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June K. Burton, *Napoleon and the Woman Question: Discourses of the Other Sex in French Education, Medicine, and Medical Law, 1799-1815*. Lubbock, Texas: Texas Tech University Press, 2007. xxx & 288 pp. Notes. \$40.00 (hb). ISBN 0-89672-559-6

Review by Suzanne Desan, University of Wisconsin-Madison.

As Susan P. Connor notes in her foreword, “While a thriving historiography of French Revolutionary women exists, women under the Napoleonic regime have, for the most part, been invisible and ignored in historical scholarship” (p. xiii). Fortunately, June Burton’s book joins a recent upsurge of works that have begun to rethink gender in early nineteenth-century France.[1] Burton’s title, *Napoleon and the Woman Question*, reveals the dual intentions of the book: “a great deal of thought went into this title,” she comments (p. xvii). The book aims to probe medical and educational discourses on women’s nature during the Empire and also to focus on Napoleon’s own ideas about women, for “naturally, Napoleon’s own opinions about these issues would have the most importance in determining the sexual politics of the consulate and empire” (p. 4).

The author devotes her opening chapter to Napoleon’s encounters with women and his attitude toward women’s nature more generally. Burton stresses that mechanistic assumptions about bodies stood behind Napoleon’s view that women’s primary role was to become “baby-making machines” (p. 7). He embraced this vision not only because of the influence of the Enlightenment, but also because of his desire to build up the population of France. Burton hastens to point out that even though Napoleon held patriarchal assumptions, he took his own mother’s toughness as evidence of women’s abiding strength and he urged the doctor to save Marie-Louise rather than their son at the most dangerous moment in the birth of the King of Rome. (Luckily, both mother and son survived the ordeal.)

Even as she acknowledges Napoleon’s assumptions about innate male superiority, Burton indirectly seeks to rehabilitate Napoleon by focusing attention on his various innovations that aided women and mothers. For example, although Napoleon abandoned the revolutionaries’ attempts to institute basic schooling for all girls, he founded boarding schools for the orphaned daughters of military figures and opened two impressive schools for the daughters of men in the Legion of Honor. Likewise, he supported the establishment of a national school for midwives in the Port-Royal Hospital and revived the Paris Society of Maternal Charity, originally founded in the late Old Regime. He endowed the revived Imperial Society of Maternal Charity with 500,000 francs. This institution aimed to fuse public and private charity. Its membership comprised elite women, dedicated to aiding orphans and impoverished families. Drawing on Christine Adams’ research, Burton points out that Napoleon and his administrators hoped that this charitable society would also improve the morals of its rich female patrons by encouraging them as well as their poor clients to breast-feed their babies.[2]

Burton situates Napoleon’s policies within a broader examination of medical discourses about female nature. She shows how these medical discourses all revolved around the fundamental question of how female bodies related to women’s moral duties within French society. She highlights how medical science supported domestic ideology and the glorification of motherhood. She discusses not only the ideas of some more well known figures, like Pierre Roussel and Pierre-Jean-Georges Cabanis, but also a

host of lesser known pamphleteers who wrote advice manuals on topics such as how to prevent miscarriage (avoid wearing perfume or dancing all night) or how to conceive the most robust child. J.R.J. Dubuisson's *Tableau de l'amour conjugal*, for example, counsels men who want to "produce *healthy, vigorous, and intelligent* progeny to wait to fecundate their spouses until the arrival of spring, the time when Nature, revived, speaks most energetically to our senses" (her emphasis, p. 61).

In analyzing advice manuals as well as more scientific treatises, Burton discovers a distinction between "humanistic authors" and those more "scientifically trained." This latter group, Napoleon's elite medical scientists and surgeons, emphasized female difference and physical weakness far more than did the theoreticians. Paradoxically, performing surgery, examining tissue, and exploring female anatomy only made these elite doctors more convinced that women were fragile machines, prone to illness all their lives. She writes, "Contrary to what we would imagine, the more surgeons examined tissue, the more sexually biased they became in comparison to the liberal, humanistically trained physicians – even more sexually biased than Napoleon himself" (p. 130). These figures played a crucial role in transforming childbirth and breast-feeding into veritable diseases rather than natural functions; these deeply gendered assumptions contributed to "restricting women to the home" (p. 130).

Burton provides a valuable exploration of these medical discourses, but she tends to adopt a rather rigid distinction between public and private spheres, and often situates thinkers on a span of "more" or "less biased" against women. She tends to oversimplify the complex impact of the French Revolution on gender dynamics, and reduces revolutionary influence simply to forging domesticity and generating anxiety. More generally, Burton is not interested in situating evolving gender ideas into a larger framework by exploring their connections to political culture or social upheaval. As Susan Connor's foreword points out, Burton does not want to write "a theoretical work," but rather to provide "the personal, the anecdotal, and the case study" (p. xiv).

Among these case studies, Burton includes chapters on an interconnected array of additional topics, such as textbooks on legal medicine, medical advice about crimes of infanticide, Napoleon's laws against infanticide, and his national education system for midwives. Her exploration of Napoleonic training for midwives is especially rich. She shows how his doctors, above all Jean-Antoine Chaptal, created a flagship Parisian school to train midwives who learned the trade by helping to deliver the babies of unwed mothers in the childbirth section of La Maternité. Since some 1800 to 1900 births occurred here each year, the midwives-in-training could learn skills from both male professors and leading midwives, such as Marie-Louise Lachapelle and Marie-Anne Victoire. The newly trained midwives frequently returned to their departments of origin to put their birthing skills to use and train colleagues in the provinces. Given its massive war expenses, the Napoleonic government lacked adequate funding for its training programs in the departments, and midwifery remained a low-paid profession. Yet as Burton demonstrates, Napoleon's fervent desire to build the population of France at times had unexpectedly positive results for some women and may have contributed in a small way to reducing infant mortality rates.

In one of her most intriguing chapters, Burton uses the writings of two elite women to probe the personal experience of illness and medical treatment. The British novelist Fanny Burney d'Arblay and Adrienne Noailles, wife of General Lafayette, both left behind letters and documents that detail their struggles with breast cancer and lead poisoning, respectively. The chapter makes for harrowing reading: Fanny Burney successfully underwent an experimental mastectomy without anesthesia, while Adrienne Noailles was essentially poisoned by her doctors' attempts to cure her. Burton's narrative simultaneously emphasizes these women's strategies of survival and explores their marriage dynamics. Both women crafted strong roles and complex intimacy within their conjugal relationships, even as they struggled against their devastating diseases.

As June Burton demonstrates throughout her book, Napoleonic gender debates in education, medicine,

and legal medicine constantly posed one crucial question: “the relations between the physical and the moral in feminine bodies and minds” (p. 200). By and large, Napoleonic answers provided crucial new reinforcement for women’s maternal role. By continually highlighting the intersections between Napoleonic policies and medical discourses, *Napoleon and the Woman Question* provides a wealth of thought-provoking information. It will prove useful to historians of medicine as well as historians of gender and politics.

NOTES

[1] Denise Davison, *France after Revolution: Urban Life, Gender, and the New Social Order* (Cambridge, Mass.: Harvard University Press, 2007); Jennifer Ngaire Heuer, *The Family and the Nation: Gender and Citizenship in Revolutionary France, 1789-1830* (Ithaca, N.Y.: Cornell University Press, 2005); Steven Kale, *French Salons: High Society and Political Sociability from the Old Regime to the Revolution of 1848* (Baltimore, Md.: Johns Hopkins University Press, 2004); Rebecca Rogers, *From the Salon to the Schoolroom: Educating Bourgeois Girls in Nineteenth-Century France* (University Park: Pennsylvania State University Press, 2005).

[2] Christine Adams, “Maternal Societies in France: Private Charity before the Welfare State,” *Journal of Women’s History* 17 (2005): 87-205.

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