

Workshop “Meeting children’s needs, worrying for the young, caring for the old: intersecting historical approaches of age-based welfare in post-war Europe”, Athens, 18-19 March 2022, COST Who Cares in Europe – University of Athens.

**When Social Welfare Became a Bordering Practice:**

**Marking new national frontiers in the Upper Adriatic borderland:**

**Elena d’Aosta’s Opera patriottica di Assistenza all’Italia Redenta, 1919-1950**

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**ERC project overview**

My ERC project, “Social politics in European borderlands, 1870s-1990s (Sociobord), seeks to reframe the history of welfare and social care in modern Europe by restoring to view the contribution of local actors – primarily families and associations – to shaping welfare systems in three European borderlands: Galicia, the Northeastern Adriatic and the Franco/Belgian/Luxembourg/German border regions (also known as “La grande région”) from the late 19th century to the end of the 1990s. Sociobord thus turns our attention to the co-construction of social assistance by public and private actors in three borderland contexts marked by social, cultural, economic, religious or ethnic diversity. Here, the reach of central states often fluctuated and a range of welfare structures, based on national, but also non-national forms of identity/solidarity flourished.

By exploring social care in eastern, southeastern, and northwestern European borderlands over an extended period of time we intend to examine similarities and divergences across a long 20th century while bringing the histories of social protection in east and west, north and south, socialist/post-socialist, fascist/post-fascist and liberal democratic regimes into dialogue with one another. We do this by placing intensively researched case studies of local phenomena in comparative and transnational frameworks, examining similarities and differences between north-western, eastern, and south-eastern borderlands while tracing the circulation of concepts, people and practices.

Within each case study, we are deploying a highly innovative triadic approach that emphasizes the dynamic relationships among three distinct actors - voluntary associations, families, and states - who interact at different levels and in multiple ways in the construction of social protection. Inasmuch as it gives primary attention to local actors, the triadic approach assumes a bottom-up perspective. Yet it does so without ever losing sight of the state in its local manifestations. In this way, Sociobord recovers the contributions of families and associations in developing new forms of social care, as well as the forms of local knowledge that these civil society actors brought to their work.

If mixed economies of welfare approaches have highlighted the collaborations between states and voluntary welfare associations in the building of social services and systems of social protection, scholars have generally understood families as passive beneficiaries rather than active participants in these processes. The great innovation of the triadic approach is to understand families as active players who shape welfare services not just passively, through their choices, but actively as well, creating new services in response to their own needs for support, as parents of disabled children did in 1960s and 70s Britain, or as Spanish middle class families did in the last decades of Franco's régime, when they demanded – and received – a denser, more widespread net of social services. Here we see families as agents of change; leading, critiquing and rejecting policy while pressing state actors to take their needs and demands into account.

The project's double optic – triadic approach plus a focus on borderlands – is allowing Team Sociobord to examine a wide range of local welfare structures, based on national, but also non-national forms of identity/solidarity. Focusing on these overlapping, and at times competing structures of social provision allows us to explore the interplays between inclusion and exclusion that have long shaped European welfare provision by homing in on those contexts where such competition was particularly visible. For it is our conviction that the long-range historical study of local actors' ideas and practices around social welfare in European borderlands has much to tell us about the development of welfare across Europe in general. Moreover, the inside-yet-outside-the-state perspective that the triadic approach offers allows us to analyze state-building processes through a lens that is distinct from, yet complementary to that of national solidarity/nationalist conflict.

One major challenge of this project is to bring together two well-established multidisciplinary fields - borderland studies and welfare studies - that have yet to really engage with one another. Yet the

very shape and structure of the Sociobord inquiry demands that we do so. For if welfare is the (oblique) angle from which we approach bordering practices – practices which are themselves inflected by local structures of social provision – borderlands, in turn, shape local patterns of provision, as we can see when we compare those patterns with the structures of provision prevailing in adjacent nation states. Our project thus asks, “what is specific to *borderland* welfare,” and suggests that the answer to that question lies in the multiplicity and intensity of exchanges across a local field that is fragmented along numerous lines of solidarity/identity including gender, religion, occupation, language, or ethnic/national identity (to name but a few of the most salient and recurring forms).

The key to managing the extended geographical scope and long chronology lies in the project’s in-depth and carefully chosen case studies, which allow for comparison across distant contexts while simultaneously tracing the transfer of ideas, institutions, and practices of social action among the three regions. We have chosen to organize the research around a series of studies involving mobilizations of local actors on behalf of three groups of beneficiaries – children, working-class women, and veterans. By combining the bottom-up perspective of the triadic approach with the focus on three beneficiaries of social action, the project creates a clear grid that is enabling transversal and comparative analysis across the three borderlands. (And as everyone in this panel knows, comparative analysis is much more challenging than transnational) And the goal of all this, you might ask? To write a history of European welfare from the bottom up and out of Europe’s borderland regions.

Let me now present briefly a few central elements of my own case study, which I began researching several years ago on fleeting trips to Trieste that the virus then rendered impossible until just a few months ago. The material gathered thus far has allowed me to sketch out the bones of a Northeastern Adriatic case study that is focused primarily on children and, more obliquely, on their urban, small-town, and rural working-class mothers. Via this case study I hope to give you all an idea of how we are approaching our individual case studies and some of the themes we might deploy to link them conceptually in the larger Sociobord *enquête*.

## II

### Slide 1

The remainder of today's talk is drawn from my ongoing research on gender, social action, and politics in the northeastern Adriatic borderlands from ca. 1890 to the end of the 1970s, as it is unfolding in the context of the larger Sociobord project. While my research contends with nationalism and nationalist sentiments as one element among others in the lived experiences (and emotional registers) of local people in the fin-de-siècle Upper Adriatic, I nonetheless maintain a rigorously local and bottom-up approach to social conflict in the region, nationalist or otherwise, adopting instead a perspective that understands familial, associative, and local state actors as co-constructors of social welfare. I also adopt a situational approach to the contingent and unstable dynamics between state and non-state actors, state and civil society, during the region's long, complex and tumultuous transition from Habsburg periphery to Italo-Yugoslavian borderland on the northeastern Adriatic littoral.

### Slide 2

My principal organization - the *Opera Assistenza all'Italia Redenta* (ONAIR) - enjoyed an unusually long life in Italy's northeastern borderlands. Indeed, it managed to successfully navigate the numerous regimes which rose and fell in this highly contested border region from 1919 through 1978, all the while continuing to deliver social services, primarily nursery schools, school meals and medical services to young children and their families, especially their mothers.

### Slide 3

Today I will focus on the association's early years, a very dense and eventful period that lasted from mid-July 1919 to late October 1924. I use this exceptionally rich case study to explore how new borders and a new political order immediately manifested themselves in local welfare provision. I thus hope to offer a convincing and empirically-rooted demonstration of one pathway by which welfare practices shaped bordering processes (and bordering processes, in turn, shaped welfare) in an early 20<sup>th</sup>

century southeastern European border region that was at once a post-imperial space and a contact/conflict zone between Slovenians, Croatians and Veneto-speaking “Italians.”<sup>1</sup>

At the heart of this research lies the important, yet strangely understudied, nationalist mobilization of a small team of Italian nurses who were called by their colleague, the Duchessa Elena d’Aosta, to participate in her post-war project of humanitarian assistance to the upper Adriatic border region. which she initiated in the immediate aftermath of World War One. The 17 nurses whom she mobilized to jump-start her project were among those who had been called to serve with the first wave of 1,080 Red Cross Volunteers (“*crocerossine*”) during the opening weeks of Italy’s war. These women then spent the next four and a half gruelling years in frontline hospitals on the Alpine Front, where they risked life and limb, labouring under enemy fire to save the lives of men wounded in combat. Menaced day and night by artillery fire, by the very diseases they were fighting, or by the deadly nosocomial infections that stalked the wards, nurses often lost their lives in “their trenches.” Such was the fate of Elena d’Aosta’s close collaborator, the Marchesa Anna di Torrigiani, who succumbed on 30 December 1917 to the dreaded “deadly disease;” a nosocomial infection of the respiratory airways that medical staff picked up on the wards.<sup>2</sup>

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<sup>1</sup> There are several reasons why the Veneto dialect (which is *not* to be confused with Italian), mixes easily with Slovenian and Croatian which I will not go into here. Suffice it to say that the rhythm of speech in the three languages allows them to intermingle easily.

<sup>2</sup> CRI, *Infermiere morta per causa di servizio. Prima guerra mondiale* lists all 73 *crocerossine* who gave their lives during the war or died of wounds or illnesses contracted in the course of their service, including Anna Torrigiani (n. 67).

On 15 March 1917, the Duchess of Aosta received a Silver Medal for Military Honors. When the war finally ended, she sent a message to her volunteer nurses, whom she referred to as “Sisters of Mercy,” a term used by her husband on the day that her Silver Medal was conferred. Side by side with many other soldiers, at the centre of the first step of the Cemetery of Redipuglia, is the tomb of Red Cross volunteer nurse Margherita Parodi, with a short poetic phrase which the soldiers invite her to remain with them in death as in life: *A noi, tra bende, fosti di carità l’ancella.... Morte fra noi ti colse .... Resta tra noi sorella*



*To us amidst the bandages, you were the angel of mercy...Death plucked you from amongst us .... Stay with us sister*

In April 1919, the small band whom d'Aosta had summoned answered readily their charismatic leader's siren call as she urged them to join her in her ambitious post-war mission to the famished, bombed out civilian populations of northeastern Italy's large, and very recently acquired borderland region, long known as the Julian March.<sup>3</sup> Here, severe malnourishment had spread so widely after 1915 that most *Giuliani* were found, four years hence, to be suffering from high levels of chronic ill-health, due to their weakened condition. Once common maladies like diphtheria and typhoid fever, effectively vanquished during the previous half-century by new medical technologies (like child vaccination), and widespread infectious diseases like malaria, which had declined dramatically in the face of more effective treatments with quinine, began to surge once again across the Julian region during the second half of the war, spreading in waves so great that each wave could (and often did) fuel veritable epidemics of antique disease; relics of medical history for which contemporary doctors were ill-prepared, having to shake out old protocols for those which had been eliminated by vaccination while organizing treatment for resurgent tuberculosis and malaria on a mass scale at a time when everything, from medicine to food to buildings in which to administer care, was in critically short supply.

The guns had hardly gone silent before Italy's nationalist/irredentist politicians had immediately, and aspirationally, renamed the Julian March "*la Venezia Giulia*," thus sending a clear signal to the world that they fully expected Italy to be rewarded at Versailles for having joined the Entente in its "just war" against Teutonic aggression.<sup>4</sup> Meanwhile, the scant civilian population left

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<sup>3</sup>So named for Roman Emperor Julius Caesar, who used the region as a springboard for his invasions into the north and east of Europe (in the 2<sup>nd</sup> c AD). Four months after the defeat and withdrawal from Caporetto/Kobarid, Elena d'Aosta continued to visit frontline hospitals. But during these last two years of war, she began to broaden the scope of her inspection to the institutions for war orphans created on the spot with funding from the Italian heartland, in this case, Napoli. **14<sup>th</sup>. Feb. 1918** - *Naples – (or in Napoli ? ck) Orphanage...very useful ... it brings together male and female children aged between 3-12yrs., children of soldiers on the front who have lost their mothers or are abandoned. It is a nice place, but not appropriately located in the city-centre without a garden. The children are well-kept.* Perhaps d'Aosta had begun to reflect on her next mission – to kids – during that cold, post-Caporetto winter of 1917?

<sup>4</sup> *Venezia Giulia* thus took its place alongside *Venezia Tridentina* (as the northern Italo-austrian borderland was known in irredentist circles), making up the two new *Venezie* that would henceforth take up their historic destiny alongside *Venezia Vittoria* (a.k.a., Venice and the surrounding Veneto region), and so realize the irredentist dream of (re)uniting Italy's *tre Venezia* along the lines that Garibaldi had prophesied: From the alpine watersheds of the Dolomite Alps (Sud-Tirol/Alto Adige) eastward to the Julian Alps (*Venezia Giulia*) before turning sharply southeast to link up with the Dinaric Alps at the high karstic plateau of Monte Nevoso/Sneznik da Sviscaki (1.800 m), where the Isonzo/Soca river first rises. Deep in present-day Slovenia, just north of the frontier with Croatia, Monte Nevoso/Sneznik's broad slopes form a ring that joins the Orientale alpine system (Dolomites and Julian Alps) with those of the Dinaric range. Here, the long, winding, and interconnected alpine system turns abruptly south to form the dorsal spine of the Istrian peninsula, snaking southeasterly from Slovenian to Croatian Istria

standing after four and a half years of a harsh military occupation, with its endless requisitions of houses, animals or food, and frequent deportations of “suspect families” to concentration camps around Vienna, struggled hard to survive on the impoverished and somewhat depopulated landscape of the Julian March, reduced to a veritable wasteland by long years of constant bombardment and intense, prolonged combat. The endlessly energetic d’Aosta pressed her compatriots to return to those same desolate battlefields just seven short months after the shooting had ended (or at least died down), and all was at last quiet on the Alpine front. It was a bet so crazy that it carried the day. After hastily voting in support of d’Aosta’s new, humanitarian venture - appropriately named Assistance to Redeemed Italy (“*Italia Redenta*”) - the assembled company swiftly disbanded and headed off in search of a train, a boat, even a motor car, that might carry them back to the rubble-strewn slopes of *Venezia Giulia*.

#### *Birth of a charismatic leader*

Born in England in 1871 to Maria Isabella d’Orléans and Philippe d’Orléans, Princess Hélène d’Orléans of France was a direct claimant to the French throne, though the family had lived in exile in London since the revolution of 1848. On 25 June 1895, she married Emanuele Filiberto di Savoia, Duca d’Aosta in Kingston on Thames, just outside London.<sup>5</sup> The young Princess bride, now Elena di Savoia, duchessa d’Aosta, then left Britain with her new husband for the Franco-Italian borderlands of Piemonte/Val d’Aosta, where lay the lands that he would one day inherit as the rising Duca d’Aosta. Not long thereafter Elena bore two sons: Amedeo (1898), and Aimone (1900), both of whom would serve in the Italian (fascist) military.

Steeped in the culture of womanly duty, Elena d’Aosta felt a calling to serve both society and nation, a call that would ultimately lead her to seek training as a nurse. Though hampered by long years of struggle with tuberculosis, which she first contracted in 1907, d’Aosta pressed ahead nonetheless, determined to begin training for a career as a *crocerossina* as soon as Italy’s first training schools in nursing opened their doors, in 1908. In the meantime, she served her adoptive homeland by participating

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along the Dinarides peaks of Gorski Kotar and onto their final terminus in the long coastal range of the Velebit mountains, which bend back westward as they approach their ultimate destination: the Velebit channel as it pours into the Adriatic facing the islands of Rab, Goli Otok and Krk.

<sup>5</sup> The Duca d’Aosta would spend Great War as Commander-in-Chief of the 3rd. Armata (known as « Invicta »), fighting on the Karstic slopes above Trieste.

in emergency relief operations to vulnerable populations caught in such disasters as the deadly eruption Mount Vesuvius in 1906, or the catastrophic earthquakes that struck Reggio Calabria and Messina in 1908.

D'Aosta completed her medical training and obtained her diploma from Italy's first Red Cross school for volunteer nurses in Napoli in 1911; just in time to travel to the shores of Tripoli and participate in the Libyan War of 1911-1912.<sup>6</sup> Here, she joined several other aristocratic colleagues (notably Emilia Malatesta Anselmi, who soon become her closest friend and associate), serving shoulder to shoulder with them on the Red Cross hospital ship *Menfi*.<sup>7</sup> Driven by a strong social ethic that placed the well-being of others (especially those in need) ahead of her own, d'Aosta worked tirelessly to care for the endless stream of wounded soldiers who arrived day and night on board the *Menfi*. The sight of her tall, gaunt frame bent over the bed as she attended a suffering soldier offered her compatriots a noble lesson in the spirit of self-sacrifice and moved the hopelessly romantic

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<sup>6</sup> Because of her tuberculosis, the Duchessa and her family would never live in the damp, cold Piemonte/Val d'Aosta region, moving instead to the drier, sunnier climes of Napoli.

<sup>7</sup> Physically weakened by her constant, strenuous labors during the war, Emilia Anselmi fell gravely ill with the Spanish flu in early winter 2020 and swiftly succumbed on 9/02/1920. She was buried in the Verano di Roma Free Cemetery alongside her fellow "Heroic Italian Women decorated for bravery 1915-1918." » During the war, she had served as d'Aosta's right-hand woman, as secretary to the Inspector General. Together, they had taken the CRI's first training course for nurses in 1908. Anselmi then organized humanitarian aid after the Messina earthquake before serving on the *Menfi* during the Libyan war.

Long tournées in the war zone, courageous, determined and kind (good). The mothers of "our" soldiers came to recognize her, seeing her in all the war hospitals at both the front and the rear. One day in Trastevere, after the funeral of one of her nurses, a group of women from the district (rione)...surrounded Emilia, kissing her, and saying "Grazie, Signora, for all you have done for us. You and your nurses are like mothers to our boys up there at the front, where we cannot go...may you be blessed." When the war ended, she did not wish to grant herself rest until, back one day from visiting a patient stricken by the Spanish flu, she fell ill...then died on 9/02/1020. She was posthumously decorated with the Silver medal for military valor, which replaced the Bronze medal she had won previously.

"Seguendo l'ispettrice generale delle infermiere volontarie sino ai più avanzati ospedaletti da campo e alle ambulanze prossime alle linee nemiche, affrontò numerose volte con calma e sprezzo del pericolo i tiri delle artiglierie nemiche, preoccupata soltanto della sua nobile missione. Nel ripiegamento dall'Isonzo al Piave cooperò con abnegazione e coraggio al soccorso dei militari degenti e allo sgombrò degli ospedali, sottoponendosi, in ogni circostanza, a gravi disagi che le causarono penosa malattia per cui dovette, in seguito, soccombere. Zona di guerra, Agosto 1917-1918"

**22<sup>nd</sup> Jan**                      **1917**                      **Doberdò**                      **Health**                      **Section**                      **33.**  
*The village is completely destroyed, only the facades of some houses remain. One of these has had the roof repaired so as to suffice the Section. The doctor says that few injured and many who are have rheumatic fever come here. The fire on Doberdò is ongoing. Two or three days ago, a grenade fell on the Section and demolished it.*



aviator/poet Gabriele d'Annunzio to dedicate his sixth “Song of overseas deeds” (*Canzoni da gesta d'oltremare*) to “Elena di Francia,” whose story the canto recounts.

Several years later, when Italy entered the Great War on the side of the Triple Entente, the government swiftly dispatched Elena d'Aosta to the Trentino-Isonso battlefields along the Italo-Austrian border. Here, she would serve as Inspector General of Red Cross voluntary nurses from mid-May 1915 through the November 1918 ceasefire, completing 400 inspections in the first seven months of the war alone, and some 1.500 over following three years. It was a position of power/authority that would enable her to contemplate *in situ* (and at some length) the complex array of forces - military, religious, ethnic, or political – that were operating in the highly mixed upper Adriatic borderlands of Austria-Hungary's fast-crumbling Empire.

D'Aosta's serene bearing as she crossed back and forth across the front lines under enemy fire to visit thousands of camp hospitals and personally direct the 'bloody and pious' work of her volunteer “army” (some 8,500 *crocerossine* by 1917-18) won her numerous military decorations, including the Silver medal for military valour, three *croce di guerra* for bravery under fire, and the French *Croix de guerre avec la palme*: “from Trentino to the Isonso, the ever-serene and fearless charitable healer brought admirable comfort to our sick and wounded soldiers. Venturing into buildings that were on the verge of collapse, due to intense bombardment by enemy aircraft, she inspired in all whom she visited the highest virtue and faith.”

### **From Crown Princess to “Italy's Florence Nightingale”<sup>8</sup>**

No sooner had she been named Inspector General of Italy's *crocerossine* than Elena d'Aosta created her own, small executive body, calling upon two trusted women from her court, the Marchesa Anna Torrigiani, and la Duchessa Maria Caffarelli, to help her accomplish the enormous task of inspecting the hospitals where thousands of Red Cross volunteers toiled. The initial entries in her wartime journal outline in rapid, sober, and unadorned lines the magnitude of the task that lay before

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her: **27<sup>th</sup>. May 1915 Padua, military hospital:** “*the happiest and the dirtiest hospital one can imagine*” Here she found many badge-nurses whom she wished to dismiss, for “*they have qualified, but they know little or nothing.*” Having seen this dreadful situation repeat itself from one base-turned-hospital to the next, d'Aosta set about raising the quality of her “soldiers” by weeding out those who did not know how to assist and medicate professionally.<sup>9</sup>

But the problem ran deeper than one of incompetent staff, for those military bases which had been hastily converted to serve as hospitals for the wounded were simply not fit for purpose. Indeed, as d'Aosta underlined in her war diary, conditions in all base hospitals fell drastically short of the minimum sanitary conditions necessary to promote the healing of wounded or ill soldiers: **2<sup>nd</sup>. October 1915 Monastero - Hospital 075 of the Military Health system (located in a granary)** : “*There is no hygiene nor is there a change of bed-linen; there are some 70 patients with typhus and many with intestinal infections,*” wrote d'Aosta laconically of the typhus hospital in Monastero. « *There are no latrines, the sick have to go down to the courtyard; at night they evacuate in buckets without lids and without disinfectants behind a kind of screen in the corners of the granary. When the buckets are too full, they are poured from one floor to another by means of the uneven plank floorboards.*” D'Aosta pressed the upper echelons of the Military Health System to put in place more rigorous hygienic practices, for her goal was “nothing less than the transformation of the army bases into hospitals.”<sup>10</sup>

But by late summer 1915, d'Aosta could already see that effecting any such transformation would be a steep uphill job indeed. In those not-infrequent cases where the top brass proved resistant to making any further changes, the Duchessa simply bypassed the brass and carried her demands directly to Commanding General Cadorna, even to King Victor Emmanuel himself, when necessary.<sup>11</sup> Elena d'Aosta's fierce, *jusqu'au boutisme* recalls no one so much as her British “ancestor/soul sister” Florence Nightingale, who founded the modern nursing profession in the course of her dedicated service in the Crimean battlefields of the mid-1850s.<sup>12</sup>

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<sup>9</sup> They were instantly relieved of their duties and sent home from the front. S. Bartoloni “Italiane alla guerra- l'assistenza ai feriti 1915-1918,” Saggi Marsilio Ed. (Venezia, 2003)

<sup>10</sup> Elena D'Aosta *Accanto agli Eroi (Side by side with the Heroes)*, Croce Rossa Italiana Editore, (Roma 1930).

<sup>11</sup> As Supreme head of the armed forces, VE was the point where the buck stopped. Cadorna succeeded by Diaz.

<sup>12</sup> Vanni et al., *Op. cit.*, 715.

### III

When the first 18 volunteers from the *Opera Nazionale Assistenza all'Italia Redenta* (ONAIR), all of them women, arrived in Trieste in July 1919, they formed spearhead of a wide-ranging civilian relief initiative in the impoverished, war-torn, and conflict-ridden Venezia Giulia. Beyond the emergency distribution of food, clothing and medicine lay a longer-term socio-medical and educative project of ministering to the region's very poorest women and children with an eye to conquering their loyalties for Italy's expansive nationalist, and nationalizing program. As many of the organizations already active in the region targeted children of primary school age, particularly orphans (who made up fully 2% of the local population), *Italia Redenta* set its sights on a younger population, creating nursery schools where the women of *Italia Redenta* fed, clothed and educated – in Italian - the young children (aged 3-6) of local slavophone and mixed language families while offering their mothers paid work making clothing in the organization's numerous sewing and knitting workshops.

Brainchild of the Duchessa Elena d'Aosta, the ONAIR was, in its origins, an overwhelmingly female organization. In its early days, it was also an organization which drew many of its volunteers from Italy's social and political élites. This would soon change, as the aristocrats shifted the base of their participation from the Upper Adriatic back to Rome or their own home districts, replacing their well-heeled boots on the ground with long-distance financial and moral support, while the local ONAIR branch, whose seat was in Trieste, came to rely increasingly on women (and a few men) from the local middle and small-town lower middle classes.

The élite, largely aristocratic make up of ONAIR's first group of cadres (including a member of the royal family) signals that the association had close ties to the state and, as we shall see, to the army as well. While this may not fit everyone's idea of a civil society organization, it is by no means an isolated example in 20<sup>th</sup> century Europe.<sup>13</sup> Moreover, *Italia Redenta*'s close collaboration with the occupying army, and the *Commissariato generale civile* that succeeded it, reminds us of many forms that the "state" takes in borderland regions: imperial, absent, weak, occupying army, etc. I am particularly interested in grasping the complex and shifting relation between voluntary action and the

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<sup>13</sup> See James Hinton, *Women, Social Leadership and the Second World War: Continuities of Class* (Oxford, 2002) on the Women's Voluntary Service in Great Britain.

Italian state from the last years of Giolitti's national liberal régime through the fascist *ventennio* and beyond, into the early decades of the First Republic. For, among other things, the tale of *Italia Redenta* allows us to tell a very different story about the evolution of the Italian state, one that is told from the point of view of civil society actors who engaged regularly with that state and shaped some of its most important contemporary functions, namely, those of education and social protection. *Italia Redenta* also allows us to explore the processes of nation and state-building from the perspective of a heterogeneous and highly contested borderland, where the meanings of *italianità* (a term that combines ideas about “Italian-ness” and Italian culture) were of necessity rather different from those that were deployed in the Italian interior. The centrality of *italianità* to state and nation building during these years lay in the hope that stimulating people’s ways of doing and being “Italian” might deliver greater cultural unity to a nation that, sixty years after its unification, in 1862, remained a nation of regions, where people spoke dialects that were, in places, mutually incomprehensible. (*italianità* as cultural glue)

Let’s step back for a moment and take a quick look at the context in which these women arrived in (or returned to) this war-devastated region.

*Bringing emergency humanitarian aid to a devastated land, 1918-1922*

The Julian March, renamed “Venezia Giulia” by an Italian State which anticipated gaining full possession of the region in the post war, post-Versailles re-drawing of borders (1919-1920), had seen some of the most punishing battles of the war.<sup>14</sup> Indeed, the Isonzo/Soca river valley NW of Trieste had served as the primary battleground in the struggle between Italy and the Austrian half of the Empire. Farms, villages, and towns were repeatedly crisscrossed by the opposing armies, occupied by troops

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<sup>14</sup> The name “Venezia Giulia” derived from the irredentist claim that Italy’s true northern and northeastern boundaries were made up of the so-called “3 Venices”: Venezia Trentina in the north, Venezia (the city of Venice and the surrounding Veneto region), and Venezia Giulia in the northeastern Adriatic. Of the three only one – Veneto – belonged to Italy before WWI. Possession of the other two was a part of the irredentist dream of fulfilling Italy’s “true” borders, first invoked by Garibaldi, and then appropriated by irredentist nationalists toward the end of the 19<sup>th</sup> century. In May 1915, Italy extracted the promise of these lands in return for joining the war on the Triple entente side.

and often severely bombed, leaving thousands of civilians homeless or displaced even as the reach of Habsburg aid associations shrank dramatically.

#### Slide 4

The end of the war signaled the passage of this region from the southeastern fringes of the Habsburg empire to the newly formed Yugoslavian state, on the one hand, and the newly expanded Italian one, on the other. The recent history of war and imperial collapse profoundly destabilized local relations between state and civil society. Already frayed by 1916-17, thanks to growing wartime difficulties in provisioning regional towns – notably Trieste – the collapse of the Habsburg empire at the end of October 1918 led swiftly to a crisis in the rule of law and of the legitimate monopoly of violence. Nearly two weeks before the Armistice, striking workers were taking to the streets in the thousands while returning prisoners of war rioted, looting shops and warehouses in Trieste as early as 31 October.<sup>15</sup> While the occupying (Italian) army was able to control civil strife until its withdrawal in early August 1919, the *Commissario generale civile*, which remained in the region to represent Italian state authority, proved far less successful in quelling the recurring bouts of social and political conflict that wracked the entire region over the next three to four years. This created very difficult conditions of work for *Italia Redenta* activists, and, more importantly, shaped their understanding of what their nationalist mission to the Julian region meant in everyday, on the ground terms.

#### Slide 5

*Italia Redenta's* humanitarian action was also an eminently political/nationalist one, concerned with the “patriotic penetration” of Venezia Giulia’s slavophone population and their assimilation into the Italian nation via socio-medical assistance and language instruction, especially to the very young. “*In these lands where races, languages and diverse customs intertwine and where Italy’s name is still hardly known our Opera can be an element of harmony, an exception; the antithesis of that which the people feared. “Enemy peoples join now in brotherhood” is a modest but sure affirmation of the ties that will henceforth bind under the same flag the cities of the old Italy to their new Adriatic brothers,*” proclaimed Regional Inspector Clara Valli in January 1921, reiterating

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<sup>15</sup> Marco Bresciani, “The Battle for Post-Habsburg Trieste/Trst: State transition, social unrest, and political radicalism (1918-23),” *Austrian History Yearbook* (2021), 1-19.

the frequently expressed hope that Italy's "generous" aid would bring the "*allogene*" to love their new Patria.<sup>16</sup> In a region that had been laid waste by four years of war, ONAIR's initial campaign to "penetrate" the region via social action was facilitated by the extraordinarily widespread need for assistance of every kind and the inability of local institutions and authorities to meet that need on their own. Indeed, with the collapse of the Empire and consequent loss of its financial support, local authorities found themselves overwhelmed by the sheer depth and breadth of the misery that stalked their towns and villages. High levels of unemployment and infant mortality, thousands of orphaned and abandoned children, an illegitimate birthrate that was 3-4 times higher than the average for the rest of Italy and the widespread destruction of public and private buildings had filled their streets with hungry people, many of them women and children, begging openly or prowling in search of food. Under such conditions, municipal authorities often welcomed *Italia Redenta* whether or not they had reservations about the association's ulterior goal of "Italianizing" the region – as many of them surely did.

ONAIR's initial brief was assistance to *la prima infanzia* (babies and children under the age of 7) and their mothers.<sup>17</sup> Hence the initial focus on putting mothers to work while caring for their children in *asili nidi* (crèches/daycare centers) that were attached to those same workshops. In a region ravaged by malaria and tuberculosis, and beset by high levels of malnutrition, the women of *Italia Redenta* were immediately obliged to expand their mission to include badly needed medical services to mothers and young children. These latter were delivered via a network of dispensaries and walk-in clinics that were attached to several of the larger ONAIR nursery schools.

### Slide 6

Thanks to their shrewd policy of working in close collaboration with the *Commisariato Generale Civile* and the relevant municipal authorities, ONAIR activists were able to move with remarkable agility. Having already established an important beachhead in Trieste in early October, *Italia Redenta* went on in November to open four nursery/workshop/medical clinic complexes in several of the most important frontier towns – Gorizia/Gorica, Monfalcone, Tolmino/Tolmin,

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<sup>16</sup> Literally, "people of other genes" (i.e., foreigners).

<sup>17</sup> Naples orfanotrofo jan 1917 & idea for postwar project?

Gradisca.<sup>18</sup> Over the next five years, ONAIR would function as a kind of nursery school start-up, organizing schools and polyvalent health, education and welfare centers in fifteen towns, villages and port cities from the Alto Isonzo to the Adriatic shore. Alongside their “start-up” activity, *Italia Redenta* offered material and technical assistance to a wide range of existing socio-medical and educational institutions across the entire region. These latter were chosen with an eye to supporting those structures that might affect the life-chances of very young children, who were the *Opera*’s central concern.<sup>19</sup>

*Why a Brefotrofo? Using social assistance to mark the post-imperial littoral as “Italian” space*

*Italia Redenta* activists were particularly concerned with the harsh fate of the region’s many illegitimate babies, who were either abandoned at birth by their young, unmarried mothers or thrown onto the streets with their mothers by families for whom both mother and child were a daily reminder of the shame that their daughters’ “illegitimate unions” had brought onto the entire household:

“The problem of infants born and abandoned in misery is of particular interest to the “ONAIR” which, while carrying out its action in this region, has often witnessed the lacerating spectacle of a baby abandoned at birth, or a young mother and her infant, rejected by her family because the child is the fruit of an illegitimate union,” wrote the ONAIR’s Regional Inspector in December 1921. “There are no hospitals to receive them, no assistance of any kind and they have no hope of sustaining themselves <through work> in order to support Another Being.”<sup>20</sup> The lack of homes for abandoned children (*brefotrofi*) in these formerly Habsburg lands spurred the ONAIR to set up a modernized version of this traditional Italian institution: the “*Casa □ aternal*,” in a small hospital abutting the organization’s headquarters. Here, 16 mothers, most of them unwed, and 22 nurslings, some of them orphaned or abandoned, were housed and cared for by ONAIR’s trained staff.<sup>21</sup>

Pressed by the desperately poor public health conditions in the region, *Italia Redenta* pioneered two forms of social assistance that were new to Italy at the time. The first of these was the

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<sup>18</sup> Archivio di Stato di Trieste (AST) Fondi ONAIR, Ex-scatola 1, busta 3, Clara Valli “Riassumendo l’attività dell’Opera dall’approvazione dallo Statuto <sept 1919> sine (sic) ad oggi”, 1920

<sup>19</sup> AST/ONAIR/Ex-scatola 1/Busta 1 *Statuto*, settembre 1919.

<sup>20</sup> AST/ONAIR/Ex-scatola 1/Busta 3, Clara Valli, “Assistenza all’Italia Redenta” 29 dicembre 1921, text for publication in the triestine daily *Il Piccolo*, pp. 1-2.

<sup>21</sup> *Ibid*, p 2. By 1923, the number of nurslings would rise to 30.

nursery school complex, which placed the school at the heart of a larger, polyvalent health, education and welfare center; an unusual structure that doubtless owes its shape to the fact that the initial organizers and leaders of this socio-educational initiative were nurses rather than teachers. The second was the *Casa □aternal*, many of whose novel structures of mother and infant welfare would be faithfully reproduced some five to ten years later by fascist Italy's premier child welfare organization, the *Opera nazionale maternità e infanzia* (ONMI).

#### Slide 7

Like the Liberal-National government in Rome, and its regional representatives in the *Commissariati generale civili*, the first wave of ONAIR activists understood the Venezia Giulia's particularity in part through its Habsburg heritage of law and custom. This emerged clearly in discussions of the *Casa □aternal*, which was hastily installed to meet what struck ONAIR activists as a crying need for *brefotrofi* in a land where there were none. Though well aware that, under still-valid Habsburg law, unwed mothers and their families had the right (if rarely the means) to sue the fathers of their illegitimate children for child support, ONAIR activists did not turn their efforts to supporting paternity suits. Rather, they opted to support unwed mothers through practical measures like shelter, food, medical care and, eventually, the opportunity to earn a small wage.

#### Slide 8

The decision to implant an updated/modernized version of a traditional Italian institution – the *brefotrofi* – rather than giving unwed mothers free legal assistance to pursue the absent fathers under still-valid Habsburg law also signals the ONAIR's larger ambition: to reframing single motherhood as a **moral** question rather than a legal one. Rather than seeking redress in the courts, unwed mothers and their infants were to be cared for (and disciplined) by the community.

#### Slide 9

ONAIR's welfare strategy regarding unwed mothers was thus a way to **mark the terrain politically**, and to announce the arrival of a **new moral and political order in the Venezia Giulia**, grounded in the modernization of a traditional Italian and Catholic instrument of disciplinary care while supplanting (and effacing) the technically still-valid Habsburg option (paternity suits). It was, in other words, a way to Italianize via new models of social assistance these post-imperial Habsburg



borderlands. “If the *Opera* can build this, the only nursling hospital in Trieste and then implant twelve more like it in the Venezia Giulia, *Italia Redenta* will have given a benefit of unquestionable value to this region,” wrote Valli to the Executive Council back in Rome, hoping to gain both moral and financial support for this unexpected venture, taken on Valli’s initiative when the opportunity to create such a hospital presented itself.<sup>22</sup>

But this was not to be.

#### Slide 10

For in early December 1922, just weeks after the fascist March on Rome (24-29 October) and Mussolini’s (forced) ascent to President of the Council of Ministers, Elena d’Aosta announced to her team a radical shift in ONAIR’s strategy: henceforth, the organization would relinquish all institutions established in urban centers like Trieste or Gorizia, where the population was already largely Italian-speaking (even though their first language/language of use was likely to have been Slovenian, German, Hungarian, Croatian, Czech, Greek or Serbian) and focus their action exclusively on more remote rural and small-town areas, where non-Italian-speakers constituted an important, even dominant percentage of the population. As a consequence, initiatives like the *Casa materna*, no matter how successful or badly needed, would cease to be a part of ONAIR’s brief. Henceforth, the association would be confined to creating and running Italian language nursery schools targeting slavophone and mixed language children in particular, in accordance with the new government’s plans for implementing more forcible strategies of assimilation in Italy’s new frontier regions.

#### Slide 11

In late March 1923, ONAIR handed its *Casa materna* over to Trieste’s Association for the defense of minors, over loud objection from Valli. This association quickly transformed the Casa Materna into an orphanage, leaving unwed mothers outside the ambit of care (and social discipline). Valli objected one last time, then resigned and disappeared from the organization altogether.<sup>23</sup> Her last trace in the ONAIR archive coincides with her last day of service, on 30 April 1923, when she was

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<sup>22</sup> Collaboration with local pediatrician Prof Jacchia, who was also the prez of the *Opera pro-Orfani di guerra*

<sup>23</sup> She returned to Rome to work in a hospital, which always been her long-term plan for her post-ONAIR career.

officially replaced by her assistant, Edvige Costantino, whose ideas about ONAIR's mission in the region were more congruent with those of the new fascist regime (which was itself still in the making).<sup>24</sup>

### Slide 12

Six months later (October 1923), the Gentile reform of the Italian education system placed the *scuola materna* (infant school) at the core of early childhood education, transforming daycare (*asili nidi*) into schools of the “preparatory grade” for elementary education. Autumn 1924 saw some further changes in ONAIR's central executive body in Rome, followed by the association's promotion on 24 October 1924 to the status of an *Ente morale* (parastatal agency) entrusted with delivering nursery school education in Italy's new frontier regions.<sup>25</sup>

### Slide 13

If Italy's postwar occupation of the formerly Habsburg littoral had provoked one sea change in the kinds of welfare services provided in the region, the political crisis of autumn 1922 soon provoked another. For Clara Valli's loss in the face of Rome's new masters marked a profound shift in the orientation of ONAIR's Upper Adriatic branch. Hence, the conflict that suddenly erupted over the *Casa materna* in Jan 1923 was not a minor conflict on the road to ONAIR's self-appointed destiny as the Upper Adriatic's primary nursery school provider. On the contrary, it was a defeat that interrupted the previous, more “organic” development of this polyvalent aid organization under Clara Valli's adroit leadership (including her on-the-ground agility in forging opportunistic alliances such as the one she struck with Pr. Jacchia in winter/spring 1920) and reset that development on a more narrowly focused path; one that was dictated not by local needs, desires and opportunities but rather by the new national government's plans for implementing more forcible strategies of assimilation in Italy's new frontier regions. Over the next 20 years, ONAIR would steer its own path in the space between the fascist government in Rome (which paid the bills), and local fascist notables, especially

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<sup>24</sup> Valli shared her doubts about Costantino's capacity to take on the demanding role of Regional Inspector with the Giunta esecutiva in Rome, before she left, and many on the Giunta seem to have agreed with her. Hence, the Giunta appointed E Costantino on a temporary, trial basis on 30 April 1921. Fifteen months later, she was still on trial, and would be replaced a few months hence by Adele Spini (ck precise date)

<sup>25</sup> In 1927, d'Aosta's willingness to change course and focus the ONAIR more narrowly on furnishing public nursery schools to Italy's impoverished north and northeastern borderlands was rewarded with the gold medal of the most meritorious in public education. G. Biadene, “L'Opera nazionale di assistenza all'Italia redenta,” *Illustrazione Italiana* n 17 (1930)

mayors and municipal councils in Slovene, Croatian or mixed language districts, who eagerly sought ONAIR's services in their desire to offer their rural working-class electorates Italian-language nursery schooling for their 3-6-year old children (recall that both mothers and fathers worked fulltime and then some in these poor agricultural households) while amplifying their village infrastructure as proof that they and the villages they ran were ardently modernizing, and therefore to be counted among those fascist towns (*comuni*) worthy of the name.

### *Concluding questions/remarks*

- 1) As the extracts from d'Aosta's wartime journal make clear, the nursing profession in fin-de-siècle Europe demanded hard physical labor, and a strong stomach. As such, its ranks were generally filled with working and middle-class women. Italy was an exception to this rule, along with Greece, Portugal, Romania, and Spain, where aristocratic women took on the physical labor and acquired the medico-technical qualifications necessary to do the job properly. In so doing, they repurposed a profession which, in countries like France and the UK, was already creating a transmission belt to upward mobility for working- and middle-class girls by the turn of the 20<sup>th</sup> century. Nursing was thus **appropriated by women aristocrats of Mediterranean and central/southeastern Europe after 1900 as a way to make élite women relevant in a world that had no use for idle aristocrats, particularly female ones** (seen as conspicuous consumers with who made no counterbalancing contribution to the public good via military or political action, unlike their male relatives). By acquiring medical expertise and undertaking the often-backbreaking labor that nursing entailed, élite women sought to **rebrand themselves, to project a new image (and so forge a new social reality) in which highly qualified aristocrats like d'Aosta - fearless, strong, tough, hardworking, and dynamic – would replace the idle aristocrats of yesteryear, who'd languished, uneducated and bored on their sofas reading novels and eating bonbons** (see Balzac for a royal skewering of Europe's post-Napoleonic idle rich).
- 2) The story of ONAIR's early years also draws our attention to the **central place that élite women held in mixed economies of welfare that were driven by royal and/or state actors**. As aristocratic and upper bourgeois social actors (nurses, teachers, social workers) who had direct connections to royal families, and/or to State or Army officialdom, usually by strategic marriages to generals in Europe's

most important militaries (from which talent pool nations often drew their highest state officials - prime ministers and the like), these élite women stood at the heart of royal and state-driven mixed economies from the late 19<sup>th</sup> c until well after 1945, particularly in south and southeastern Europe.<sup>26</sup> How are we to understand these state/army/royal foundation-driven encounters with the larger associative sphere in the context of Europe's mixed economies of welfare, within which they arose and operated on behalf of the public good? Prevalent in the Italian, Greek, Spanish, late Ottoman/Turkish and British contexts, among others, such encounters allow scholars to peer through the lens that mixed welfare economies provide and shed new light on processes of state and nation-building in late 19<sup>th</sup> and early 20<sup>th</sup> Europe.

3) How are we to understand this type of state/voluntary welfare association encounter in comparison with another type of encounter that is central to an important subset of Europe's mixed welfare economies, namely those featuring the **Roman Catholic church and its increasingly active army of lay associations in fin-de-siècle Europe**? For the Roman Catholic church has played an outsized role in building modern and contemporary welfare systems in Europe, and the very Catholic Italo-Slovene-Croatian borderlands of the Northeastern Adriatic were no exception here.<sup>27</sup> It is vital to recall that **the Church has long been a potent transnational actor, delivering social care (orphanages, schools, hospitals, etc.) across Europe** since the late Middle Ages (14<sup>th</sup> century - present). Some interesting dynamics may well emerge when team Sociobord begins comparing case studies featuring state driven mixed economies with religious, especially Roman Catholic driven ones.

4) We have much visual evidence suggesting that her work/calling as a *crocerossina* played a key role in shaping Elena d'Aosta's subjective sense of herself. In official photos, for example, d'Aosta always wore her wartime decorations, which she pinned onto her nurse's uniform, over her heart. And, after winning her diploma, in 1911, d'Aosta wore her uniform constantly, as did many of her friends and colleagues (of whom there are also many photos). Cumulatively, this evidence indicates that Italy's aristocratic women, too, held the values of the military aristocracy from which they had sprung, or into which they had married. These values were closely linked to turn of the century crusades against

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<sup>26</sup> Such as doubly royal Elena d'Aosta, who was born into France's royal famille d'Orléans, then married into Italy's equally noble di Savoia clan.

<sup>27</sup> Though local anti-clericalism meant such action took the form of lay Catholic associations, more than direct action by the clerical hierarchy, especially in Trieste)

secularism, and to defending the Roman Catholic Church's key role in public civil society institutions of health, welfare, and education.

The entanglement of the Catholic struggle against secularism and “modernism” with the nationalist defence of national territory against greedy and aggressive neighbours thus conspired to make aristocratic women's nursing an integral part of Italy's war on both the practical and the ideological level. It should come as no surprise, then, that the CRI, the Italian government, and its military all lauded the exemplary “heroism, piety, and noble spirit of sacrifice of Italy's “first nurse” (Elena d'Aosta), for they all shared the same understanding of the nature and significance of these noblewomen's frontline service. As *La Croce Rossa ricorda* wrote of d'Aosta in 1926 “During the War of Redemption, 1915-18, Her Royal Highness Elena di Francia Duchessa d'Aosta served as Inspector General of the *Croce Rossa Italiana* nurses. Aware and informed as a leader, valiant as a soldier, consoling like a mother, d'Aosta rose and led the pious cohort of women, watching over the wounded, and over the nurses, from the territorial hospitals to the frontlines of battle.”<sup>28</sup> The number of number of medals and military decorations these 8.500 women received for their wartime service merely underscores this point: 54 silver medals and 190 bronze for exceptional military valor and at least 30 *croce di guerra* for bravery under fire.<sup>29</sup>

5) As today's paper hints, my own case study will offer some novel points of entry into a final set of questions regarding the **complex relationship of Italy's liberal nationalist élite to the gradual rise of fascism after the war, and to understanding the very different dynamics governing the precocious “frontier fascism,” which stirred as early as 1919-1920 in the Venezia Giulia, versus the forms that would gradually take shape in the national capital after Mussolini's October 1922 March on Rome.** ONAIR is proving to be a valuable observatory from which to explore the tensions- and convergences – between the two, as well as to consider the underestimated role that a certain brand of pro-monarchical/pro-aristocratic sentiment may have played in enabling or maintaining the popularity of fascism in Italy's new provinces.

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<sup>28</sup> *La Croce Rossa ricorda (The Red Cross remembers)*, (Roma,1926).

<sup>29</sup> *La mobilitazione femminile nella Grande Guerra. Vol. 2: crocerossine e le dottoresse*, al curo di Costanza Arcuri, Paolo Gaspari e Alessandro Gradenigo, Gaspari (2019).