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**DEFINING A POPULATION: WOMEN AND CHILDREN IN EARLY REPUBLICAN
TURKEY, 1923-1950**

by

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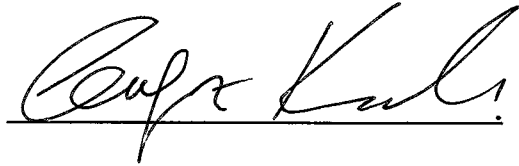
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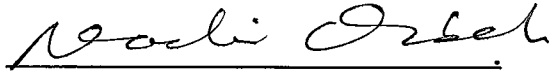
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Title: Defining A Population: Women And Children In Early Republican Turkey, 1923-1950

This thesis looks at the construction of welfare, and women and children as objects of welfare practices, new sciences, technologies and arts of government in early Republican Turkey and covers a period between the late 1920s and the 1940s. Following World War I and the Independence War and in the climate of the nation-state building, several actors in Republican Turkey, including state authorities, intellectuals, physicians and others, were concerned with the size, rate of growth and “quality” of the population as an object of government and management. These new forms of government, which primarily intended to confront the problem of population decline, targeted several objects which included the regulation of the social and employed techniques such as censuses, social insurance, urban planning and housing projects and problematized the city, the home, the family as well as the individual body as objects of their projects. Among these objects, this thesis is primarily concerned with women and children, and the policies and practices targeting them. Through the lens of womanhood, motherhood and childhood, this thesis presents discussions, on a broad scale, of Turkish state and society in a period of the nation-state building and the ongoing efforts to transform society by the Republican elites. The Republican elite’s obsession with the concepts of childhood and proper womanhood and motherhood went hand in hand with their obsession with nationhood and modernity. Like woman’s bodies, children’s bodies promised a field which bore possibilities for the Republican elite to chart their aspirations in the path of nation-state building and symbolized the severed ties with a distant imperial past, which they strove to forget.

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Başlık: Bir Nüfusu Tanımlamak: Erken Cumhuriyet Dönemi'nde Kadınlar ve Çocuklar, 1923-1950

Bu tez erken Cumhuriyet döneminde, 1920'li ve 1940'lı yıllar arası dönemi kapsamakta ve bu dönemde kadınlar ve çocukları; kadınlarla çocukların refah uygulamalarının, yeni bilim ve teknolojilerin ve yönetim sanatının nesnesi olma sürecini incelemektedir. Birinci Dünya ve Kurtuluş Savaşlarından sonra ulus-devletin kuruluş sürecinde, Cumhuriyet Türkiye'sinde devlet yetkilileri, entelektüeller, doktorlar gibi birçok aktör sahneye çıkmış ve nüfusun boyutları, büyüme hızı ve "kalite"siyle ilgili endişelerini dile getirmiş; nüfusu hükümet politikalarının ve yönetim tarzının nesnesi durumuna getirmeye çalışmışlardır. Esas olarak nüfus azalmasının önüne geçmeye çabalayan bu yeni yönetim biçimleri sosyal alanın regülasyonu gibi birçok amacı hedeflemiş; nüfus sayımı, sosyal sigorta, şehir planlaması, barınma projeleri gibi birçok tekniğe başvurmuş ve projelerinin nesnelere olarak şehri, evi ve aileyi sorunsallaştırmışlardır. Bu tez, bu nesnelere arasında, kadınlar ve çocukları; kadınları ve çocukları hedef alan politikaları ve pratikleri incelemektedir. Çocukluk, "doğru" kadınlık ve annelik gibi kavramlar ışığında, daha geniş düzlemde ulus-devlet sürecinde Türk devleti ve toplumu ile Cumhuriyet seçkinlerinin toplumu dönüştürme çabaları konusunda tartışmalar sunmaktadır. Cumhuriyet seçkinlerinin çocukluk, "doğru" kadınlık ve annelik kavramlarıyla olan takıntılı ilişkisinin gelişimi ulus ve modernite kavramlarıyla olan takıntılı ilişkisinin gelişimiyle koşut bir süreç izlemiştir. Kadın bedeni gibi, çocuk bedeni de Cumhuriyet seçkinlerine, ulus-devlet kuruluş sürecindeki özlemlerini gerçekleştirebilecekleri bir alan yaratmış ve unutmaya çalıştıkları imparatorluk geçmişleriyle kopan bağlarını simgelemiştir.

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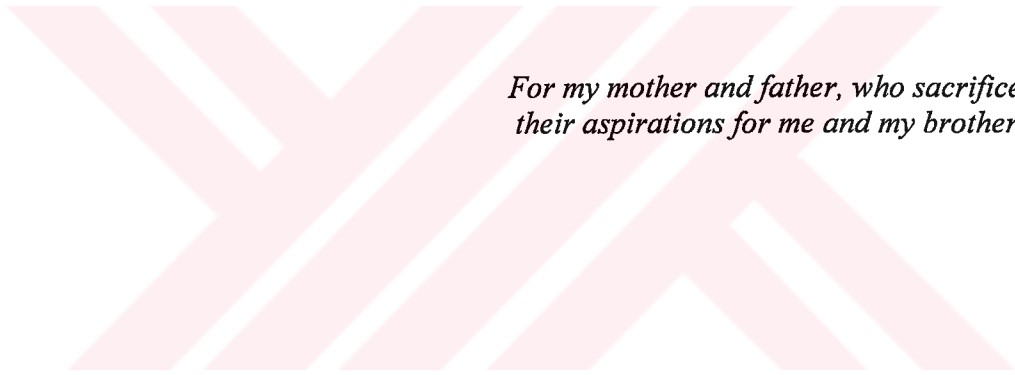
No doubt, several people have their fingerprints on my life, which have directly impacted the writing process of this thesis. The sole responsible for this thesis is my parents, who did not hesitate for a moment to set me independent in my choices. Despite their physical absence by my side during the last seven years, I have always felt their love, generous support and warmth with me. My brothers Cem and Ceyhun have always been very encouraging and helpful.

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*For my mother and father, who sacrificed
their aspirations for me and my brothers.*

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PREFACE

The first chapter of this thesis focuses on maternal and child welfare. The chapter first discusses the constructed images of motherhood in the context of nation-state building and modern state formation. The child question is assessed as part of a broader population question and emphasis is put on the concerns with depopulation in the aftermath of the Balkan Wars, World War I and the War of Independence and the need to promote childbirth and infant and child health in order to assure the military, industrial and economic workforce of the country. The chapter also problematizes the blurring of so-called boundaries of the civil society and the governmental realm in the field of welfare in early Republican Turkey.

Chapter two discusses venereal diseases, a section of a broader realm targeted by the social technologies, and related to it, women and prostitution. The perceptions of physicians and public officials regarding venereal diseases and prostitution are analyzed. The chapter argues that the medical rationale behind a regulation system was the belief that venereal diseases were spread through promiscuous sexual contact with diseased prostitutes, therefore treatment of venereal diseases was not simply a medical or clinical question, but rather was governed by the dominant sexual and social ideology as well. Most of the critiques provided by physicians, social workers, and commentators perceived prostitution as detrimental to social harmony, family life, individual and social health and hygiene, and social morality as well. This chapter also examines the role of the physician in the treatment of venereal disease and the management of prostitution and production of regulatory discourses and practices employed in the so-called “war against prostitution.”

Informed by the governmentality perspective, the present study hopes to contribute to the discussions about Turkish society and politics through a critical reading of the perceptions, discourses and practices of the elite revealed by legal regulations and institutions regarding the “social realm.” It draws on a wide range of sources, among them the proceedings of parliamentary sessions, national newspapers, scientific journals, popular magazines, and proceedings of scholarly conferences in order to keep track of the discourses and practices of “social planners.” Unfortunately, these sources give only a partial glimpse of the whole picture. However, the resistance or celebrations these discourses and practices encountered –which still await to be explored and written about is absent from the current text.

CHAPTER I

INTRODUCTION

In contemporary Turkey, the syllabus of any course on the history of modern Turkey almost always begins with the reform efforts in the late eighteenth and early nineteenth centuries and goes on with the Tanzimat and the Young Turk eras. It necessarily continues with the struggle for independence, the emergence of the one-party state, and comes to an end with the transition to so-called democracy in 1945. If the students are lucky, the syllabus includes one or two articles regarding, perhaps, issues of family and feminism. Unfortunately, the lives of ordinary people and social problems they faced, such as begging, prostitution, poverty, unhealthy accommodation conditions, and parts of their everyday lives such as leisure and sports, are shadowed by political developments such as the foundation of the Progressive Republican Party or the Free Republican Party.

The contents of the syllabi are usually in line with the established trends in Turkish and Ottoman historiography, which until recently has seemed to close its eyes and ears to the productive issues of social history, which have been so dominant in the historiography conducted in the western geographies. The established tradition in Turkish and Ottoman historiography, which has primarily included political and economic history, has begun

be shaken by young scholars who have started conducting research on a variety of field such as family, poverty, welfare regime, social policy, private and public sphere, and education, among others.¹ Surveys on social problems such as poverty, prostitution, and begging will reveal not only a great deal of the social history of Turkey, which has been shadowed by the political developments so far, but unfold the multilayered and complicated relations between the state and the population as well. Such an approach may also allow the construction of a new periodization of Turkish history, different from the well-established one based on political events and regime changes, one which, besides political issues, will place social issues at its core. Different from the old one which was constructed as single party era and multi-party era, this new periodization allows the differentiation between different eras which were shaped around various agents, institutions and policies and informed by the social conditions and different modes of governing deployed to manage these new conditions.

¹ See for example, Nadir Özbek, *Osmanlı İmparatorluğu'nda Sosyal Devlet: Siyaset, İktidar ve Meşruiyet, 1876-1914* (İstanbul: İletişim Yayınları, 2002); Kathryn Libal, "The Children's Protection Society: Nationalizing Child Welfare in Early Republican Turkey," *New Perspectives on Turkey*, no. 23 (2000); Elif Akçetin, "Anatolian Peasants in the Great Depression," *New Perspectives on Turkey*, no. 23 (2000), Cengiz Kırılı, "Kahvehaneler ve Hafiyeler: 19. Yüzyıl Ortalarında Osmanlı'da Sosyal Kontrol," *Toplum ve Bilim* no. 83 (1999/2000); Selçuk Akşin Somel, *The Modernization of Public Education in the Ottoman Empire, 1839-1908: Islamization, Autocracy, and Discipline* (Leiden: Brill Academic Publishers, 2001). No doubt this new approach to Turkish and Ottoman history has shown its impact on the theses and dissertations written at universities. See for example, Yiğit Akın, "Not Just a Game: Sports and Physical Education in the Early Republican Turkey" (Master's thesis, Bogazici University, 2003); Selen Göbelez, "The History of Social Services in Republican Turkey: Social Change, Professionalism and Politics" (Master's thesis, Boğaziçi University, 2003); Özgür Sevgi Göral, "The Child Question and Juvenile Delinquency during the Early Republican Era" (Master's thesis, Bogazici University, 2003). For example, Göbelez investigates the history of social services in Republican Turkey and problematizes the development of social services in a new light as an "art of government." She argues that contrary to the idea of "modernization and the welfare state that attribute an intrinsically democratic and progressive essence to it, social services was surrogated as a governmentality question, whereby the elite aspirations of social control and mechanism of legitimation, are intertwined with the processes of knowledge production and identity formation." Likewise, Akın focuses on the nature of the field of sports and physical education, its origins and its characteristics with a special emphasis on the issues of public health, nationalism, militarization, citizenship, developmentalism and social control. All these developments points to a change in the tide, which embodies new opportunities to evaluate Turkish history in a new light.

As a modest contribution, this thesis looks at the construction of welfare, and women and children as objects of welfare practices, new sciences, technologies and arts of government in early Republican Turkey and covers a period between the late 1920s and the 1940s. Following World War I and the Independence War and in the climate of the nation-state building, several actors in Republican Turkey, including state authorities, intellectuals, physicians and others, were concerned with the size, rate of growth and “quality” of the population as an object of government and management. These new forms of government, which primarily intended to confront the problem of population decline, targeted several objects which included the regulation of the social and employed techniques such as censuses, social insurance, urban planning and housing projects and problematized the city, the home, the family as well as the individual body as objects of their projects. Among these objects, this thesis is primarily concerned with women and children, and the policies and practices targeting them. Since the thesis is primarily concerned with the aspirations and discourses of the political elite regarding women and children, women and children as subjects and their everyday life do not constitute the main theme of this thesis. The voices in this thesis are, for the most part, those of politicians, journalists, intellectuals and physicians of the period under examination, and as such are predominantly male. Although women occupied the ranks of charity organizations and actively participated in welfare practices, it was mostly men who helped the definition and specification of the population for the arts of government and management.

Through the lens of womanhood, motherhood and childhood, this thesis presents discussions, on a broad scale, of Turkish state and society in a period of the nation-state

building and the ongoing efforts to transform society by the Republican elites. The Republican elite's obsession with the concepts of childhood and proper womanhood and motherhood went hand in hand with their obsession with nationhood and modernity. Like woman's bodies, children's bodies promised a field which bore possibilities for the Republican elite to chart their aspirations in the path of nation-state building and symbolized the severed ties with a distant imperial past, which they strove to forget. Furthermore, it embodied not only the possibility of progress, development and reform, but also a threat of national weakness or degeneracy.² Begging and vagrancy were obviously major issues in the public discourse which generated concern about the growing amount of disorder in society. There was a growing hatred toward the idle urban population, which included beggars, vagrants, loiterers and prostitutes. Their uncontrolled presence in public areas was considered a threat to public security and societal order. The threat to public security itself arose mainly from the swelling number of rootless and homeless poor. First of all, their idleness made them useless to society and then burdensome due to their needs and their importunity; second, as a result of their idleness, they became involved in vices which could make them dangerous to public security and the public order. The impoverished condition of children, who were seen as the nation's future and future citizens of the nation, created concerns about the security of the nation's future. According to the Republican elite, allowing children to live on the streets, hungry, naked and forced into labor or petty thievery would result in criminalization and degeneration of the nation.

² Kathryn Libal, "National Futures: The Child Question in Early Republican Turkey" (Ph.D., University of Washington, 2001). pp. 3, 4.

Related to all these, the thesis also sheds light on the construction of “the social” in Republican Turkey, in the sense which includes the constitution of public and private domains and the increasing penetration of the state into the domestic sphere. This process included first and foremost the definition and identification of the population of Turkey as an object of knowledge and management. As Horn emphasizes, the concept of the “social” is a culturally constructed phenomenon, linked to the emergence in the United States and in Europe in the late nineteenth and early twentieth centuries of new forms of knowledge, sciences and technologies and new forms of government and power.³ In the context of nation-state building, laden with aspirations of modernity, the realm of the social in the young Republic was constructed as being threatened by disease, declining fertility and degeneracy, and occupied by the bodies of women and men, which were to be the objects of knowledge, intervention, and techniques invented by the modern methods of statistics, medicine, sociology, social hygiene and social work. Declining fertility, reproduction, a population which was laden with disease and impoverishment, which posed the threat of degeneration were constructed as social problems requiring the urgent attention of politicians and the best minds of the social and positive sciences. Hence, knowledge, management and the promotion of the fertility and welfare of the Turkish population came to the forefront as aspects of modernity experienced in a specific time and geography.

Several actors set out to reinvent Turkish society and fashion new types of men and women. The deployment of social scientific discourses and practices were perceived as essential to the modern art of government. In Dean’s words, “it is the notion of

³ David G. Horn, *Social Bodies: Science, Reproduction, and Italian Modernity* (New Jersey: Princeton University Press, 1994), p. 3.

population that makes possible the elaboration of distinctively governmental techniques and rationalities.”⁴ Foucault, in his article “Governmentality,” explains that the art of government went through great changes in the eighteenth century. Foucault’s analysis sets out to show the way different historical practices of government in order to identify their human objects. He mentions, for the early modern Europe, the emergence of the government of a human collectivity understood as a *population*. Government is the last circle in the series composed by security, population and government. He makes a connection between criticism and transformation at the level of political institutions, innovation and reform within local practices of regulation and normalization. For Foucault, government means “the conduct of others’ conduct.”⁵ According to him, the state does not have a unitary essence, but what should be researched instead is the multiple governmental practices that are exercised through its institutions and elsewhere.

In the same article, which attempts to draw a map of the art of government and governmental rationality from the sixteenth century onwards, Foucault claims that government as a general problem seems to explode, discerning between a Stoic revival, by which he means the question of the government of oneself, and Catholic and Protestant pastoral doctrine, by which he means the problem of souls and lives. At a third level, he mentions the government of children and the great problematic of pedagogy that emerged and developed during the sixteenth century, and lastly the government of the state by the prince.⁶ Unlike the practices of the prince (Machiavelli),

⁴ Mitchell Dean, *Governmentality: Power and Rule in Modern Society* (London: Sage Publications, 1999), p. 107.

⁵ Colin Gordon, “Introduction,” in *Power*, ed. James D. Faubion, *Essential Works of Foucault 1954 - 1984* (New York: The New Press, 1994), p. xxix.

Foucault writes, who “stood in a relation of singularity and externality, and thus of transcendence, to his principality...the practices of government are, on the one hand, multifarious and concern many kinds of people –the head of a family, the superior of a convent, the teacher or a tutor of a child or pupil – so that there are several forms of government among which the prince’s relation to his state is only one particular mode; on the other hand, though, all these other kinds of government are internal to the state or society.”⁷

Inspired by Guillaume de la Perrière’s *Miroir Politique*, Foucault argues that the introduction of economy into political practice is an essential feature of the establishment of the art of government, by which he means the correct way of managing individuals, goods, and wealth within the family and making the family fortunes prosper; in short, wise government of the family for the common welfare of all. Thus, “to govern a state will mean, therefore to apply economy, to set up an economy at the level of the entire state, which means exercising toward its inhabitants, and the wealth and behaviour of each and all, a form of surveillance and control as attentive as that of the head of a family over his household and his goods.” Concerned with the right disposition of things, unlike sovereignty, government has a finality of its own, that is “convenience” for each of the things that are to be governed.⁸ To reach this finality, rather than imposing laws on men, the government employs “tactics.”

In the historical development of the art of government, Foucault sees the age of mercantilism as a milestone at which the first rationalization of power as a practice of

⁶ Michel Foucault, “Governmentality,” in *The Foucault Effect, Studies in Governmentality*, ed. Graham Burchell, Colin Gordon, and Peter Miller (Chicago: The University of Chicago Press, 1991), p. 87.

⁷ *Ibid.*, p. 91.

⁸ *Ibid.*, p. 95.

government, the development of knowledge of state that could be used as a tactic of government occurred. Furthermore, the demographic expansion of the eighteenth century, the increasing abundance of money, the expansion of agricultural production, and the emergence of the problem of population gave fresh outlets to the art of government. Now, identification of problems specific to the population becomes the center of “the science of government.” Through both the identification of problems specific to the population and the isolation of economy, says Foucault, “the problem of government finally came to be thought, considered, and calculated outside of the juridical framework of sovereignty.”⁹ The problem of the population also removed the family from its position as the object of economy. However, whenever information is required concerning population, family occupies its privileged position. The emergence of statistics with their ability to divide, calculate, quantify, and record was also an intrinsic characteristic of the new concept of the art of government. Apart from the decentering of the family as a model towards the end of the eighteenth century, population came to appear as the “ultimate end of the government.” Now, “it is the population itself on which government will act either directly, through large-scale campaigns, or indirectly, through techniques that will make possible without the full awareness of the people, the stimulation of birth rates the directing of the flow of population into certain regions or activities, and so on.”¹⁰

Population provides key things for the conceiving of the art of government. Members of a population were no longer subjects who had to live in the same territory and were obliged to submit to their sovereign, but rather “living, working and social

⁹ Ibid., p. 99.

¹⁰ Ibid., p. 100.

beings, with their own customs, habits, histories and forms of labor and leisure” and “defined in relation to matters of life and death, health and illness, propagation and longevity, which can be known by statistical, demographic and epidemiological instruments,” and which also embodied “possibilities of pathology.”¹¹ Government both depends on the formation of a whole series of specific governmental apparatuses and the development of a complex of knowledges (*savoir*), such as the development of statistics and census taking, and the techniques of epidemiology and demography.

The emergence of the art of government does not necessarily mean the disappearance of sovereignty, incarnated in the Prince. On the contrary, the triangle of sovereignty-discipline-government operates in line with one another. Government, population and political economy, from the eighteenth century onwards became entangle and constituted solid series, which have not been dissolved till today. Thus, Foucault gives greater importance to the “governmentalization” of the state rather than the “statization” of society. Governmentality provides the state with the basic tools necessary to survive.

With the conceptual framework of the governmentality perspective developed by Foucault and his successors, this thesis examines the construction of women and children in the “social” realm of early Republican Turkey as objects of new modes of government and the attendant discourses, policies and practices of state institutions, and private and semi-private institutions as well as a cohort of individuals such as teachers, physicians, and legislators by using state publications, professional journals, popular magazines, pamphlets and national newspapers.¹² It is no doubt that like all projects

¹¹ Dean, p. 107.

which attempt at defining and governing the social, this modernity project made efforts to create “unity in experience”¹³ and an ideal order of society which included certain sections of society and excluded the others, which was tried to be marginalized and kept out of the borderlines, and this ideal order was designed so as to threaten the presence of the transgressors. In order to protect the included sections from dangers posed by the transgressors, the ideal order of society defined everything in moral codes which served as boundary markers; therefore, for example, disease was caused by adultery. Hence, those who were tried to be marginalized and kept outside the borderlines which defined the limits of those included posed the danger of bringing illness, even through a touch. Such moral codes provided tools for defining the relation between different parts of society and creating hierarchy among different classes of society. Unfortunately, the sources at hand do not make it possible to define hierarchy among different classes and draw the borderlines between various sections of society in early Republican Turkey, but rather the current study gives glimpses of all these. In the following pages, how motherhood and childhood were problematized within the Turkish context of nation-state building and how the issue of the child question¹⁴ was conceptualized, how discourses about it became dominant, and what actors came to the forefront will be discussed. Later on, discussion will be made of how prostitution, so-called prostitution-related diseases,

taniyor musunuz? Çalışacağınız bu memleketin içtimai şartlarını bilmek mesleğiniz için dahi lüzumludur.” (Teachers, Doctors and Students of Sociology! Do you know the country where you live? It is necessary, even for your own profession, to know the social conditions of this country where you work). See Recep, “Memleketinizle Tanışmış Olunuz,” *Resimli Ay*, no. 6 (August 1930), p. 16.

¹³ The term “unity in experience” was taken from Mary Douglas, *Purity and Danger: An Analysis of Concepts of Pollution and Taboo*, (Middlesex: Penguin Books, 1970).

¹⁴ The term “child question” as the equivalent of Turkish “*çocuk meselesi*,” is taken from Libal, “The Children's Protection Society.”

and their relation with social organization, family life and the “future of the nation” were problematized, answers will be sought as to why these issues became such predominant concerns and who participated in public, professional, and political discourses and practices will be sought.

In the war against both venereal disease and prostitution and against the child question, the political elite applied a modern, positivist and scientific tone when constructing the political discourse about the well-being and welfare of the population. Most of the critiques provided by physicians, social workers, and commentators perceived prostitution as detrimental to social harmony, family life, individual and social health and hygiene, and social morality as well. Policies regarding women and children, and related to it prostitution and venereal disease, were all but parts of a program which foresaw closer monitoring and regulating of the populace in the name of the national interests.

Physicians, as a professional class, came to the forefront in defining and defending these national interests. In order to legitimize its power in the eyes of the population, the government propagated its policies regarding the organization of the social through the scientific and objective language of physicians. In turn, physicians did not limit their scope of responsibility solely to their patients, but felt responsible for the health of their country as well and thought that they had the authority to diagnose and cure the ills of Turkish society.

Perhaps the determination of the ruling elites to maintain their hold over the state and society, to contain and control all sections of society, the need to create an effective and efficient social order, and, most important of all, the necessity of forming consent for

the state and its policies among the members of the society, whose ties with the past had been severed and who were fed up with the ongoing wars and continuous social turmoil all made an expansion of state intervention in the government of society unavoidable.



CHAPTER II

THE MOTHERS AND CHILDREN OF A NATION

This chapter deals with the issue of the child question and related to it, motherhood in early Republican Turkey and will treat its subject matter in light of an approach informed by Foucaultian conceptions such as bio-politics and governmentality.¹⁵ The social problems which were conceptualized as the “child question” (*çocuk meselesi*) by the Republican elite included such complex issues as disease, the protection of children, infant and child health protection and hygiene, pedagogy, child labor and juvenile delinquency, and provided the elites with the necessary base for the expansion of state intervention in the social sphere. This process brought together not only social control and discipline, but also the establishment of new

¹⁵ For detailed descriptions of bio-power and governmentality, see Dean, *Governmentality: Power and Rule in Modern Society*. Dean describes Foucault’s conception of bio-politics as follows: “It is concerned with matters of life and death, with birth and propagation, with health and illness, both physical and mental, and with the processes that sustain or retard the optimization of the life of a population. Bio-politics must then also concern the social, cultural, environmental, economic and geographic conditions, under which humans live, procreate, become ill, maintain health or become healthy, and die. From this perspective, bio-politics is concerned with the family, with housing, living and working conditions, with what we call ‘lifestyle’, with public health issues, patterns of migration, levels of economic growth and the standards of living. It is concerned with the bio sphere in which humans dwell,” p. 99.

moral values in the family, which crafted new roles for women, especially in the sphere of motherhood.

Informed by such a theoretical framework, this chapter investigates its subject matter under various subtitles. The first part, titled “Mothers of a Nation,” examining in depth the debates on motherhood and ideal childrearing in a variety of medical, scientific and popular journals, deals with the construction of ideal motherhood, childrearing and domesticity in the context of nation-state building and nationalism. The part especially underlines the constructed dichotomy between “ignorant” mothers and “modern, scientific” mothers in the way of preparing a new generation of fit and healthy children. Apart from the nation-state building discourse and nationalism, the part also puts special emphasis on the social technologies improved within a modernizing discourse of a new regime for the government of the population.

The next part, titled “Children of a Nation,” explores the theoretical impulses and approaches adopted so far in the assesment of the relation between children and regimes and state institutions and attempts at explaining the merits of child welfare issue as a field of investigation and research. Later, focusing on the Turkish context, the part studies how the “child question” was constructed and formulated within the Turkish context.

Focusing on the policies and measures adopted in the way of the formation of generations that are physically and morally strong and healthy, the third part, under the heading of “The Child Question as Part of the Broader Population Question” explains how the child question was formulated within the broader population question. Articles of the 1930 Law on Public Hygiene regarding mothers, children and family constitute the core of the part. Departing from the law, the social technologies employed in the

scientific management of the population and how the Turkish political elite attempted to shape and intervene in the social spheres are discussed. The part also shows how the Turkish political elite distanced themselves from the “primitive character” of the Ottoman past in the issue of health at the discourse level. The political role Turkish doctors created for themselves and how they became embedded in the bureaucratic apparatus of the Turkish state are also explored.

The next part, titled “Children’s Needs,” reveals the parameters of the child question, such as the high rates of infant and child mortality; the large numbers of abandoned, orphaned or poor children; malnutrition and disease; child labor and child abuse; and focuses on the child welfare practices. The part also reveals the dual nature of the Republican child welfare which included both the state efforts and private charitable activities. The part argues that the individual acts of benevolence and private initiatives that created private philanthropies rather than political initiatives that resulted in public provision constituted the core of child welfare in Turkey and that these private philanthropies acted as “surrogate” institutions.¹⁶

The fifth part analyzes the nature of the aid to mothers and infants in Republican Turkey, and in the end argues that the history of child and maternal welfare in Turkey should be the history of diverse voluntary associations and private foundation as well as private individual initiatives and local municipal administrations which began to act as surrogate institutions along with the emergence of directives of central state. The part focuses on the practices of charity organisations such as *Himayei Etfal Cemiyeti*, (Later,

¹⁶ See, Kathryn Libal, “The Children’s Protection Society: Nationalizing Child Welfare in Early Republican Turkey.”

Çocuk Esirgeme Kurumu, Children's Protection Society), *Hilaliahmer Cemiyeti* (Turkish Red Crescent), and *Süt Damlası*.

The next part titled "Maternal Employment, Daycare and Carehouses" focuses on elite perceptions of maternal employment, and the problems of poor working mothers. It was during the late 1920s and 1930s that the transformation of the female labor force took place. Since married women also participated in labor, the image of the unified family around the mother began to shatter in the eyes of the elite. Most commentators accused wage-earning women of leaving their children neglected and forlorn. This part argues that the elite discourse mostly focused on children's rights and well-being rather than on women's rights and prerogatives and, as a result, devalued women's productive labor. It also focuses on the practices of carehouses in the working places which were mostly designed for the children of poor mothers, who had no other means to survive than working.

The last part focuses on the the 1947 Draft Bill Regarding the Protection of Orphaned, Abandoned and Abnormal Children (*Kimsesiz, Terk Edilmiş ve Anormal Çocukların Korunması Hakkında Kanun Tasarısı*) and shows that a shift occurred in the presentation of the child issue. The part argues that while the 1920s and the first half of the 1930s had witnessed discourses first and foremost involved in proper and scientific child rearing and child protection in the way of creating a robut generation, later years saw rising discourses mostly focusing on the rehabilitation of vagabonds and juvenile delinquents. It is also claimed that the 1947 Draft Bill served as a site whereby consistent nature of child question and poverty was crystallized.

The Mothers of a Nation

*“Dear robust baby,
You will also be the father of a robust generation”¹⁷*

Tracing the proliferation of debates on motherhood and proper child-rearing through medical, scientific or popular journals makes it possible to define and re-define the parameters of what was considered ideal conceptions of motherhood, child-rearing, and domesticity in the context of nation-state building and nationalism. Mothers were invited to the stage as the sole responsible actors for the physical, moral and intellectual development of their children.¹⁸ With the advent of a “modernizing” discourse, child-rearing became embedded almost exclusively in the sphere of mothers, and its aim became the creation and cultivation of new types of children who were physically, mentally and morally healthy, robust and fit, and who were reared in line with the desired modern, rational and hygienic principles.¹⁹ These sole actors, whose competence was very significant in the way of “the rational upbringing of children,” and the discourse of this new, “modern” motherhood were supported and promoted by governmental organizations and surrogate organizations such as the Children’s

¹⁷ “*Sevgili gürbüz bebe, sen de gürbüz bir nesle baba olacaksın.*” Abdülrezzak Osman, “Ümit'e Mektuplar,” *Gürbüz Türk Çocuğu*, no. 29 (February 1929).

¹⁸ See for example, Dr. Feyzullah Doğruer, “Çocuk ve Anne ile Diş Hekiminin Alâkası Neden ve Nereden Başlar?” *İş: Felsefe, Ahlak ve İçtimaiyat Mecmuası* 9, no. 34 (1943).

¹⁹ The Turkish experience in this regard was part of a broader global trend. See, Lara V. Marks, *Model Mothers: Jewish Mothers and Maternity Provision in East London, 1870-1939* (Oxford: Clarendon Press, 1999). Jewish mothers were described as “good mothers with robust children” by several medical practitioners, voluntary workers and statesmen in late nineteenth-century England, p. 1.

Protection Society,²⁰ as well as by intellectuals, physicians, hygienists, and social workers.

Within the Turkish context of nation-state building, untutored, “ignorant” mothers were problematized as unsuited for the preparation of a new generation of fit and healthy children. The Republican elite constructed a direct link between proper mothering and the progress of the nation to the level of the “civilized” nations of the (Western) world. Their reference point for the concept of proper motherhood was the advanced, rational, and scientific European pedagogy. The discourse on proper mothering and child-rearing was often couched in terms of a concern which was related to the preservation of the national features, to the physical and racial degeneration²¹ and developed within an environment of acute social problems such as child poverty; high infant and child mortality rates; malnutrition and disease; juvenile delinquency; a large number of orphaned, abandoned, or poor children; child labor; homelessness; begging; child abuse and abandonment; and child prostitution, and fed by social technologies improved within the modernizing discourse of the new regime.

The concern for proper mothering was often related to the concerns for the national interests. Since the children were posited as the “citizens of the future,” an asset upon which the future of the nation would be built, it was no surprise that publications on the rational, hygienic and proper mothering in line with the Western ideals mushroomed. In these publications, women and mothers were depicted as the site of the reproduction of the nation and the national health. As one author emphasized, “women

²⁰ For example, see Kâzım Nami, “Cemiyetlerin Terbiyevî Tesiri,” *Gürbüz Türk Çocuğu*, no. 45 (June 1930), “*Hilâliahmer, Himayeietfal gibi hayır cemiyetlerinin halk üzerinde büyük bir terbiyevî tesiri olduğunda şüphe yok.*”

²¹ Selim Sırrı, “Bir İrk Nasıl Bozulur?” *Terbiye* 5, no. 23 (March 1930).

who serve as a nation's standard for civilization and welfare are the sole power which dominates the future."²² Even the health of a woman became important since she was a mother or would become a mother. The prominent gynaecologist Prof. Dr. Tevfik Remzi Kazancıgil described the duty of assistant gynaecologists when examining women as follows "to behave very cautiously in health issues thinking of the important role of woman's national existence and seeing her as the protector of not only the health and development of herself but of her race as well."²³ Hence, mothers became the mothers of the nation. Thus, it was not the fathers, or mothers and fathers together, but only the mothers who were to learn by heart that the future lay in children.²⁴ It was not the doctors, but the mothers who could heal the social ills.²⁵ Therefore, the sound condition of women and children was posited as an essential future of the young Turkish Republic. The production of a population healthy in mind and body was localized in motherhood, and in turn, mothers became responsible for the formation of children while motherhood and mothering became a national and social duty.

The Republican elite made efforts to bypass the authority of the mother and father in the family and to keep a tight rein on it. The familial sphere was no longer a private sphere, but became a site for the state's intervention. Children were the children of the nation, hence should be placed under the care of the state. As one author stated in

²² "Bir milletin medeniyet ve refah miyarı olan kadın istikbale hakim yegâne kuvvettir." Cevriye İsmail, "İstikbal Çocuklarıdır Anneler Duyuyor musunuz?" *Gürbüz Türk Çocuğu*, no. 37 (October 1929).

²³ "Kadının millî mevcudiyetinin mühim rolünü düşünerek, onu yalnız nevinin değil, ırkın kemal ve sıhhatinin nazımı olarak görmek, ona göre sıhhat işlerinde titiz olarak davranmak." Tevfik Remzi Kazancıgil, "Pratisyen Hekimin Kadın Hastalıkları ve Doğum İşleri Karşısındaki Rolü," in *Üniversite Haftası: Erzurum (13.7.1940-19.7.1940)* (İstanbul: Ahmed İhsan Matbaası Ltd., 1941).

²⁴ "Mothers! Do You Hear? The Future Lies in Children!" İsmail, "İstikbal Çocuklarıdır Anneler Duyuyor musunuz?" p. 20.

²⁵ "İçtimai yaraları doktor değil, anne olan kadın tedavi eder." Ibid., p. 20.

Gürbüz Türk Çocuğu, “the new generation will create a new society...However, the family is old. It owes its power to the institutions dating back to the old ages. Left alone, the family will not be, in any way, able to bring up and educate the child of the new generation.”²⁶ For the same author, the nations of the world were miles away from being “modern” because, they gave society children who were brought up in line with the old opinions and wicked ideas.²⁷ The Republican elites promoted the idea that the state had a say in the individual’s bodily and spiritual development and was to be involved in familial matters and especially child care. Hence, the state thought and cared for the health and hygiene of the infant and children more than the fathers and the mothers did.²⁸

As one author emphasized, “in order to multiply the population, it is necessary to correct the institution of family and childcare and transfer them to the state.”²⁹ One other factor which lay behind the concerns for the state intervention in the private lives of families, especially in child-rearing, was an essentializing view. The elites believed that the “good” or “bad” features of a person were passed on to their children. For example, one author, who wrote in *Gürbüz Türk Çocuğu* about juvenile delinquents, told about two children playing in the street in a desperate physical situation, dirty and shabby, and he added that “it is not necessary to ask how their families are. For sure, their father was

²⁶ “İstismar Edilen Çocuk,” *Gürbüz Türk Çocuğu*, no. 43 (April 1930), p.7.

²⁷ “Asırdide ihtilallere rağmen dünya milletlerinin hâlâ medenî bir cemiyet manzarası arzdememeleri ailenin cemiyet içine eski kanaat ve muzir fikirlerle her gün daha fazla çocuk verebilmek imkânına malik olabildesindendir.” Ibid. p. 7.

²⁸ See for example, “Çünkü muşahhas şekli devlet olan cemiyet; çocuğu anne ve babasından ziyade düşünür? Anne babasından ziyade sever, anne babasından ziyade kendine mal eder.” Kâzım Nâmi Duru, “Çocuklar Hakkında İstanbul Radyosunda Verilen Bir Konferans,” *Resimli Şark*, no. 19 (July 1932).

²⁹ “Bizde nüfus çoğaltmak için artık aile kurumunu ve çocuk bakımını düzeltmek ve devletleştirmek lazımdır.” S. Ş. “Nüfus Sayımı ve Çocuk Bakımı,” *Kültür*, no. 44 (1935), p. 7.

a loiterer, like them.”³⁰ Another author was sure of herself when she stressed, “a woman and a man have weak bodies and corrupt morality and those who are ill can only bring to the world a baby who is like them.”³¹

Columns in the popular journals and newspapers gave practical advice and tips for mothers and housewives on child-rearing and home management.³² Part of the discourses on mothers and women was the lauding of Western middle-class morality and emphasis on the cultivation of hygienic and economic domestic science, cleanliness, and the moral upbringing of children.³³ Hence, proper child-rearing and mothering included several aspects such as nationhood, the elevation of culture, and civility. The emphasis on proper and scientific mothering was equated with the progress of the nation and conceptualized in terms of the health and welfare of the population. In contrast, “ignorant” mothers were problematized as inefficient, irrational, and unproductive and “improper mothering” was presented as an indicator of the nation’s backwardness in contrast to the scientificity of European methods of child-rearing. In a special issue of *Muhit*, dedicated solely to the child question, one author wrote:

There are countries where mothers’ education on child-rearing is perfect. The Scandinavian women, even in villages, know proper scientific child-rearing and

³⁰ “Nasıl bir aile çocukları olduklarını sormağa lüzum yoktu. Muhakkak babaları da kendileri gibi serseri idi.” Feridun Vecdi, “Sokak Çocukları,” *Gürbüz Türk Çocuğu*, no. 33 (June 1929), p. 7.

³¹ “Zayıf vücutlu, hastalıklı, fena ahlaklı ana babadan tıpkı onlar gibi bir çocuk dünyaya gelir.” Nebahat Hamit, “Ana ve Oğul,” *Gürbüz Türk Çocuğu*, no. 29 (February 1929), p. 6.

³² See, for example, “Ev Kadınının Bileceği Şeyler,” *Muhit* 3, no. 33 (1931), Mustafa Şekip Tunç; “Annelerle Hasbihal,” *Muhit* 3, no. 31 (1931); “Çocuklarınıza Güneş Banyosu Yaptırınız,” *Gürbüz Türk Çocuğu*, no. 34 (July 1929); “Çocuklara Cinsi Terbiye Nasıl Verilir?” *Gürbüz Türk Çocuğu*, no. 34 (July 1929); “Çocuğunuzun Zekâsı Gıdasına Bağlıdır,” *Gürbüz Türk Çocuğu*, no. 34 (July 1929).

³³ For very similar concerns and methods in another context, see Omnia Shakry, “Schooled Mothers and Structured Play: Child-Rearing in Turn-of-the Century Egypt,” in *Remaking Women: Feminism and Modernity in the Middle East*, ed. Lila Abu-Lughod (New Jersey: Princeton University Press, 1998).

health protection as perfectly as a doctor does. German women and the women of the United States of America are experts in the art of mothering in a broad field. European women are often ahead of us in child-rearing. As for us, only girls who are graduates of high schools and colleges are prepared to be mothers who are able in childcare to a certain extent. However, even if we assume that all of these girls are educated in line with the principles of ideal mothering, their number is so few. This means our situation is very bad in the field of mothering education compared to any other country in the civilized world. It, of course, requires great effort to spread the art of child-rearing and protection in a country where even basic education has not been established and generalized.³⁴

It is obvious that high infant and child mortality rates were a source of anxiety among professionals, government authorities and intellectuals. But what exactly was the cause of the high rates of infant and child mortality and what would serve as the prophylactic against them? Since the elites were preoccupied with the high infant mortality rates, maternal ignorance was often blamed for faulty hygiene and the neglect of children. Apart from that, the health status of the couple before marriage, the nature of the delivery of the baby, protection against contagious diseases, the malnutrition of the mother and the infant, and old customs were blamed for the high mortality rates.³⁵ Most of the causes were directly related to the mother. For example, a pediatrician, Ali Rıfat linked maternal employment directly to infant and child mortality. Working

³⁴ “Memleketler vardır ki onlarda annelerin çocuk bakıcılığı terbiyesi mükemmeldir; İskandinavya kadınları, köylere varıncaya kadar tam sıhhi şerait dairesinde çocuk yetiştirme ve korumasını bir doktor kadar bilirler. Alman kadınları, Amerika Birleşmiş Cumhuriyetler kadınları geniş mikyaslarda bu annelik san'atinde çok mahirdir. Umumiyetle Avrupalı kadınların çocuk bakıcılığı bize nispeten çok yüksektir. Bizde ancak lise ve kolejlerden yetişmiş kızlar bir dereceye kadar iyi çocuk bakıcı anne olmaya hazırlanmışlardır; fakat bunların hepsini ideal bir annelik terbiyesi almış farz etsek bile adetçe miktarları o derece mahdut ki. Demek ki bizim annelere san'atlerini öğretmek meselesindeki vaziyetimiz medeniyet âleminin diğer bir memleketiyle kıyas olamayacak derecede müşküldür. Henüz ilk tahsili bile umumileştirilemeyen bir memlekette çocuk koruması ve çocuk bakım san'atinin yayılması elbette pek büyük bir ceht ve gayretin sarfına hacet bırakır.” Ahmet Cevat, “İçtimai Muhasebe: Çocuk Meselesi,” *Muhit* 3, no. 31 (1931), p. 1.

³⁵ See, for example Dr. Ali Rıfat, “Çocuk Ölümüne Karşı Çareler,” *Sıhhi Sahifalar* 3, no. 2 (1930); Dr. Ali Rıfat, “Çocuklar Neden Ölüyorlar?” *Sıhhi Sahifalar* 3, no. 1 (1930); Dr. Ali Şükrü, “Bizde Çocuk Vefiyatına Sebep Nelerdir ve Mani Olmak Çareleri,” *Sıhhi Sahifalar* 2, no. 3 (1930).

mothers were more likely to develop syphilis and cancer, which were among the causes for mortality, since he constructed a moral relation between working and debauchery.³⁶

Discourses on child welfare and the “ignorance” of mothers were utilized to justify the Republican practices related to the physical education and feeding of school children, and the provision of food, sterile milk, and hygiene and childcare classes to young girls. For example, adopting such discourses, the Children’s Protection Society became very active in the legislative process. Dedicated to the work of “shaping the knowledge of mothers in the field of childcare in line with the scientific methods,” the CPS presented a proposal to the Ministry of Education. Emphasizing that “schooled girls who have very perfect knowledge of cosmography do not even know how to measure a child’s temperature,” the CPS asked the Ministry of Education to include childcare courses in the curriculum of girls’ schools.³⁷ Likewise, Article 169 of the Law on Public Hygiene required that girls in secondary and high school take at least one hour a week of courses on scientific childcare methods. Education and pedagogy for mothers aimed at equipping mothers with scientific and rational knowledge in nutrition, diet, and sanitation through lectures, pamphlets, articles and manuals.³⁸

The challenge was to intervene before the mother or infant suffered moral or physical harm. It was therefore necessary, for example, to educate mothers in proper

³⁶ Rıfat, “Çocuklar Neden Ölüyorlar?”

³⁷ “Annelerin çocuk bakımı hakkındaki bilgilerini fenne uygun bir şekle koymak en esaslı bir tedbir olacağını tabii görerek, kız mekteplerinde çocuk bakımı dersini programa koymalarını Maarif Vekâleti’nden rica ettik. Vekâlete takdim etmiş olduğumuz teskerede de ifade etmiş olduğumuz gibi, mektepli kızlarımız, kozmoğrafyadan mükemmel bilgi sahibi oldukları halde, bir çocuğun derecesi nasıl alınır, bunu bilemiyorlardı.” *Türkiye Çocuk Esrigeme Kurumu’nun Küçük Bir Tarihçesi (1921-1939)*, (İstanbul: Resimli Ay Matbaası, 1940), p. 6.

³⁸ For example, as of 1939 the CPS published the journal *Ana* (Mother) (circulation 6,000/month) and *Çocuk* (Child) (circulation 38.000-40.000/week) and pamphlets titled *Annelere Öğütler* (Suggestions to Mothers) (80,000). *Ibid.*, p. 23.

hygiene and diet, to intervene before birth to change the home environment and to defend children against elements detrimental to the “normal” state of the individual, such as poverty, alcoholism, and venereal disease.³⁹ Preserving children meant first of all protecting them from the misdeeds and methods of conventional mothers, eliminating the dominant influence of informal home education on children and creating new educational conditions for mothers and caregivers as well. Journals such as *Gürbüz Türk Çocuğu*, *Aile*, *Muhit* consisted of a series of publications, guides and instructions on how to bring up young children. Advice included diverse fields such as children’s games, stories that should and should not be told to the children, the space reserved for children in the house, exercises for children’s bodies, physical dangers that may harm children, and the moral dangers that may corrupt them.⁴⁰

Another aspect was the proliferation of pedagogical and didactic articles in newspapers and popular journals which focused on aspects of motherhood, ranging from the importance of breastfeeding, proper health care for pregnant women as well as concerns related to wet nurses, nannies, *mürebbiyes* (governesses) and servants. It was now argued that child-rearing was no longer a job which could be delegated to the arbitrariness of the servants. The insufficient participation of upper-class women in domestic management and child-rearing and the “ignorance” of lower-class women became contentious issues. Wealthy women were committing a mistake by leaving the care of their children to servants. In the words of one doctor, the “ignorance of the poor

³⁹ Zeki Ragıp Yalım, *Firengi, Belsoğukluğu ve Alkolizmin Nesiller Üzerine Yaptığı Tahribat, CHP Konferansları Serisi* (Ankara: Recep Ulusođlu Basımevi, 1940).

⁴⁰ See, for example, “Asrı Çocuk Oyuncakları,” *Muhit* 2, no. 14 (1929); “Çocuk Bakımı: Evlerimizin Döşemeleri ve Çocuklarımız,” *Muhit* 2, no. 14 (1929); “Çocukların Gıdası,” *Muhit* 4, no. 48 (1932); “Ebeveynin Terbiyesi: Çocukların Huysuzluklarından Ana Baba Mes'uldur,” *Muhit* 4, no. 47 (1932); Mustafa Şekip Tunç, “Çocuk Neşesinin Amilleri,” *Muhit* 3, no. 34 (1931); Mustafa Şekip Tunç, “Çocukta Neşe,” *Muhit* 3, no. 33 (1931).

and the fondness of the rich for entertainment and adornment destroy the lives of children. It is not enough that the servant responsible for the care of the child is a fine one and prays regularly.”⁴¹ Likewise in *Gürbüz Türk Çocuğu* (The Robust Turkish Child), one author suggested that wet nurses should be exposed to scientific and hygienic control since “an ill wet nurse does not feed but poison a robust baby.”⁴² Children, exposed to poor hygiene, inadequate supervision, and minimal affection when they were put out to nurse were seen as the victim’s of their mothers’ disinterest in their maternal duties.

Like any other issue in child-rearing, breastfeeding also became a domain of scientific discourse. Doctors relentlessly emphasized that breastfeeding should be carried out in line with scientific principles since Turkish doctors perceived a relation between nutrition and illness.⁴³ Mothers were also urged to breastfeed their own babies not hire wet nurses, or give them cow’s milk since it was clear that “death rates for infants who are not breastfed by their own mothers, or who are fed with cow’s milk are four or five times higher than the rates for infants who are breastfed by their own mothers.”⁴⁴ A doctor in a popular health journal complained about the degradation of

⁴¹ “*Fakirlerde görgüsüzlük, cahillik, zenginlerde süs, eğlence düşkünlüğü çocuk hayatlarını kasıp kavuruyor. Çocuğa bakan hizmetçi eyidir, beş vakit namaz kılıyor deyip geçmemeli.*” MEB, “Süt Damlasında Gördüklerim,” *Muhit* 3, no. 34 (1931), p. 14. See also Ali Suat, “Çocuğun İstirahatını Kendi Zevkinden Üstün Bil,” *Gürbüz Türk Çocuğu*, no. 38 (November 1929).

⁴² “*Mariz bir sütanne, eline verilen, gürbüz bir yavruyu emzirmiyor, zehirliyor.*” Mithat Ömer, “Süt Anaya, Dadiya, Mürebbiyeye, Hizmetçiye Dair,” *Gürbüz Türk Çocuğu*, no. 31 (April 1929), p. 31.

⁴³ “*Bu halde çocuğun tegaddisinde nazarı dikkate alınacak nokta, emmeleri muntazam fasıllarla ve fenni usul dahilinde yaptırmaktır,*” “*...fenni usul dairesinde beslediğimiz hiçbir çocuğun hasta olduğunu da görmüyoruz.*” Dr. Ali Rifat, “Çocuklarımız Nasıl Emzirmeli,” *Sıhhi Sahifalar* 3, no. 5 (1930), p. 143.

⁴⁴ “*Valde sütü almayan ve yahut doğumu müteakip az bir zaman sonra memeden çıkarılıp hayvan südüyle beslenen çocuklardaki ölüm sırf valde sütüyle beslenen çocuklardaki ölümden 4-5 def’a fazladır.*” Dr. Ali Rifat, “Hanımlar! Çocuklarınızı Kendiniz Emziriniz,” *Sıhhi Sahifalar* 3, no. 3 (1930), p.82; also see Dr. İsmet Kâmil, “Valide Sütü ile Çocuk Beslemek,” *Sıhhi Sahifalar* 3, no. 4 (1930), p. 110.

wealthy women and their children's health. These women were concerned only with extravagance and beautification, and took care only of themselves, refusing to breastfeed and giving their babies to the wet nurses.⁴⁵ Likewise, he complained about the "ignorance" and "employment" of poor women.

As for the women belonging to the poor classes, they do not breastfeed their own babies either because they are unable to understand the benefits of breastfeeding or because of the severity of their misery or because of the bad *terbiye* (upbringing, education) they have gone through in both family and school... The principle cause is that these women have to work in order to earn their lives.⁴⁶

The author regarded breastfeeding, which was widespread in "civilized" countries, as a "national duty" and a "humane debt" in the way of struggling against population decrease.⁴⁷ Moreover, mothers were invited and directed to spend more time with their children, closely supervising their health and development. An author recommended that mothers should keep records of the development of her children covering a wide range of areas such as his psychological, mental and physical condition, and progress. He also suggested that they make themselves familiar with the great books

⁴⁵ "Öteden beri zengin hanımlar süt nineler temin etmeleri yüzünden çocuklarını emzirmiyorlardı...Mahaza zevcinin hodgâmlığına tebeiyet etmek için kendi keyfi, kabul günleri, çaylar, suvareler için emzirmeği terkedenlere de tesadüf etmekteyiz." Rıfat, "Hanımlar! Çocuklarınızı Kendiniz Emziriniz," p. 83.

⁴⁶ "Fakir sınıfa mensup kadınlara gelince bunların meme vermemeleri ya emzirmelerin faydalarını anlamamaları ve yahut buldukları sefaletin fevkal'adeliğinden ve yahut aile ve mekteplerde aldıkları fena terbiyeden ileri gelmektedir... en ziyade görülen sebepler bu kadınların maişet temini için çalışmak mecburiyetinde bulunmalarıdır." Ibid., p. 84. See also, Dr. Haşmet, "Çocuk Yuvalarının Kutsiyetine İman," *Gürbüz Türk Çocuğu*, no. 43 (April 1930).

⁴⁷ "Medeni memleketlerde irdai (süt emzirme) tabii ile çocuk vefyatının önünü almak..." Kâmil, "Valide Sütü ile Çocuk Beslemek," p. 111, and "... irdai tabiin taammümü için ciddi mücadelelere atılmak bütün memleketini sevenler için borçtur. Bu gayeye varmak için çalışmakla yalnız insanlık vazifesini yapmış olmuyoruz, aynı zamanda çocuklardaki ölüm miktarını azaltacak olan en doğru bir yolu da takip etmiş oluyoruz. Nüfus azlığına karşı çalışmak bütün insanlık muhiplerinin mukaddes bir borcudur, nüfusun gündün güne azalması medeniyette ilerlemiş milletlerin istikbalini tehdit etmektedir." Rıfat, "Hanımlar! Çocuklarınızı Kendiniz Emziriniz," p. 83.

of the Western pedagogy.⁴⁸

The Children of a Nation

“Citizen! We have no doubt that you will certainly shiver if we provide you with the ratio of or numbers regarding the percentage of newborns who die or who stay alive.”⁴⁹

The efforts on how public authorities should provide “the children of the nation” with due care and attention have been evaluated by several approaches in fairly different ways in historiography. Up until the 1960s, the general tendency in assesment of the relation between children and regimes and state institutions was to evaluate the efforts of child welfare in terms of humanitarianism. Likewise, the policies and practices adopted by the state authorities regarding children were always handled as the result of a growing concern for unfortunate children and seen as the humane response of the modern welfare state.⁵⁰ This approach was prevalent not only in the assesments of child welfare, but in the whole sphere of social welfare as well. However, with the explosion of revisionist social science literature in the 1970s, the orthodoxy which explained the relation between children and state institutions in terms of a “gradual progression from the barbarism of pre- and early industrialisation to the humane and responsible practices

⁴⁸ Kâzım Nami, “Çocukların Müşahedesine Ait Fişler,” *Muhit* 2, no. 23 (1930), p. 366.

⁴⁹ “Yurddaş, eğer doğan çocuklardan yüzde kaçının yaşadığını, kaçının öldüğünü sana bir rakam halinde veya bir nispet olarak verecek olursak tiylerinin ürperceğinden asla şüphe etmiyoruz.” Fuat Umay, “Çocuk Esirgeme Kurumu 25 Yılda Neler Yaptı?” in *Çocuk Davamız*, ed. Adnan Bilget (İzmir: Meşher Basımevi, 1946).

⁵⁰ Robert van Krieken, “Social Theory and Child Welfare: Beyond Social Control,” *Theory and Society* 15, no. 3 (1986).

of the modern welfare state”⁵¹ was replaced by a new approach which focused on the concept of the interventionist welfare state.⁵² While the first approach saw everything as the result of a “humanitarianist” state apparatus’ efforts to protect its citizen, the latter reduced everything to social control and as a result missed the uniqueness of the period under question and the interrelations and negotiations between those who implemented the practices and those who received them.

Dickinson sees child welfare as a very “fruitful field of investigation (since) it was often a leading sector in the development of welfare policy in general. Because intervention for the protection and disciplining of children involved abridging parental rights, child welfare raised the issue of relationship between state and society with exceptional clarity, and was the field in which conflicts over the philosophical foundations and the grand aims of social policy were almost always explicitly formulated.”⁵³

According to Donzelot, the change in the position of the family corresponded to the nineteenth century as a result of the propagation within the family of some sort of “medical, educative and relational norms” which aimed at rescuing the child from the “wicked” hands of the old customs and making the child the center of the family.⁵⁴ As a matter of fact, the Turkish experience was part of a broader trend toward state

⁵¹ Ibid., p. 401.

⁵² Ibid.

⁵³ Edward Rose Dickinson, *The Politics of German Child Welfare from the Empire to the Federal Republic* (Cambridge: Harvard University Press, 1996).

⁵⁴ Donzelot, *The Policing of Families*.

management of population and reproduction.⁵⁵ Without doubt, despite the generalization, every nation or society followed its unique path as regards social issues such as child welfare. An abundant literature on the theme of motherhood and the preservation of children exists in Turkey. In the 1920s and 1930s, the problem was frequently raised in the popular press, medical and pedagogical journals, as well as in independent books. The issue was addressed in bitter language even later on, when the country was assessed comparatively and proportionately richer and more developed. To give an example, in 1954, Osman K. Akol, a teacher at the Yıldırım Beyazıt Secondary School, called the members of the Turkish Grand National Assembly to pay due care and attention to the problem which he called “the total child question.”⁵⁶

It is clear that the importance of the issue haunted the minds of intellectuals and elites. Indeed, the issue occupied the agenda of the elites from the early 1920s, particularly since the new Republic began to embark upon several social and political reforms. Newspapers and journals were full of articles discussing the importance of children for the future of the country and reports of efforts to provide food, shelter and clothes for poor and needy children in both towns and cities. Students of medicine and law were sent to Europe and delegated to research children’s rights and institutions involved in child welfare.⁵⁷ The child question was, on the one hand, part of a wider

⁵⁵ For an assesment of similar worldwide tendencies see, David L. Hoffman, “Mothers in the Motherland: Stalinist Pronatalism in Its Pan-European Context,” *Journal of Social History* 34, no. 1 (Fall 2000). Also see, “Pedagoji Teşekkülleri Cihan Federasyonu Kongresi,” *Gürbüz Türk Çocuğu*, no. 42-43 (March-April 1930).

⁵⁶ “*Topyekûn çocuk meselesi*” Osman K. Akol, *Topyekûn Çocuk Meselesi: 10. Dönem B.M. Meclisi Üyelerine Açık Mektup* (Ankara: Telgraf Matbaası, 1954).

⁵⁷ Hüseyin Sıpmazlı, *Çocuk Himaye Hakları ve Müesseseleri* (Ankara: Yeni Cezaevi, 1943).

public discourse on “population” and fused with the notion of nation-state building.⁵⁸ On the other hand, the issue revealed the borderlines of the “social revolution” (*içtimai inkılap*) the Republican elites sought to achieve.⁵⁹ The project of rearing children in line with the “Republican ideals” meant admitting that Turkish society was afflicted with severe social problems since governmental authorities had to define the actual existence of the “other” of the “ideal.” To realize this, the Republican reformers not only had to direct the formation of the individual, but had to intervene in social processes already deviated from what was assessed as “normal.” The area of child welfare is also instructive in detecting the efforts of the Republican elite to intervene and shape public spaces.

In a news item dated 11 January 1931, the governor of İstanbul announced that street children would be gathered together and made to attend school. All the policies targeted those who were visible in the public space. Since they were living in the streets, beggars, loiterers, and children were much more effective in delineating policies concerning the process of the rise of the social and public spaces. The analysis of the public discourse reveals that these street children were provided with education, not for their own development or for a better or more sound future for themselves, but because they constituted a potential danger and were considered detrimental to city life. As indicated by the article, “if we cannot save these children, who live and grow up in the ruins which emerged as a result of such factors as World War I, and the great fires in İstanbul, in the future, they will be a nuisance to our city. If we leave these ten, twelve

⁵⁸ For interconnections between the “child question” and “nation-state building,” see Libal, “The Children's Protection Society: Nationalizing Child Welfare in Early Republican Turkey.”

⁵⁹ For an analysis of the borderlines of the “social revolution” in the light of such social problems as prostitution, begging and abandoned children, see Pınar Öztamur, “Büyük Buhran ve Cumhuriyet Gazetesinde Yoksulluk Üzerine Söylemler, 1929-1931,” *Toplum ve Bilim*, no. 94 (Fall 2002).

year-old children who lead their lives begging or pick-pocketing to their own fate, tomorrow we will witness more important crimes committed by them, such as assault and murder.”⁶⁰ Another news item appeared on 11 May 1931 announcing that those child beggars and vagrants who lived under bridges would be collected and placed under supervision.⁶¹

The discourse surrounding these children offers clues about the processes of identity construction under the aegis of the nation-state. Since they were not controllable by family and education and were wandering alone, these children had the means to escape the identity-building processes molded for “Republican citizens.” Therefore, they were not aware of concepts such as “nation, homeland, and humanity.” As a matter of fact, apart from concerns about the control and surveillance of the population, concerns about identity building constituted the core of efforts Republican elites made for the protection of children as well. Poor urban children were deemed to need protection from themselves; they seemed to need stronger moral guidance to counteract their learned or innate impulses toward social deviance than their families had hitherto provided. As Libal points out, “the child, viewed as a citizen-in-the-making, symbolized a nation-state embarked on a progressive march toward future prosperity and greatness.”⁶² Like women, children were also the targets of policies adopted in the service of shaping

⁶⁰ “*Harbi umuminin ve İstanbul’daki muhtelif yangınların ve sairenin neticesi olarak yangın yerlerinde oturan, orada yatan ve nihayet orada büyüyen çocuklar vardır ki bunları kurtarmazsak şehir için muzır birer unsur olacaktır. Bugün on, on iki yaşına gelen ve kâh dilenmek ve kâh ötekinin, berikinin cebini karıştırmak suretile geçinen bu çocukları kendi hallerine terk edecek olursak yarın cerh ve cinayet gibi daha büyük vak’alarına şahit olacağız.*” “Sokaktaki Çocuklar Mektebe Verilecek,” *Cumhuriyet*, 11 January 1931.

⁶¹ “Kimsesiz Çocuklar Toplanıyor,” *Cumhuriyet*, 11 May 1931.

⁶² Libal, “The Children's Protection Society: Nationalizing Child Welfare in Early Republican Turkey,” p. 58.

identities. As stated in an article in *Muhit*, whose May 1931 issue was devoted solely to the “child question”, “Kemalism shall solve this issue [the child question]” via the inoculation of the Turkish children with new spiritual characteristics which we [the older generation] do not have”⁶³

The child question, like other social problems, showed the Republican elites that the structures on which the political system would depend were dangerously fragile. The prevalence of children displaced from their homes, living and wandering alone on the streets of urban centers like İstanbul were a sign of danger and future not achieved. The basic terms and patterns of modern child and, related to it, maternal welfare policy in early Republican Turkey grew out of the desire to form generations of citizens who were physically and morally strong and healthy, effective and productive, in order to prove the success of the young Republic in this field of the “modern world” against Europe, and to sever the ties with the “distant” Ottoman legacy.

Contrary to the Republican elite’s illusion regarding the Ottoman past, welfare practices as part of the emergence of the modern state as a new art of government had begun during the nineteenth century Ottoman Empire. As stated by Özbek, the nineteenth century has always been assessed as a period, whereby the centralization of the central power of the state, the restructuring of the bureaucratic apparatus, and the emergence of a new legal code occurred.⁶⁴ However, the nineteenth century practices in the Ottoman Empire, such as the establishment of quarantine organization, vaccination, midwife training, the foundation of hospitals throughout the country, the regulation of

⁶³ “Kemalizm bu mes’eleyi Türk çocuğuna bizde olmayan yeni ruhi hassalar vermekle hall edebilecektir.” Cevat, “İçtimai Muhasebe: Çocuk Meselesi,” p. 1.

⁶⁴ Nadir Özbek, “Osmanlı’dan Günümüze Türkiye’de Sosyal Devlet,” *Toplum ve Bilim*, no. 92 (Spring 2002).

widow and orphan salaries, the efforts of generalizing public education, the foundation of reformatories and industrial schools for girls and boys, the foundation of a police organization, the efforts of regular censuses all may well be assessed as the instruments of a bio-political government.

In the development of child and maternal welfare policy, program and discourses, doctors and the female members of the elite middle class, besides the governmental elites, were often the groups most committed to public intervention.

The Child Question As Part of the Broader Population Question

“It is our national wish to curb the death rates, and to multiply the birth rates.”⁶⁵

The study of child welfare or child protection systems necessarily brings along the study of social perceptions of and attitudes towards children and families. As Harding writes, “the role of the state in providing care for children as an alternative to parental care, in intervening between parent and child in various ways, and in prescribing certain rules surrounding childhood can tell us much about childhood in society and how children are perceived and treated.”⁶⁶

Turkey was not an exception in this regard. As children’s acute problems occupied the agenda of the governmental authorities and intellectuals, a new image of children as part of the broader population policy was shaped in the discourses presented

⁶⁵ Dr. Besim Ömer Akalın, *Doğum Tarihi* (İstanbul: Ahmet İhsan Matbaası, 1932).

⁶⁶ Lorraine Fox Harding, *Perspectives in Child Care Policy* (London & New York: Longman, 1991).

to the popular perception. Within their limited sources, Republican elites, governmental authorities and intellectuals all perceived children as being the future of the nation. In his two volumes dedicated to the issue of care provision for children, Kâzım Karabekir often described children as the nation's hope for the future and the forerunners of all generations.⁶⁷

The child was the key element in the formation of new Turkish state, which potentially embodied military and economic strength due to its effectiveness, productivity and consumption capacities. The existence of children was necessarily central in the existence of the state.⁶⁸ “Can the Turkish Republic, which made peace with yesterday's victims, assume herself to be protected from tomorrow's victims? In a situation like this, what proportion of the treasury can be allocated to the solution of child question?”⁶⁹ According to Cevat, national welfare was only possible through production and distribution of products. Production meant reproduction and Kemalism would solve the child question through indoctrination of some certain “spiritual characteristics” in today's children: the future's soldiers, producers and consumers. After stating that “one child himself is a nation,” another author stressed the role of children as a key element in national defense. “A secure future, a strong nation, and a

⁶⁷ “Çocuk istikbalin ümididir, çocuk nesillerin öncüsüdür. Çocuk var olma çabasının başarılı meyvasıdır.” Kâzım Karabekir, *Çocuk Davamız*, ed. Faruk Özerengin (İstanbul: Emre Yayınları, 2000).

⁶⁸ The same inclinations toward child rearing and protection for the future of the nation were indeed prevailing throughout Europe and the United States, for the French case, see. Sylvia Schafer, *Children in Moral Danger and the Problem of Government in Third Republic France* (New Jersey: Princeton University Press, 1997). “As the germ of future generations, children seemed a scarce national resource to be husbanded and nurtured in preparation for the future military conflicts and increasingly fierce industrial competition.” p. 45.

⁶⁹ “Bütün dünkü düşmanlarıyla barışıklık bağlayan Türkiye Cumhuriyeti bugün değilse de yarının tehlikelerinden kendini korunmuş sayabilir mi? Böyle bir vaziyette çocuk mes'elesinin halline ayrılacak hazne yardımı ne olabilir?” Cevat, “İçtimai Muhasebe: Çocuk Meselesi.” p. 2.

country freed from all kinds of attacks are only possible through caring for children with due care and importance.”⁷⁰

The child question was intensified in the public discourse as an integral part of the broader question of population (*nüfus meselesi*). In addition, state officials who were prepared to count and analyze the Turkish population, various social experts including doctors, and intellectuals began embarking upon the question of population. The Republican elite were preoccupied with the need to recover from decades of war and recent population loss that had resulted from the shattering of families, absence of males in the families because they were fighting in the trenches, hunger and disease, war-time losses both civil and military, and population exchanges during the previous decades of successive wars.⁷¹

Pronatalist policies and policies targeted at interventive child health and welfare as well as related discourses constituted the main pillars of war waged in the name of so-called “population problem.” The Turkish elite believed that the foundation of a strong nation-state was a healthy, fit and numerous population. For example, Ahmet Cevat saw depopulation as a “great danger threatening our national existence.”⁷² For Sadi Irmak, it was crucial to provide each and every citizen with the means for him to become more strong and healthy, both bodily and mentally.⁷³ As a matter of fact, the question of

⁷⁰ Ferit Celâl, “Çocuk,” *Gürbüz Türk Çocuğu*, no. 34 (July 1929), p. 2.

⁷¹ For demographic characteristics of Turkish population after WWI, the War of Independence and during the Great Depression, see Frederic C. Shorter, “The Crisis of Population Knowledge in Turkey,” *New Perspectives on Turkey*, no. 12 (Spring 1995); Frederic C. Shorter, “Turkish Population in the Great Depression,” *New Perspectives on Turkey*, no. 23 (2000).

⁷² “*Nüfus noksanlığı milli mevcudiyetimize taalluk eden büyük bir tehlikedir.*” Cevat, “İçtimai Muhasebe: Çocuk Meselesi.” p. 1.

⁷³ Sadi Irmak, “Çocuk ve Meseleleri,” *Ülkü*, no. 6 (1 May 1944).

depopulation was a global issue in the 1920s and 1930s, especially in the fascist regimes.⁷⁴ Population was perceived as an “influential” weapon in an age of nationalism, which would serve as a strong “military power” during war time and an “economic power during peace time.”⁷⁵ Moreover, “demographic politics” was perceived as a “modern requirement”, which would serve as leverage for the nation to achieve Western standards in the spheres of economics and politics.⁷⁶ Thus, depending on the European and American social and medical sciences, a fact which reveals itself in the abundance of translated literature, the political elite envisioned a project which embodied education and welfare projects, the center of which was families, especially mothers and children. Promoting birth, preventing high infant mortality rates, and securing better conditions for infant and child survival were the points on which all of the doctors, intellectuals, politicians and social activists agreed in the discussions on scientific management of the population.

In 1939, Professor Sâra Akdik from İstanbul University, in a speech titled “The Protection of the Generation,” told her audience the principles of the politics of

⁷⁴ In the words of Horn, “... the conference [The World Population Conference] made evident the assumptions that the ‘population problem’ was international, was to be solved by science and would require more and better statistics.” Horn, *Social Bodies: Science, Reproduction, and Italian Modernity*, p. 50.

⁷⁵ “Nüfus bugün, aşırı ve mütecaviz bir milliyetçi cereyanın istilâ ve tahakküm için giriştiği mücadeleden müessir bir silah olarak telakki edilmeye başlanmıştır. Nüfus kefaseti yalnız harp halinde, en kalabalık orduları çıkarmak için değil, fakat sulh yıllarında kuvvetli bir iktisadi cihaz yaratarak müstakbel harbin temelini önceden sağlamlaştırmak için bir vasıta sayılıyor.” Yaşar Nabi, “Nüfus Meselesi Karşısında Türkiye,” *Ülkü* 14, no. 79 (September 1939), p. 33.

⁷⁶ “Bir an hatırımızdan çıkarmamalıyız ki, Beyler, beyneddüvel münasebatın bir de “demografi siyaseti” vardır. Bazı Devletler buna çok ehemmiyet veriyorlar. Boş nüfussuz muntakaların doldurulması insanî bir ihtiyaç, medenî bir zaruret olduğunu söyleyip duruyorlar. Nüfus meselesi, bu nokta-i nazardan da en ziyade nazarı dikkate alınacak mesaimizdendir.” İstanbul MP Yusuf Akçuraoglu in the minutes of the Law on Public Hygiene, “Umumî Hıfzısıhha Hakkında 1/441 Numaralı Kanun Layihası ile Kırklareli Meb'usu Dr. Fuat Bey'in, Çocukların İçki ve Tütün Kullanmalarının Men'i Hakkında 2/4 Numaralı Kanun Teklifi ve Sıhhat ve İçtimaî Muavenet, Dahiliye, Adliye, Hariciye ve İktisat Encümenleri Mazbataları,” *TBMM Zabıt Ceridesi* 18, Term 3 (17 April 1930), p.66.

population: the necessity of population growth, the protection of the health of infants and children and the survival of the fittest.⁷⁷ High infant and child mortality rates and the poor quality of child upbringing engendered the impoverishment of the nation. Most of the infants and children died before having been made useful for the nation. Influenced by the eugenic tendencies in Germany, some doctors agreed with her on the issue of the survival of the fittest. For example, Dr. Naci Sait, in an article in *Ülkü*, wrote that mortality hit not only weak and unhealthy children but those who were healthy and had the potentiality of bearing healthy children to the nation in the future. He declared that modern medicine should work for the survival and development of healthy and robust children, not weak ones.⁷⁸

In the minds of the governmental authorities and intellectuals, child care was a fragile issue which should not be left to the arbitrariness of the parents. Rather, assistance to infants and mothers was evaluated as a political, demographic, hygienic, economic and moral problem requiring scientific study and state intervention. In the words of a Republican physician, population growth was not a matter of medicine, but rather a “social and moral” issue.⁷⁹ The goal was the formation of generations that were physically and morally strong and healthy. Therefore, apart from propagating population

⁷⁷ Sâra Akdik, “Neslin Korunması,” in *CHP Konferansları, Kitap 8* (Ankara: Recep Ulusoğlu Basımevi, 1939).

⁷⁸ “Hayatın daha ilk günlerinde ölen bu çocuklar yalnız yaşamağa kabiliyetli olmıyan vaktinden evvel doğmuş, yahut zayıf çocuklar değil, fakat aynı zamanda kusursuz, tabii neşvünümaya muktedir ve ilerde tamamiyle salim şahıslar verebilecek çocuklardır; bunların adeâi oldukça yüksek bir yekûna belîğ olur. Bir millet için bilhassa mühim olan bu son çocukların ziyadır. Bugünkü püerikültürün gayesi yalnız bedenen zayıf kalmağa mahkûm ve cemiyet için bir yük olacak çocukların hayatını idame etmek ve bunları sun’i vasıtalarla büyütme değil, fakat sağlam ve sihatte fertler verecek olan çocukların hayatını temin etmektir.” Naci Dr. Sait, “Çocuk Ölümü,” *Ülkü*, no. 3 (April 1934), p. 130.

⁷⁹ Rıfat, “Çocuklar Neden Ölüyorlar?”

growth, what the nation should do first and foremost was curb the high infant mortality rate.⁸⁰ As Yunus Nadi put it,

The life of little children constitutes a very significant problem, perhaps even the most significant problem, for the life of a nation because the social body, which is called “nation,” is made up of the population. And population grows with children. However, children are very fragile, very sensitive creatures. Day by day, they ... are destroyed or they die. If we prevent these problems regarding children, we will solve Turkey’s population question as well. Only when we solve the problem of the population growth will the present and the future of Turkey be taken absolutely under guarantee.⁸¹

The same year, in *Ülkü*, the official journal of the *Halkevleri* (People’s Houses), Yaşar Nabi complained about the lack of necessary measures being taken to solve the population problem. He recommended the regulation of salary ratios based on the number of the children in a family; privileges, financial stimuli and rewards for families with several dependent children; a dense propaganda for marriage and procreation; and measures intended to reduce the number of unmarried people, such as tax on single individuals.⁸² According to Nabi, the problem was not, at least in the villages, to promote procreation but to help newborns survive since the fertility rates among Turkish village women were high enough to make some other countries “jealous.” Turkish

⁸⁰ For example in a special edition of *İş* dedicated to the child question, Ömer Celal Sarç took pains to show that “curbing the mortality rate will constitute the principle of our population policy” and that “curbing the mortality depend first and foremost on curbing infant mortality rates.” “...nüfus siyasetimizin başlıca vazifesini ölümleri azaltmak teşkil edecektir.” “Ölümlerin azalması da her şeyden evvel çocuk vefyatının önlenmesine bağlıdır.” Ömer Celal Sarç, “Türkiye’de Çocuk Ölümleri,” *İş: Felsefe, Ahlak ve İctimaiyat Mecmuası* 9, no. 34 (1943).

⁸¹ “...hayatta küçük çocukların hayatı çok mühim bir mes’ele. Bir milletin hayatı için belki en büyük mes’ele. Çünkü millet denilen içtimai heyet nüfustan tereküp ediyor. Nüfus ise çocuklardan oluyor. Bu yavrular ise çok nazik, çok narin şeyler. Onlar henüz hayata açılmaya hazırlanan çiçek goncaları gibi [...] daha açılmadan bozuluyor, soluyor ve ölüyorlar. Daha hayata ilk başlangıç günlerinin bu hasaratının önüne geçilebilirse Türkiye’nin nüfus meselesi halledilmiş olacaktır. Türkiye’nin nüfus meselesinin halli ise Türkiye’nin hal ve istikbalini en kat’i bir emniyet altına almak demek olacaktır.” Yunus Nadi, “En Büyük Mes’ele: Çocuk Mes’elesi!” *Cumhuriyet*, 3 March 1931.

⁸² Nabi, “Nüfus Meselesi Karşısında Türkiye,” p. 36.

village women were ignorant of even the most primitive knowledge in the field of childcare.⁸³ Şevket Süreyya was of the same opinion. He wrote that while Turkish women were the most “prolific” women in the world, Turkey had the highest rates of infant mortality in the world. Therefore, for the sake of the nation’s future it was a national matter to manage the population scientifically through education and propaganda.⁸⁴

The Ministry of Health and Social Assistance and the Republican People’s Party embarked upon a variety of social policies aimed at protecting pregnant women, mothers and infants to complete the tasks in the way of solving the child question, hence the problem of population. The most important step at the discourse level was the 1930 Law on Public Hygiene.⁸⁵ The measures proposed in the Law were described in detail. As a matter of fact, the Law on Public Hygiene was the locus on which the aspirations of the Republican elites in the new modes of government of society and the desire to distance the new regime from its Ottoman forerunner were crystallized. The sphere of public health, in the words of Doctor Refik Saydam, the Minister of Health and Social Assistance, was now shedding its “primitive” character, thanks to the National Struggle, the new regime and the new Law.⁸⁶ The new Republican elite would distance itself from

⁸³ “*Esasen Türk köylüsü için, bir doğumu teşvik meselesi mevzu-ı bahis değildir. Türk köyünde doğum nisbeti, pek çok milletlerin gıpta edecekleri bir seviyededir. Burada asıl dava, doğanları yaşatmaktır. Nispeten daha sıhhi şartlar içinde yaşayan şehir halkına nazaran bu hususta en iptidai bilgilerden yoksun olan köylümüz arasındaki ölümlerin ve hele çocuk ölümlerinin önüne geçmeye çalışmak, üzerinde ehemmiyetle durulmaya lâyık bir iştir.*” Ibid., p. 36.

⁸⁴ “*Türk kadını dünyanın en velûd kadınıdır. Fakat medeni dünyada çocuk en çok Türkiye’de israf edilir.*” Şevket Süreyya, “Çok Nüfuslu Anadolu,” *Kadro* (1932).

⁸⁵ For an assesment of the 1930 Law on Public Hygiene, see Göbelez, “The History of Social Services in Republican Turkey: Social Change, Professionalism and Politics.”

⁸⁶ “*Hıfzısıhha ve sıhhat işleri, bizde Milli Mücadelemizin başladığı zamana kadar mühmel ve iptidai şekilde idi; hayatını o yüksek mücadeleye ve en yüksek inkaşafını da Cumhuriyete borçludur. Sıhhat*

its Ottoman past by intervening in the long neglected area of health and prosperity of the nation through “modern,” “scientific” methods and approaches.⁸⁷ As put forward in the *Esbabı Mucibe Layihası* (The Covering Momerandum), the restricted regulations dating from the Ottoman Empire were far from meeting modern needs.⁸⁸ Hence, the aim of the law was to empower the state in its efforts to improve the health of the nation.⁸⁹

The law served as a legal basis for the government to exercise its power in many areas of social relations. Although the inspection of the ways to put the law into practice and its social impacts are beyond the scope of this work, since the available sources for now render such a task almost impossible, it can be said that the Law is of great significance in that it reflected the political and social climate in which it was created and for the problematization of the issues behind it. It is obvious that the Republican regime was prepared for an all out struggle in the name of intervening in and shaping the social sphere. The elite’s desire for the scientific management of the population and the

Yekaletimiz asırların omzumıza yüklediği ihmal ve teseyyübün tazmini için, her biri halkımızın hayatına ve sıhhatine yarayan ve onu koruyan birtakım kayıtları ve şartları, Yüksek Meclis'in bu hususa verdiği ehemmiyetten kuvvet alarak, yine sizin çizdiğiniz hatlar dahilinde, bir araya topladı ve size arzetti ve kanun olarak verdiğiniz çerçeve dahilinde mesaisini behemahal muvaffakiyetli bir neticeye isal için çalışmaya başladı. “Umumî Hıfzısıhha Hakkında 1/441 Numaralı Kanun Layihası ile Kırklareli Meb'usu Dr. Fuat Bey'in, Çocukların İçki ve Tütün Kullanmalarının Men'i Hakkında 2/4 Numaralı Kanun Teklifi ve Sıhhat ve İctimaî Muavenet, Dahiliye, Adliye, Hariciye ve İktisat Encümenleri Mazbataları,” p.64.

⁸⁷ “...600 yüz sene ihmal edilmiş bir memleket altı sene içinde gül gülistan olamaz.” The Eskişehir Deputy Emin Bey, *Ibid.*, p. 67. “...bu kanun layihası öteden beri mevcut, fakat ihtiyaca kâfi gelmeyen müteferrik hükümlerin yerine ilmî ve amelî esaslar koyduğu gibi, birçok ta yeni hükümler vazetmektedir.” The Minister of Health and Social Assistance Refik Saydam Bey, “Umumî Hıfzısıhha Hakkında 1/441 Numaralı Kanun Layihası ile Kırklareli Meb'usu Dr. Fuat Bey'in, Çocukların İçki ve Tütün Kullanmalarının Men'i Hakkında 2/4 Numaralı Kanun Teklifi ve Sıhhat ve İctimaî Muavenet, Dahiliye, Adliye, Hariciye ve İktisat Encümenleri Mazbataları,” p. 63.

⁸⁸ “Umumi Hıfzısıhha Kanunu Esbabı Mucibe Layihası,” *TBMM Zabıt Ceridesi* 18 (3 -28 April 1930).

⁸⁹ “Layihâ milletin sıhhatini korumak işinin, Devletin umumi hizmet ve mecburiyetlerinden olduğu esasını oymakla da büyük bir gaye yaratmaktadır.” “Umumî Hıfzısıhha Hakkında 1/441 Numaralı Kanun Layihası ile Kırklareli Meb'usu Dr. Fuat Bey'in, Çocukların İçki ve Tütün Kullanmalarının Men'i Hakkında 2/4 Numaralı Kanun Teklifi ve Sıhhat ve İctimaî Muavenet, Dahiliye, Adliye, Hariciye ve İktisat Encümenleri Mazbataları,” p. 64.

inauguration of new social technologies in shaping of the social sphere reflected the spirit of the law.

With the enactment of this law, the Ministry of Health and Social Assistance was empowered to intervene in the following issues: the promotion of birth and the reduction of infant mortality rates; the protection of the pre- and post natal health of mothers; the prevention of contagious diseases; the war against contagious diseases and the various negative elements that caused thousands of deaths; the observation of all therapeutics; the supervision of food, and all kinds of drugs, poisons, vaccines and serum; the protection of child and youth health, the hygiene of schools and workplaces; the hygiene of mineral and thermal waters; the inauguration and administration of all kinds of bacteriology laboratories and public health institutions; the administration and control of medical schools and certification; the establishment and administration of clinics and asylums for the mentally ill and disabled; the hygiene of immigrants; the surveillance of the sanitary conditions and hygiene in prisons; the preparation of statistics; publications and propaganda on health; and the surveillance of means of transportation and communication.⁹⁰

⁹⁰ “MADDE 3: Sıhhat ve İctimai Muavenet Vekâleti bütçeleri muayyen hatlar dahilinde olarak aşağıda yazılı hizmetleri doğrudan doğruya ifa eder: 1- Doğumu tezyit ve teshil ve çocuk ölümünü tenkis edecek tedbirler. 2- Validelerin doğumdan evvel ve doğumdan sonra sıhhatlerinin vikayesi. 3- Memlekette sari ve salgın hastalıkların hülûlüne mümaneat. 4- Dahilde her nevî intanı, sari ve salgın hastalıklarla veya çok miktarda vefiyatı intaç ettiği görülen sair muzur amillerle mücadele. 5- Tababet ve şubeleri san'atlarının icrasına nezaret. 6- Gıdalar ile ilaçları ve bütün zehirli müessir ve uyuşturucu maddeleri ve münhasıran beşerî serum ve aşuları mürakabe. 7- Çocukluk ve gençlik hıfzısıhhasına ait işlerle çocuk sıhhat ve bünyesinin muhafaza ve tekâmülüne ait tesisatın mürakabesi. 8- Mektep hıfzısıhhası. 9- Mesai ve san'at hıfzısıhhası işleri. 10- Maden suları ile sair havassı şifaiyesi olan sulara nezaret. 11- Hıfzısıhha müesseseleri ve bakteriyoloji laboratuvarları ve aelûmum hayatî muayene ve tahlillere mahsus müesseseler küşat ve idaresi. 12- Meslekî tedrisat müesseseleri küşat ve idare veya mümāsili müessesatı mürakabe ve bunlara müsaade itası. 13- Mecmunlarla sair ruhî hastalıklara mahsus tedavihaneler veya malûl veya herhangi bir noksanî hikate malik olanları kabul edecek yurt ve müesseseler tesis ve idare. 14- Muhacirin sıhhat işleri. 15- Hapishanelerin ahvali sıhhiyesine nezaret. 16- Tıbbî istatistiklerin tanzimi. 17- Sıhhi neşriyat ve propagandalar. 18- Vesaiti münakale umuru sıhhiyesine nezaret.” Umumi Hıfzısıhha Hakkında 1/441 Numaralı Kanun Lâyhıhase Kırklareli Meb'usu Dr. Fuat Bey'in Çocukların

The sixth chapter of this law was directly related to the protection of the health of child and youth. Article 152 of the chapter concerning this area of health marked both the state's power in the private sphere of the citizens, especially of female ones, and the deepening pro-natalist policies.⁹¹ The Republican elites proposed a series of social and technical interventions designed to transform the marital and procreative practices of the Turkish people. For example, in line with the pro-natalist policies, families with too many children were seen as eligible for state help in the public discourse. Branches of the CPS also shared the burden of providing these families with money.⁹² Those families who applied to the relevant institutions were provided with financial help. Likewise, fathers with more than five children were exempt from any kind of transportation fees.⁹³ The Ministry of Health allocated funds for the investigation of the small towns in order to detect the number of mothers having more than six children and gave them rewards.⁹⁴ News on the families with many children as a means of introducing them to the public and describing their desperate, helpless situations took up a great deal of space in the newspaper *Cumhuriyet*.⁹⁵

İçki ve Tütün Kullanmalarınının Men'i Hakkında 2/4 Numaralı Kanun Teklifi ve Sıhhat ve İctimai Muavenet, Dahiliye, Adliye, Hariciye ve İktisat Encümenleri Mazbataları, pp. 68, 9.

⁹¹ As in the words of Schafer, laws and discourses around family, women and children "opened the way for the positing of a new kind of private sphere to which the state did have some right of access as protector and universal parent." Schafer, *Children in Moral Danger and the Problem of Government in Third Republic France*.

⁹² To give an example, Polis Sait Efendi (Sait Efendi, the police) was given 259 Turkish liras in 1929 by the head office of the CPS. See, "Cemiyetimizin Merkez ve Şube Faaliyetlerine Bir Nazar," *Gürbüz Türk Çocuğu*, no. 29 (January 1929).

⁹³ "Cumhuriyetin Sıhhat Siyaseti," in *Sıhhat Almanacağı*, ed. Mazhar Osman (İstanbul: Kader Matbaası, 1933), p. 41.

⁹⁴ "Çok Çocuklu Annelere Mükâfat," *Cumhuriyet*, 24 September 1930.

⁹⁵ "Çok Çocuklu Aileler," *Cumhuriyet*, 4 December 1930, "Çok Çocuklu Aileler," *Cumhuriyet*, 31 January 1931, "Çok Çocuklular," *Cumhuriyet*, 26 July 1930.

Article 156 of the law stated that women with more than six dependent children were to receive rewards in cash. Those who preferred would be given medals instead of the cash.⁹⁶ These rewards, apart from the recognition of the pro-natalist inclinations and procreative capacities of Turkish citizens, underlined the importance of motherhood with official recognition. Maternity was declared to be a national and a social duty, and was to be protected by the state. Articles regulating the sphere of youth and child health underlined the paternalistic roles the Turkish state assumed in the management of the population. Thus, it is no surprise that Article 152 of the Law on Public Hygiene prohibited the import and usage of drugs and substances which would prevent fertilization or help abortion.⁹⁷

The previous article summarized the motivation that lay behind the inauguration of a chapter regarding child and youth health. Article 151 endowed the Ministry of Health and Social Assistance with the authority to found and administer hospitals and institutions of child and youth health and to carry out propaganda in the name of childcare. The law also announced that birthing services were to be free of charge in state hospitals. A woman who gave birth was to stay in state hospital for a week, unless her condition required a longer stay. With the pro-natalist inclinations of the period, government and municipal doctors, as well as midwives, were obliged to give assistance

⁹⁶ "Umumî Hıfzısıhha Hakkında 1/441 Numaralı Kanun Layihası ile Kırklareli Meb'usu Dr. Fuat Bey'in, Çocukların İçki ve Tütün Kullanmalarının Men'i Hakkında 2/4 Numaralı Kanun Teklifi ve Sıhhat ve İctimaî Muavenet, Dahiliye, Adliye, Hariciye ve İktisat Encümenleri Mazbataları," p. 95.

⁹⁷ "İlkahâ mani veya çocuk düşürmeğe vasıta olup Sıhhat ve İctimaî Muavenet Vekâletinin tayin olunacak alât ve levazımın satışı memnudur." *Umumî Hıfzısıhha Hakkında 1/441 Numaralı Kanun Lâyihaile Kırklareli Meb'usu Dr. Fuat Bey'in Çocukların İçki ve Tütün Kullanmalarının Men'i Hakkında 2/4 Numaralı Kanun Teklifi ve Sıhhat ve İctimaî Muavenet, Dahiliye, Adliye, Hariciye ve İktisat Encümenleri Mazbataları*, p. 95.

to poor pregnant women free of charge. The law also restricted the individual's liberty on the issue of birth control and reinforced their procreative capacities.

In line with the concerns regarding the health and survival of the newborns, Article 155 banned mothers from working in the first three weeks of the post natal period unless a doctor approved otherwise. Article 157 aimed at regulating breastfeeding. This article authorized the state once again to step in where parents proved themselves incapable of fulfilling their responsibilities as dictated by society.⁹⁸ Women who intended to become professional wet nurses were to present an official document proving that their own babies were at least seven months old or being fed by another wet nurse. The law also required that wet nurses provide an official report showing that they were free of venereal diseases, tuberculosis, and leprosy. State doctors were to examine wet nurses and issue the required document free of charge.⁹⁹ This article, as well as the article regarding marriage permits, stemmed from the discourses concerned with the degeneration of the nation and the quality of the population. These regulations that defined who could marry and who could not, as well as who could be a wet nurse and who could not, were defended on the grounds that the sound future of the nation was protected by them, because the high rates of infant mortality put the collective vitality of the nation in jeopardy.¹⁰⁰

⁹⁸ Interestingly enough, these articles about wet-nursing raised no discussion in the parliamentary sessions. Seeing the realm of social empirically observable and mutable, the Republican legislators did not develop concerns as to where and how to draw the line between the paternal responsibility of biological parents and that of the state.

⁹⁹ See Article 125 of the Law. "Umumî Hıfzısıhha Hakkında 1/441 Numaralı Kanun Layihası ile Kırklareli Meb'usu Dr. Fuat Bey'in, Çocukların İçki ve Tütün Kullanmalarının Men'i Hakkında 2/4 Numaralı Kanun Teklifi ve Sıhhat ve İçtimai Muavenet, Dahiliye, Adliye, Hariciye ve İktisat Encümenleri Mazbataları," p. 92.

The law further addressed abandoned or orphaned children. Care and shelter institutions, both private and public were to be observed and controlled by the Ministry of Health and Social Assistance. Likewise, individuals who wished to care for children under the age of seven were to obtain permits from the related municipality showing that they were suitable for the task. Furthermore, municipalities and village delegations (*köy heyeti*) were obliged to take care and provide shelter for any orphaned or abandoned children (*metruk*) under the age of six. After the age of six, these children would be under the aegis of the Ministry of Education.¹⁰¹

The law included clauses regarding the feeding of the infants and children. Things related to “milk, which is the natural necessity for child development,”¹⁰² were regulated by the law as well. The law required that those involved in milk production or sales obtain permission from the municipalities. The municipalities would be responsible for the examination of milk and the places milk was produced. The milk issue was discussed in the media as the principle element in the development of children who would be the future’s fit and healthy generation. A member of the Menagerial Board of the *Darülaceze* (Alms House), İzzet Kâmil Bey, admitted that the milk issue was one of the key elements in infant and child mortality.¹⁰³

¹⁰⁰ “Müstakbel neslin selameti ve aynı zamanda evlenen gençlerin sıhhati noktai nazarından çok mühim olan teehhül muayenati işleri çok vazih ve sağlam kanunî bir çerçeve içine alınmıştır.” “Umumi Hıfzısıhha Kanunu Esbabı Mucibe Layihası,” p.4.

¹⁰¹ “Umumî Hıfzısıhha Hakkında 1/441 Numaralı Kanun Layihası ile Kırklareli Meb'usu Dr. Fuat Bey'in, Çocukların İçki ve Tütün Kullanmalarının Men'i Hakkında 2/4 Numaralı Kanun Teklifi ve Sıhhat ve İctimai Muavenet, Dahiliye, Adliye, Hariciye ve İktisat Encümenleri Mazbataları,” p. 96.

¹⁰² “Faslın ikinci babını teşkil eden süt meselesi için ne söylenece azdır, çocuk büyümesi için en tabii bir ihtiyacı teşkil eden sütü memleketimizde düçar olduğu tağşişler ve ihtimamsızlık yüzünden düçar olduğumuz zararları izaha lüzum görülmemiştir.” “Umumi Hıfzısıhha Kanunu Esbabı Mucibe Layihası,” p. 4.

¹⁰³ “Çocuklarımız Ne ile Besleniyor?” *Cumhuriyet*, 8 May 1931.

Physicians were the primary agents in the implementation of the law and in the propaganda of state policies regarding the control and surveillance of the social sphere. The reduction of the risks of disease required new forms of social intervention in everyday life, especially in the private sphere of the family. This task of intervention fell largely to physicians and hygienists, both in hospitals and dispensaries, as well as via popular magazines and newspaper. For example, an article of the law dictating obligatory examinations for prospective couples was one of the main pillars meant to protect the “sanctity of the family.” And only state physicians were empowered to carry out the necessary checks for this permission.¹⁰⁴ Medicine was, now, to be increasingly transformed into a “science of health” (*sıhhiyecilik*) rather than a “science of disease” (*tedavicilik*). The target of the medical science should no longer be mere individuals but the biological population as a whole. As one author suggested

The virtue and skill is to decrease the number of the diseased and disabled, to multiply the number of the physically and mentally fit, and to hinder the threats and epidemics. Only the *science of health* could achieve this, the science of disease could only be a subsidiary factor. That is, the science of health was to be primary, whereas that of disease was secondary. The latter can be carried out by individuals whereas the former can only be achieved by the state, by the national power ... Thus, the Republican government, showing great potency, gives high importance to the requirements of science and makes a creative revolution in the field of science of health, as well.”¹⁰⁵

¹⁰⁴ *Evlenme Muayenesi Hakkında Nizamname* Available [online] at http://www.yargitay.gov.tr/bilgi/kanun_liste/PC20011682.HM3.frameset.html For a similar application of “premarital certificate” in interwar Italy, see Horn, *Social Bodies: Science, Reproduction, and Italian Modernity*, pp. 62-63.

¹⁰⁵ Muhiddin Celâl, “Umumî Hıfzısıhha Kanunu,” *Sıhî Sahifalar* 4, no. 10 (1930). “*Fazilet ve maharet odur ki hasta ve malûlün adedi azaltılabilsin; dimağı, vücudu dinç nüfus çoğaltılabilsin; tehlikelerin, salgınların önü alınsın! İşte bunları yapacak sıhhiyecilik idi; tedavicilik bir yardımcı olacaktı; yani sıhhiyecilik aslı tedavicilik ferî idi; bu sonuncusu ferdlerin iktisap edebileceği bir sanat, birincisi ise ancak Devletin yapabileceği bir vazife, bir millî kudret idi [...]* Cumhuriyet hükümeti bu işte de büyük bir vüka ve iktidar ile ilmin, fennin icaplarına çok yüksek bir ehemmiyet veriyor, sıhhiyecilikte de yaratıcı bir inkılap yapıyor.” The terms “science of health” and “science of disease” as equivalents for “*sıhhiyecilik*” and “*tedavicilik*” are taken from Horn, *Social Bodies: Science, Reproduction, and Italian Modernity*, p. 42.

The law and the discussions revolving around the population issue marked the rise of medicine as a social phenomenon. As emphasized by the same author, the curative medicine or the “science of disease” was interested in individuals whereas preventive medicine was interested in the masses as a whole and covered all fields of life, from epidemics to medical statistics. It was now of great importance to prevent disease rather than cure it.¹⁰⁶ For example, in the case of disease, now what was important was not the nature of the disease, but medical and hygienic practices in general. As one physician complained in a bitter tone, “most of the mothers are not able to care for their babies. They only know how to give birth to them and kill them. It is the same in the upper classes as well. They know nothing about childcare.”¹⁰⁷ This new regime of hygiene required that medicine should not be restricted only to curing the diseased, but should enter the villages, schools, factories, barracks, and private sphere of families. The new preventive medicine should develop its own techniques such as education, hygiene and in-depth medico-social investigations, since the death rates stemmed not only from a weak health organization, but from a population whose members were “ignorant.”¹⁰⁸ The health of the population would be assured by the scientific management of the population. Both demographic increase and medical health were perceived to be closely related to hygienic surroundings, and it was of great

¹⁰⁶ See for example, “*Tababette hastalığı tedaviden ziyade hastalıktan vikaye daha mühim bir yer tutar.*” Dr. İhsan Hilmi Bey, “Asri Anne,” in *Sihhat Almanağı*, ed. Mazhar Osman (İstanbul: Kader Matbaası, 1933), “*Hastalanıp bakılmaktansa hastalıktan korunma çaresini aramak daha iyidir. Esasen şimdiki hekimliğin baş işi de budur.*” Dr. Orhan Tahsin Bey, “Kadın Hastalıklarından Korunma Çarelerine Dair Açık ve Kısa Halk Bilgisi,” in *Sihhat Almanağı*, ed. Mazhar Osman (İstanbul: Kader Matbaası, 1933).

¹⁰⁷ “*Annelerin çoğu çocuklarına bakamıyorlar. Yalnız doğurmasını ve öldürmesini biliyorlar. Zenginlerde de böyle. Çocuk bakımı hakkında zerre kadar malumat yok.*” The words of Dr. Nâzım Bekir quoted in MEB, “Süt Damlasında Gördüklerim.” p. 14.

¹⁰⁸ “*Sihhi organizasyonu geri ve halkı cahil kalmış memleketlerin bu sahada çok ilerlemiş olan garp memleketlerine bir hamlede yetişmek iddiasına kalkışmaları nafile bir hayâl peşinde koşmak olur.*” Nabi, “Nüfus Meselesi Karşısında Türkiye,” p. 35.

importance to take a series of measures to prevent medical and demographic threats and to promote hygienic behavior. Therefore, it was not enough to write articles in the popular journals and newspapers to defend the health of infants and children, to educate the child and youth both in physical and hygienic issues, and to prevent social disease. The same author, for the issue of maternity and childcare, suggested that the government build Houses for Childcare Methods (*Çocuklara Bakım Usulü Evi*), each of which would employ a doctor who would teach women the methods of proper childcare. The doctor even suggested that attendance at the courses must be obligatory and marriage prohibited for those women who failed exams. The same rule should be applied, he continued, to the female students who were enrolled in the Girls' Schools (*kız mektepleri*).¹⁰⁹

This new science of health required more from physicians than just their therapeutic capacities. As Yusuf Akçuraoğlu Bey emphasized in the proceedings of the Grand National Assembly on the Law on Public Hygiene:

Our doctors and soldiers are the most hard-working and influential factors in the development and improvement of our country. This law has also been prepared by our doctors, to serve as a salve to the great hygienic, social and accordingly, economic and political problems of our country, and has been extended and approved by the Committee of Health, composed of doctors.¹¹⁰

¹⁰⁹ MEB, "Süt Damlasında Gördüklerim." p. 14.

¹¹⁰ "Milletimizin terakki ve inkişafında en ziyade müessir ve amil olan sınıf askerlerimizle tabiplerimizdir. Memleketimizin sıhhi ve içtimai ve binaenaleyh iktisadi ve siyasi büyük yaralarına merhem olacak bu kanunu da hekimlerimiz hazırladı, hekimlerimizden mürekkep Sıhhiye Encümenimiz tesvi ve tasvip etti." "Umumî Hıfzısıhha Hakkında 1/441 Numaralı Kanun Layihası ile Kırklareli Meb'usu Dr. Fuat Bey'in, Çocukların İçki ve Tütün Kullanmalarının Men'i Hakkında 2/4 Numaralı Kanun Teklifi ve Sıhhat ve İçtimai Muavenet, Dahiliye, Adliye, Hariciye ve İktisat Encümenleri Mazbataları," p. 66.

Another issue problematized by the Law on Public Hygiene was the moral regulation of children and youth. Children younger than twelve years old were banned from entering the cinemas, theatres and dance halls. Children older than six years old were allowed to watch only “educative” films or plays in the daytime, on the condition that they were accompanied by an adult.¹¹¹ As a matter of fact, long before the enactment of the Law on Public Hygiene, Kırklareli Deputy Fuad Umay, who was a doctor dedicated to the child question, had presented a detailed proposal of the article. He had stated that, “the health and morals of children are affected when they watch improper films.”¹¹² Arguing that in some countries even unmarried girls were denied admittance to some films, he had proposed in the parliament the prohibition of children in cinemas and theatres on 8 March 1928.¹¹³ This proposal had been declined by the Commission of Health and Social Assistance since the imminent Law on Public Hygiene already included articles regarding the subject.¹¹⁴ However, Umay, who found the Law inadequate, introduced another proposal in 1935. This time, although the proposal was appreciated by the related commissions, it did not draw enough attention because of the upcoming elections. Umay submitted a more comprehensive proposal on 20 February 1941, but this was rejected by the Education Commission, as well.¹¹⁵ Thus, his hopes

¹¹¹ “*Altı yaşından yukarı olanların gündüzün terbiyevî ve hususî mahiyette olan sinema veya tiyatrolara getirilmesine müsaade olunabilir.*” Ibid., p. 96.

¹¹² “...çocuklarımız yaşlarla mütenasip olmayacak filimleri görmek suretile sıhhatlerini ve ahlâklarını zafa düçar etmektedirler.” “Kırklareli Meb'usu Fuat Beyin Çocukların Sinema ve Tiyatrolara Kabul Edilmemeleri Hakkında 2/45 Numaralı Teklifi Kanunisi ve Maarif Encümeni Mazbatası,” *TBMM Zabıt Ceridesi* 14, no. Term 3, Session 3 (2 December- 30 December 1929).

¹¹³ Quoted in Veysi Akın, *Bir Devrin Cemiyet Adamı: Fuad Umay (1885-1963)* (Ankara: Atatürk Araştırma Merkezi, 2000), pp. 60, 61.

¹¹⁴ Ibid., p. 60.

¹¹⁵ Ibid., p.61.

about the prohibition of children and youth from dance halls, theatres and cinemas were confined to the narrow scope of Article 167 of the Law on Public Hygiene.

The constructed moral relation between movies and children's health was not confined solely to the legislators. In a letter written to *Gürbüz Türk Çocuğu*, a mother complained about the negative impact of films on her children, who were "living models of health, robustness and beauty."¹¹⁶ She stated that after watching a movie her "robust child who is like golden ball came home in a very exhausted condition."¹¹⁷ Later on, as stated by the mother, the child had to visit several doctors, but could never gain joy and health again. Therefore, the mother called the CPS to take necessary precautions in order to preempt the "poisonous impact of the cinema."¹¹⁸

Article 174 of the law regulated the working conditions of children.¹¹⁹ Children between the age of twelve and sixteen would not be allowed to work after eight in the evening.¹²⁰

Physicians were perceived as the most influential agents of the state embedded in the bureaucratic apparatus of the state. They were empowered not only to carry out checks, but also were obliged to inform the Offices of Health and Social Assistance about disease such as malaria, cholera, syphilis, tuberculosis, and diphtheria. These

¹¹⁶ Mediha Mithat Ömer, "Sinema ve Çocuklarımız: Sinemaların Çocuk Üzerinde Yaptığı Tesiri Çocuğu Üzerinde Tecrübe Eden Bir Annenin Düşündükleri," *Gürbüz Türk Çocuğu*, no. 33 (June 1929), p. 9.

¹¹⁷ "Akşamlyın altın topu gibi gürbüz çocuğum pek bir bitkin halde eve geldi." Ibid., p. 10.

¹¹⁸ "Sinemacılığın ve sinemaların bu gibi zehirlerinin önüne geçilmesi için icap eden teşebbüslerde bulunmasını Muhterem Cemiyetimizden reca ediyorum." Ibid., p. 10.

¹¹⁹ "İşçilere Dair," *Cumhuriyet*, 7 November 1930.

¹²⁰ *Umumî Hıfzısıhha Hakkında 1/441 Numaralı Kanun Lâyihaile Kırklareli Meb'usu Dr. Fuat Bey'in Çocukların İçki ve Tütün kullanmalarının men'i hakkında 2/4 Numaralı Kanun Teklifi ve Sıhhat ve İçtimai Muavenet, Dahiliye, Adliye, Hariciye ve İktisat Encümenleri Mazbataları*, p. 97.

responsibilities were given to doctors working in such places as hospitals, schools, factories, charity foundations, prisons, shops, hotels, pensions, and public baths.¹²¹ They were also endowed with the authority of informing any case of disease and applying forced check and treatment to people suspected of having contagious diseases, especially venereal disease. The reports doctors presented were to include the name and age of the patient, the stage of his disease, his health history, and whether he had been treated before or not.

It is clear that the Republican authorities were well aware of the importance of statistics. Statistics became one of the tools of the new scientific language of this new “modern” regime. For example, nurses and doctors began to prepare statistics about poor women and their children based on their investigations in poor districts and presented them monthly to the Ministry of Health and Social Assistance.¹²² However, it is clear that the young Republic was behind its contemporaries in the field of gathering statistics. The prominent feminist and socialist Sabiha Zekeriya Serter complained about the lack of statistics in the field of child question.¹²³ She emphasized the need to know, classify and investigate the population in order to cure the social ills and added, “the child question has become a branch of practical sociology in the last century. The statistical data has been found inadequate, and the economic, social and educative lives of children were detected like a map through social investigations and organisations.”¹²⁴ Doubtless,

¹²¹ “Kanunen İhbarı Mecburî Hastalıklar ve İhbar ile Mükellef Olanlar,” in *Sihhat Almanacağı*, ed. Mazhar Osman (İstanbul: Kader Matbaası, 1933).

¹²² “Dispanserler Fakir Çocuklarla Meşgul Olacaklar,” *Cumhuriyet*, 27 March 1931.

¹²³ Sabiha Zekeriya Serter, “Çocuk Meselesi: Çalışan Çocuklar,” *Resimli Ay*, no. 3 (May 1930).

the scientific and modern language physicians, reformers and law makers adopted helped them propagate and apply the policies to a great extent. The objective and scientific language, which was symbolized by the authority of medicine, served as a means of legitimatization for the new regime.

This modern regime of scientific authority, symbolized by the rational language of medicine and crystallized in the 1930 Law on Public Hygiene, created a new environment in which the relationship between the individual and society was redefined. In contrast to the body fetishism of the second half of the twentieth century, in the early decades of the Republican regime, the individual was to care for himself just for the sake of society and the nation, and, in turn, society would provide medical and economic assistance to the individual for the sake of the nation. Thus the individual's responsibility for her or his own health and welfare was transformed into a social duty. Assistance to the individual was not a product of a humanistic approach or a moral obligation because everybody had the right to a healthy and prosperous life, but the product of the anxiety to create a populous nation whose individuals were joyful, healthy, fertile and productive.¹²⁵

The 1930 Law on Public Hygiene served as a site on which the aspirations of the Republican state in the way of drawing the boundaries of the social government and defining a legitimate role for the government in the family life as a supplementary or alternative parent, particularly a father were crystallized. From then on, the state would take on the role of parental figure.

¹²⁴ “*Son asırda çocuk meselesi başlı başına ameli içtimaiyatın bir şubesi olmuştur. İstatistik malûmat kâfi gelmemiş, içtimai tetkiklerle, teşkilatlarla, çocukların iktisadî, içtimai, terbiyevî hayatları, bir harita gibi çizilmiştir.*” Ibid., p. 27.

¹²⁵ “*Çok nüfus, tok nüfus, şen ve zengin nüfus istiyoruz.*” Süreyya, “*Çok Nüfuslu Anadolu,*” p. 35.

However, previous long-lasting wars, the impact of the Great Depression and the advent of the World War II hindered the application of the law, because the Turkish state lacked the necessary tools, technology and infrastructure to carry out such a well-defined program of surveillance. A few news items from 1939, nine years after the enactment of the law, are enough to illustrate the recursive character of the social problems despite the detailed laws and regulations:

The Governor states: “The current method of milk sales can be defined only as ‘improper’” The Municipality shows great interest in the milk issue. The Municipality sent a circular letter to the responsible parties and asked them to control the milk. The Governor is resolved to solve the city’s problem of milk provision completely. It was demanded that the commission made up of the professors and experts from the School of Agriculture finished the investigation they are carrying out. As soon as the commission presents the related report, the Mayor and the Governor are going to venture the foundation of a milk factory.¹²⁶

Despite the discourse and propaganda, however, the number of orphaned and abandoned children was estimated to be nearly 120,000 in 1948.¹²⁷ It is not possible to deny the impact of World War II, however, it was a common feature of the day to read news about the poor and helpless people and widespread disease, mostly tuberculosis, during the late early fifties.¹²⁸ For example, Dr. Ekrem Hayri Üstündağ, the Minister of

¹²⁶ “Vali söylüyor: ‘Sütün şimdiki satış şekli ancak kötü kelimesi ile ifade edilebilir. Belediye dün de alakâdarlara bir tamim göndererek sütlerin kontrolüne devam edilmesini bildirmiştir... Vali, şehrin sıhhi süt ihtiyacı işini radikal surette halle karar vermiştir. Ziraat Enstitüsü sütçülük profesörler ve mütehassıslarından mürekkep heyetin yapmakta olduğu tahkikatın süratle ikmal istenmiştir. Bu heyet raporunu verir vermez Vali ve Belediye Reisi süt fabrikasının kurulmasına teşebbüs edecektir.” “Vali Söylüyor: ‘Sütün Şimdiki Satış Şekli Ancak Kötü Kelimesi ile İfade Edilebilir,’” *Cumhuriyet*, 6 May 1939.

¹²⁷ “120.000 Çocuğun Kaderini Tayin Edecek Olan Yoksul Çocuklar Lâyhısının Müzakeresi Geriye Bırakıldı,” *Hürriyet*, 29 May 1948.

¹²⁸ See for example, “Veremin En Çok Olduğu Bölgeler,” *Cumhuriyet*, 25 January 1951; “Bulaşıcı Hastalıklara Karşı Alınan Tedbirler,” *Cumhuriyet*, 13 February 1950; “Sağlık Bakanı, Mecliste Sıtma ve

Health and Social Assistance confessed that the number of the citizens who died annually as a result of improper care was 300,000 as of 1951.¹²⁹

Children's Needs

A quick glance at the pages of *Cumhuriyet* provides strong evidence of the high incidence of child poverty. Death rates among infants and children were high; the number of poor children who had nobody to look after them exceeded the average limits. Malnutrition was a common characteristic of their daily life. Not only did orphans and destitute children suffer from malnutrition, but children who had somebody to look after them were afflicted with this problem as well.¹³⁰ Delinquency created anxiety among the elite. The high rates of infant and child mortality, the large number of abandoned, orphaned or poor children, malnutrition and disease, child labor, and child abuse were among the parameters of the multifaceted and entrenched "child question." Despite the acute and severe nature of this issue, it is clear that the formal child care machinery of the state only involved a minority of children and child welfare efforts presented a dual nature involving both the state efforts and private charitable activities. However, individual acts of benevolence and private initiatives that created private philanthropies rather than political initiatives that resulted in public provision constituted the core of child welfare in Turkey. Nevertheless, it is of great significance to emphasize that most

Verem Mücadelesine Dair Geniş İzahlarda Bulundu," *Cumhuriyet*, 24 February 1950, "Yurdumuzda 200.000 Veremli Var," *Cumhuriyet*, 6 June 1950; "Doğum Çok Ama Ölüm de Çok," *Cumhuriyet*, 24 August 1950; "Kâfi Gıda Alamıyan Öğrenciler," *Cumhuriyet*, 16 February 1951.

¹²⁹ "Bakımsızlıktan Yılda 300 Bin Vatandaş Kaybediyoruz," *Cumhuriyet*, 31 January 1951.

¹³⁰ "Gıdasız Talebe," *Cumhuriyet*, 6 October 1930, "Mekteplerdeki Aç Yavruların Hali Ne Olacak?" *Cumhuriyet*, 3 November 1930.

of the actors in private or semi-private charity organizations, such as Fuad Umay and Behçet Uz, were very influential and active figures in politics as well.

Newspapers reported on the efforts to feed, clothe, and provide shelter and health care for sick or malnourished children in urban areas. When children were in question, the discrepancy between the rich and the poor was given special emphasis, although it was not taken into consideration in other fields where poverty was apparent. The child question haunted the minds of intellectuals and critics. As Libal writes, “no longer could child poverty be explained away as a result of their parents being ‘martyred’ during the pre-Republican war years, or as the outcome of dislocation and want that pervaded during the time of upheaval.”¹³¹

It was obvious that the young Republic could not provide the most vulnerable part of its population, which was the future of the nation and the foundation of society, with even the most basic necessities, such as nutrition and housing. As a writer for *Cumhuriyet* commented on 27 April 1931:

We are a poor nation. Most of our people lead their lives as peasants and workers. Those who live in houses are outnumbered by those who live in huts or whatever they can find. During Children’s Week, rather than helping those children who are enjoying themselves with their numerous toys in huge, ostentatious houses, we have to think of those poor children who are deprived of society’s help and live in bad living conditions. Do not ever forget that the future of the nation depends on these poor, helpless children who will make up tomorrow’s generation.¹³²

¹³¹ Libal, “The Children’s Protection Society: Nationalizing Child Welfare in Early Republican Turkey,” p. 72.

¹³² “Biz fakir bir milletiz, ekseriyetimiz köylü, rençber ve ameledir. Kulübede, izbede oturanlarımız, şöyle böyle evlerde oturanlara galiptir diyebiliriz. Çocuk haftası içinde süslü salonlarda sayısız oyuncakları ile gönül eğlendiren çocukların zevkine yardımcı değil, cemiyetin himayesinden uzak kalıp, toprak altlarına iltica eden zavallı yavruları daha çok düşünmek mecburiyetindeyiz. Bahusus, yarınki nesli teşkil edecek olan bu bakımsız çocuk alaylarına milletin istikbali mevdudur, bunu unutmyalım.” “İzbede Unutulan Yavrular,” *Cumhuriyet*, 27 April 1931.

During Children's Week in April, several illustrated news articles appeared in the pages of *Cumhuriyet*. Attention was drawn to the poverty of the abandoned children and orphans. These poor, unhealthy children could not find any refuge, had to work under severe conditions to survive, and hardly had any food to eat. It was not just for these children to be in such desperate circumstances while their rich peers enjoyed themselves in their peaceful homes.¹³³ After giving information about the Children's Palace, which was founded under the aegis of the *Himayei Etfal Cemiyeti* (Children's Protection Society) in 1931, the newspaper drew attention to the high rates of infant and child mortality and emphasized the need for more shelters for children.¹³⁴ Society was called on to help these children.¹³⁵ In the words of one author,

We are in an age of a new understanding. This is the age of understanding children. The spirits, hearts and minds of all the citizens should be open to the sacred character of this age of understanding and fifteen million citizens should come together to form a affectionate and self-sacrificing mother in order to provide the child with due care.¹³⁶

It is clear that the disintegration of traditional ties and relationships among people in society as a result of the advent of urbanization, urban life, and population growth had resulted in these kinds of problems. All the children referred to in the news were elements of *urban* life. The Ministry of Health and Social Assistance was called on to help save "these poor and desperate children of the big cities" from the streets.¹³⁷

¹³³ "Bakımsız Türk Yavruları," *Cumhuriyet*, 24 April 1931.

¹³⁴ "Bize Daha Çok Çocuk Sarayı Lazım," *Cumhuriyet*, 25 April 1931.

¹³⁵ "Yoksul Çocuklara Elinizi Uzatın," *Cumhuriyet*, 28 April 1931.

¹³⁶ "Yeni bir idrak devrindeyiz. Bu devir çocuğu idrak devridir. Bütün vatandaşların ruhları, kalpleri, dimağları bu idrak devrinin kudsiyetine açık bulunmalı, on beş milyon vatandaş müşfik, fedakâr bir tek anne halinde birleşerek çocuğu lâıyk olduđu yerde tutmalıdır." Celâl, "Çocuk," p. 2.

Since they were seen as the future of the nation, their health, personal hygiene and nutrition were given special attention, especially under the roof of the Darülâceze. Issues such as providing milk, decreasing the death rate among children, and developing their hygiene habits were discussed in the regular meetings of Darülâceze.¹³⁷ Most of the care houses had the duty of providing children with medical treatment as well. These establishments were founded to provide medical treatment to poor infants and children, to place them under regular control, and to provide regular pre-natal and post-natal medical checkups for poor pregnant women.¹³⁹ In addition to providing care, these houses would take an interest in the education and cultivation of the children as well.¹⁴⁰ Dispensaries also assumed these duties.¹⁴¹ Doctors and nurses were not only interested in those who applied to the institutions, but also had the responsibility of searching their neighborhoods, detecting and examining unhealthy poor children so as to contribute to the future of the nation, which would be created by “robust Turkish children.”¹⁴² Some of the actors who were called to undertake active roles in the promotion of physical well-being of the social body were itinerant nurses and family doctors.

The family doctor was another institution which was suggested to take root in the society in order to keep records of the all members of each and every family. Apart, from keeping records of every member, the family doctor should take an interest in the

¹³⁷ “Büyük Şehirlerin Sefil ve Perişan Yavruları İçin Himaye İstiyoruz,” *Cumhuriyet*, 26 April 1931.

¹³⁸ “Çocuklarımız Ne ile Besleniyor?”

¹³⁹ “Bakımevleri,” *Cumhuriyet*, 30 March 1931, “Üç Çocuk Dispanseri Açılıyor,” *Cumhuriyet*, 2 October 1930.

¹⁴⁰ “Bir Çocuk Bakım Müessesesi Açılacak,” *Cumhuriyet*, 18 October 1930.

¹⁴¹ “Dispanserler Fakir Çocuklarla Meşgul Olacaklar.”

¹⁴² “Beşiktaş Bakımevi Faaliyete Geçti,” *Cumhuriyet*, 17 February 1931.

living conditions and medical state of each and every member.¹⁴³ The CPS Regulation Related to the Dispensaries dictated that each and every dispensary had to employ an itinerant nurse in order to control and regulate the child care practices at homes and educate the mothers.¹⁴⁴ Apart from that itinerant nurses were empowered to identify the social conditions of families and force them to make their children examined regularly.

It is not possible to say the child question created a monolithic space whereby those who felt responsible for children, “the future of the nation” could gather and work in cooperation. Not only did it fashion solidarity and cooperation among the elite but also produced tensions and negotiative processes among the sections of society involved. The *Çocukları Kurtarma Yurdu*, which was founded in 1933 by Kâzım Zafir, is a good example of the tensions the child question created among the Republican elites. In 1943 issue of journal *İş* (Work), dedicated solely to the child question, the prominent intellectual Ziyaeddin Fahri Fındıkoğlu, wrote about the foundation of the Home. After the First World War, when poverty forced children living in the outskirts of the city to leave their homes and flood the city center and to support themselves through begging and vagrancy, the Committee of Union and Progress took the initiative of founding a shelter for these children, where they could at least spend the night. Therefore, the CUP rented a *hamam*¹⁴⁵ (Turkish bath) in Tophane for this purpose. According to Fındıkoğlu, the CUP authorities chose a *hamam*, because they wanted to inculcate the children with

¹⁴³ See for example, “Aile Doktoru Bulundurmayı İhmal Etmeyiniz,” *Gürbüz Türk Çocuğu*, no. 37 (October 1929).

¹⁴⁴ *İstanbul Çocuk Esirgeme Kurumu: Dispanser ve Bakım Müesseseleri Talimatnamesi* (İstanbul: Alaeddin Kırıl Basımevi, 1941), p. 17.

¹⁴⁵ “Yamalı hamam” (patch hamam), Ziyaeddin Fındıkoğlu, “Çocukları Kurtarma Yurdu,” *İş: Felsefe, Ahlak ve İctimaiyat Mecmuası* 9, no. 34 (1943), p. 206.

the idea of cleanliness.¹⁴⁶ The children who found shelter in *Yamalı Hamam* were “robust and strong, even clever and energetic; yet neglected by their families and society.”¹⁴⁷ Inspired by this initiative, the governor of İstanbul, Muhddin Bey, founded the *Galata Kurtarma Yurdu* (the Galata Home for Rescuing Children). The *Çocukları Kurtarma Yurdu* was the final result of such initiative taken in order to “rescue” the children living in the steets, hence posing a “threat for the city.”¹⁴⁸

In 1932, the governorship of İstanbul took steps to establish a commission, which included teachers and physicians –two dedicated professional groups- in order to found a home for vagabond children. One member of the commission, Dr. Fahrettin Kerim Gökay, a prominent physician and politician of the period, suggested that a charitable person undertake such an initiative. Hence, a teacher, Kâzım Zafir was endowed with the authority to found the mentioned home. It is obvious that the elite’s concerns were shaped around the threats these children posed for the public life and their potential industrial labour that was exhausted in vain in the streets. Zafir based his report on the principle that “the stong is, first and foremost, productive,”¹⁴⁹ and proposed to “socialize” these children “in a business environment.” He even suggested that children who were not fit for work be sent to other institutions, such as Darülaceze.¹⁵⁰

¹⁴⁶ Ibid., p. 206.

¹⁴⁷ “*Yamalı hamama geceleri sığınan çocuklar güçlü, kuvvetli, hatta zeki ve enerjik, fakat ailenin ve cemiyetin gadrine uğramış insan tipleri idi.*” Ibid., p. 206.

¹⁴⁸ “*şehir için birer muzır unsur*” Ibid., p. 206.

¹⁴⁹ “*Güçlü her şeyden evvel müstahsildir.*” Quoted in Ibid., p. 206.

¹⁵⁰ Ibid., p. 207.

Since our society does not require an intense division of labor, which is necessary in highly industrialized societies, we need a working education (*iş terbiyesi*), which leads to the formation of petty places of trade out of small capital (polytechnique). The primary goal of such a working education should be the equipment of the workers with the necessary abilities to survive in life. The strong is, first and foremost, productive. In this regard, it is essential to prepare and equip the *powerful* in line with the production sources of the country.”¹⁵¹

As indicated by Fındıkoğlu, the scope of the home did not include all the vagabonds, “abnormal,” abandoned and orphaned children, only those who were robust and powerful, and could be “normalized.”¹⁵² Zafir emphasized that the home did not serve as a shelter or a rehabilitation center for “abnormals,” and mentally disordered or physically retarded children such as those who were deaf, dumb and blind.¹⁵³ Rather, the home was responsible for the robust and able street children who could be “rehabilitated” through work.

The idea behind the home was the belief that these children were spending their potential productive capacities in the streets and would grow to the detriment of society. The initiators strongly believed that work would serve as a panacea and would be the principle element in the “rehabilitation” of these children aimed at the profound and permanent transformations of their characters. It was strongly advocated that labor

¹⁵¹ “yüksek sanayiın icap ettirdiği kesif işbölümü göstermiyen bir cemiyet tipine malik olduğumuza göre ufak sermayelerden küçük sanat mihrakları vücuda getirebilecek (polytechnique) iş terbiyesi lazımdır. İşçilerin ihtisasları üzerine işlemek şimdilik lüzumsuzdur. Yalnız bu işçilere hayat dediğimiz mücadelede muvaffakiyetlerini temin etmek, iş yolu terbiyesinin en canlı hedefi olacaktır. Güçlü her şeyden evvel müstahsildir. Bu cihetten güçlüyü memleketin istihsal menbaları ne ise ona göre hazırlamak ve silahlamak icap eder.” Quoted in Ibid., pp. 206, 7.

¹⁵² “normalleşmeleri muayyen nispetler dahilinde mümkün olan serseri çocuk tipi” Ibid., p. 207.

¹⁵³ “İrsî bir hamulenin, lakayt bir cemiyet ihmalinin mahkûmu olan canlı sokak çocuğuna faal bir iş ve fikir damı olarak kurulmuş olan bu müessese ne bir darülaceze, ne de abdal, ebleh, masru gibi derin akıl ve ruh hastalarının veyahut sağır, kör, dilsiz gibi sakatların barındıkları ve terbiye edildikleri bir müessesedir.” Kâzım Zafir, *Çocukları Kurtarma Yurdu* (İstanbul: Matbaacılık ve Neşriyat Türk Anonim Şirketi, 1933), p. 4.

would inculcate new modes of behaviour that were in line with the general standards, such as a certain level of cleanliness and eradication of the habit of lying. Through proper education, disciplined work and bodily training, the initiators believed that they would break the hold of vice and prevent the children from any further exposure to it. Hence, the regulation of the environment was seen as one of the most effective paths to the moral protection and regeneration of these children. Therefore, they were forced to live under the same roof, play and work together and under the constant supervision of a pedagogue.¹⁵⁴

The belief of the reformers in the positive sciences was very high. As in the words of Zafir, their work with these children was “methodical.” The children were first classified as “psychopaths,” which included “anti-socials, fugitives and criminals.”¹⁵⁵ Apart from that, the “bad habits” of the children were also classified as follows: discord, lack of etiquette for collective living, kleptomania, greediness, laziness, enmity, violence, having fantasies and masturbation.¹⁵⁶ The reformers strongly believed that these bad habits were symptoms of and stemmed from “mental defects,” (*ruhî çarpıklıklar*), which could be corrected through scientific methods since they had developed as a result of social conditions and bad environment. For example, behaviour of children was perceived as stimuli and recorded in order to anticipate the next response they would give and in order to inculcate acceptable behaviour.¹⁵⁷ They also believed

¹⁵⁴ See Ibid.

¹⁵⁵ “Bizim uğraştığımız, üzerinde faaliyetimizi teksif ve temerküz ettirdiğimiz çocuklar, yukarıda da işaret ettiğimiz gibi, anormal çocukların psikopat kısmı (asosyaller, fujitifler, mücrimler)dir; arriéré’ler, hususiler physique ve mental aryereler değildir.” Ibid., p. 6.

¹⁵⁶ Ibid., p. 6.

¹⁵⁷ Ibid., p. 9.

that it was not enough to correct the defects in children, the important thing was to follow a prophylactic avenue, which included the investigation of children's mental and spiritual conditions, in order to preempt the crime.¹⁵⁸ In their words, the reformers' method was "confession" and pschoanalysis and they aimed at *education morale* (moral education) and *education professionnelle* (professional education).¹⁵⁹ In line with their method, the home was divided into four sections. Section A was devoted to managerial work. Section B was designed for sports, workshop and rest; Section C included bathrooms, the refectory and dormitory. The most important section was called the "Opinion House" (*Fikir evi*), where teachers worked with the children and observed them in line with the decided pedagogical technique.¹⁶⁰

In the organization of the home, the reformers were influenced by similar homes in Russia and Italy. In the words of Zafir, "the phenomenon of this new upbringing (*terbiye*) has become a cultural phenomenon in such new regimes as Italy and Russia. This problem is as important and valuable for us as it is for Russia and Italy."¹⁶¹

The home was founded in Galata, where abandoned "vagabond" children chose to live, and seven "vagabond and abandoned" children were chosen to be registered in the home. A file was prepared on every child. Tensions and negotiations occurred between the reformers and the parents of the children living in the home. For example, a

¹⁵⁸ Kâzım Zafir, "Çocuk Mahkeme ve Cezaevleri mi? Çocuk Kurtarma Yurtları mı?" *İş: Felsefe, Ahlak ve İhtimaiyat Mecmuası* 9, no. 34 (1943).

¹⁵⁹ "Takip ettiğimiz gaye bilhassa *Education morale* ve *Education professionnelle*'dir. Usulümüz (*confession*)dur; hususî tabirile (*methode catartique*) ile ruhî tahlil usulünün pedagojiye tatbikidir." Zafir, *Çocukları Kurtarma Yurdu*, p. 8.

¹⁶⁰ *Ibid.*, p. 10.

¹⁶¹ *Ibid.*, p. 14. In 1929, Fuat Refik wrote about very similar organisations in Russia. Fuat Refik, "Rusya'da Metruk Çocuk Yuvaları," *Gürbüz Türk Çocuğu*, no. 33 (June 1929).

boy named Avni had been brought to the home, but could not be “rehabilitated” because his father did not want him to stay there and encouraged him to escape and live in the streets.¹⁶²

As of 1937, the home was very successful in achieving its goals of rehabilitating children and finding employment for them.¹⁶³ However, there was no consensus among the elite about the functions of the Home. Some found it an artificial experiment and did not believe its utility.¹⁶⁴ In 1938, it was closed down. Unfortunately, the material at hand does not provide enough information ascertain to the reasons behind its closure.

However, the words of Fındıkoğlu give us hints that the home had become a site where personal interests clashed: “When the problems of the country are in question, isn’t it necessary to differentiate between the people whom we do not like and their deeds, hence to like the positive experiences of working and not to pull down these people, as happened in the case of the home?”¹⁶⁵

The Nature of the Aid to Mothers and Infants

In early Republican Turkey, the aid given to mothers and infants was characterized by an insufficiency of rational and governmental intervention. Despite

¹⁶² Fındıkoğlu, “Çocukları Kurtarma Yurdu,” p. 208.

¹⁶³ For example, one Ahmet became a cook’s assistant in Perapalası, Mustafa a machinist’s assistant in the Taksim Cinema, İsmail an apprentice in Beykoz Shoe-Manufactory, Kâzım a tailor’s mate in Sultanhamamı, Nihat a compositor in Municipal Publishing House, Hasan a machinist’s assistant in the Alemdâr Cinema, Cevdet a shoemaker in Beyazıt, Vahit an electrician in Satiye Electricity Company. Ibid., p. 209.

¹⁶⁴ Zafır, *Çocukları Kurtarma Yurdu*, p. 14.

¹⁶⁵ “Memleket işleri mevzuubahs olurken belki sevmediğimiz şahıslardan sıyrılarak sadece onların tesis ve idame ettikleri ‘iş’leri yaşatmak, bu suretle müsbet iş tecrübelerini sevmek, Yurd içinde vaki olduğu gibi baltalamamak lâzım değil midir?” Fındıkoğlu, “Çocukları Kurtarma Yurdu,” p. 205.

widespread anxieties and concerns about the child question, the Turkish state failed to provide the most vulnerable part of its population, which was the foundation of society and the future of the nation with even the most basic necessities such as nutrition and housing. Instead, a few semi-official organizations or private initiatives undertook the governmental tasks in child welfare. As a consequence, the history of child and maternal welfare in Turkey is the history of diverse voluntary associations, private foundations, as well as private individual initiatives and local municipal administrations which began to act as surrogate institutions as well as the emergence of directives of central state.

Instead of calling the state for large-scale investment in a systematic, organized, full fledged, defined state policy in the sphere of social welfare, the Republican elite urged society in general and charity foundations to support and assist the destitute and the poor. An author writing in the official journal of the *Hilâliahmer Cemiyeti* placed special emphasis on the integrating mission of helping the poor. For him, moral decadence and disintegration in society could be overcome through a collective social consciousness about poverty.¹⁶⁶ In the general discourse of the day “society” had “an intrinsic duty” to help the destitute.¹⁶⁷ As one author declared, in the field of child protection, “what is important is the efforts of the societies and individuals.”¹⁶⁸ It is obvious that voluntary associations, private foundations, as well as private individual initiatives and local municipal administrations began to act as surrogate institutions for

¹⁶⁶ Sinanoğlu, “Efendiler, Ne Veriyoruz, Ne Yapıyoruz ki 'Verin, Yapın' Demiye Hakkımız Olsun!” *Türkiye Hilâliahmer Mecmuası*, no. 120 (1932).

¹⁶⁷ “Vazifeye Davet,” *Gürbüz Türk Çocuğu*, no. 38 (November 1929).

¹⁶⁸ “...asıl ehemmiyetli olan cihet, şahısların ve cemiyetlerin mesaisidir.” Nafi Atuf, “Çocukları Koruyan Teşekküller,” *Gürbüz Türk Çocuğu*, no. 44 (May 1930), p. 9.

public welfare. In the case of child welfare, *Himayei Etfal Cemiyeti*¹⁶⁹ (later, *Çocuk Esirgeme Kurumu*, or the Children's Protection Society), *Hilaliahmer Cemiyeti* (the Turkish Red Crescent), *Türk Maarif Cemiyeti* (the Turkish Education Society),¹⁷⁰ *Anneler Birliği* (the Mother's Federation), *Türk Kadınlar Birliği* (the Turkish Women's Federation), and people's houses besides a variety of other small private and individual organizations and in general miscellaneous *fıkaraperver cemiyetleri* (philanthropist societies) such as the *Topkapı Fıkaraperver Cemiyeti*¹⁷¹ were among those active in the private charity sphere. It is crucial to emphasize that these associations continued their activities mostly with close governmental ties.¹⁷²

It is clear that social services were palliative, unplanned, unsystematic and included temporary, short term solutions to individual problems just to save the day. For example, four orphans whose fathers had died in World War I or in the War of Independence were able to find refuge only in a factory that provided them with shelter and work. However, as a result of a personnel decrease, they once more found themselves homeless and helpless. Instead of questioning the character and nature of the solutions, *Cumhuriyet* blamed only the factory that "threw four martyr's children into

¹⁶⁹ According to the report of the CPS activities between 1927 and 1929, the CPS published 74,000 books and 72,000 journals and 764,000 various propoganda publications. Apart from that, it founded a boarding childcare school, a clinic for poor women and their children, a clinic for pregnant women a dentistry clinic and a "hygienic" bathroom (*sıhhi banyo*). It dispensed 53,000 bottles of milk to poor mothers and food to 18,587 children. The head office provided the branches with 25,803 TL financial aid. See, Neşet Halil, "Ankara'da," *Gürbüz Türk Çocuğu*, no. 45 (June 1930).

¹⁷⁰ For details, see Atuf, "Çocukları Koruyan Teşekküller," p. 11.

¹⁷¹ For details of *Topkapı Fıkaraperver Cemiyeti*, see Nadir Özbek, "90 Yıllık Bir Hayır Kurumu: Topkapı Fıkaraperver Cemiyeti," *Tarih ve Toplum*, no. 180 (December 1998).

¹⁷² For an assesment of The Turkish Red Crescent Society and the Children's Protection Society, see Kathryn Libal, "The Child Question': The Politics of Child Welfare in Early Republican Turkey," in *Poverty and Charity in Middle Eastern Contexts*, ed. Michael Bonner, Mine Ener, and Amy Singer (New York: State University of New York Press, 2003).

the streets and left them to starve.”¹⁷³ Especially, in the case of orphans, the concept of martyrdom was frequently employed in order to call society to help. As one author, who was expressing his feelings after a visit to the *Balmumcu Darüleytam* (Balmumcu Orphanage), wrote:

Citizen! I am addressing your conscience. On these happy and sacred days on which you have reached your independence and freedom, for the future happiness of your race, don't refuse to give something, little or much, to little Mustafa no. 145 from Alaçatı, who wants, with trembling hands, tearful eyes and in a sorrowful mood, aid from the whole nation as if he wants his father's blood indemnity.¹⁷⁴

Private societies founded in order to help the destitute and the poor constituted a significant part of charity organizations. They were supported primarily by the municipality and allocated funds to distribute money and clothing to the poor.¹⁷⁵ Apart from these, for example, the CPS received financial help from the Turkish community in the United States.¹⁷⁶ They constituted the main pillar of social welfare during the early Republican era. Unfortunately, due to the lack of sufficient data, we are unable to comment on the informal charity networks among the people living in the neighbourhoods (*mahalles*) and small towns (*kasabas*).

The newspapers and journals of the period allocated space for advertisements about charitable activities to draw attention to and develop a social consciousness about

¹⁷³ “140 Kuruş İçin Adam Feda Edilir mi?” *Cumhuriyet*, 23 June 1931.

¹⁷⁴ “Vatandaş. Şimdi vicdanından soruyorum. Irkının yarınki mesudiyeti için...az veya çok gönülden koparı, hürriyet ve istiklaline kavuştuğun bu mesut ve mübarek günlerde, eli titrek, boynu bükük, gözü yaşlı sende ve bütün millettten babasının kan diyetini talep eder gibi iane diye isteyen küçük Alaçatılı 145 Mustafa'dan esirgemesin?” Yahya Saim, “Yetimlerimiz,” *Gürbüz Türk Çocuğu*, no. 33 (June 1929), p. 2.

¹⁷⁵ “Kadıköy Fıkaraperver Cemiyeti,” *Cumhuriyet*, 20 June 1931, “Kimsesiz Yavruların Yüzünü Güldürenler,” *Cumhuriyet*, 19 February 1931.

¹⁷⁶ “Amerika'daki Vatandaşların Yaptıkları Yardımlar,” *Gürbüz Türk Çocuğu*, no. 29 (January 1929); “Amerika'dan Gelen Yardım,” *Gürbüz Türk Çocuğu*, no. 37 (October 1929).

charity. *Himayei Etfal Cemiyeti*, which “worked in order to raise a robust generation for the country and prepare them as strong as a Turk for the independent Turkish country”¹⁷⁷ and *Hilaliahmer Cemiyeti* were the organizations most frequently written about. They focused on orphans and destitute children and provided them with shelter and food, as well as providing ill mothers and children with medical treatment and milk.¹⁷⁸ Women and mothers made up most of the members of these organizations. Special days were regarded as opportunities both for calling for help from society and giving presents to the orphans. The *Himayei Etfal Mothers’ Association* was always at the forefront of these activities.¹⁷⁹

Apart from the Children’s Protection Society and the Turkish Red Crescent, the charity organization *Süt Damlası* made efforts to fulfill the duties in the area of social welfare left unfulfilled by the state. Founded during World War I by the French together with the CPS, *Süt Damlası* was run by the famous Besim Ömer Paşa between 1924 and 1928. It was a crucial part of daily child care in the early Republican years. The charity organization was primarily concerned with distributing daily milk to malnourished children. However, the efforts and sources of the organization were very limited and remained palliative. For example, in 1931, it provided daily milk to only 150 – 160 children. Twice a month, it handed out food as well and provided mothers with education on how to feed their children. On Wednesdays, Saturdays, and Sundays, the organization carried out the service of examining poor diseased children, if they applied

¹⁷⁷ “Memleketimizde gürbüz bir nesil yetiştirmek, yavrularımızı, müstakil Türk vatanına bir Türk kadar kuvvetli olarak hazırlamak için çalışan *Himayei Etfal Cemiyeti*...” “Cemiyetimizin Merkez ve Şube Faaliyetlerine Bir Nazar,” *Gürbüz Türk Çocuğu*, no. 30 (March 1929).

¹⁷⁸ For their activities, see, *ibid.*; and “Cemiyetimizin Merkez ve Şube Faaliyetlerine Bir Nazar.”

¹⁷⁹ “*Himayei Etfal*,” *Cumhuriyet*, 16 February 1931; “*Himayei Etfal Bayram Münasebetile Kimsesiz Çocukları Sevindiriyor*,” *Cumhuriyet*, 17 January 1931.

to the organization, and transferred them to Şişli Children's Hospital (*Şişli Etfal Hastanesi*) when necessary.¹⁸⁰ The institution also acted as a stage for charitable people and organizations that wanted to assist people in need. For example, on every religious day, the Mother's Association (*Anneler Birliği*) distributed food and clothes to the poor children in *Süt Damlası*.

Those who waited in front of the institution for a bottle of milk or mere help were mostly female. Apart from them, old people and the elder brothers and sisters of undernourished and hungry infants and children joined the queue. The organization made efforts to keep statistics of those benefiting from its services. For example, a child was given milk according to its weight, which was recorded on weekly charts kept at the institute. The women who benefitted from the institute were very poor and usually the mothers of small children. The war, disease, or other circumstances beyond their control left them without male providers. Others were the grandmothers of orphaned children whose parents had died due to war or disease or for some other reason. Destitute widows and wives were deprived of the necessary resources or compensation to survive. For example, one Nazmiye was left without economic support when her husband was put in prison for murder. Likewise, her daughter Necla was left without support. Dikran was another hopeless mother. She earned 15 liras a month and paid 6 liras for rent. She had twins and had problems with breastfeeding. She came to the institution to receive milk. The mother of the infant Şinasi died of tuberculosis when she was only 22. His father remarried immediately and his grandmother took care of him. *Süt Damlası* undertook the

¹⁸⁰ MEB, "Süt Damlasında Gördüklerim." Also for the activities of Şişli Children's hospital, see İhsan Hilmi Alantar, Vasfi Toker, and Fedon Skuros, "Üniversite Çocuk Kliniğinin 1936-1937 Yılları İstatistiği," *İstanbul Üniversitesi Tıp Fakültesi Mecmuası* 2, no. 9 (1939).

nutrition of Şinasi until he was one year old. Afterwards, he came only now and then with his grandmother to receive milk.¹⁸¹

To qualify for daily milk, one had to prove real need (*muhtaç bir vaziyette*), by presenting a document, which was issued by the *muhtars* (neighborhood head man) in the *mahalles* (neighborhood). After examining the document, *Süt Damlası* sent it to the CPS for a thorough investigation. Only after the investigation was the milk distributed. Interestingly, the investigation included an examination of the women's breasts in order to see whether they could produce milk or not. This method of milk distribution brought several problems as well. According to a physician in the institution, some women drew milk from their breasts before visiting the institute to make it appear as if they had problems with breastfeeding. Others pretended to be very poor, although they were not. If they could get daily milk, they either drank it themselves or sold it. The physician declared that the institution should get rid of these kinds of "parasites."¹⁸²

Benefiting from the manual labor of the poor, especially that of poor women, became a favorite cost-cutting measure among the officials of charity organizations. It freed institutions from further financial costs and responsibility. For example, the Protection Society (*Esirgeme Derneği*), which was founded in 1913 immediately after the Balkan Wars, functioned on this basis. The Protection Society provided needy widows (*muhtaç dullar*), destitute elderly people and children with money; in turn, they

¹⁸¹ MEB, "Süt Damlasında Gördüklerim," p. 14.

¹⁸² *Ibid.*, p. 13.

worked in the society and sold the items that they produced, such as clothes, dresses, and embroidery work.¹⁸³

The Gendered Nature of Child Welfare

It is important to emphasize the gendered nature of charity at the level of discourse. In the general discourse of the period, the burden of founding societies to support and help the poor was put onto the shoulders of women. Declaring that charity activities were “great and valuable work” that could be best carried out by women, Yunus Nadi wrote in an editorial that, “holy duties in this neglected sphere in our country are awaiting Turkish ladies. To remind this to the women is among the sacred duties of the day.”¹⁸⁴

Some of the women assumed the roles defined for them with a vengeance. A female reader writing to the newspaper complained about the way women were taking place in public life as professionals. Instead, she advocated charitable activities as a field of activity for women. Emphasizing the compassionate and motherly affection of women was a good way of addressing women.

Our women are occupying positions in a variety of administrative work. However, these are none of women’s business. We, as women, are responsible for helping the destitute, those who are helplessly suffering from hunger, and

¹⁸³ MEB, “Esirgeme Derneği’nde Gördüklerim,” *Muhit* 3, no. 33 (1931).

¹⁸⁴ “*Bunlar, bilhassa hanımlarımızın kalpten anlıyarak seve seve ve fahir ile yapabilecekleri ne büyük, ne kıymetli, ne yüksek işlerdir. Bizim memleketimizin bu itibar ile pek boş olan bu sahasında Türk hanımlarını kutsal hizmetler bekliyor. Bunu kendilerine hatırlatmayı günün mukaddes vazifelerinden biliyoruz.*” Yunus Nadi, “Cemiyetin Vazifeleri: Kimsesizlere İmdat,” *Cumhuriyet*, 4 September 1931.

those children who have nobody to care for them. I will devote my life to these kinds of works and call for those sisters and mothers who will support me.¹⁸⁵

The view of Efzayış Suat, one of the prominent feminists of the period, on charitable activities was no different from that of the general discourse: “We do not feel the responsibility of helping the destitute. There are numerous nonfunctioning parts, wounds in our social body which need to be healed. This is only possible through women, through their affectionate hands.”¹⁸⁶

The prominent feminist and founder of the Turkish Women’s Association, Nezihe Muhittin, also saw women first and foremost as mothers. The role attributed to women in her consensual society was motherhood. As she wrote, “in the protection and reformation of our country, what is expected from our women is their being good mothers who bear mentally and physically robust, active, and healthy children for our country as well as their being capable housewives and good wives equipped with the necessary tools to hold the family -the foundation of the society-together.”¹⁸⁷

The perception of women as “educated” good mothers who would bear children for the motherland, and who would raise children to serve their state and nation as good individuals was in line with what we can call the “Kemalist female identity.” Perhaps,

¹⁸⁵ “Kadınlarımız idari birçok hizmetlere giriyorlar. Fakat kadının asıl işi bu değil, biz kadınlar, açlara, sefillere, kimsesizlere, kimsesiz yavrulara yardımla mükellefiz. Ben kendi hesabıma hayatımı bu gibilere muavenete hasrettim. Benimle beraber çalışmak isteyen hemşire ve validelerden muvafakat mektupları beklerim.” “Hayır İçin Çalışmak İstiyor,” *Cumhuriyet*, 8 January 1931.

¹⁸⁶ “...muhtaçlara bakmak mesuliyetini hissetmiyoruz. İçtimai teşekkülümüzde öyle kusurlu azalar [...] yaralar var ki, onların tedavisi ve şifaya erişmesi ancak kadın eli ve kadın şefkati ile mümkün olur.” Efzayış Suat, *Türk Kadını: Müsbet-Menfi* (İstanbul: Milliyet Matbaası, 1932).

¹⁸⁷ Nezihe Muhittin, *Türk Kadını* (İstanbul: Nümune Matbaası, 1931).

Muhittin's insistence on motherhood had its roots in her elitist ideas as well. She held the view that a minority of educated, enlightened women should affect and direct the majority of women, who were conservative, ignorant, and superstitious.¹⁸⁸ This division implied the participation of the intellectual minority through their activities in social life and the confinement of the "ignorant" majority to the familial space.

The new Turkish woman was seen as the source of all good in society as the mother of the nation. Committed to this mission, they would authorize and construct their identities as women committed to making society in their likeness. In this way, they would combine the identities of woman, citizen and mother in a devoted mission. According to Suat, maternal and child welfare, which were closely linked to the traditional female sphere, should also be an area of activity for women.

Noting this attitude is crucial in terms of detecting the mentality regarding the division of society between males and females and their defined roles. It is clear that the traditional division had not changed and was not even challenged by the previous reforms. Women were still perceived as fragile, caring creatures, due in large part to their role as mothers.

Although most feminists assert that motherhood and maternalism are not compatible with the emancipation of women, it is undeniable that women, at this point, both through individual charitable acts and through organizations of charity, created a breathing space for themselves in the public place and became visible. What was going on at the level of discourse about women's motherly responsibilities in society was in line with the general tendencies in the world which emerged at the turn of the century.

¹⁸⁸ Ibid.

Using maternalist discourses and strategies, women throughout the world “transformed motherhood from women’s primary *private* responsibility into *public* policy.”¹⁸⁹ As Koven and Michel show for the British case, “participation in voluntary societies enhanced middle-class women’s lives by enabling them to exercise power outside their homes.”¹⁹⁰

Maternal Employment, Daycare and Care Houses

In Turkish historiography, so far, only middle class elite working women have found an existence thanks to the merit of being the “first instance” in their occupation, such as “the first Turkish female judge,” “the first Turkish female physician,” “the first Turkish female pilot,” and so forth.¹⁹¹ However, apart from these elite women, there was a section of women in the society who had to work at petty and tiring jobs, especially in factories, in order to survive.

The most pressing problem these women faced was daycare for their children. Neighbors, friends, relatives, and elder children played significant caretaking roles in the lives of these poor working women. Therefore, maternal employment was a matter of hot debate in the public discourse.¹⁹² In the late 1920s and 1930s, when the

¹⁸⁹ Seth Koven and Sonya Michel, “Introduction: Mother Worlds,” in *Mothers of a New World, Maternalist Politics and the Origins of Welfare States*, ed. Seth Koven and Sonya Michel (New York & London: Routledge, 1993).

¹⁹⁰ *Ibid.*

¹⁹¹ See, for example, Ayşe Gül Altınay, “Ordu-Millet-Kadınlar: Dünyanın İlk Kadın Savaş Pilotu Sabiha Gökçen,” in *Vatan Millet Kadınlar*, ed. Ayşe Gül Altınay (İstanbul: İletişim Yayınları, 2000).

¹⁹² For an assesment of maternal employment and childcare in the United States of America, see Sonya Michel, *Children's Interests / Mothers' Rights: The Shaping of America's Child Care Policy* (New Haven: Yale University Press, 1999).

transformation of the female labor force took place, it was now not only “young girls, widows” and poor, but “married women” (hence, by default, women with children) as well as women who “had to work” to make money.¹⁹³ Discourses mostly focused on children’s rights and well-being rather than women’s rights and prerogatives and, as a result, devalued women’s productive labor. Most of the elites believed what Nezihe Muhiddin emphasized, that “true happiness for a woman lies in motherhood.”¹⁹⁴

Although most of the commentators agreed that poor women were forced to work in order to survive,¹⁹⁵ they nevertheless accused wage-earning women of abandoning their children, neglected and forlorn. In *Muhit*, a writer expressed in a bitter tone, “now urban women have also begun working. Not only young girls and widows, but married women *have to* work as well. These women have to be away from their children during working hours. What will happen to their children?”¹⁹⁶

For them, maternal employment was something that mothers should seek only in times of emergency; it was not an ordinary part of the “ideal” family life. They suggested that women “had to work” –not a choice- if wage-earning husbands were not present in the household or if the women had nobody to depend on in order to subsist. Many poor women were compelled to work at wage-earning tasks, mostly during times

¹⁹³ Seniha Sami, “Annelerin Çalışması,” *Muhit* 3, no. 34 (1931)

¹⁹⁴ Nezihe Muhiddin, “Meçhul Kadın,” *Muhit*3, no.31 (1931), “Kadın için hakiki saadet ancak analıktadır.”

¹⁹⁵ See for example, “Her yerde olduğu gibi bizde de aile hayatı, annenin fakir tabakada ev haricinde bir iş güç tutmak mecburiyeti, zengin tabakada da daima artan bir sürü içtimai vazifelere, umumî eğlence ve içtimalara devam zarureti yüzünden bozulmaktadır.” “As happened elsewhere, the family life has been corrupted in our country because the mothers from poor classes have to work outside the home, and mothers from rich classes have to carry out a rising number of social responsibilities and attend public entertainments and gatherings.” Haşmet, “Çocuk Yuvalarının Kutsiyetine İman,” p. 10.

¹⁹⁶ “Şimdi şehirli kadınlar da çalışmaya başladılar. Yalnız genç kızlar, dul kadınlar değil, evli kadınlar bile çalışmaya mecbur oluyorlar. Fakat bunlar [...] mesai saatlerinde çocuklarından ayrılıyorlar. Bunların çocuklarının hali ne olacak?” (emphasis is mine) Sami, “Annelerin Çalışması,” p.70.

of crisis. Those who were single, widowed, or abandoned might be the sole breadwinner in their families.¹⁹⁷ Sometimes, even those with working husbands might not be able to get by on the family's collective income. Therefore, the incentive for working among most of the women was chronic financial hardship. They usually worked with their children, in cigarette factories, shoe-factories and workshops founded by charity organisations, under unhealthy and unhygienic conditions.¹⁹⁸ They usually earned less than half the money than men, sometimes even one fourth for the same tasks.

It is crucial to emphasize the dichotomy between the discourse on maternal employment and the policies adopted. While on the one hand, women were encouraged to stay home and take care of their own children or create a place in the public space through their roles only as mothers and caregivers, on the other, they were encouraged by certain policies to enter into business life. A variety of day care centers were opened.¹⁹⁹ However, these were mostly designed for the children of poor mothers, who had no other means to survive other than working and who, by finding a place in which their children would be safe, found an "honorable" means to lead their lives. Hence, these women were rescued from leading their lives as females of bad repute.²⁰⁰ For example, the day care of the Cibali Cigarette Factory, which operated under the *Tütün*

¹⁹⁷ They usually lived with their mothers-in-law, since her husband had died in the successive wars as well. For example, one woman lived with her mother-in-law and four children and had to look after them together with her eleven-year-old son. The woman worked in a textile manufactory and earned 1 Turkish Lira and her son earned only 250 kurush a week. Sabiha Zekeriya Sertel, "Sinaî Hayatta Kadın ve Çocuk," *Resimli Ay*, no. 5 (July 1930).

¹⁹⁸ Ibid.

¹⁹⁹ "Bakımevleri," "Cibali Fabrikasında Bir Şefkat Yuvası: Kimsesiz İşçi Kadınların Yavrularına Her Fabrika Böyle Bir Yuva Yapmalıdır!" *Cumhuriyet*, 5 January 1931; "Çocuk Bakımevleri: Edirnekapı'nın İncisi Açılıyor," *Cumhuriyet*, 22 May 1931.

²⁰⁰ "Cibali Fabrikasında Bir Şefkat Yuvası: Kimsesiz İşçi Kadınların Yavrularına Her Fabrika Böyle Bir Yuva Yapmalıdır!"

İnhisar İdaresi (Administration of Cigarette Monopoly) employed 1,500 female workers²⁰¹ and provided those “women in need” (*kimsesiz*) with a day care center. In the day care, children were provided with food and shelter, took part in games under the watchful eye of a female caretaker, and were examined regularly by a doctor.

Other women were not as lucky as those of the Cibali Factory. Likewise, the director of the İstanbul Health Office announced the plan of building a day care center in Edirnekapı for “poor working women.”²⁰² Fatma Kadın was one of the poor women who had to earn her life by working. Her husband died in 1933. Since she had no other means to survive, she began earning her living as a cleaner in the houses of rich middle class families. She had five small children, the eldest of whom was only twelve years old. When she went to work, she either had to have her eldest daughter take care of the others at home or leave them to play in the street on which they lived. Since she looked after her sisters and brothers, the eldest daughter could not go to the school. In 1934, while the mother was working, one of her children died on the *mangal* (grill) at home. Her answer was bitter when asked the reason for her child’s death: “He died because of neglect, because we have nobody to support us.” Her cry illustrates the problems and deficiencies of daycare practices prevailing in the early Republican Turkey: “I demand a place to leave my child during the day when I go to work.”²⁰³

²⁰¹ Total number of the workers was 2,000. Therefore, 1,500 female workers seems to be a huge number.

²⁰² “Üç Çocuk Dispanseri Açılıyor,” *Cumhuriyet*, 2 October 1930.

²⁰³ Suad Derviş, “Çocuklarımız Ne Halde? İşe Giderken Çocuğumu Bırakacak Yer İstiyorum,” *Cumhuriyet*, 25 August 1935.

The 1947 Draft Bill Regarding the Protection of Orphaned, Abandoned and
Abnormal Children²⁰⁴

Although there are articles related to the protection of children and provisions allocated in this regard exist in the national budgets, children with baskets on their backs, vagabond children, beggar children, blind and disabled children, children wrapped in rags and suffering in the laps of women, also wrapped in rags, exist before us as persistent views which hurt human dignity.²⁰⁵

The child question maintained its palpable form during the 1940s. Conditions grew even worse in the harsh economic and social conditions of World War II. During the parliamentary proceedings of the 1947 Draft Bill Regarding the Protection of Orphaned, Abandoned and Abnormal Children (which will hereafter referred to as the 1947 Draft Bill) in 1949, Dr. Fuad Umay, the MP dedicated to the child question, admitted in a bitter tone: “the government has been too late in handling this issue, therefore millions of population have been lost... Unfortunately, the number of institutions founded by the government for children, especially for the needs of orphaned children in the field of social health and aid, is too few.”²⁰⁶

²⁰⁴ *Kimsesiz, Terk Edilmiş, ve Anormal Çocukların Korunması Hakkında Kanun Tasarısı, 1947.*

²⁰⁵ “Çocukların korunmasına müteallik hükümler ortada ve bu maksatla ayrılmış ödenekler bütçelerde olmasına rağmen, sokaklar dolusu küfeci çocuk, serseri çocuk, dilenci çocuk; kör ve sakat çocuk, paçavralara sarılmış olup aynı hallerdeki kadınların kucaklarında kıvranan çocuk; insanlık haysiyetini rencide eden ısrarlı manzaralar halinde karşımızdadır.” Akol, *Topyekûn Çocuk Meselesi: 10. Dönem B.M. Meclisi Üyelerine Açık Mektup*, p.8.

²⁰⁶ “Hükümet bu davayı ele almakta çok gecikmiş, bu yüzden milyonlarca nüfus kaybedilmiştir. Ne yazık ki; Hükümet tarafından, çocuk için, bilhassa kimsesiz çocukların sağlık ve sosyal yardım ihtiyaçları için yapılan müesseseler yok denecek kadar azdır.” “Kimsesiz, Terkedilmiş ve Anormal Çocukların Korunması Hakkında Kanun Tasarısı ve İçişleri, Milli Eğitim, Çalışma, Adalet, Bütçe, Sağlık ve Sosyal

This period witnessed the shift in the presentation of the child issue. The concerns about demographic growth and its relation with infants' survival, and the raising of children in line with the national character were replaced with concerns about the growing number of vagabond children now more visible in the public spaces and their protection.²⁰⁷ While the 1920s and the first half of the 1930s had witnessed the proliferation of institutions first and foremost involved in proper and scientific child rearing and child protection, such as the Children's Protection Society, and affiliated to it, the Child Care-Takers School, daycare houses (*gündüz bakım evleri*), and *Süt Damlası*, later years saw the foundation of institutions with rehabilitative purposes such as the *Çocukları Kurtarma Yurdu* (Home for Rescuing Children).²⁰⁸ This is shift revealed clearly in the words of Kazım Zafır, the director of the Home for Rescuing Children, who wanted to draw a clear line between the institution and other child welfare associations.

This institution is not a simple almshouse founded for the protection of poor and helpless orphans without food. Likewise, any simple protection and affection association will not be able to understand the deep and all-encompassing meaning of our institution. There are already other associations

Yardım Komisyonları Raporları ile Geçici Komisyon Raporu Meclis Görüşmeleri," *TBMM Zabıt Ceridesi* Session 1, no. Term 90 (23 May 1949).

²⁰⁷ See for example, "120.000 Çocuğun Kaderini Tayin Edecek Olan Yoksul Çocuklar Lâyihasının Müzakeresi Geriye Bırakıldı,;" "Çocuk Davası," *Hürriyet*, 4 November 1948; "Çocuk Hürriyeti," *Hürriyet*, 16 February 1949; "Çocuk Suçlarına Dair," *Hürriyet*, 11 January 1949; "Çok Çocuklu Hâkimlere Yapılacak Yardım," *Hürriyet*, 12 February 1949; İbrahim Alâettin Gövsa, "Aile ve Çocuk Zamları," *Hürriyet*, 13 July 1948; "Kimsesiz Çocuklar İçin," *Hürriyet*, 12 April 1949; "Kimsesiz Çocuklar İçin Yurt," *Hürriyet*, 22 March 1950; "Kimsesiz Çocuklar Meselesi," *Hürriyet*, 27 August 1948; "Kimsesiz Çocuklar Nasıl Himaye Edilecek," *Hürriyet*, 4 March 1950; "Kimsesiz Çocuklar Nasıl Himaye Edilecek?" *Hürriyet*, 14 June 1948; "Kimsesiz Çocukları Barındırma Yurdu," *Hürriyet*, 18 February 1949; "Kimsesiz Çocukların Himayesi," *Hürriyet*, 29 April 1949; "Kimsesiz Çocukların Korunması," *Hürriyet*, 6 May 1948; "Kimsesiz Çocukların Tesbitine Başlanıyor," *Hürriyet*, 18 July 1949; "Serseriler ve Kimsesiz Çocuklar," *Hürriyet*, 20 March 1950.

²⁰⁸ For details regarding *Çocukları Kurtarma Yurdu*, see Zafır, *Çocukları Kurtarma Yurdu*, and Fındıkoğlu, "Çocukları Kurtarma Yurdu."

involved in these things [protection and affection]. Our institution is for the education and rehabilitation of those rebellious and anti-social children who are in rebellion against their home, who had the means to escape the registrations of society and use their energy to the detriment of society.²⁰⁹

In July 1950, an author stressed his anxieties regarding the “abandoned children wandering around in the streets”: “It is not only the question that neglected children disturb the eyes and the hearts, but also that they grow to the detriment of the society... We should urgently bring the issue of destitute urban children into discussion.”²¹⁰

The provision of social welfare and welfare institutions for all but the most needy children was extremely limited in Turkey in the 1940s as well. The problems, which so far had been handled within the motivations of such issues as nation-state building, demographic growth and eugenics of the interwar years, became more acute and harsh, requiring shaping within a new political language. Psychologists, psychiatrists, psycho-technicians, sociologists, educators and specialists of social aid were the new proposed actors of the period.²¹¹

According to the tentative statistics of the 1950 population census, there were 1,774,100 (907,200 male and 866,900 female) children between the ages of four and six

²⁰⁹ “... bu müessese anası babası olmıyan, yiyecek bir şey bulamıyan fakir ve âciz çocukların himayesine mahsus basit bir fakirhane değildir. Aynı zamanda kuru bir himaye ve şefkat müessesesi de müessesemizin engin ve şümulü manasını kavrayamaz. Bu işleri düşünen başka müesseselerimiz vardır. Bizim müessese evlerine isyan etmiş, cemiyetin kayıtlarından kaçmış, enerjilerini memleketin zararına kullanan isyankâr, anti sosyal çocukların terbiye ve ıslah yurdudur.” Zafir, *Çocukları Kurtarma Yurdu*, p.1.

²¹⁰ Vâ - Nû, “Kimsesiz Çocuklar,” *Bütün Türkiye*, Temmuz 1950. Also see Osman K. Akol, “Dilenci Çocukların Sırları!” *Bütün Türkiye*, Eylül 1951; “Darülacezedeki Çocuklar,” *Bütün Türkiye* 3, no. 15 (1951); Suzan Esler, “Emanet Çocuklar,” *Resimli Hayat* 3, no. 27 (1954); Kapsız, “Çocuk Dostları,” *Resimli Hayat* 4, no. 37 (1955); “Oyuncaksız Çocuklar,” *Resimli Hayat* 1, no. 2 (1952); “Cemiyetimizin En Büyük Hastalıklarından Biri: Sokak Çocukları,” *Bütün Türkiye* 1, no. 4 (1950).

²¹¹ Akol, *Topyekûn Çocuk Meselesi: 10. Dönem B.M. Meclisi Üyelerine Açık Mektup*.

and 3,497,500 (1,776,200 male and 1,721,300 female) primary school age children. The author of *Çocuk Davamız*, (Our War for Child), Osman Akol complained about the fact that there were no institutionalized organizations or any state kindergartens to provide the necessary care and education for these children, and that they were exposed to the “very negative impact of the streets in their most sensitive years.”²¹² As in the 1930s, a few private institutions were providing care and education for these children.²¹³ As for primary school age children, only 1,781,888 of them were provided with the necessary and compulsory primary school education. The author was primarily interested in children in need of protection and special education such as blind, deaf, dumb children and abandoned street children. According to the tentative statistics provided by the same author, there were 790,740 children who were in need of protection and special education. According to the Kars MP, Dr. Esad Oktay, in 1949 there were 15,000 abandoned, 51,000 blind, 40,000 dumb, and 60,000 disabled children, and several retarded children whose number equaled 10% of the child population in Turkey.²¹⁴ These were the children who were “socially excluded” or the “underclass,” the sector of society which was so far removed from the political and economic levers of power that it had virtually no say in the way it was treated. Nadir Nadi rejected out of hand the idea of providing care for these kinds of children:

²¹² Ibid.

²¹³ See for example, *Çocuk Dostları Derneği*, Kapsız. “Çocuk Dostları.” *Resimli Hayat* 4, no. 37 (1955).

²¹⁴ “Kimsesiz, Terkedilmiş ve Anormal Çocukların Korunması Hakkında Kanun Tasarısı ve İçişleri, Milli Eğitim, Çalışma, Adalet, Bütçe, Sağlık ve Sosyal Yardım Komisyonları Raporları ile Geçici Komisyon Raporu Meclis Görüşmeleri.”

Yours is like a tempest in a teacup. We cannot even provide the necessary education and care for the *normal* children of the homeland. What happens if those children who are blind, deaf, and dumb, or beggars, and without care - whose number should be very little- wait for a while? Let's provide the necessary education for the "normal" ones first, and then the other's turn will come of course.²¹⁵

These lines clearly reveal the exclusion at work within Turkish society, illuminating the discrimination between the normal and the abnormal, the strong and the weak, the healthy and the unhealthy, and the rich and the poor.

The consistent nature of the child issue and the potential of the state in employing social technologies and solving social problems were crystallized in the 1947 Draft Bill.²¹⁶ This bill foresaw the foundation of institutions in order to detect and examine the social needs of children, which had not existed so far.²¹⁷ The document explicitly placed the legal guardianship of foundlings and abandoned children in the hands of the public authorities because "a civilized society that is strong in terms of its population does not only mean having a mass of people within certain territorial borders. To turn that population into strength, every individual in that society must be strong in terms of spirit and morality and also useful for the society in which he lives."²¹⁸ The

²¹⁵ Quoted in Akol, *Topyekûn Çocuk Meselesi: 10. Dönem B.M. Meclisi Üyelerine Açık Mektup*, p. 9, "Efendim siz bir bardak suda fırtına yaratıyorsunuz. Biz memleket çocuklarının normal olanlarını bile okutup yetiştiremiyoruz. Bu halde iken adetlerinin pek mahdut olması icap eden kör, sağır, dilsiz, serseri, dilenci ve bakımsız çocuklar biraz bekleyiverseler ne olur? Evvela normallerin eğitimini hallediverelim, ondan sonra elbet onlara da sıra gelir."

²¹⁶ For the discussions related to the power of the Republican state in the framework of the modern state phenomenon, see Çağlar Keyder, "Cumhuriyet Devleti Ne Kadar Güçlüydü?" in *Memâlik-i Osmaniye'den Avrupa Birliği'ne* (İstanbul: İletişim Yayınları, 2003).

²¹⁷ "Kimsesiz, Terkedilmiş ve Anormal Çocukların Korunması Hakkında Kanun Tasarısı ve İçişleri, Millî Eğitim, Çalışma, Adalet, Bütçe, Sağlık ve Sosyal Yardım Komisyonları Raporları ile Geçici Komisyon Raporu Meclis Görüşmeleri."

²¹⁸ "medeni bir cemiyetin nüfus bakımından kuvvetli olması, elbetteki yalnız belli bir toprak sınırı içinde kalabalık bir insane yığınının bulunması demek değildir. Sayının bir kuvvet haline gelebilmesi için ferdin beden, ruh ve ahlak bakımından sağlam olması ve bağrında yaşadığı cemiyet için faydalı olabilmesi şarttır." "Kimsesiz, Terkedilmiş ve Anormal Çocukların Korunması Hakkında Kanun Tasarısı ve İçişleri,

1947 Draft Bill shows that after the theme of child-rearing for the sake of the nation, that of child protection came to be a legitimate element in the debates on the proper relationship between state and family.

In the parliamentary sessions, the concerns of the legislators to delineate the sections of society and spaces to which the law would be applied were apparent. These sections included those who were “physically” and “spiritually” harmed owing to “poor accommodation, malnutrition, fatigue, and the deprivation of joy and play,” venereal diseases, “immoral” relations, and tuberculosis. These children were the victims of all kinds of danger, threatening both their spirits and bodies. These children were mentally ill (*kafa sakatı*) and victims of the environment in which they lived. These children were the victims of irresponsible parents.²¹⁹

Article 1 of the draft bill defined these children first of all as being “in danger.” According to the article, their bodily, spiritual and moral development was threatened. The discourse centered on the 1947 Draft Bill showed that the project regarding the child issue required more than educating mothers in the way of raising physically and

Milli Eğitim, Çalışma, Adalet, Bütçe, Sağlık ve Sosyal Yardım Komisyonları Raporları ile Geçici Komisyon Raporu,” *TBMM Zabıt Ceridesi* 19 (6 February 1947), p. 177.

²¹⁹ From the Report of the Republican People’s Party Parliamentary Commission, quoted by Kars MP Dr Esad Oktay in “Kimsesiz, Terkedilmiş ve Anormal Çocukların Korunması Hakkında Kanun Tasarısı ve İçişleri, Milli Eğitim, Çalışma, Adalet, Bütçe, Sağlık ve Sosyal Yardım Komisyonları Raporları ile Geçici Komisyon Raporu Meclis Görüşmeleri.” “*Fena mesken, kötü beslenme, yorgunluk, neşe ve oyundan marumluk, çocukta bedenî ve ruhî yoğunluklar yapar. Daha sonraları zührevî ve sarî hastalıklara uğramak ve tedavi görmemek, ahlaksızca yakınlık ve temaslar sebebiyle doğabilecek sonuçlar ve uyanacak alışkanlıklar ve nihayet bu çeşit zavallıların üstüne atılmak için köşelerde bekliyen verem bilhassa kaydedilmeye değer. Bu kategoriye ana veya babanın, yahut her ikisinin hiç çalışmayacak halde bulunmaları durumunu da katmak icabeder. O zaman maddî ceza ve manevî düşüklük iki kat artmış bulunacaktır. Bunlar uzuvlarını olduğu kadar ruhlarını da bekliyen her çeşit tehlikenin ilk ve zarurî kurbanlarıdır. Bu çocuk bazan Anadolu’nun fakir ve ücra köşelerinden sele kapılmış bir taş gibi şehirlere düşen arayıp soranı kalmış bir kimsesiz veya yoksul, bazan mütereddi bir ana babanın, kalpsiz bir vasinin sokağa bıraktığı bir döküntü, bazan da her çeşit fena görenekleri kendine örnek seçen bir bakımsızlık mağduru ve nihayet marazi ruh yapısının, bozuk düzenli iradesinin aileden koparıp kaldırırma fırlattığı bir kafa sakatıdır.*” p. 597, “*sosyal bakımdan tamamen ihmale uğramış bu çocuklar arasında alkolizm, keyif verici zehirlere düşkünlük ve tenasülî delaletler de çoktur.*”

morally healthy and robust children. It required protecting the child from material and moral harm in an ever-widening arena of danger. It appeared that no socially defined space meant an adequate guarantee that would protect physically vulnerable and morally impressionable young children from material or moral danger. The child needed protection from all those who would turn him from the path of morality, utility, and hard work.

The goals of rehabilitation were expressed in increasingly economic terms. The chief goal of the draft bill was to make idle children useful for the society in which they lived and to instill the qualities needed for good industrious workers. Dr. Esad Okay insisted that “children older than seven in villages are almost productive. They are in a state of carrying out some agricultural jobs.”²²⁰ He further proposed that urban children, who were included in the scope of the law, should, in the end, be enrolled in public and vocational schools, or employed in industrial or agricultural institutions. As a matter of fact, indenture was a measure favoured among the Republican elite, who believed that learning a useful trade would inoculate the individual against future pauperism and also would inculcate habits and virtues which would drive him to the right social path. Article 11 dictated that “children should be indentured to people carrying out private professions, state factories and agricultural institutions, and private factories and offices where they can learn trades which they may carry out independently in the future.”²²¹ The emphasis on indenture and industrial utility illustrates the malleability of children’s

²²⁰ Ibid., p. 598, “*Köylerde 7-8 yaşındaki çocuk, aşağı yukarı müstahsil vaziyettedir. Zirai işlerde bazı vazifeler yapacak durumdadırlar.*”

²²¹ Ibid., p. 605.

interests. The Republican elite called for child protection on the one hand and condoned child labor on the other.

Furthermore, the emphasis on the intersecting interests of children and those of society created a legitimate base on which the law could be built. The legislators argued that the law would save the children both from their impoverished conditions and society from the dangers these children created.²²² A widespread and historically deep-rooted fear of transience also marked the concerns behind the 1947 Bill and provided the Republican elite with a valid base to protect children. Children were often referred to as “deprived of clothing,” “unemployed,” and “unsheltered” while referring to their vagrancy and the dangers they created.²²³ The fact that the law did not recognize blind, deaf and dumb children in its scope despite the insistence of some MPs discloses the arising concerns about the uncontrollable conditions of the idle children, who were exposed both to diverse social threats and at the same time, posed threats to society.

Trabzon MP Mustafa Reşit Tarakçıoğlu, who drew attention to the issue of blind, deaf and dumb children, rejected the limited scope of the Article 1 and insisted that it should include blind, deaf and dumb children who were “mentally healthy and robust,”

²²² Ibid., “*bunlar hakkında karar verip hem bunları bakımsızlıktan hem de topluluğu bunların zararlarından kurtarmış olacaksınız.*” p. 597, “*Topluluk hayatı için çok zararlı olan kimsesiz çocuk durumunu düzeltmek için bu halin esas sebeplerini bertaraf etmek lazımdır.*” p. 598.

²²³ “*İşte üstsüz başsız, işsiz güçsüz, yersiz yurtsuz dolaşan bu bedbahtlardır.*” Ibid., p. 597. As a matter of fact, idleness and laziness were always denounced by the Republican elites during the 1920s and 1930s and idles and vagrants were perceived as people who should be rehabilitated through work. Especially children were inoculated with the merits of work and vices of idleness. In a journal of the CPS, *Gürbüz Türk Çocuğu* (The Robust Turkish Children), a poem was published which condemned the idleness and laziness of the beggars.

“*Dilenciye acırım/fakat vermem beş para/çünkü bunlar birtakım/tembel, miskin, maskara/elini uzatarak sokulur yanımıza/-Efendim halime bak!/diye dilenir para/-Allah versin dersiniz/işitmez sanki sağır/çekilip gidersiniz/arkanızdan bağıırır/hiçbir iş yapmıyarak/başkalarının sırtından/tembel tembel yaşamak/onlarca budur plan/halbuki dilenciye / vermese kimse para/ “Aç kaldım” diye diye/başlar çabalamaya.*” “Faydasız Merhamet,” *Gürbüz Türk Çocuğu*, no. 38 (November 1929). Also see, “Dilencilerin Önüne Niçin Geçilmiyor?” *Cumhuriyet*, 11 November 1930; “Şehirde 10.000 Dilenci Olduğu Anlaşıldı,” *Cumhuriyet*, 10 July 1930; “Sürüsüne Bereket,” *Cumhuriyet*, 11 July 1930. For beggars in the Ottoman Empire, see Özbek, *Osmanlı İmparatorluğu'nda Sosyal Devlet: Siyaset, İktidar ve Meşruiyet, 1876-1914*.

but not “abnormal.”²²⁴ The Minister of National Education, Tahsin Banguoğlu, applied a harsh tone when replying Tarakçioğlu. “Poor children and disabled children are two separate issues. The scope of this law includes poor and abandoned children, but not blind, deaf and disabled children.”²²⁵

The 1947 Draft Bill also blurred the so-called boundaries between the state and civil society. It stressed the roles which would be assumed both by the organs of bureaucratic apparatus such as the Ministries of Health, National Education, Justice, Internal Affairs, Economy, Work and Agriculture, as well as municipalities and governmental organizations and also private and semi-private institutions such as the Children’s Protection Society and several charity organizations.²²⁶ Likewise, the RPP commission which prepared the draft bill worked together with the representatives of charity organizations which had so far been active in philanthropic activities.²²⁷ Gaziantep MP Dr. Muzaffer Canbolat was anxious that ordinary citizens and already founded private institutions would lose their enthusiasm in the war against child question since “the government assumes the responsibility of the children in need of protection.”²²⁸ He further claimed that, recently, charity organizations had not been

²²⁴ “Kimsesiz, Terkedilmiş ve Anormal Çocukların Korunması Hakkında Kanun Tasarısı ve İçişleri, Milli Eğitim, Çalışma, Adalet, Bütçe, Sağlık ve Sosyal Yardım Komisyonları Raporları ile Geçici Komisyon Raporu Meclis Görüşmeleri,” p. 601.

²²⁵ Ibid., p. 601.

²²⁶ Ibid., p. 598.

²²⁷ “Kimsesiz, Terkedilmiş ve Anormal Çocukların Korunması Hakkındaki Kanun Tasarısının Geri Verilmesine Dair Başbakanlık Tezkeresi,” *TBMM Zabıt Ceridesi* Session 1, no. Term 42 (7 February 1949), p. 42.

²²⁸ Ibid., p. 599, “*Endişem şudur: Memlekette, bakılmaya muhtaç olan çocukları bu kanunla Hükümet eline almıştır. Binaenaleyh vatandaşların ve bunun için teşekkül etmiş olan kurumların çalışmasına lüzum yoktur, diye bir kanaat husule gelmesin.*”

supported by the state organizations and called for the state apparatuses to support the charity organizations, especially those working in the sphere of child issues.

The Minister of National Education, Tahsin Banguoğlu, argued that the government would be more successful if the necessary “cooperation” with private or semi-private organizations could be built. He also proposed that the financial burden the imminent law would create should be assumed by local organizations (*mahalli teşekküller*), municipalities, and village administrations. “Thus,” he argued, “the whole country will be responsible for this duty [the issue of children in need of protection].”²²⁹ The Republican law makers invited each and every citizen and organization, whether private or state, to take part in the process of locating the family in the realm of social which was to be defined and regulated by the law, and hence blurred the so-called boundaries between the state and civil society.²³⁰

The draft bill required that the care of “normal” children under the age of seven and “abnormal” children older than seven be the sole responsibility of the Ministry of Health, while the care of “normal” children older than seven would be the sole responsibility of the Ministry of National Education. The Ministry of Health had two options to care for “abnormal” children under the age of seven: to provide care where they actually lived or found care houses.

Perhaps even more important than the defining process, the classification of the social sections targeted by the draft bill was much on the minds of the Republican law

²²⁹ Ibid., p. 600.

²³⁰ Until recently, the concept of civil society has been assessed as an entity completely distinct from the state, embodying characteristics such as civility, toleration, and peace. However, recent research on the concept has displayed the dynamic tension between civil society and the state, and put special emphasis on the negotiation processes between the two. See Frank Trentman, ed. *Paradoxes of Civil Society: New Perspectives on Modern German and British History* (New York: Berghahn Books, 2000).

makers. Kars MP Dr. Esad Okay agitated for revisions that would render it possible to make a classification among children older than seven years old in need of protection. He underlined the need for institutions to be able to carry out examination and classification processes. He added that there should be pedagogues and psychiatrists in these institutions in order to examine these “abnormal” children “in depth.”²³¹

He went further, presenting his own classification of children in need of protection in three categories. The first embodied children who were psychologically “normal” (*ruhen normal*), but had been morally corrupted by negative impacts and neglect. Children in the second category were psychologically ill and deranged. Children in the third category, he proposed, should always be kept under custody, because of the fact that it was impossible for them to benefit from any kind of medical or pedagogic precautions since they had already been suffering from illnesses such as trauma, infection, severe epilepsy, and extreme psychological problems.²³² Another distinction was to be made, he added, according to the relation between these children and their parents. Although Article 1 of the draft bill clearly stated that children without parents and children whose parentage was unknown would be placed under state care via court decision.²³³ Should the state assume responsibility for those who had parents, but had been deprived of them for a temporary period for reasons such as hospitalization or

²³¹ Ibid., p. 598.

²³² Ibid., p. 598.

²³³ “*Beden, ruh, ahlak gelişmeleri tehlikede olup, ana ve babasız, ana ve babası belli olmıyan ve Medeni Kanun hükümlerine göre haklarında korunma tedbirleri alınmasında zaruret görülen çocukların mahkeme kararıyla ve reşit oluncaya kadar bu kanunla belli edilen şartlar içinde bakılmaları ve yetiştirilerek meslek sahibi edilmeleri köy ihtiyar heyetleri, mahalli belediyelere, Sağlık ve Sosyal Yardım Bakanlığı ve Milli Eğitim Bakanlığı'na sağlanır.*” “Kimsesiz, Terkedilmiş ve Anormal Çocukların Korunması Hakkında Kanun Tasarısı ve İçişleri, Milli Eğitim, Çalışma, Adalet, Bütçe, Sağlık ve Sosyal Yardım Komisyonları Raporları ile Geçici Komisyon Raporu Meclis Görüşmeleri,” p. 600.

incarceration? Should the scope of the draft bill only include those children who had no ties with their parents? In the end, it was decided that children who were identified to be in need of protection but had both parent alive should also be taken under state protection via court decision.

The fact that the Turkish Grand National Assembly issued another law in 1957 under the title of the 1957 Law on Children in Need of Protection (*Korunmaya Muhtaç Çocuklar Kanunu*) shows the persistent nature of the issue and the deep gap between legislation and execution. The law required that orphaned children and abandoned or neglected children who embodied the potential of “developing bad habits and being dragged into wrong deeds” should be protected. Those younger than school age should be sheltered in care houses and those of school age should be sheltered in foster institutions (*yetiştirme yurtları*).²³⁴ However, it is obvious that the law remained insufficient in this formative role. For example, as of 1979, only 3,500 children were provided with shelter in twenty-one care houses and 13,060 in seventy-one foster houses.

In this chapter, I have outlined the emergence of child welfare in Republican Turkey and the concerns of the Republican elite related to it, and made efforts to trace the changes and to display the consistent nature of the issue despite the transformations in the political realm. In the end, the issue of child welfare turns out to be a very fruitful and instructive field for writing about the social aspects of Turkish history independent

²³⁴ Muzaffer Sencer, “Türkiye’de Çocuk ve Aile,” in *Cumhuriyet Dönemi Türkiye Ansiklopedisi* (İstanbul: İletişim Yayınları, 1983), vol. 2, p. 361.

from the narrow paths of political events. It may also create new opportunities to build an alternative periodization of Turkish history other than the one which reduces it to the regime changes (i.e. single part era, multi-party era).

The child question was, on the one hand, a part of wider public discourses on “population” and fused with the notion of nation-state building and, on the other hand, revealed the borderlines of the “social revolution” (*içtimai inkılap*) the Republican elites sought to achieve. The concerns of the Republican elite were shaped in an environment which was the result of several decades of upheaval, war and territorial loss under the Ottoman Empire.²³⁵ Anxious to re-populate the country, the Republican elite led a campaign to war against what was called the child question, which was characterized by child poverty; high infant and child mortality rates; malnutrition and disease; juvenile delinquency; a large number of orphaned, abandoned, or poor children; child labor; homelessness; begging; child abuse and abandonment; and child prostitution.

In this context, childhood, motherhood and nationhood became intertwined. The parameters of what was considered the ideal conceptions of motherhood, child-rearing, and domesticity were defined and re-defined in a context of nation-state building and nationalism. Within the Turkish context of nation-state building, untutored, “ignorant” mothers were problematized as unsuited for the preparation of a new generation of fit and healthy children. With the advent of a “modernizing” discourse, child-rearing became embedded almost solely in the sphere of mothers, and its aim became the creation and cultivation of new types of children who were physically, mentally and

²³⁵ For the characteristics of child questions and efforts in the name of child welfare in the Ottoman Empire, see Cüneyd Okay, *Belgelerle Himaye-i Etfal Cemiyeti, 1917-1923* (İstanbul: Şule Yayınları, 1999); Özbek, *Osmanlı İmparatorluğu'nda Sosyal Devlet: Siyaset, İktidar ve Meşruiyet, 1876-1914*.

morally healthy, robust and fit, and who were reared in line with the modern, rational and hygienic principles. The production of a population healthy in mind and body was localized in motherhood, and in turn, mothers became responsible for the formation of children while motherhood and mothering became a national and social duty.

As a matter of fact, child welfare constituted the main pillar of the broader question of population whose characteristics included population decrease, physical and racial degeneration and concerns related to the preservation of the national features, as well as the construction of physically and morally healthy generations and whose imperatives required new social techniques in the way of governing, such as statistics, record keeping, creation and the dissemination of new knowledge about such issues as pregnancy, child-rearing, infant and child mortality, disease prevention, and hygiene and health.

Private and semi-private institutions such as the Children's Protection Society, Turkish Red Crescent and the Home for Rescuing Children among other acted as the foremost propagator of the discourse and practices developed by the Republican elite in the project of governing the population in line with new social technologies. Especially, upper-class volunteers and women fortified their places as the primary spokespersons in the field of child care. Most of the figures prominent in the field of child welfare and playing active roles in civil society also participated actively in the politics,²³⁶ hence child welfare turned into a field which blurred the so-called distinction between the state and civil society. Especially physicians, extending beyond their professional and medical expertise, became increasingly embedded in the bureaucratic apparatus of the state and, conceiving themselves as the representative of authority on a broad range of

²³⁶ Two prominent propagators of child welfare were Dr. Fuad Umay and Dr Behçet Uz.

social and political issues, volunteered to disseminate the discourse and practices developed by the republican politicians.²³⁷ Child welfare also created a field around which a cohort of individuals who were identified as social experts, educators, physicians, nurses, intellectual and writers, who could gather together and legitimize themselves as serving a “national cause.”



²³⁷ For research on the profiles of Turkish doctors, see Ayşecan Terzioğlu, “Turkish Medical Doctors: Historical Experience and Self-Narratives” (Master's thesis, Bogazici University, 1998).

CHAPTER III

MORALITY AND SEXUALITY: VENEREAL DISEASE AND PROSTITUTION

We tend to think that sexual relations are personal matters occurring in one's own private sphere and depending on one's choices. However, those sexual relations which begin in the dark streets have never been able to escape the gaze of the authorities, and it has always been decided within the parameters of social morals who sleeps with whom, where, and under what kinds of conditions. Joan Sangster, in her book, in which she examines the issues such as sexual abuse, wife assault, prostitution, female delinquency and the conditions of Aboriginal women in Canada, argues that sexual regulation is a "continuum" behind which lies a variety of goals that reveal the power relations of class, race, and gender. Apart from that, she notes, "there were different definitions and rationales and shifting focuses of concern and methods of censoring women deemed sexually deviant."²³⁸

Prostitution, and related with it sexuality, is a recently discovered part of social history and women's history, a rediscovery that occurred thanks to the renowned book

²³⁸ Joan Sangster, *Regulating Girls and Women: Sexuality, Family, and the Law in Ontario 1920-1960* (Oxford: Oxford University Press, 2001), p. 87.

by Judith Walkowitz, *Prostitution and Victorian Society*.²³⁹ The book is mainly about the Contagious Diseases Acts of 1864, 1866 and 1869 and their assessment. While some historians view reform work from an uncritical perspective, others have been informed by feminist theory and present a critical perspective on the penitentiaries founded as a result of the CD Act. While some of them are merely empirical studies, others are based on theoretical imperatives of the Foucauldian discourse of social control.²⁴⁰

Feminist historians have also focused their attention on the nature of the act of prostitution itself. Sangster argues that feminists in the period from 1920 to 1960 did not often suggest the decriminalization of prostitution and that most liberal feminists flirted with the ideas and mentalities behind the prevailing legal discourse. Most of them perceived women's extramarital or excessive sexual activity as a social problem and approved of the law as an appropriate instrument to regulate sexual activity and familial roles for women and men. As she states, "sexual regulation stretched across state and civil society, crossing the borders of the public and private, linked through formal and informal systems of power and authority – the nuclear family, religious precepts, expert medical knowledge, and the court system. Criminalization, in short, always went hand in hand with a broader process of Foucauldian normalization."²⁴¹

It is not possible to say that Turkish and Ottoman historiography is productive in terms of studies on sexuality and prostitution, its social context and impacts. To give just one example about prostitution and related disease in the context of Turkey, we can

²³⁹ Judith R. Walkowitz, *Prostitution and Victorian Society: Women, Class, and the State* (Cambridge: Cambridge University Press, 1980).

²⁴⁰ Paula Bartley, *Prostitution, Prevention and Reform in England, 1860-1914* (London & New York: Routledge, 2000), pp. 13, 14.

²⁴¹ Sangster, *Regulating Girls and Women: Sexuality, Family, and the Law in Ontario 1920-1960*, p. 86.

mention Zafer Toprak's article "İstanbul'da Fuhuş ve Zührevî Hastalıklar, 1914-1933",²⁴² (Prostitution and Venereal Diseases in İstanbul, 1914-1933) which, embodies rich empirical data. In this article, Toprak describes the Great War Years in the Ottoman Empire and its impacts on women who had to earn their livings through prostitution because the breadwinners of the home, that is, their men, had gone to war in the trenches. "İstanbul'da Fuhuş" is primarily built on the Regulation Concerning Eradication of the Contagion of the Venereal Diseases (*Emraz-ı Zühreviyyenin Men'-i Sirayeti Hakkında Nizamname*), which was issued on 18 October 1915, and focuses on the articles and, as a result, the practices of the regulation in depth.

He then moves on to the "regulatory practices" in the Republican Era and cites the circular of War against Prostitution ("*Fuhuşla Mücadele*" hakkında tamim) issued on 12 April 1930 and the Regulation of War against Prostitution and Prostitution-Related Diseases of 1933 (*Fuhuşla ve Fuhuş Yüzünden Bulaşan Zührevî Hastalıklarla Mücadele Nizamnamesi*) in this context. He includes examples from literature, such as the famous book by Ahmet Rasim, *Fuhuş-ı Atîk* (The Old Prostitution). However, Toprak's article does not give any hint of a theoretical background behind these processes such as regulation and social control and does not question the link between prostitution, venereal disease, and efforts at regulation, nor their relation with the formation of a "modern" state which first of all cared for the health and welfare of its citizens in order to reinforce its legitimacy. Nevertheless, with its detailed description of prostitution and venereal disease during the Great War Years, it provides extensive empirical data for future research.

²⁴² Zafer Toprak, "İstanbul'da Fuhuş ve Zührevî Hastalıklar, 1914-1933," *Tarih ve Toplum* (1987).

For the last few years, social history has been gaining strength in Turkish historiography, however still confined to a few historians and limited subjects. To give a few examples, the work of Nadir Özbek provides readers with a perspective regarding the social history of the Hamidian Era with special emphasis on welfare regime, social state, social policy, and social welfare.²⁴³

During the early Republican era, prostitution, so-called prostitution-related diseases and their relation with social organization, family life and the “future of the nation” were frequently discussed issues, which led to occasional, unsystematic regulatory practices and precautions and “intention” of the elites.²⁴⁴ A section of a broader “national health policy,” venereal disease among others such as tuberculosis, trachoma, and malaria, was assessed by many doctors and public officials as a serious health hazard for the Turkish population. Apart from curative techniques, both doctors and the public authorities were convinced of the need for preventive measures, in particular, for the sanitary supervision of common prostitutes. The medical rationale behind a regulation system was the belief that syphilis was spread through promiscuous sexual contact with diseased prostitutes. Treatment of venereal disease was not simply a medical or clinical question, but was governed by the dominant sexual and social ideology as well. Most of the critiques provided by physicians, social workers, and commentators perceived prostitution as detrimental to social harmony, family life,

²⁴³ Özbek, *Osmanlı İmparatorluğu'nda Sosyal Devlet*.

²⁴⁴ I do not believe that focusing on only regulations and legal reforms about any issue can lead us to conclude that there emerged or was an all-encompassing “modern” state in its Foucauldian sense. To deduct such a conclusion or pose such an argument, one has to focus on real practices. The recurring character of regulatory legal regulations in Turkish context points, in my view, to the “intention” of the elites, not the actual practices of a modern state, to use the term, in its Foucauldian sense, and this means a break in an all-encompassing state, which also means a negotiation process between the state and the society which cannot be separated from each other but evolves in interaction. Therefore, it is not possible, I believe, to talk about a one-way relation when the state and society are in question.

individual and social health and hygiene, and social morality as well. This chapter explores the various levels of meaning attached to the treatment of venereal disease. It will also examine the role of the physician in the treatment of venereal disease and, related to it, prostitution and the regulatory discourses and practices employed in the “war against prostitution.”

The government’s concern for the health of the population and efforts made to organize the public space, which we will see in the case of the regulation of prostitution, is evaluated within a framework which has been constructed in order to reveal the multifaceted and complicated relations between the state and the population. In the case of health policies, the governing elites developed a symbiotic relation with the physicians. In order to legitimize its power in the eyes of the population, the government propagated its policies regarding the organization of the social through the scientific and objective language of physicians. In turn, physicians took on political and social roles.

Syphilis

Syphilis (sift’ e lis) a chronic infectious disease, caused by a spirochete, *Treponema pallidum*, usually venereal in origin but often congenital, and affecting almost any body organ, esp. the genitals, skin brain and nervous tissue.²⁴⁵

The last days of the eighth century (in the Hegira Calendar) (after 1485) brought a terrible illness to Turkish lands and to the Orient which would create great anxieties and pose a great threat to the health of the people.

Syphilis, which as yet had not been seen in the Orient or known by the physicians of the Orient, entered Turkish lands and spread gradually. It was a

²⁴⁵ *Webster Encyclopedic Unabridged Dictionary of the English Language*, (New York: Gramercy Books, 1996)

dirty outcome of the trade activities with Europeans, which was detrimental to Turkey. Our country took this illness which would bring great suffering to its children from its European friends with whom it entered into commercial relations. Turkish physicians had not known syphilis yet. It had not been known in Turkistan or Persian lands either. Likewise, even a line about syphilis was not found in Arabian, Persian and Greek medical texts which were explored when Turkish medicine was founded.²⁴⁶

In 1934, two physicians, Hulusi Behçet²⁴⁷ and Cevat Kerim, professors of dermatology and syphilis at İstanbul University, began publishing a journal called *Deri Hekimliği ve Frengi Kliniği Arşivi* (Archive of Skin and Venereal Disease) in order to draw attention to skin diseases and “syphilis,”²⁴⁸ to “diminish the vices and harm of syphilis, and to put an end to the catastrophes it caused for families and generations.”²⁴⁹ Syphilis was not a simple health question, but a great social peril which required medical, social and moral attention. In addition medical literature related to skin disease, the journal featured in-depth descriptions of syphilis, detailed pictures of patients afflicted with syphilis and their affected organs, articles drawing attention to the social dangers of syphilis and prostitution, and ways to cure the disease.

²⁴⁶ “Hicri 8. yüzyılın son günleri, (M. 1485'ten sonra) Türk memleketlerine ve doğuya sağlıkları için büyük bir endişe teşkil edecek olan müthiş bir hastalık getirmişti.

Şimdiye kadar ne Doğu'nun ne de Doğulu hekimlerin görmediği frengi yavaş yavaş memleketlere giriyor ve yayılıyordu. Bu, Türklerin Avrupalılarla giriştiği ticarî alışverişte Türkiye'nin zararına verilen kirlî bir mal idi. Memleketimiz, yüzyıllar boyunca acılarını evlatlarımızın da göreceği bu hastalığı ticarî ilişkiler kurduğu Avrupalı dostlarından alıyordu. Türk tabipleri frengiyi tanımıyorlar ve bilmiyorlardı. Terk ettikleri Türkistan'da ve Acem memleketlerinde de bilinmiyordu. Keza Türk tababeti kurulurken incelenen Arap, Acem ve Yunan kitaplarında da buna ait tek satıra bile rastlanamamıştı.” Osman Şevki, *Beş Buçuk Asırlık Türk Tabâbeti Tarihi* (Ankara: Kültür Bakanlığı Yayınları, 1991), pp. 52-53.

²⁴⁷ Hulusi Behçet was the head of the Society of Skin Disorders and Venereal Disease (*Cilt ve Zührevi Hastalıklar Cemiyeti*).

²⁴⁸ What they meant by venereal disease was in fact “syphilis” (*frengi*), which they used frequently.

²⁴⁹ “Bizde rubu asırdan beri harabiyetlerine, yakinen, şahit olduğumuz bu musibetin [frengi] fenalıklarını tahdit etmek, mazaratlarını kısmak, nesli, ailevi facialarını durdurmak mecburiyetindeyiz.” Hulusi Behçet and Cevat Kerim, “Başlangıç ve İlk Sözümler,” *Deri Hastalıkları ve Frengi Kliniği Arşivi* 1, no. 1 (1934).

How Did Physicians View Syphilis?

Syphilology was a new branch of science in Turkey in the 1930s. The profession of syphilology (*frenği hekimliği*) was viewed as a branch of dermatology because the main visible symptoms of syphilis revealed themselves as dermal scars. Behçet declared that it was established because prostitutes disseminated venereal disease on an alarming scale.²⁵⁰ As can be seen, it was believed that venereal disease was related directly to prostitution and promiscuous sexual behaviour. Beliefs about the origins of syphilis were very much like those that prevailed in Europe. It was widely believed that venereal syphilis had arrived in Europe at the end of the fifteenth century, with the sailors returning on Columbus's ships, and that the year 1494²⁵¹ saw an epidemic outbreak of syphilis caused by the sexual activity of soldiers and public women.²⁵² For example, French soldiers, Behçet asserted, contracted disease from Italian women during the campaign of Charles VIII of France because "soldiers and the whole army passed their

²⁵⁰ Hulusi Behçet, "Deri ve Frenği Hekimliği," *Deri Hastalıkları ve Frenği Kliniği Arşivi* 1, no. 1 (1934), pp. 3-16.

²⁵¹ For the same epidemic outbreak Engelstein gives the date 1493 and her assessment, which depends on views of Dr. Philippe Ricord, one of the founders of nineteenth century syphilology, is interesting: "Dr. Philippe Ricord ... recognized the virulent outbreak of 1493 as the start of a new era in medical and popular consciousness, akin to the political watershed marked by the Great Terror of 1793." Laura Engelstein, "Morality and the Wooden Spoon: Russian Doctors View Syphilis, Social Class, and Sexual Behaviour, 1890-1905," in *The Making of the Modern Body: Sexuality and Society in the Nineteenth Century*, eds. Catherine Gallagher and Thomas Laqueur (California: University of California Press, 1987), p. 171.

²⁵² Behçet, "Deri ve Frenği Hekimliği." pp. 3-16; also Dr. Asım Kermenli, "Frenği Nasıl Bir Hastalıktır?" in *Sihhat Almanacağı*, ed. Mazhar Osman (İstanbul: Kader Matbaası, 1933); Dr. Ahmet Şükrü Bey, "Frenği," in *Sihhat Almanacağı*, ed. Mazhar Osman (İstanbul: Kader Matbaası, 1933). It seems from medical texts of the period that Turkish physicians agreed upon the origins of syphilis in the world.

time in debauchery.”²⁵³ In an article titled “Morality and Wooden Spoon: Russian Doctors View Syphilis, Social Class and Sexual Behaviour, 1890-1905,” Engelstein quotes the views of European physicians on the origins of syphilis and mentions views similar to those of Behçet.²⁵⁴ Behçet linked the emergence of syphilis in the Ottoman Empire to the encroachment of alien values and social institutions. Although syphilis had been seen in Europe as early as 1494, depending on book by an author called Honignerger [sic] published in 1820, Behçet argues that it was not known in the Ottoman Empire until the nineteenth century. It was thought to have arrived in the Empire after the Crimean War, with the returning soldiers, and because of trade activities with European merchants. Before that, he argued, syphilis had entered the Ottoman Empire via Greek soldiers and Jews fleeing Ferdinand. However, the disease remained restricted, “because of the limited relations of our people with Europeans and since prostitution was regarded as a great crime.” It was even not seen, he asserted, till 1822 in some places where there were no commercial ties with the outer world or prostitution.²⁵⁵ It was only after World War I and with the return of soldiers who carried syphilis from the trenches to their homes that the disease appeared in Anatolia on an

²⁵³ “Fransız askerleri ile İtalya kadınları arasında, birçok münasebetler teessüs etmiş olduğu, tarihçe mukayyedir. Serbestçe vuku bulan bu rabitalardan başka, Charle ordusu Rma ile Napoli arasında yürüdüğü sırada, sekiz yüz kadar her cinsten fahişe takip etmişti. Binaenaleyh ordunun fuhuş ve sefahat içinde vakit geçirdiği, tarihen müsbettir.” Hulusi Behçet, “Frengi Tarihi ve Geçirdiği Devirler I,” *Deri Hastalıkları ve Frengi Kliniği Arşivi* 3, no. 13-14 (1936). It is possible to read the same story in a European medicine book published in 1918: “Syphilis was unknown before the year 1493. It was probably brought by the crew of Columbus, on his first voyage from Espanola, or Hayti. Some of the returning crew accompanied Charles VIII of France in the autumn of 1494 with the army, 32,000 strong, which invaded Italy for the conquest of Naples. The epidemic began in Italy at this time and the disease spread quickly over Europe with the scattering of troops.” Milton J. Rosenau, *Preventive Medicine and Hygiene* (New York & London: D. Appleton & Company, 1918), p. 52.

²⁵⁴ Engelstein, “Morality and the Wooden Spoon: Russian Doctors View Syphilis, Social Class, and Sexual Behaviour, 1890-1905.”

²⁵⁵ Behçet, “Frengi Tarihi ve Geçirdiği Devirler I.”

epidemic scale, including the inner regions which were perceived to have resisted infection since they were not urbanized. Behçet went on to write that the first known campaign against syphilis had been in 1881, after a physician called Michel proved the connection between the spread of syphilis and prostitution.

In the treatment of syphilis, mercury was generally prescribed in the form of pills, vapor baths, or inunctions with ointment.²⁵⁶ Mercury the traditional specific for syphilis, however, lost its popularity in the early nineteenth century. Although it regained its popularity later in the century, it was no longer the exclusive treatment for the disease. The advent of Salvarsan²⁵⁷ before World War I replaced mercury in treatment of the disease.²⁵⁸ A medical text informs us that as of 1935, there were four ways of curing syphilis: Mercury, as mentioned above; iodine, which had been used with mercury since for centuries; arsenic, which was first used in 1910; and bismuth which was introduced in 1921.²⁵⁹

Depending on the European literature to which they had access and their own experience with syphilis, Turkish syphilologists and dermatologists were able to agree on the essential features of the disease. First of all, it was known to be an infectious disease (*sârî*), usually introduced into the system by a “germ” (*intanî*). Second, it required the attention of other medical branches, such as internal and external pathology, neurology, and otology. Third, it was spread through promiscuous sexual contact with

²⁵⁶ Şevki, *Beş Buçuk Asırlık Türk Tabâbeti Tarihi*.

²⁵⁷ A brand of arsphenamine, a yellow crystalline powder, which was formerly used to treat diseases caused by spirochete organisms, especially syphilis and trench mouth. *Webster Encyclopedic Unabridged Dictionary of the English Language*.

²⁵⁸ Walkowitz, *Prostitution and Victorian Society: Women, Class, and the State*, p. 52.

²⁵⁹ Saim Suner, “Frengi Tedavisinin Hali Hazır,” *Deri Hastalıkları ve Frengi Kliniği Arşivi* 2, no. 8 (1935).

diseased prostitutes. Therefore, the main pillar of the battle against venereal threat was propaganda against prostitution. Although it was thought to spread through a germ, it was not a simple contagious disease. The devastating effects of hereditary syphilis were a persistent theme of regulationist propaganda. It was viewed not an individual's disease, but as a catastrophic disease which passed vice down through the generations, and constituted a social peril. Syphilis was often endemic to entire communities, and penetrated the fabric of everyday life easily. Engelstein's assessments about syphilis in the Russian context were very similar to those made for the Turkish context: that "it was a demographic or social problem, rather than a matter of individual pathology, whether physical or moral."²⁶⁰

War was regarded as the main social context which enabled the syphilis contagion to a great extent. Behçet confidently argued that syphilis was specific to the congested environment of urban life in the West during peacetime, but in war time disseminated to the countryside, which otherwise resisted infection on the all-pervasive scale as in the cities.²⁶¹ Prejudices against urban life and industrialization, and the results of such environments brought about were common among the Republican elites.²⁶² Debauchery and hidden prostitution in urbanized environments were perceived as the main sources of syphilis.²⁶³ Apart from wars and overcrowded cities, hunger, poverty,

²⁶⁰ Engelstein, "Morality and the Wooden Spoon, p. 76.

²⁶¹ Hulusi Behçet, "Frengi," *Deri Hastalıkları ve Frengi Kliniği Arşivi* 2, no. 2 (1934), pp. 106-23.

²⁶² See for example, M. Asım Karaömerlioğlu, "The Village Institute Experience in Turkey," *British Journal of Middle Eastern Studies* 25, no. 1 (May 1998); M. Asım Karaömerlioğlu, "The People's Houses and the Cult of the Peasant in Turkey," *Middle Eastern Studies* 34, no. 4 (October 1998); M. Asım Karaömerlioğlu, "Elite Perceptions of Land Reform in Turkey," *The Journal of Peasant Studies* 27, no. 3 (April 2000).

²⁶³ Kermenli, "Frengi Nasıl Bir Hastalıktır?"

immigration, immorality, and large populations of bachelor men created the environment suitable for dissemination of the disease. By emphasizing immorality and the unmarried state, Behçet was implying that the surfeit of unwed and sexually hungry males and the abundance of destitute and unsupervised females and their promiscuous sexual behavior as a central cause for concern. The emphasis on ignorance reveals that syphilis was viewed as an accurate index of cultural deprivation. Its existence mirrored the prevalent levels of filth, poverty, malnutrition, and overcrowding. The evidence that most of the syphilitic “workers” did not know that they had caught the disease revealed its connection with backwardness and pointed to the necessity of educating the backward poor.²⁶⁴ Likewise, Dr. Abimelek Bey, who saw a relation between disease and low levels of economic welfare, stressed factors impacting the dissemination of prostitution such as lack of money, the demands of daily life, and unemployment.²⁶⁵

Genital contact was one possible avenue of contagion. The shared dish or glass, the unwashed towel, the casual hug, a dirty environment, blood transfusion, and breastfeeding: these were the innocent ways in which “innocent” people disseminated a germ that was not intrinsically sexual. In a similar vein, physicians, dentists, midwives, nurses, and wet nurses had the potential of both contracting and disseminating the disease unknowingly. Behçet even mentioned syphilis of the innocent (*masumlar frengisi* or *masumin frengi*) as a category widely known in Anatolia.²⁶⁶

²⁶⁴ “Nitekim Pianney, frengili ameleler arasında, erkeklerden % 10-20, kadınlardan % 52’sinin hastalıklarının mahiyetlerini bilmediklerini söylüyor.” Behçet, “Frengi,” p. 108.

²⁶⁵ “1) Parasızlıktan dolayı, hastalar lâyıkile tedavi edilmeyerek hastalıklarını sürüncemede bırakırlar. Bu hastalar böylece bir menbaı intan teşkil ederler. 2) Hayatın müşkülâtı, işsizlik, günün ihtiyacı; fuşşun ve gizli fuşşun tevessüuna sebep olur.” Dr. Abimelek Bey, “Zührevî Hastalıklardan Tahaffuza Dair,” in *Sıhhat Almanâğı*, ed. Mazhar Osman (İstanbul: Kader Matbaası, 1933), p. 170.

Linked to this view, two kinds of syphilis were mentioned: acquired (*müktesep*) and endemic (*arızî*) syphilis. The former was usually related to sexual contact, and therefore was believed to be introduced into the body during the individual's sexually active years. The latter was believed to occur any time in one's life since the avenues for its spread were not sexual, but was very much related to the "syphilis of the innocent."²⁶⁷ It was believed that a woman might contract the virus from a man with whom she had had sexual intercourse and then might pass the virus on to a second man without having been affected by the virus herself, because the second man "took the virus left in her uterus by the first man." In this instance, it was widely thought that she just acted as a "carrier" (*mutavassıt*).²⁶⁸ Here, the female was perceived as a source of evil. The same sexual ideology reveals itself in an article by Dr. Hüseyin Zade Ali Bey as well in *Sıhhat Almanacağı*, published for the tenth anniversary of the Republic. Hüseyinzade Ali Bey traced the origins of the word "venereal" to Venus, the female goddess, whom he depicted as the "protector of prostitution" and the source of this social evil.²⁶⁹

It was strongly emphasized that although the endemic form of syphilis was known, it was not as common as venereal syphilis and that sexual contact was almost the exclusive form for transmission.²⁷⁰ Some authors used scientific authority and made use of statistical data, however without any stated source, to prove that sexual contact was

²⁶⁶ Behçet, "Frengi," p. 109. Similar views about syphilis were prevalent in Europe during the 19th and 20th centuries. See, for example for Russia, Engelstein, "Morality and the Wooden Spoon."

²⁶⁷ Behçet, "Frengi," p. 109.

²⁶⁸ Ibid., p. 112.

²⁶⁹ "Şarkın zühresi, Venus'un aynı, tamamen muadili midir, bilmiyorum; ancak fransızların 'vénérien' tabirinde epeyce isabet vardır; çünkü biraz açık meşrepli olan bu dilber ilahe, kadim devirlerin müşriklerince, bilhassa eski Yunanlılara ve Romalılarına göre, bir dereceye kadar fuşşun da hamisi sayılırdı." Dr. Hüseyin Zade Ali Bey, "Sifilomani ve Frengiye Dair Bilgilerimizin Tarihinden Bir Nebze," in *Sıhhat Almanacağı*, ed. Mazhar Osman (İstanbul: Kader Matbaası, 1933).

²⁷⁰ Behçet, "Frengi."

the main way that syphilis was spread. According to Kermenli, ninety-five percent of syphilitic cases were venereal in origin.²⁷¹ Actually, a distinction must be made when evaluating the texts on the avenues of syphilitic contagion as stated in the journals. In the purely medical journals, which were designed for intraprofessional circulation, yet at the same time addressed policy makers with emphasis on the social aspects of illnesses, the main avenue for contagion was always promiscuous, especially extramarital, sexual relations, most probably with prostitutes. However, in the popular health journals, designed to educate the “illiterate people,” the endemic form of syphilis was most often mentioned. The aim in this was to overcome the anxieties of people who viewed syphilis as something “shameful” because it was related with sexuality, especially with excessive sexual relations. In *Sıhhi Sahifalar* (Pages on Health), which was designed for ordinary people, Behçet, who in *Deri Hekimliği ve Frengi Kliniği Arşivi* (Archive of Skin and Venereal Disease) criticized people for drawing attention from the core of the issue by emphasizing the ways syphilis could spread other than sexual contact,²⁷² described these “innocent” ways of contagion in order to convince people that syphilis was not a “shameful” disease. Likewise, in a speech given on İstanbul Radio, he put special emphasis on avenues of contagion such as kissing, hug, shaving and breastfeeding.²⁷³

²⁷¹ Kermenli, “Frengi Nasıl Bir Hastalıktır?”

²⁷² “Bir frengilinin biraz evvel istimal ettiği bir süngerinin, bir diş fırçasının, bir (Canule)ün, veyahut diğer herhangi bir tuvalet eşyasının, sağlam bir şahsa frengiyi geçirebildiği muhakkaktır. Fakat istisnaidir... Bu hususta (Dührig) memleketimizde birçok masumin frengi vakaları tespit etmiştir. Şurası da doğrudur ki, şüpheleri başka tarafa tevcih etmekte menfaatdar olan kimselerin; alelekser ileriye sürdükleri bilvasita sireyet mutat bir şey değildir. Ancak derin bir tahkikattan sonra kabul edilmek lazımdır. Frengi, hemen hemen cinsi bir münasebetten menşei alır. Mukareneti cinsiyeye ve buna refakat eden diğer muhtelif temaslar neticesinde hastalık geçer.” Behçet, “Frengi.”

²⁷³ “Evvela ayıp adedilecek hastalıklar mevcut mudur?... Firengi denildiğinde, pek yanlış olarak derhal gözümün önünde, cinsi münasebet ve mukarenet uyanır. Halk bilmez ki, akrıba arasında teati edilen bir puse, en muhteşem bir yerde tıraş olma, bazan frengiye aşılınmak için kâfidir. Süt neneleri, ve ya sair sebeplerden masumlar frengisi denilen yavrucakların aşılınması ile en temiz genç kızlarımız olan

Viewing syphilis as an exclusively sexually transmitted disease and refusing other avenues of contagion provided physicians with the necessary base to be involved in the political side of the question. Viewing the disease as a social problem, the class of physicians devoted themselves to developing administrative or political solutions. Therefore, proposals for the control of syphilis often depended on political rather than clinical calculations, hence physicians, inspired by their European colleagues, made effort to take on social and political roles. This attitude was necessarily related to the existence of prostitution. Making efforts to improve national health protection, the physicians influenced both policy makers and the general population. In turn, the governing elites used the physicians' scientific language and authority and medicine's seriousness to intervene in the social sphere and to justify its legitimacy in the eyes of the people. They provided the state with the modern, positivist and scientific tone it needed for its political discourse about the well-being and welfare of the population. Dermatologists, venereologists, pediatricians and bacteriologists made up a very significant part of the political elite's discourse on the population.²⁷⁴ One doctor even

annelerine de hastalığın geçtiği pek çok görülmüştür.” Hulûsi Behçet, “Zührevî Hastalıklar Hakkında Halka Mahsus Sıhî Terbiye,” Sıhî Sahîfalar 3, no. 1 (1930). “Halbuki frengi yalnız cinsi temasla geçmez. Cinsî birleşmenin haricinde birtakım geçişlerin mevcudiyeti, inkâr kabul etmez doğruluklar sırasına girmiştir. Geçmede, cinsi münasebetlerin yüksek bir yekûn tuttuğu muhakkaktır. Fakat bunun haricindeki geçişlere ne diyelim. Herhangi bir delki temas neticesi alınmış yüce vak'alara, kliniklerde daima rastlıyoruz. Öpme, öpüşmek, aileler arasında, hısımlık ve akaba meyânında, her gün yaptığımız eski bir görenektir. Bunlara nasıl ayıp diyebiliriz? El, yanak öpmekle ve daha birçok yollardan, tıraş gibi kazâi birtakım frengi aşılmalara görülmektedir.” Hulûsi Behçet, Frengi Niçin Ayıp Görülür? Frengiyi Neden Gizli Tutmak Adet Olmuştur? Tabiatın Ayıp Denilen Hastalık Var mıdır? Prof. Dr. Hulûsi Behçet Tarafından 15 Şubat 1935'te İstanbul Radyosunda Verilen Konferans (İstanbul: İstanbul Belediyesi Basım Evi, 1935).

²⁷⁴ For a similar assessment for the role of physicians during the Hamidian Era, see Özbek, *Osmanlı İmparatorluğu'nda Sosyal Devlet*, pp. 224-228. Özbek argues that physicians played a crucial role in the making of Abdulhamid's new political discourse in the sphere of social welfare. In this context, he mentions the career of İbrahim Paşa.

argued that “governments can conquer a country with their armies of doctors.”²⁷⁵ He

believed that physicians acted as the agents of the state:

‘Families’ are the ‘cells’ of the social body. Physicians ...develop intimate contacts with families; learn their tendencies, deficiencies, social rules, superstitious beliefs and health problems. Hence, they can, gradually, rehabilitate and eradicate health problems.²⁷⁶

²⁷⁵ “*Bazı hükümetlerin tabip ordularıyla birçok ülkeleri dahilden fethetdiklerini söylersek, mübalağaya atfetmemelidir.*” Selanikli Nami Bey, “Hekimlik, Hekim, Roller, Aile Hekimliği, Esirgeme Hekimliği,” in *Sıhhat Almanığı*, ed. Mazhar Osman (İstanbul: Kader Matbaası, 1933), p. 706.

²⁷⁶ “*İçtimai taazzuvun da ‘hücre’leri, ‘aile’lerdir. İşte tabipler ... ailelerle en samimi bir şekilde temas ederek, onların temayüllerini, noksanlarını, içtimai akidelerini, batıl itikatlarını, sıhhi kusurlarını bir bir görür, tedricen ıslah ederek söküp atar.*” Selanikli Nami Bey. Ibid., p. 707. In this context, the career of Hulusi Behçet, who was a very influential specialist in venerology and dermatology, is interesting: “He was born in İstanbul at the end of the nineteenth century. His father, Ahmet Behçet, was a well-known businessman who was among the friends of Mustafa Kemal Atatürk. Hulusi Behçet lost his mother when he was a child and he was raised by his grandmother.

He got his primary education in Damascus because of his father's business affairs there. He learned French, Latin and German as a native speaker. Behçet pursued his education at Gülhane Military Medical Academy in İstanbul, graduating at the age of 21 in 1910. He subsequently specialized in dermatology and venereal diseases.

During the war of 1914-1918 he served at the Edirne Military Hospital as a specialist in dermatology and venereal diseases and an assistant to the head of the hospital. After the war between 1918-1919, he first went to Budapest and then to Berlin's Charité Hospital to improve his medical knowledge.

Behçet never thought of living in Europe, however, and after his return to Turkey he commenced a private clinic in Cagaloglu. Then in 1923 he was appointed as the head medical doctor at the Hasköy Venereal Diseases Hospital. Six months later, he moved to Guraba Hospital, which is now part of the İstanbul Medical College, as a dermatologist.

In 1923, the year of the establishment of the Turkish Republic, he married Refika Davaz, who was sister of one of his patients. His wife was the daughter of a famous diplomat, which led him to accept many patients from high society of İstanbul.

During the university reform in Turkey, Hulusi Behçet was appointed professor to the clinic of dermatology and syphilis in 1933, receiving the degree of ordinarius in 1939. He held his professorship for 14 years, until 1947. He was the first person in Turkish academic life that received the title of professor.

He had been interested in syphilis since 1922 and he had published many international articles on its diagnosis, treatment, hereditary properties, serology and social aspects. He translated many articles into Turkish to help educate new generations, and he was in the publishing vanguard to improve Turkish medicine. In 1924 he was responsible for the establishment of the first dermato-venerology journal of Turkey called Turkish Archives of Dermatology and Syphilology. In 1939, he was elected as a correspondent member to the German journals *Dermatologische Wochenschrift* (Hamburg) and *Deutsche Medizinische Wochenschrift* (Berlin). He was for several years one of the editors of *Dermatologische Wochenschrift*.

Behçet's most important contribution to medical literature was a monograph published in 1940 called *Klinikte ve Pratikte Frengi Teşhisi ve Benzeri Deri Hastalıkları*, (*Clinical and Practical Syphilis, Diagnosis and Related Dermatoses*). Every page of this book contains an aspect of syphilis and the footnotes provide a wealth of detailed information about the differential diagnosis of other skin diseases. This book, despite its outdated style, still retains its value and spirit in medicine as being the only example in its field.

Behçet was a retiring, shy man who was well regarded by all of his colleagues. He was deeply interested in the arts, particularly literature. Generally he was nervous and suffered from insomnia, colitis

Physicians were also deeply concerned with the effects of syphilis on miscarriage, infant mortality, and childhood impairment, and considered the congenital form equally dangerous as the venereal. Dr. Ali Rıza Bey, dermatologist at the Şişli Children's Hospital in the 1930s, gave a very grave example to underscore the devastating effects of syphilis on future generations.²⁷⁷ E. Efendi, who was 37 year old, "robust and of good posture" had contracted syphilis fourteen years earlier and married a year later. He had undergone a few sessions of treatment, but not enough to eradicate the disease. During their thirteen-year of marriage, his wife had conceived ten babies.²⁷⁸ Two of the pregnancies had resulted in perinatal mortality. The third baby had been born in normal condition, but had died suddenly when nine months old. The next had survived and was eight years old, but showing every sign of congenital syphilis. The fifth pregnancy had resulted again in perinatal mortality. The next three babies had been born alive, but none had survived more than twenty-five days. The mother had suffered a miscarriage when her ninth baby was two months along. The last baby had been born alive and had been undergoing treatment by Dr. Ali Rıza Bey for the last year. The child looked like an old man, with copper colored marks on both his feet and legs. The terrible story of the couple was enough to draw attention to the congenital threat which could devastate generations.

and angina pectoris, but sometimes he was joyful and good-humoured among friends. Among them were the French dermatologist Henri Gougerot (1881-1955), Prof. Dr. Cartoud, and several distinguished Turkish physicians.

He was divorced from his wife seven years before his death from a sudden heart attack on March 8, 1948. Behçet was troubled with ill health throughout his life, with chronic insomnia, spastic colitis and heart trouble. A heavy smoker, he fell ill with angina pectoris and respiratory insufficiency, and died of myocardial infarction in 1948, at the age of only 59." see, <http://www.hulusibehcet.net>.

²⁷⁷ Dr. Ali Rıza Bey, "Velâdî Frengi," in *Sihhat Almanâğı*, ed. Mazhar Osman (İstanbul: Kader Matbaası, 1933).

²⁷⁸ *Ibid.*

Physicians agreed upon a variety of preventive measures. Behçet observed that governments, which applied strict controls and obligatory checks on couples, had managed to decrease the number of congenital syphilitic cases.²⁷⁹ Therefore, he proposed a strict prohibition of marriage for syphilitic patients before they were recovered from the disease.²⁸⁰ Obligatory checks for prospective couples, a proposal made and approved by all physicians, was described in these lines: “In order to preserve the family from venereal dangers, nobody should marry before undergoing a medical check. It is murder for patients suffering from syphilis and gonorrhoea to marry before they recover from the illness.”²⁸¹ With the enactment of the Law on Public Hygiene, prospective couples had to present a document to the register offices showing that they had been free of venereal disease.²⁸²

The proposed control and checks were not limited to couples. Servants, cooks and wet nurses posed potential threats to the health of family members as well. It was recommended that they go through the Wassermann test, which was the surest method to detect syphilis in a person.²⁸³ While warning people against potential syphilitics such as

²⁷⁹ Hulusi Behçet, “Viladî Frengi Tedavisi,” *Deri Hastalıkları ve Frengi Kliniği Arşivi* 3, no. 16 (1936).

²⁸⁰ The belief that babies born from parents afflicted with venereal diseases would be not only bodily but also mentally defected was common among doctors. And they made efforts to prove this through translations from foreign literature. For example, Dr. Mustafa Şakir, who had been educated in France in the field of forensic medicine and psychology, translated texts from French, which claimed that parents afflicted with venereal diseases passed not only their bodily defects but also weak characters to their newly-borns. Dr. Mustafa Şakir (trans.), “Mücrim Çocuklar,” *Gürbüz Türk Çocuğu*, no. 34 (July 1929), Dr. Mustafa şakir (trans.), “Mücrim Çocuklar,” *Gürbüz Türk Çocuğu*, no. 37 (September 1929).

²⁸¹ “Aileyi, zührevî tehlikelerden muhafaza için, hiç kimse kendini doktora muayene ettirmeden evlenmemelidir. Frengi ve belsoğukluklu hastaların şifayapmadan evlenmeleri bir cinayettir.” “Zührevî Tehlikeye Karşı Fransız Millî Korunma Cemiyeti Neşriyatından,” *Deri Hastalıkları ve Frengi Kliniği Arşivi* 1, nos. 3-4 (1934).

²⁸² “Umumî Hıfzısıhha Kanunu,” *Resmî Gazete Tertip* 3, vol. 11 (6 May 1930).

²⁸³ Naciye Emin Hanım, “Sütinelerin, Ahçılarınızın, Hizmetçilerinizin Kanlarını Mutlaka Muayene Ettiriniz,” in *Sihhat Almanacağı*, ed. Mazhar Osman (İstanbul: Kader Matbaası, 1933).

wet nurses or cooks, Naciye Emine Hanım, the chief laboratory assistant at İstanbul Hospital for Mental Disorders, put special emphasis on the hidden character of syphilis in its first stage. She noted that none of the patients who applied to the hospital knew that they had contracted the disease when it was still in its first stage. They had applied to the hospital only after they had been confronted with the visible signs that emerged in the second stage of syphilis. She also warned women against their husbands, who may have contracted the disease but were hiding the truth from their wives. She described patients who received therapy without informing any members of their families, thus exposing them all to great danger.

It is possible to trace the origins of such a mentality to the emergence of the science of eugenics at the end of the nineteenth and the beginning of the twentieth centuries in Europe and the United States. As Porter writes, eugenics “placed the links between demography and degeneration at the center of a new discourse on the quality of population.”²⁸⁴ Eugenics was a statistical, biological and social science as well. The efforts and anxieties of Republican physicians regarding the quality of the population were very much in line with the anxieties of the European eugenicists. Positive eugenics aimed to achieve racial improvement by encouraging the fit to breed. Negative eugenics dealt with the prevention of breeding among the unfit.²⁸⁵ Like their European and American counterparts, Turkish physicians also advocated marriage regulation and control of human reproduction; however they did not go so far as to promote the sequestration of the mentally deficient or sterilization of the unfit. The public focus on

²⁸⁴ Dorothy Porter, *Health, Civilization, and the State: A History of Public Health from Ancient to Modern Times* (London and New York: Routledge, 1999), p. 165.

²⁸⁵ *Ibid.*, p. 169.

human reproduction encouraged by such eugenic concerns about degeneration placed the health and welfare needs of women and children at the center of social policy-making. Eugenics and, related to it, the concept of social hygiene aimed at improving population quality as a broad social project to address the people's health in order to achieve national efficiency, strength, and modernization. Mazhar Osman, the most prominent physician of the Republican regime, stated

The people are the most precious treasure of the Government. The more robust a people, the more powerful the Government. The more working arms it has, the richer the Government ... however, if they are ill, they are a burden to the Government ... The Government wishes to preserve its most precious treasure, to prevent it from becoming idle and useless and to proliferate it. All these are expected from the Ministry of Health.²⁸⁶

The Clinical Picture

Syphilis is the work of the spirochete, *Treponema pallidum*, "a microorganism first isolated in 1905 that invades the bloodstream and other bodily fluids but is swiftly destroyed by sunlight, dryness, cold, soap and water, or simple exposure outside the living host."²⁸⁷ It shows symptoms in three stages. The first stage of syphilis, that is primary syphilis stage, is characterized by the formation of a chancre at the site of infection. Bacteria enter the body through mucous membranes during sexual intercourse and an ulcer appears at the first instance.²⁸⁸ Thanks to genital contact, syphilis finds the

²⁸⁶ "Bir hükümetin en büyük serveti halkıdır. Halkı ne kadar sağlam olursa o hükümet o kadar zengindir. Çalışan kolları ne kadar çok olursa o Hükümet o kadar zengindir... Fakat hasta ise hükümete yüküdür... Hükümet en kıymetli sermayesini muhafaza etmek, onu atıl ve muzır bir hale getirmemek ve çoğaltmak ister. İşte bu himmet sıhhiye vekaletinden bekleniyor." Mazhar Osman, "Nüfus Bereketi Arefesindeyiz: Cumhuriyetin Halkın Sıhhatine Hizmeti II," *Sıhhi Sahifalar* 3, no. 2 (1930), pp. 33-37.

²⁸⁷ Engelstein, "Morality and the Wooden Spoon."

suitable environment for transmission: the necessary warmth and moisture in which it thrives and the friction that propels it through the vulnerable mucous membranes. Within a short time the lymph nodes locally and then all over the body enlarge and harden and this lasts several weeks. The second stage of syphilis, Secondary Syphilis, is characterized by eruptions of the skin and mucous membrane. Symptoms appear about two months after infection and include fever, pains, enlarged lymph nodes and a faint rash, which is usually noticed on the chest. The bacterium is found in enormous numbers in the primary sores and any skin lesions of the secondary stage. Tertiary Syphilis, the third stage of syphilis, characterized by involvement of the internal organs, especially the brain, spinal cord, heart, and liver, may not appear until many months or years after infection and comprises the formation of numerous tumor-like masses throughout the body, in the skin, muscle, bone, brain, spinal cord, resulting in blindness and mental disability.²⁸⁹

Modern scientific texts inform us that syphilis is exclusively a sexually transmitted disease. Although congenital syphilis is mentioned as a rarer form, the “syphilis of the innocent” form, that is, infection via dirty cups, towels, toilets, and razors, seems to be confined to the mythic catalog of the scientific past.

Depending on the evidence that children also contract syphilis, some doctors in Europe defended the idea that nonvenereal form existed as well. However, later on, the disease was essentially and primarily linked to promiscuous sexual comportment. That there were articles regarding children in the Law on Public Hygiene suggests that the

²⁸⁸ Keith H. Whittles and Catherine A. Whittles, *Claremont Medical Dictionary* (London: Claremont Books, 1994).

²⁸⁹ *Ibid.*

same process about the perception of syphilis held true for Turkey as well. According to the law, the parents held responsible for taking their children to hospitals for medical care if they contracted the disease.²⁹⁰

Gonorrhea

Gonorrhea: a contagious, purulent inflammation of the urethra or the vagina, caused by the gonococcus.

The most common venereal disease which is spread primarily by sexual intercourse but may be contracted through contact with infected discharge on clothing, towels etc. The causative agent is the bacterium *Neisseria gonorrhoeae* and it affects the mucous membrane of the vagina, or in the male, the urethra. Symptoms develop approximately one week after infection and include pain on urinating with a discharge of pus. Inflammation of nearby organs may occur (testicle, prostate in men; uterus, Fallopian tubes and ovaries in women) and prolonged inflammation of the urethra may lead to formation of fibrous tissue causing stricture. Joints may be affected and later complications include endocarditis, arthritis and conjunctivitis.

If a baby is born to a woman with the disease, the baby's eyes may become infected, until recently a major cause of blindness (called ophthalmia neonatorum). Treatment is usually very effective through the administration of penicillin, sulphonamides or tetracycline.²⁹¹

While assessing the mid-nineteenth century specialists' perception of gonorrhea in Victorian society, Walkowitz states that they made distinctions about gonorrhea in males and females. Most of them viewed gonorrhea as a "simple local disorder" and thought that it was a much less common affliction in women than in men.²⁹² The tone of the specialists in the Republican era in Turkey was very much different from that of the Victorian specialists due to the pronatal policies of the Republican elite. It was presumed

²⁹⁰ "Zührevi Hastalıkların Parasız Tedavisi," *Cumhuriyet*, 15 November 1930.

²⁹¹ Keith H. Whittles and Catherine A. Whittles, *Claremont Medical Dictionary*.

²⁹² Walkowitz, *Prostitution and Victorian Society: Women, Class, and the State*, p. 52.

to be a “mild disease,” that nevertheless could cause serious damage both for women and newly born babies.²⁹³

In a popular journal, Behçet identified gonorrhoea primarily as a purulent inflammation of the mucous membranes of the urethra.²⁹⁴ His experience with the disease made him believe that purulent inflammation could occur on the eyelids and in the mucous membranes of the nose as well. Sexual contact was seen as the mere etiology of the disease.²⁹⁵ The nature and treatment of the disease were different in males, females, and children. Although sexual contact was presumed to be the only cause of gonorrhoea in males and females, contact with infected discharge on towels, beds and clothing was held responsible for gonorrhoea in children. Warm baths before and after intercourse and the washing of organs touched by the infected discharge were the preventive measures advised. Vaccines, it was argued by physicians, were used mostly during the chronic stage of the disease.²⁹⁶

Gonorrhoea was perceived to be as important as syphilis in public health protection. Mothers had the potential to spread the disease to their children. Moreover, men were the main sources of the disease in the families through excessive and extramarital sexual relations with prostitutes. Hence, it was a catastrophe haunting families. Urban environments were perceived to be the main source of this scourge, as in

²⁹³ Hulûsi Behçet, “Zührevî Hastalıklar Hakkında Halka Mahsus Sıhî Terbiye II,” *Sıhî Sahifalar* 4, no. 1 (1930), pp. 284-288.

²⁹⁴ *Ibid.*, pp. 286-288.

²⁹⁵ *Ibid.* See also Ali Eşref Bey, “İçtimaî Dertlerimizden Biri,” in *Sıhhat Almanâğı*, ed. Mazhar Osman (İstanbul: Kader Matbaası, 1933); Dr. Hayri Ömer Bey, “Belsoğukluğu ve Tedavisi,” in *Sıhhat Almanâğı*, ed. Mazhar Osman (İstanbul: Kader Matbaası, 1933).

²⁹⁶ Dr. İhsan Sami Bey, “Belsoğukluğunda Ne Vakit ve Nasıl Aşı Yapılmalıdır?” in *Sıhhat Almanâğı*, ed. Mazhar Osman (İstanbul: Kader Matbaası, 1933).

the case of syphilis.²⁹⁷ According to Ali Eşref Bey, who was a physician at the Guraba Hospital, the number of females who did not contract the disease in the cities was very low. He also depicted prostitutes and “women of low morals” as the main sources of the disease. In his view, to think that there would be prostitutes who had not contracted the disease was impossible: “All of them, old or young, beautiful or ugly, kind or base, all suffer from gonorrhoea.”²⁹⁸

Detailed description of the disease in males, females, and children, and of its treatment points to the developed medical proficiency of Turkish physicians in the 1930s; however, they were deprived of the technical tools necessary to carry out a nationwide program in the war against venereal disease. They even lacked the necessary detailed statistical data. For example, throughout the research conducted for this study, only very tentative statistics about a district with a population of 533,746, was available. The data included:

Number of people examined between 1926 and 1934	460,100
Their percentage	86.3 %
Number of syphilitic cases detected and treated	27,167
Percentage of syphilitics among examined people	5.9 %

Table I: Tentative statistics as a result of an investigation carried out in a district, regarding syphilis²⁹⁹

The unknown author of the 1936 text admitted in a bitter tone that it was impossible to know the certain number of sufferers of venereal disease in Turkey.³⁰⁰

²⁹⁷ Ali Eşref Bey, “İçtimai Dertlerimizden Biri.”

²⁹⁸ “Hastalığın hakikî nakilleri sergüzeşt peşinde gezen kadınlar ve fahişelerdir. Sergüzeşte atılan bir kadın er geç bu hastalığa yakalanır; ekseriya pek kısa bir zamanda husule gelir. Bu kadınlar yüzde yüz hastalıktır. Sağlam bir fahişe tasavvur etmek bir hayaldir. Bila istisna bunların hepsi, ihtiyarı, genci, güzeli, çirkini, kibarı ve süflisi hastalıktır...Bunlar zahiren tamüsihha bir nikap altında hastalığı rastgeldiklerine aşılurlar.” Ibid., p. 229.

²⁹⁹ “Frengi Tedavisi Hakkında,” *Deri Hastalıkları ve Frengi Kliniği Arşivi* 3, nos. 13-14 (1936).

According to news dated 16 August 1930 in *Cumhuriyet*, 146 of the 150 prostitutes in Elâziz were afflicted with venereal disease.³⁰¹

As for the practices and institutions in war against venereal disease, the existence of the *İstanbul Zühreviye Teşkilatı* (İstanbul Organization of Venereal Disease) in 1933, whose head was Dr. Zihni Bey, is known. Hulusi Behçet was the president of the Society of Skin Disorders and Venereal Disease, which was founded in 1930. The organization consisted of a hospital called the İstanbul Venereal Disease Hospital; clinics in Beyoğlu, Galata, Tophane, Kadıköy; a general dispensary called the İstanbul Dispansery; and a dispensary in Üsküdar. Apart from İstanbul, there were hospitals in Ankara, İzmir, and Samsun, and dispensaries in Ankara, İzmir, and Zonguldak.³⁰² The war against syphilis was carried out in special working areas such as Sivas (*Sivas Frengi Mücadele Mıntıkası- Sivas Zone of War against Syphilis*), Ordu, Çarşamba, Düzce, Zonguldak, İzmir, Ankara, Balıkesir, Giresun and Kastamonu. After 1927, two dermatology and STD hospitals, as well as seven venereal disease hospitals were opened.³⁰³ The tentative statistics provided by Rıdvan Ege show that 2,247,561 people were checked by the committees of combat against syphilis (*frengi savaş kurulları*) between 1926 and 1947, and 86,321 of them turned out to be syphilitic. According to the author, there were 85,000 syphilitic patients in Turkey in 1926. The number increased to

³⁰⁰ Ibid.

³⁰¹ "Elâziz'de Nesil Mahvoluyor!" *Cumhuriyet*, 16 August 1930.

³⁰² Mazhar Osman, *Sıhhat Almanacağı* (İstanbul: Kader Matbaası, 1930).

³⁰³ Rıdvan Ege, *Türkiye'nin Sağlık Hizmetleri ve İsmet Paşa* (Ankara: İnönü Vakfı, 1992).

115,000 in 1930, and to 173,000 in 1935, decreasing to 170,000 again in 1940 and 118,000 in 1950.³⁰⁴

Venereal Disease and the Law

Venereal disease was a global medical issue which took on special significance during both World War I and World War II around the globe. Especially, syphilis was meant by the term venereal disease. The direct relation between syphilis and prostitution came onto the stage as a result of the development of the modern theory of congenital syphilis between 1860 and 1885 in Europe,³⁰⁵ and this development meant a strong basis for the efforts to curtail prostitution and for the hygienic and regulatory discourses on prostitution. Turkey was no exception in this respect. The Regulation Concerning Eradication of the Contagion of Venereal Diseases, which was issued on 18 October 1915, was mentioned before. After that, the Law on War against Syphilis (*Frenği Mücadele Kanunu*) was put into effect in 1921, which included articles obliging couples to undergo medical check before marriage, as well as articles banning those who were afflicted with syphilis from marriage.³⁰⁶ Likewise, in 1925, the Regulation of War Against and Treatment of Venereal Disease (*Emrazı Zühreviye Savaş ve Tedavi Talimatnamesi*) was prepared. With the regulation, state authorities were empowered to carry out the treatment of the citizens suffering from venereal diseases, to found syphilis

³⁰⁴ Ibid., p. 12-3. However, the author does not provide any source.

³⁰⁵ Alain Corbin, "Commercial Sexuality in Nineteenth-Century France: A System of Images and Regulations," in *The Making of the Modern Body: Sexuality and Society in the Nineteenth Century*, ed. Catherine Gallagher and Thomas Laqueur (California: University of California Press, 1987).

³⁰⁶ Ege, *Türkiye'nin Sağlık Hizmetleri ve İsmet Paşa*, p. 10.

examination teams, venereal diseases hospitals, and dermatology and STD dispensaries.³⁰⁷

All of these measures seemed to be inefficient. The symbolic power of syphilis to represent the dangers of sex caused urgent concern about venereal disease, which resulted in a new law during the Great Depression. According to the new law, enforced under the heading of “*Umumî Hıfzısıhha Kanunu*” (The Law on Public Hygiene) on 24 April 1930,³⁰⁸ those who were afflicted with any sexually transmitted disease were to be examined and treated in the state hospitals, official health clinics, or by the state or municipal doctors free of charge, and medical examination and treatment were to be obligatory for everybody.³⁰⁹ Children afflicted with venereal disease were to be taken to the hospital by their parents or by the people who looked after them. The law required that all cases be reported to the medical officers of health who were endowed with the authority to apply forced venereal diseases testing of those “suspected” of having venereal disease and also to demand a health report form these people. The reports presented by all physicians to the Offices of Health and Social Assistance were to include the name and the age of the patient afflicted with the disease, the stage of the disease and medical history of the patient as well, on the condition that this information would be kept confidential. Physicians also were to issue a document showing the health condition of the patient and present this document to the patient.³¹⁰ Hence, the

³⁰⁷ Ibid., p. 10.

³⁰⁸ Sadri Aksoy, *Türkiye'de Sosyal Güvenlik* (Ankara: Türkiye ve Orta Doğu Amme İdaresi Enstitüsü, 1960), p.13.

³⁰⁹ “Zührevi Hastalıkların Parasız Tedavisi.”

³¹⁰ *Umumî Hıfzısıhha Hakkında 1/441 Numaralı Kanun Lâyihaile Kırklareli Meb'usu Dr. Fuat Bey'in Çocukların İçki ve Tütün kullanmalarının men'i hakkında 2/4 Numaralı Kanun Teklifi ve Sıhhat ve İçtimai*

government was utilizing data collection and statistics as methods of regulation and control. Those who were detected as having venereal disease were to undergo obligatory venereal disease treatment, and if necessary would be put into isolation.

The law also tolerated the use of violence against patients who rejected treatment and/or isolation and included the permanent observation of the patients. To this end, physicians were endowed with the authority to follow the cases of patients till they were completely recovered from the disease. If a patient disappeared before treatment was completed, the physician was to report this to the Office of Health and Social Assistance. The Office had the power to investigate whether the patient was receiving treatment somewhere else or by another physician, and if not, to force the patient into treatment. The law was clear-cut and detailed in order to encompass all possible venereal disease cases.

The long established connection between the military and syphilis also affected the shaping of the law. Soldiers were also subjected to obligatory checks. Those who were found to have syphilis were not allowed to be demobilized unless they had recovered from the disease completely, and the Ministry of National Defense had to send reports showing the health conditions of these soldiers to the Ministry of Health and Social Assistance. Article 111 stated that those who spread the venereal disease knowingly should be punished according to Article 459 of the Criminal Law. Related to this, employing wet nurses for syphilitic babies was banned. Likewise, women who earned their livings as wet nurses had to prove with a medical report that they were “clean.”

Muavenet, Dahiliye, Adliye, Hariciye ve İktisat Encümenleri Mazbataları, Session 3, 3 April-28 April 1930.

It is clear that the preparation of the law was very much affected by the prevailing views of the medical authorities, which relentlessly pointed to the potential of contagion between a baby and its wet nurse. Of course, to deduct from these clear-cut articles of the Law that venereal disease was controlled and preempted in every part of society would mean attributing an extremely formative role to the law, which was not true for most of the cases the law dealt with and was evident in discrepancies between what was defined in the law and the existing realities.

The methods and practices defined in the depth of the Law were the products of nineteenth century bacteriology, which “altered the environmental model of disease prevention promoted by the sanitary idea by focusing attention on the social behavior of individuals.”³¹¹ The compulsory notification of infectious diseases, the isolation of sufferers and their families, tracing contacts, laboratory diagnostic testing of patients, and voluntary or compulsory immunization, these were all methods of the new public health developed after the emergence of bacteriology, which expanded the concept of environment to include social action as well.³¹²

Venereal Disease and Prostitution

Prostitution on the public agenda was a social and moral question. The need for the protection of public morality and of the population’s health justified the policies targeting prostitutes. Prostitution was one aspect of the urban pathology obsessed with

³¹¹ Porter, *Health, Civilization, and the State: A History of Public Health from Ancient to Modern Times*, p. 165.

³¹² *Ibid.*

healing and purifying the city. As their numbers grew and density increased in the cities, prostitutes began to take on new significance, leading to new attempts to isolate the immoral and diseased from healthy society. They were perceived as dangerous to city life, public security and order. As an article in *Cumhuriyet* states, “Although a variety of regulations prohibiting prostitution have been prepared and put into effect, beggars and prostitutes who invade the streets after sunset are still disturbing people as well ... In the busiest streets, the situation honorable families have to pass by is both ugly and corrupting and threatens general morals and public health ... The police should see and ban this ugly situation which has become a social and moral threat.”³¹³

Anxieties shaped within the social, moral, and health parameters highlight the hygienic and regulatory discourses on prostitution. The first known legal regulation regarding venereal disease and prostitution in the late Ottoman Empire was issued in 1879.³¹⁴ This regulation provided the authorities with the necessary legal base in order to confine prostitutes to a defined and limited area. Prostitution was restricted to Beyoğlu, which was known as a European-style district. Prostitutes underwent inspection twice a week. Anxieties about prostitution increased with the coming of European, especially Russian, prostitutes to İstanbul. In 1908, employees of restaurants and public baths were also subjected to compulsory health inspections through the enforcement of a municipality law. In 1914 an organization called the *Zabıtai Ahlakıye Şubesi* (Police

³¹³ “*Fuhsun men’i için birçok talimatnameler hazırlanmış ve tatbik sahasına konmuş olmasına rağmen guruptan sonra caddeleri istila eden umumî kadınlar sokak dilencileri kadar halkı bizar etmektedirler [...] Birçok namuslu ailelerin gelip geçmek zorunda kaldıkları bu en işlek yerlerdeki manzara hem çirkindir, hem de ahlak ve sıhhati umumiyyeyi tehdit etmektedir. [...] Zabitanın içtimâî ve ahlakî bir tehlike haline gelen bu çirkef manzarayı görmesi ve menetmesi lazımdır.*” “Sokaklarda Fahişeler,” *Cumhuriyet*, 5 May 1931.

³¹⁴ Paul Mulzer, “İtalya, Atina ve İstanbul’da Fuhsun Tanzimi için Zabıtai Ahlakıye Tarafından Alınan Tedabire Dair Malumat,” *Deri Hastalıkları ve Frengi Kliniği Arşivi* 1, no. 2 (1934).

Office for Public Morals) was organized. The organization conducted regular inspections of brothels, bars, public baths, and prostitutes.

At the end of the First World War, the number of syphilitic cases reached at its peak. In order to combat syphilis, four dispensaries were opened and the war against disease was delegated to the Ministry of Health³¹⁵ With a law that came into force in 1921, professional physicians were endowed with the exclusive authority to treat sufferers of venereal disease. “Women of low morals” were forced to undergo medical examination and compulsory treatment. The 1927 law emphasized the compulsory treatment of sufferers of venereal disease.³¹⁶ However, the authorities were unable to succeed at the actual application of these laws. With a regulation titled “The War against Prostitution,” issued on 12 April 1930, brothels were banned.³¹⁷ The regulation declared that the regulation of prostitution had not yet generated the anticipated social, moral and health results. The individuals who prepared the law were also very concerned to protect the nation-state and Turkish society: “Prostitution in Turkish society is still incidental, isolated and very weak. The strong and healthy nature of Turkish society, Turkish family life and morality, as well as Turkish blood and character have pre-empted and prevented the dissemination and propagation of this evil which has been encouraged in other national areas of life as a contagious evil because ignorant and unaware administrations were unable to control it, and because of ignorance and administrative indolence.”³¹⁸

³¹⁵ Ibid.

³¹⁶ *Umumi Hıfzısıhha Hakkında 1/441 Numaralı Kanun Lâyihaile Kırklareli Meb'usu Dr. Fuat Bey'in Çocukların İçki ve Tütün kullanmalarının men'i hakkında 2/4 Numaralı Kanun Teklifi ve Sıhhat ve İçtimai Muavenet, Dahiliye, Adliye, Hariciye ve İktisat Encümenleri Mazbataları.*

³¹⁷ Toprak, “İstanbul'da Fuhuş ve Zührevî Hastalıklar, 1914-1933.”

Before the regulation, there were 30 brothels in İstanbul.³¹⁹ After the regulation, prostitutes were strictly controlled and separated from society. Most of the brothels were closed down. Developments such as prostitution hunts, arbitrary attacks and raids on ordinary houses, and the disclosure of prostitutes' identities forced the government to step back. For example, an article dated 26 May 1931 in *Cumhuriyet* reports how the regulation was used in the hands of citizens as means to exert their power over the female sex. The news gave the example of an "informer" who reported the names of fifty women to the moral police. The police forced the women to undergo medical examinations. Most of them turned out to be virgins, and most of them were free of any kind of venereal disease.³²⁰ This tragicomic case shows that any kind of report was enough for the police to take regular citizens into custody and to force them to undergo medical checks.

As a result of such arbitrary outcomes, the government had to abandon abolitionism and return to the regulation system with a bill called the "Regulation of the War against Prostitution and Prostitution-Related Diseases," which was enforced in 1933.³²¹ The most important article of the regulation was related to the "rehabilitation" of prostitutes. The task of rehabilitating these "fallen" women was put onto the

³¹⁸ "Türkiye camiasında fuhuş, henüz arızî, mücerrit ve çok zayıftır. Türk cemiyetinin ve Türk aile ahlâk ve hayatının ve Türk kan ve seciyesinin sağlığı ve sağlamlığı, cahil ve gafil idarelerin asırlarca başı boş bıraktığı ve hatta cehalet ve idari gevşeklik yüzünden diğer milli hayat safhalarına sâri fenalıklar gibi teşvik ve teshil bile ettiği bu zararın çoğalma ve yayılmasına set ve engel olmuştur." Quoted in Tülay, *Fuhuş ve Sebepleri*, pp. 27, 28.

³¹⁹ Mulzer, "İtalya, Atina ve İstanbul'da Fuhşun Tanzimi için Zabıtai Ahlakıye Tarafından Alınan Tedabire Dair Malumat," p. 180.

³²⁰ "Ayıptır Ayıp!" *Cumhuriyet*, 26 May 1931.

³²¹ Toprak, "İstanbul'da Fuhuş ve Zührevî Hastalıklar, 1914-1933," p. 40.

shoulders of private or semi-official charity organisations.³²² As of 1934, there were fifteen registered brothels in İstanbul and 275 registered prostitutes, whose number had been 3,000 in 1930. These prostitutes were required to apply to one of the six dispensaries in İstanbul once a week for regular medical controls. The dispensaries also provided compulsory medical checks of unregistered prostitutes when brought in by the police. Although successive regulations decreased the number of registered brothels and prostitutes to a great extent, the density and number of clandestine brothels and prostitutes increased substantially. The police put under surveillance any women who looked “suspicious.” Women or girls who were caught with men at most three times were put under the control of the police. Many of the prostitutes, who were most often forced to undergo medical treatment at Gülhane Hospital or the Haydarpaşa Faculty of Medicine, were also, according to professor Mulzer who visited İstanbul in the first half of the 1930s, drug addicts.³²³

In the 1932-1933 Activity Report of the Society of Skin Disorders and Venereal Disease, Cevat Kerim Bey commented that rate of syphilitic patients had increased among the workers and artisans who had applied to clinics and dispensaries in the last year. He argued that it would be for the good of the country if the articles in the Law on Public Hygiene regarding prostitutes be applied immediately. And he announced that ten people had founded a new “moral and health” society against venereal disease in order to carry out “moral propaganda.”³²⁴ In the scope of this moral propaganda, programs

³²² Tülay, *Fuhuş ve Sebepleri*, p. 29.

³²³ Mulzer, “İtalya, Atina ve İstanbul'da Fuhşun Tanzimi için Zabıta Ahlakıye Tarafından Alınan Tedabire Dair Malumat,” p. 181.

³²⁴ “Cilt ve Zührevî Hastalıklar Cem'iyeti Senelik Kongresi,” *Deri Hastalıkları ve Frengi Kliniği Arşivi* 1, no. 1 (1934).

consisting of films and conferences addressing especially teenagers were of great significance.³²⁵

During the Second World War, concerns and anxieties about prostitution and venereal disease grew worldwide because of the breakdown of social order in almost every country involved in the war. Sangster writes that fears about venereal disease resurfaced during this period.³²⁶ Writing on the American context, Heagarty notes that a military and state campaign against the “patriotute” reflected fears that as women left the home sphere for untraditional jobs and lives, they would become “proletarianized,” and thus promiscuous.³²⁷ Similarly, Timm explores the controversial policies of the Third Reich about prostitution and their contradictory attempts to decry promiscuity, on the one hand, and promote sexual commerce on the other.³²⁸ In the succeeding years, Kessler argued that infant mortality; such diseases as tuberculosis, syphilis, and malaria; bad habits, such as gambling and drinking; and also ignorance were the most serious threats shaking the foundations of society.³²⁹ Thus, it is no surprise that immediately after the war, the United Nations issued a directive stating the abolition of prostitution in all countries and the ban of obscene publications.

In line with the decision, Turkey took the necessary precautions to abolish prostitution. Although the issue of prostitution occupied the public agenda on and off,

³²⁵ “Cild ve Zührevî Hastalıklar Cemiyeti 934-935 Umumî Kongre Halindeki İctima,” *Deri Hastalıkları ve Frengi Kliniği Arşivi* 1, no. 5-6 (1934).

³²⁶ Sangster, *Regulating Girls and Women: Sexuality, Family, and the Law in Ontario 1920-1960*, p. 88.

³²⁷ Marilyn Hegarty, E., “Patriot or Prostitute? Sexual Discourses, Print Media, and American Women during World War II,” *Journal of Women's History* 10, no. 2 (1998).

³²⁸ Annette F. Timm, “Sex with a Purpose: Prostitution, Venereal Disease, and Militarized Masculinity in the Third Reich,” *Journal of the History of Sexuality* (Jan-April, 2002).

³²⁹ Gerhard Kessler, “Aile Siyaseti,” *Aile* (Kış 1948).

the debate was carried to a more serious level when the news that the brothels would be closed down was spread in the city.

The red districts at the end of the 1940s and beginning of the 1950s in İstanbul were the same as those in the 1930s. In 1949, there were approximately sixty-nine brothels in Beyoğlu, Abanoz Street, and in Galata. The number of officially registered prostitutes at the İstanbul Health Office was 340. Apart from these prostitutes, there were 167 women working in several entertainment houses and pubs who also carried documents issued by the Health Offices (*Sağlık Müdürlükleri*) for prostitutes.³³⁰ The number of brothels rose to eighty in 1950, and of registered prostitutes to 400 in İstanbul, not counting those uncontrolled prostitutes who walked in these brothels on an irregular basis, whose number was estimated at around two thousand,³³¹ and the registered brothels and prostitutes were supervised by the police and the Health Offices. In 1948, the Organisation of War against Venereal Disease reported that out of 1,580,000 people examined in the Black Sea region, 66,327 were determined to be afflicted with syphilis.³³²

An article in *Hürriyet* dated 14 May 1949 announced that the brothels throughout the nation would be closed down and prostitution prohibited in line with the decision taken by the Social and Economic Council of the United Nations. The council signed an agreement in New York in order to prohibit the white slave trade and the sale of children and also to prevent the dissemination of obscene publications. In line with the decision, a draft bill related to the agreement of the UN was transferred to the General Council of

³³⁰ "İstanbul'da Ne Kadar Genelev Var?" *Hürriyet*, 1 July 1949.

³³¹ "Genelevler Meselesi," *Cumhuriyet*, 22 August 1950.

³³² Tülay, *Fuhuş ve Sebepleri*, p. 32.

the Turkish Grand National Assembly.³³³ Turkey gave full consent to the agreement and its appendices and, after a few sessions in the Grand National Assembly, the draft bill was ratified and put into effect as a law on 1 March 1950.³³⁴ Depending on the agreement, the way to the criminalization of a specific kind of sexual relation, that is, prostitution, was opening for the Turkish government. The newspaper announced that, after the draft bill was ratified and put into effect as a law, “severe” punishments would be applied to those who “wanted” to earn their lives by “such deeds.” Among the preparations made in order to curb prostitution were plans to build penitentiaries for “fallen, destitute, and morally depraved” women.³³⁵ Foundations such as the Society of Philanthropists, and Women’s Association were called forth to help these “pitiful creatures” and to find employment for those who could be “corrected.” As the first step, the government sent a regulation to all provincial governors to demand the number of registered brothels and prostitutes in every city. In July, the İstanbul Police Office prepared a detailed program for the war against prostitution. The regulatory practices within the framework of the program were kept secret. The police officers assigned to observe the application of the program were kept secret as well. Monitoring and following prostitutes constituted the core of the program. Apart from prostitutes, men and women who aimed at endangering young, innocent, family girls morally were also among the targets of the program.³³⁶

³³³ “Umumî Evler Kapatılacak,” *Hürriyet*, 14 May 1949.

³³⁴ *Meclis Tutanakları*, Convention no: 57, Session no: 1, 1 March 1950.

³³⁵ *Ibid.*

³³⁶ “Fuhuşla Mücadele,” *Hürriyet*, 13 July 1949.

The possible impacts of the decision, if it were applied, began to be discussed among the owners of the brothels and the prostitutes themselves. Most of them defended the regulated existence of prostitution under state supervision and argued that the decision would lead to the mushrooming of “hidden” brothels and prostitution, since, as one prostitute stated, “...men need women. This is a natural law.”³³⁷ The essentialization of the characteristics of both genders constituted the basis of the debates about the future of prostitution. The male’s sexual gratification was deemed to take precedence over that of the female. The view that male sexual urges were basically uncontrollable constituted the core of the debates. This kind of sexual activity was seen as men’s need because of their “nature.” Like everything deemed dirty, however, necessary for the survival of the social body, prostitution should be tolerated. A prostitute stated that their job enabled women with “honor” to walk the streets freely without any disturbance and argued that the application of the decision would disturb not only prostitutes but women with “honor” as well.³³⁸ The concentration of prostitutes and the brothels in a confined area kept them away from the daily life of the city; hence breach of the peace or disturbance of the citizens was preempted.

Upon the reactions from every party interested in the issue, the government had to announce that the decision would be put into effect only after the necessary

³³⁷ “Kim ne derse desin, ne türlü tedbir alırsa alınsın erkelerin bize ihtiyaçları var. Bu bir tabiat kanunudur. Böyle bir karar vermek tabiata mugayir hareket etmek olur.” “Fuhşun Kalkması İhtimali Üzerine ‘İlgililer’in Fikri,” *Hürriyet*, 2 July 1949.

³³⁸ In the context of the 19th century United States, Baldwin points out a similar perspective of prostitutes’ public presence. As he emphasizes “their availability channeled male sexuality away from respectable females, and their presence in the unruly slum contrasted with the quiet decorum of the residential neighborhood.” Peter Baldwin, “Antiprostitution Reform and the Use of Public Space in Hartford, Connecticut, 1878-1914.,” *Journal of Urban History* 23, no. 6 (1997).

preparatory precautions had been taken.³³⁹ Among the so-called preparatory precautions, finding employment for the prostitutes and the establishment of a welfare foundation for them were perceived to be urgent.

Despite the opposing and sometimes contradictory views about the existence of prostitution, it was argued that it was not appropriate for a state to recognize prostitution or to issue documents for prostitutes. State-licensed brothels and red light districts are politically and ethically unbearable. Apart from this, it was argued that no country with state-controlled brothels could claim to be “modern.” The decision was justified in the public propaganda by the use of examples of the distressing and pitiful social and economic conditions of prostitutes. It was said that the decision was taken “for their own good.”³⁴⁰ Most of the women owed great sums of money to the owner of the brothels in which they worked. For example, one prostitute owed ten thousand Turkish liras to her “boss.”³⁴¹ Prostitutes earned only 100 or 150 Turkish liras a month while their “bosses” earned 900 Turkish liras.³⁴²

After the ratification of the law, an article in *Cumhuriyet*, dated 22 August 1950, announced that the brothels in İstanbul would be closed down and prostitution would be prohibited in line with the decision taken at the International Health Congress. The debate focused on the question of whether the closure of the brothels and the prohibition of prostitution would bring any benefit to this deep-rooted social problem.

³³⁹ “Fuhuş Yasağına Dair Verilecek Kararın Uyandırdığı Akisler,” *Hürriyet*, 4 July 1949.

³⁴⁰ For a similar discussion, see Stephanie Wahab, ““For Their Own Good?” Sex Work, Social Control and Social Workers, A Historical Perspective,” *Journal of Sociology and Social Welfare* 29, no. 4 (2002).

³⁴¹ *Ibid.*

³⁴² “Fuhuşla Mücadele.”

In the public debate, the collection and segregation function of the brothels received great emphasis. The prohibition of prostitution would mean that the prostitutes would take their business underground and this would threaten the order of society and bring about dangers to the health of the citizens through venereal disease as well. The war against venereal disease and the discourses based on the vices of venereal disease constituted the core part of the policies directed towards prostitution and prostitutes. The prevalence of venereal disease as a problem was frequently linked to prostitution and moral disorder. The symbolic power of venereal disease was usually employed in order to point at the dangers of sex in the public discourse.³⁴³ Emphasizing this point, Turkey applied to the Congress; however, it was denied and it was suggested that these “pitiful” women be put into special workhouses and made to work there in order to support themselves.³⁴⁴ As the decision made by the Congress suggests, the motivation behind being prostitute was, according to the authorities, the need to earn one’s living, and they believed naively that if these women could find other ways to support themselves, the problem of prostitution would be eradicated permanently. This decision implicitly depended on the belief that prostitutes were weak creatures whose fate had ended in prostitution because they had had no other option from which to choose.

After this article appeared in the newspapers, writers began speak their opinions extensively. In two articles written by Asım Arar in *Cumhuriyet*, the prostitution was brought forth as a problem regarding public morals and public health. First, the argument that prostitution could be regarded as a private matter occurring between a

³⁴³ For an assesment of venereal disease and its so-called relation with prostitution, see Laura Engelstein, *The Keys to Happiness: Sex and the Search for Modernity in Fin-de-Siècle Russia* (Ithaca: Cornell University Press, 1992).

³⁴⁴ “Genelevler Meselesi.”

woman who decided to sell her own flesh for several reasons and a man who was ready to have sexual intercourse with this woman and no state control was relevant to such a relation was repeated. However, the author continued that prostitution was a social phenomenon which should be judged according to the public morality and health. It was both dangerous to the public morality and caused contagious diseases such as syphilis and gonorrhea.³⁴⁵

Almost twenty years after the enforcement of The Law on Public Hygiene, venereal disease remained an important concern; controlling infected people, especially prostitutes, with forced treatment and segregation was rationalized as a public health necessity to protect current citizens and future progeny.³⁴⁶ This time, the struggle against venereal disease was integrated into the worldwide propaganda, as in the case of the treatment of tuberculosis. In line with the integration of Turkey to the outer world after World War II, with the special impact of the Marshall Plan and with the foundation of several international associations such as the United Nations, the social welfare programs of Turkey were very much influenced by the international agenda. In a meeting of venereal disease specialists in Ankara, in May 1950, it was decided that from then on penicillin would be used in treatment of venereal disease and several pamphlets were requested from The United Nations. Furthermore, a new regulation was prepared in the war against venereal disease by the Ministry of Health and Social Assistance.³⁴⁷

Prostitution was seen as a symptom of other ills, not a signifier in its own right. In line with the tendencies worldwide, the perils of venereal disease were used in anti-

³⁴⁵ Asım Arar, "Genelevlerin Kapatılması ve Fuhşun İlgası Doğru mudur?" *Cumhuriyet*, 25 August 1950.

³⁴⁶ For a similar theme in the case of Canada, see Sangster, *Regulating Girls and Women: Sexuality, Family, and the Law in Ontario 1920-1960*, p. 89.

³⁴⁷ "Frengi Doktorlarının Toplantısı," *Cumhuriyet*, 6 May 1950.

prostitution campaigns. In rejecting the possible positive impacts of the closure of brothels and the prohibition of prostitution, Arar also put special emphasis on the dangers of venereal disease and its relation to prostitution. Venereal disease, first of all, stemmed from and was spread through prostitution.³⁴⁸ He continues the article with the polarized views regarding the existence of prostitution and brothels which dominated the European literature. There were those advocating the total closure of brothels, prohibition of prostitution, and incarceration of prostitutes while others defended the controlled and supervised existence of both. For them, prostitution was a deep-rooted, centuries old institution which could not be eradicated fully in any case. Those who were in favor of prohibition, that is abolitionists, argued that surveillance, supervision and control meant intervention in one's rights and freedoms because it included forced testing and treatment. Furthermore, they emphasized that only a small number of prostitutes could be registered and placed under control while the others "[did] their business" underground without confronting any supervision or control. Also so-called controlled prostitution fostered an illusion, a sense of safety, in the minds of the men frequenting the brothels, since they believed that prostitutes were supervised and went through medical checks regularly. Therefore, they denied the idea that prostitution was inevitable, and thus aimed to eliminate it completely.

Those in favor of the supervision of prostitution believed that prostitution had always existed and would exist any time and anywhere. Sexual relations were a matter

³⁴⁸ This was also the view underlying the articles regarding venereal disease in the Law on Public Hygiene: "The role of prostitution in the contamination of venereal disease is of great importance." See, TBMM Zabıt Ceridesi, *Umumî Hıfzısıhha Hakkında 1/441 Numaralı Kanun Layihası ile Kırklareli Meb'usu Dr. Fuat Bey'in, Çocukların İçki ve Tütün Kullanmalarının Men'i Hakkında 2/4 Numaralı Kanun Teklifi ve Sıhhat ve İctimaî Muavenet, Dahiliye, Adliye, Hariciye ve İktisat Encümenleri Mazbataları*, vol. 18, term 3, session 3, 17 April 1930.

of demand and since demand existed, supply would continue to exist. A feeble attempt was made to argue that brothels could better protect the population from venereal disease since prostitution was inevitable and brothel employees could be forced to undergo regular medical examinations. Furthermore, the efforts paid to prohibit prostitution aimed at defining prostitution as a crime committed against society, criminalize this kind of sexuality and make prostitutes subject to arrest and detention and punish them severely in order to make them stop working. As one of the advocates of the supervision of prostitution, Arar emphasized some prerequisites for the prohibition of prostitution, which did not exist in the social and economic context of Turkey. First of all, women who sold their bodies should pay due care and money to protect both themselves and their customers from venereal disease. Upon contracting a venereal disease, they should be treated free of charge, safely and privately, and there should be social institutes to provide shelter and employment to these “broken” women when they quit working as prostitutes. He suggested that no government in the world hesitated to intervene in people’s private lives and personal rights when venereal disease was in question. It was legal and justified to apply forced venereal disease testing and treatment to “certain women.” Apart from detection and treatment, it was of great significance to gather and control prostitutes under the same roof as well.

In another article in *Cumhuriyet*, dated 1 September 1950, Arar strongly advocated the control of prostitution and enumerated the principles of efficient control and surveillance. First of all, prostitutes had to be registered and recorded. Second, the quality and conditions of brothels and rules binding them had to be defined strictly. Third, all prostitutes had to submit to medical checks regularly. Fourth, secret prostitution had to be surveilled and controlled. And last, women with venereal disease

had to be treated and *isolated*.³⁴⁹ The battle against venereal disease, according to the experts, was a battle against unhealthy, unethical sexual practices. Anyway, the state so far was making efforts to control prostitution within the framework of legal rules. In a chapter of The Law on Public Hygiene, with the title of “Rules Regarding the Prostitutes,” Articles 128 to 132 were all about the precautions that should be taken for the “healthy” existence of prostitution. According to Article 128, the Ministries of Health and Aid and Internal Affairs had prepared the rules and regulations binding prostitutes and brothels. The law banned those prostitutes afflicted with venereal disease and any other contagious disease from working. If necessary, they would be forced to obligatory treatment and isolation. Since prostitution was seen as a symbol of danger, disease and contagion, regulations were prepared in order to combat the perils of prostitution regarding public health. For example, a regulation with the title War against Prostitution and Diseases Contaminated by Prostitution³⁵⁰ and The Regulation of War against Syphilis³⁵¹ were prepared in order to combat venereal disease.

Causes for Prostitution: “Females Inclined to Prostitution!”³⁵²

Although most of the commentators put special emphasis on social conditions such as poverty while enumerating the causes of prostitution, some preferred to divide the so-called causes into two areas. The first and most important cause was the physical and mental properties of a person. Familial and social conditions were of secondary

³⁴⁹ Asım Arar, “Genelevleri Kapatmak Ne Gibi Neticeler Doğurur?” *Cumhuriyet*, 1 September 1950.

³⁵⁰ *Ibid.*

³⁵¹ “Frengi Doktorlarının Toplantısı.”

³⁵² M. Şükrü Tülay, *Fuhuş ve Sebepleri* (Adana: Doğan Basımevi, 1960).

importance.³⁵³ These commentators attributed an unchanging and innate character to human nature. Sex was the most significant part of this unchanging human character. According to Tülay, female sex was passive when compared to the active male sex. The determining factor, it was believed, in the character of a person, especially a woman, was hormones. In the end, they determined what kind of a person a woman would be, such as unattractive, athletic, romantic, seductive, excited, or maternal.³⁵⁴ Tülay writes that women were, owing to their physical and spiritual characteristics, more inclined to sexual anomalies. For example, nymphomania, which was a prevalent disease among hysterics, mutes, maniacs, and epileptics, was a common disease among females. The author emphasizes that other anomalies such as masturbation and narcissism were also all prevalent only among females. In the end, he declared all prostitutes to be pitiful creatures who did not have the power to determine their own fates and were victims of primitive sexual impulses and weak personalities.³⁵⁵ For Tülay, prostitution was in the end a matter of individual pathology, although he accepted the influence of education and upbringing as side factors.

Among the physiological and psychological features which paved the way to prostitution Tülay listed feeble-mindedness, an inferiority complex, a familial inferiority complex, and genetics. Depending on several studies, he believed that feeble-mindedness was the principle cause for prostitution. Tülay was not alone in the belief.

³⁵³ Ibid., p. 13.

³⁵⁴ “Kadın vücudundaki değişik nispetlerde bulunan hormonlar, kadının huy ve tabiatı üzerinde mühim tesirler gösterir. Kadındaki hormon sistemi erkeğinkinden daha çok karışıktır. Bu hormonların ifrazatı ve kandaki eksikliği veya fazlalığı bakımından kadınları; atletik, hasta görünüşlü, romantik, baştan çıkarıcı, heyecanlı, ana tipi, minyon tip olarak kısımlara ayırmak mümkündür.” Ibid., p.10.

³⁵⁵ “İzahımız, fahişelerin çoğunluğu karar veremeyen, altbeninde pek çok itmeleri, (içine attığı, dışını sıktığı pek çok olaylar) kompleksleri olan, kendisini doymayan bu vahşi ve iptidai kuvvetin eline bırakmış, zayıf iradeli, zavallı olduklarını ifade etmektedir.” Ibid., p. 13.

Feeble- mindedness was perceived as a central cause of both promiscuity and prostitution around the globe, especially in the interwar period. Depending on dubious measures of intelligence, most physicians, especially those with eugenicist tendencies, claimed that the majority of prostitutes were below average intelligence. Most physician saw “low mental capacity” as a central cause of immorality. Although these tendencies weakened somewhat after 1945, there were still some physicians emphasizing low intelligence as a principle cause for immorality. Very much in line with his European colleagues, Tülay asserted that the statistics showed that eighty percent of all prostitutes had low mental capacity.

The second cause for prostitution was cited as “social inferiority complex” among women who became prostitutes. Tülay believed these women were willing to undergo considerable pain in order to achieve higher social status. He said they felt bad when they compared themselves to “beautiful and robust” women. Young women also became prostitutes out of feeling socially inferior because, for example, their father was ill or disabled or their relatives did not protect them.³⁵⁶ According to the common belief, genetics also played a role. Daughters supposedly inherited psychological anomalies from their mothers. “Apart from material, economic and social conditions, a girl should have some certain individual, spiritual and personal characteristics.”³⁵⁷

Among social and economic causes, Tülay enumerated several such as the death of parents, poverty, rape, “wicked” friends, the desire to lead a better life, laziness, unemployment, alcoholism, gambling, begging, vagrancy, and loitering. Furthermore, it

³⁵⁶ Ibid., p. 16.

³⁵⁷ “Şunu işaret etmek isteriz ki maddî, iktisadî ve içtimâî şartların dışında bir kızın fahişe olabilmesi için bazı ferdî, ruhî ve karaktere müteallik istidatlara sahip olması lazımdır.” Ibid., p. 18.

was claimed that most of the prostitutes were from the lower classes or from poor families. Tülay held that immorality and lack of hygiene among lower-class people, the concentration of children, boys and girls together, and sometimes the parents, in the same room had a great influence on young girls, who had to witness the sexual intercourse of the father and the mother. Their neighbors and parents set bad examples for them; they were brought up in “immoral” environments, and furthermore had the opportunity to spend time in places of debauchery. This view, which was also prevalent in Europe in the nineteenth century, meant the exclusion of certain strata of society and paved the way for the organization of modern houses and the privatization of familial and conjugal life, which would provide space suitable for parents to monitor their children appropriately.³⁵⁸

Tülay’s book is an important contribution to the social history of Turkey, especially in its relation to prostitution. Apart from the prejudiced ideas mentioned above, the book presents important statistical data. During his research, he conducted interviews with several prostitutes, whose names and addresses were taken from registries at venereal disease treatment centers. Seventy-three percent of the 113 prostitutes interviewed had been adopted or orphaned young girls. Apart from these 113 women, Tülay interviewed another 402 women. 300 of them described the reasons for their fate as follows:

Rape, or false accusation; being destitute, abuse of step-father or step-mother, suspicious character of their husband, incompatibility, the desire to be satisfied in life

³⁵⁸ For details of this process especially in France, see Jacques Donzelot, *The Policing of Families* (Baltimore & London: The Johns Hopkins University Press, 1997).

(desire for luxury, joy and entertainment), unemployment, the influence of “wicked” friends, the desire for adventure and, nymphomania (12 %).

It is interesting that he gave percentages only for the last reason, nymphomania. He also decided that almost more than half of the prostitutes he interviewed were feeble-minded, intellectually tired, and inclined to lie. Fifty-seven percent of them were illiterate, twenty-nine percent could read and write at a very low level, eleven percent were primary school graduates, and three percent had attended secondary school. Ninety-four percent of them drank alcohol and smoked cigarettes. Seventy-nine percent had been involved in crimes such as drunkenness, assault, pickpocketing, fraud, and fighting. Most of them were immigrants to the cities, and of working-class origin. Some of them were from “degenerated” urban families.

A Voice from the Archives: “How Can Syphilitic Ayşe Win Her Life?”³⁵⁹

It is almost a very natural part of our daily lives to read, in newspapers, the stories of young girls and women dragged into the dark streets as the result of rape by a relative, poverty, or as a result of trust out of helplessness in a specific *teyze* (aunt). These young women find shelter in houses founded by charitable people if they are lucky. The state still does not provide systematic assistance or shelter for these people.

The story of Gerzeli Ayşe, from the year 1925, is almost no different from those of the young women of 2004 in Turkey. She was just a case number in the archives of

³⁵⁹ “*Frangili Ayşe hayatını nasıl kazanacak?*” Sabiha Zekeriya Sertel, “Gerzeli Ayşe,” *Resimli Ay* (May 1929), p. 39.

the police: 119. Ayşe from Gerze, the daughter of Hasan, the farmer.³⁶⁰ In June 1925, Ayşe was arrested by the police in Beyoğlu for accosting men in the streets near Tünel. Her father and mother had died when she was only five years old and living in Gerze. The neighbours had provided shelter and food for Ayşe, since she had had no relatives to look after her. Although she was very little, she had done domestic work to pay for the food and shelter provided by the neighbours. In the end, Pembe Hanım from Gerze brought Ayşe to İstanbul, convincing her that she would be adopted by a proper family. However, Ayşe worked as a maid in İstanbul and was beaten frequently by the owners of the houses in which she worked. When she was thirteen, she was employed in the *konak* (mansion) of Captain Hıfzı Bey in Cihangir. A certain Muharrem, a conscript in the mansion of Hıfzı Bey, married with five children in the village, seduced Ayşe, falsely saying that he would marry her. When Hıfzı Bey became aware of the situation, he fired Ayşe from the *konak*, telling her: “This house is not a brothel!”³⁶¹ Ayşe then sought shelter with another maid in the neighbourhood, Necmiye, who introduced Ayşe to Arap Emine, who in the end dragged the girl into prostitution.

After the arrest of Ayşe, the police closed down Arap Emine’s house since it was found that she employed several 13 or 14-year old girls as prostitutes. The minors were also brought to the police station. However, the police could not find any systematic solution to these problems. Society and the state lacked places to provide shelter for these girls. As a parochial solution, Ayşe was given to the merchant Sabri Efendi as an adopted child, *evlatlık*, by the Police Emin Efendi on 4 June 1925. The police records

³⁶⁰ Ibid., p. 12.

³⁶¹ “*Haydi kazım açıl, burası umumhane değil.*” Ibid., p. 12.

clearly show how the way was paved for Ayşe to receive the necessary document to live her life as a prostitute:

4 September 1925: Ayşe was again brought to the police station. She had stolen a linen bed sheet and 5 liras from merchant Sabri Efendi's house. Police officer Kerim Efendi was charged with the duty of following her. Kerim Efendi found Ayşe with other men in Sultanahmet in an "immoral position" and brought her to the police station.

6 February 1926: Ayşe was brought to the police station again by police officer Ömer Efendi. She had been caught carrying out her work as a prostitute in fire grounds (*yangın yerleri*). However, since it was not possible to transfer her to the court, she was kept at the police station. Since the police had not accomplish her rehabilitation by placing her in the houses of charitable people, they decided to find her employment.

9 September 1926: Ayşe was released from the station, since the police could not find her a job. She was informed that she would be put in prison if she was arrested again.

15 March 1927: Ayşe was again brought to the police station. She had been involved in a fight in Afitap Gazinosu (night club) in Sirkeci, where she worked as a waitress.

20 September 1927: After five days in jail, Ayşe was released.

20 December 1927: Ayşe was arrested in a closed brothel in Beyoğlu, with four other women who were afflicted with venereal disease. They were sent to The Hospital for Venereal Disease (*Emrazi Zühreviye Hastanesi*).

1 March 1928: Ayşe was released from the hospital. The chief doctor was informed that Ayşe had been given a document which indicated that she had to be treated regularly.

14 May 1928: The director of the Syphilis Dispensary of the Ministry of Health (*Sihhiye Frengi Dispanseri*) informed the police that Ayşe had not visited the dispensary

for regular check-ups and injection. Ömer Efendi was charged with the duty of following her.

In 1927, Ayşe was brought to the police station eight times for crimes such as robbery, prostitution and escaping from regular check-ups and injection. In 1928, she was at the police station sixteen times for several different crimes. In 1929, the number rose to twenty-nine. In 1930, a document registering her as a prostitute was issued since she had reached the official age of an adult, eighteen.

Ayşe's case clearly shows the boundaries of the state policies regarding prostitutes, especially child prostitutes. The solutions were far from systematic or organized, but remained tenuous and parochial. The prominent feminist and socialist of the period, Sabiha Zekeriya Sertel asked in a rebellious voice: "What relationship exists between the police and Ayşe?"³⁶² According to her, there were several social wrongs in the case of Ayşe. First, she asked how a specific Pembe Hanım could have had a say in the fate of Ayşe. She insisted that the state and society should have provided shelter for Ayşe. Furthermore, she saw a problem in the intervention of the police in the issue: "the rehabilitation of Ayşe is not the business of the police, but the business of a director of a reformatory, or a physiatrist or a sociologist."³⁶³ She emphasized the need for a court which would not take revenge on the individual in the name of the society, but would rehabilitate the individual for the well being of the society. The fate of Gerzeli Ayşe was the result of social wrong doings, not herself.

³⁶² "Ayşe ile polis arasında ne münasebet var?" Ibid., p. 14.

³⁶³ "Ayşe 'yi ıslah polisin işi değil, bir ıslahhane müdürünün, bir ruhiyat ve içtimaiyat doktorunun işidir." Ibid., p. 39.

Although most of the professionals and writers of the period merely complained about the public presence of prostitutes, beggars, and loiterers and emphasized their uncontrollable nature, Sabiha Zekeriya, pointing to the other side of the coin, posed a big question in a bitter voice: Why did the state not provide Ayşe and children like her with the necessary shelter and food? When she thought about the final end of Ayşe, she had a bitter taste in her mouth:

What a pity...What a pity...Ayşe got rid of the police; however, Ayşe was not saved. The register of the child Ayşe in the police records was closed; however, the register of Ayşe the prostitute was opened. Society issued an official document for Ayşe in order for her to sell her womanhood. Society, which remained silent while Ayşe was being exploited as a child, beaten, thrown into the streets, and was falling further day by day, carried out its last duty by issuing this document, didn't it?³⁶⁴

This chapter dealt with an important branch of public health policies, namely venereal disease and prostitution. While highlighting the perception of various meanings attached to venereal disease and prostitution, the state policies, the relationship and tensions between the state and society, and the physicians' role in propagating the state policies with an emphasis on worldwide issues of pronatalism, eugenics and social hygiene were examined. In the case of health policies, the governing elites developed a symbiotic relation with the physicians. In order to legitimize its power in the eyes of the population, the government propagated its policies regarding the organization of the

³⁶⁴ “Ne yazık... Ne yazık... Polisten kurtuldu; fakat Ayşe kurtulmadı. Polisteki Ayşe çocuğun sicili kapandı, fakat fahişe Ayşe'nin sicili açıldı... Cemiyet Ayşe'ye resmen kadınlığını satmak için vesika verdi. Zaten daha çocukken onu istismar ederlerken, döverlerken, sokağa atarlarken, kademe kademe düşerken ona sessiz kalan cemiyet işte bu vesikayı vermekle son vazifesini de yaptı değil mi?” Ibid., p. 39.

social through the scientific and objective language of the physicians. In turn, physicians became able to create a political and a social role for themselves.

The chapter locates the issue of prostitution and so-called prostitution related diseases in Turkish history and claim that during the early Republican era, prostitution, so-called prostitution-related diseases, namely venereal diseases and their relation with social organization, familial life and especially the “future of the nation” were frequently discussed issues, which led to occasional, unsystematic regulatory practices and precautions. A section of a broader “national health policy”, venereal disease among others such as tuberculosis, trachoma, and malaria, was assessed by many doctors and public officials as a serious health hazard for the Turkish population. Apart from curative techniques, both doctors and the public authorities were convinced of the need for preventive measures, in particular, for the sanitary supervision of common prostitutes. The medical rationale behind a regulation system was the belief that syphilis was spread through promiscuous sexual contact with diseased prostitutes.

Treatment of venereal disease was not a simply a medical or clinical question, but rather was governed by the dominant sexual and social ideology as well. Most of the critiques provided by physicians, social workers, and commentators perceived prostitution as detrimental to social harmony, familial life, individual and social health and hygiene, and social morality as well.

In the case of health policies, the governing elites developed a symbiotic relation with the physicians. In order to legitimize its power in the eyes of the population, the government propagated its policies regarding the organization of the social through the scientific and objective language of physicians. In turn, physicians could take on political and social roles. For example, for the physicians, syphilis was not a simple

health question, but a great social peril which required medical, social and moral attention as well. Most argued that prostitutes disseminated venereal disease on an alarming scale. It was believed that venereal disease was related directly to prostitution and promiscuous sexual behaviour. Therefore, it was a demographic or social problem, rather than a matter of individual pathology, whether physical or moral. Actually, a distinction must be made when evaluating the texts on the avenues of syphilitic contagion as stated in the journals. In the purely medical journals, which were designed for intraprofessional circulation; yet at the same time addressed policy makers with emphasis on the social aspects of illnesses, the main avenue for contagion was always promiscuous, especially extramarital sexual relations, most probably with prostitutes. However, in the popular health journals, designed to educate the “illiterate people”, the endemic form of syphilis was most often mentioned, which included other ways of contagion such as razors, towels, glasses or simply a hg. The aim in this was to overcome the anxieties of people who viewed syphilis as something “shameful”, because it was related with sexuality, especially with excessive sexual relations.

Physicians agreed upon a variety of preventive measures. For example, Hulusi Behçet, the prominent syphilologist and dermatologist, observed that governments, which applied strict controls and obligatory checks on couples, had managed to decrease the number of congenital syphilitic cases. The proposed control and checks were not limited to couples. Servants, cooks and wet nurses posed a potential threat to the health of family members as well. It was recommended that they go through the Wassermann test, which was the surest method to detect syphilis in a person. Such preventive measures were, no doubt, in relation with the common world wide tendency of eugenics between the two world wars.

Prostitution, which was first and foremost perceived to be the direct cause of venereal disease, reveals itself as a social and moral question on the public agenda. The need for the protection of public morality and of the population's health justified the policies targeted against prostitutes. Prostitution was one aspect of the urban pathology obsessed with healing and purifying the city. As their numbers grew and density increased in the cities, prostitutes began to take on new significance, leading to new attempts to isolate the immoral and diseased from healthy society. They were perceived as dangerous to city life, public security and order.



CHAPTER IV

CONCLUSION

This thesis has examined some of the lines of the understanding of women and children as part of “the social” as sites of governmental aspirations and political contestation in early Republican Turkey. It has investigated the historical peculiarities of elite ambitions and efforts to know and manage the population in the context of nation-state building and rising aspirations to modernity. It suggests that the process whereby the Republican elites carved out a modernity project took specific forms, where nationalist juridical discourses and social sciences worked in cooperation to subordinate the bodies of women and children (as well as men, for example, in the case of sports and physical education, which are beyond the scope of this thesis) to the needs of the nation and collective society. This modernity project did not include a one-way relation whereby only social control mechanisms worked. In contrast, these elite aspirations of social control and mechanisms of legitimatization went parallel with the process in which the individual’s capacity and capabilities were developed and reinforced.

Moreover, this study embodies potentialities of a new periodization of Republican history, one which is informed by the social conditions and different modes of governing deployed to manage these new conditions. This new periodization allows the differentiation between different eras which were shaped around various agents, institutions and policies. Accordingly, the period between the 1920s and the post-World

War II era witnessed the rise of the elite's concerns, whereby Republican ideals and solidarist aspirations in the way of nation-state building and new social techniques in the way of governing the population were intertwined. In this period, concerns of social control and moral regulation were clearly reflected in the discourses and practices regarding such issues as the protection, rehabilitation and education of children, the establishment and protection of family values, the establishment of new rules and methods in public hygiene and the regulation of public spaces. In line with the solidarist inclinations of the Republican elite, class distinctions were blurred in discussions of social welfare. Discourses and practices were affected extensively by the worldwide tendencies of eugenics. The Republican elite was largely impressed with positive eugenics when they promoted reproduction utilizing a variety of means, such as assistance, tax incentives and birth bonuses, and did not have an inclination towards negative eugenics, which applied antinatalism and sterilization to the physically and racially "unfit."

The period after the World War II witnessed a transformation regarding the state's intervention in the social sphere, whereby the solidarist tone gave way to a new language of politics, the terms of which were shaped by concepts such as working life, unions, insurance, labor and social security.³⁶⁵ This phase saw the restructuring of the world system, whereby the United States and the USSR emerged as the two rival powers of the world. Turkey became an ardent supporter of the USA, which became its ally, and this paved the way for Turkey's opening to the international system and integration into the capitalist world system. This period also witnessed the problems arisen from

³⁶⁵ For a similar periodization of Turkish history informed by social welfare practices, see Özbek, "Osmanlı'dan Günümüze Türkiye'de Sosyal Devlet."

industrialization, immigration and large-scale urbanization in Turkey. Hence, the social sphere was reshaped in line with a multiplicity of aspirations and stimulations and this new kind of the social sphere necessitated the institutionalization of a profession, social work.³⁶⁶

The scope of this thesis included the first phase in detail and touched lightly upon the developments at the very beginning of the second phase, in order to demonstrate the transformation. The Republican elite attempted to broaden the field whereby they exercised the state's power and maintained their hold on the population through policies regarding the health, welfare and education of individuals. The expansion of the social sphere as a field of state intervention brought together the concepts of social discipline and moral regulation. These concepts required that new moral norms be established and the related legal regulations be prepared, a condition which was crystallized in early Republican Turkey in successive laws and practices regarding the regulation of prostitution and the sphere of public hygiene. On the one hand, this process, by which the social sphere expanded provided the state with a base to encompass all of society, and on the other endowed individuals, especially women in the family, with the authority to establish these new morals,³⁶⁷ and was reflected in the Republican ideals and discourses on proper womanhood and motherhood.

In the case of women, disease and prostitution, the Republican elite legitimated their discourses and practices in a context whereby the degeneration of the nation, social morals as well as the disintegration of the public order were emphasized. Legal

³⁶⁶ For a critical assessment of the institutionalization of social work in Turkey, see Göbelez, "The History of Social Services in Republican Turkey: Social Change, Professionalism and Politics."

³⁶⁷ Donzelot, *The Policing of Families*.

discourses, and government policy all spoke of the need for state intervention in and public control over prostitution since it was seen as the primary cause of the spread of venereal disease, which marked the degeneration and poverty of the nation in an age in which the quality and quantity of the population had become a critical resource necessary for national defense and economic production. Since women were seen as the sole actors involved in prostitution, the regulation of prostitution was closely linked to the regulation of women considered promiscuous, who deviated from the dominant familial norms of sexual purity and marital fidelity. The rising levels of venereal disease in particular resulted in a new standard of chastity and cleanliness. To inculcate the desired gender roles in women, the state power depended on legal regulations and the custodians of scientific authority, namely physicians, who perceived themselves to be a progressive vanguard with transformative roles and who had immense faith in the power of the medical and social sciences. They set out to “educate” the “ignorant” masses to the values of chastity as the best prophylaxis against venereal disease.

As in the case of prostitution and disease, the Republican elite’s ideals in the case of maternal and child welfare as well as public hygiene were shaped in line with their nationalist aspirations and eugenics. A sharp decrease in the quantity and quality of population, and high infant and early childhood mortality rates which stemmed from long years of wars migration, poverty and disease created anxieties among the Republican elite³⁶⁸ and urged them to lead a pronatalist campaign. The Republican government sought to increase the population by stressing motherhood and family. A large and optimized population was perceived as essential for national power and

³⁶⁸ For demographic characteristics of the early decades of the Turkish Republic, see Shorter, “The Crisis of Population Knowledge in Turkey.”

defense. This was not possible through increasing the birth rate alone, but, for the Republican elite, the scientific management of society seemed imperative. To serve their own mobilizational purposes of population growth and social discipline, the Republican government increasingly intervened to raise the birthrate and ensure the healthy upbringing of its citizens through practices such as pre-marriage health inspection, war against prostitution and such diseases as venereal disease, tuberculosis and trachoma, and the prohibition of birth control as well as offering incentives to families to have more children and rewarding mothers for high fertility. In this way, the female body was taken out of its traditional seclusion to become “national” and women were transformed into the mothers of the nation, who would bear robust and healthy children and raise them in line with the scientific and modern European methods. Motherhood was portrayed as a natural and fulfilling part of women’s lives. The promotion of motherhood included birth bonuses, free pre- and post- natal check-ups and agitation for childcare institutions.

Similarly, child welfare policies, such as the struggle against infant mortality, juvenile delinquency and the efforts to rehabilitate large numbers of orphaned and abandoned children; to eliminate malnutrition and disease and agitation for child care institutions were all carried out in the name of “the nation’s march to modernity.”

In child and maternal welfare, individual acts of benevolence and private initiatives that created private philanthropies, rather than political initiatives that resulted in public provision, constituted the core in early Republican Turkey. The emergence and shaping of maternal and child welfare in Republican Turkey was closely linked to the private initiatives of men and women who were also closely embedded within

parliamentary politics and the bureaucratic apparatus.³⁶⁹ Instead of developing and adopting a large scale social welfare policy, the Republican government invited each and every citizen and organization, whether private or public, to take part in the process of providing aid to mothers and children in the name of a national cause.

At one level, the narrative presented in this thesis reads as a one of failure, in which the promotion and protection of child health, the preemption of juvenile delinquency, child vagrancy and labor and the prevention of disease, and social aid to women who had to support themselves through prostitution fell short. Departing from the research of the two cases of prostitution and venereal disease as well as child and maternal welfare, this study argues, more broadly, that the Republican elites were not able to complement their political revolution with a broader social revolution. As in the early decades of the Turkish Republic, nowadays, poverty still seems to be assessed as a “social risk” and the bodies of women, men and children mired in poverty continue to figure as objects of concern today. Just like the Republican elite, who sought to eliminate poverty and related social questions by creating a vital network in which several private, semi-private and surrogate institutions as well as individuals would complement governmental reforms and serve as an alternative to full-fledged state investment in social welfare, Turkish politicians today attempt to eliminate the “risks”

³⁶⁹ In this regard biographies of Dr. Behçet Uz, Dr. Fuad Umay and Dr. Hulusi Behçet can be instructive. See for example, Akın, *Bir Devrin Cemiyet Adamı: Fuad Umay (1885-1963)*. Available [online] at <http://www.hulusibehcet.net> Unlike the French, German, British and American experience of child and maternal welfare, which emerged thanks to the women who claimed new roles for themselves and who transformed their emphasis on motherhood into public policy, in the Turkish experience mostly men could affect the parliamentary politics due to the low rate of female representation. However, this does not necessarily mean that women did not participate in maternal and child welfare. In contrast, women took active roles in charitable activities and in the activities of institutions such as the CPS. For an assessment of the French, German, British and American experience, Seth Koven and Sonya Michel, “Womanly Duties: Maternalist Politics and the Origins of Welfare States in France, Germany, Great Britain, and the United States, 1880-1920,” *The American Historical Review* 95, no. 4 (Oct. 1990).

large-scale poverty poses through palliative measures such as the World Bank's Social Risk Mitigation Project instead of large-scale state investment in social welfare.³⁷⁰



³⁷⁰ For details, see, *Social Risk Mitigation Project* (available [online] at <http://www1.worldbank.org/sp/safetynets/CCT/Turkey%20CCT.pdf>)

BIBLIOGRAPHY

Newspaper and Journal Articles:

“120.000 Çocuğun Kaderini Tayin Edecek Olan Yoksul Çocuklar Lâyihasının Müzakeresi Geriye Bırakıldı.” *Hürriyet*, 29 May 1948.

“140 Kuruş İçin Adam Feda Edilir mi?” *Cumhuriyet*, 23 June 1931.

“Aile Doktoru Bulundurmamayı İhmal Etmeyiniz.” *Gürbüz Türk Çocuğu*, no. 37 (October 1929).

Şakir, Dr. Mustafa (trans). “Mücrim Çocuklar.” *Gürbüz Türk Çocuğu*, no. 34 (July 1929).

Şakir, Dr. Mustafa (trans). “Mücrim Çocuklar.” *Gürbüz Türk Çocuğu*, no. 37 (September 1929).

Akol, Osman K. “Dilenci Çocukların Sırları!” *Bütün Türkiye* (Eylül 1951).

Alantar, İhsan Hilmi, Vasfi Toker, and Fedon Skuros. “Üniversite Çocuk Kliniğinin 1936-1937 Yılları İstatistiği.” *İstanbul Üniversitesi Tıp Fakültesi Mecmuası* 2, no. 9 (1939): 1110-20.

“Amerika’daki Vatandaşların Yaptıkları Yardımlar.” *Gürbüz Türk Çocuğu*, no. 29 (January 1929).

“Amerika’dan Gelen Yardım.” *Gürbüz Türk Çocuğu*, no. 37 (October 1929).

Arar, Asım. “Genelevlerin Kapatılması ve Fuhşun İlgası Doğru mudur?” *Cumhuriyet*, 25 August 1950.

Arar, Asım. “Genelevleri Kapatmak Ne Gibi Neticeler Doğurur?” *Cumhuriyet*, 1 September 1950.

“Asrî Çocuk Oyuncakları.” *Muhit* 2, no. 14 (1929).

Atuf, Nafi. “Çocukları Koruyan Teşekküller.” *Gürbüz Türk Çocuğu*, no. 44 (May 1930).

“Ayıptır Ayıp!” *Cumhuriyet*, 26 May 1931.

- “Bakımevleri.” *Cumhuriyet*, 30 March 1931.
- “Bakımsız Türk Yavruları.” *Cumhuriyet*, 24 April 1931.
- “Bakımsızlıktan Yılda 300 Bin Vatandaş Kaybediyoruz.” *Cumhuriyet*, 31 January 1951.
- Behçet, Hulusi. “Deri ve Frengi Hekimliği.” *Deri Hastalıkları ve Frengi Kliniği Arşivi* 1, no. 1 (1934): 3-16.
- Behçet, Hulusi. “Frengi.” *Deri Hastalıkları ve Frengi Kliniği Arşivi* 2, no. 2 (1934): 106-23.
- Behçet, Hulusi. “Frengi Tarihi ve Geçirdiği Devirler I.” *Deri Hastalıkları ve Frengi Kliniği Arşivi* 3, no. 13-14 (1936): 1041-69.
- Behçet, Hulusi. “Viladî Frengi Tedavisi.” *Deri Hastalıkları ve Frengi Kliniği Arşivi* 3, no. 16 (1936): 1235-37.
- Behçet, Hulusi. “Zührevî Hastalıklar Hakkında Halka Mahsus Sıhhî Terbiye.” *Sıhhî Sahifalar* 3, no. 1 (1930): 24-27.
- Behçet, Hulusi. “Zührevî Hastalıklar Hakkında Halka Mahsus Sıhhî Terbiye II.” *Sıhhî Sahifalar* 4, no. 1 (1930): 284-88.
- Behçet, Hulusi, and Cevat Kerim. “Başlangıç ve İlk Sözümler.” *Deri Hastalıkları ve Frengi Kliniği Arşivi* 1, no. 1 (1934): 1-2.
- “Beşiktaş Bakımevi Faaliyete Geçti.” *Cumhuriyet*, 17 February 1931.
- “Bir Çocuk Bakım Müessesesi Açılacak.” *Cumhuriyet*, 18 October 1930.
- “Bize Daha Çok Çocuk Sarayı Lazım.” *Cumhuriyet*, 25 April 1931.
- “Bulaşıcı Hastalıklara Karşı Alınan Tedbirler.” *Cumhuriyet*, 13 February 1950.
- “Büyük Şehirlerin Sefil ve Perişan Yavruları İçin Himaye İstiyoruz.” *Cumhuriyet*, 26 April 1931.
- Celâl, Ferit. “Çocuk.” *Gürbüz Türk Çocuğu*, no. 34 (July 1929).
- Celâl, Muhiddin. “Umumî Hıfzısıhha Kanunu.” *Sıhhî Sahifalar* 4, no. 10 (1930): 279-80.
- “Cemiyetimizin En Büyük Hastalıklarından Biri: Sokak Çocukları.” *Bütün Türkiye* 1, no. 4 (1950).
- “Cemiyetimizin Merkez ve Şube Faaliyetlerine Bir Nazar.” *Gürbüz Türk Çocuğu*, no. 29 (January 1929).

- “Cemiyetimizin Merkez ve Şube Faaliyetlerine Bir Nazar.” *Gürbüz Türk Çocuğu*, no. 30 (March 1929).
- Cevat, Ahmet. “İçtimai Muhasebe: Çocuk Meselesi.” *Muhit* 3, no. 31 (1931): 1-5.
- “Cibali Fabrikasında Bir Şefkat Yuvası: Kimsesiz İşçi Kadınların Yavrularına Her Fabrika Böyle Bir Yuva Yapmalıdır!” *Cumhuriyet*, 5 January 1931.
- “Cild ve Zührevî Hastalıklar Cem’iyeti 934-935 Umumî Kongre Halindeki İçtima.” *Deri Hastalıkları ve Frengi Kliniği Arşivi* 1, no. 5-6 (1934): 484-90.
- “Cilt ve Zührevî Hastalıklar Cem’iyeti Senelik Kongresi.” *Deri Hastalıkları ve Frengi Kliniği Arşivi* 1, no. 1 (1934): 66-74.
- “Çocuğunuzun Zekâsı Gıdasına Bağlıdır.” *Gürbüz Türk Çocuğu*, no. 34 (July 1929).
- “Çocuk Bakımevleri: Edirnekapi’nın İncisi Açılıyor.” *Cumhuriyet*, 22 May 1931.
- “Çocuk Bakımı: Evlerimizin Döşemeleri ve Çocuklarımız.” *Muhit* 2, no. 14 (1929).
- “Çocuk Davası.” *Hürriyet*, 4 November 1948.
- “Çocuk Hürriyeti.” *Hürriyet*, 16 February 1949.
- “Çocuk Suçlarına Dair.” *Hürriyet*, 11 January 1949.
- “Çocuklara Cinsî Terbiye Nasıl Verilir?” *Gürbüz Türk Çocuğu*, no. 34 (July 1929).
- “Çocuklarımız Ne ile Besleniyor?” *Cumhuriyet*, 8 May 1931.
- “Çocukların Gıdası.” *Muhit* 4, no. 48 (1932): 44, 47.
- “Çocuklarınıza Güneş Banyosu Yaptırınız.” *Gürbüz Türk Çocuğu*, no. 34 (July 1929).
- “Çok Çocuklu Aileler.” *Cumhuriyet*, 4 December 1930.
- “Çok Çocuklu Aileler.” *Cumhuriyet*, 31 January 1931.
- “Çok Çocuklu Annelere Mükâfat.” *Cumhuriyet*, 24 September 1930.
- “Çok Çocuklu Hâkimlere Yapılacak Yardım.” *Hürriyet*, 12 February 1949.
- “Çok Çocuklular.” *Cumhuriyet*, 26 July 1930.
- “Darülâcezedeki Çocuklar.” *Bütün Türkiye* 3, no. 15 (1951).

- Derviş, Suad. "Çocuklarımız Ne Halde?: İşe Giderken Çocuğumu Bırakacak Yer İstiyorum." *Cumhuriyet*, 25 August 1935.
- "Dilencilerin Önüne Niçin Geçilmiyor?" *Cumhuriyet*, 11 November 1930.
- "Dispanserler Fakir Çocuklarla Meşgul Olacaklar." *Cumhuriyet*, 27 March 1931.
- Doğruer, Dr. Feyzullah. "Çocuk ve Anne ile Diş Hekiminin Alâkası Neden ve Nereden Başlar?" *İş: Felsefe, Ahlak ve İctimaiyat Mecmuası* 9, no. 34 (1943).
- "Doğum Çok Ama Ölüm de Çok." *Cumhuriyet*, 24 August 1950.
- Duru, Kâzım Nâmi. "Çocuklar Hakkında İstanbul Radyosunda Verilen Bir Konferans." *Resimli Şark*, no. 19 (July 1932).
- "Ebeveynin Terbiyesi: Çocukların Huysuzluklarından Ana Baba Mes'uldür." *Muhit* 4, no. 47 (1932).
- "Elâziz'de Nesil Mahvoluyor!" *Cumhuriyet*, 16 August 1930.
- Esler, Suzan. "Emanet Çocuklar." *Resimli Hayat* 3, no. 27 (1954).
- "Ev Kadınının Bileceği Şeyler." *Muhit* 3, no. 33 (1931): 71.
- "Faydasız Merhamet." *Gürbüz Türk Çocuğu*, no. 38 (November 1929).
- Fındıkoğlu, Ziyaeddin. "Çocukları Kurtarma Yurdu." *İş: Felsefe, Ahlak ve İctimaiyat Mecmuası* 9, no. 34 (1943): 204-11.
- "Frengi Doktorlarının Toplantısı." *Cumhuriyet*, 6 May 1950.
- "Frengi Tedavisi Hakkında." *Deri Hastalıkları ve Frengi Kliniği Arşivi* 3, no. 13-14 (1936): 1143-45.
- "Fuhşun Kalkması İhtimali Üzerine "İlgililer'in Fikri." *Hürriyet*, 2 July 1949.
- "Fuhş Yasağına Dair Verilecek Kararın Uyandırdığı Akisler." *Hürriyet*, 4 July 1949.
- "Fuhşla Mücadele." *Hürriyet*, 13 July 1949.
- "Genelevler Meselesi." *Cumhuriyet*, 22 August 1950.
- "Gıdasız Talebe." *Cumhuriyet*, 6 October 1930.
- Gövsa, İbrahim Alâettin. "Aile ve Çocuk Zamları." *Hürriyet*, 13 July 1948.
- Halil, Neşet. "Ankara'da." *Gürbüz Türk Çocuğu*, no. 45 (June 1930).

- Hamit, Nebahat. "Ana ve Oğul." *Gürbüz Türk Çocuğu*, no. 29 (February 1929).
- Dr. Haşmet. "Çocuk Yuvalarının Kutsiyetine İman." *Gürbüz Türk Çocuğu*, no. 43 (April 1930).
- "Hayır İçin Çalışmak İstiyor." *Cumhuriyet*, 8 January 1931.
- "Himayei Etfal." *Cumhuriyet*, 16 February 1931.
- "Himayei Etfal Bayram Münasebetile Kimsesiz Çocukları Sevindiriyor." *Cumhuriyet*, 17 January 1931.
- İrmak, Sadi. "Çocuk ve Meseleleri." *Ülkü*, no. 6 (1 May 1944).
- İlk Tahsil Çağındaki Çocukların Sayımı." *Hürriyet*, 20 September 1949.
- Dr. İsmet Kâmil. "Valide Sütü ile Çocuk Beslemek." *Sihhi Sahifalar* 3, no. 4 (1930): 110-13.
- İsmail, Cevriye. "İstikbal Çocuklarıdır Anneler Duyuyor musunuz?" *Gürbüz Türk Çocuğu*, no. 37 (October 1929): 20.
- "İstanbul'da Ne Kadar Genelev Var?" *Hürriyet*, 1 July 1949.
- "İstismar Edilen Çocuk." *Gürbüz Türk Çocuğu*, no. 43 (April 1930).
- "İşçilere Dair." *Cumhuriyet*, 7 November 1930.
- "İtalya'da İçtimai Mesele." *Cumhuriyet*, 2 August 1943.
- "İzbede Unutulan Yavrular." *Cumhuriyet*, 27 April 1931.
- "Kadıköy Fıkaraperver Cemiyeti." *Cumhuriyet*, 20 June 1931.
- "Kâfi Gıda Alamıyan Öğrenciler." *Cumhuriyet*, 16 February 1951.
- Kapsız. "Çocuk Dostları." *Resimli Hayat* 4, no. 37 (1955).
- Kessler, Gerhard. "Aile Siyaseti." *Aile*, Kış 1948.
- "Kimsesiz Çocuklar İçin." *Hürriyet*, 12 April 1949.
- "Kimsesiz Çocuklar İçin Yurt." *Hürriyet*, 22 March 1950.
- "Kimsesiz Çocuklar Meselesi." *Hürriyet*, 27 August 1948.
- "Kimsesiz Çocuklar Nasıl Himaye Edilecek." *Hürriyet*, 4 March 1950.

- “Kimsesiz Çocuklar Nasıl Himaye Edilecek?” *Hürriyet*, 14 June 1948.
- “Kimsesiz Çocuklar Toplanıyor.” *Cumhuriyet*, 11 May 1931.
- “Kimsesiz Çocukları Barındırma Yurdu.” *Hürriyet*, 18 February 1949.
- “Kimsesiz Çocukların Himayesi.” *Hürriyet*, 29 April 1949.
- “Kimsesiz Çocukların Korunması.” *Hürriyet*, 6 May 1948.
- “Kimsesiz Çocukların Tesbitine Başlanıyor.” *Hürriyet*, 18 July 1949.
- “Kimsesiz Yavruların Yüzünü Güldürenler.” *Cumhuriyet*, 19 February 1931.
- MEB. “Esirgeme Derneği’nde Gördüklerim.” *Muhit* 3, no. 33 (1931).
- MEB. “Süt Damlasında Gördüklerim.” *Muhit* 3, no. 34 (1931): 12-15.
- “Mekteplerdeki Aç Yavruların Hali Ne Olacak?” *Cumhuriyet*, 3 November 1930.
- Muhiddin, Nezihe. “Meçhul Kadın.” *Muhit* 3, no.31 (1931).
- Muhiddin, Nezihe. *Türk Kadını*. İstanbul: Nümune Matbaası, 1931.
- Mulzer, Paul. “İtalya, Atina ve İstanbul’da Fuşun Tanzimi için Zabıta Ahlakıye Tarafından Alınan Tedabire Dair Malumat.” *Deri Hastalıkları ve Frengi Kliniği Arşivi* 1, no. 2 (1934): 174-83.
- Nabi, Yaşar. “Nüfus Meselesi Karşısında Türkiye.” *Ülkü* 14, no. 79 (September 1939).
- Nadi, Yunus. “Cemiyetin Vazifeleri: Kimsesizlere İmdat.” *Cumhuriyet*, 4 September 1931.
- Nadi, Yunus. “En Büyük Mes’ele: Çocuk Mes’elesini!” *Cumhuriyet*, 3 March 1931.
- Nâmi, Kâzım. “Cemiyetlerin Terbiyevî Tesiri.” *Gürbüz Türk Çocuğu*, no. 45 (June 1930).
- Nâmi, Kâzım. “Çocukların Müşahedesine Ait Fişler.” *Muhit* 2, no. 23 (1930): 366-68.
- Osman, Abdülrezzak. “Ümit’e Mektuplar.” *Gürbüz Türk Çocuğu*, no. 29 (February 1929).
- Osman, Mazhar. “Nüfus Bereketi Arefesindeyiz: Cumhuriyetin Halkın Sıhhatine Hizmeti II.” *Sıhhi Sahifalar* 3, no. 2 (1930): 33-37.

“Oyuncaksız Çocuklar.” *Resimli Hayat* 1, no. 2 (1952).

“Ömer, Mediha Mithat. “Sinema ve Çocuklarımız: Sinemaların Çocuk Üzerinde Yaptığı Tesiri Çocuğu Üzerinde Tecrübe Eden Bir Annenin Düşündükleri.” *Gürbüz Türk Çocuğu*, no. 33 (June 1929).

Ömer, Mithat. “Süt Anaya, Dadıya, Mürebbiyeye, Hizmetçiye Dair.” *Gürbüz Türk Çocuğu*, no. 31 (April 1929): 3-4.

“Pedagoji Teşekkülleri Cihan Federasyonu Kongresi.” *Gürbüz Türk Çocuğu*, no. 42-43 (March-April 1930).

Recep. “Memleketinizle Tanışmış Olunuz.” *Resimli Ay*, no. 6 (August 1930).

Refik, Fuat. “Rusya’da Metruk Çocuk Yuvaları.” *Gürbüz Türk Çocuğu*, no. 33 (June 1929).

Rıfat, Ali. “Çocuk Ölümüne Karşı Çareler.” *Sıhhi Sahifalar* 3, no. 2 (1930): 57-59.

Rıfat, Ali. “Çocuklar Neden Ölüyorlar?” *Sıhhi Sahifalar* 3, no. 1 (1930): 6-8.

Rıfat, Ali. “Çocuklarımız Nasıl Emzirilmeli.” *Sıhhi Sahifalar* 3, no. 5 (1930): 143-45.

Rıfat, Ali. “Hanımlar! Çocuklarınızı Kendiniz Emziriniz.” *Sıhhi Sahifalar* 3, no. 3 (1930): 81-84.

“Sağlık Bakanı, Mecliste Sıtma ve Verem Mücadelesine Dair Geniş İzahlarda Bulundu.” *Cumhuriyet*, 24 February 1950.

Saim, Yahya. “Yetimlerimiz.” *Gürbüz Türk Çocuğu*, no. 33 (June 1929).

Sait, Naci Dr. “Çocuk Ölümü.” *Ülkü*, no. 3 (April 1934).

Sami, Seniha. “Annelerin Çalışması.” *Muhit* 3, no. 34 (1931): 70-1.

Sarç, Ömer Celal. “Türkiye’de Çocuk Ölümleri.” *İş: Felsefe, Ahlak ve İctimaiyat Mecmuası* 9, no. 34 (1943): 62-66.

“Serseriler ve Kimsesiz Çocuklar.” *Hürriyet*, 20 March 1950.

Sertel, Sabiha Zekeriya. “Çocuk Meselesi: Çalışan Çocuklar.” *Resimli Ay*, no. 3 (May 1930).

Sertel, Sabiha Zekeriya. “Gerzeli Ayşe.” *Resimli Ay* (May 1929).

Sertel, Sabiha Zekeriya. “Sınaî Hayatta Kadın ve Çocuk.” *Resimli Ay*, no. 5 (July 1930).

- Sinanoglu. "Efendiler, Ne Veriyoruz, Ne Yapıyoruz ki 'Verin, Yapın' Demiye Hakkımız Olsun!" *Türkiye Hilâliahmer Mecmuası*, no. 120 (1932): 108-11.
- Sırrı, Selim. "Bir İrk Nasıl Bozulur?" *Terbiye* 5, no. 23 (March 1930).
- "Sokaklarda Fahişeler." *Cumhuriyet*, 5 May 1931.
- "Sokaktaki Çocuklar Mektebe Verilecek." *Cumhuriyet*, 11 January 1931.
- Suat, Ali. "Çocuğun İstirahatını Kendi Zevkinden Üstün Bil." *Gürbüz Türk Çocuğu*, no. 38 (November 1929).
- Suner, Saim. "Frengi Tedavisinin Hali Hazır." *Deri Hastalıkları ve Frengi Kliniği Arşivi* 2, no. 8 (1935): 612-16.
- Süreyya, Şevket. "Çok Nüfuslu Anadolu." *Kadro* (1932): 31-36.
- "Sürüsüne Bereket." *Cumhuriyet*, 11 July 1930.
- Ş., S. "Nüfus Sayımı ve Çocuk Bakımı." *Kültür*, no. 44 (1935).
- "Şehirde 10.000 Dilenci Olduğu Anlaşıldı." *Cumhuriyet*, 10 July 1930.
- Şükrü, Ali. "Bizde Çocuk Vefiyatına Sebep Nelerdir ve Mani Olmak Çareleri." *Sihhi Sahifalar* 2, no. 3 (1930): 38-42.
- Tunç, Mustafa Şekip. "Annelerle Hasbihal." *Muhit* 3, no. 31 (1931): 6-9.
- Tunç, Mustafa Şekip. "Çocuk Neşesinin Amilleri." *Muhit* 3, no. 34 (1931): 17-19.
- Tunç, Mustafa Şekip. "Çocukta Neşe." *Muhit* 3, no. 33 (1931): 17-19.
- "Umumî Evler Kapatılacak." *Hürriyet*, 14 May 1949.
- "Üç Çocuk Dispanseri Açılıyor." *Cumhuriyet*, 2 October 1930.
- "Vali Söylüyor: 'Sütün Şimdiki Satış Şekli Ancak Kötü Kelimesi ile İfade Edilebilir'." *Cumhuriyet*, 6 May 1939.
- Va-Nû. "Kimsesiz Çocuklar." *Bütün Türkiye*, Temmuz 1950.
- "Vazifeye Davet." *Gürbüz Türk Çocuğu*, no. 38 (November 1929).
- Vecdi, Feridun. "Sokak Çocukları." *Gürbüz Türk Çocuğu*, no. 33 (June 1929).
- "Veremin En Çok Olduğu Bölgeler." *Cumhuriyet*, 25 January 1951.

“Yeni Doğan Çocuklara Verem Aşısı Yapılacak.” *Hürriyet*, 21 September 1948.

“Yoksul Çocuklara Elinizi Uzatın.” *Cumhuriyet*, 28 April 1931.

“Yurdumuzda 200.000 Veremli Var.” *Cumhuriyet*, 6 June 1950.

Zafir, Kâzım. “Çocuk Mahkeme ve Cezaevleri mi? Çocuk Kurtarma Yurtları mı?” *İş: Felsefe, Ahlak ve İctimaiyat Mecmuası* 9, no. 34 (1943): 197-200.

“Zührevî Hastalıkların Parasız Tedavisi.” *Cumhuriyet*, 15 November 1930.

“Zührevî Tehlikeye Karşı Fransız Millî Korunma Cemiyeti Neşriyatından.” *Deri Hastalıkları ve Frengi Kliniği Arşivi* 1, nos. 3-4 (1934): 339-41.

Books and Articles:

Abimelek Bey. “Zührevî Hastalıklardan Tahaffuza Dair.” In *Sıhhat Almanacağı*. Edited by Mazhar Osman. İstanbul: Kader Matbaası, 1933.

Ahmet Şükrü Bey. “Frengi.” In *Sıhhat Almanacağı*. Edited by Mazhar Osman. İstanbul: Kader Matbaası, 1933.

Akalın, Dr. Besim Ömer. *Doğum Tarihi*. İstanbul: Ahmet İhsan Matbaası, 1932.

Akçetin, Elif. “Anatolian Peasants in the Great Depression.” *New Perspectives on Turkey*, no. 23 (2000).

Akdik, Sâra. “Neslin Korunması.” In *CHP Konferansları, Kitap 8*. Ankara: Recep Ulusoğlu Basımevi, 1939.

Akın, Veysi. *Bir Devrin Cemiyet Adamı: Fuad Umay (1885-1963)*. Ankara: Atatürk Araştırma Merkezi, 2000.

Akın, Yiğit. “Not Just a Game: Sports and Physical Education in the Early Republican Turkey.” Master’s thesis, Bogazici University, 2003.

Akol, Osman K. *Topyekûn Çocuk Meselesi: 10. Dönem B.M. Meclisi Üyelerine Açık Mektup*. Ankara: Telgraf Matbaası, 1954.

Aksoy, Sadri. *Türkiye’de Sosyal Güvenlik*. Ankara: Türkiye ve Orta Doğu Amme İdaresi Enstitüsü, 1960.

Ali Eşref Bey. “İctimaî Dertlerimizden Biri.” In *Sıhhat Almanacağı*. Edited by Mazhar Osman. İstanbul: Kader Matbaası, 1933.

- Ali Rıza Bey. "Velâdî Frengi." In *Sıhhat Almanacağı*. Edited by Mazhar Osman. İstanbul: Kader Matbaası, 1933.
- Altınay, Ayşe Gül. "Ordu-Millet-Kadınlar: Dünyanın İlk Kadın Savaş Pilotu Sabiha Gökçen." In *Vatan Millet Kadınlar*. Edited by Ayşe Gül Altınay, 246-80. İstanbul: İletişim Yayınları, 2000.
- Baldwin, Peter. "Antiprostitution Reform and the Use of Public Space in Hartford, Connecticut, 1878-1914." *Journal of Urban History* 23, no. 6 (1997): 709-30.
- Bartley, Paula. *Prostitution, Prevention and Reform in England, 1860-1914*. London & New York: Routledge, 2000.
- Behçet, Hulusi. *Frengi Niçin Ayıp Görülür? Frengiyi Neden Gizli Tutmak Adet Olmuştur? Tabiatı Ayıp Denilen Hastalık Var mıdır? Prof. Dr. Hulusi Behçet Tarafından 15 Şubat 1935'te İstanbul Radyosunda Verilen Konferans*. İstanbul: İstanbul Belediyesi Basım Evi, 1935.
- Corbin, Alain. "Commercial Sexuality in Nineteenth-Century France: A System of Images and Regulations." In *The Making of the Modern Body: Sexuality and Society in the Nineteenth Century*. Edited by Catherine Gallagher and Thomas Laqueur. California: University of California Press, 1987.
- "Cumhuriyetin Sıhhat Siyaseti." In *Sıhhat Almanacağı*. Edited by Mazhar Osman. İstanbul: Kader Matbaası, 1933.
- Dean, Mitchell. *Governmentality: Power and Rule in Modern Society*. London: Sage Publications, 1999.
- Dickinson, Edward Rose. *The Politics of German Child Welfare from the Empire to the Federal Republic*. Cambridge: Harvard University Press, 1996.
- Diker, Hümeýra. *İzmir Dr. Behçet Uz Çocuk Hastanesi Tarihi ve 1947-1954 Yılları Faaliyet Raporu*. İzmir: Gayret Basımevi, 1954.
- Donzelot, Jacques. *The Policing of Families*. Baltimore & London: The Johns Hopkins University Press, 1997.
- Douglas, Mary. *Purity and Danger: An Analysis of Concepts of Pollution and Taboo*. Middlesex: Penguin Books, 1970.
- Ege, Rıdvan. *Türkiye'nin Sağlık Hizmetleri ve İsmet Paşa*. Ankara: İnönü Vakfı, 1992.
- Engelstein, Laura. *The Keys to Happiness: Sex and the Search for Modernity in Fin-de-Siècle Russia*. Ithaca: Cornell University Press, 1992.
- Engelstein, Laura. "Morality and the Wooden Spoon: Russian Doctors View Syphilis, Social Class, and Sexual Behaviour, 1890-1905." In *The Making of the Modern*

- Body: Sexuality and Society in the Nineteenth Century*. Edited by Catherine Gallagher and Thomas Laqueur. California: University of California Press, 1987.
- Foucault, Michel. "Governmentality." In *The Foucault Effect, Studies in Governmentality*. Edited by Graham Burchell, Colin Gordon and Peter Miller. Chicago: The University of Chicago Press, 1991.
- Foucault, Michel. *The Birth of the Clinic: An Archaeology of Medical Perception*. New York: Vintage Books, 1994.
- Foucault, Michel. *Discipline and Punish*. Middlesex: Penguin Books, 1991.
- Gordon, Colin. "Introduction." In *Power*. Edited by James D. Faubion. New York: The New Press, 1994.
- Göbelez, Selen. "The History of Social Services in Republican Turkey: Social Change, Professionalism and Politics." Master's thesis, Boğaziçi University, 2003.
- Göral, Özgür Sevgi. "The Child Question and Juvenile Delinquency during the Early Republican Era." Master's thesis, Bogazici University, 2003.
- Hanım, Naciye Emin. "Sütinelerin, Ahçıların, Hizmetçilerinin Kanlarını Mutlaka Muayene Ettiriniz." In *Sıhhat Almanacağı*. Edited by Mazhar Osman. İstanbul: Kader Matbaası, 1933.
- Harding, Lorraine Fox. *Perspectives in Child Care Policy*. London & New York: Longman, 1991.
- Hayri Ömer Bey. "Belsoğukluğu ve Tedavisi." In *Sıhhat Almanacağı*. Edited by Mazhar Osman. İstanbul: Kader Matbaası, 1933.
- Hegarty, Marilyn, E. "Patriot or Prostitute? Sexual Discourses, Print Media, and American Women during World War II." *Journal of Women's History* 10, no. 2 (1998): 112-25.
- Hoffman, David L. "Mothers in the Motherland: Stalinist Pronatalism in Its Pan-European Context." *Journal of Social History* 34, no. 1 (Fall 2000): 35-54.
- Horn, David G. *Social Bodies: Science, Reproduction, and Italian Modernity*. New Jersey: Princeton University Press, 1994.
- Hüseyin Zade Ali Bey. "Sifilomani ve Frengiye Dair Bilgilerimizin Tarihinden Bir Nebze." In *Sıhhat Almanacağı*. Edited by Mazhar Osman. İstanbul: Kader Matbaası, 1933.

- İhsan Hilmi Bey. "Asri Anne." In *Sıhhat Almanacağı*. Edited by Mazhar Osman. İstanbul: Kader Matbaası, 1933.
- İhsan Sami Bey. "Belsoğukluğunda Ne Vakit ve Nasıl Aşı Yapılmalıdır?" In *Sıhhat Almanacağı*. Edited by Mazhar Osman. İstanbul: Kader Matbaası, 1933.
- İstanbul Çocuk Esirgeme Kurumu: Dispanser ve Bakım Müesseseleri Talimatnamesi*. İstanbul: Alaeddin Kırıl Basımevi, 1941.
- "Kanunen İhbarı Mecburî Hastalıklar ve İhbar ile Mükellef Olanlar." In *Sıhhat Almanacağı*. Edited by Mazhar Osman, 109. İstanbul: Kader Matbaası, 1933.
- Karabekir, Kâzım. *Çocuk Davamız*. Edited by Faruk Özerengin. İstanbul: Emre Yayınları, 2000.
- Karaömerlioğlu, M. Asım. "Elite Perceptions of Land Reform in Turkey." *The Journal of Peasant Studies* 27, no. 3 (April 2000): 115-41.
- Karaömerlioğlu, M. Asım. "The People's Houses and the Cult of the Peasant in Turkey." *Middle Eastern Studies* 34, no. 4 (October 1998): 67-91.
- Karaömerlioğlu, M. Asım. "The Village Institute Experience in Turkey." *British Journal of Middle Eastern Studies* 25, no. 1 (May 1998): 47-73.
- Kazancıgil, Tevfik Remzi. "Pratisyen Hekimin Kadın Hastalıkları ve Doğum İşleri Karşısındaki Rolü." In *Üniversite Haftası: Erzurum (13.7.1940-19.7.1940)*. İstanbul: Ahmed İhsan Matbaası Ltd., 1941.
- Kermenli, Dr Asım. "Frengi Nasıl Bir Hastalıktır?" In *Sıhhat Almanacağı*. Edited by Mazhar Osman. İstanbul: Kader Matbaası, 1933.
- Keyder, Çağlar. "Cumhuriyet Devleti Ne Kadar Güçlüydü?" In *Memâlik-i Osmaniye'den Avrupa Birliği'ne*, 181-205. İstanbul: İletişim Yayınları, 2003.
- Kırlı, Cengiz. "Kahvehaneler ve Hafiyeler: 19. Yüzyıl Ortalarında Osmanlı'da Sosyal Kontrol." *Toplum ve Bilim* 83 (1999/2000).
- Koven, Seth, and Sonya Michel. "Introduction: Mother Worlds." In *Mothers of a New World, Maternalist Politics and the Origins of Welfare States*. Edited by Seth Koven and Sonya Michel. New York & London: Routledge, 1993.
- Koven, Seth, and Sonya Michel. "Womanly Duties: Maternalist Politics and the Origins of Welfare States in France, Germany, Great Britain, and the United States, 1880-1920." *The American Historical Review* 95, no. 4 (Oct. 1990): 1076-108.
- Libal, Kathryn. "'The Child Question': The Politics of Child Welfare in Early Republican Turkey." In *Poverty and Charity in Middle Eastern Contexts*. Edited

by Michael Bonner, Mine Ener and Amy Singer. New York: State University of New York Press, 2003.

Libal, Kathryn. "The Children's Protection Society: Nationalizing Child Welfare in Early Republican Turkey." *New Perspectives on Turkey*, no. 23 (2000).

Libal, Kathryn. "National Futures: The Child Question in Early Republican Turkey." Ph.D., University of Washington, 2001.

Marks, Lara V. *Model Mothers: Jewish Mothers and Maternity Provision in East London, 1870-1939*. Oxford: Clarendon Press, 1999.

Michel, Sonya. *Children's Interests / Mothers' Rights: The Shaping of America's Child Care Policy*. New Haven: Yale University Press, 1999.

Okay, Cüneyd. *Belgelerle Himaye-i Etfal Cemiyeti, 1917-1923*. İstanbul: Şule Yayınları, 1999.

Orhan Tahsin Bey. "Kadın Hastalıklarından Korunma Çarelerine Dair Açık ve Kısa Halk Bilgisi." In *Sıhhat Almanacağı*. Edited by Mazhar Osman. İstanbul: Kader Matbaası, 1933.

Osman, Mazhar. *Sıhhat Almanacağı*. İstanbul: Kader Matbaası, 1930.

Özbek, Nadir. "90 Yıllık Bir Hayır Kurumu: Topkapı Fukaraperver Cemiyeti." *Tarih ve Toplum*, no. 180 (December 1998).

Özbek, Nadir. *Osmanlı İmparatorluğu'nda Sosyal Devlet: Siyaset, İktidar ve Meşruiyet, 1876-1914*. İstanbul: İletişim Yayınları, 2002.

Özbek, Nadir. "Osmanlı'dan Günümüze Türkiye'de Sosyal Devlet." *Toplum ve Bilim*, no. 92 (Spring 2002).

Öztamur, Pınar. "Büyük Buhran ve Cumhuriyet Gazetesinde Yoksulluk Üzerine Söylemler, 1929-1931." *Toplum ve Bilim*, no. 94 (Fall 2002).

Porter, Dorothy. *Health, Civilization, and the State: A History of Public Health from Ancient to Modern Times*. London and New York: Routledge, 1999.

Republic of Turkey. *Evlenme Muayenesi Hakkında Nizamname*. Available [online] at http://www.yargitay.gov.tr/bilgi/kanun_liste/PC20011682.HM3.frameset.html.

Republic of Turkey. "Kimsesiz, Terkedilmiş ve Anormal Çocukların Korunması Hakkında Kanun Tasarısı ve İçişleri, Milli Eğitim, Çalışma, Adalet, Bütçe, Sağlık ve Sosyal Yardım Komisyonları Raporları ile Geçici Komisyon Raporu." *TBMM Zabıt Ceridesi* 19 (6 February 1947).

- Republic of Turkey. "Kimsesiz, Terkedilmiş ve Anormal Çocukların Korunması Hakkında Kanun Tasarısı ve İçişleri, Milli Eğitim, Çalışma, Adalet, Bütçe, Sağlık ve Sosyal Yardım Komisyonları Raporları ile Geçici Komisyon Raporu Meclis Görüşmeleri." *TBMM Zabıt Ceridesi* Session 1, no. Term 90 (23 May 1949).
- Republic of Turkey. "Kimsesiz, Terkedilmiş ve Anormal Çocukların Korunması Hakkındaki Kanun Tasarısının Geri Verilmesine Dair Başbakanlık Tezkeresi." *TBMM Zabıt Ceridesi* Session 1, no. Term 42 (7 February 1949).
- Republic of Turkey. "Kırklareli Meb'usu Fuat Beyin Çocukların Sinema ve Tiyatrolara Kabul Edilmemeleri Hakkında 2/45 Numaralı Teklifi Kanunisi ve Maarif Encümeni Mazbatası." *TBMM Zabıt Ceridesi* 14, no. Term 3, Session 3 (2 December- 30 December 1929).
- Rosenau, Milton J. *Preventive Medicine and Hygiene*. New York & London: D. Appleton & Company, 1918.
- Sangster, Joan. *Regulating Girls and Women: Sexuality, Family, and the Law in Ontario 1920-1960*. Oxford: Oxford University Press, 2001.
- Sapmazlı, Hüseyin. *Çocuk Himaye Hakları ve Müesseseleri*. Ankara: Yeni Cezaevi, 1943.
- Schafer, Sylvia. *Children in Moral Danger and the Problem of Government in Third Republic France*. New Jersey: Princeton University Press, 1997.
- Selanikli Nami Bey. "Hekimlik, Hekim, Roller, Aile Hekimliği, Esirgeme Hekimliği." In *Sıhhat Almanağı*. Edited by Mazhar Osman. İstanbul: Kader Matbaası, 1933.
- Sencer, Muzaffer. "Türkiye'de Çocuk ve Aile." In *Cumhuriyet Dönemi Türkiye Ansiklopedisi*, 358-64. İstanbul: İletişim Yayınları, 1983.
- Shakry, Omnia. "Schooled Mothers and Structured Play: Child-Rearing in Turn-of-the-Century Egypt." In *Remaking Women: Feminism and Modernity in the Middle East*. Edited by Lila Abu-Lughod. New Jersey: Princeton University Press, 1998.
- Shorter, Frederic C. "The Crisis of Population Knowledge in Turkey." *New Perspectives on Turkey*, no. 12 (Spring 1995): 1-31.
- Shorter, Frederic C. "Turkish Population in the Great Depression." *New Perspectives on Turkey*, no. 23 (2000).
- Somel, Selçuk Akşin. *The Modernization of Public Education in the Ottoman Empire, 1839-1908: Islamization, Autocracy, and Discipline*. Leiden: Brill Academic Publishers, 2001.

- Suat, Efzayiş. *Türk Kadını: Müsbet-Menfi*. İstanbul: Milliyet Matbaası, 1932.
- Şevki, Osman. *Beş Buçuk Asırlık Türk Tabâbeti Tarihi*. Ankara: Kültür Bakanlığı Yayınları, 1991.
- Terzioğlu, Ayşecan. "Turkish Medical Doctors: Historical Experience and Self-Narratives." Master's thesis, Bogazici University, 1998.
- Timm, Annette F. "Sex with a Purpose: Prostitution, Venereal Disease, and Militarized Masculinity in the Third Reich." *Journal of the History of Sexuality* (Jan-April, 2002): 223-34.
- Toprak, Zafer. "İstanbul'da Fuhuş ve Zührevî Hastalıklar, 1914-1933." *Tarih ve Toplum* (1987).
- Trentman, Frank, ed. *Paradoxes of Civil Society: New Perspectives on Modern German and British History*. New York: Berghahn Books, 2000.
- Tülay, M. Şükrü. *Fuhuş ve Sebepleri*. Adana: Doğan Basımevi, 1960.
- Türkiye Çocuk Esirgeme Kurumu'nun Küçük Bir Tarihçesi (1921-1939)*. İstanbul: Resimli Ay Matbaası, 1940.
- Umay, Fuat. "Çocuk Esirgeme Kurumu 25 Yılda Neler Yaptı?" In *Çocuk Davamız*. Edited by Adnan Bilget. İzmir: Meşher Basımevi, 1946.
- "Umumî Hıfzısıhha Hakkında 1/441 Numaralı Kanun Layihası ile Kırklareli Meb'usu Dr. Fuat Bey'in, Çocukların İçki ve Tütün Kullanmalarının Men'i Hakkında 2/4 Numaralı Kanun Teklifi ve Sıhhat ve İçtimâî Muavenet, Dahiliye, Adliye, Hariciye ve İktisat Encümenleri Mazbataları." *TBMM Zabıt Ceridesi* 18, no. Term 3 (17 April 1930).
- "Umumî Hıfzısıhha Kanunu." *Resmî Gazete Tertip* 3 vol. 11 (6 May 1930).
- "Umumi Hıfzısıhha Kanunu Esbabı Mucibe Layihası." *TBMM Zabıt Ceridesi* 18 (3 -28 April 1930).
- van Krieken, Robert. "Social Theory and Child Welfare: Beyond Social Control." *Theory and Society* 15, no. 3 (1986): 401-29.
- Wahab, Stephanie. "'For Their Own Good?' Sex Work, Social Control and Social Workers, A Historical Perspective." *Journal of Sociology and Social Welfare* 29, no. 4 (2002).
- Walkowitz, Judith R. *Prostitution and Victorian Society: Women, Class, and the State*. Cambridge: Cambridge University Press, 1980.

Webster Encyclopedic Unabridged Dictionary of the English Language, (New York: Gramercy Books, 1996)

Whittles, Keith H., and Catherine A. Whittles. *Claremont Medical Dictionary*. London: Claremont Books, 1994.

World Bank. *Social Risk Mitigation Project*. Available [online] at <http://www1.worldbank.org/sp/safetynets/CCT/Turkey%20CCT.pdf>

Yalım, Zeki Ragıp. *Firengi, Belsoğukluğu ve Alkolizmin Nesiller Üzerine Yaptığı Tahribat, CHP Konferansları Serisi*. Ankara: Recep Ulusoğlu Basımevi, 1940.

Zafir, Kâzım. *Çocukları Kurtarma Yurdu*. İstanbul: Matbaacılık ve Neşriyat Türk Anonim Şirketi, 1933.

