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"Degeneration" was a powerful explanatory paradigm in nineteenth-century France. It was identified as the cause and consequence of a wide array of medical diagnoses and social pathologies, from hysteria and hereditary syphilis to criminality and prostitution. Degeneration was made visible to all in the military defeat of France by Prussia in 1871 and in the country's decline in marital fertility. It was also the subject of close observation by emerging professional specializations such as statistics, microbiology, and urban planning.

If historians and literary scholars have studied the salience of degeneration in French intellectual life, its polar opposite—"regeneration"—has tended to be obscured by the rhetoric of the "civilizing mission," particularly in studies of colonialism. *Medical Imperialism in French North Africa* works to correct this oversight, contributing an empirical case study to histories of French Jews, racial science and eugenics, and colonialism in North Africa. In France, the Jewish community had long been a target for "regeneration." The Roman Catholic priest Henri Grégoire made the connection between Jews and regeneration explicit in a 1787 prize-winning essay, which described the need for Jewish physical, moral, and political "regeneration." At a time when the difficulties of incorporating Jews into the body politic were hotly debated, Grégoire's essay rejected the effectiveness of religious conversion or political naturalization for producing French citizens. Instead, he wrote in favour of moral and physical correction, by means of relinquishing dietary laws or marrying outside the Jewish faith, to give only two examples. As Parks' book demonstrates, the moral and physical aspects of "regeneration" would later become emblematic of French Protectorate policies towards the Jewish population of Tunis and their historic dwelling space, the "*hara*" (Jewish quarter).

Jews in Tunis had historically formed two strands, each with their own distinctive synagogues, cemeteries, and butchers: the Twansa, or Jews of Tunis and the Ottoman beylik more broadly, and the Grana, or Livornese Jews, many of whom were protégés or citizens of Italy. However, Jews of all classes and origins, as well as poorer Muslims and Christians, lived and labored within the *hara*. Following the French military occupation of Tunisia in 1881, both the Twansa and the Grana came under the influence of sanitary regulations, educational projects, and citizenship decrees designed to detach Jews from their Muslim or Italian compatriots and ally them with France and its interests. Colonial officials, urban planners, and physicians were not the only regeneration game in town, however. Instructors for the Alliance Israélite Universelle (AIU), Jewish philanthropists in Paris, Zionist gymnasts, and elite Jewish women also competed to remake Jewish bodies in Tunis—and thus to shape Jewish destiny. Across a broad range of constituencies, Parks

argues, scientific and medical interventions and Jewish colonial identity formation went hand in hand.

By examining an array of attempts to remake the Tunis *hara* without and within—from the demolition or “cleansing” of 1,200 buildings and homes to schoolchildren’s rote learning, and from football clubs to the medicalization of childbirth—Parks aims to depict Jews in Tunis as “rational actors” in their own regeneration and to expose the diversity of viewpoints within the community. This is most successfully achieved in Chapter 4, which uses original research in the Tunisian National Archives and French-language press to document the competition over Jewish youth from the establishment of the Protectorate to World War II. On one side, the AIU offered secular education aligned with republican values and French language and culture. On the other side, Zionist groups mobilized the press and associational life to promote a muscular, united, Hebrew-speaking Jewish identity. Sporting events, such as football matches and boxing tournaments, not only embodied the regenerative virtues of physical fitness but also escaped colonial censorship, and so were key sites for promoting the Zionist message.

Overall, the book could go further in individualizing Jewish voices and disaggregating Jewish practices, in particular by contextualizing claims in relation to location, culture, and time. A case in point is Chapter 5, which describes how elite Jewish women “acculturated” to the precepts of French hygiene and childrearing, muscled their way onto all-male hospital committees, and clashed with poorer mothers over the nature of maternity services. The argument here—that women under colonialism “should not be relegated to a monolithic, isolated entity” (p. 129)—is undercut by inadequate contextualization of quoted sources. Thus Parks notes, “An additional folk practice that irritated the French and their acculturated colleagues was that Jewish women abstained from postpartum breastfeeding for several days and relied instead on the assistance of wet nurses;” women were so ignorant of their children’s nutritional needs, “that the doctor at the dispensary [in Tunis] was obliged to pay for criers to make announcements.” The quoted source, a report by an AIU instructor, describes breastfeeding and weaning practices in the Moroccan city of Fez, not Tunis. Co-lactation may well have existed in Tunis, but the book does not make the case for it. Applying the idea of “rational actors” consistently, we might say that whereas the Alliance instructor in Fez saw social links as vectors of disease transmission, for the new mothers in question they were crucial features of what would now be called a “support network.” Wet-nursing in Third Republic France was a mercenary activity subject to state regulation, but across North Africa milk kinship was—and still is, in some regions—a recognized mechanism for creating social bonds; in Fez, at least, Jewish women as well as Muslims practised co-lactation. Similar points could be made about the book’s treatment of staff-student relations at the Alliance school (events in Tehran are transposed to Tunis); and use of the drug oxytocin (a drug not synthesized until 1955). There are points where the book could have made clearer that quotations from secondary references, too, describe conditions in other times and places.

For historians of medicine and empire, Parks’ book sheds welcome light on Tunisia, a country that has been overshadowed in the literature on colonial medicine by neighbouring Algeria, and in the field of medical anthropology by Morocco. Parks’ is the

first English-language monograph to address French medical policies in Tunisia since the publication of Nancy Gallagher's 1983 work *Medicine and Power in Tunisia, 1780-1900*. It not only extends this earlier study chronologically, but it also gives focused attention to a feature of North African society that has been relatively under-theorized in the literature on colonial medicine—namely, ethnic and religious pluralism. It also shows the potential of mobilizing US historian Nancy Tomes' notion of the "Gospel of Germs" (the domestication and secular evangelization of hygienic precepts, particularly by a social elite) to non-western contexts. In this way, the book indicates the importance of studying religion in colonial medicine outside of the realm of Christian missionaries, until now the main focus of research in this field.