
Review by Linda L. Clark, Millersville University of Pennsylvania.

Historians of women, of philanthropic organizations, of religious institutions, and of the development of the welfare state during the twentieth century will all profit from Evelyne Diebolt's valuable study. Known to historians of medical practice for her previous work on Bordeaux's protestant hospital,[1] Diebolt brings to this volume material from both her *thèse d'état* on women's activities in medical-social associations (as defined under the associations law of 1901), and her recent report on associations for the *Secrétariat d'État aux droits des femmes*.[2] The fruits of her research are presented in two parts. The first half of the book comprises a concise synthesis. The second half of the book is a reference section with useful short histories of twenty-six associations and brief biographies of seventy individuals (forty-nine women, twenty-one men) involved with or inspiring these associations. The latter materials should prove particularly helpful to researchers who want to pursue work on specific individuals or associations.

The central theme of Diebolt's narrative is the way in which certain highly motivated women—both catholic and protestant and from typically bourgeois or aristocratic backgrounds—took the initiative in creating associations and training institutions designed to serve needy women and children. In the process, some encountered major conflicts with their own families and, in such cases, they found compensation in the interactions with other like-minded women and men that associational activity provided. The pioneering women organizers often succeeded in their endeavors because they were inserting themselves into spaces not filled by existing public or religious institutions. To launch or promote associations, these pioneering women leaders readily enlisted the help of male politicians, doctors, or clergymen. Once they had successfully established training facilities or social services, they continued to face the complexities of negotiating with officials from both church and state, the key "institutions" to which the book's subtitle refers. Diebolt contends that, aside from the value of services or allocations provided to the associations' clients, the associations' role in creating new types of jobs for women was an even more significant benefit. Indeed, she terms the associations under study "une école de cadres sociaux" (p. 132).

In four thematic chapters Diebolt treats the associations' relationship with churches and the state; the associations as "a female world" (p. 59); their relations with external publics and forces; and their contribution to the growth of social work as a profession supplanting volunteer activity. For each major theme, a three-part chronological scheme governs the presentation within a chapter: the work of pioneers between 1900 and 1920; the consolidation or extension of earlier efforts between 1920 and 1939; and the place of associations in the post-1945 welfare state. The troubling years of World War Two are excluded because, states Diebolt, they warrant a detailed separate study.

Also excluded from the defined chronological framework is any background on nineteenth-century precursors, which would have been helpful to readers unfamiliar with the earlier history of French philanthropy or official social policy. One wonders, for example, what the creators of Diebolt's associations might have known about women in the organizations treated by Catherine Duprat, Evelyne Lejeune-Resnick, or Jean-Noel Luc.[3] Also not discussed is the nineteenth-century state's development of assistance to needy children and unwed mothers, with an administrative apparatus using male
inspectors paid by the state, some locally paid women visitors (visiteuses), as well as volunteer visitors.\[4\] It is, in turn, not clear how private associations and their volunteers or paid staff trained in institutions created by the associations interacted with the pre- or post-World War One official inspectorate of public assistance which, during the inter-war period, included a number of women inspectresses previously excluded from such public posts.\[5\] The official state inspectorate had an essential role in recommending which private associations would receive state subsidies. Finally, some material on Jewish women's activities (even as part of purely secular associations) would have enriched Diebolt's sensitive handling of the intersection between religious institutions and women's associations. This wish for more linkage between background material and Diebolt's twentieth-century associations is, of course, testimony to the stimulating and important nature of her contribution, which makes the reader want still more.

Appropriately, Diebolt begins with a consideration of the motivations and goals of the founders of these associations. Unlike Michel Foucault and his disciples, she discounts the importance of social control as a motivation and judges the founders to be driven by a genuine sense of mission, often religious in nature. Indeed, some of the important catholic founders were typically single by choice because they viewed their work as akin to a religious vocation and were convinced that totally dedicated individuals could make a real difference in efforts to solve social problems. Central to Diebolt's presentation of reformers are seven women from a first generation, born between 1862 and 1873; eleven women born between 1876 and 1888; and three born between 1894 and 1898 (p. 59). Unlike many contemporary bourgeoises, these women pioneers and their followers would successfully penetrate the masculine world of religion, politics, and civil society, and provide new examples of men and women working together for the public good.

Among the relatively familiar names in Diebolt's first generation are two pioneers in nursing education: Anna Hamilton and Léonie Chaptal. Hamilton, who had earned a medical degree, drew her model of a professional nurse from England's Florence Nightingale. Hamilton's training facility, which was associated with Bordeaux's Maison de santé protestante, would supply some of the professional nurses whom cities hired to supervise the laicization of their nursing staff before 1914.\[6\] Although protestants were only 2.2 percent of the population, protestant women's activism as reformers was noteworthy, as was also illustrated by the efforts of some of the feminist members of the Conseil National des Femmes Françaises. The catholic Chaptal, who held public school teaching credentials, promoted a shorter training course at the Parisian Maison-école d'infirmières than did Hamilton, but both pressured the government to introduce certification for nurses as an important step towards the professionalization of the occupation, and insisted that professional nurses deserved adequate pay.

More than 71,000 French women served as nurses during World War One and their efforts, along with the recognition of great variations in their preparation, contributed to the eventual introduction of state certification in 1922. Yet this certification was looser than either Hamilton or Chaptal would have preferred because many practising nurses could obtain certification through "equivalence". A council operating under the new postwar Ministry of Health oversaw the awarding of such equivalencies. Chaptal, the sister of a priest in the fourteenth arrondissement of Paris, also pressured the heads of catholic nursing orders to encourage sisters to seek certification and more training. By 1937, 42,000 nurses were so certified (p. 68). State certification for social workers (assistantes sociales) came in 1932, with an important revision of requirements in 1938.

The path to certification of nurses, a private association's founding in 1917 of the École des surintendantes to train women to coordinate social work in factories with large numbers of women workers, and women's involvement in new wartime and postwar efforts to combat tuberculosis and improve children's health all illustrate Diebolt's view that World War One provided not a rupture with previous efforts but rather a continuation. Indeed, most of the pioneers remained involved with projects previously started. At this juncture, new contacts also occurred between French women and American women sponsors of
philanthropic efforts in France, and these contacts would help shape future efforts. Diebolt's research in the archives of the Rockefeller Foundation here contributes to her underscoring of the American dimension of the organizational story.

After the war, protestant women, influenced by their American contacts, often proved to be "more combative, more innovative, and more progressive" than their catholic counterparts in the forms of social action they proposed, and Diebolt argues that their level of activity, combined with new opportunities for social work, prompted some catholics to embrace their operational models (p. 49). During the postwar years, employers (especially in the Paris area), provided additional funds for social services and engaged women in their administration. When the state subsequently passed legislation on health insurance in 1930 and allocations to families in 1932, more of the new contributions to caisses from employers and workers were channeled through private associations than public agencies. In turn, by the end of the 1920s, catholics had founded three new international umbrella organizations for providers of medical-social services. Yet there was also competition among catholic organizations. Whereas the Union catholique des services de santé (UCSS) vigorously displayed its catholic allegiance, Chaptal's approach remained more neutral in the Association nationale des infirmières diplômées de l'État français (ANIDEF) that she had founded in 1924. Could the background of Chaptal's mother have influenced her more ecumenical tendencies? In the biographical appendix we learn that her mother was a pious catholic from a Russian Jewish banking family.

Concerning relations in general between catholic and protestant associational leaders, Diebolt finds instances of both cooperation and rivalry. Thus she notes Chaptal's curious omission in 1910 of Hamilton's nursing school from a list of current training sites. The Catholic École normale sociale, launched in 1911, had a more ecumenical and secular counterpart, the École pratique de service social, begun in 1914. During the 1930s, Diebolt finds that catholics' competition with Protestants and secularizers for leadership in the social sector greatly intensified (p. 46). Yet there has also been a tendency in catholic historiography to date the origins of helping the needy to St. Vincent de Paul, and to slight the crucial pioneering role played by many catholic women during the early twentieth century. The catholic hierarchy endorsed the catholic women's associations because they took on functions deemed appropriate for women, and, initially, church leaders seldom interfered directly in their operations. As the associations became more significant, however, catholic women leaders also had to do more negotiating with members of the hierarchy to maintain a degree of autonomy. Protestant women had fewer difficulties in this regard.

After World War Two came "the victory of the welfare state." France launched the Caisse nationale de Sécurité sociale in October 1945, involving the state directly in the administration of contributions from employers and workers (pp. 56, 129). In response, many private associations banded together to found the Union nationale interfédérale des œuvres privées sanitaires et sociales (UNIOPSS) in 1947. This was a defensive move to preserve autonomy for private associations and was undertaken by leaders close to the new catholic party, the Mouvement républicain populaire (MRP). The state, through its regional caisses, continued to channel significant amounts of money for social services to private associations, but along with this new umbrella organization for the private sector came less autonomy for individual private associations.

By 2001, women comprised 84 percent of French nurses with diplomas and the great majority of social workers. Social service associations employed 380,000 people in 1995, including 58 percent of all social workers (p. 133). But at this juncture, men would assume the predominant leadership roles for private associations at the national and regional levels. Whereas women held 40 percent of leadership roles in the UNIOPSS in 1949, that representation had dropped to only 2.2 percent in 1979, and the most recent level is 30 percent (p. 135). Nonetheless, that recent figure compares favorably to the level of women's access to the highest levels of public administration where, in 1993, 118 women held 20 percent of 619 posts of sous-directeurs, directeurs-adjoints, and chefs de service; and it compares even more favorably to
women’s advancement to the cadres of the private sector (9 percent). This statistical story also prompts some telling observations by Diebolt on the subject of women reaching le plafond de verre, a glass ceiling beyond which many still do not advance.

In sum, Diebolt has succinctly recounted the important role that a group of highly motivated women and their associations played in the process of expanding social services, training women professionals, and building the welfare state in twentieth-century France.

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