le corps féminin] est proprement un objet pénétrable. Tout y entre, tout s’y imprime, tout l’impressionne. Et rien n’égale sa propension active à absorber, à avaler’ (1980: 83). As this section will argue, this reveals a sustained focus on the boundaries and limitations of the female body.

Although the pregnant stomach of the boot-stitcher in *Pot-bouille* can be viewed as representational of the threat of the expanding *ventre*, it also contains imagery of women’s absorptive capacity, specifically the notion that to become pregnant, a woman must have had sexual intercourse and thus absorbed male seed. Indeed, as already examined, the boundaries of the pregnant boot-stitcher’s stomach are presented as threatening bourgeois respectability. However, this threat originates from the notion that it appears to be an illegitimate pregnancy. Monsieur Gourd notes that despite having never seen a man visit her, ‘des choses comme ça ne poussent pas toutes seules...’ (1998: 320). Her pregnant stomach therefore symbolises the supposedly scandalous relations which must have begun the pregnancy and brought shame to a building which (pretends) to uphold and enforce traditional morals.

Suspicious Bellies in *Au Bonheur des Dames*

The notion of the pregnant figure as both expanding and absorptive is also present in Zola’s *Au Bonheur des Dames*. As in *Pot-Bouille*, male suspicion of the swelling *ventre* is linked to its absorptive qualities and the scandalous reminder that the woman must have taken part in sexual intercourse and *Au Bonheur des Dames* also presents the pregnant figure as simultaneously expanding and absorbing.¹⁹⁰ As already examined, amongst the intense noise and movement of the crowds during sales, the shop-walker Jouve specialises in observing

¹⁹⁰ The protagonist, Denise, uses her newfound influence in the department store to prevent management from firing the pregnant salesgirl Pauline. Prior to this, in the previous fortnight, two other women had been fired for their advancing pregnancies: ‘La direction ne tolérait pas ces accidents-là, la maternité était supprimé comme encombrante et indécente, à la rigueur, on permettait le mariage, mais on défendait les enfants’ (2009: 424). The scandal of the pregnant body is deemed unsightly and unprofessional, even when the woman is respectfully married and her sexual relations legitimised. This shame leads Pauline to ‘se serrer à étouffer, résolue de cacher ça tant qu’elle pourrait’ (2009: 424), a common practice with dangerous consequences that will be discussed shortly.

and trailing women whom he suspects of shoplifting. Amongst these women, the shop-walker garners an intense suspicion of pregnant women and targets them specifically. Aside from their tendency towards kleptomania which has already been examined, 'le ventre énorme' (2009: 320) of pregnant women fixates him. As in *Pot-Bouille*, the boundaries of the pregnant stomach are repeatedly emphasised, and are so large that another woman is required in order to 'la défendre sans doute contres les chocs trop rudes' (2009: 320) of the crowd. However, in addition to the sexually scandalous implications of pregnancy, the novel also associates the pregnant stomach with a new economic and criminal threat, incited by Mouret's new large-scale style of commerce, as pregnant women's tendency towards kleptomania is linked to their bodily expansion.

In fact, this representation does indicate some suspicion towards the mysterious contents of the pregnant *ventre*. However, in contrast to eighteenth-century representations, in which the contents were veiled by a lack of medical access or knowledge, Zola's text reconfigures this trend of representation to reflect changing commercial practices and incorporate the pregnant stomach into the novel's broader criticism of mass consumerism. For Jouve, the expanding space within the fecund stomach is viewed as an area in which stolen goods could be secreted. Pregnant women's tendency towards kleptomania is presented as facilitated by their already voluminous figure in which they can hide coveted goods. Non-pregnant shoplifters such as Madame de Boves, who manages to conceal twelve metres of material, a handkerchief, a fan and a scarf under her clothing, cause any padded out or enlarged female figures to become suspicious. Indeed, this notion can be linked to Thompson's assertion that binaries such as 'natural and artifice, [...] revelation and disguise' (2004: 9) can be blurred by 'excessive' clothing. In Zola's text, any abnormal bulges in a woman's body, such as an enlarged stomach, could in fact be constructed from fabric, clothing or other stolen products, confusing and blurring the limits of the female body. The contents of the pregnant *ventre* are therefore viewed with suspicion and Jouve views this space as a site of criminal activity. Later in the novel, this paranoia and suspicion is exploited by two women, one of whom is heavily pregnant. Jouve dedicates himself to trailing the pregnant woman and her suspicious stomach, finally taking her aside and having her searched, to no avail. He consequently realises that 'la femme enceinte n'était là que pour l'occuper, c'était l'amie qui volait' (1992: 329).

These texts therefore illustrate how contemporary concerns over economic and commercial expansion and spatiality were also expanded to the pregnant body in Zola's novel. Just as the excessive, overflowing window displays conceal the shop within (Scott 2006: 2014), the voluminous and expansive shape of the pregnant stomach conceals the mysterious space within, a space which could facilitate crime and satisfy the temptation for excessive consumption.

The Pregnant Woman as Emotionally Absorptive

Returning to Peter's view of the pregnant body as 'un objet pénétrable. Tout y entre, tout s'y imprime, tout l'impressionne. Et rien n'égale sa propension active à absorber, à avaler' (1980: 83), it is also possible to trace this concept within a multitude of medical and alienist discourses that view the pregnant woman as emotionally, morally and mentally absorptive and impressionable. As has already been examined, many medical texts reinforced the link between brain and uterus, arguing that pregnancy could affect women's behaviour. However, the inverse is also true in medical manuals which assert that emotions, experiences and even traumatic sights could impact a pregnancy. Allix emphasises that 'une femme enceinte est extrêmement impressionnable' (1884: 57), an opinion also found in Gausseron's text as he asserts that '[l]a femme enceinte est plus impressionnable que dans l'état normal' (1897: 28).¹⁹¹ Indeed, in most medical and quasi-medical manuals for expectant mothers, a section or chapter is dedicated to advising mothers on their emotional wellbeing and warning them against exposing themselves to harmful emotions or situations during pregnancy. Although this link originated in Ancient Greece (Weiss 1897: 27), contemporary perspectives demonstrate a shift towards medicalised interpretations and rejection of superstitious beliefs. Previously, it was believed that if a woman saw something that disturbed her, this image could imprint itself upon the foetus, for example if a pregnant woman viewed a physical deformation, this could be mirrored upon her child (Williams 2012: 27).¹⁹² Although this notion persists into the nineteenth century, it is primarily referenced in animals, for example:

¹⁹¹ Morel also comments on the 'excessive impressionnabilité' of pregnant women (1860: 201).

¹⁹² This phenomena, which emphasised the influence of the maternal imagination and the plasticity of the foetus, is also explored by Shildrick (2002).

‘Une vache ayant reçu un coup de massue au front, son veau présent la même particularité’ (Clément 1873: 58).

Despite the abandonment of the link between visual experiences and the physical appearance of the infant, medical and literary texts continue to reframe these notions by linking women’s emotional experiences to the broader health of the infant. However, what is particularly pertinent about this emphasis on the impressionability of the pregnant body, is that the suggested remedy is a withdrawal from public life. With exceptions for daily walks and exercise, Weiss advises pregnant mothers: ‘Evite les accès de colère, ne fréquente ni les bals, ni les soirées, ni les théâtres, l’air y est trop appauvri et ne le fournirait pas assez d’oxygène, et ce manque d’oxygène pourrait provoquer une syncope. Fuis les foules, sois calme et sereine’ (1897: 27). Equally, Triaire recommends that, for women of a nervous disposition: ‘Elles devront se priver des soirées, des bals, des théâtres, et de tous les plaisirs mondains, dont le moindre défaut est de ne pas être en rapport avec les préludes des sérieux devoirs de la maternité’ (Triaire 1874: 10). As has already been examined earlier in this chapter, women were expected to commit wholeheartedly to the role of mother and endure the suffering of childbearing and birth. In addition to physical suffering and pain, these discourses imply that the sacrifice and privation of social engagements and amusements is included within this process, extending Christian notions of original sin to social privation.¹⁹³

In addition to the harmful consequences of physical overexertion and accidents, the emotional link between mother and foetus is repeatedly emphasised in medical manuals. They assert that not only must the mother avoid distress and extreme emotions, but she must also conquer her own ‘nervous’ feminine nature. In a period when Charcot’s work on hysteria had medicalised beliefs of the sensitive and hysterical nature of woman, guidance on pregnancy reflects that an expectant mother must ‘maîtriser une nature nerveuse’ and prioritise ‘le calme, la sérénité, et, s’il se peut, le bonheur’ (Gausseron 1886: 4). When a mother is unable to do so and remains emotionally unstable during her pregnancy, the consequences are reflected in the personality of her child. An example used by Gausseron is that of Byron, whose mother was unable to conquer her nervous disposition, resulting in her son’s ‘âme orageuse’ (1886: 4). This legacy is repeatedly referred to as a *marque maternelle*

¹⁹³ The changing notions of public and private, particularly related to motherhood and fertility will be examined in Chapter Five.

and is explicitly evident in the central genealogical theme of *Les Rougon Macquart*, in which the *fêlure* of the family can be seen as a similar construct.

These discourses place heavy emphasis on a woman's behaviour during pregnancy, as she is presented as both the carrier of her child, and responsible for its future appearance and health. Mothers who did not obey doctor's orders for a serene and healthy pregnancy were threatened with deformed or unhealthy offspring. A literary example of this notion can be found in Zola's *L'Œuvre* through Jacques, the son of the protagonists Christine and Claude. On the day she conceives, Christine views the artist Claude's painting at the Salon des Refusés for the first time and, after viewing the laughing crowd, she flees: '[elle] avait senti ces rires s'abattre sur sa peau nue, la cingler au sang de coup de fouet' (Zola 1992: 175). She is later surprised to find herself pregnant and identifies the date of conception, noting that 'ce serait l'enfant de la souffrance et de la pitié, souffleté à sa conception du rire bête des foules' (1992: 189). One contemporary medical text argues that physical and emotional blows 'peuvent produire un arrêt dans le développement du fœtus, des difformités [et] des fractures' (Clément 1873: 57) and although the physical violence experienced by Christine is imaginary, the emotional turbulence and anxiety she experiences is later evident in the stunted growth of her son. Jacques' abnormally large head and out of proportion body are repeatedly emphasised throughout his childhood, representing a *marque maternelle*, a legacy of his growth in the womb.

However, although medical documents frequently place emphasis on the prospective mother's emotional and physical well-being during conception and pregnancy, in *L'Œuvre*, Jacques is also presented as a product of his Father's emotional state. When Jacques is conceived, Claude is weeping, in a state of despair from the public mockery of his painting which had pursued him like 'une meute aboyante' (1992: 175), leaving him 'plus débile qu'un enfant' (1992: 175). Claude's passive and childlike emotional state during conception becomes evident in his son's slow development and limited physical growth. Moreover, throughout the novel, despite the exploration of Christine's lack of maternal love for her child, Jacques is consistently presented as the product of his father, not of his mother. When Jacques dies, he is presented as 'cette chair vivant de sa chair' with the head 'd'enfant du génie' (1992: 322), highlighting the paternal relationship and emphasising the hereditary 'fêlure', passed onto an infant conceived in a moment of shame and artistic impotence.

Ultimately, Claude's artistic failures translate reproductively into a biological failure and a child doomed to death. In *L'Œuvre*, it is masculine emotional weakness and instability at the moment of conception that results in deformed offspring; artistic impotence is transmuted through reproduction into biological impotence and, just as his attempts to re-work his paintings dilute their quality and merit, his other forms of production result in an equally unsuccessful and flawed creation.

Both literary and medical texts highlight that the physical, emotional and mental experiences of a woman during her pregnancy can leave a 'marque maternelle' upon her unborn child which will affect his or her appearance and personality. The importance of an expectant mother's emotional stability is presented as key during a time in which their emotional stability and 'nervous' natures are heightened by pregnancy. These discourses emphasise that the pregnant woman is emotionally and physically absorptive, as texts such as *Au Bonheur des Dames* appropriate historical suspicion of the mysterious contents of the pregnant stomach to engage with broader economic and commercial commentary. Viewing these representations alongside medical emphasis on the sensitivity of pregnant women and risk of exposure to extreme emotions in public spaces, the spatial regulation of women becomes evident, as they are advised to restrict themselves to the domestic, private space. This is particularly emphasised in *Au Bonheur des Dames*, in department stores where women could move unaccompanied and 'even take on the autonomy hitherto reserved for the exclusively male *flâneur*' (Thompson 2004: 85). As will be examined further in the next chapter, this female, public circulation was aligned with moral, social and sexual transgression, and was met with increasing recommendations for women, particularly those sensitised by maternity, to remain within the private, domestic space.¹⁹⁴

Regulating the Pregnant Body

As already examined, representations of pregnancy frequently emphasise the expansion and instability of the pregnant body, revealing how these features were perceived to pose a threat to physical, social and even commercial boundaries. This threat and consequent anxiety

¹⁹⁴ Thompson illustrates how descriptions of the spaces within the department store blur the boundaries between the domestic and public (2004: 86-87).

triggered a response in the way that the pregnant body was represented, particularly within medical discourses. As this section will discuss, representations of pregnancy reveal attempts to regulate and control the instability of the expanding fecund stomach. This trend is present throughout various discourses, from medical illustration, visual imagery of the female figure, to representations of women's figures and corsetry.

Corsets and Pregnancy

When introducing the topic of pregnancy, medical texts almost exclusively draw attention to the etymology of 'enceinte' coming from the latin 'incincta', which means without a belt. The repetition of this concept draws attention to the restriction and liberation of the maternal body and its impact upon the foetus, a notion which is particularly relevant during a period in which women continued to restrict their bodies through the use of 'cet instrument de torture et de déformation' (Caubet 1894: 18): the corset. The fashion for minuscule waists and the restriction needed to achieve this was not conducive to pregnancy or the fecund figure.¹⁹⁵ Many medical texts of the time, such as those of Doctor Brochard, advocate a return to antiquity where pregnant women were required, by law, to wear large, loose clothes and were forbidden to wear belts or restrictive clothing (1882: 119).¹⁹⁶ These pronatalists posited that the authorities should combat those who, 'pour conserver leur taille, au début d'une grossesse sont tellement serrées dans leur corsets et dans leur robes *bridées*, qu'elles sont obligées, à demi pâmées, de se desserrer après chaque repas' (1882: 119).¹⁹⁷

Indeed, literary representations of corsets initially appear to reinforce the notion of their danger during pregnancy. The use of corsets during pregnancy was not always due to coquetry, but through a desire to conceal illegitimate or unwanted pregnancy. For some, like the shop-girl Pauline in *Au Bonheur des Dames*, pregnancy would mean the loss of

¹⁹⁵ It is this fashion for 'la vierge exsangue et plate, sans sexe' (1899: 54) that saddens Mathieu in *Fécondité*. He mourns that 'la stérilité de la femme, aux formes longues et grêles, aux flancs rétrécis' (Zola 1899: 50) is adored over the rubenesque and titian figures of the Renaissance. In this novel, both Mathieu and Dr Boutan advocate a transformation of beauty from the virginal, pre-pubescent figures idolised in literature and art to the fecund, maternal body.

¹⁹⁶ See also: Caubet (1894), Claparède (1876) and Debay (1871).

¹⁹⁷ This criticism extends to all forms of women's coquetry, including high heeled shoes: 'Les hauts talons qui forcent la femme à marcher d'une manière si disgracieuse et qui l'exposent à des chutes toujours dangereuses doivent être complètement abandonnés par les femmes enceintes, du moins par les femmes enceintes raisonnables' (Brochard 1882: 119).

employment. To avoid detection, ‘[elle] se serrer à étouffer, résolue de cacher ça tant qu’elle pourrait’ (Zola 2009: 424). The dangers of doing so are emphasised by the text which highlights that other saleswomen employ the same technique, one of whom ‘venait justement d’accoucher d’un enfant mort, pour s’être torturé ainsi la taille; on désespérait de la sauver elle-même’ (2009: 424).¹⁹⁸ Similarly, in *Fécondité*, the pregnant Valérie ‘se torturait dans ses corsets [et] risquait chaque soir une fausse couche’ (Zola 1899: 130).¹⁹⁹

Despite these texts’ confirmation of the dangers of corsets during pregnancy, in representing their use, they continue to emphasise the threatening expansion of the pregnant body. In *Fécondité* the seduced and pregnant factory-worker Norine attempts to hide her pregnancy ‘en se serrant à étouffer’ (Zola 1899: 149). However, when her sister, Euphrasie, threatens to reveal her pregnancy, the two women break into a fight. The fight ends when Euphrasie succeeds in revealing her sister’s pregnancy:

D’un geste violent, elle avait saisi la blouse de Norine, la longue blouse de travail qui avait, jusque-là, permis à celle-ci de dissimuler sa taille; et, passant la main dans un déchirure, survenue pendant la bataille, elle fendit la serge d’un bout à l’autre; de sorte que le ventre de Norine apparut, ce ventre dolent de pauvre fille séduite, qu’elle se désespérait à regarder grossir, qu’elle aurait voulu écraser de toute la force de ses poings. Il n’y avait pas à nier, des agrafes de la robe s’étaient rompues, le ventre s’échappait et débordait. (Zola 1899: 152)

Emphasising the role of clothing in the concealment of pregnancy, this scene concentrates upon the unstoppable expansion of the pregnant stomach. Norine is presented as consistently unable to control her own body’s expansion as the stomach escapes and overflows from within her torn clothing. This scene shows similarities to the representation of the boot-stitcher in *Pot-Bouille* which has already been examined. However, in the later text, Zola places a greater emphasis on Norine’s attempts at concealing pregnancy with clothing and its

¹⁹⁸ An alternative representation of concealed pregnancy can be found in *Pot-Bouille*, where the pregnant servant Adèle conceals her pregnancy from her mistress, for fear of losing her job. Despite ‘les nausées, les maux de tête intolérables, la constipation terrible dont elle souffrait’ (Zola 1998: 446), the servant conceals her pregnancy. However, this is not because she successfully conceals her changing figure, but because her expansion is misunderstood as an excess of greed and theft of food, explained by the way that she carries the child: ‘elle porta dans les flancs, le ventre s’élargit sans trop avancer’ (Zola 1998: 446).

¹⁹⁹ Because of this practice, in addition to excessive dancing and drinking during pregnancy, Valérie comes close to death and, even when recovered, ‘une pénible grossesse se déclara, qui ne lui laissa plus une heure sans souffrance’ (1899: 130).

failure, referencing the ripping and splitting of the dress to reveal the fecund expansion of her body.

Similarly, in Landay's *La Grappe*, the working-class Madeleine attempts to conceal her pregnancy through corsetry, the pain of which is evident when she undresses: 'les chairs soulagées de la cuirasse d'acier se détendirent et la pauvrete apparait alors, déformée déjà' (1904: 222). Indeed, descriptions of her pregnancy contain paradoxical imagery of both draining and expansion:

Ses traits étaient émaciés et marqués déjà d'une mentonnière de lignes jaunâtres. Son facies avait acquis une certaine gravité. Lorsqu'elle marchait, son port de corps accusait la lassitude de son être, sa tournure était embarrassée, son dos un peu voûté. Le torse était comme tassé sur les reins que comprimaient les dures baleines du corset dont le busc d'acier dissimulait les premiers ballonnements du ventre, et cachait tant bien que mal la preuve de la *faute*. (Landay 1904: 164-65)

Attention is repeatedly drawn to the boundaries and limits of the female body, which is deformed by both its fecund expansion and Madeleine's attempts to repress it. The imprint of the boning upon her skin is a visual reminder of its shifting boundaries and, as illustrated earlier, these expanding boundaries are linked to the transgression of social boundaries, as her growing stomach, quite literally, embodies 'la preuve de la *faute*'.

These literary representations clearly confirm the medical opinion that 'l'hygiène vestimentaire de la femme grosse se résout dans un seul mot, la liberté' (Triaire 1874: 7). However, despite this criticism of bodily restriction, as we have already examined, free expansion of the pregnant stomach also elicits anxiety and concern. Medical texts therefore aim to achieve a balance, through which the corset is abandoned, but the body continues to be supported, and thus regulated, by medically-sanctioned undergarments. Allix suggests that pregnant women's undergarments should 'soutenir les seins et l'abdomen sans les comprimer' (1884: 60). Weiss condemns the corset, yet continues to suggest a 'brassière de grossesse' (1897: 21) which supported the breasts and body without the use of boning. In fact, medical documents on pregnancy contain a multitude of alternative garments and devices available to pregnant women. These devices relieved the corset's pressure upon the breasts and stomach, whilst still supporting, containing and enveloping the expanding stomach. In *Étude sur le corset au point de vue physiologique et pathologique* (1859), Dr Verdié describes the different corsets that should be worn at each stage of the pregnancy:

Du quatrième mois à la fin de la grossesse [il lui] faudra [...] ajouter au corset *les échelles*, qui sont des pièces rectangulaires d'une largeur convenable, pareillement en tissu élastique: ces pièces sont cousues sur les parties latérales du corset, dans les deux tiers inférieurs de sa hauteur, et permettent au corset de se prêter, sans sensation désagréable pour la femme, à amplification du ventre. (1859: 56-57)

Elsewhere, other physicians recommend the use of '*corsets de grossesse*' which closely resemble belts and still contain wiring (Figure 10). The proliferation of such garments demonstrate that whilst doctors advocated free expansion and loose clothing for the pregnant woman, public opinion and fears of unsightliness caused the pregnant stomach to remain contained, supported and controlled. Returning to the concept of woman as an 'unsound vessel', the devices available to women during pregnancy and the authority with which they were instructed to use them, emphasise male anxieties around the boundaries of the female body, attempting to gain control of these corporeal limits through supportive garments without endorsing the use of the restrictive corset.

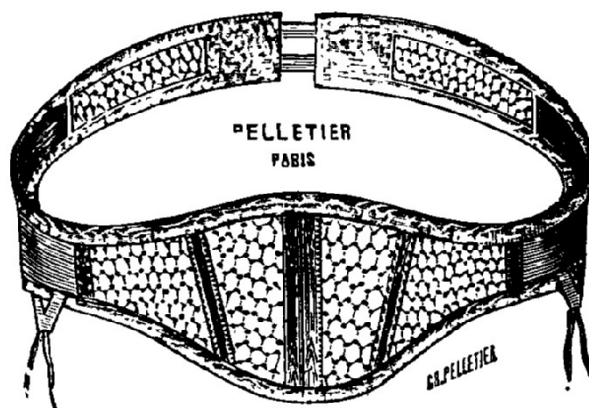


Figure 10: Diagram of a pregnancy corset (Caubet 1894: 48)

Representations of pregnancy and corsets therefore perpetuate notions of the unstable and unstoppably expanding maternal body, reinforcing the dangers for those who try to halt or conceal this expansion through tightly laced corsets. Further drawing attention to the unstable boundaries of the maternal body, representations of pregnancy garments emphasise the weakness of the female body and imply that it requires medically sanctioned regulation.

Within this, it is possible to detect a desire to continue to regulate and control the instability of the female body, whilst safeguarding the health of both mother and foetus.

Veiling and Immobilising the Pregnant Body

In line with what has been examined so far, representations of the pregnant stomach reveal the continuation of the eighteenth-century focus on the expanding and unstable maternal body, modified by broader nineteenth-century medical and economic changes. As reinforced in the Introduction, the opacity of the eighteenth-century body, which required the medical interpretation of the female account and testimony, was irrevocably altered by new medical technologies, which permitted access to its interior. Previously the living body could not be opened and examined and, as such, anatomical knowledge was only gained through autopsy, limiting understanding of progressive illnesses or processes such as pregnancy (Duden 1991: 106). Whilst physicians could examine what killed a patient, they could not examine or represent the impact of conditions such as pregnancy upon the *living* body and, as such, ‘the living body remained a realm into which physiological theories and general concepts were projected’ (Duden 1991: 106). However, by the nineteenth century, new ways of opening up the living body such as vivisection and surgery were made possible by anaesthetic and safer through advances in Germ Theory.²⁰⁰ This new visibility of the maternal body is also evident in medical illustration, revealing the contemporary desire and possibility of ‘seeing into’ the pregnant stomach.²⁰¹ Indeed, in 1818, Rayer states that ‘[une] époque toute nouvelle pour la médecine vient de commencer en France’, based upon ‘l’analyse appliquée à l’étude des phénomènes physiologiques’ (In Roudinesco 1982: 25). This is in line with Foucault’s assertion that ‘ce qui était fondamentalement invisible s’offre soudain à la clarté du regard’ (1963: 197).

Within medical discourses, this new transparency and popularity of anatomical studies becomes particularly evident in the work of Jacques-Pierre Maygrier. His work, entitled *Illustrations de Nouvelles démonstrations d’accouchements*. (1822[-27]), includes a series of

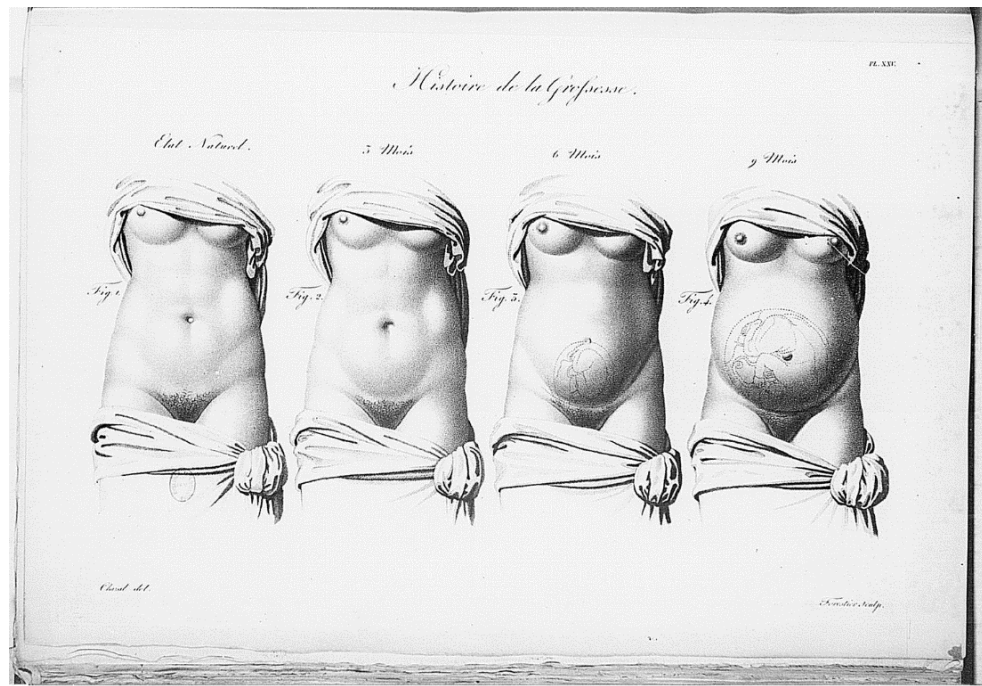
²⁰⁰ Autopsy continued to constitute an important source of medical knowledge, as evident in Zola’s *Le Docteur Pascal* (1893) when a cholera epidemic provides the physician with an opportunity to dissect the bodies of pregnant fatalities, allowing him to trace the development of the foetus (1906: 25).

²⁰¹ McGrath traces the importance of medical imagery and illustrations in cultural representations of the female body, particularly in relation to its fertility and sexual organs (2002).

engravings by Chazal, illustrating women and their bodies during pregnancy and childbirth. As noted by Laqueur, anatomical drawings reveal cultural beliefs and are ‘representations of historically specific understandings of the human body’ (1990: 164). These engravings are therefore particularly revealing with regard to gender and the ideologies surrounding the female body, demonstrating a marked shift towards the prioritisation of female reproductive capabilities. For example, illustrations of male and female skeletons place emphasis on women’s smaller skulls and wider hips (Maygrier 1822[-27]: Plate I), a notion which is further reinforced by imagery of the wider pelvis of women in comparison with the male counterpart (Maygrier 1822[-27]: Plate II). Schiebinger traces the ensuing debates prompted by these images, arguing that they reinforced women’s supposed unsuitability for mental activity and adaptation for the maternal role (1989: 42 and Laqueur 1990: 149).²⁰²

Within these representations, imagery of the pregnant stomach and medical interventions during pregnancy reflect a contemporary focus on women’s physical boundaries and the role of the physician during pregnancy. Figure 11 illustrates this new visibility of the female body as the body is both veiled and revealed. Despite its unchanging appearance, the full exposure of the pubis emphasises sexual difference and acknowledgment of this exclusively female process, a key focus of medical illustration from the seventeenth century onwards (McGrath 2002: 2), whilst partial coverage of the breasts not only emphasises their exposure but also stresses their erotic value. Furthermore, whilst the partial veiling of the body emphasises its exposure to the medical gaze, the final image of pregnancy on the right-hand side reveals the outlines of the foetus within the stomach, implying that anatomical knowledge permits the medical gaze to penetrate the female body without the need for invasive surgery. As such, the image reinforces the strength of the medical gaze, in addition to implicating ideologies of the fluid and unstable boundaries of the maternal body, which is presented as both expanding and transparent.

²⁰² These debates can also be situated within a larger change in how male and female bodies were viewed. Laqueur traces how, before the late eighteenth century, male and female bodies were viewed similarly, with the same genital structure, except that the female version was inverted. However, the end of the century marked a shift to a new model of biological divergence (1990: 6) in which the female body and its reproductive system functioned in a distinctly different manner to that of men. Laqueur argues that through this shift, ‘[biology] - the stable, ahistorical, sexed body - is understood to be the epistemic foundation for prescriptive claims about the social order’ (1990: 6).



Source gallica.bnf.fr / Bibliothèque nationale de France

Figure 11: Medical illustration showing the physical changes caused by the progressive stages of pregnancy (Maygrier 1822[-27]: Plate XXV)



Source gallica.bnf.fr / Bibliothèque nationale de France

Figure 12: Medical illustration of a gynaecological examination, including the positioning of the patient's lower body (Maygrier 1822[-27]: Plate XXX)

A different image (Figure 12) illustrates the medical examination of a female patient. The draping of the body implicates respectability and modesty, as the anonymously concealed patient and the physician both avert their gaze. However, the sheet veiling the patient is rendered transparent, allowing the gaze to penetrate within and view the reality of the inspection. Furthermore, in contrast to the headless body in Figure 11, Figure 12 presents the patient in her entirety, dressed and in bed, highlighting that this is a lived medical encounter within the domestic space, and illustrating how the medical gaze was able to cross into this private space, distancing the illustration from historical imagery of observations made upon the autopsy table. This illustration contrasts against eighteenth-century medical encounters, in which the physician rarely touched his patient, except in extreme need (Duden 1991: 83), and ‘mothers’ bodies and homes were considered private spaces – inappropriate targets for the gaze of the state or the physician’ (Kukla 2005: 66).

However, returning to Figure 11, which shows the changing shape of the stomach during pregnancy, the relevance of draping gains an increased significance. Just as the body is veiled but revealed, the swathes of fabric covering the top and bottom of the body appear to immobilise the arms and legs of the model, emphasised by the knot which secures the lower half of the fabric. The relevance of the fabric draping the model is also important in a later image showing the incisions made during a caesarean section (Figure 13). This image suggests a level of modesty, covering the breasts and genitals, whilst also concealing and immobilising the arms and legs of the model. This notion of restraint and immobility is emphasised by the rough sketching of the model’s face and expression, making the image a hybrid of the sterile and anonymised body of Figure 11 and the personal and domestic identification of Figure 12. However, the expression on the model’s face is one of discomfort and martyred endurance, furthering the notion of the unwilling or suffering patient, immobilised and helpless before the medical gaze.

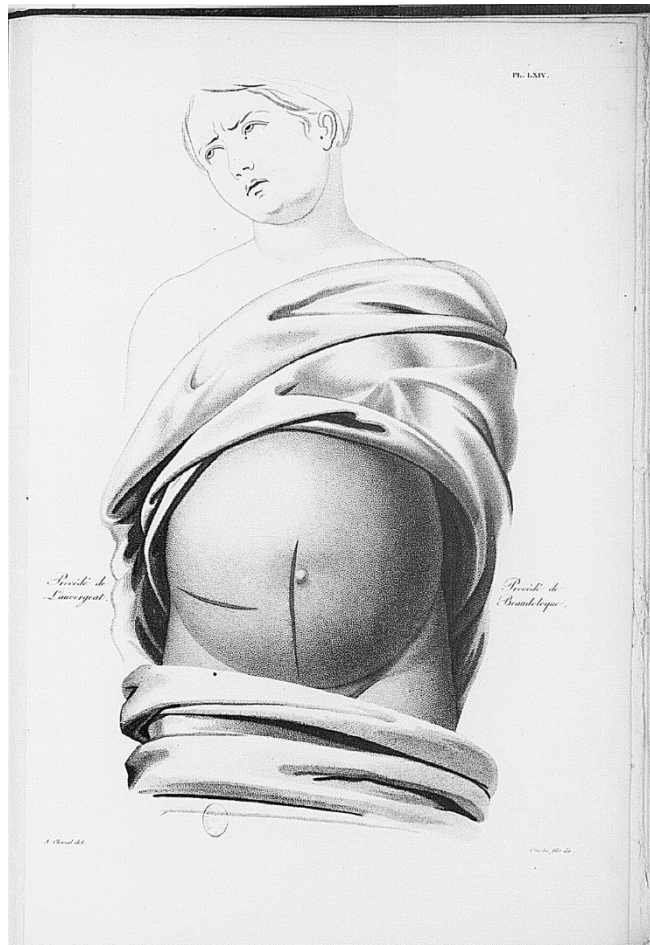


Figure 13: Medical illustration showing the incision made during a caesarean section (Maygrier 1822[-27]: Plate I.XIV)

These illustrations can be linked to the broader trend of representation of mute or inarticulate female bodies beneath the medical gaze, as previously examined in Chapter Three. As viewed in representations of birth (Beizer 1994: 201) and in debates over chloroform (Poovey 1987), these illustrations reveal the medical control and interpretation of the maternal body through the exposure, transparency and restraint of the female body. Furthermore, in addition to this emphasis on restriction and immobilisation, these illustrations of veils and fabric can also be seen to represent the process of medically ‘unveiling’ or revealing medical ‘knowledge’ of the female body and of pregnancy. In all three of the referenced images, the use of veils inevitably implicates the notion of unveiling, the suggestion that the medical gaze has shifted the fabric away from the desired areas, revealing the anatomical ‘truth’ within. This is

particularly relevant when viewed alongside eighteenth-century medicine, in which, as already discussed, physicians had to rely heavily on women's testimony and description, and only occasionally examined their patients (Duden 1991). Indeed, Maygrier continues to reference this form of examination in one illustration in which the physician examines his patient under her dress, discreetly averting his eyes (Figure 14).

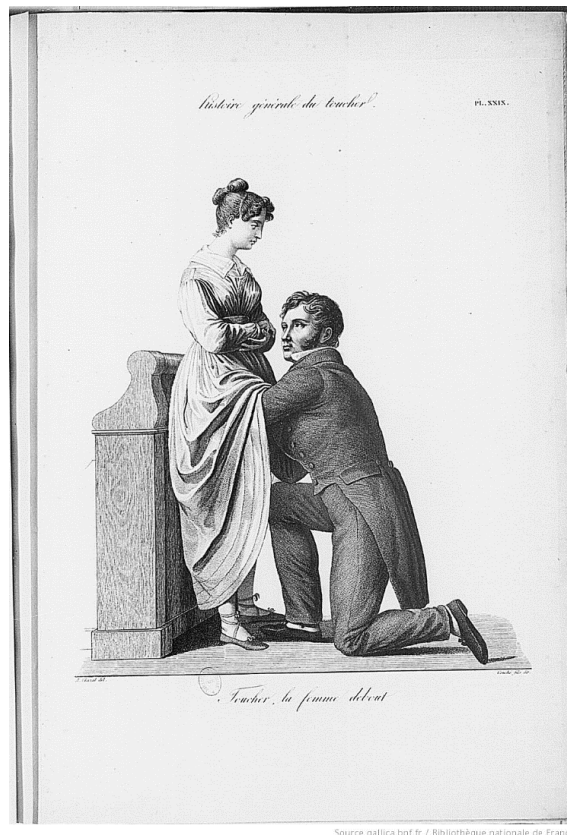


Figure 14: Medical Illustration of a gynaecological examination with a standing and fully clothed patient (Maygrier 1822[-27]: Plate XXIX)

Viewed alongside this historic practice, these illustrations can be seen as representative of the now superfluous female narrative within medical examination. Where faces are represented, women look away from the examination, avoiding direct engagement with the physician. Maygrier's images therefore embody the new visibility of the female body as the physician strips away the historic mystery of the pregnant stomach and reveals its interior. Not exclusive to Maygrier, other authors such as Richard also indicate this trend, including the same veiling as previously examined, which simultaneously reveals and immobilises the

female body (Figure 15). However, Richard's image also illustrates a trend in which illustrations of pregnancy increasingly presented the foetus as the central focus of the image: 'it made its antenatal appearance at the centre of a universe of its own creation, as if it had formed itself, built a structure that it would later discard' (McGrath 2002: 67). Maygrier's text also represents the foetus on its own, excluded from the female body (Figure 16).²⁰³ Through this perspective, the pregnant mother is presented as a mere vessel which would eventually expulse, or leak, its precious cargo.²⁰⁴ From such a perspective, the representation of the female body as passive and inert was justified in her role of vessel for the actively growing foetus.

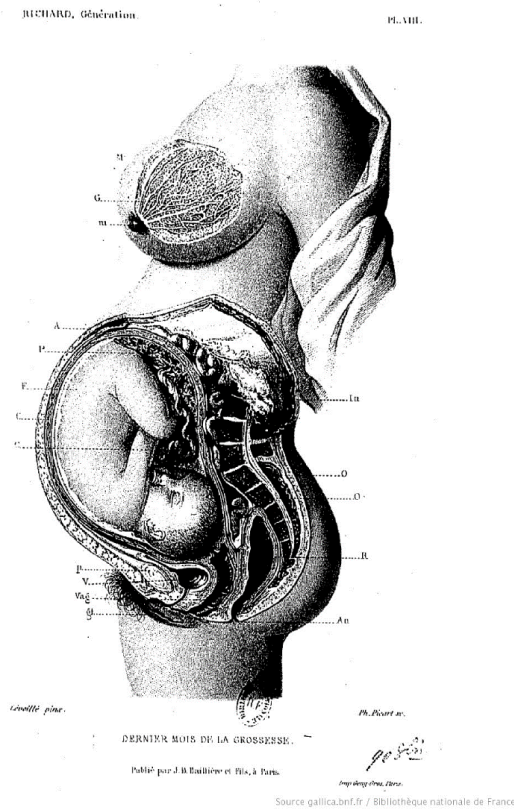


Figure 15: Anatomical cross-section of the female body during the last month of pregnancy, revealing the interior of the torso, genitalia and breast (Richard 1875: Plate VIII)

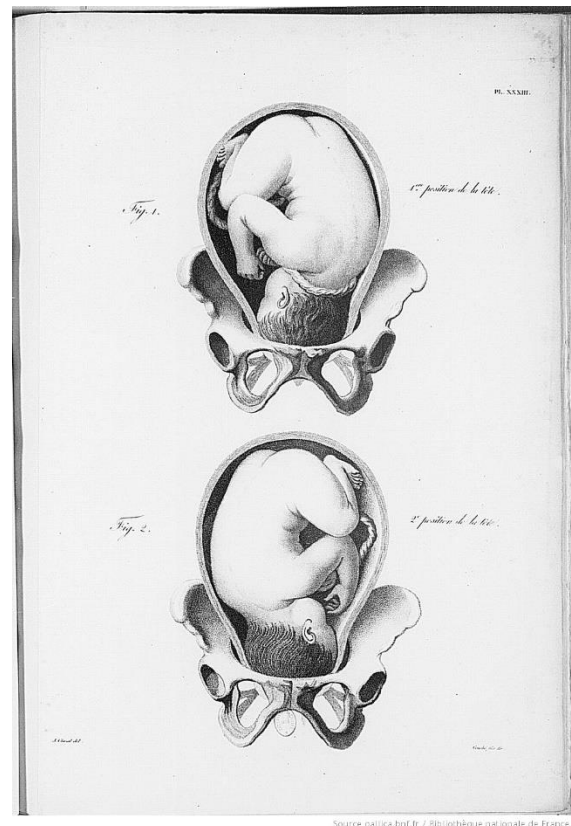


Figure 16: Anatomical drawing of the foetus's positions within the womb, including the representation of the pelvis (Maygrier 1822[-27]: Plate XXXIII)

²⁰³ This same trend of representation is found throughout the text, particularly within Plates XXXIII and LII.

²⁰⁴ McGrath also links this trend with changing views on at what point the foetus was 'alive' and also by Hunter's discovery that the circulation systems for foetus and mother were separate (2002: 67).

These drawings also resemble Anatomical Venuses, female models created from wax and used as learning aids for medical students in the eighteenth century. The models traditionally represented a reclining female figure and could be opened up to reveal the internal organs and often a model foetus. However, although presented as learning aids, the models were detailed replicas of women, with eyelashes, hair and often wearing jewellery. Elaine Showalter emphasises how the reclining and sexualised models ‘simultaneously evoke an abstract femininity, equate knowledge with looking deeply into the body, and emphasise women’s reproductive capabilities’ (1991: 128).²⁰⁵ Like Anatomical Venuses, Maygrier and Richard’s drawings are presented as medical sources of knowledge for educating physicians. However, they also contain elements of a sexualised femininity through a draping of the female figure reminiscent of classical sculpture. Both anatomical models and drawings demonstrate a desire to see into and uncover the female body, whilst reinforcing its femininity and reproductive capabilities as clearly distinct from its male counterpart. As explained by Showalter, this desire to reveal the female body is linked to the male figure of conqueror: ‘the conquistadors who penetrate an alien land’ (1991: 129).

The use of veiling and concealment, in addition to the figuration of examinations and representations of the woman’s face and expression, go against traditional trends of medical representation of the reproductive body.²⁰⁶ Traditionally, anatomical drawings removed any sense of the personal or individual; the body was ‘made into a technical drawing, seemingly sprung fully formed in its abstraction, and purged of all idiosyncratic traces of culture’ (McGrath 2002: 97). From this perspective, Maygrier’s images are markedly different from these goals of pure ‘scientific objectivity’. By representing the intimate medical examination within the domestic space, Maygrier references day-to-day medical practice, emphasising the cultural and social subtext that forms a key part of professional medicine. Furthermore, in traditional illustration ‘there must be no shadowy recesses, nothing hidden from the light of scientific reason’ (McGrath 2002: 98). Why then, does Maygrier include veiling and concealment of the female body, particularly in Figures 12 and 14? These images can therefore be viewed as a form of medical, male, sexual fantasy, in line with Showalter’s

²⁰⁵ See Ebenstein (2016) for a study and history of Anatomical Venuses.

²⁰⁶ Although not studied here, Plate XXXI also includes similar imagery, representing the dress of a woman which has been lifted by the physicians hand to reveal her genitalia, which the other hand, detached from the invisible physician’s body, examines her vagina (1822).

reference to the ‘penetrating conquistadors’. Previously, many anatomical texts showing the female reproductive body had been accused of justifying pornographic imagery.²⁰⁷ These images could be viewed as a medically legitimised eroticisation of stripping the female body, both physically, through the removal of clothing and secret viewing of the sexual organs, and epistemologically, through the comprehension of the body’s inner workings.

By restraining and revealing the pregnant body, these texts present a regulated, controlled and medically explained representation of the previously mysterious and unstable pregnant body. If, as Shildrick suggests, anxiety surrounding the pregnant body is due to its ability to ‘confound definition’ (2002: 44), then these medical illustrations can be seen as both physical and metaphorical attempts to delineate the pregnant body, marking the boundaries by describing its anatomy and demonstrating medical dominance through the unveiling of the body itself. Furthermore, these images reinforce Laqueur’s assertion that the one sex model was contested by ‘a biology of incommensurability’ in which the relationship between men and women was ‘one of difference that required interpretation’ (1990: 154). In addition to Maygrier’s comparison of male and female anatomies (Maygrier 1822[-27]: Plate II), these illustrations reveal how this interpretation took place, including how it reinforced wider ideologies of the female body.

Conclusion

Examining representations of pregnancy reveals how established ideologies of the maternal body and female fertility were appropriated and incorporated into medical and literary discourses. These ideologies also represent a variety of ways in which pregnancy was regulated, reflecting pronatalist rhetoric and changing medical technologies and approaches. Firstly, women’s social and familial role was presented as altered from the moment of conception, as both medical and literary texts represent transformations from sexualised lover or wife to devoted mother. These transformations reprioritise women’s reproductive capabilities and argue that female sexual desire and maternity are mutually exclusive. Literary authors equally demonstrate the dialectic between these two roles, and illustrate the

²⁰⁷ See McGrath (2002: 38-62).

negative consequences for women who are unable to fully embrace their new role or resist the abandonment of their sexual role.

Alongside recommendations for wholehearted concentration upon the health of the foetus, these same texts emphasise the mental instability of pregnant women, reconfiguring eighteenth-century imagery of the unstable maternal body to highlight the irrational and unsound behaviour possible during this period of bodily and mental transformation. Indeed, this imagery is also manifested in representations of the pregnant stomach. However, whereas previous imagery of the 'leaking' or unstable maternal body highlighted the opaque contents of the stomach and the need for medical interpretation, the nineteenth-century representations mark a shift in focus from the contents of the stomach to its external boundaries. As evident in a multitude of literary examples, the expanding pregnant stomach elicits anxiety and repulsion, accompanied by imagery of unstoppable expansion and a lack of bodily control. This breaking of corporeal boundaries is associated with a transgression of other boundaries, namely those of social respectability, linking a lack of bodily control with a lack of moral or financial control, as is evidenced by anxieties over illegitimate pregnancies and even shoplifting.

In addition to the expanding boundaries of the fecund body, these same sources illustrate anxiety over its absorptive qualities. The eighteenth-century opacity of the stomach is transmuted into an equally suspicious zone for concealment of goods, whilst the emotional 'sensitivity' of pregnant women and link between mother and foetus is appropriated by medical discourses to justify restriction to the domestic space. As will be examined in the next chapter, this restriction is part of a much broader trend of anxiety over women's increasingly public presence. However, this emphasis on women's absorptive qualities not only regulates their movement within society, it also continues to place emphasis on the boundaries and margins of the female body, as it questions the connectivity between mother and foetus, suggesting a lack of emotional resilience which would allow harmful emotions to 'pass through' the maternal body to the child within.

This focus on physical, mental and social boundaries can finally be summarised in representations of the regulation of the pregnant body. Representations of corsetry illustrate how the dangers of the corset and recommendations of bodily freedom become tempered with anxieties surrounding the threatening expansion of the stomach. Endorsements of

pregnancy garments signify attempts to strike a balance between threatening freedom and harmful restriction, representing medical involvement in women's clothing whilst reinforcing notions that the maternal body required support and physical regulation. Indeed, medical adoption of these ideologies of the maternal body are encapsulated within medical illustration, embodying the change from the opaque body of the eighteenth century to the anatomical transparency made possible by new medical and surgical technologies. The trends of representation found within anatomical imagery illustrate how the maternal body became a contested site, penetrated and immobilised by the medical gaze, yet inevitably continuing to symbolise the female body's erotic and sexual value. However, all of these images reveal a particular medical focus on unveiling, revealing and understanding the bodily changes of pregnancy.

This focus on external boundaries and the need for regulation can be linked to the broader trend in limiting, regulating and controlling female fertility and the maternal body, which, as this thesis argues, is situated in a much broader contemporary obsession with regulation and boundaries. These representations of the pregnant body provide an explicit example of how this focus on regulation became inscribed upon ideologies and representations of the maternal body, particularly as it demonstrates how transgression of societal norms became translated into bodily transgression and indiscretion. Furthermore, as this chapter has shown, these ideologies were not just a source of literary inspiration, they permeated a broad range of sources, including medical, popular and even visual media, illustrating the pervasiveness of these methods of regulating the maternal body.

Chapter Five.

Breastfeeding, Wet-Nursing and the Public Breast

Introduction

Surrounding the breast's biological function of producing milk for the nourishment of offspring, breastfeeding and its encouragement, obstruction or prohibition is inevitably shaped by political, medical, cultural and philosophical factors. Amongst other things, breastfeeding is designated as a practice which is subject to contemporary notions of 'the good mother' (Otomo 2014: 227), notions which are correspondingly shaped by broader discourses. To study breastfeeding in a specific historical epoch is not only to examine scenes of nursing; it is to study representations of breasts, lactating or dry, to study milk, human or animal, and its omission or retention. Furthermore, it is to study how medicine, society, politics and culture treat and discuss these various elements. Through the language, metaphors and associations accompanying discourses of milk, it 'acts as a spectrometer – an apparatus that can reveal to us the defining characteristics of an epoch' (Jackson and Leslie 2017: 63). Representations of breastfeeding practices, including wet-nursing and artificial feeding, reveal patterns in how the maternal body was employed and instructed to nourish its offspring. As a liquid emission from the body, the ways in which this 'leakage' was directed, diverted and retained also reveals broader socio-political goals.

There are, unsurprisingly, many studies which examine breastfeeding, wet-nursing and the meanings and ideologies attached to the lactating breast. Broader studies examine representations of the breast from antiquity to the present (Fildes 1986; Maher 1992; Yalom 1997) and the importance of the Virgin Mary to ideologies of breastfeeding (Yalom 1976). In a broader European context, breastfeeding and wet-nursing in the nineteenth century has

also been well documented.²⁰⁸ Studies of wet-nursing in eighteenth-century France (Badinter 2010; Gutwirth 1992) are accompanied by those studying nineteenth-century practices which engage with the growing criticism of mercenary nursing.²⁰⁹ In addition to these historical studies, others draw upon medical and literary sources to contextualise the practice (Martin-Fugier 1978; Fuchs 1982 and 1984).²¹⁰ However, the most substantial study of the wet-nursing industry in nineteenth-century France is Faÿ-Sallois's examination of in-house nurses and the wet-nursing industry (1980).

In addition to studies of nursing in a specific era, milk's role as spectrometer attests to the mutability of both milk and the female breast. Assertions that milk is 'ever invented anew, socially annexed, fraught' (Jackson and Leslie 2017: 64), justify studies examining its production, use and representation (Jackson and Leslie 2017; Valenze 2011; Fanica 2000; Cohen and Otomo 2017). Notably, Yoriko Otomo's study of nineteenth-century breastfeeding and wet-nursing asks 'who controls the circulation of (*whose*) milk in our economies, and *how*' (2014: 227), linking the industrial, infrastructural and national regulation of milk with that of the individual (Giles 2002 and 2005). In a French context, Gal Ventura (2018) studies breastfeeding in art whilst also drawing upon contemporary manuals and medical sources.²¹¹ Building upon Baguley's (1973) work on *Fécondité*, other authors have dedicated short studies to the novel's idealisation of breastfeeding (Malinas 1986) and its relevance to contemporary colonial politics (Mayer-Robin 2006; Seillan 2001). In an analysis of Zola's *Germinal* (1885), Hennessy also interprets scenes of breastfeeding, arguing that the animality of the nursing mother contributes to the broader representation of motherhood in Zola's work (2006: 78-81). Therefore, although *Fécondité* and *Germinal* have received some literary analysis and contextualisation, they have not yet been analysed within

²⁰⁸ See Shorter (1976) and Robertson (1995) for a European perspective, whilst Haustein and Frevert provide more localized studies of the practice in Germany (2017 and 1984: 333-38). In Britain, Fildes examines the decline of wet-nursing between 1900 and 1914 (1988: 190-241).

²⁰⁹ Although Badinter's study of maternal instinct predominantly focuses on the eighteenth century, she makes several pertinent references to nineteenth-century pronatalist physicians such as Dr Brochard who will feature heavily in this chapter. Sussman provides the most comprehensive of these studies, with a detailed historical analysis of the decline of the wet-nursing industry towards the beginning of the twentieth century, drawing upon contemporary statistics and evidence to explore different theories surrounding the decline (1980 and 1982). Alongside these works, Rollet and Romanet provide smaller studies which focus on more specific practices or areas in which mercenary nursing was employed (1978 and 2013) and Sohn (1996) illustrates how nursing practices varied across the country.

²¹⁰ Notable to these studies is Fuchs' examination of how women interacted with medicine, social reformers and the welfare state in nineteenth-century France (1984).

²¹¹ Ventura (2015) also examines nursing in Édouard Debat-Ponsan's *Avant le bal* (1913), illustrating how women's clothing and fashion reflected nursing practices.

the broader context of late nineteenth-century medicine. They will therefore benefit from further analysis, aligning these representations with wider discourses of economy and flow, as suggested by Jacques Noiray (2015), who draws compelling links between imagery of milk and other ‘fleuves’ found throughout Zola’s work.

In addition to these texts by Zola, the controversial impact of the wet-nursing industry resulted in a myriad of literary representations of wet-nurses and mothers who embraced or rejected breastfeeding. As will be examined in this chapter, the villainisation of the wet-nurse is a common trope in nineteenth-century literature; Emma Bovary’s exploitative nurse being a frequently cited example (Flaubert 1856). Nevertheless, towards the end of the century, as physicians ramped up their pronatalist rhetoric, so did literary authors, producing novels such as Paul Bru’s *Le Droit d’être mère* (1901), Alexandre Hepp’s *Le Lait d’une autre* (1891) and Strauss’s *L’Enfance malheureuse* (1896), in which maternal or mercenary nursing forms the central plot. Sussman argues that, whilst canonical nineteenth-century writers mostly condemned wet-nursing, popular literature and journals were more neutral or sympathetic (1982: 101). This is true to an extent, as several of these popular novels, as well as others such as Ernest Daudet’s *La Nourrice: monologue* (1884), Eugène Brieux’s *Les Remplaçantes* (1902) and Pierre Hamp’s *Nounou* (1917) show sympathy towards wet-nurses. However, this chapter will argue that these sympathetic portrayals present these individual nurses as *the exception to the rule*. They illustrate an example of an honest wet-nurse, surrounded by many more who are unsanitary, exploitative and generally villainized. Therefore, authors appear to only show sympathy to wet-nurses in order to create a victimised portrayal of a seduced or exploited woman, whilst continuing to villainise the wet-nursing industry and perpetuate pronatalist rhetoric of maternal breastfeeding.²¹²

This rhetoric originates in political and medical pronatalist texts which were often converted into popular guides or pamphlets for women. In contrast to taboo topics such as contraception, abortion and sterilisation, the public visibility of mercenary breastfeeding permitted a vast array of publications, particularly short popularised works on the topic, aimed directly at mothers.²¹³ However, the quantity of publications is deceptive, as the

²¹² Although literary, medical and popular representations of wet-nurses are predominantly negative towards the end of the nineteenth century, many artists continued to idealise this figure, particularly those in a rural setting (Ventura 2018: 216-25).

²¹³ For example, *Conseils élémentaires donnés aux mères et aux nourrices*, published in 1898 by the Administration du bureau de bienfaisance de Lille (ABBL) contains concise and simplified advice in twelve

majority reference and rely heavily on the work of a small group of physicians such as André-Théodore Brochard, Eugène Bouchut, Alfred Donn  and Jean-Baptiste Fossangrives. Additionally, these texts are almost exclusively aimed at an upper or middle-class readership. Although several pamphlets, such as Brochard’s *L’Ouvri re m re de famille* (1874a), exclusively discuss working-class maternity, they aim to instruct an upper-class readership on how to engage with, and improve the lot of, working-class mothers. Despite their readership, these texts nevertheless aspired to reach and influence working-class women. However, notwithstanding the similarity of this * uvre* and its dependence on a smaller group of canonical works, its size illustrates the active efforts made to influence women’s nursing habits, and, as this chapter will seek to explore, reveals how they perpetuated and concreted medically sanctioned ideologies of maternity, nursing and the role of the breast.

These medical texts, published towards the end of the nineteenth century, can be linked to contemporary shifts in disciplinary power, wherein the focus on controlling the individual coincided with attempts to control the broader population (Foucault 1997: 215-16). As argued by Hausteine in a German context, the practice of breastfeeding ‘sits at the pivot between both technologies of power’ (2017: 51), as it involves the health of the individual infant and the health and future of the entire nation. As will be explored in this chapter, attempts to influence nursing practices of the individual through medical pamphlets, the welfare system and cr ches coincided with broader legal changes and a constant emphasis on the depopulation crisis, drawing attention to the ‘health’ of the nation.

Through this lens, this chapter will argue that the proper, or improper usage, distribution and economy of milk is central to the functioning of disciplinary power during this specific historical period.²¹⁴ This emphasis on circulation, and its impact upon the health of the individual and the nation, can be linked to Kukla’s assertion that in the nineteenth century, medicine was preoccupied with ‘the search for principles for detecting and distinguishing between orderly and disorderly maternal bodies’ (2005: 95). As examined in previous chapters, medical discourses on the female body continued to reinforce classical notions of the fungibility of bodily fluids, the notion that liquids such as blood, milk and pus could be

pages, and Brochard’s *L’Art d’ lever les enfants* numbers twenty-nine pages. See also Bachelet (1877) and Bourgeois (1883).

²¹⁴ The use of economy here refers to both the rationing of (and prudence with) milk, and its value as a financial resource.

changed into one another and emerge from the body in a variety of ways.²¹⁵ This fungibility is accompanied by a repeated emphasis on the instability and ‘leak-ability’ of the female body, a concept that implicates breastfeeding as a form of ‘leakage’.²¹⁶ As stated by Giles:

Milk is wet. It is prone to gush at inopportune moments. Worse still, it is not only StuffThatComesOut, it is StuffThatGoesIn as well, and in a sexually suggestive manner that rocks against the cradle of the incest taboo and the fear of the sexualised mother. (2002: 10-11)

The reciprocal emphasis on movement and transmission of fluids draws upon Law’s approach to fluids in the Victorian novel (2010), specifically the examination of how literary texts represent the contemporary preoccupation with bodily fluids, particularly milk. As this chapter hopes to demonstrate, the regulation and control of this flow of milk, on an individual, national, spatial and metaphorical level, can be perceived as an attempt to enforce disciplinary power and reveals how political, medical, literary and artistic engagement with nursing reflected broader concerns surrounding the regulation of fluids and the management of bodies.

This chapter also aims to examine how representations of female nursing, lactating breasts and other forms of infant nursing were influenced by new political pronatalist and medical rhetoric. It will ask how this rhetoric adopted and transformed existing perceptions towards nursing, adapting historically embedded beliefs to suit nineteenth-century medical technologies and social change. Specifically, in its analysis of literary texts, it aims to interrogate how representations of communal or individual nursing illustrate fantasies of power or control over milk, in addition to examining representations of the maternal breast, drawing attention to complications arising from its erotic value and the threat of venereal disease, and linking these representations to women’s circulation and the breast’s nudity in public places.

²¹⁵ As previously cited, this concept is examined in an eighteenth- and nineteenth-century context by both Duden (1991) and Kukla (2005).

²¹⁶ Valenze comments on the use of milk by Hippocratic healers to correct the ‘incorrect’ flow of the female body (2011: 23).

Breastfeeding in Nineteenth-Century France

Although practiced since antiquity (Fildes 1988; Yalom 1997), in nineteenth-century France, maternal nursing, the use of wet-nurses and various forms of artificial nursing were deeply embedded as traditional and social practices. However, in this period, these traditional practices gained ‘une ampleur et une signification nouvelles’ (Faÿ-Sallois 1980: 13) due to broader demographic, medical, cultural and social changes. These changes show similarities and differences to nursing practices and imagery found at the end of the eighteenth century, a time in which femininity and maternity had been altered by revolutionary and republican ideologies.²¹⁷ A decline in wet-nursing at the end of the eighteenth century (Shorter 1976: 183; Sussman 1982: 101) was accompanied by the uptake, and almost cultic popularity, of maternal breastfeeding, particularly in the upper classes (Duncan 1982; Miles 2008; Ventura 2018: 8; Yalom 1997: 114). This is epitomised in Rousseau’s *Émile* (1763) which continued to influence notions of the maternal body and nursing well into the nineteenth century.²¹⁸ Rousseau’s investiture of nursing with civic importance contributed to republican symbolism of the lactating woman, leading to the figure of Marianne in 1850, an icon explicitly linking the maternal breast with patriotism and republican ideology (Yalom 1997: 122-23).

However, while Kukla asserts that Rousseauian notions of maternal nursing were solidified during the nineteenth century (2005: 93), Gutwirth contends that ‘the subject lost its political importance and [receded] into conduct books for the consumption of a mainly female audience’ (1992: 365). Specifically towards the end of the century, Rousseau’s notions of the nursing mother appeared to fall out of favour and Ventura argues that this unpopularity was due to the breastfeeding debate shifting from the philosophical domain into that of medicine, a move which was reinforced by the Pasteurian revolution in the second half of the century (2018: 77).²¹⁹ This shift to medically sanctioned breastfeeding became increasingly influential towards the end of the century, as the practice became controlled by ‘(male)

²¹⁷ As demonstrated by Yalom, republican iconography of the breast presented breastmilk as a source of political, cultural and national regeneration. This emphasis on the regenerative properties of milk was translated into public policy, as the Committee of Public Safety made maternal nursing obligatory in 1793 (Fuchs 1992: 65; Faÿ-Sallois 1980: 220).

²¹⁸ Kukla traces the importance of this text and examines its popularity and influence within the cultural, political and philosophical context of pre-revolutionary and revolutionary France (2005: 29-61). See Jacobus (1995) for a study of representations of breastfeeding and the French Revolution.

²¹⁹ This shift is evident in Dr Brochard’s criticism of *Émile* in 1874, in which he argues that, although it indicates a philosophical ideal, Rousseau ‘ne soumit qu’aux exigences de la nature et oublia complètement les exigences de l’état social’ (1874b: 33).

experts and officials instead of being subject to the feelings of women and children' (Sichtermann 1983: 65).²²⁰ Despite its drop in popularity at the turn of the eighteenth century, wet-nursing continued to be practised by all social classes, as the wealthy employed in-house nurses and the bourgeoisie and artisanal and working classes sent their infants out to nurse in the countryside.²²¹ This popularity and a lack of regulation resulted in a high infant-mortality rate, leading to claims that employing a nurse tripled an infant's chances of death (Brochard 1867: 28) and descriptions of the industry as '[un] minotaure de la population infantile parisienne' (Brochard 1876b: 119).²²² The mortality rates in certain areas were so high that accusations were made that unwanted infants were deliberately sent to die, resulting in 'un infanticide avec préméditation' (Brochard 1874a: 138).²²³

Beginning in the late 1860s, the Académie de médecine increasingly encouraged a return to maternal nursing, particularly for the working classes and the poor, as a means of reducing infant mortality and increasing the health of infants by rejecting the dangers of the wet-nursing industry (Fuchs 1992: 62).²²⁴ However, the loss of the Franco-Prussian war in 1870 placed an even greater emphasis on infant mortality, and the decline in maternal breastfeeding was increasingly blamed upon decadence, depopulation and economic instability (Segay 1878: 9), alongside growing criticisms of the wet nursing industry.²²⁵ This criticism was partly founded upon statistics, which revealed the high mortality rate of infants in the care of wet-nurses. However, as will be explored in this chapter, it was also informed by medical and hygienic ideologies, industrialisation and changing gender roles. These criticisms eventually led to the creation of the Roussel Law in 1874, which aimed to

²²⁰ Ardenne argues that it truly began in 1865 when Dr Monot addressed the Académie de Médecine; 'un cri d'alarme' which warned of the dangerous impact of the wet-nursing industry on infant mortality (Ardenne 1881: 3).

²²¹ Fildes argues that, during the nineteenth century, France was the country which employed the greatest proportion of wet-nurses across all social classes (1988: 221 and 229).

²²² For example, Brochard documents the ways in which rural nurses extort money and gifts from parents through their letters, demonstrating that the practice was almost universal in the mercenary nursing industry (1874g: 183). This villainisation of wet-nursing is also omnipresent in literary and medical texts throughout the nineteenth century, as physicians and authors enumerated the ways in which wet-nurses deceived or exploited their employers. This form of exploitation is illustrated through the wet-nurse in *Madame Bovary*. Couvreur's *Le Fruit* also illustrates how wet-nurses seeking employment would prevent their nurslings from feeding, 'pour garder leurs mamelles lourdes, et pour tromper sur la générosité de leur sécrétion, les femmes nourrissaient à peine pendant le jour, et réservaient le gavage pour le soir' (1906: 34).

²²³ Also present in Brochard (1866: 73) and Brochard (1876a: 356).

²²⁴ With the exception of Donnés' seminal work (1837), the 1860s mark the start of the proliferation of medical documents advocating maternal breastfeeding and denouncing the wet-nursing industry.

²²⁵ See Monot (1872: 37-38), *Dictionnaire encyclopédique des sciences médicales* (1874-89: 394) and Delore (1870).

institutionalise and reduce the wet-nursing industry, regulating the practice of nurses and requiring every child placed with a nurse to be registered. As will be examined in detail later, this law was also accompanied by increased surveillance of maternal nursing through changes to social welfare and the growing popularity of crèches.

Therefore, links can be drawn between the glorification and promotion of maternal nursing at the end of both the eighteenth and nineteenth centuries. As this chapter will explore, there are similarities between imagery of the regenerative powers of breastmilk and the glorification of the nursing mother. However, whilst eighteenth-century nursing embodied political and philosophical ideologies of renewal and victory against the internal threat of the Ancien Régime, nineteenth-century anxiety surrounding nursing was based upon the external threat of military invasion and internal threats of degeneration, bolstered by revelations of germ theory and new puericultural regimes.

Regulated Nursing

‘Devoir’ of Maternal Breastfeeding

The external and internal threats of invasion and depopulation engendered concerns around the future of the French nation, resulting in discourses which discussed maternal nursing in terms of its national and civic importance. Rather than associating breastfeeding with natural instinct, concentrating upon the bond between mother and infant, nineteenth-century texts emphasise that maternal nursing was a civic and social ‘duty’ which impacted France as a whole.²²⁶ This shift from a rhetoric based upon natural instinct to civic duty can be linked to the rising power of medicine in nineteenth-century France. Whilst natural, maternal instinct relied upon and endowed women with individual agency, civic duty placed control in the hands of the State and medicine. This notion is evident in an 1875 political report on breastfeeding: ‘L’allaitement doit leur être présenté, non comme une concession à un

²²⁶ Some exceptions to this are found in Brochard who comments that women who are medically unable to breastfeed are ‘deshéritées de la nature’ (Brochard 1867: 44). However, when drawing upon rhetoric involving ‘natural’ discourses, Brochard links them to religion, stating that nursing is ‘une fonction destinée par le Créateur’ and referring to the ‘punition’ and ‘châtiment’ of women who reject nursing when physiologically able (1874a: 3). Therefore, even when drawing upon images of natural or instinctive breastfeeding, Brochard appears to be referencing nursing as advocated in the Bible.

sentiment humanitaire plus ou moins banal, mais comme un devoir strict, impérieux, inévitable' (n.a. in Brochard 1875d: 150).²²⁷

This notion is not exclusive to France, as Haustein has commented that in Germany and other European countries, 'the act of raising a child was increasingly seen to be an expression of national 'duty'' (2017: 50). However, France's military losses, concerns over depopulation, and theories of degeneration propelled this rhetoric to the forefront of maternal discourses. Through this lens, breastfeeding was presented as one of, if not the most, important, means of improving the economy, morals, health and military standing of France. Breastfeeding was presented as 'le plus solide rempart de la moralisation, du rétablissement des liens de la famille et de la société toute entière' (Caron 1873: 2). Texts also emphasise the moral hazards for women who did not breastfeed, particularly in the working classes, implying that this would result in adultery and immoral habits (Brochard 1874f: 153). This rhetoric is found throughout contemporary medical texts, as almost all medical authors link maternal nursing with the notion of 'devoir'.²²⁸ It is also evident in literary texts. In Zola's *Fécondité*, as the protagonist Mathieu farms and agriculturally cultivates, his wife Marianne's breastfeeding is presented as the equivalent female duty, to be carried out for the good of the nation. Indeed, the undoubtedly intentional nomenclature of the novel's female heroine implies her civic devotion to breastfeeding through reference to the figure of Marianne as the embodiment of the French republican values.²²⁹ Just as *Fécondité* reinforces women's civic duty to nurse their own child, texts imply that those who avoid this duty for financial gain are 'un-civic', as one character in Hepp's novel asks: 'quelle faiblesse, quel vice, ou seulement quel malheur les poussent à remplir le devoir d'une autre?' (1891: 25).

These trends indicate changing gender roles, as evident in political discourses: asking 'quelle est la mission de la femme?', Boucher de Perthes argues that her role in the continuation of the species extended beyond simply giving birth to children: 'Il faut les allaiter, les soigner, les élever. Telle est la tâche de la femme' (1860: 7). Those women who did not fulfil these

²²⁷ This shift from individual to national control can also be linked to contemporary criticisms of capitalism and individualism, and is present in proto-feminist discourses. Hubertine Auclert argued in 1885 that France needed to reject 'L'État Minotaure' in which the state devoured its citizens, and embrace 'L'État mère de famille' which was charged with caring and nurturing all of its citizens (In *La Citoyenne* 1885: 1).

²²⁸ Some other examples of this link are Béclard (1852: 28), Caron (1859: 195) and Halmagrand (1867: 16).

²²⁹ See Hemmerle for an overview of how imagery of the bared breasts in the figure of Marianne has varied throughout history (2014: 134-35).

later duties were designated as ‘les demi-mères’ (Caron 1859: 52).²³⁰ This notion, associated with patriotism, becomes imbued with military associations as authors assert that maternal nursing is ‘le vœu de tout citoyen dévoué à son pays’ (Brochard 1875a: 52). Reflecting France’s military defeat against the Prussian army, links were increasingly made between maternal nursing and conscription, as evident in Brieux’s play *Les Remplaçantes*, in which the title associates men who would pay others to fulfil their military conscription with women who paid wet-nurses to breastfeed their children.²³¹ These links emphasise the role of infants as the future ‘pivot de la famille, les soutiens de la nation, les défenseurs de la patrie’ (Caron 1859: 195). This shift from natural instinct to the repeated emphasis on women’s civic duty reveals how maternity moved from the philosophical domain into the jurisdiction of medicine. It also illustrates the increased regulation of motherhood, and in particular breastfeeding, in which inherited cultural practices were discouraged and replaced by medically approved methods of nursing. The emphasis on civic duty can be perceived as a tool of ‘biopower’ in which pronatalist techniques were normalized and prescribed for all social classes. Comparisons between maternal nursing and conscription reinforce notions that the state could control the ordering of bodies, whether male or female, and direct their distribution and usage on both an individual and national level.

Maternal Regulation and Ownership of Breastmilk

These concepts of maternal nursing, present on a national and collective scale, were also enforced at an individual level. Specific changes to maternal practices included the abandonment of swaddling and the rejection of bottles that allowed the infant to feed unsupervised.²³² For maternal nurses, physicians insisted on nursing ‘on demand’, involving breastfeeding the child every one to two hours; a practice entirely incompatible with the lifestyle of socialite mothers who attended balls, dinners and the theatre (Béclard 1850:

²³⁰ Fuchs also traces how some socialists such as Sicard de Plauzoles advocated a return to obligatory maternal nursing, arguing that the government should pay nursing mothers an indemnity for their performance of a civic duty (1992: 65).

²³¹ Gerbaud also refers to a wet-nurse as ‘la remplaçante’ (1902: X).

²³² The ‘English Bottle’ design, in which the bottle was attached to a long tube through which the infant drank, allowed a child to feed unsupervised, but was unhygienic and difficult to clean effectively. This design is criticised heavily by Brochard, who argued that it was designed ‘pour favoriser la paresse de l’élèveuse’ (1874h: 7). In the 1890s, this design was replaced by shorter glass bottles with short nipples, which were easier to clean but required constant supervision and aid for the child to feed (Fuchs 1992: 134).

32).²³³ This incompatibility was reinforced by the design of clothing which made it impossible for most women to nurse in public. The decision to nurse one's own infant therefore meant almost constant seclusion in the house for the first one to two years of the child's life (Ventura 2018: 48 and 21). Although hygienic improvements to bottles and on demand nursing were undoubtedly important in reducing infant mortality, these changes also demonstrate an increase in maternal supervision, preventing women from working or continuing their social lives whilst raising an infant. As suggested by Otomo, these changes not only limited women to their homes and made it impossible for them to pursue social activities, they also served to 'suppress their individual rhythms in favour of an externally determined set of norms' (Otomo 2014: 221) by which women were expected to self-regulate.²³⁴ As has already been examined in Chapter Four, these changes can be seen as attempts to restrict women to the domestic space, as well as legitimising medical entry into the home through prescription of medical techniques and apparatus, illustrating efforts to normalise these practices so that women would self-discipline. Specifically, instructions to nurse at set intervals demonstrate medical attempts to control women's flow of milk; a flow which becomes controlled by the physician, rather than dictated by the mother's lifestyle or the infant's needs.

These restrictions and limitations are justified through imagery of the mother who experiences pain or privation but is rewarded with maternal love or pride. Informing women that they must abandon their social lives to nurse, Dehous advises them: 'Vous en serez largement récompensée, jeune mère, par les compliments que vous recevrez de toute part sur la santé de votre nourrisson, qui sera ainsi doublement votre ouvrage' (Dehous 1861: 46). Literary texts equally represent nursing mothers enduring pain for their infants. In Bru's *Le Droit d'être mère*, the nursing Louise experiences cracked nipples yet experiences 'une sorte de volupté mystérieuse [...] pendant cette absorption lente de l'enfant (1901: 179). Similarly in Zola's *Fécondité*, vampiric imagery is present as Marianne's infant 'téta violemment, buvant toute la mère, jusqu'au meilleur de son sang' (1899: 229). As he nurses, '[Marianne] jeta un léger cri de souffrance, au milieu de son beau rire. –Ah! Le petit diable, il me mange,

²³³ Some examples of texts which advocate this approach: ABBL (1898: 4), Bourgeois (1883: 49), Brochard (1874a: 7) and Brochard (1877: 4).

²³⁴ Brochard also uses women's physiology to argue that humans are designed to nurse while holding and supervising their infant, in contrast to the placement of teats on animals which require no active engagement with offspring (1874h: 2).

il vient de rouvrir ma crevasse!’ (1899: 229). As with the first example, the mingling of a cry of pain with laughter presents the suffering of breastfeeding as offset by joy. In both examples, imagery of the infant draining the mother, and having the right to do so, reinforces notions that the mother must give herself entirely to the infant.

These discourses and representations of nursing also highlight contemporary debates around the ownership of breastmilk. As noted earlier, Giles reminds us that milk is both ‘StuffThatComesOut’ and ‘StuffThatGoesIn’ (2002: 10-11); so does this bodily fluid belong to the producer or the consumer? Cohen and Otomo emphasise that ‘milk is one of the few foods produced for *others*’ (2017: 1) and it is this ‘consumer’ that prompts discussion around ownership. This possession endows the power to dictate how milk is used and distributed, making it of key importance to maternal discourses. Law asserts that breastmilk is ‘at once the most intimate and personalised of substances [...] and yet at the same time an essential element of social reproduction whose value as a collective resource justifies regulatory intervention, or at least fantasies of such’ (Law 2010: 11). This perspective suggests a struggle or dialectic over the ownership of milk, yet, of all the sources used in this study, no literary or medical text implies that breastmilk belongs to the woman who produces it, to distribute as she sees fit.

Several texts suggest that milk belongs to the infant consumer and Fuchs has identified that, during the latter half of the nineteenth century, the Académie de médecine promoted ‘the right of an infant to his mother’s milk and her duty to provide it’ (1992: 62). Luling writes that ‘le lait de la mère appartient à l’enfant’ (1901: I) and in several literary texts this ownership is also emphasised. In Brioux’s *Les Remplaçantes*, the protagonist Lazarette rebels against pressure to become a wet-nurse: ‘Je ne pourrai pas soigner une autre enfant, un enfant que je ne connais point. [...] Je me ferais l’effet d’une voleuse... oui... pour moi... je vendrais quelque chose qui n’est pas à vendre, qui est à lui, et pas à moi.’ (1902: 44). The commercialisation of breastmilk is presented as theft of the infant’s rightful ownership. However, this literary description also emphasises that breastmilk is not owned by *any* infant, but *only* the child of the lactating woman. These discourses present a clear rejection of the wet-nursing industry and promotion of maternal nursing. This distinction and exclusivity is also evident in representations of Caritas (Charity) at the end of the nineteenth century. Historically, and particularly at the end of the eighteenth century, Caritas was commonly

portrayed as a woman nursing several infants of different races, glorifying the notion of nursing another's child and nourishing the entire nation (and its colonies). However, as noted by Ventura, by the end of the nineteenth century, to reflect medical and political rejection of wet-nursing and the promotion of maternal nursing, these representations largely ceased and returned to alternative allegories of charity (2018: 190).

Alternate representations present breastmilk as belonging to the State or medicine, as already implied in representations of maternal, civic duty. Even when breastmilk belongs to the infant, Brochard asserts that 'les nourrissons appartiennent à leur famille, cela est vrai; mais ils appartiennent aussi à la société et l'Administration' (1867: 67). Sources reinforce medical dominance of milk through representations of wet-nurse inspections. Indeed, almost all medical texts on breastfeeding contain advice on how to choose a nurse and methods for testing their milk. In addition to examining nurses' breasts, physicians would also express some milk and examine it (Martin-Fugier 1978: 18), often with special equipment such as portable lactoscopes and lactometers (Béclard 1852: 35-36). This is represented in Zola's *Fécondité*, where Dr Boutan examines a nurse's breasts: 'le développement de la glande, la forme du mamelon, la quantité et la qualité du lait. Il en avait recueilli quelques gouttes dans sa main, il le goûta, alla le regarder au grand jour' (1899: 285). Daudet's *La Nourrice, monologue*, which narrates (from a male author's perspective), a woman's experience of becoming a wet-nurse, also presents the male manipulation of milk and her embarrassment during the inspection:

Quand je compris ce qu'il voulait, le sang me monta aux joues. [...] Mes mains tremblaient sous mon fichu dénoué et je ne sais guère comment il se fit qu'entre mes doigts, un jet de lait, sorti de mon sein gonflé, alla mouiller les lunettes du médecin. (1884: 8-9)

The doctor reacts to this situation, laughing: 'C'est une fontaine, cette petite femme' (1884: 9).

In a similar example from Couvreur's *Le Fruit*, Doctor Bouret and his companion Colinière, examine a particularly productive wet-nurse: 'Cette prodigalité de la nature devint plus évidente encore quand Bouret, ayant pressé le bout des seins, fit gicler un jet de blancheur jusque sur le vêtement de Colinière' (1906: 36). The similarity between both texts, in which the female body is 'overflowing' with excess milk and is unwittingly manipulated to produce

a sample, reinforces the concept of the leaking female body, in which the woman is presented as having no control over her own emissions. Contrastingly, the physician is portrayed as in control of the nurse's body and is able to make the internal become external and visible for medical examination. These male fantasies of control over both liquids and the female body situate these representations within the medical (and male) desire to appropriate and control the emissions of the female body. However, the mirrored incident in both texts in which this omission errantly splashes the doctor demonstrates remarkably similar imagery of semi-sexualised ejaculatory bodily fluid.

Nursing Supervision

These examinations of wet-nurses form part of a much broader fixation on the supervision of nursing in the working and rural classes, specifically of those who were involved in the mercenary nursing industry. Despite criticisms of the number of women who used a wet-nurse, their importance as 'des agents essentiels de l'alimentation publique' (Vernois in Brochard 1867: 34) placed an increased emphasis on their influence on France's future, legitimising medical and state regulation and surveillance.²³⁵ However, this supervision is only one half of the paradox at the centre of nurses' lives. Whilst an in-house nurse's employment led to the complete control of her body and lifestyle by her employer, her importance empowered her and gave her sway over the household. This paradox and its representations can be viewed within political and medical attempts to control and regulate breastfeeding and breastmilk, as physicians argued that the only way to counter infant mortality was '[la] surveillance' (Brochard 1867: 15).

Throughout the latter half of the century, medical texts on breastfeeding repeatedly reiterate the importance of supervising and inspecting wet-nurses, whether in-house or in rural locations. Surprise visits to rural nurses were recommended to reveal the nurse's true care and any abuse or neglect (Brochard 1873a: 26; Degoix 1894: 43; Malin 1887: 71).²³⁶ However, due to the difficulties of visiting, most authors recommended that wet-nursing

²³⁵ This surveillance, alongside an abandonment of swaddling, new bottle designs and regulated nursing practices, is identified by Badinter as representative of a period defined by an obsession with maternal watchfulness (2010: 175).

²³⁶ Zola's *Fécondité* traces these various abuses and forms of neglect in detail, including the unsanitary homes of many nurses (1899: 301-03).

should only be permitted ‘sous les yeux de la famille’ (ABBL 1898: 3). In this latter environment, physicians recommended constant supervision: ‘Une fois la nourrice introduite dans la maison, on ne saurait trop exercer sur elle une surveillance de tous les instants’ (Degoix 1894: 39).²³⁷ These incitements to constantly monitor the wet-nurse can be interpreted as fulfilling two functions. First, they represent attempts to pass on medically-sanctioned, upper-class methods of nursing and infant hygiene. Second, one of the appeals of employing a nurse was that a woman could maintain her social life. However, incitements for constant maternal supervision meant that women were as restricted as if they had been nursing themselves. Mothers were told that ‘une mère digne de ce nom ne doit jamais laisser sortir de son nouveau-né seul avec sa bonne ou sa nourrice’ (Brochard, 1874c: 54). These new discourses surrounding wet-nursing and supervision therefore represent a means of enforcing constant maternal care and restricting the mother to the domestic space, whether or not she nursed.

This surveillance of nurses was amplified in 1874 with the passing of the Roussel Law.²³⁸ This law established that each infant was the object of governmental surveillance in order to protect its health. This surveillance included the inspection of wet-nurses and a judgement of their care, in addition to limiting the number of nurslings cared for by an individual nurse.²³⁹ As argued by Otomo, the Roussel Law and its regulation of wet-nursing not only reduced the availability of wet-nurses, thus pressuring mothers into breastfeeding, it also justified the invasion of the state into the domestic home through its ability to inspect wet-nurses’ houses and punish those who refused such visits (2014: 220-21).²⁴⁰ These legal changes and accompanying medical advice emphasise how in-house nurses were controlled by their employers.²⁴¹ However, within these broader trends of regulation, there is a particular emphasis on controlling the nurse’s body through her diet, implying that ownership of the

²³⁷ Similarly, Cassine frequently reinforces the supervision necessary: ‘La nourrice doit vivre au sein de la famille et sous la surveillance incessante de personnes attentives à ses moindres faits et gestes’ (1894: 107).

²³⁸ See Martin-Fugier (1978: 30) for an examination of how the Roussel Law altered the wet-nursing industry.

²³⁹ Fuchs provides an overview of how rural wet-nurses were inspected (1984: 224-29).

²⁴⁰ The law was also accompanied by increased regulation of wet-nursing bureaus. See Sussman (1982: 118-19) for information on the inspection of municipal and private bureaus. Brieux demonstrates how the Roussel Law was abused by corrupt officials in *Les Remplaçantes*, as, when asked the age of her infant, a nurse replies ‘Il a deux ans, [...] mais je vous assure que le médecin ne s’en apercevra pas. M. le Maire me donnera un certificat disant qu’il n’a que sept mois’ (1902: 11).

²⁴¹ Despite this control, nurses were paid more than other servants, provided with spacious accommodation and an expensive diet, as highlighted by Martin-Fugier who states that they were ‘at once glorified and objectified, empowered yet dispossessed’ (1978: 20).

wet-nurses' milk equated to ownership of her body. As such, a nurse's diet was heavily controlled as 'chacun sait l'influence qu'exerce l'aliment sur la composition du lait' (Caron 1859: 58). Cassine argues that, unchecked, nurses would become gluttons, negatively impacting on the quality of their milk (1894: 101).

However, many texts suggest that nurses were empowered by their influence over the nurseling. Critical of this power, Donné advises women 'de ne jamais se laisser dominer par les nourrices' (1842: 130) and Desplace bemoans that in wealthy houses 'la nourrice sur lieu prend des habitudes de paresse, de gourmandise et de toilette. Dominant le père et la mère par l'enfant, il n'y a de limites ni à ses exigences ni à ses caprices' (1875: 32). In *Fécondité*, one nurse becomes 'la reine indiscutée de la maison' (Zola 1899: 316) as she 'trôna, les autres domestiques la servirent. Les maîtres furent à ses pieds. [...] On lui cédaient sur tout, pour ne pas la mettre en colère, ce qui aurait pu faire tourner le lait' (1899: 317). Equally, in Hepp's *Le Lait d'une autre*, the nurse 'avait la sensation de s'élever à une dignité, d'être vraiment supérieure, et là, dans cette chambre absolument maîtresse' (1891: 64). The irony of this statement is that she is in the same room as the infant's Baroness mother, who is somehow reduced by her rejection of nursing, elevating the nurse in her stead. Similarly, at the infant's baptism, the nurse is perceived by others as 'la nourrice glorieuse, l'héroïne véritable de ce jour lustral' (1891: 87). Nevertheless, this glorification is presented as temporary and threatening, as the novel traces how the nurse carves out a place of influence and power within the family, displacing the mother and clashing with the father as they compete for the child's affection. The superficiality and impermanence of this power is reinforced as she is referred to throughout the book as 'l'étrangère'. Other texts, such as Brioux's *Les Remplaçantes*, trace the financial implications of this form of women's industry, as nurses became the chief earners of rural households, permitting the husband to lead a life of leisure. However, once contracts had come to an end, studies such as those by Chalandre demonstrate that nurses would have become accustomed to a lifestyle and diet which was not affordable on their return home (2017: 171). Therefore, despite their increased financial autonomy, this wealth was not sustainable and often led to eventual financial ruin.

Overall, representations of wet-nursing indicate drastically increased levels of supervision and surveillance, in which the State and medicine attempted to control the practice of mercenary breastfeeding either through direct inspection of wet-nurses and legal restrictions,

or through the intermediary of middle and upper-class mothers. The inevitable power and influence attributed to the wet-nurse is presented as threatening to the infant and the broader family, as parents were encouraged to control as many elements of the nurse's lifestyle as possible. Although a few representations show the empowerment of nurses, this empowerment is often presented as short-lived. The combination of control and eventual dispossession identifies the employment of a wet-nurse with 'une sorte de vampirisme pratiquée sur son corps par la société bourgeoise' (Martin-Fugier 1986: 20).

Crèches and Social Welfare

Whilst upper- and middle-class women were encouraged to breastfeed through references to civic duty, and wet-nurses were supervised to ensure compliance with medically sanctioned nursing practices, working-class women were more difficult to influence. Wealthy women could be reached through publications and the advice of a family doctor, wet-nurses through legal restrictions and the instructions of their employers. If nursing themselves, working-class women were often too poor for medical advice, or if they worked, they commonly sent their infants out to rural wet-nurses. As these cheap wet-nurses were often the poorest, the rate of mortality was far greater for working-class infants, prompting national and medical interest in encouraging their mothers to nurse. This led to the establishment of a broad range of charitable and welfare-led institutions that aimed to encourage mothers to breastfeed their own infants, or facilitate their ability to nurse and work. Examining discussions and representations of these various institutions reveals how disciplinary power accessed and consequently regulated the working-class maternal body.

Charities such as the *Œuvre de l'allaitement maternel*, which was founded in 1876, encouraged poor women to nurse by providing food and clothing, and in 1892 they opened a refuge for pregnant women (Klaus 1993: 197). In 1891, the *Société Maternelle Parisienne* opened a Pouponnière that provided childcare for women who were unable to collect their child each day from a crèche.²⁴² In this establishment, infants were cared for whilst their mothers could visit two days each week (Fuchs 1992: 145). These infants were cared for by pauperess or unmarried nursing mothers who lived in the Pouponnière and breastfed their

²⁴² This format was particularly beneficial for women who worked in domestic service.

own child whilst nursing and bottle-feeding two other children (Fuchs 1992: 145; Klaus 1993: 197) a format which was complimented by contemporary writers as it allowed mothers to work as wet-nurses whilst retaining their own infants (Strauss 1896: 251-53). In 1898, for those women who were unable to nurse, the welfare bureau provided coupons for sterilised milk for children under two years of age and other agencies focused on keeping the mother healthy, such as the opening of *Cantines maternelles* in 1905, where women had to demonstrate that they were lactating to receive a free meal (Fuchs 1992: 134).²⁴³

To further encourage maternal nursing in the working classes, physicians sought to make the practice compatible with waged labour, lobbying in support of facilities which would prevent a working mother from sending her infant to a wet-nurse. These included maternity benefits, nursing breaks during a woman's shift, and the opening of crèches. However, despite the altruistic and charitable intentions of these facilities, the majority of proposals emphasised that medical supervision was essential to the projects' success (Klaus 1993: 195). Just as upper- and middle-class mothers were regulated by on-demand feeding, and wet-nurses were regulated by their employers, representations of crèches, maternity hospitals and refuges suggest that one purpose and goal of these establishments was the regulation of working-class nursing. For example, milk dispensaries, increasingly popular after the Pasteurian Revolution, were accompanied by medical observation, as infants were weighed and examined on each visit to confirm that they had received the milk and that it not been diluted with unsanitary water (Fuchs 1992: 147).²⁴⁴ These observations provided important contact between the physician and working-class women.

This regulation is represented in detail in Paul Bru's *La Droit d'être mère* which narrates the protagonist Louise's stay in a maternity hospital after giving birth. In this ward, the infants are kept away from their mothers except for at allocated nursing hours. The novel describes the rows of mothers: 'Assises ou demi-couchées, elles présentaient à ces petits êtres les mamelles gonflées de lait que pour leur permettre de respirer librement elles déprimaient avec les doigts' (1901: 177). This is followed by a detailed description of nursing:

²⁴³ See Leroy-Allais (1900) for a more detailed overview of charitable institutions and the support available for working-class women.

²⁴⁴ Physicians such as Pierre Budin held open clinics at hospitals for mothers to bring their infants, have them examined, and receive milk coupons (Sussman 1980: 230). This medical interaction can be seen in artworks such as Geoffroy's *L'Œuvre de la goutte de lait* (1903), which presents the work of Dr Variot at 'La Goutte de Lait' which provided needy children with sterilised milk on condition of their medical examination.

Usant la patience, la femme saisissait le mamelon entre l'index et le pouce, le rendait aussi saillant que possible, pressait sur le bout pour faire sourdre quelques gouttes de lait dans la bouche de l'enfant, qui instinctivement commençait à téter. (1901: 178)

This description refers to all the women, who undertake the same task simultaneously, creating imagery of a kind of mechanised nursing in which the women mirror the same techniques. This generalisation continues in a glorification of maternal nursing: 'C'était un tableau empreint de la poésie la plus haute que formaient toutes ces femmes, sans distinction de classes ni d'origine, toutes dispensatrices, donatrices de la vie à l'être faible, inconscient, suspendu à leur gorge' (1901: 178). Comparison to a piece of artwork glorifying the nursing mother, indicates the importance of breastfeeding to the national agenda and emphasises the regenerative power of these 'donatrices de la vie' who perform the civic duty of breastfeeding. Furthermore, the notion of 'toutes ces femmes, sans distinction de classes ni d'origine' reinforces contemporary pronatalist rhetoric that maternal breastfeeding should be practiced by *all* women, rather than being dictated by social class or wealth. However, through this glorification, the description wipes these women of individuality, reducing them to simple 'life-givers' who are latched onto by parasitic infants.

The medicalised regulation of nursing continues when the women have finished breastfeeding. The infants are returned to their cots and nurses pass around the ward: 'De lit en lit, elles passaient, nettoyaient, avec soin au moyen d'une compresse d'eau boriquée, les mamelons et les aréoles des femmes, enlevaient le lait coagulé et la salive restés après la tétée' (1901: 179). Here again, the concept of cleaning and sterilising the breast likens it to a piece of machinery. More specifically, representing bodily fluids of coagulated milk and saliva as out of place on the nipple warns of contamination and the wastage of bodily fluids. The women are not permitted to clean their own breasts, it must be done by a medically-trained professional in order to guarantee sterility. The lactating breast is thus objectified and de-humanised, separated from fallible woman and presented as a medicalised alimentary tool. This medical supervision is later emphasised during the daily inspection: 'Le Chef entrainait... Derrière lui, en longue théorie: les internes, la maîtresse sage-femme, la surveillante, la suppléante chargée des enfants, les nourrices, les externes, les stagiaires, les élèves sages-femmes' (1901: 180). Emphasising the hierarchy within the establishment, this procession also illustrates the range of ways in which the patients, in this case nursing

mothers, are supervised and regulated. Indeed, this scene as a whole illustrates how the maternal body was regulated, as enforcement of hygienic principles and regime is presented as mechanising and medicalising nursing without any real input or involvement from the mothers.

Indeed, these establishments are represented as more than a means of caring for and regulating working-class mothers. They are also presented as key to the transmission of hygienic and medical principles of breastfeeding. This is particularly notable for crèches, which permitted the observation of breastfeeding when mothers visited throughout the day to feed their infants. This observation allowed corrections to be made and hygienic rules to be applied, to such an extent that Rougier states that ‘pour la famille, la crèche est l’école professionnelle de la mère; elle y trouve, en effet, de bons exemples et de bons conseils’ (1884: 10). Similarly, Brochard asserts that crèches ‘enseignent à ces femmes l’hygiène du premier âge que presque toutes ignorent’ (1874e: 120). Through these methods, medicine could ensure that both mother and infant were protected and adhered to approved methods of nursing (Millet-Robinet and Allix 1884: 343). The charitable basis of crèches, which were either free or charged very little, also permitted the control of mothers’ nursing practices outside of the crèche. In order to maintain a space for her infant in the crèche, a mother ‘devra toujours se conformer, pour le régime qu’elle fera suivre à son enfant, aux instructions que lui donneront, chaque jour, la directrice et le médecin de la crèche’ (Brochard 1877: 29).

This concept illustrates how these practices were normalised and distributed through the working class. This circulation is also hinted at in the right-hand panel of Geoffroy’s triptych of *L’Œuvre de la goutte de lait* (1903) (Figure 17). Notable to this panel is the placement of the mother’s elder daughter, who observes with interest the dispensary of milk for her younger sibling. The object of both children’s gaze is the milk. For the infant, who reaches for the bottle, this emphasises its importance to her health, as the brightly lit dispensary and bottle is mirrored in the rosy glow of her skin and bright clothing. However, the keen interest in the process shown by the elder child illustrates the observance and transmission of medically sanctioned nursing, normalised and passed through the generations.



Figure 17: Geoffroy's painting of a woman receiving milk at *La Goutte de lait* clinic (Geoffroy 1903)

Strauss's *L'Enfance malheureuse* also traces the importance of these institutions, specifically the influence of a stay at an 'asile de convalescence', attended after a stay at a maternity ward. He traces how one of the key roles of these refuges was to educate working class women: 'Elles sont initiées aux détails d'une méthode neuve et simple, qui repose sur les pesées régulières et sur l'emploi, en cas de besoin, de lait stérilisé ou aseptique' (1896: 135) and the active role of the crèches in women's lives: it 'veille sur l'enfant, sur son hygiène, sa propreté, son alimentation, elle [la crèche] est pour la mère inexpérimentée une école d'élevage, un foyer qui la réchauffe et l'éclaire' (1896: 216). He asserts that despite the running costs, a crèche 'rend au centuple ce qu'elle reçoit en surveillance, en bonne hygiène, en direction médicale, en sollicitude désintéressée' (1896: 216). These medical, artistic and socio-political sources therefore present imagery of charitable and medical institutions as the means of transmitting new nursing practices to the working classes, in addition to permitting the

enforcement of these tenets through threats to withdraw assistance if they were not consistently applied.

Sources also emphasise the role of upper-class women in this process, suggesting that they facilitated the normalisation of medical discourses throughout the whole class system (La Berge 1991). The role of wealthy patronesses and *dames visiteuses* is well documented throughout nineteenth-century medical and literary texts, and several assert that in the creation of charitable institutions or aid: ‘C’est aux femmes qu’il appartient de prendre cette initiative’ (Millet-Robinet and Allix 1884: 344). Frevert argues that medical propaganda and new ideals on domestic and maternal hygiene only began to be successfully applied to the working classes when charitable institutions and *dames visiteuses* became involved in educating poorer women and passing on their medically approved practices (1984: 321).²⁴⁵ In fact, most of the successful charities or institutions relied heavily on female sponsors and almost always had a committee of ‘dames patronesses’ (Klaus 1993: 197). This new alliance between housewives and medicine was encouraged by propaganda that urged women to engage with and enforce hygienic and maternal principles within their own homes, as well as within their charitable activities (Frevert 1984: 320).²⁴⁶

Millet-Robinet and Allix discuss the *Société pour la propagation de l’allaitement maternel* saying that ‘des dames patronesses intelligentes et dévouées dans de fréquentes visites, s’enquière des soins donnés aux nourrissons’ (1884: 362). Interestingly, the authors argue that ‘un comité de dames patronesses constitue la partie la plus militante de la Société’ (1884: 363), emphasising that social influence is translated into authority on the application of maternal principles. This authority is emphasised by Leroy-Allais who repeatedly draws attention to the ignorance and lack of education of working-class mothers in relation to childcare, saying that ‘la directrice servira de trait-d’union entre les dames bienfaitrices et les mères pauvres’ (1900: 72). Despite signalling communication difficulties in this transmission of maternal discourses, this example juxtaposes the alleged ignorance of the working classes with the implied ‘knowledge’ and education of charitable ladies.

²⁴⁵ Klaus confirms that women’s role in the transmission of maternalist and pronatalist propaganda was vital (1993: 188).

²⁴⁶ Leroy-Allais identifies that upper-class women played a role in all forms of charity: ‘Il faudrait installer au cœur même des quartiers industriels une “permanence charitable” où les femmes de la classe supérieure se mettraient à la disposition des ouvriers pour les renseigner, les conseiller, les aider de quelque manière que ce soit’ (1900: 14).

Wealthy women's position and role as intermediary and the conduit between medicine and working-class women is particularly exploited by Dr Brochard in several of his works. He argues that if a nursing woman wishes to receive charitable aid: 'Elle doit surtout se conformer, dans l'éducation de son enfant, et avec la plus grande exactitude, aux conseils que lui donnent les dames patronnesses et les médecins de la Société' (1877: 29). In addition to this enforcement, women are encouraged to become involved in the distribution of pronatalist propaganda, as Brochard encourages his wealthier readership and, specifically 'les dames patronnesses des Œuvres de bienfaisance et de charité' (1877: preface), to distribute his *Art d'élever les enfants* (1877) to every mother, particularly those of the popular classes. However, the most notable of Brochard's work in this topic is *L'Ouvrière mère de famille* (1874a). Despite its sole topic of working-class maternity, particularly nursing, the text is not originally aimed at a working-class readership. Instead, it is aimed at instructing upper-class women, so they can better aid poorer mothers, opening with a preface addressed 'Aux Dames Patronnesses des Sociétés de Charité Maternel, des Sociétés Protectrices de l'enfance, [et] des Crèches' (1874a). After having read the text for themselves, Brochard instructs women to distribute it amongst the customers and recipients of crèches and charitable institutions. These women and their placement within these institutions is therefore exploited as a means of spreading pronatalist rhetoric and normalising maternal nursing amongst the working classes.

The positions of *dame visiteuse* are also presented as a means of glorifying and fulfilling a woman's maternal role. Brochard describes a wealthy charitable lady who is the president of a crèche in Paris. In the children's eyes 'c'est la sainte Vierge qui arrive, la bonne madame, la mère des petits enfants. Il faut entendre leurs cris de joie et de bonheur; il fait soleil dans la crèche; la charité vient d'y entrer' (1874d: 108). Literary texts emphasise that these roles also permit sterile women to participate in maternity and achieve the pronatalist idealisation of mothers. In Riche's *Stérile*, Renée, who has been unwillingly sterilised, becomes a patroness of a welfare centre, legitimising her involvement in maternal discourses (1890). Similarly, in Zola's *Fécondité*, the sterile Madame Angelin becomes an inspector for a charity which supports mothers (1899: 632) allowing her to assuage some of her maternal love.²⁴⁷ These

²⁴⁷ Madame Angelin is unable to conceive due to her employment of *fraudes conjugales* at the beginning of her marriage. See Chapter One for a study of these contraceptive practices.

texts therefore represent methods of practicing and enforcing maternal discourses, even when women were not mothers themselves.

These representations of nursing in the working classes indicate how the civic ‘duty’ of nursing was regulated and enforced at multiple levels. The observation of nursing mothers, as presented in crèches and charitable institutions such as asylums, hospitals and clinics, illustrates medical anxiety over the hygiene of women’s nursing practices. The examinations carried out in these institutions, such as the cleaning and inspection of breasts, as seen in Paul Bru’s *La Droit d’être mère*, and the testing of milk and weighing of infants in clinics, reveals the enforcement of new puericultural ideals, as charitable aid or care could be withheld for non-conformity. Finally, and perhaps most importantly, these institutions and the role played within them by wealthy women, demonstrate the normalisation of medically and politically approved nursing practices. As these practices were normalised in the upper classes, the role of *dame visiteuse* became key in continuing this normalisation. Through these changing practices, puericultural techniques and approaches filtered down the social classes and were enforced without the necessary presence of the physician, as women began to police each other.

Maternal Resistance

The above studies indicate the methods with which medicine, and through it disciplinary power, attempted to regulate nursing practices. However, as evidenced in the frequent medical and literary denunciations of women who ignored the new puericultural guidelines, there was significant resistance to these changes and an unwillingness to abandon established nursing practices along with the popular ideologies which accompanied them. Literary texts provide a wealth of examples in this respect, and perhaps provide a more balanced perspective of how nursing was perceived outside of pronatalist medical circles.

Since working-class and artisan mothers’ decision to breastfeed or use a wet-nurse was predominantly founded upon work and financial limitations, both medical and literary authors generally demonstrate sympathy towards this. However, middle and upper-class women who were financially able to nurse their children were heavily criticised for avoiding this ‘duty’. Many women, supported by their husbands, avoided nursing because they were

concerned about its effects on their figure.²⁴⁸ Pronatalist literary and medical texts contain attempts to alter this notion. Brochard states: ‘Les femmes qui nourrissent se portent, en général, beaucoup mieux que celles qui ne nourrissent pas’ (1874a: IX). Similarly, Zola’s *Fécondité* emphasises throughout that, despite her pregnancies and nursing, Marianne’s figure is unaltered and remains attractive. Indeed *Fécondité* also mirrors Lamarckian notions of heredity found in Brochard’s work, which suggest that, in addition to reducing a woman’s beauty, *avoiding* breastfeeding would physically damage her breasts, and those of her daughters: ‘Les qualités physiques qui permettent l’allaitement maternel se transmettent par l’hérédité comme les autres qualités physiques’ (Brochard 1874a: 14). In Zola’s novel, Dr Boutan similarly asserts that ‘après trois ou quatre générations de mères qui ne nourrissent pas, elles finissent toutes par dire la vérité, elles ne peuvent plus nourrir, la glande mammaire s’atrophie, perd son pouvoir de sécrétion lactée’ (Zola 1899: 275). Thus, to counter popular notions that breastfeeding would ruin a woman’s figure, these texts play into anxieties on the degeneration of the French race by implying that women’s breasts would be so affected by a lack of nursing that they would decay and cease to function, a characteristic that would be inherited by their daughters.²⁴⁹

In addition to fears over aesthetic alterations, literary texts and visual media also demonstrate a challenge to the social regulation of nursing mothers. The restriction to the domestic space required by nursing ‘on demand’ necessitated a complete abandonment of their social lives and pastimes, a sacrifice some women were not prepared to make: ‘On ne condamne pas une femme à cette servitude, on ne l’aime pas quand on lui demande cette immolation de sa jeunesse, de son être entier!’ (Hepp 1891: 16). However, other representations indicate that some women attempted to find a compromise and align their social activities with the role of nurse. Ventura provides one such example in her study of Édouard Debat-Ponsan’s *Avant le bal* (1886), in which an upper-class woman, dressed for the ball, nurses her infant before departing, observed by her husband and a nursemaid. Ventura’s study of this painting argues that the enthusiasm of bourgeois women for nursing reflected, by the turn of the century, ‘a new sense of femininity that shaped material commodities rather than being shaped by it, creating a sense of citizenship and public participation in a new society of taste’ (2015: 538).

²⁴⁸ For example, In *Pauvres petits enfants*, a husband argues with the doctor about whether his wife should breastfeed. To counter the doctor’s medico-statistical argument the husband replies: ‘Cela déforme la poitrine’ (Astoud-Trolley 1878: 4).

²⁴⁹ The persistence of Lamarckian theories of heredity in *fin de siècle* France is examined in Chapter Three.

A similar representation is shown in *Le Lait d'une autre*. The Baron and his wife discuss a Madame Deshaies who juggles breastfeeding with the maintenance of her social life:

Elle est au théâtre? Tout d'un coup il faut descendre; un fiacre attend contre la chaussée, c'est l'heure, on lui a apporté l'enfant, elle baisse les stores, vite elle se dégrafe, elle souffre, elle se fait mordre, et pour récompense elle perd juste le plus beau. Pendant le bal? Tiens, la dernière fois, c'était au Continental; elle me l'a raconté, elle avait loué une chambre, en pleine valse elle a dû s'arrêter et aller sortir le sein là-haut, pour le petit qui s'est endormi dessus. (Hepp 1891: 17)

The Baron and Baroness, who imply that nursing is not worth the inconvenience caused by attempting to reconcile breastfeeding with social events, mock these attempts. This example suggests that maternal nursing in the upper classes was losing its unfashionable associations and can be linked to Ventura's notion of the 'public participation in a new society of taste' (2015: 538). The displays of maternal devotion, deliberately publicised by halting in the middle of a waltz, implies a performative aspect in which women such as Madame Deshaies broadcast and revel in their self-sacrificing maternal devotion.

However, both *Avant le bal* and *Le Lait d'une autre* emphasise that changes in women's fashion also facilitated maternal nursing. To nurse in a ball gown, which required a corset, the women must be wearing a special nursing corset, popularised at the end of the nineteenth century (Ventura 2015: 550). Indeed, the manner in which Madame Deshaies 'se dégrafe' implies that she simply unclips or unfastens the front of her dress. Before the popular use of these corsets, upper- and middle-class women could only nurse at home, where they were able to fully undress or not wear a corset.²⁵⁰ These representations indicate that the growing number of middle and upper-class women who nursed their own infants were not only influenced by medicine and pronatalist rhetoric. It suggests that consumerism and changing fashion also played a role, as new forms of clothing allowed women to reconcile their social life with nursing, liberating them from the domestic sphere. This notion was potentially problematic, as it suggested that women could nurse and be 'good' mothers, whilst maintaining a social life.²⁵¹

²⁵⁰ Ventura notes that some forms of nursing corset existed at the end of the eighteenth century but were not popularised (2015: 550).

²⁵¹ However, as noted by Ventura, although Debat-Ponsan's painting indicates attempts to reconcile socialising and breastfeeding, it continues to perpetuate the necessity of patriarchal and medical supervision, as the mother is observed by her husband and a nursemaid (2015: 538).

Aligning these representations of resistance alongside the plethora of political, medical, popular and hygienic representations of breastfeeding reveals to what extent the maternal body's ability to nurse was regulated. Whilst upper- and middle-class women were regulated through an emphasis on civic duty and portrayals of the sacrificial mother, literary texts in particular emphasise a resistance to medically promoted nursing practices and demonstrate attempts to reconcile maternal nursing with social activity, freeing women from the domestic space. Regulation of the practice is also evident in representations of nursing which emphasise that breastmilk does not belong to women, transferring its ownership to physicians and the nation. In particular, mercenary wet-nurses found themselves targeted by increased regulation and supervision, foregrounding the role of the physician in maternal discourses. Similarly, working-class mothers found themselves being heavily targeted by regulation and surveillance when nursing their infants. Viewing these representations of working-class nursing alongside each other, it is possible to perceive the numerous ways in which maternal nursing was enforced and observed, in addition to indicating how the practice was normalised through each level of society.

The Maternal Breast

The regulation of the maternal body and nursing practices can also be extended to representations of the lactating breast, revealing how changing gender roles within urban environments impacted upon perceptions of the maternal body. Representations of the breast are fraught with contradictions and competing ideologies and, as this section examines, medical and literary representations of breastfeeding and wet-nursing were accompanied by a myriad of representations of breasts, whether public or private, veiled or bare, demonstrating a fascination with their social role, in addition to that of nursing infants. This fascination was by no means new to the nineteenth century, as the multiple meanings of 'sein' and Christian associations with the Virgin Mary result in the breast becoming 'a floating signifier' (Gutwirth 1992: 342) accompanied by contradictions and negotiations between its sexual and maternal connotations which are shaped by the wider discursive landscape of a particular period. Others have acknowledged this link, as Sichtermann argues that, in the nineteenth century, the 'sexual potentiality of breastfeeding' (1983: 57) was expropriated

from women.²⁵² However, although the dialectic between the sexual and maternal has been well studied in discourses of maternity, and through this the lactating breast (Francus 2021), this section wishes to make a new link between the breasts' sexual and maternal roles, and the increasingly public visibility of mothers and wet-nurses within the urban environment. Through this lens, representations of the maternal breast can be situated within a contemporary medical and political desire to regulate the maternal body, a desire that exploits the breast's erotic value to provoke anxiety of venereal disease and reinforce the need for a desexualisation of the maternal breast.

As examined earlier and in Chapter Four, the regulation of the maternal body also extended to the regulation of its movement within public spaces. A number of recent works have acknowledged the increasing presence and circulation of women in the public sphere (Nesci 2007; Mansker 2011), as Haussmannisation and its new leisure spaces, parks and department stores increased the movement of women within the urban environment. This increased public visibility prompted a reevaluation of notions of privacy, making this period 'a time when the vocabulary and reality of private life took shape' (Perrot 1990: 2). Corbin equally notes that these changes dramatically altered and limited how women were able to appear in public (1990). Consequently, as loose hair became unseemly and sleepwear was not permitted outside the bedroom, 'the value of nudity was increased' (Corbin 1990: 487). These social and urban changes are key to understanding representations of the maternal breast and can help to unpick the importance of the breast's erotic and maternal roles.

The Public Breast of the Wet-Nurse

Within this discursive environment is the figure of the wet-nurse, whose breasts were inspected and manipulated during a sojourn at a nurses' bureau, and displayed in public spaces such as parks when nursing. Because of this public nudity, the nurse's breasts are almost exclusively desexualised in art and literature (Ventura 2018: 213). For example, in *Le Monde Illustré's* illustration of the exterior of a wet-nurse's bureau (Figure 18), the nurses, spilling out onto the streets, bare their breasts whilst publicly nursing, their nudity presented as a mere nutritional tool alongside other childcare tasks such as changing the infant's linen.

²⁵² Similar arguments are found in Giles (2002: 11) and Hennessy (2006: 78).

This desexualisation is specifically contrasted against the coquettish and fashionable clothing of the observing woman, highlighting both social distance and identifying the difference between aestheticized (and therefore sexualised) woman and desexualised nurse.

This desexualisation is also evident in *Le Monde Illustré*'s copy of Paul Delance's painting *Le Banc des nourrices à l'Ophelinat de Saint-Valery* (Figure 19), in which the passive nudity of the nurse attests to the normalisation and desexualisation of her breasts' nudity, contrasted against the modesty and coverage of the nuns' habits. As emphasised by both images, the public display of the desexualised breast is facilitated by clothing that also serves as an identifier, distinguishing the nurse from other women. In addition to desexualising them, this uniform also de-individualises the nurses and reinforces ownership of their bodies, as Geffroy writes, on observing the traditional Alsatian dress of a nurse: 'elle a probablement abdiqué sa personnalité, sa race et son nom, pour entrer en servage' (In *L'Aurore* 1899: 1).

Multiple literary texts draw attention to nurses' outfits, such as Hepp's *Le Lait d'une autre*, which notes the luxurious outfits worn by nurses in public. This reinforces Ventura's assertion that live-in wet-nurses became a status symbol, and that their easily identifiable outfit of button down dress and white parasol, which allowed them to nurse in public, advertised a family's wealth (2018: 230).²⁵³ The importance of nurses' clothing emphasises their role and presence in public places such as parks and nurse bureaus. Indeed, Sussman notes that throughout the nineteenth century, nurses waiting outside of a 'bureau des nourrices' were a frequent topic of illustration, featuring all strata of society, including peasant nurses, doctors and upper-class customers who were often portrayed inspecting the nurses and their infants (1982: 101).

²⁵³ In *Fécondité*, Valentine's nurse is described as 'la nourrice la plus ornée des Champs-Élysées, avec des pelisses superbes, des bonnets riches, garnis de longs rubans, dont l'éclat flambait au soleil' (Zola 1899: 317) and Mathieu watches 'l'idole orgueilleuse de l'allaitement vénal, promenait la petite Andrée, en faisant ruisseler au soleil ses longs rubans de pourpre' (1899: 318). A similar description of a wet-nurse is found in Rachilde's *La Marquise de Sade* (1888), described in terms of her costume: 'vêtu d'une robe brodée, couverte de rubans' (1888: 128). Nevertheless, however rich and luxurious these outfits, they were designed around the necessity of baring the breasts in public and continued to designate the woman wearing them as the desexualised property of another, as reinforced in Brioux's *Les Remplaçantes*. The nurse Lazarette's employers ensure that she is richly dressed and criticise her if there is an error in her costume: 'Vous n'êtes pas madame Planchot, vous êtes la nourrice de madame Denisart. Quand vous serez dans votre pays, vous vous habillerez comme vous voudrez. Ici, c'est comme nous voulons' (1902: 91). This desire for the status symbol is criticised by physicians such as Leroy-Allais, who denounces women who wished to 'faire étalage d'une nounou plantureuse et mirifiquement enrubannée' (1900: 30).



Figure 18: Exterior of a wet-nurse bureau (*Le Monde Illustré*. 1874: 300)



Figure 19: Baude's illustration of orphanage wet-nurses and nuns (*Le Monde Illustré*. 1886: 184-85)

Popular medical texts such as *La Jeune mère* included illustrations of wet-nurses breastfeeding in parks (1874d: 105).²⁵⁴ Hepp similarly describes the crowd of nurses on the Champs-Élysées, emphasising their luxurious outfits (1891: 93). In fact, amongst the *flâneurs* of post-Haussmann Paris, wet-nurses are presented as a key feature of public society. Their repeated presence in Parisian parks attests to the public nature of their industry and their importance as a status symbol.²⁵⁵ Nevertheless, although identified as a key aspect of urban life, they continue to be desexualised and often viewed with distaste, as presented in Caruchet's *Ensemencée*. In this novel, the protagonist Armand rejects the notion of his wife breastfeeding:

Nourrir, être pareille à ces femmes qu'elle voyait, dans les jardins et les promenades, dégrafer leur corsage et tendre vers une ventouse rose et vorace un sein que l'amant ne connaissait plus, qui n'était plus fait pour l'amour, ni pour le baiser, ni même pour cette pudeur jalouse qui clôt les robes sur les trésors connus d'un seul... (1900: 69)

The public display of the nurse's breast is presented as an impediment to the husband or lover's sexual enjoyment of it. Through this, the text juxtaposes the public, desexualised breast with the veiled, private and eroticised breast. These representations as a whole emphasise how the breast of the wet-nurse is defined by its maternal usage and is explicitly desexualised, permitting its display within public places without threatening contemporary ideologies of privacy and nudity.

Wet-nurses and Cattle

The desexualisation of the wet-nurse's breast is also explicit in references to cattle. In medical texts, this is most notable in articles which advise mothers on choosing a nurse. In multiple editions of *La Jeune mère*, Dr Brochard summarises nurses from different regions, comparing their general health and childcare abilities. In these descriptions, nurses are described in similar terms to breeds of cattle, with descriptions such as: 'haute stature, belle prestance, physionomie riante et pleine de fraîcheur, lait riche et abondant' (1875b: 87). These

²⁵⁴ This common sight is also evident in *Le Monde Illustré's* 'Au jardin des Tuileries – Mamans, Enfants et Nourrices' by Robert (1882: 340).

²⁵⁵ Other literary texts that include extended descriptions of nurses in Parisian parks include Zola's *Paris* (1898: 315) and Leroy-Allais' *Des Droits de l'enfant* (1900: 228-29).

descriptions frequently emphasise the nurses' temperament, idealising the docility of those who are 'généralement bonnes, de moeurs douces, fortes, bien constituées, quelques un peu molles' (1874f: 154).²⁵⁶ This method of categorising and generalising nurses is also found in Bouchut and Bailly (1862: 201 and 1882: 89), demonstrating that it was a frequently used method of representing wet-nurses.

In addition to desexualising the body of the nurse, these discourses also serve to remove any indications of individuality or free will, and often reinforce women's supposedly 'natural' function of nursing. Esquiros argues that the nurses working in charitable institutions are unable to form any bond with the ever-changing infants in their care: 'Simple machines à lactation, les nourrices sédentaires donnent mécaniquement leur sein à des nouveau-nés chétifs et malingres, dont elles n'obtiendront pas même un sourire' (1847: 294). In addition to reinforcing popular beliefs in the lack of maternal love shown by nurses, Esquiros also presents the nurses as akin to dairy cows who are milked without any active involvement in the process. Indeed, for some, wet-nurses were worse than cattle, as indicated by a mother's letter to *Gil Blas* in 1899, in which she asks: 'pourquoi les femmes n'ont-elles pas recours à la bête fraîche et saine, à la bête à cornes, au lieu de le confier corps et âme à ces bêtes de somme retorses, qui font mille et mille tours, qui volent, pillent, mentent, ces êtres malicieux dont les maîtres sont esclaves?' (Guillemont in *Gil Blas* 1899: 1).

These representations, distancing the bovine, asexual wet-nurse from the sexualised upper-class woman, are reflected in a revulsion for nursing found in Hepp's *Le Lait d'une autre* in which the Baroness rejects breastfeeding: 'on est mère et non point vache à lait' (1891: 16). In other literary texts, this notion is employed differently, particularly in Couvreur's *Le Fruit*, which examines and villainises the wet-nursing industry in great detail. In this text, animal imagery is employed to reinforce the ignorance, cruelty and animality of rural wet-nurses, specifically those who were employed by the state to nurse abandoned infants:

Vêtues de loques sales, ayant des faces avides et laides, il fallait qu'on les sût approuvées par une visite médicale pour les croire saines. La crasse de leur visage se continuait jusque sous leur chemise. Quel bétail humain, qui n'avait même pas la propreté d'un troupeau d'animaux! De quel fumier sortaient-elles? Et c'étaient

²⁵⁶ In another edition Brochard emphasises the nurses' 'caractères doux, laborieuses, dociles' (1875b: 87), indicating to what extent physicians and wealthy families wished to have complete control over the nurse.

là des mères d'adoption, ces trafiquantes de leur lait! C'étaient celles sur qui l'État comptait pour élever des citoyens, pour parfaire des âmes! (1906: 23)

References to cattle are also employed in the same text, but in a positive light. Dr Bouret becomes interested in employing a nurse who reminds him of 'ces petites vaches bretonnes dont toute la quintessence semble se réfugier dans les pis' (1906: 36). She has 'une poitrine lourde de sève, si abondamment pourvue que le trop-plein s'en écoulait de lui-même, et qu'on eût dit que les parois, tendues à l'extrême et parsemées de sillons bleuâtres, allaient éclater sous sa poussée' (1906: 36). Imagery of cattle also appears to legitimise his thorough examination of the nurse, which he concludes by stating: 'Quelle vigoureuse bête nourricière, quelle saine petite vache humaine!' (1906: 37). Used negatively or positively, this imagery of animality reinforces the asexuality and maternal function of nurses, implying that nursing is their instinctual behaviour. Furthermore, as emphasised in both Couvreur and Brochard, presenting wet-nurses as akin to varieties of cattle legitimised their medical inspection, examination and regulation.

It is also possible to trace similar imagery of the desexualised breast in Zola's *Germinal*. In contrast to links between cattle and nurses, this novel associates imagery of animals with the poverty of mothers in mining communities. In contrast to the regenerative, idealised representations of breastfeeding found in *Le Docteur Pascal* (1893) and *Fécondité*, the breastmilk of the poverty-stricken La Maheude 'signifies the perpetuation of hopelessness' (Hennessy 2006: 78). The constant and excessive flow of La Maheude's milk is presented as threatening and a marker of a lack of bodily control, a concept which will be examined shortly. However, the novel also repeatedly emphasises the public display of La Maheude's breasts and associates her with imagery of cattle. There are several instances in which she leaves a breast bare, even when not nursing. When she falls asleep with her infant, 'la gorge [était] coulée de côté' (1986: 105) and the movement of the breasts indicates how they have been drained by the infant. Later, when publicly socialising with other women, La Maheude 'avait tranquillement sorti au grand jour sa mamelle de bonne bête nourricière' (1986: 127). In fact, descriptions of her breasts repeatedly reinforce their size, lactation and purity. In conversation with the protagonist Étienne, she does not notice that 'la gorge [était] à l'air, tandis que sa fille Estelle, sans lâcher le sein, s'endormait sur ses genoux' (1986: 236). Étienne is fixated by 'ce sein énorme dont la blancheur molle tranchait avec le teint massacré et jauni du visage' (1986: 237). Even during a consequent argument with her daughter, her

breast remains free: ‘le sein énorme pendait, libre et nu, comme une mamelle de vache puissante’ (1986: 239).

The repeated references to La Maheude as a ‘bête’ and ‘vache’ can be seen to reinforce her seemingly predestined role within the mining society, which is to reproduce and provide new workers for the devouring pits of the Monsou mine.²⁵⁷ This notion links back to Hennessy’s statement that her milk signifies hopelessness (2006: 78) as, despite its nourishment, it feeds those who are destined to be sacrificed to the mine. Likening the nursing mother to cattle thus reinforces her powerlessness and lack of control over her own destiny. However, this pessimistic representation is juxtaposed by references to the whiteness and size of her breasts. In particular, ‘la blancheur molle’ of her breast which ‘tranchait avec le teint massacre et jauni du visage’ (1986: 237) indicates the regenerative quality of milk, and suggests that a life of poverty, symbolised by her tired and worn face, could be remedied through the next generation, embodied by her lactating breasts. This hint at regeneration and hope reflects the revolutionary optimism found at the very end of the novel. On leaving the community, Étienne imagines that he can hear the miners, including La Maheude tapping away underground: ‘c’était de cette rumeur que la campagne était grosse. Des hommes poussaient, une armée noire, vengeresse, qui germait lentement dans les sillons, grandissant pour les récoltes du siècle futur, et dont la germination allait faire bientôt éclater la terre’ (1986: 502). The breasts and lactation of La Maheude therefore represent both the despair and poverty of the mining community and the regenerative, revolutionary hope for a better future.

The Sexualised Maternal Breast and Venereal Disease.

The motif of the maternal and desexualised breast does not go unchallenged, as some texts present the nursing breast as complicated by its erotic function. Women who were nursing were advised not to engage in sexual intercourse, as a new pregnancy could disrupt their supply of milk. As such, texts argue that, when nursing, the breast’s erotic value was transformed: ‘Comment osez-vous penser que ces globes séduisants [*sic*] qui parent votre

²⁵⁷ This notion extends beyond La Maheude when other working-class women arrive at a dance to meet their husbands: ‘Les mères ne se gênaient plus, sortaient des mamelles longues et blondes comme des sacs d’avoine, barbouillaient de lait les poupons joufflus’ (1986: 173). Indeed, comparisons between their breasts and sacks of oats not only desexualises the breasts and legitimises their public display, but also reinforces the nutritional purpose and value of the breast in its current employment.

sexe aient été arrondis par la main des grâces pour server seulement d'ornement' (Dourif 1814: 9). This section examines how representations of the sexualised maternal breast also implicate a wider threat to late nineteenth-century society, that of venereal disease and, more specifically, syphilis. Considered as a contributory factor to degeneration by causing sterility (Maurel 1896: 79-81) and a threat to the health of the family (Donzelot 1979: 183), anxieties over syphilis were particularly prevalent in discussions of the sex industry, and calls for increased inspection and regulation of prostitutes were often founded in fears of the disease's spread.²⁵⁸

A particular concern for nineteenth-century physicians was that syphilis could be passed from nurse to infant, and vice-versa, not through milk but through contact with sores around the mouth and nipples (Dagot 1893: 20; Vaidy 1900: 19). Indeed, most popular guides or manuals on marital relations and childrearing draw attention to the risks of syphilis during breastfeeding.²⁵⁹ On employment, nurses were inspected for any signs of the disease, but their circulation in urban areas and public nudity prompted anxiety over their sexual potential. Literary and popular sources emphasise this potential through male voyeurism of the nurse's breast. In one tableaux of a nurses' bureau, a man pretends to be interested in hiring a nurse to justify inspecting their breasts: 'Sans s'amuser à examiner la figure d'une nourrice, il va lui tâter le sein; il demande à le voir, puis il passe à une autre avec laquelle il en fait autant' (Kock 1842-43: 13). Similarly, in *Le Lait d'une autre*, a man sits in a park for hours on end, pointed towards a large group of wet-nurses: 'l'aspect vénérable et très bon, il plonge âprement, avec de sales frissons, sur tous ces seins dehors, ou guette l'impudeur de cette enfance...' (Hepp 1891: 97).²⁶⁰

Although these texts satirise male voyeurism of the public breast, other texts illustrate more explicit anxiety over venereal disease by linking together two key transmitters of syphilis, prostitutes and wet-nurses.²⁶¹ As argued by Ventura, women's decision to sell their milk led

²⁵⁸ See La Berge (1992), Corbin (2015) and Wilson (2020) for a study of this link.

²⁵⁹ For example, Bouchut (1885), Doze (1874), Gerbaud (1902), Hayès (1891) and Rouvier (1893).

²⁶⁰ Ventura has also commented on associations made between soldiers and in-house nurses in popular art and caricature, wherein soldiers were presented as taking voyeuristic advantage of a wet-nurse feeding her charge in a public place, as well as attempting to seduce the, often unmarried, urban nurses (2018: 230-42).

²⁶¹ These two sources also illustrate class-based anxieties over infection or transmission, as both the nurse and the prostitute represent working-class women who can ascend and infiltrate or 'infect' the upper classes through their professions. Indeed, in *Nana*, the eponymous prostitute is described as 'corrompant et désorganisant Paris entre ses cuisses de neige, le faisant tourner comme des femmes, chaque mois, font tourner le lait' (Zola 1882:

to assumptions that they were sexually available or prepared to engage in prostitution (2018: 240-42). Couvreur explicitly links the two:

Des femmes étaient parquées en l'attente du client. Prostituées de la maternité, battant monnaie d'une fonction naturelle, elles allaient dans un instant, avec autant d'impudeur que les cloîtrées des couvents d'amour, tendre leurs seins, laisser palper leur peau, tirer un bénéfice indirect de l'acte créateur. (1906: 33)

Although these nurses are sexualised, it is with disgust, as they are criticised for prostituting their milk and making it available for any infant. This same concept is implied in Pierre Hamp's *Nounou*, where women who are waiting to be chosen as a nurse also earn money on the streets as prostitutes (1917: 26). Just as with the previously quoted example from *Ensemencée*, in which the husband criticises that the nurse's breast is not accompanied by 'cette pudeur jalouse qui clôt les robes sur les trésors connus d'un seul...' (Caruchet 1900: 69), links between nurses and prostitution base their comparison upon the communal versus individual sharing of liquids or the body. As such, the threat of venereal disease associated with the prostitute is transmitted, both metaphorically and physically, to the figure of the wet-nurse, constituting a threat to her employer's infant.

Hepp's *Le Lait d'une autre* exemplifies this link, as it follows the ironically named wet-nurse Marianne and the pernicious influence of her milk and morals upon her upper-class nursling. Before leaving for her job in Paris and its enforced abstinence, Marianne roams her village having sex with any available men. The last of these is an elderly baker, with whom sexual foreplay does not result in sex, as he instead becomes fixated upon her lactating breasts: 'longtemps des doigts de vieux courent, ses lèvres bavent sur l'éblouissement de cette poitrine, et il contourne, il racle de sa langue les mamelles gonflées' (1891: 52-53). Instead of sex, the man drinks her milk, and after the encounter:

Elle a déjà lui emportant sur elle la salive et le bleu des morsures de ce vieux. Elle lui a donné le sien! ah il n'est pas ennuyé, le père Gérard, d'avoir son sein et son lait pour rien! Cela se paye, à la Ville, on la payera, et après ce vieux, demain, c'est un petit enfant qui aura tout cela. (1891: 53)

205). Just as her 'cuisses de neige' are a marker of non-procreative sexual practices, women's fertile potentiality is linked to turning milk.

The breast's maternal function, polluted by the sexual intentions of the encounter, is linked to prostitution by the reminder that she is employed elsewhere for nursing.²⁶² The man's mouth marks and bruises the nurse's breast: 'Il marquait la chair obstinément, il la stigmatisait, ce baiser du vieux qui avait souillé le sein promis aux lèvres pures de l'enfant' (1891: 66). Later her employer notices and inspects these marks, exemplifying upper- and middle-class fears of contamination and reinforcing how her sexuality and the breast's erotic function is perceived as a threat to the health of the nursling.²⁶³

These representations demonstrate that when the wet-nurse's lactating breast was complicated by erotic or sexual implications, it prompted anxiety over the pollution of the nursling and a threat to the family. This can be linked to the contemporary fear of syphilis transmission and infection, which consequently resulted in an association between commercialisation of sex and milk, thereby drawing comparisons between the prostitute and the wet-nurse. Fears of milk pollution are linked to the sexual potential of wet-nurses who, often unmarried and alone in a new environment, were represented as sexually available. Indeed, in these cases, the nudity of the maternal breast in public places such as parks becomes fraught with anxiety over male sexual voyeurism.

A Liquid Economy

Moving on from a focus on how nursing practices and the maternal body were regulated, this section will examine how representations of milk were shaped by ideologies of the maternal body and broader anxieties over the management of bodily fluids. Milk, in both its human and dairy forms, is accompanied by a variety of discourses emphasising the importance of its quantity, quality and use. It is defined by its changeability and instability, as it can 'turn' and

²⁶² See Marcus (2014), who examines the corruption of breastmilk in Hepp's novel.

²⁶³ The text also draws interesting comparisons between infancy and old age. Although evidently aiming to elicit disgust, the emphasis on the toothless gums of the baker and how he is left 'barbouillé de blanc, suçant ses lèvres rentrées' links him to the helpless hunger of an infant nursling. This seems to present a polluted version of the Roman legend of Pero who secretly breastfeeds her incarcerated and starving father Cimon. Artistic representations of Pero as an embodiment of Caritas link to similar representations of the figure of Marianne in republican ideology, where she was often represented nursing multiple children. Indeed, historically, nurses would earn wages from feeding the sick and elderly as well as infants (Otomo 2014: 219), indicating that the taboo for adult nursing has not always been socially prohibited and is shaped by contemporary discourses. Hepp's character of Marianne thus becomes a sexualized and corrupted manipulation of these figures, implying notions of charity that are complicated by sexual excess.

transform from nourishing to hazardous. As reinforced by Jackson and Leslie, milk's potential elevates it into metaphor and fantasy: 'Pure white milk is an ideal-type or a norm and, as such, it is a product of our fantasy, just as it is a product of industry.' (Jackson and Leslie 2017: 63).²⁶⁴ Just as the female body is perceived as being defined by flux, breastmilk mirrors these fluctuations as it changes in quantity, quality and composition, adapting to the needs of the infant. Indeed, the entry 'nourrice' in the *Dictionnaire encyclopédique des sciences médicales* reads that 'aucune sécrétion n'est aussi abondante. Le corps tout entière est impressionné par cette nouvelle fonction' (1874-89: 397). Fantasies of 'pure' milk and preoccupations with its flow are also linked to social flow and mobility by Law's examination of milk flow and wet-nursing: 'Wet-nursing both reinforced the cultural value of a highly sentimentalised and deeply symbolic bodily fluids and at the same time acknowledged its potential commodifiability and circulation beyond the strict circuits of the nuclear family' (2010: 24).

These assertions were also accompanied by fears of pollution, as seen in Warner's assertion that, as the breasts are sexual and maternal organs, they are often perceived as 'both sacred and polluting' (1985: 245). This concept is manifested through nineteenth-century discourses of breastfeeding in which, as noted by Kukla, incitements for maternal breastfeeding are often accompanied by concerns that certain mothers should not breastfeed; 'their milk might be disordered, polluted, insufficient, or faulty for any number of reasons' (2005: 94). Kukla identifies this as a clash between the social fetishisation of the 'natural' nursing mother and anxieties surrounding the perceived instability, porousness and corruptible nature of the female body (2005: 94).²⁶⁵ Although ownership of breastmilk was placed in the domain of medicine and the State, the commercialisation of milk raised issues surrounding its quality and who was accountable for 'faulty' milk.²⁶⁶ In examining these various influences and interests, this section aims to analyse the flow, circulation and economy of milk as represented in nineteenth-century France. In addition to physical representations of milk, this also includes imagery and metaphors of milk.

²⁶⁴ Valenze's chapter 'Great Mothers and Cows of Plenty' provides an overview of the historical glorification of milk and its metaphorical power (2011: 13-33).

²⁶⁵ This concept has been examined in Chapter Four.

²⁶⁶ For example, Dr Brochard argues that, as a commercial product, breastmilk should be regulated as such. He argues that if a mushroom seller sold poisonous products, he would be held accountable, so a nurse selling poor quality milk should be equally so (1867: 62).

Purity and Impurity

Concerns around the corruption and varying quality of milk infer that its ideal state is defined by purity. Through her analysis of the Virgin Mary and milk, Warner demonstrates that the substance, both human and animal, is historically presented alongside honey as definitively pure: ‘Neither milk nor honey require any preparation to eat, but appear spontaneously in full perfection. No rites of purification attend their consumption: they are pristine’ (Warner 1976: 194). This idolatry of the substance, which consequently became embedded in religious and cultural ideology, is present in nineteenth-century maternal discourses.²⁶⁷ Meunier reports that ‘les médecins ont découvert une panacée universelle, un remède à tous les maux: le lait’ (1898: 13) whilst Bouchut calls it ‘le type d’aliment parfait’ (Bouchut 1862: 140) and Brochard places it within ‘le premier rang parmi les aliments complets’ (1874a: 66).²⁶⁸

However, these idealisations of milk’s purity were also accompanied by warnings of how it could become polluted. In particular, the instability of cow’s milk and its ability to ‘turn’ are emphasised. For example in *Fécondité*, the bottle feeding techniques of rural wet-nurses are discussed: ‘[Q]uels biberons, jamais nettoyés, d’une crasse répugnante, avec du lait glacé en hiver, tourné en été!’ (1899: 258). Regarding breastmilk, many physicians dedicated chapters to which substances could pass into a nurse’s milk, demonstrating concerns around maintaining its purity (Fulgens n.d.: 20-22; Marfan 1899: 262-73).²⁶⁹ Dr Donné, in particular, dedicates an entire treatise to this topic, focusing not only on methods of gauging the quality of milk, but also examining milk as a vehicle for illness (1837: 51). He narrates his attempts to discover signs of venereal illness in the milk of nurses and, although unfruitful, these investigations demonstrate an attempt to diagnose nurses who do not show exterior

²⁶⁷ After pasteurisation was popularised in the 1890s this imagery was also extended to cow’s milk as a food for infants. Before pasteurisation there were many dangers with using cow’s milk and formula. The temperature altered how quickly the milk turned and Fuchs identifies a correlation between the summer months and an increase in nursing mortality (1984: 222). The discoveries of Pasteur and its implications for milk are reflected in the topic of medical treatises and pamphlets at the end of the century, for example Budin’s *Lait stérilisé et allaitement* (1893) which gives detailed instructions on how to sterilise bottles and preserve milk.

²⁶⁸ Duclaux (1887) and Rouvier (1893) also emphasise the potential purity of milk.

²⁶⁹ As noted by Shorter, these texts also placed great emphasis on matching the ‘age’ of the nurse’s milk with the age of the infant (1976: 178), this led to the falsification of birth certificates to convince potential employers that a nurse’s milk was new, or nurses would borrow or rent another nurse’s younger child to present as their own.

symptoms, and link to the aforementioned anxiety over syphilis and the infection of the infant.

The desire to be able to judge the quality of milk from external factors also resulted in many studies on how a wet-nurse's appearance might influence her milk. Particularly notable amongst these is the surprisingly frequent link between hair colour and milk quality, a link which also influenced other bodily fluids such as sweat. From as early as 1822 through to 1899, physicians recommend that women avoid redheaded nurses. Chambellan notes that nurses who emitted a bad odour 'sont le plus ordinairement celles qui ont les cheveux de couleur rouge' (1822: 7) and Martin-Fugier also presents the frequent assertion that strawberry blondes 'dégagent une odeur qui dégoûterait l'enfant et l'empêcherait de téter' (1978: 17).²⁷⁰ It should be noted that this belief was not only repeated by a select group of physicians but is also found in *Dictionnaire encyclopédique des sciences médicales* under the entry 'nourrice' which reads, in relation to redheaded nurses: 'la sécrétion cutanée possède une odeur pénétrante et désagréable' (1874-89: 399). In addition to this denunciation of redheaded nurses, medical texts also associate hair colour with the quality of milk, a correspondence in which darker hair correlates to richer milk. Dark-haired nurses, including brunettes, were considered to have the best quality milk, whilst the paler colour of blond hair was linked to a milk that was abundant but 'trop aqueux' (Fraissines 1857: 63) and 'séreux, et [qui] occasionne facilement de la diarrhée' (Bouchut 1862: 136).²⁷¹ Whilst microscopic and chemical examinations of milk were increasingly common towards the end of the century, they were severely limited in revealing the long-term quality of a nurse's milk and its effect on a nurseling. Due to these limitations, the above representations, so prevalent across the entire century, indicate medical attempts to distinguish good quality milk from bad by alternate means through the examination of external characteristics.

Concerns on how wet-nurses could conceal poor quality milk are also a frequent theme in nineteenth-century novels, particularly those which villainise the wet-nursing industry. For example, much of Couvreur's *Le Fruit* focuses on how alcoholism impacted on the wet-nursing industry. Searching for a replacement wet-nurse, a doctor finds that in rural areas

²⁷⁰ Other texts reinforce this belief such as Marfan who advises women to only choose a redheaded nurse if 'leur transpiration axillaire n'exhale pas une odeur forte' (1899: 255) and Cassine (1894: 89).

²⁷¹ Martin-Fugier comments that blondes were considered to be more susceptible to scrofula and tuberculosis (1978: 17).

‘toutes les sources de lait étaient empoisonnées par le grand toxique national’ (1906: 87). Emphasis is repeatedly placed upon how breastmilk is polluted by alcohol, and how this particularly affects ‘enfants assistés’ who were placed with cheap nurses by the State:

Combien de petits corps desséchés cette coulée fatale, partie des usines, et s’épandant jusqu’aux campagnes; sous la protection de l’État, combien de corps consumés ce fleuve sombre charriait vers les cimetières, vers les tertres surmontés d’une croix qu’on ne saluait jamais, vers les désorganisations obscures de la mort! (1906: 87-88)

In this description, as in others to be examined shortly, breastmilk is presented as forming a flow which carries the infant to either life or death. This imagery reinforces the importance of its purity and the hazards accompanying its pollution, linking to contemporary concerns over degeneration that identified alcoholism as a contributor in the decline of the French nation (Morel 1857: 86). The description also emphasises milk’s importance on an individual and national level. As will be seen later in an examination of *Fécondité*, the milk which feeds the individual infant is presented as a flow which also nourishes or harms the entire nation.

Couvreur also emphasises the unsanitary description of many nurses: ‘Les unes, comme à l’hospice, étaient sordides, vêtues de haillons, couvertes d’une crasse d’étable, épandant les relents du fumier où, quelques jours encore auparavant, elles croupissaient’ (1906: 34). Drawing attention to a lack of hygiene implies the subsequent pollution of milk and danger to the life of the nurseling.²⁷² A similar link between unsanitary appearance and polluted milk of wet-nurses can be found in *Fécondité*, in which it is juxtaposed against images of the purity and hygiene of the maternal nurse. The breasts of the aptly named Marianne, who nurses her children, are described in a manner that emphasises their purity: ‘le sein blanc, d’une douceur de soie, dont le lait gonflait la pointe rose, telle que le bouton d’où naîtrait la fleur de vie’ (1899: 244). This cleanliness is associated with the nourishing and pure quality of her milk. In contrast to this, the novel later represents a wet-nursing bureau, described as ‘ce terrible monde de filles sales, grossières, souvent menteuses et voleuses’ (1899: 277). The impurity of the nurses and their milk is emphasised in descriptions of the bureau: ‘Dès le seuil, une odeur âcre s’exhalait, le grailon de la cuisine, la pestilence du lait aigri, des maillots mal

²⁷² He adds that even those who were clean and dressed smartly had ‘le même masque de maternité ternissant leur teint, pigmentait leur front de jaune terne; et c’était aussi une même empreinte de lassitude due au voyage récent, à cette claustration de quelques jours, loin de l’air et du soleil, et à la parcimonie de l’alimentation’ (1906: 34).

tenus, de tout le linge sale de ces campagnardes, aux dessous empoisonnés' (1899: 278-79). As in Couvreur's novel, these descriptions also contain insinuations of animality, as Mathieu and Dr Boutan are disgusted by 'cette étable, cette vacherie, si mal tenue' (1899: 280). The impurity of mercenary milk, as indicated by references to sour milk is thus linked to the poor hygiene of nurses, demonstrating anxiety towards the nurselings who would consume this polluted milk.

Concerns surrounding pollution and impurity are also present in representations of cow's milk and the dairy industry at the end of the century. This period saw revolutionary changes to bottle-feeding and breastmilk alternatives.²⁷³ The demand and consequent expansion of the cow's milk industry, in accompaniment with discoveries on germ theory and sterilisation, led to an increase in infants fed on cow's or condensed milk (Fildes 1988: 228 and Sussman 1980: 230).²⁷⁴ In the early 1890s the development of pasteurisation resulted in increased medical sanction of bottle feeding (Fildes 1988: 201).²⁷⁵ Ventura highlights that this was another means of discouraging the mercenary nursing industry, as the naming of bottles such as 'Le Nourricer Robert' emphasises the displacement of the nurse in favour of male-designed and physician-endorsed bottles (2018: 70). Cow's milk seemingly offered a more controllable source, as it presented 'a predictable and constantly manageable flow' (Jackson and Leslie 2017: 69).²⁷⁶ However, the discovery of microbiology and growing demand resulted in accusations of a lack of hygiene and milk adulteration, leading to fears of illness in urban areas (Fanica 2000: 66 and 239; Bouchardat and Quevenne 1857: 1).

Milk was frequently adulterated with unclean water, flour, zinc oxide and even cow brains (Fanica 2000: 276-77), and Meunier asserts that 'le lait que l'on trouve dans le commerce n'est pas de lait!' and that despite appearances, it contained 'des produits délétères et

²⁷³ For a detailed analysis on the types of bottles available see Fuchs (1984: 218-23).

²⁷⁴ Brochard is a particular advocator of Swiss condensed milk, particularly in hot countries or in those where it is difficult to obtain fresh cow's milk (1877: 6; 1874d: 98-100). However, the popularity of condensed and evaporated milk was slow to grow as it was expensive (Sussman 1982: 165). Morriset's text contains examples of feeding infants with animal milk (1889).

²⁷⁵ Texts which discuss this topic in detail are Caron (1859: 64-72 and 1873: 43-70), Gerbaud (1902: 65-77), Jousset (1885) and Marfan (1896 and 1899).

²⁷⁶ Rollet's historical study demonstrates how the usage of cow's milk to feed infants varied across the country at the end of the nineteenth century (1978). Fanica's study of the dairy industry between the eighteenth and twentieth century also traces the transformation of milk production and usage in France, in addition to how it was represented and perceived in popular culture (2000).

infectieux' (1898: 59).²⁷⁷ Similarly, Gerbaud dedicates a section of his text to the falsification of milk, listing the ways in which it was adulterated, and naming the culprits as '[les] véritables empoisonneurs qui tuent nos enfants tout en nous volant notre argent' (1902: 59).²⁷⁸ These concerns were manifested in an edition of the satirical paper *L'Assiette au Beurre* entitled 'Les Empoisonneurs Patentés: Les Falsificateurs de lait' (1901). Although presented as a threat to broader society, many of the images reference how diluted or cut milk was a danger to nursing infants (1901: 2-45). In one image, a woman scoops water from the gutter into her infant's bottle. A man addresses her: 'L'eau de ruisseau à votre enfant... Vous êtes folle!...' to which she replies 'Mais non m'sieur, c'est plus pur que le lait qu'on nous vend' (1901: 3). Therefore, despite the promotion of bottle-feeding as a replacement for wet-nursing, concerns over the purity of milk in urban areas actually reinforced the reliability of breastmilk. In one image from *L'Assiette au Beurre*, a plump, rosy and clearly healthy infant is accompanied by the caption: 'Le vrai, le seul, l'unique produit du lait véritable: le lait maternel' (1901: 15). Similarly, the difficulty of finding reliably pure milk in urban areas is mocked in another image that illustrates a wet-nurse as a source of milk for an invalid. Her sealed and stamped breasts satirise the only means of securing pure milk (Figure 20).

These medical and literary examples demonstrate a fixation on the impurity of milk. Physicians searched for methods for successfully analysing and determining the quality of milk and for detecting poisons and diseases that could lurk within. The vices of the rural and working classes and the theories surrounding degeneration were also viewed alongside milk discourses, demonstrating fears that working-class alcoholism could infiltrate the upper classes through the vehicle of milk. These discourses also demonstrate a desire to distinguish the quality of milk in external features, linking hair colour and personal hygiene to the purity of milk. This imagery extended into discourses of animal milk and the dangers of bottle-feeding, even post-pasteurisation, linking these concerns to a broader public hygiene campaign over the adulteration of milk.

²⁷⁷ The press focused on this public debate by heavily publicising cases such as that of 'Louise la laitière' which was the name given to the fountain from which dairymen heavily diluted their milk during the night.

²⁷⁸ This is also found in Halmagrand (1867: 35-41), Lebehot (1858: 13-19) and Marfan (1899: 85-94).

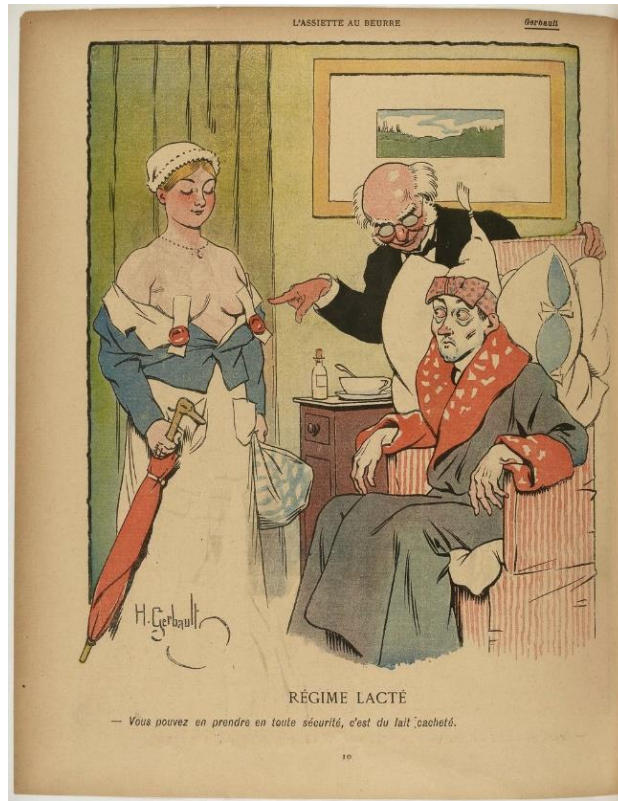


Figure 20: 'Régime lacté': A physician prescribes wet-nurses' milk for his patient (Gerbaud 1901: 10)

Repression of Milk

In addition to concerns surrounding its purity and pollution, nineteenth-century representations of breastfeeding were also concerned with the quantity of milk, in particular the consequences for women who repressed their flow of milk. These representations demonstrate notions surrounding 'correct' and 'incorrect' usage of milk, and how incorrect usage or repression could lead to broader health issues. Many of these issues are referred to as 'milk fever', a non-existent condition that was used as a catch-all diagnosis for mild-post-partum infections. However, the condition's link to milk emphasises how the onset of lactation was perceived to alter the female body.

These alterations, prompted by the new flow of milk, emphasise what happened when this flow was repressed, drawing upon historical notions of the fungibility of fluids to suggest that it could be diverted in a hazardous way. This notion is present in medical texts at the

beginning of the nineteenth century, however, it is mentioned in reference to ‘la masse des humeurs’ (Dourif 1814: 40), drawing upon Galenic theories of humorism. During the latter half of the century, physicians continued to present this concept, but without reference to humours. Texts argue that when a woman repressed her milk, the milk was forced inwards into different parts of the body:

“Faire passer son lait” pour nous server de l’expression reçue, le refouler dans les canaux par lesquels il arrive à flots, le faire résorber par l’organisme, au moyen de médicaments, détourner le cours du nectar de la vie, ce n’est une pratique sans danger. Que de femmes ont des infirmités, des maladies incurables qu’elles attribuent à un “dépôt de lait”. (Desplace 1875: 23)

Imagery used to describe the consequences of this repression implies that the mixing of milk with other bodily fluids and organs leads to a form of pollution:

Le meilleur, le plus sûr moyen, de prévenir cet engorgement laiteux des seins, ces congestions cérébrales qui accompagnent trop fréquemment les suites des couches, ces états fébriles si périlleux dans l’état puerpéral; le moyen de détourner ces fluxions congestives de l’utérus, source trop fréquente de toutes ces affections organiques de la matrice, c’est, à n’en pas douter, en satisfaisant au vœu de la nature, qui veut qu’une femme qui donne le jour à un enfant l’allaité à ses mamelles. (Caron 1859: 196)

Vocabulary suggesting pollution such as ‘congestions’, ‘fébriles’ and ‘fluxions’ emphasise the supposed fungibility and fluidity of a women’s physiology, and how ‘incorrect’ milk usage could lead to other parts of the body becoming congested and polluted. This fluidity and its dangers are emphasised by Gardien, who states that when the flow of milk is repressed, ‘il arrive nécessairement l’un de ces phénomènes pathologiques: ou bien les fluides séjournent dans les mamelles, s’ils continuent de s’y rendre, ou bien ils sont forcés de refluer dans la masse générale’ (in Brochard 1874a: 32).

These descriptions also emphasise the concept of the leaking female body. Whereas in other discourses this leakage is presented critically or as threatening, in rhetoric promoting maternal nursing, physicians present it as essential to women’s health and as an emission that should be encouraged. Milk’s need to be excreted is emphasised by Chassinat who states that breastmilk is ‘soumis à la loi qui régit tous les produits sécrétés: il doit être excrété, sous peine d’inconvénients plus ou moins graves pour la mère’ (1868: 12). In addition to reinforcing the fungibility of fluids, medical texts reinforce how the flow of milk could

transform in order to be emitted in a different way. The uterus, ‘se trouvant surchargé de fluides, ne peut pas les repousser avec la même facilité qu’ils s’y rendent: ce qui le dispose aux engorgements, aux squirrhés, aux flueurs blanches’ (Chassinat 1868: 16). Gauneau bemoans the number of women who are hospitalised due to their unwillingness to nurse: ‘Voyez dans nos hôpitaux ces pauvres jeunes femmes, qui y séjournent des mois, des années même. Elles ont des pertes en blanc, en rouge, des déviations de l’utérus etc.’ (1858: 89). These representations are added to the previously examined emphasis on women’s civic duty to breastfeed, as Cassine argues that breastfeeding was not only women’s duty, but ‘une évacuation critique qui provoque du côté des mamelles une dérivation des plus salutaires pour la matrice’ (1894: 67). These arguments therefore insist on the necessity of ‘draining’ women’s body of milk through nursing, implying that this relieves pressure on other organs, prevents the ‘pollution’ and congestion of other organs, and prevents leakage through other body parts. In this respect, infants and their supposed right to mother’s milk are presented as assisting and relieving the mother. In *Fécondité*, Marianne says that ‘Je crois bien d’abord, que j’en tomberais malade, si ce cher petit ne me débarrassait pas de ce lait qui m’inonde: c’est pour ma santé qu’il me boit ainsi’ (Zola 1899: 233). In this representation, ‘inonde’ implies that she would be unable to cope with her body’s ‘leakage’ if not for the infant who assists her and facilitates her return to health.

A more extensive literary example of this concept can be found in an extraordinary scene in Hepp’s *Le Lait d’une autre*. The Baroness, like many of her social class, does not want to be inconvenienced by breastfeeding, so she hands her infant over to a wet-nurse straight after birth. Days later when still recovering from childbirth in bed, the Baroness becomes alarmed, fearing that she is dying. Her husband draws back the bedcovers to examine her body:

[II] reçut une éclaboussure de lait. C’était une fusée énorme, un jaillissement furieux des deux mamelles douloureuses, et d’un blanc formidablement veiné. Et ces veines semblaient craquer, se tordre, et ramper sur le gonflement des globes ainsi que des serpents. Et parfois aussi on eût dit un déchaînement de tempête sur la gorge; elle oscillait sous la formation l’élan d’un jet qui allait sourdre; puis quand tout s’était élançé, par saccades puissantes, cela coulait encore, coulait toujours, se répandait aqueux, fluide, sans arrêt, partout, sur elle, et sur le lit. (1891: 74)

The dynamic and aggressive vocabulary presents the Baroness’s breasts as being almost torn asunder by the pressure of the milk within. In addition to her involuntary leaking, the body

itself involuntarily sways and jerks in its effort to release its burden. The sheer flow of the milk is also emphasised through repetition of ‘coulait’ and imagery of its spread ‘partout, sur elle, et sur le lit’. This spread continues as the Baroness’s mother attempts to stem the tide:

Elle étendit sur sa fille des feuilles d’ouate légère et attendit. Mais devant elle, le lait abondant, vivace, irréductible envahit tout, et il pénétrait l’obstacle, l’imprégnait, débordant; et les feuilles sans cesse renouvelées, vite molles, enflées, étaient jetées à terre désespérément et foulées. (1891: 75)

The flow of milk is presented as aggressive and dominating as it saturates everything, further emphasising the quantity of the constant flow. Whilst this leakage mirrors physicians’ employment of concepts of the leaking body, the Baroness experiences this lack of control with shame and disgust:

Et toujours, intarissable, en flux blancs et jaunes, le lait fuyait, et le long des flancs aussi il descendait, glissait, et par endroits sur le ventre il stagnait comme en une vasque profonde. Et Geneviève avait caché ses mains dans un effroi de les mouiller à cela, dans le dégoût de cette abondance superbe qui d’elle faisait irruption. Oh! ce lait qui refusait de finir, il lui paraissait que c’était du sang, qu’elle en perdait par entrailles, qu’elle épuisait sa vie! Et dans sa tête cela dansait, se fondait, et il lui semblait soudain qu’en son cerveau aussi tout se liquéfiait. (1891: 77)

In addition to her shame, the latter half of this extract also draws upon concepts of fungible fluids; she feels as if her entire body has been transformed into milk and that she is being drained. This literary description presents this flood as the rebellion of the Baroness’s body, its insurrection against being denied the drainage of nursing. It also emphasises that she was fully able to nurse, voiding the arguments of many wealthy women who argued that their health did not permit the practice, emphasised by the doctor who states that she has enough milk ‘à en nourrir une crèche!’ (1891: 77), stressing the notion of wastage and the alimentary value of the milk which has flooded the room.

Notably, this literary example is remarkably similar to scenes of illegal abortion, as examined in Chapter Two. These representations, as found in Zola’s *Fécondité* and Lepage’s *L’Âge d’or. Avortée*, contain imagery of extreme leakage, in which the passive patient is surrounded by an expanding puddle or flood, and drained by this unstoppable emanation. Despite the difference in bodily fluid, Hepp’s scene of flooding milk is incredibly similar; it emphasises uncontrolled leakage, as those around the Baroness are unable to stem the flow, and she

experiences the sensation of being dangerously drained. This similarity is particularly interesting when placed alongside the disparate context of these texts. Whilst representations of leakage in abortion can be viewed in the context of the criminality and illegality of the procedure, justifying this bodily ‘flood’ as a form of punishment for eschewing reproductive ‘purpose’, Hepp’s scene of leaking breastmilk is legitimised and medically sanctioned by her physician. This contextual difference is also reinforced by the settings of these scenes; Zola and Lepage’s scenes of abortive haemorrhaging take place in an unsanitary abortion clinic and cheap hotel room, wherein the patient is attended only by the abortionist. Contrastingly, the Baroness’s leakage takes place in the wealthy, domestic space, attended by her husband, mother, nurse and physician. The similarity of these descriptions, juxtaposed against the differences in their context, raises questions around how and why imagery of the leaking female body was used in nineteenth-century literature. The application of similar imagery to both illegal and legitimised elements of women’s maternity indicates that this motif extends beyond legal and judicial concerns around criminal activity. It designates how the notion of the leaking female body and threatening ‘floods’ of bodily fluids manifested a much broader anxiety towards the regulation of female bodily fluids, and its role in the depopulation crisis.

The similarity between these representations of leakage also emphasises a historical and contemporary link between blood and breastmilk, implicating the historical belief that menstrual blood was transformed to nourish the foetus, and then transformed again into breastmilk after the child was born (Evans and Read 2019). These medical and literary examples demonstrate how historically and culturally embedded notions of the fungibility of fluids and instability of the female body were applied to encourage maternal nursing. Medical texts in particular present the dangerous consequences of repressing milk, blaming many puerperal conditions upon a lack of breastfeeding. Hepp’s novel presents a highly dramatic form of female leakage, in which the Baroness is presented as punished for her avoidance of breastfeeding, demonstrating a lack of control over her own body which is unable to contain itself. Altogether, these representations emphasise how medicine presented the maternal body in ways that justified pronatalist encouragement of maternal nursing and how a broad range of discourses demonstrate a fixation with how women used and directed their flow of milk.

Excess Milk

Imagery of an excessive flow and flood of milk are also located in representations of mercenary and working-class nursing, but to promote a contradictory rhetoric, highlighting how similar arguments were distorted for different social classes. These sources suggest that too much milk, or that which is too rich, could be just as dangerous as too little, imagery which reinforces the necessity of controlling the emission of fluids. Martin-Fugier notes that nurses who were under twenty were deemed to have milk which was ‘trop nourrissant, trop proche du lait de vache’ (1978: 2), and Donné mentions that malnourished urban children often became ill when fed upon the milk of a robust rustic nurse, as it was too rich and too abundant (1842: 50). This comparison, between the sickly urban infant and the overflowing nurse is also present in literary texts such as *La Nourrice, monologue*. After the nurse reveals ‘[son] sein énorme, grossi encore par le lait du voyage’ and begins to nurse the infant, the mother panics: ‘Il me semble qu’elle en a de trop; elle va avoir une indigestion’ (Daudet 1884: 68). The large breasts and excessive milk of the wet-nurse is also present in Couvreur’s *Le Fruit* on the exterior of the nurse’s bureau: ‘Une enseigne, sorte d’enluminure grotesque qui représentait, avec des tons criards de chair congestionnée, une femme aux vastes mamelles allaitant un nourrisson bouffi’ (1906: 33). This notion of excess is emphasised when, on entering the building, the doorway is blocked by ‘l’obésité d’une matrone accourue au bruit de la sonnette’ (1906: 33). In this latter description, this excess and size is presented as threatening and linked to a lack of control, evidenced in the sign depicting an infant swollen from excess milk.

This excess is also found in Zola’s *Germinal* through the previously studied character of La Maheude, who embodies imagery of excess and a dangerous overflow of milk. Whilst, as noted by Hennessy (2006), La Maheude’s milk calms and silences her crying infant, it is also described in terms of its endless supply that gorges the infant in a threatening manner.²⁷⁹ La Maheude falls asleep whilst nursing, ‘sa fille en travers du ventre, gorgée de lait, assommée elle aussi, et s’étouffant dans la chair molle des seins’ (1968: 105). On waking, the infant is ‘à demi-étouffée sous la coulée énorme des seins’ (1969: 105).²⁸⁰ Her breasts are also

²⁷⁹ Caron is heavily critical of the mother who repeatedly nurses her child when it cries, leading to vomiting and more crying, blaming many problems to ‘[la] perpétuelle présentation du sein’ (1858: 7).

²⁸⁰ Physicians repeatedly warned against sleeping with a nursling due to the likelihood of suffocation. A similar situation can be seen in Rachilde’s *La Marquise de Sade* (1888), in which the wet-nurse accidentally suffocates her nursling after taking him into her bed (1888: 163-64).

described as ‘un sein lourd comme une outre’ (1986: 117) and the milk as ‘[une] source continue’ (1986: 127). Hence, the size of La Maheude’s breasts and the quantity of her constantly flowing milk are presented as threatening and harmful to the infant. This description, in addition to those above, presents excess milk and large breasts as symptomatic of a lack of bodily control, linking to Kukla’s aforementioned reference to the nineteenth-century search for ‘principles for detecting and distinguishing between orderly and disorderly maternal bodies’ (2005: 95). Whilst aimed at the upper- and middle classes, imagery of the leaking female body is employed in a positive manner to validate maternal nursing. However, for the working classes and wet-nurses, this leaking and inability to control and ration their milk is presented as disrespected and threatening, consequently portraying their bodies as disorderly. This is particularly emphasised in *Germinal* where La Maheude’s excessive lactation mirrors the excessive and allegedly irresponsible reproduction of the mining community.

Therefore, these representations of the leaking female body, alongside images of excessive or flooding milk demonstrate how perceptions of milk and nursing differed between social classes, and how medical and pronatalist identification of orderly and disorderly maternal bodies filtered into literary texts and popular ideology. Whilst leaking milk was used in the upper classes to encourage nursing, for the working and rural classes, the same ideology was employed to evoke disgust and imply a social threat.

Milk as Moral Nourishment

Within the nineteenth-century emphasis on the flow and usage of milk, discourses examining the purity and pollution of milk extend beyond the chemical and physical into the metaphorical and moral. Just as physicians attempted to detect the presence of diseases in milk, they showed concern around how morality, vice or personal characteristics could be transmitted through nursing. This notion existed far before the nineteenth century, demonstrated by Yalom’s examination of the breast in the middle ages (1997: 44), Maher’s identification of similar arguments in sixteenth-century Britain (1992: 28), and those of Kukla, based on the seventeenth and eighteenth centuries (2005: 45-47).²⁸¹ Notably, this

²⁸¹ Fildes also traces the history of this belief, tracing it back to antiquity (1986: 189).

imagery is present in Rousseau's *Émile*, in which a mother's milk is presented as 'the actual currency for the transmission of sociable second nature itself' (Kukla 2005: 42), resulting in milk being presented as the conduit for patriotism and civic love. This notion prompted anxieties surrounding maternal and mercenary nursing. In nourishing a child, a woman 'was seen to be reproducing herself; the child was the nurse' (Fildes 1986: 189), as found in *Fécondité* as Marianne says of nursing her infant: 'je sens que je passe toute en lui, c'est un délice' (Zola 1899: 234). It is therefore possible to detect an anxiety around the differing roles of mother and nurse. If a woman employed a nurse to breastfeed her child, would the infant remain hers or would she be displaced by another's influence?

The application of this belief is particularly interesting in the nineteenth century. In a similar manner to how notions of the leaking female body were applied, medical texts illustrate how scientifically disproven theories continued to be employed, or were adapted to reinforce pronatalist rhetoric. Fildes asserts that after 1800, writers began to question the legitimacy of the belief in milk as a moral or behavioural vehicle (1986: 189), and physicians such as Fossangrives denounce the notion, saying that any similarities between nurse and child are picked up through observation (1882: 151). Despite the supposed medical disbelief in this concept, variations of it are found throughout guides and pamphlets on nursing and in literary texts. It also resulted in issues for hospices and crèches, who had difficulty sourcing wet-nurses as they were unwilling to employ unwed women due to popular beliefs that 'immorality' would be transmitted through their milk to the infant (Fuchs 1984: 135).

Until the latter quarter of the century, texts represented traditional notions of milk as moral nourishment. For example, in 1852, Béclard states that the immorality and character flaws of a wet-nurse could manifest themselves as 'des dérangements' (1852: 45) in her milk, which could harm the nurseling. Whilst Brochard also argues that 'la mère qui a nourri elle-même peut seule dire que son enfant est formé à son image: car si le lait renferme, comme le sang, la force ou la faiblesse, il renferme, comme lui, le vice ou la vertu' (1874a: IX). If a child was given to a wet-nurse, the imprint left by breastmilk 'est souvent celle d'un vice héréditaire honteux ou incurable' (1874a: X). Brochard notably incorporates this notion into parabolic short stories encouraging maternal nursing. In one story, a young mother is distressed when her nurse appears to lose her sanity, fearing for her child because 'j'ai lu quelque part que le caractère et les qualités morales de la nourrice se transmettaient au

nourrisson comme ses qualités physiques’ (1873b: 12). This transmission also exceeded the relationship between nurse and child and was believed to be present in other forms of milk. In *Le Nouveau-né de Paris* (Dubeau 1848), during a discussion of alternatives to breastmilk, Abbé Dubeau states ‘on aurait dit qu’ils prenaient en même temps, avec le lait de la chèvre, le caractère sauvage et ombrageux de cette pauvre bête’ (1848: 286).²⁸² However, Boudard argues that despite the shortcomings of goat’s milk in comparison to that of the infant’s mother, it is an improvement upon the immoral and often unpure milk of the mercenary nurse: ‘elle [la chèvre] offre des mamelles toujours gonflées d’un lait qu’aucun vice ne vient souiller, qu’aucune émotion ne vient tarir’ (1869: 40). Thus, according to this author, animal’s milk avoided the transference of immorality or the danger of turned milk.

However, towards the very end of the century, medical representations of this notion undergo a shift in meaning. As examined earlier, the jurisdiction of breastfeeding passed from the philosophical domain to that of medicine. Similarly, ideologies of milk as moral nourishment were adapted to suit medical discourses. The morals and emotions of a nurse were increasingly presented as impacting on the infant’s *health*, rather than its *morality*. In similar imagery to that found in discourses of pregnancy, strong emotions or immoral behaviour were seen to instantaneously harm the infant through the medium of ‘turned’ or polluted breastmilk.²⁸³ Cassine argues that strong emotions such as anger or anxiety could modify breastmilk and ‘sont quelquefois la cause de convulsions, de diarrhée et même d’attaques épileptiformes du nourrisson’ (1894: 90 and Doze 1874: 40). Similar examples are cited by Ardenne, who claims that after finding out her husband had died, a woman ‘présenta le sein à son enfant; celui-ci donna, bientôt après, les signes de la plus violentes agitation et mourut en quelques instants’ (1881: 90), and by Fossangrives, who recounts how an infant suffered an attack of eclampsia after his nursing mother had ‘une crise de nerfs’ (1882: 149).²⁸⁴

It is therefore possible to perceive how medicine adopted a historical ideology surrounding the flow of milk between nurse and infant and adapted it to suit medical discourses, whilst continuing to reinforce the importance of a mother’s behaviour during nursing. Despite the shift in emphasis from moral to medical, these representations continue to illustrate how milk

²⁸² Dubeau notes that this transference is reciprocal and that aggressive goats were known to become maternal and gentle after nursing infants (1848: 288)

²⁸³ Chapter Four examines how distress caused in pregnancy was perceived to imprint upon a child.

²⁸⁴ Similar examples are found in Ardenne (1881: 89), Caron (1859: 59), Chambellan (1822: 18-19) and Halmagrand (1867: 55-56).

could be turned or polluted by emotional and moral changes. These fears can also be viewed as a part of upper-class and bourgeois anxiety over social contamination.²⁸⁵ Indeed, the social threat posed by the wet-nurse originates in the notion that she ‘circulates her body fluids upwards’, as Berry argues that the discussion of wet-nursing in medical manuals ‘had as much to do with social difference as it did with either medical authority or gender’ (Both Berry 1999: 68).

Alongside this emphasis on how wet-nurses’ milk could change an infant are multiple examples of changelings. Monot and Segay both comment upon the frequency of mix-ups in which infants were confused during transportation, a swap which could replace an upper-class infant with one from the working classes (1867: 44 and 1878: 141). This comparison with transformative milk is found most explicitly in the aforementioned parabolic story in *La Jeune mère* entitled ‘Les Deux Amies’, in which a young mother fears that her nurse’s madness will manifest itself in her infant through her milk. In the same story, a parallel plot sees a different young mother send her infant to nurse in the countryside. Once weaned, a healthy child is eventually returned to the mother. However, several years later it is revealed that the original child died and the nurse had replaced the nurseling with her own infant in order to guarantee her income. The child that was returned to its upper-class mother was therefore a peasant changeling. The story ends with the first mother saying to the other: ‘nous sommes malheureuses de [...] ne pas avoir nourri nos enfants nous-mêmes. Tu n’as plus de fille et la mienne deviendra peut-être folle’ (Brochard 1873b: 12).

These close links imply that the influence of a wet-nurse’s milk on a child alters the child so completely that it is akin to a changeling. They built on contemporary anxiety surrounding degeneration, suggesting that the ‘vices’ of the working classes were spreading through the pollution of milk and nurses’ influence on their infants. This rhetoric encouraged maternal nursing whilst condemning wet-nursing, promoting the transferal of socially-appropriate characteristics through nursing one’s own child. This is summed up in *Fécondité*, as Marianne attests that she would never employ a wet-nurse:

Non, jamais, jamais! j’en serais trop jalouse, je veux qu’il ne soit fait que de moi, sorti de moi, achevé par moi. Ce ne serait plus mon enfant, si une autre l’achevait.

²⁸⁵ Golden comments that the stigma surrounding the commodification of breast milk in the twentieth century was heavily influenced by the nineteenth-century association of commodified breastmilk with working-class providers (1996: 76).

Et il ne s'agit pas que de sa santé physique, je parle de tout son être, de l'intelligence et du cœur qu'il aura qu'il doit tenir de moi, de moi seule. Si, plus tard, je le voyais sot et méchant, je croirais que c'est l'autre qui l'a empoisonné.
(Zola 1899: 233)

This notion, espoused by Marianne, is mirrored in the other characters of Norine and her son Alexandre. Seduced by her married employer, the working-class Norine refuses to nurse her illegitimate son and surrenders him to the State, after which he is sent out to a wet-nurse in Rougement, a village notorious for neglectful nurses and infant mortality. Many years later, Norine who retained and nursed her second child is sought out by her abandoned son, Alexandre. However, the novel emphasises that she sees nothing of herself in him, only recognising a resemblance to his father (1899: 619). In contrast to the honest and hardworking, albeit poor, life of his mother, her illegitimate son consistently commits crimes, leaving his many jobs due to 'toutes sortes de vilenies' (1899: 626) and eventually assisting in a murder. Indeed, the text reinforces the lack of maternal influence: 'la bête humaine retournée à l'état barbare, abandonnée dès la naissance, en proie aux instincts antiques de pillage et de carnage' (1899: 631). Marianne's notion that another's milk could poison the morality of a child is therefore emphasised in the representation of Norine and Alexandre, as the latter's immorality and criminality is linked to the immorality of Rougement and juxtaposed against the honesty of his genetic mother. Raising imagery of milk as moral nourishment, in addition to imagery of pollution and poisoning, the novel therefore emphasises nineteenth-century rhetoric that maternal duties extended beyond birth, and that a mother was also responsible for nursing and raising her child; doing so was the only way that her child would be truly 'hers'. Using any other nurse risked polluted milk and a polluted infant.

Flow of Milk in *Fécondité*

Drawing together these different images of flowing milk, a literary embodiment of these discourses lies at the very heart of Zola's *Fécondité*; the evangelical glorification of maternal nursing and its link to the land and nation. However, before exploring the role of milk flow in this text, it is important to note that this imagery does not stand alone, but is rather a continuation and variation of broader imagery of 'flows' such as rivers and floods found in Zola's *œuvre*: Money in *La Curée* (1872), alcohol in *L'Assommoir* (1877), food in *Le Ventre*

de Paris (1888) and clothing in *Au Bonheur des Dames* (1883), to name but a few. The very basis of ‘Les Rougon-Macquart’ is the ‘flow’ and transference of the hereditary ‘fêlure’. However, as noted by Noiray, these images are presented negatively, as either financially, socially, morally or physically harmful (2015: 257). This negative trend continues until *Le Docteur Pascal*, in which the first positive representation of ‘un fleuve du lait’ is introduced in the greedy and healthy nursing baby, in contrast to the anaemic Charles who dies through blood loss.²⁸⁶ In these images of nursing, milk is endowed with regenerative significance, implying that the infant is free from the hereditary ‘fêlure’: ‘[Clotilde] sentait le meilleur d’elle-même, ce lait pur, couler à petit bruit, faire de plus en plus sien le cher être sorti de son flanc. L’enfant était venu, le rédempteur peut-être’ (2018: 263).

However, it is in *Fécondité* that Zola truly expands upon imagery of a flow of milk, explicitly linking maternal nursing with agriculture, and both human and natural regeneration. The text also links into the nineteenth-century distinction between orderly and disorderly maternal bodies, as the river of milk flowing from the healthy and pronatalist Marianne is juxtaposed against the ‘disorderly’ bodies of Valérie and Reine Morange who are presented as exsanguinated by their attempts to evade maternity through abortion.²⁸⁷ As we have already seen, the excessive flow of milk in the working classes and the wet-nursing industry was condemned as threatening and suggestive of a lack of bodily control. However *Fécondité* features a glorification of Marianne’s seemingly never-ending, but unthreatening flow of breastmilk. The novel employs scenes of maternal nursing to symbolise civic and national nourishment, placing emphasis on the transmission of milk through the use of agricultural and liquid imagery. Although breastfeeding her child, the text presents Marianne’s milk as flowing into and feeding the land and nation: ‘[Elle] ouvrait la fontaine de vie qui coulait de sa chair sur le monde’, implying that this expansion contributes to the expansion of ‘la moisson humaine’ (both 1899: 230).

Descriptions of Marianne’s nursing are consistently mirrored against the state of the land. She nurses:

²⁸⁶ This is not to say that negative representations of flows or rivers do not continue past this point. The representation of the flow of illegitimate seed found in *Fécondité* which has previously been examined in Chapter One is an example of how Zola continues to use the literary device to illustrate a negative and harmful trend.

²⁸⁷ This imagery is explored in greater detail in Chapter Two.

En face de la vaste campagne qui la voyait, sans la honte ni même l'inquiétude d'être nue, car la terre était nue, les plantes et les arbres étaient nus, ruisselants de sève. Puis, s'étant assise dans l'herbe haute, elle y disparut presque, au milieu de cette éclosion, de cette poussée pullulante des germes d'avril; tandis que l'enfant, sur sa gorge ouverte et libre, tétait à longs flots le lait tiède, de même que ces verdure innombrables buvaient la vie de la terre. (1899: 244)

The comparison of her breast's nudity and her immersion in the grass lends itself to the concept that, as her son is nourished by her, so is the land.²⁸⁸ This is reinforced by the movement and noise of breastmilk: 'on entendait le bruit de ses lèvres, comme le bruit léger d'une source à sa naissance, le mince ruisseau de lait qui devait s'enfler et devenir fleuve' (1899: 247). As in the first example, descriptions of Marianne nursing are immediately followed by imagery of the land:

[S]ous elle, du sein de la terre en continuel enfantement, elle sentait bien ce flot qui la gagnait, qui l'emplissait, qui lui redonnait du lait, à mesure que le lait ruisselait de sa gorge. Et c'était là le flot de lait coulant par le monde, le flot d'éternelle vie pour l'éternelle moisson des êtres. (1899: 247)

Furthering this link, as Marianne nurses, Mathieu cultivates the land nearby: 'la source bienfaisante s'était remise à couler, comme intarissable. Le léger ruissellement du lait chuchotait, chuchotait sans fin; et l'on aurait dit qu'on l'entendait descendre, s'épandre, tandis que Mathieu continuait à ouvrir la tranchée' (1899: 321). As above, the imagery implies that her milk is also nourishing the ground, as the trench deepens and fills with water:

Le petit ruissellement du lait continuait avec son léger murmure de source inépuisable, infinie, coulant du sein de la mère dans la bouche de l'enfant, comme d'une fontaine d'éternelle vie. Il coulait toujours, il faisait de la chair, de la pensée, du travail et de la force. Il mêlerait bientôt son chuchotement au bruit de la source délivrée, lorsqu'elle descendrait, par les rigoles, vers les terres brûlantes; et ce serait le même ruisseau, le même fleuve peu à peu débordant, portant la vie à toute la terre, le grand fleuve de lait nourricier coulant par les veines du monde, créant sans relâche, refaisant plus de jeunesse et plus de santé, à chaque nouveau printemps. (1899: 322)

²⁸⁸ Ventura traces the late nineteenth-century trend in pastoral images of nursing peasants or farm-workers (2018: 305-12). These images bear many similarities with scenes in *Fécondité* where Marianne nurses alongside the laboring Mathieu. However, Ventura argues that these idealised images were not faithful representations of contemporary agriculture (2018: 312).

In *Fécondité*, water is presented as akin to milk, seen to originate from Marianne and linking her to iconography of Mother Nature or Gaia. Images of irrigation can also be linked to nursing and the correct and incorrect use of all liquids. In farming their land, known as Chantebled, ‘il n’y aura qu’à prendre là-haut les sources captées, les eaux aujourd’hui stagnantes, puis à les verser, à les irriguer à travers ces pentes stériles, qui peu à peu deviendront d’une fertilité formidable’ (1899: 246). This transformation of stagnant waters to fertile soils is comparable to the contrasting of wet-nursing with maternal breastfeeding, stagnant and clear waters mirrored by polluted mercenary and pure maternal milk. Representations of Chantebled and the novel’s use of agricultural imagery can be viewed as a fantasy of breastmilk’s imagined regenerative power, and an embodiment of pronatalist ambitions for the future of France.

These images of milk endow maternal breastmilk, and through this water, with regenerative capabilities, presenting Chantebled as a utopia founded upon pronatalist practices and maternal nursing. However, this imagery also extends beyond the potential regeneration of France, it also extends to French colonies. Otomo argues that, at the end of the nineteenth century, ‘the maternal body and the feeding breast were idealised as the life-giving source for a new nation, filling its future citizens with milk that tied the body to soil and to territory’ (2014: 221).²⁸⁹ Indeed, when Marianne and Mathieu’s grandchild Dominique returns to France from Sudan, he reports that ‘Il n’est pas, aux colonies, de race plus féconde que la race française, elle qui paraît être devenue stérile sur son antique sol’ (1899: 742). This new fecundity is traced back to the Froment dynasty in France: ‘Et ce fleuve de lait charriait la vie à travers les veines du monde, et il se gonflait, et il débordait, pour les siècles infinis’ (1899: 745).

The flow of milk found in *Fécondité* defines the rhythm of the novel itself, emphasising the movement and nourishment of maternal nursing, and the repetition of trickling noises found throughout forms part of the larger lyricism of the writing. As emphasised by Baguley (1973: 204), the repeated refrain provides the text with a rhythmic tempo that mirrors the repeating seasons as time passes and the Froment’s family and estate expand.²⁹⁰ Marianne’s nursing is

²⁸⁹ Otomo suggests that this link also served to allay anxiety over racial supremacy and colonialism, illicit by the acquisition of new colonies after the 1885 Berlin Conference (2014: 221). For how the ‘African Pages’ of *Fécondité* reflect contemporary colonialist and race discourses see Mayer Robin (2006)

²⁹⁰ Noiray also notes that the breastfeeding scenes give rhythm to the text (2015: 259). The refrain, which is repeated at the end of each chapter of book four, is: ‘Et c’était toujours la grande œuvre, la bonne œuvre, l’œuvre

so rhythmic and in tune with nature that, as the earth begins to hibernate in winter, ‘le ruissellement du lait n’était plus qu’un murmure insensible, à peine le petit bruit de la semence hivernale, nourrie par l’éternel fleuve vivant qui coule dans les veines du monde’ (1899: 327). This repetition and rhythm presents the expansion of the Froment family and that of the estate as organic and in tune with the earth and seasons. Seillan refers to this as ‘le principe de la *répétition en expansion*’ (2001: 185; emphasis in original). This is particularly emphasised in the last chapter of the novel, in which descriptions of breastmilk spreading and fertilising are accompanied by expansionist vocabulary. The closing section of the novel reads:

Par-dessus les mers, le lait avait coulé, du vieux sol de France, jusqu’aux immensités de l’Afrique vierge, la jeune et géante France de demain. Après le Chantebled conquis sur un coin dédaigné du patrimoine national, un autre Chantebled se taillait un royaume, au loin, dans les vastes étendues désertes, que la vie avait à féconder encore. Et c’était l’exode, l’expansion humaine par le monde, l’humanité en marche, à l’infini. (1899: 751)

Milk therefore plays a vital role in Zola’s evangelical text, a central part of the rhythm and lyricism of the novel. Just as Baguley argues that Zola’s writing mimics ‘le flot abondant et ininterrompu de la vie’ (1906: 203), milk is presented as essential to this flow. In contrast to the multiple negative images of milk flow already viewed in this chapter, *Fécondité* provides an exceptional example of how the flow of maternal milk, used in the ‘correct’ manner, could nourish not only the infant, but the land, nation and colonial empire.

*

Across a broad spectrum of medical, popular and literary texts, it is possible to perceive a sustained focus on the flow of milk, its distribution, its ability to be pure or polluted and its control or leakage. Representations of polluted milk are employed to reinforce class ideologies and villainise the wet-nursing industry, whilst images of the leaking female body are similarly used in different ways to enforce maternal nursing and condemn mercenary nursing. This condemnation is continued further in imageries of milk as moral nourishment, in which immoral characteristics and vices were perceived to be transmitted. Despite medical

de fécondité qui s’élargissait par la terre et par la femme, victorieuses de la destruction, créant des subsistances à chaque enfant nouveau, aimant, voulant, luttant, travaillant dans la souffrance, allant sans cesse à plus de vie, à plus d’espoir’ (1899: 372).

appropriation and variation of this ideology, its use continues to emphasise the negative potential of milk when used ‘inappropriately’, as judged by medicine. Finally, *Fécondité* embodies the late nineteenth-century focus on milk flow, drawing upon metaphors of nourishment and agricultural imagery to present maternal milk as the ambrosia of regeneration, emphasising, in contrast to other texts, the potential of breastmilk when used and circulated ‘correctly’. These various representations reinforce how historical and cultural ideologies surrounding breastfeeding and milk were adapted, employed and exploited to enforce medical and political pronatalist policies and illustrate a key element in the contemporary focus on the regulation of fluids.

Conclusion

The breadth of sources used in this chapter, from the range of medical texts aimed at both physicians and mothers, to the scope of literary sources from canonical works to popular novels and sensationalist short-stories, illustrates the extent to which breastfeeding was perceived to lie at the heart of infant mortality, depopulation and, more broadly, the ‘health’ of the nation. The functioning of bio-power, active at the level of the individual and the national is visible through the legal changes and increased regulation of nursing that took place at the end of the nineteenth century. The emphasis on bourgeois and upper-class women’s civic ‘duty’ to nurse is reinforced by an emphasis on the sacrificial mother, indicating attempts to restrict women to the domestic home and their maternal duties. However, as visible in both art and literature, some women attempted to juggle maternal duties and a social life, an option which was facilitated by changes in women’s fashion which permitted more convenient nursing. Within the working classes, this increased regulation was enforced through the implementation of the Roussel Law and the establishment of crèches, maternity hospitals and milk dispensaries. As visible in literary and artistic sources, the charitable and benevolent intentions of these medically controlled institutions were accompanied by attempts to normalise and popularise medically sanctioned nursing practices. These representations all emphasise efforts to distinguish between correct and incorrect nursing practices, or orderly and disorderly maternal bodies, and to correct improper practices. Furthermore, representations of the desexualised breast of the wet-nurse justifies and normalises its nudity in public spaces, in addition to emphasising the ownership

of the nurse, her breast and consequently her milk. The few representations which illustrate a sexualisation of the nurse's breast reveal anxieties over the transmission of syphilis, linking the figure of the wet-nurse with that of the prostitute.

This broader notion of correct nursing practices brings to the fore the importance of milk to the future of the French nation. Thus, within this increased regulation and emphasis on correct maternal practices, is a palpable anxiety surrounding the flow, circulation and purity of milk. Discussions over the purity of both breast and cow's milk are accompanied by explicit concerns over the dangers of polluted milk. This potential pollution is incorporated into representations of the wet-nursing industry to reinforce class ideologies and back up medical denunciations of mercenary nursing. Similar images of leaking or overflowing breasts reinforce ideological notions of the unstable maternal body, and were used alternatively to encourage maternal breastfeeding and discourage mercenary nursing. Indeed, emphasis on both the overflow and excess of milk, and discourses surrounding milk as moral nourishment, illustrate the medical adoption and alteration of historic and popular beliefs surrounding breastfeeding. In medical and literary sources, it is possible to detect how these beliefs were adapted in different ways for different social classes, in order to legitimise medically approved pronatalist rhetoric.

The ideological investiture of breastmilk, which became a symbol of potential national regeneration is emblematised in Zola's *Fécondité* in which it is linked with the land, presenting a utopian vision of how the correct use of breastmilk and its regulated flow could revive degenerate France. This chapter has thus aimed to reveal how methods of differentiating between productive and unproductive maternal bodies were applied to lactating women, to examine how medical advances and depopulation influenced notions of proper and improper use of breastmilk, and to interrogate how these changes manifested themselves in representations of breastfeeding in contemporary literary and medical texts. This focus on defining bodies and directing the flow of milk presents breastfeeding as an increasingly regulated practice, presented within both fantasies of complete, regulated control, and disparagements of any transgression of these new boundaries and limits.

Conclusion

In this thesis I argue that female fertility and the maternal body were sites of great anxiety and contestation at the end of the long nineteenth century. I demonstrate that analysis of representations of these topics reveals the functioning of disciplinary power and the increasing regulation of both female fertility and the maternal body, resulting in the production of ideological ‘knowledge’ of female sexuality, maternity and gender roles. Within this study, I have consistently drawn attention to corporeal, social and metaphorical boundaries, arguing that descriptions and interpretations of these limits, extremities and borders are key to understanding how fertility and the female body were regulated. By interrogating these boundaries, I reveal how they are challenged, disrupted or broken by different aspects of female fertility or maternity, changes which are linked directly to notions of the leaking or unstable female body.

Consequently, I uncover literary and medical anxiety over this instability and attempts to stabilise and regulate its rigidity and the ‘leakages’ of the fertile and maternal body, in addition to controlling broader ‘circulations’ such as social and spatial movement. Inspired by Law’s approach to fluids (2010), I argue that representations of bodily fluids reveal how nineteenth-century pronatalist rhetoric shifted ownership of bodily emissions from the individual to the nation, presenting these emissions as the resource of the body politic. As such, representations of bodily emissions were viewed as subject to the regulation of both the State and medicine, resulting in increasing distinctions between (re)productive and un-(re)productive bodies. This regulation results in the commodification of bodily emissions as they are aligned with imagery of circulation, flow, economy (in both senses of the word), prudence, expenditure and excess. The process through which these terms are applied is consequently shaped by how the use of these liquids impacted anxieties over depopulation and social degeneration, or pronatalist political and medical goals.

However, as this thesis has shown, this regulation was not uncontested. Indeed, the perceived necessity of regulation was prompted by changes in women's behaviour and perceptions of their fertility and body. The study demonstrates that increased social mobility, female labour, and multiplying possibilities of fertility management, including safer contraceptive methods and sterilisation, allowed an increasing number of women to regulate their own fertility and avoid unwanted pregnancies. Nevertheless, although these changes facilitated female autonomy and emancipation, reflecting the growing influence of feminism and neo-Malthusianism, they were still attended by great risk and, for poorer women, potentially fatal consequences. Alongside the increasing methods of fertility management and in some cases, because of them, there is an increasing resistance to medical intervention and anxiety over medical corruption and malpractice. Methods of fertility management and their potential to emancipate women from their reproductive 'destiny' are represented as being re-appropriated by medical professionals who exploit female fertility or sterility for their own gain or to apply theories of eugenics and social Darwinism. As established in this thesis, the sustained medical, legal and political focus on regulating fertility and the maternal body can be seen as a formidable reaction against these opportunities, in addition to reflecting the resurgence of republican values which coincided with military, demographic and medical anxiety over France's future.

Wet-Nursing and Sexual Encounters on the Rail Network: Maupassant's *Idylle*

An example of these intersecting discourses can be viewed in the short story *Idylle* (1884) by Guy de Maupassant, first published in *Gil Blas* under Maupassant's habitual journalistic pseudonym Maufigneuse. In this tale, a wet-nurse travels in the same rail compartment as an emaciated worker from Genoa to Marseilles. Suffering from a painful build-up of breastmilk and separated from her own infant, the nurse becomes increasingly uncomfortable. Her suffering is eventually alleviated when the worker offers to nurse from her and relieve the pressure of the milk. As noted by Fusco, the story mingles tragedy with 'superficial comedy and prurience' (1994: 30) as the worker reveals after nursing that he is grateful for the meal, for he had not eaten for two days. In this short narration, *Idylle* reveals a number of important discourses which surrounded the maternal body.

Firstly, as has been examined throughout this thesis, the short story emphasises ideological tropes of the leaking and expanding maternal body; as the nurse's supply of milk builds, 'des gouttes de sueur perlaient sur son front, et elle respirait avec peine, comme si elle eût souffert d'une oppression pénible' (1884: 1). Indeed, the attention drawn to beads of sweat mimics the repressed flow of milk and implicates the fluid emissions of the maternal body. This expansion is also emphasised in descriptions of her body, as her 'poitrine volumineuse' is presented as attempting to escape as she unbuttons the top of her dress: 'la forte pression de ses seins écartait l'étoffe, montrant, entre les deux, par la fente qui grandissait, un peu de linge blanc et un peu de peau' (1884: 1). This escape is completed as she fully opens her bodice: 'd'un geste inconscient, elle ouvrit tout à fait sa robe. Le sein de droite apparut, énorme, tendu, avec sa fraise brune' (1884: 1).²⁹¹ The comparisons between this description and those examined in Chapter Five are explicit, as her unruly and expanding breasts can be linked to other representations of working-class breasts and imagery of bodily and fluid excess.²⁹²

Furthermore, in addition to reinforcing ideologies of the leaking female body, Maupassant's tale also evokes anxiety surrounding the eroticisation of the maternal breast. The prurience of *Idylle* is implicit, even before the nurse begins to reveal her breast, through descriptions of the landscape. As the story opens, the blooming of the lemon and orange trees imbues the air with 'leurs parfums sucrés, si doux, si fort, si troublants' and the scent of roses 'font de l'air une friandise, quelque chose de plus savoureux que le vin et d'enivrant comme lui' (1884: 1). The amatory scent filling the carriage thus accompanies the text's deeply suggestive description of the nurse breastfeeding the emaciated worker. The pose of the worker, who wraps his arms around the woman in order to get closer to her breasts mimics a sexual position, reinforced by her enjoyment of the encounter: 'Elle avait posé ses deux mains sur le dos du jeune homme, et elle respirait maintenant avec force, avec bonheur, savourant les haleines des fleurs mêlées' (1884: 1). The release that she experiences from nursing is

²⁹¹ The pain experienced by nurses separated from their infants is similarly represented in a poem entitled 'Nourrice' in *Le Monde Illustré* which narrates how a nurse travels to Paris 'dans le noir wagon l'horrible nuit passé! [...] ses pauvres seins gonflés de lait lui faisait mal' (1871: 211).

²⁹² The nurse also mentions suffering from an excess of milk: 'C'est malheureux d'avoir du lait tant que ça' (1884: 1).

also presented as akin to an orgasm as she says 'je me sens mieux. Ça m'a remis l'âme dans le corps' (1884: 1).²⁹³

As with the example of lactophilia found in Hepp's *Le Lait d'une autre*, *Idylle* associates sexualised nursing with imagery of Caritas (Charity), suggesting that the nurse has found a productive and well-deserving source for her milk. Maupassant's characteristic twist at the end of *Idylle* gives the otherwise salacious and comedic story a sombre twist, in which the worker reveals that he is also relieved by nursing from her: 'C'est moi qui vous remercie, madame, voilà deux jours que je n'avais rien mangé' (1884: 1). This single statement reconfigures the quasi-sexual act of nursing into a charitable exchange, through which both parties have been physically relieved in some way. The charitable notion of nursing the starving worker is also linked back to an earlier occurrence when the suffering nurse views a thin and hungry child from the train: 'En voilà une encore que je pourrais soulager. Et le petit aussi pourrait me soulager' (1884: 1). Instead of the child, she nurses the worker, but achieves the same goal as it relieves her and provides him with some well-needed nourishment.

However, despite the relevance of the story's charitable ending, the salacious undertones of the episode can be equated with popular perceptions of the sexual potential of railway travel. Indeed, the story fits within a broader trend in Maupassant's short stories which represent train carriages as the locations of sexual encounters. Along with texts such as *Les Sœurs Rondoli* (1884), *Ce Cochon de Morin* (1882) and *La Maison Tellier* (1881), the railway carriage provides the opportunity for Maupassant to represent the close mingling of strangers for extended periods of time.²⁹⁴ In *Idylle*, the sexual potential of the railway carriage becomes combined with broader debates on the potential eroticisation of the maternal breast, illustrating how its sexual value becomes complicated by maternity through the quasi-sexual encounter of nursing.

The significance of the railway carriage goes beyond its role as a site of sexual encounters, as the rail network itself plays an important role in representations of the wet-nursing

²⁹³ As was implicated in Chapter Five through imagery of ejaculatory milk during the medical inspection of nurses, this encounter in Maupassant's tale presents a reversal of sexual roles, as the female ejaculates whilst the man receives.

²⁹⁴ Corbin comments on this trend, noting that travel became associated with scandalous or sexual behaviour (1990: 596) and Berry has also linked the figure of the wet-nurse with the labourer in Victorian literature, arguing that the mobility of both figures illustrate the possibilities and threats of social fluidity (1999).

industry. In addition to a broader fixation upon the rail network and its possibilities and dangers, the growing network and improved rail lines greatly increased the scope of the wet-nursing industry, permitting quicker transport of nurses and nurslings throughout France and beyond into neighbouring countries (Sussman 1982: 161).²⁹⁵ As well as perpetuating the ignorance of parents as to the care of their child, visual, literary and medical media drew attention to the common sight of nurses and their charges in third-class carriages.²⁹⁶ These representations emphasise the appalling conditions of this transport in which infants were ‘transformé en colis’ (Brochard 1874a: 53) and transported like cattle.²⁹⁷ Brochard describes the common site of nurses travelling to Normandy on the train:

[Des nourrices] grelottent avec leurs nourrissons dans les wagons de troisième classe. Si elles veulent dormir quelques instants, [...] elles déposent leurs nourrissons sur les bancs de bois où [...] ces pauvres enfants se refroidissent et meurent, ou contractent des maladies presque toujours incurables. (1876a: 337)

This imagery is also present in Zola’s *Fécondité* through the ‘meneuse’ La Couteau and her continual travel to and from Paris and the village of Rougement where she places infants and sources nurses. Within these descriptions, the rail industry is presented as complicit in her constant activity (1899: 255).²⁹⁸

This broader representation of the rail industry as key to the functioning and failings of the wet-nursing industry is evident in *Idylle*, which explicitly represents the nurse’s physical and emotional suffering from being separated from her own child. Indeed, within the broader consideration of regulation and circulation in this thesis, the multitudes of representations linking wet-nursing to the rail network illustrates a contemporary concern towards the

²⁹⁵ For example Manet’s *Le Chemin de Fer* (1873), Monet’s series of paintings of La Gare St. Lazare, Zola’s *La Bête humaine* (1890) and *Lourdes* (1894). Before the development of the rail industry, nurses would undertake the arduous journey to Paris in covered wagons (Fildes 1988: 222).

²⁹⁶ See Brochard (1874a: 530), Stahl (1878) and Sussman (1982). Fildes also identifies a direct relationship between ‘the amount the parents could pay and the distance they had to send their children’, the poorer the parent, the further away they had to send their infant (1988: 222).

²⁹⁷ Many authors draw attention to the extreme temperatures found in third-class carriages and the health implications for both nurses and nurslings (Brochard 1874a: 35; Chassinat 1866: 81; Fajole 1877: 44; Monot 1867: 42). Indeed, Monot argues that the travel of nurses brings the rail industry so much revenue that they should build dedicated carriages for the transportation of nurses and nurslings, ‘chauffés en hiver, ventilés en été et abrités du soleil’ (1867: 44).

²⁹⁸ Despite these contemporary links, having analysed the correlation between travel time between Paris and Avalon and nursling mortality in that region across the nineteenth century, Fuchs asserts that it is unlikely that the decline in mortality seen towards the end of the nineteenth century was influenced by the decline in travel time, indicating that the journey did not have as large an impact on nurselings’ health as contemporary sources suggest (Fuchs 1984: 206).

geographical circulation of women's bodies. As multitudes of women flocked from rural areas to big cities to work as nurses, and infants were sent in the opposite direction to the countryside, this reciprocal movement of bodies caused great anxiety. In a contemporary climate of depopulation and fears over France's future, the movement of nurses and infants on the rail network can be viewed as symptomatic of a much wider concern over the circulation and regulation of maternal bodies and infants. Returning once more to Maupassant's *Idylle*, this short story reveals how wider infrastructural changes impacted upon representations of the maternal body and, more broadly, female fertility. In addition to reflecting a wider fixation on the leaking female body, Maupassant's tale is indicative of a broader anxiety over the sexual implications of rail travel and, in line with the broader focus on the regulation of maternal bodies, the story's link between trains and nurses reveals profound anxiety over the national circulation and management of the bodies of both nurses and infants.

Research Summary

In the first chapter, I examined representations of contraception and conjugal fraud, revealing women's increasing control of fertility and their influence on male-centric forms of contraception. However, as embodied in Corday's *Sésame*, despite fantasies of female-controlled fertility, the moral consequences of unproductive, and therefore uninhibited, sex present a threat to patriarchal society. Through an analysis of these *fraudes* and broader imagery of circulation, I argued that fertile potentiality, including male seed, was viewed as a national resource which should be regulated as a precious supply, implicating notions of wastage which were solved by the *égout seminal* of the prostitute, whose body constituted a safe and efficient site of drainage. Chapter Two built upon this focus on bodily fluids, examining how representations of abortion and childbirth incorporate ideologies of the leaking female body, in addition to interrogating representations of the abortionist. Using examples of criminal evidence, as well as medical and literary texts, I argued that anxieties over abortion were linked to the sanitarian movement and aligned the criminal 'emissions' of the process with ideologies of unproductive leakage, evidenced through representations of bodily drainage. I compared these scenes with representations of childbirth, in which

unproductive drainage is contrasted with the (re)productive leakage of birth, highlighting the representational impact of the physician and his role in regulating labour.

Through this analysis, I drew attention to an increasing anxiety over abortionist physicians, raising concerns over the morality and corruption of medical professionals. These concerns were clarified and expanded upon further in Chapter Three, which examined the increasing practice of ovariectomy or female sterilisation. Although both medical and literary texts reinforce the medical abuse of this practice, analysis of scenes of sterilisation revealed how it facilitated the application of theories of eugenics and social Darwinism. Furthermore, by linking representations of working-class fertility to industrialisation and capitalism, I argued that the working-class body is viewed in terms of its (re)productivity in contrast to that of the upper-class *détraquée* whose presence in literary texts is associated with the wider moral threats of degeneration and decadence. Across social classes, representations of the procedure's physical and mental consequences prioritise women's reproductive 'function' whilst revealing increasing anxiety over medical exploitation and experimentation.

Moving from representations of fertility regulation to those of the maternal body, Chapters Four and Five extended the focus on the physical regulation of the female body, whilst also interrogating how women's movement throughout society was increasingly regulated through rhetoric on the maternal body. Beginning with an examination of pregnancy, I argue in Chapter Four that ideologies of the unstable pregnant body were manipulated to restrict women to the domestic sphere and facilitate the desired physical, mental and moral transformation from lover to mother. In contrast to my previous focus on women's bodily emissions, I reasoned that discourses of pregnancy reveal anxiety surrounding the physical boundaries and limits of the female body, manifested in imagery of expansion and absorption. While exposing these anxieties, I further contended that medical discourses and representations of pregnancy reveal attempts to control, regulate and master these limits.

This study of fertility and the maternal body is concluded in Chapter Five, which examined the regulation of breastfeeding, wet-nursing and the public breast, arguing that the broader trends of regulation found throughout the other chapters are united in the practice of infant feeding. I proposed that bodily leakage implicit in the act of breastfeeding reveals a nexus of anxieties and methods of regulation surrounding the ownership, quantity, quality and circulation of milk. As explored in Chapter Four, I argued that representations of

breastfeeding construct ideologies of an absorptive yet leaking maternal body and, by drawing on a broad range of cultural artefacts, I posited that both maternal and mercenary nurses were legally, socially and physically regulated. Through this lens, I linked forms of liquid regulation with social regulation, arguing that the public breast of the wet-nurse and women's increasing social freedom challenged pronatalist ideologies of maternal *devoir*. Furthermore, I proposed that the public display of the mercenary breast was fraught with anxiety surrounding its potential eroticisation, linking to wider social fears of syphilis transmission.

Across these chapters, one of my particular aims was to demonstrate how the regulation of fertility and the maternal body could be situated within a broader contemporary trend of demarcation, organisation and management. As stated in the Introduction of this thesis, this trend has been explored in studies of disciplinary knowledge (Duffy 2015), liquids (Law 1992) and women's movement in urban spaces (Nesci 2007). However, I have demonstrated that contemporary fixation on female fertility and the maternal body is equally as revealing about these attempts to regulate bodies, movement, liquids and the construction of 'knowledge'. Throughout, I have emphasised how the regulation of female fertility and the maternal body can be linked to other contemporary forms of regulation, circulation or anxiety. For example, I have linked elements of fertility and the maternal body with the regulation of prostitution, changes to the sewage system, the establishment of department stores and the Haussmannisation of Paris, illustrating how broader and seemingly unconnected economic, cultural, political, medical and infrastructural changes influenced how women's bodies were perceived, represented and regulated.

Areas for Future Investigation

As evidenced by these connections, drawing together this broad range of sources and bringing to light many cultural artefacts which had previously not been studied has stimulated this particular area of French studies, providing the opportunity to draw new links between seemingly disparate topics and illuminating a section of the complicated web of discourses surrounding maternity and fertility at the end of the long nineteenth century. In doing so, this offers new avenues and opportunities of future investigation within French studies and the

medical humanities. Furthermore, I hope that my collation of medical, popular, journalistic and literary sources can be a useful resource for others who wish to investigate this area, and provide a departure point for future study of women's sexual, social and reproductive roles during the end of the long nineteenth century.

In Chapters Two and Three, I draw attention to a growing anxiety over medical influence and fears of medical corruption. However, the sources used to document how this anxiety intersected with elements of female fertility are just a small proportion of those which deal more broadly with medical corruption or malpractice. Indeed, this astonishing and, as yet, unexplained turn in public opinion has received no dedicated study, with the exception of a chapter dedicated to *Les Morticoles* (Daudet 1894) by Donaldson-Evans (2000). This broader trend, identified through this study of fertility and the maternal body, opens up a new area of medical history and literary representation which challenges notions of medical 'progress' and expanding power. For example, as touched upon in Chapter Three, *Le Mal nécessaire* (Couvreur 1899) reveals corrupt complicity between medical professionals and the exploitation of vivisection on working-class patients. More broadly, *Le Couteau, essai dramatique sur les limites du droit chirurgical* (Espé de Metz 1910) reveals this anxiety within its very title, implicating concerns over the legal and moral rights of physicians. Furthermore, in addition to interrogating the sources of this popular anxiety, the representation of the corrupt physician or 'mad' scientist in science fiction, spearheaded by H. G. Wells's *The Island of Doctor Moreau* in 1896 complicates the literary uptake of this theme. Two novels which offer an opportunity to examine literary representation of the broader Francophone world and embody nineteenth-century malpractice anxiety are Daudet's *Les Morticoles* and Couvreur's *Caresco, surhomme, ou le voyage en Eucrasie* (1904). Importantly, both novels are set in fictional dystopic colonies, modelled yet extrapolated from that created by Wells. As noted by Willis, there are more studies examining the scientific context of naturalist novels than those of science fiction (2006: 3). However, the increasing engagement of French literary scholarship with popular literary sources and 'middle-brow texts' (Cryle 2008), could be extended to the science fiction genre.²⁹⁹ Therefore, this project's acknowledgement and identification of medical, malpractice anxiety and corruption could initiate a much broader study of this literary and popular trend.

²⁹⁹ Examples of recent works drawing upon these popular sources include Le Naour and Valenti (2003) and Ventura (2015).

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In this project, rather than attempting to delineate the exact and entire contextualised space in which fertility and maternity were situated, I have tried to reveal sections of the complex web of intersecting, tangled and often knotted contextual influences and collisions that constitute and surround the topics of female fertility and the maternal body. To achieve this goal I have maximised the breadth of available sources, disrupting both medical and literary hegemonies by blending canonical, scholarly, popular, vulgarised and visual media to broaden understanding of these topics and reveal how methods of regulation were applied and represented throughout French thought within a specific historical period. In doing so, I have argued that these topics constitute an important element of women's studies, representing how the anxieties, changes and imperatives of a specific historical milieu resulted in the regulation and construction of ideological beliefs, which consequently contributed to enduring 'knowledge' on female fertility and the maternal body. Furthermore, I hope that my treatment of sources and methodological focus on liquids, regulation, circulation and boundaries has enriched studies of this era and provides new possibilities for future study.

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