


ARTICLE

“Iranian Conditions: Health Problems and Medical Practices in the Words of the Staff of the Alliance Israélite Universelle, 1900–1950”

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Abstract

The staff of the Alliance Israélite Universelle (AIU), an international educational philanthropy, were professionally and personally buffeted by health and medical concerns. This article examines the value of their letters, arguing they serve as a deep reservoir of biased yet valuable evidence that corroborates other sources while also providing insight into the health and disease conditions of Iran’s provincial cities. This article also asks why, in the early twentieth century, AIU staff failed to acknowledge Iranians who were similarly invested in medical services and public hygiene. Ultimately, the letters help scholars witness historical evolutions in Iran and in the AIU staff’s understandings of the Iranian social and medical landscape they inhabited.

Keywords: Alliance Israélite Universelle; Iran; health; medicine; hygiene; Jews; modernization; letters

In 1902, Moïse Hayon, a young schoolteacher in Isfahan, Iran, reported to his employer, the Alliance Israélite Universelle, a French-Jewish international philanthropy running Jewish schools throughout the Middle East, that “one of the prejudices of our Persian coreligionists consists of never eating melon and honey together, under the pretext that it is a violent poison.”¹ In June of 1904, Isaac and Rebecca Bassan, directors of the AIU schools in Hamadan, abruptly took their young children and abandoned their posts to escape a cholera epidemic sweeping through the city. Their replacement reported on the waves of illness keeping staff and students out of school.² In 1908, the AIU boys’ school director in Shiraz, Joseph Lahana, reported that a European doctor provided a free medical consultation, and the school “took on the aspect of a true hall of miracles.”³ And in 1932, Bathia Brasseur Cuenca, another young school director working in Isfahan, reported internal postnatal complications and forwarded a letter from the local Church Missionary Hospital certifying that she would be “unable to attend school for 3 months.”⁴

The lives of the teachers and school directors working for the Alliance Israélite Universelle (AIU or “Alliance”) were buffeted by medical concerns and dangers to their health. The staff wrote thousands of letters to the AIU’s Central Committee concerning all aspects of the schools’ operations. These included quasi-ethnographic descriptions of the

¹ Moïse Hayon to AIU, March 16, 1902, 1457, Iran I C 3, Collection 04, AIUAH.

² Barmaïmon, “History of the AIU School in Hamadan,” 29; Moïse Benghiat to AIU, July 12, 1904, Iran II E 26, Collection 18, 422–427, AIUAH.

³ Joseph Lahana to AIU, June 4, 1908, 8, Iran I C, Collection 3, AIUAH.

⁴ Church Missionary Hospital to AIU, December 2, 1932, 187, Iran VI E 65, Collection 22, AIUAH.

health ailments and healing practices of the Iranian Jewish communities in which they were working and reports of the measures staff took as part of the AIU's *oeuvre* to address these communities' medical issues. They wrote as much or even more about their own health problems—both physical and mental—such as disease, difficult pregnancies, and work-related exhaustion.

The letters of the Alliance's teachers and directors constitute a fascinating, abundant, and little-accessed source of observations about disease, popular health-related culture, and medical practices during the Alliance's eighty-year presence in Iran, from 1898 to 1978. At the same time, these letters are also highly subjective, revealing strong Francocentric bias and investment in the AIU's particular *mission civilisatrice*—the “civilizing mission” to “[re]make] the Eastern Jew in the idealized image of the emancipated Western Jew.”⁵ This bias expressed itself in distressed reports of students' and other Iranian Jews' sickly and dirty appearances, the promotion of Western medical remedies, and a disdainful attitude toward “the superstitions of Persia.” Moreover, in the earlier decades of the twentieth century, the letter-writers failed to evince any awareness of those Iranians who shared both their concerns for hygiene and public health and their aspirations for modernizing education and health care delivery.

This article evaluates early-to-mid twentieth-century AIU letters as source material, arguing that such correspondence serves a valuable function by supplying data and corroborating other sources to help deepen our understanding of the changing health and medical landscape in Iran, particularly in the provincial cities where many staff were posted. However, given the evident bias, scholars need to weigh the value of the letters by: first, attempting to understand the personal and professional conditions with which the letter-writers were grappling and that shaped their discourse; and second, examining the features of the correspondence that changed over time.

The article also asks why the early twentieth-century letter-writers make so few references to Iranians similarly dedicated to improving public health or engaged with modern Western medicine. Indeed, an emerging segment of Iranian society was equally preoccupied with combating and preventing disease as one plank in a larger modernization project.⁶ I contend that cultural biases and colonial subjectivity—although those existed in abundance—do not provide a complete explanation for the apparent rift between the two groups. Rather, in the earlier decades of the twentieth century, most AIU staff were socially and spatially removed from Iranian discussions of medical modernization and public health reform. This distance was not only due to language barriers, as many directors had access to interpreters and regularly reported conversations with high-ranking Iranians such as prominent religious leaders and government officials.

The likelier explanation for the absence of such reformers in AIU correspondence lies in the unevenness of the landscape of modernization, particularly in the provinces in the volatile first quarter of the twentieth century.⁷ This was a dynamic situation, however, which began to change by the late 1920s, as more Iranians who had studied in Europe returned. It changed even further in the 1930s and 1940s, as medical institutions were developed and the professionals working in them, such as hospital directors, came into view of the Alliance staff. Readers looking at AIU correspondence over several decades can see this change reflected in the letters.

Scholarship on the AIU in the last thirty years has understandably and importantly emphasized its colonial and “civilizing” features, which were rooted in a combination of racialized prejudice—that viewed Middle Eastern and North African Jews as degenerate, unhygienic, and oppressed—and the regenerative, emancipatory, and “modernizing”

⁵ Rodrigue, *French Jews, Turkish Jews*, xii.

⁶ Schayegh, *Who Is Knowledgeable Is Strong*; Ebrahimnejad, *Medicine in Iran*, chaps. 2–3.

⁷ See my parallel argument about the AIU and Constitutionalists during the 1906–1911 Constitutional Revolution in Headrick, “Web in the Tempest.”

ideology of a new Jewish international *solidarité*.⁸ Reading the AIU letters through the lens of health and medicine certainly does not contradict this overall impression. However, a closer reading reveals the ways in which the performance of prejudice, alongside all the other information conveyed, was shaped by the AIU staff's contentious relationship with its headquarters in Paris. The correspondence is multi-layered, messy, and emotionally charged; and it was almost always a vehicle for a material personal and professional agenda. Moreover, the letter-writers' biases and motivations could operate in multiple directions at once: AIU staff were just as motivated to demonstrate their effectiveness by reporting positive interactions with Iranians who could help advance the AIU's mission—by protecting the Jewish community or providing resources for its students—as they were to valorize the superiority of the AIU's worldview by focusing on Iranians' purported deficiencies.

Within Iranian history, the last two decades have seen an efflorescence in the studies of health and medicine and religious minorities, yet the AIU letters remain an untapped resource in the case of first and under-utilized in the case of the second.⁹ Scholars on health and medicine have quantified the cataclysmic impact that epidemics, famines, wars, and revolution had on the lives and health of the Iranian population in the context of Iran's de facto semi-colonial status.¹⁰ Health and medicine have additionally supplied powerful lenses through which to evaluate transformations in Iranian society, including changes to gender roles, homes, streets, work, buildings, schools, knowledge production, constitutionalism, and class formation.¹¹ Meanwhile, scholarship on Iranian Jews contextualizes their experiences within that of other minorities and emphasizes Jews' upward mobility, agency, and participation in Iranian society, particularly in the post-World War II period.¹²

The AIU letters constitute a contribution to the intersection of these two fields. While the letter-writers could not see past their own spatial, temporal, and cultural horizons, and while the content and tone of what they shared was shaped by their own concerns and agendas, the letters nonetheless provide a vivid and personalized picture of day-to-day life on the ground in the context of minority communities in Iran's provincial cities.

Before examining the letters in detail, this article provides an overview of the histories of health, medicine, and Jews in Iran followed by an approach to understanding the AIU letters in the context of the organization's internal politics and ideology around health and hygiene.

Overview of the Health Landscape in Iran

In 1898, at the time of the AIU's arrival in Iran, there was little in the way of a medical or public health infrastructure recognizable to the AIU, reflecting both the thinness of the Qajar state (1789–1925) and the AIU's general lack of awareness of Iranian intellectual elites who shared its modernizing and reformist concerns.¹³ There was one Western-style medical school in Tehran, Dar al-Fanun, and a few European or European-trained Iranian doctors. Western doctors who traveled in Iran reported a high level of demand for their medical

⁸ Rodrigue, *French Jews, Turkish Jews*; Cohen, "Iranian Jewry"; Parks, *Medical Imperialism*; Malino, "Prophets in Their Own Land?"; Sciarcon, *Educational Oases in the Desert*; Malino, "Oriental, Feminist, Orientalist"; Leff, *Sacred Bonds of Solidarity*.

⁹ Works that cite AIU correspondence include Cohen, "Iranian Jewry"; Farah, "The School Is the Link"; Headrick, "A Family in Iran"; Nissimov, "Jews in Early 20th Century Iran"; Rostam-Kolayi, "Origins of Iran's Modern Girls' Schools."

¹⁰ Majd, *The Great Famine*; Afkhami, "Compromised Constitutions"; Afkhami, *A Modern Contagion*.

¹¹ Kashani-Sabet, *Conceiving Citizens*; Ebrahimnejad, *Medicine in Iran*; Floor, *Public Health in Qajar Iran*; Schayegh, *Who Is Knowledgeable Is Strong*.

¹² Sanasarian, *Religious Minorities in Iran*; Hosseini, *Ethnic Religious Minorities in Iran*; Farah, "Forming Iranian Jewish Identities"; Rostam-Kolayi, "Origins of Iran's Modern Girls' Schools"; Sternfeld, *Between Iran and Zion*.

¹³ Headrick, "Web in the Tempest."

services among poorer Iranians.¹⁴ During the nineteenth century, Iran experienced recurring plague epidemics and, between 1821 and 1903, seven cholera epidemics.¹⁵ Smallpox was endemic and, along with diarrhea, one of the main killers of small children, despite the fact that smallpox vaccinations were nominally mandated for children from 1851.¹⁶ Iranians suffered from measles, diphtheria, gangrene, malaria, and waterborne intestinal diseases.¹⁷ As detailed below, AIU staff reported encountering widespread instances of scalp and eye diseases such as scabies, ringworm, lice, and trachoma. Famines in the late nineteenth century and revolution and war in the early twentieth exacerbated Iranians' susceptibility to disease, and Iran was proportionally one of the countries hardest hit by the 1918–1919 influenza pandemic, losing between 8–21% of its population.¹⁸ However, even in times of peace, the cross-pollution between water sources used for drinking, waste, and bathing—including water used for bathing the dead—made ordinary life hazardous.¹⁹

The Qajar regime was not unaware of these connections. As Firoozeh Kashani-Sabet points out,

the prevalence of epidemics correlated with the low level of public hygiene in Iran. These conditions impelled Qajar thinkers to expound on cleanliness, medicine, hygiene, and physical fitness in their works...Although Qajar officials often took necessary steps to improve sanitary conditions, the efficacy of disease control procedures sometimes varied from region to region.²⁰

Meanwhile, throughout much of the nineteenth and into the early twentieth century, Iranian medical practitioners were in the midst of a slow but significant transition from Islamo-Galenic and miasma-based understandings of sickness toward anatomical pathology. (European doctors likewise did not abandon Galenic medicine immediately, as some still referenced it in the late nineteenth century.)²¹ According to Hormoz Ebrahimnejad, both the increased frequency of epidemics and modernization of the military “introduced a new vision of the relationship between medicine and the state and between patients and physicians via the issue of the epidemic or contagious nature of diseases.”²² This vision in turn led to the gradual standardization of the medical profession and heightened interest in advances in germ theory coming from Europe. As a result, Cyrus Schayegh contends, an Iranian middle class emerged not only as an economic cohort, but also one bound together by a certain epistemology of rationality, science, and modernity: “Professionals’ control of the science of hygiene mirrored the modern middle class’s more general mission to educate the lower social strata, which knew nothing about health, disease, and the principles of modern hygiene—a condition fatal for Iran’s population growth.”²³ This attitude closely resembled the outlook of the Alliance teachers. While a disproportionate number of doctors and pharmacists in Iran were Jews, the AIU letters overlooked them, instead focusing on the desperate state of Iranian Jewish communities and the AIU’s unique ability to support them, sometimes with the help of European doctors.²⁴

Iran experienced halting progress in medical knowledge and institutional development in the early Constitutional era (1906–1914), but the country was torn apart during World War I. British and Russian armies inflicted mass starvation, causing millions of deaths by

¹⁴ Mahdavi, “Shahs, Doctors, Diplomats and Missionaries,” 184.

¹⁵ Kashani-Sabet, *Conceiving Citizens*, 15; Floor, *Public Health in Qajar Iran*, 18.

¹⁶ Floor, *Public Health in Qajar Iran*, 38, 52; Ebrahimnejad, *Medicine in Iran*, 95.

¹⁷ Kashani-Sabet, *Conceiving Citizens*, 36–38; Floor, *Public Health in Qajar Iran*, 31–32.

¹⁸ Afkhami, “Compromised Constitutions,” 391.

¹⁹ Kashani-Sabet, *Conceiving Citizens*, 19; Floor, *Public Health in Qajar Iran*, 60.

²⁰ Kashani-Sabet, *Conceiving Citizens*, 18–19.

²¹ Ebrahimnejad, *Medicine in Iran*, 81.

²² Ebrahimnejad, 28.

²³ Schayegh, *Who Is Knowledgeable Is Strong*, 120.

²⁴ Floor, *Public Health in Qajar Iran*.

requisitioning all food supplies, spreading cholera, and introducing the new “Spanish” influenza. Amir Afkhami characterizes Iran as a “failed state by the end of the war, with most of its population diseased or dead, its treasury empty, and its central government unable to project power beyond Tehran’s city limits.”²⁵ Nonetheless, the Iranian government convinced the Pasteur Institute to establish a satellite branch in Tehran in 1921 in order to train Iranian medical students, host a laboratory for microbial analysis, and produce cholera serum and smallpox vaccine.²⁶ Under Reza Pahlavi, the Iranian Cossack Brigade officer who took power in a coup in 1921 and crowned himself shah in 1925, Iran wrested control of its Sanitary Council and quarantine centers away from Great Britain and moved toward nationalizing health care delivery and establishing municipal-based medical and public sanitation departments.²⁷ Progress was uneven. On the one hand, Iran successfully thwarted new cholera outbreaks in the 1920s and 1930s, preventing full-blown epidemics.²⁸ On the other, efforts were concentrated in cities; and as late as 1949, infant mortality still exceeded 50 percent.²⁹ Under the new shah, Mohammed Reza Pahlavi, the government instituted three multi-year development plans between 1948 and 1967 to construct hospitals, invest in nationwide medical training for doctors and midwives, and prevent and treat disease. Yet in rural areas such as Khuzestan, according to Bryan Sities, “mid-twentieth century public health planners gave priority to economic goals over social well-being...Although villagers desired health care, state public health programs were often nonexistent, incomplete, or misapplied.”³⁰ Throughout the uneven transformations in Iran’s health landscape in the first half of the twentieth century, AIU staff availed themselves of whatever resources they could marshal from abroad and within the country in order to wrestle with the dangers that disease and poor sanitation posed to their students, their own families, and the Iranian Jewish communities within which they worked.

Jews in Iran

While Jews have lived in Iran for over 2,700 years, they were still a tiny minority at the turn of the twentieth century: at 40,000–50,000, they constituted only 0.4 percent of the country’s population.³¹ Jews tended to be concentrated in larger cities, such as Hamadan, Shiraz, Isfahan, and Tehran, but there were also almost thirty communities around the country in towns of varying sizes, such as in villages around Shiraz and Tabriz.³² Like most Iranians, the vast majority of Jews were extremely poor; for their livelihoods, they engaged in low-level trades such as peddling, spinning thread, and weaving carpets. A small number were wealthy and worked as merchants and physicians.³³

Jews were one of several religious minorities, including Baha’is, Armenian and Assyrian Christians, and Zoroastrians. These groups were fairly small as well, with Baha’is numbering around 100,000, Zoroastrians numbering 10,000–15,000, and Armenians and Assyrians around 80,000–90,000 each.³⁴ Together, these minorities constituted approximately 3 percent of Iran’s population. Jews, along with Christians and Zoroastrians, were recognized

²⁵ Afkhami, *A Modern Contagion*, 160.

²⁶ Afkhami, 162.

²⁷ Ebrahimnejad, *Medicine in Iran*, 157.

²⁸ Afkhami, *A Modern Contagion*, 166.

²⁹ Sities, “Sanitized Modernity,” 48; Kashani-Sabet, “Iran’s Population Policies,” 201.

³⁰ Sities, “Sanitized Modernity,” 45.

³¹ Tsadik, “Nineteenth-Century Iranian Jewry,” 276. In contrast, at 53,000, the Jewish population represented one-third of the entire population of Baghdad. See Sciarcon, *Educational Oases*, xxvi.

³² Farah, “Forming Iranian Jewish Identities,” 30–31; Joseph Lahana to AIU, July 14, 1907, Iran I C, Collection 3, 39–44, AIUAH; L. Descos to AIU, November 1, 1906, 6–7, Iran Carton 636, Collection 05, AIUAH.

³³ Gleave, “The Clergy and the British,” 57.

³⁴ Abrahamian, *A History of Modern Iran*, 19; Ringer, *Pious Citizens*, 22; Rafati, “Bahaism: V. The Bahai Community in Iran.” Rafati puts the number of Baha’is considerably lower, at 50,000 in the Middle East.

and protected under Islam as *ahl al-kitab*, or “people of the book,” although they were relegated to a status inferior to Shi’a Muslims.³⁵ In exchange for their protected, or *dhimmi*, status, they were required to pay a special *jizyah* tax and recognize Islam’s superiority. Furthermore, they were prohibited from practicing certain occupations. Daniel Tsadik notes that some of these restrictions were specific to Shi’a Islam and its rulings and practices around notions of purity, which considered *dhimmi*s as unclean. The restrictions affected not only occupations but also physical contact between Jews and Muslims, the handling of food, inheritance laws, and marriage.³⁶ Importantly, Daniella Farah stresses that “Iranian Jews were not unique” in being subject to these constraints, sharing such experiences of discrimination with the other religious minorities.³⁷ Moreover, there was not a uniform consensus among Muslim clerics on these restrictions, and as such they were neither uniformly applied nor enforced. In fact, particularly under the weak Qajar state, there could be a great deal of variation across time and place; and the degree to which Jews experienced either sporadic outbreaks or generalized environments of antisemitism was highly dependent on local power dynamics.³⁸

Aside from some Iraqi Jewish merchants who contributed to the community in Hamadan, the AIU was the first foreign Jewish organization to establish an ongoing presence on the ground in Iran.³⁹ There had been contacts between Iranian Jewish communities and Europeans before, including the AIU and the Board of Deputies of British Jews, but these had been intermittent, crisis-driven responses to requests for aid for certain communities. In contrast, Armenians, Baha’is, and Zoroastrians seemed to have established ongoing philanthropic and educational ties with foreign and diasporic networks somewhat earlier.⁴⁰

The Alliance Israélite Universelle and its Presence in Iran

The AIU was established in 1860 by French Jews in response to two shocking and internationally publicized incidents of antisemitism in Damascus and the papal state of Bologna.⁴¹ However, in addition to the acute and immediate causes, the founders were also motivated by their visits to poorer Jewish communities in North Africa in the 1830s and 1840s, wishing to regenerate, integrate, and emancipate those Jews—in effect, extending the Enlightenment project of the French Revolution and Napoleonic reforms to their coreligionists in a new project of international Jewish solidarity.⁴² To achieve this, the founders sent representatives to North Africa and the Middle East to carry out two tasks: first, to establish diplomatic channels with local officials and foreign diplomats to protect Jews from harm; and second, to establish schools to provide a modern education—Jewish but secularized—for both boys and girls.⁴³ The first school was established in Tetuan, Morocco in

³⁵ Baha’is were considered apostates, as their relatively new religion believed itself to supersede Islam, a stance heretical to Muslims and one which led to the significant persecution of Baha’i followers. Many Baha’is were converts from Judaism. Brookshaw and Fazel, *The Baha’is of Iran*; Cole, “Baháism: I. The Faith”; Amanat, *Jewish Identities in Iran*.

³⁶ Tsadik, *Between Foreigners and Shi’is*, 15–32.

³⁷ Farah, “Forming Iranian Jewish Identities,” 75.

³⁸ Headrick, “Web in the Tempest.”

³⁹ Barmaïmon, “History of the AIU School in Hamadan.”

⁴⁰ Tsadik, *Between Foreigners and Shi’is*; Berberian, “Armenian Women”; Berberian, *Armenians and the Iranian Constitutional Revolution*; Amanat, *Jewish Identities in Iran*, 70; Ringer, *Pious Citizens*, 23–24.

⁴¹ Leven, *Cinquante ans d’histoire*, 60–61.

⁴² Leff, *Sacred Bonds of Solidarity*.

⁴³ I use the term “secularized” to indicate the newer, “modern” schools that taught students a variety of secular subjects, even though some did provide religious instruction as well. Some writers describe this in the Iranian context as the difference between the older style *maktab* and *madreseh*. The Jewish equivalent might be known as a *Talmud Torah* or *cheder*. Typically, the older-style schools were limited to boys, and students sat on benches rather than at desks. Similar transformations in education took place around the world, including in China. Eshaghian,

1862, and schools were subsequently opened throughout the Ottoman Empire, Balkans, North Africa, and finally in Iran in 1898.⁴⁴ These schools employed a French curriculum that taught subjects like mathematics and history, as well as Hebrew, French, and Persian.⁴⁵ In addition to academic subjects, the schools also provided vocational training, such as carpentry for boys or embroidery and carpet-weaving for girls.

The AIU educated its directors and assistant directors at its teacher training academies in Paris and Versailles. From ages 14 to 18, the young men attended the *École normale israélite orientale* (ENIO) in Paris's 16th *arrondissement*, while the young women attended one of three private schools in Paris.⁴⁶ Due to difficulty convincing enough young French Jews to leave France, many of the AIU's assistant directors were themselves not from the French metropole, but were actually recruited for the ENIO from AIU schools in North Africa and the Ottoman Empire.⁴⁷ This fact proved significant in shaping the content and tone of the letters that many wrote later once they were at their posts.

The AIU arrived in Iran thirty-six years later than its other locations, but once there, its staff worked quickly to open schools. By 1926, 6,500 students were enrolled in fifteen AIU schools in Iran alone.⁴⁸ In the early decades of the twentieth century, few of the directors were from Iran, as the AIU's central leadership was prejudiced against Iranian Jews; this, however, changed in later decades.⁴⁹ Importantly, the AIU welcomed Muslim students. Opening its schools to non-Jewish students aligned with the AIU's stated universalist values and was a strategy to promote the integration of its Jewish students. This was also intended to enhance the AIU's prestige and their Jewish students' opportunities by attracting children from elite, wealthy, Muslim families. Over time, this strategy paid off, as AIU school directors encountered friendly government inspectors and officials, many of whom had themselves attended AIU schools.⁵⁰

The AIU and Discourses of Hygiene

AIU staff references to health matters broadly echoed global discourses on public health and hygiene shared by Christian missionaries from the United States and Europe alongside the emerging cohort of modernizing Iranians discussed by Schayegh and Ebrahimnejad. Here, a historiographical disconnect parallels the apparent rift between historical sources, as scholars have separately linked the discourses of both the AIU and Iranians to the French form of positive eugenics.⁵¹

My own research does not find any reference to eugenics per se in AIU sources. A likelier point of origin for AIU rhetoric may be found even earlier, in discourses of the

Hamrah Ba Farhang, 46; Cohen, "Iranian Jewry," 16; Rostam-Kolayi, "Origins of Iran's Modern Girls' Schools," 63; VanderVen, *A School in Every Village*.

⁴⁴ The AIU's late arrival to Iran in 1898 was not for lack of trying; in fact, representatives of the Central Committee had met with the Qajar monarch Nasr al-Din Shah (1848–1896) during his visit to Europe in 1873, and he had declared himself to be equally protective of all his subjects. However, between his own ineffectiveness and his lack of commitment to supporting the creation of modern schools, the AIU had to wait until after his assassination to be granted permission to establish its first school in Tehran. See Tsadik, *Between Foreigners and Shi'is*, 92.

⁴⁵ Rodrigue, *French Jews, Turkish Jews*, 88; Cohen, "Iranian Jewry," 22.

⁴⁶ Malino, "Prophets in Their Own Land?," 59.

⁴⁷ Malino, "Oriental, Feminist, Orientalist."

⁴⁸ Netzer, "Alliance Israélite Universelle."

⁴⁹ Cohen, "Iranian Jewry"; Jacques Bigart to Adolphe Brasseur, Sept. 25, 1912, RE 237–130, AIUAH.

⁵⁰ Headrick, "A Family in Iran."

⁵¹ Schayegh notes: "the adoption of French hygiene, positive eugenics, and neo-Lamarckian genetics was intertwined with concerns about Iran's qualitative and quantitative demographic problems." In the case of the AIU, Richard Parks similarly asserts that "although the AIU cautiously tailored its regenerative message to incorporate the scientific and medical authority of Darwinism and eugenics, the organization remained committed to its reliance on the redemptive strength of sociocultural assimilation." Unfortunately, Parks does not provide a footnote to substantiate this claim. Schayegh, *Who Is Knowledgeable Is Strong*, 8; Parks, *Medical Imperialism*, 14.

mid-nineteenth-century French bourgeois and intellectual elites, who linked disease with poor workers' housing and morality.⁵² AIU staff actions demonstrated an interest in producing not only an educated Jewish mind, but a healthy, strong, clean Jewish body; and healthy Jewish bodies were, in their eyes, intrinsically connected to the buildings in which they were schooled. AIU cofounder Narcisse Leven discussed the organization's health preoccupations in the same paragraphs in which he wrote about the construction of its first schools in North Africa. Here, sickness, poor school design, poverty, and family were all part of the same sick Jewish body, for which one logical remedy was a new, bright, modern school:

The Talmud Tora that they maintained could not take the place of a school...It was an ordinary closet placed in the ghetto...no air or light. The children came there ragged, unclean, malnourished...The rules of hygiene were completely ignored in their parents' house; gnawed by anxiety, by the difficulty of living, they had no other concern than to prevent their children from dying of hunger; the mother, without courage and without strength in the face of the communal poverty, was unable to dress them properly... Illnesses arose, skin diseases, eye diseases... Everything had to be redone. Place the school in a healthy place, open to air and light, if there was one in the ghetto, to teach the children to take care of their bodies—that was the teacher's first task. He would have to do what neither the community nor the parents did.⁵³

This Jewish body was similar to that which Zionists wanted to produce in a Zionist homeland and to the Iranian body that Iranian modernists wanted to produce in Iran.⁵⁴ In this case, however, the AIU was interested in producing a healthy Jewish body in Iran itself.⁵⁵

The AIU rhetoric exposes the extent to which the organization straddled the categories of missionary and non-missionary. Particularly in the earlier decades of the twentieth century, AIU staff descriptions of Iranians' health problems shared many features with those of Christian missionaries. For example, such descriptions (as well as the reactions of AIU staff) strikingly resemble that of an American missionary in Hamadan, Belle Sherwood Hawkes:

In 1893, she began teaching at the newly established Jewish Girls School. Biblical instruction, however, was only part of the curriculum. "I've got a school, 32 *dirty* [sic] little Jewish girls," she wrote. "Some are cleaner than others. None are clean. I lecture them wildly, fiercely in splendid (so it seems to me) Persian—but they don't get cleaner."⁵⁶

While the AIU certainly did not endeavor to convert children—even its non-Jewish students—to a different religion, the staff did attempt to convert its students and their parents to a different relationship with cleanliness, intertwined with new architectures of time and space in the classroom. Overall, the *mission civilisatrice* remained the engine for most AIU staff health interventions in the early part of the twentieth century, driving them to attend to hygiene as their primary focus and view Iranian Jewish communities through the lens of their purported shortcomings in that area.

⁵² Aisenberg, *Contagion*, 4; Weiss, *Les enquêtes ouvrières en France*; Shapiro, *Housing the Poor of Paris*.

⁵³ Leven, *Cinquante ans d'histoire*, 19.

⁵⁴ Parks, *Medical Imperialism*, 7.

⁵⁵ Headrick, "From Disagreement to Harmony?"

⁵⁶ Heuser, "Women's Work," 11.

Reading the AIU Letters

Particularly before 1946, when the AIU established a central Iran office, Alliance staff wrote directly and extensively to the Central Committee in Paris. Most of the letters, until 1934, were from staff to the General Secretary, Jacques Bigart, who required very personalized and detailed accounts not only from directors, but even from young assistant directors who arrived in Iran fresh from AIU teacher training in Paris.⁵⁷ The AIU letters hold a wealth of information, providing a textured and vivid picture of the world the AIU staff inhabited and how they perceived it. That said, the letters require careful reading, particularly in light of their Francocentric bias. Ann Laura Stoler and Frederick Cooper's observation about colonial archives applies equally to the AIU's physical and digital collections: "every document in a colonial archive...is layered with the received account of earlier events and the cultural semantics of a political moment."⁵⁸ In this case, one such "layer" was the fact that most of the letter-writers themselves were French by education but not family origin. According to Avraham Cohen:

Most seminary graduates serving as principals or assistant principals in Iran were Jews of North African, Bulgarian, Greek, Turkish, Lebanese, Syrian, Iraqi, or Palestinian origin. They found Iranian Jewry to constitute a more backward community than those from which they originated. This situation provided them with an opportunity to rehabilitate their own self-image, which had been tarnished in Paris, and a chance to display superiority rather than inferiority.⁵⁹

Indeed, they were called "Orientals" by their French educators and occupied an in-between status that motivated them to self-consciously differentiate themselves from their Iranian coreligionists.⁶⁰

Furthermore, Liz Stanley reminds us that letters are "dialogical," taking place within an exchange, "perspectival...[taking] on the perspective of the 'moment,'" and "emergent... [with] their own preoccupations and conventions" internal to the conversation.⁶¹ AIU letters display all of these properties: the staff rarely wrote to the Central Committee without a professional or personal agenda, such as requests for better pay, more resources to do their job, or to be moved to another location, and their writings both reacted to and anticipated the administration's response. In some cases, they sought the organization's respect for and acknowledgement of their expertise in implementing its mission on the ground.⁶² To achieve these ends, the staff drew on a repertoire of affective language, empowering themselves through the conscious shaping of their tone and selection of rhetorical devices, such as alluding to their "rights" and "sacrifice."⁶³ Consequently, reading the letters is not unlike watching a handheld video in which one needs to constantly adjust for the motion of the person filming and the borders of the frame, which leave out as much information as they include. Scholars need to interrogate the sources closely to learn the writers' motivations, ages, placements within Iran, and even the meaning these placements had on each teacher, such as whether or not they were working near other family members.

To add another dimension, some of the writers' professional relationships with Jacques Bigart were intertwined with a personal connection that lent intimacy to the

⁵⁷ Alliance Israélite Universelle, *Instructions*, 15. The vast majority of these letters are handwritten and available as digitized microfilms. Unfortunately, these microfilms are limited to the letters received by the central office from teachers and handwritten scratchings of draft responses to the teachers. The final versions of the letters the Central Committee sent to the teachers are currently only available upon request by writing to the AIU archive staff.

⁵⁸ Cooper and Stoler, "Between Metropole and Colony," 17.

⁵⁹ Cohen, "Iranian Jewry," 25–26.

⁶⁰ Malino, "Oriental, Feminist, Orientalist," 101.

⁶¹ Stanley, "The Epistolarium," 201–35.

⁶² Séphora Brasseur to AIU, July 29, 1908, Iran VII E 067, Collection 22, 894–902, AIUAH.

⁶³ Bathia Brasseur to AIU, February 7, 1927, Morocco LII E848, Collection 123, 768–771, AIUAH.

letters, such as when one young teacher warmly wrote him: “it is really too bad that Persia is so far as I am sure this country would please you even more than Morocco.”⁶⁴ Like that writer, many of the young assistant directors had come to know Bigart personally while training in Paris. This can make it even more difficult to untangle the deeply personal ways in which the writers represented themselves to Bigart from the practical ends they hoped to achieve. Julian Haseldine resolves this dissonance by cautioning against imposing strict binaries on emotional and epistolary practices among colleagues:

[F]ew if any human relationships are ever wholly affective or wholly instrumental, and such discussions, implicitly or explicitly, tend to conflate a number of concepts—private and public, emotional and contractual, genuine and artificial. Such distinctions are not necessarily realistic reflections of complex human relationships: instrumental, pragmatic or allegiance relationships, for example, can precede and engender affection just as much as the other way round and, as importantly, can be just as stable and binding.⁶⁵

With these thoughts in mind, this article examines the four imbricated themes that emerge from the AIU correspondence: quasi-ethnographic descriptions of the medical ailments and health practices of Iranian-Jewish communities; interventions to address students’ and communities’ needs; physical and mental health problems experienced by AIU staff; and partnerships and collaborations with other institutions to address health and, more broadly, the modernization of health delivery systems. These themes are not mutually exclusive, and my analysis examines the threads and underlying assumptions that connect them as well as the changes over time that mark a shift from one theme to another.

“Ethnographic” Descriptions—Moïse Hayon and Bathia Brasseur

In 1902, Moïse Hayon, a twenty-year-old assistant director and native of Fez, Morocco, who was educated at the ENIO in Paris, wrote a portrayal of health problems embedded in descriptions of Isfahan, its climate, hygiene, physical education, and public health.⁶⁶ Describing the city, he noted:

Isfahan...does not at all live up to its promises...To begin with, the climate is detestable, especially in this season when the abrupt passage from one extreme temperature to another causes rheumatism and terrible head colds; in fact, I am suffering from that at the moment.

But the most discouraging is the piteous state of all the inhabitants in general and of our coreligionists in particular. From the physical standpoint, their repulsive dirtiness exposes them to all sorts of diseases to which healing is never entrusted to a doctor. As such it is not rare to meet in the streets feverish people, large numbers of consumptives, and innumerable people with rickets.⁶⁷

This type of description is most frequently found in letters written by young assistant directors who had been educated in Paris and only arrived to Iran fairly recently. The letter-writers were neither trained ethnographers nor disinterested reporters. Their primary

⁶⁴ Bathia Brasseur to AIU, January 5, 1928, Iran VI E 65, Collection 22, 261–262, AIUAH.

⁶⁵ Haseldine, “Friendship, Intimacy and Corporate Networking,” 254.

⁶⁶ Moïse Hayon, like some of the other AIU staff, is referred to here by his first and last names.

⁶⁷ Moïse Hayon to AIU, March 16, 1902.

interlocutor, Jacques Bigart, required these detailed descriptions, responding paternalistically to the contents and criticizing lapses in grammar, spelling, and handwriting.⁶⁸ Regardless of the motivation, the ethnographic aspect of the letters remains an important function.⁶⁹

Hayon intersperses his descriptions of Iranian Jews and their practices with those of his fellow Moroccan Jews, although presumably those less educated than he. At first, this appears to be an attempt to highlight the relative difficulties Iranian Jews experienced. In contrast to Jews in Morocco, Hayon wrote, Jews in Iran were suffering under an “overwhelming yoke, and plagued by the fanaticism of the Shiites, the Jews of Persia have all interest in hiding their quality of Jews as much as possible and therefore they have not conserved any joyful ceremony, neither religious, nor traditional.”⁷⁰

Hayon’s letters proceed to intertwine descriptions of the healing practices of Moroccan and Iranian Jews; for example, the practice of visiting the tombs and shrines of saints to receive healing and “remedy” for medical problems. Like their Moroccan counterparts, Iranian Jews made weeks-long pilgrimages to shrines, such as that of Serah Bat Asher (Serah, daughter of Asher) in Isfahan, to receive healing from beyond the grave, in some cases from dead relatives:

Deep down, it is a very natural feeling that animates my compatriots in these excursions, that of believing that a member of the family who is dead has not completely lost interest in those who were dear to him on earth; but it is...bizarre [and] ridiculous to evoke the dead at all instants of life...In this way a person who, during his entire life, has not known one word about medicine...becomes all of a sudden a doctor and one who received his medical degree after death.⁷¹

As in the case cited above, the ethnographic reporting was often laced with disdainful commentary by the reporter. For Hayon, when reporting about the melon and honey, he recounted his own attempt to convince the Iranian Jews of their error:

One of the prejudices of our Persian coreligionists consists of never eating melon and honey together, under the pretext that it is a violent poison, as seen by the number of people who have been victims.

Having tried to prove the opposite to them using my own body, they gathered against me and tore away the melon and honey, but I did not put down arms easily: I took a dog and forced it to swallow the so-called poison. This naturally did not stop it from barking as usual and perhaps more than usual.⁷²

Twenty-six years later, another AIU teacher in Isfahan, Bathia Brasseur, enumerated a list of “the superstitions of Persia.”⁷³ These fell into the categories of “takvin” [sic]; “esagharé,” [sic] a form of divination; sneezing; and avoiding the evil eye. Takvin undoubtedly

⁶⁸ Headrick, “A Family in Iran.”

⁶⁹ For more information on the AIU and its ethnographic practices, see Smith, “Racial Politics.”

⁷⁰ Moïse Hayon to AIU, January 25, 1904, 1496, Iran I C 3, Collection 4, AIUAH.

⁷¹ Moïse Hayon to AIU, July 25, 1902, 1484-1485, Iran I C 3, Collection 04, AIUAH. Hayon spells her name “Sarah Bat Ascher.”

⁷² Moïse Hayon to AIU, March 16, 1902, 1457.

⁷³ To avoid confusion, since I also refer to other members of her family, I refer to Bathia and her family members by their first names. Bathia Brasseur Cuenca came to Isfahan at the age of one along with her parents, Adolphe and Séphora Brasseur, and an older brother. Two more daughters, Wanda and Louise, were born to the Brasseurs in Iran. Bathia married André Cuenca, another young Alliance teacher, who became the General Director of the Iran AIU schools in 1944 and remained in that position until he retired and left for France in 1978. Except for a few years in France at the AIU’s école normale and in Morocco as a young teacher, Bathia herself spent almost her whole

corresponds to تقويم/*taqvim*, the Persian word for calendar, which she used to denote a system of regulating one's actions according to the most and least propitious days for carrying out a given activity:

It is good to take a bath Thursday and Friday, but to take it another day is to invite sickness or grief...

You should only trim your nails on Friday, if you do it on Saturday, you are sure to acquire creditors, on Sunday to have a death in the family, on Monday to have a serious fall, on Tuesday to be dishonored, on Wednesday to have a bad temper, on Thursday to quarrel with those who are dearest to you.

Recently, my youngest sister was gravely ill and we had to go to the hospital for five weeks, [and] the personnel that nonetheless desired to see us go home as soon as possible was very upset that we went home on a Monday.

Every Persian has a calendar (or Takvin) dictating to him hour by hour what is good or bad to do, Mme Wilden, the wife of the Minister of France, having spent a long time in China, told me that the French newspaper of Shanghai published the good and bad omens every day, this proves that this custom is Oriental rather than Persian.⁷⁴

Readers might note with interest that, in qualifying the origin of these beliefs, Bathia states that this belief system was diffused in part by a French-language newspaper, despite her intention to demarcate a boundary between Western and Eastern practices.

That said, Bathia's reporting appears to be somewhat accurate, in that it corroborates other sources. She describes "esagharé" as a form of divination that involves counting rosary beads to determine if a given medical treatment—in this case, taking a vermifuge for treating parasitic worms—is the right course of action and notes with ironic humor: "if fate does not approve of the doctor, the [Iranians] prefer to suffer rather than take the vermifuge or any other remedy." Although I have not found the word used in other places, *esagharé* may be a Judeo-Persian form of the word *istikharah* (استخاره), a set of practices for seeking divine guidance that includes counting rosary beads.⁷⁵ Another form of divination involves counting how many times one sneezes: "when performing an action, if you hear a sneeze once, you must refrain from doing this action but if you hear a sneeze twice, you must perform it even if you no longer want to," an observation corroborated by Mahmoud Omidasalar's research.⁷⁶

According to Bathia's sources, health problems were just one more form of fortune or misfortune, such as financial problems, accidents, and unhappy family relations. The remedies for these problems were likewise conceptualized within a knowledge system that emphasized the dimensions of time and fortune. Moreover, Iranian Jews shared practices with their Muslim neighbors but altered some of the timing to align with the Jewish calendar. For example, powder ground from the eye of a sheep that had been slaughtered on either Nowruz (for Muslims) or Tisha b'Av (for Jews) could relieve the sufferings of a person afflicted with illness by the evil eye.⁷⁷

life in Iran before her death in 1974. Her sisters also served as teachers and school directors in Iran. See Headrick, "A Family in Iran."

⁷⁴ Bathia Brasseur to AIU, November 1, 1928, Iran VI E 65, Collection 22, 236–243, AIUAH.

⁷⁵ Ziya, "The Role of Divination in Iranian Governance."

⁷⁶ Omidasalar, "Divination."

⁷⁷ Bathia Brasseur to AIU, Letter to AIU, November 1, 1928, Iran VI E 65, Collection 22, 236–243, AIUAH. Nowruz is an Iranian holiday with Zoroastrian origins, not a Muslim one, that celebrates the beginning of spring and the Persian new year. Tisha b'Av is the Jewish holiday commemorating the destruction of the Temple. It typically takes place in July or August.

In another letter, Bathia wittily and sarcastically paints a humorous scene of a sick Iranian subjected to “treatment” by the overbearing women in the neighborhood, in contrast to what a Western-style doctor would provide:

the patient’s condition worsens and his family is forced to put him to bed, so the patient is laid in a room, dirty, badly ventilated, sometimes humid and which, at the height of hygiene, serves as a bedroom for the family no matter how large it is.

The house is invaded by women from the neighborhood; they settle in the patient’s room (because contagious diseases do not exist for them) they talk, they shout, they give advice, they feel sorry for the patient’s condition, in front of him they observe that he will not live longer, sometimes even, but this is quite rare, they discuss how to get the money for the funeral.

A timid voice hints that perhaps we could go get the doctors from the hospital...this causes a great revolt, what! do we want to kill the patient? go get doctors who would kick all these ladies out!!! who would sprinkle medicines (disinfectants) whose smell alone can kill a healthy person!!! who will order the diet in order to weaken the patient!!! never, never... It is better to put leeches on the patient, if he has a fever, it is because the blood has gone to his head. This seems very fair and obviously they listen to the prescriptions of this woman as well as those of the others.

In the end, the patient is in agony and the family council yields to go and get the European doctor; sometimes the patient dies in the meantime, and, as a humorist said: “There are always women who think that if the doctor had come the patient’s condition would have been even worse.”⁷⁸

Although twenty-six years apart, Moïse Hayon and Bathia Brasseur’s accounts bear unmistakable similarities to one another. At the time of their writing, the two writers were both very young: Moïse was twenty, and Bathia was twenty-one. Both had received teacher training in Paris and neither was of Iranian origin: Moïse was from Fez and Bathia was born to Ashkenazi French-Jewish parents in Turkey, although she moved to Iran as a small child and would, unlike most AIU teachers, spend the rest of her life there.⁷⁹ Both, to all appearances, identified culturally as French and, like most AIU teachers, embraced their role as emissaries of French language, culture, and values. In this role, they articulated the Alliance’s mission by depicting Iranian Jewish practices as markedly diverging from the Alliance’s more rational understanding of medicine and healing. In the case of Moïse, as previously mentioned, Iranians brought the world of the supernatural into the domain the AIU treated as belonging to medical science, blending the worlds of the dead and the living to an extent that Hayon held up for contempt and ridicule from his reader. In the case of Bathia, Iranian beliefs and healing practices were clearly categorized as “superstitions” and a site of cultural distance produced by epistemological difference that Iranians themselves acknowledged: “the Persians know that we do not have the same beliefs as them, and they jealously hide their superstitions from us.”⁸⁰

Additionally, both writers declared that the AIU’s ideology would triumph and be a blessing to these communities. Bathia’s words,

Thanks to the influence of our schools there is nonetheless progress and among the young, one clearly feels a struggle between the principles received in school and the

⁷⁸ Bathia Brasseur to AIU, March 19, 1928, Iran VI E 65, Collection 22, 257–259, AIUAH.

⁷⁹ Headrick, “A Family in Iran.”

⁸⁰ Bathia Brasseur to AIU, November 1, 1928, 236.

prejudices that the parents have instilled in them; but it will only be in the long run that the new principles will conquer the old prejudices...⁸¹

strikingly echo those of Moïse:

It is in such environments [as Morocco and Persia] that the salutary influence of the Alliance must be exerted. It is to be hoped that in a few years the Jewish people of these countries, presently in its infancy and the greatest ignorance, once instructed, educated, and Europeanized...will shine the light around itself that it has received from its benefactors and it will be then up to [this people] to exert an influence on the populations that surround it.

At this moment, the Alliance will have the full satisfaction of having served not only one group or one category of men, but entire humanity.⁸²

These two young teachers were reflecting the AIU's own philosophy back to the Central Committee without nuance, using language that could indicate either their youthful enthusiasm or their vulnerability vis-à-vis their employer. After all, the Central Committee had the power to choose where young teachers were sent and how much (or little) to pay them, and it was in the interest of these young people to profess their dedication to its mission. Yet even some of its youngest staff, like Moïse and Bathia, fearlessly and forcefully contested Central Committee decisions, even in the face of a steep power imbalance. In doing so, they employed a variety of communication strategies, reminding the AIU of its mission to promote justice and "rights" and demanding that the Central Committee recognize their "sacrifice."⁸³

In the cases of both Moïse and Bathia, therefore, the subject position vis-à-vis Iranians may actually have been subordinate to the more immediate and pressing subject position vis-à-vis their employer. Moïse was requesting the AIU pay to build living quarters for him in the school. His letter from March 16, 1902, describes his solitude and the "ordeal of living alone," his inability to speak with the school's director or any other teachers, and his isolation in Isfahan where he did not know the language and "society was the most primitive."⁸⁴ For her part, Bathia wanted the Alliance to reimburse her for her trip from her previous posting in Tangiers to her new post in Isfahan after having not seen her parents for seven years. Thus, the ethnographic reporting and elevation of the Alliance's mission served as a kind of rhetorical currency in an exchange, a strategic maneuver to get something the young assistant directors wanted.

The AIU's Health and Medical Interventions

Although education and diplomatic protection for Jewish communities were the primary foci of the AIU's activities, it, like Christian missionary organizations, saw attending to its students and their communities' medical needs as an important supplementary function.⁸⁵ Contagious infections of the scalp and eyes figured prominently among the concerns, not least because those produced sensory discomfort for the staff in the form of odors and visible uncleanliness. Thus, the AIU's interventions included: engaging the services of French doctors; bringing in European-made medicines, soaps, and ointments; separating diseased students from healthy ones; making health care accessible and free to the wider community

⁸¹ Bathia Brasseur to AIU, March 19, 1928, 257.

⁸² Moïse Hayon to AIU, May 29, 1902, 1466, Iran I C 3, Collection 04, AIUAH.

⁸³ Bathia Brasseur to AIU, June 24, 1929, Iran VI E 65, Collection 22, 215–221, AIUAH.

⁸⁴ Moïse Hayon to AIU, March 16, 1902, 1462–63.

⁸⁵ Gleeson, "Stethoscope and the Gospel," 127–38; Koyagi, "History of Presbyterian Medical Mission in Iran."

through the school; disabusing Iranians of their allegedly erroneous beliefs; teaching Iranians Western-style dress and hygiene; and, particularly during times of political upheaval, such as the 1906–1911 Constitutional Revolution, seeking diplomatic protection for humanitarian work and the Jewish community as a whole.⁸⁶

Diseases of the scalp were particularly distressing to AIU staff. In the same letter from 1902 cited above, Moïse Hayon described the “yellowish heads”⁸⁷ of his students, their difficulty participating in physical education due to a lack of adequate shoes and socks, their lack of soap at home, even among wealthier students, and the unsanitary conditions of the local public baths in which “contagious diseases have...too much time to propagate.” While requesting supplies, Hayon detailed his own mingled reactions of pity and revulsion:

Judge, Mr. President, the difficulty that we have at the school to separate the sick from the healthy and therefore to avoid contagions. Do you believe that a sick [child] taken by fever declares himself; not at all, he stays to shiver in his place until a more severe symptom attracts our attention.

Furthermore they are all scabby up to their eyes and I will permit myself...to ask if it is possible to endow the schools of Persia...with antifungal ointment. We have the greatest need for this, the strong odors that exhale from the heads, especially when it is hot, make it sometimes impossible to have contact with the students.⁸⁸

Five years later, Joseph Lahana, the boys’ school director in Shiraz, corroborated Hayon’s report of scalp diseases:

Cleanliness: Since the arrival of the supplies, I am beginning to be able to call for more serious cleanliness from our students. The children with scalp diseases being numerous, the anti-fungal ointment has been very useful. We have also distributed combs and soaps to the poorest students so that we could demand from now on that they take better care of their persons.⁸⁹

When Bathia Brasseur’s parents, Adolphe and Séphora, moved to Isfahan to assume leadership of the AIU schools in 1908, they faced the reality that ringworm was so prevalent that keeping all the infected students out of school would deprive a significant number of an education. Citing the same concern as Hayon and Lahana, Séphora reported,

Cleanliness: Here is a word that does not exist at all in the vocabulary of our coreligionists of Isfahan. But if it pains me to know that the parents of students don’t know this quality so solemnly recommended by Hillel, it is still less possible to admit that one may have in front of oneself during a certain number of hours of the day beings with ringworm and lice, ragged, emitting a special odor.

I am counting therefore before the beginning of school to occupy myself with taking care of cleanliness and to have...one or two women to wash the students’ heads.⁹⁰

In order to prevent contagion among the students, the Brasseurs came up with a solution involving a reconfiguration of the school buildings themselves:

⁸⁶ Headrick, “The Web in the Tempest.”

⁸⁷ This may be a reference to seborrheic dermatitis. Mayo Clinic, “Seborrheic Dermatitis.”

⁸⁸ Moïse Hayon to AIU, March 16, 1902, 1452, Iran I C 3, Collection 04, AIUAH.

⁸⁹ Joseph Lahana to AIU, May 31, 1907, Iran I C, Collection 3, 45–48, AIUAH.

⁹⁰ Séphora Brasseur to AIU, July 29, 1908.

They rented a house adjoining the main building where they assembled 100 to 120 students with ringworm divided into 3 or 4 classes.

The children received there, at the same time as instruction given by teachers who themselves were afflicted by the disease, the necessary care according to the most modern methods: applications of ointments and washing with antiseptic soap that the Brasseurs had had sent from Paris through the Alliance.⁹¹

Diseases of the eye were another common ailment, one for which Iranian Jews, in the AIU's telling, welcomed the intervention of European doctors. Amidst the upheavals of the Constitutional Revolution, Joseph Lahana invited a Doctor Sorel to the school in Shiraz:

Last Monday, the 1st of June, we had the first free consultation that the Doctor Sorel gave our students and to the underprivileged members of the Israelite community. From the beginning of the day the entrance to the school took on the aspect of a true hall of miracles. As always when such a project begins to function, besides the curable illnesses, a great number of incurables presented themselves. They hoped that the French doctor would perform some miracle to get rid of preexisting defects.

Diseases of the eyes are the most frequent. From this first time we were able to notice that many children or young people are on the verge of losing their eyesight due to a lack of care in the beginning. The boric acid that we received yesterday will be very useful as well as the pharmaceutical products that were sent to us last year.⁹²

Lahana was not the first or only European to report Iranians' desire to be cured of eye diseases by Western medicine. Dr. Treacher Collins, a British ophthalmologist, had come to Iran in the 1890s on the request of the governor of Isfahan: "[Once it was] known that an eye doctor had arrived in Julfa from Europe...my house before long was invaded by patients of all classes suffering from eye disease."⁹³

Beyond acting on the behalf of Jewish communities, the AIU also viewed providing instruction to correct Iranian beliefs and practices as one of its educational functions. In Shiraz, Lahana continued: "We could also by this means in the long term rid our coreligionists of their medical superstitions...and make them take better care of their persons."⁹⁴ Twenty-three years later, Bathia Brasseur, now Bathia Cuenca, prepared little girls who were students in the Yazd school for a visit from Shah Reza Pahlavi himself. She reiterated the AIU's pedagogy of hygiene, reporting, "We had to comb the students to pull out certain little bugs that abounded in their hair, teach them to wear underwear, something that the vast majority didn't know about."⁹⁵

Finally, even as the reporting of hygienic education decreased over time, the work to create hygienic infrastructure and buildings continued into the middle of the twentieth century. In 1944, Victor Araha, working in Yazd, helped the community construct a special building for washing the dead, so they would no longer be washed in people's homes, and described his efforts against infectious diseases like typhoid, smallpox, and typhus.⁹⁶

Hygiene, and in particular controlling visible and odor-producing diseases such as those of the eyes and scalp, was a primary concern of AIU staff in the early decades of the twentieth century. Moreover, hygiene was constructed as a site of difference between AIU staff

⁹¹ Jacques Pérez to AIU, July 31, 1954, Iran AM E 060-A, AIUAM. Pérez was the husband of the Brasseurs' second daughter, Wanda.

⁹² Joseph Lahana to AIU, June 4, 1908, 8.

⁹³ Ebrahimnejad, *Medicine in Iran*, 57. Julfa is a predominantly Armenian neighborhood in Isfahan.

⁹⁴ Joseph Lahana to AIU, June 4, 1908.

⁹⁵ Bathia Cuenca to AIU, February 15, 1931, Iran (XVIII) E 0173, Collection 16, 244–246, AIUAH.

⁹⁶ Victor Araha to AIU, December 20, 1944, Iran AM E 045-A, AIUAM.

and Iranian Jews. In this way, the AIU was a participant in a global movement to regenerate non-Western bodies. In this case, however, the bodies it wanted to regenerate were specifically Jewish ones—for the purpose of becoming more fully Iranian.

AIU Staff Health Issues

In addition to addressing the needs of Iranian Jewish communities, the AIU staff had serious concerns for their own health. They clearly felt vulnerable to infectious disease, as witnessed by the actions of Isaac and Rebecca Bassan, mentioned in the introduction, who fled their posts as school directors of the AIU Hamadan school in 1904 to escape a cholera epidemic.⁹⁷ Their successor, Moïse Benghiat, described the frightening impact the epidemic had on the school within the larger city:

The epidemic continues to ravage Hamadan. Several Muslim priests [sic] have succumbed...

One of the servants of the girls' school, Soleyman, was afflicted but was able to be saved; he is doing perfectly well now. The teacher of the rug-weaving workshop has just been infected, it seems her state is desperate. The rest of the staff is fortunately doing very well, but costs [of food] have considerably increased.⁹⁸

Pregnancy and childbirth posed another set of risks to female teachers and directors. They typically worked late into their pregnancies and resumed work again only a few months after childbirth, despite reporting difficulties both before and after giving birth. Descriptions of such dangers to the health of mothers and babies continued well into the middle of the twentieth century.

In the case of Laure Lahana, Joseph's wife, who also worked at the Shiraz school, the remedy prescribed (presumably for pregnancy, although this is not explicitly stated) was for the couple to leave their posts in Shiraz. Joseph's 1908 letter to the AIU reflected their vulnerability from the viewpoint of both health and AIU staff allocation:

The doctor does not quit repeating to us to leave Shiraz as soon as possible. We will certainly suffer from the heat on the road of Bushir and from the monsoons from the Indian Ocean. But the northern route is too long and much more expensive [therefore] we are deciding to travel by the south...I hope the Central Committee will not slow down our trip any more as there is a serious danger for Madame Lahana to travel in the months of July and August.⁹⁹

From Shiraz, the Lahanas moved to Ioannina, Greece. Here, the geographies of healing—moving away from Iran to Europe versus making a pilgrimage to a shrine—demarcated a difference in strategy and imagination, distinguishing them from the Iranians they served.

Similar to the quasi-ethnographic reports, reports pertaining to health problems among staff were frequently connected to a request from or complaint to the Central Committee. This was for good reason, as the consequences of difficult pregnancies, births, and postnatal problems for AIU mothers and babies reverberated through entire families and school workplaces, leading to absences and overworked and stressed husbands and colleagues. In 1953, Elias Isakian, another AIU director, reported that he needed to abruptly leave Yazd for Teheran due to his pregnant wife's serious illness.¹⁰⁰ Perhaps in the hopes of deterring

⁹⁷ Barmaïmon, "History of the AIU School in Hamadan," 29.

⁹⁸ Moïse Benghiat to AIU, July 12, 1904.

⁹⁹ Joseph Lahana to AIU, June 13, 1908, 6–7, Iran I C, Collection 3, AIUAH.

¹⁰⁰ Elias Isakian (Eshaghian) to André Cuenca, May 15, 1953, Iran AM E 004B, AIUAM.

such disruptions, the AIU only gave its female staff six weeks of maternity leave, but the shortness of the leave caused hardship for the new mothers. In 1932, during a pregnancy, Bathia spoke of her dedication and devotion to the AIU cause while also complaining of her terrible treatment at its hands. She forwarded a letter from the Church Missionary Hospital stating that she needed three months off work, and:

I permit myself to remind you that after the excess of work during my last pregnancy and especially due to having gone back to my classes too soon after childbirth, I had internal complications that obliged me to seek a cure in Tehran and to spend a large sum...not only did I not receive material help from you but you withheld my salary.

Her dedication to the AIU, she reminded them, was valuable to them at the highest levels:

Since then the doctors, learning that I am expecting my second child...advised me to avoid all fatigue. But Mme Israël having left for Tehran, I did not hesitate to do all possible to replace her as best as I could. This was the cause of additional work, especially during the moment of the passage through Isfahan of His Majesty the Shah of Persia.¹⁰¹

Seventeen years later, Bathia's younger sister, Louise Brasseur Sélamé—as assistant director of one of the AIU's Tehran schools—sought a paid vacation to France and reported that three years earlier,

in September 1946, I had just had my baby. My delivery had been premature and excessively serious, since following a crisis of eclampsia, I had to undergo a caesarean operation. The doctors who had treated me recognized that only a miracle had saved us, my little one and me, and that we had to take precautions and take care of ourselves vigorously. However, I acceded to the request of Mr. [André] Cuenca, who feared being accused of nepotism if he allowed me more leave, and I returned to school, exactly at the end of the six weeks authorized by the regulation of the Alliance. The same Mr. Cuenca a little later obtained a leave of three months for Mrs. Chammah, so that she could take care of her seriously ill child.¹⁰²

This couple, the Chammahs, directors of the Isfahan school in the late 1940s, likewise underwent hardship after the difficult birth of their baby boy in 1947.¹⁰³

Exhaustion and incapacitation due to overwork and stress was a third ailment of which AIU staff frequently complained to the Central Committee. Significantly, this corresponds to Schayegh's observation that a discourse of fatigue arose as a self-identifying marker of the new middle class in the general population, with an "emerging sense of itself as a distinct social formation with special problems, characteristics, and needs; as the professional, mental, intellectual spearhead of modernity in Iran, it was particularly vulnerable to exhaustion."¹⁰⁴ For their part, AIU directors portrayed physical and mental health as entwined, mirroring (although not acknowledging) the discourse in which Iranian intellectuals engaged, such as this 1918 writing by modernist writer 'Ali Akbar Siyāsi promoting psychology as a new field:

Mind and body are in need of and linked to each other...even the most noble actions and sentiments are linked to corporal events, because these events have an extraordinary

¹⁰¹ Bathia Brasseur to AIU, December 19, 1932, 185, Iran VI E 65, Collection 22, AIUAH.

¹⁰² Louise Sélamé to AIU, June 10, 1949, Iran AM E 014-E, AIUAM. André Cuenca was Bathia's husband and Louise's brother-in-law. He served as the General Director of the AIU's Iran schools from 1946 to 1978.

¹⁰³ André Cuenca to AIU, May 6, 1947, Iran AM E 002B, AIUAM.

¹⁰⁴ Schayegh, *Who Is Knowledgeable Is Strong*, 46.

influence on the quality [of the state] of the nervous system...In addition, the investigation of [the] conditions and thoughts of different races has corroborated that insanity is a direct result of the brain's exhaustion... psychology [thus] cannot be [imagined] without a link to physiology.¹⁰⁵

In the case of AIU staff, this exhaustion was placed squarely in the context of their relationship with their employer. Laure Lahana cited the move to Shiraz and dissatisfaction with the AIU's treatment of her as underlying her physical and mental health. Her letter additionally highlighted regional differences and demonstrated the comparative difficulty of living in Shiraz versus Isfahan:

Did you think, Mr. President, that I came to Shiraz only to have strong emotions and troubles of all kinds every day without recognition from the Central Committee? I have had to go to bed these days, my health is suffering from strong emotions received these last times...In Isfahan, I was very tranquil and outside of my class, I had no worries and no responsibility.¹⁰⁶

Likewise, Joseph, her husband, complained that "continuous overwork" during the turmoil and violence of the Constitutional Revolution led him to suffer "from strong fevers for 18 days. I need to get better and need to leave the city for a few days...I beseech you to hasten the departure of an assistant for the Shiraz school."¹⁰⁷ At the time, Joseph was overwhelmed by supporting not only Shiraz's Jewish community, but also the Jews from the surrounding villages flooding into the city.

These complaints were not confined to the early twentieth century. As late as 1956, Bathia, now the respected "Madame Cuenca" and wife of the director of all the AIU's Iran schools, wrote bitterly and with a "cry of pain" to the Secretary General about her younger sister Wanda Brasseur Pérez's sudden death in Isfahan from overwork, lack of support from the Central Committee, stress, and probably poor medical care.¹⁰⁸

Whether the staff faced contagious disease, the dangers of pregnancy and childbirth, or exhaustion, their reports exposed the fact that they experienced many of the same threats as Iranians. Not surprisingly, however, they often framed these threats and their response as another site of dissimilarity with Iranian Jews, seeking different geographies of healing and overlooking the presence of Iranian Jewish pharmacists and doctors. But this changed over the decades, as evidenced by the slow but steady growth of professional collaborations that they forged within Iran.

Partnerships and Collaborations

The late nineteenth and early decades of the twentieth century witnessed the emergence of an Iranian cohort who, like AIU staff, were preoccupied with combating and preventing disease. They pushed for improvements to medical education, municipal cleanliness, and personal hygiene and advocated in the press and government councils for public health reforms and the collection of epidemiological data. Yet despite their shared concerns, early twentieth-century AIU letter-writers make almost no references to this cohort, which Schayegh deems "a specific type of class—centered on modern knowledge—[that] emerged at the interstices between local society and a globe dominated by Western colonial states and bourgeois classes respectively, utilizing their brand of scientific knowledge."¹⁰⁹ Language barriers alone do not account for this apparent lack of contact: the same letters

¹⁰⁵ Schayegh, 79.

¹⁰⁶ Laure Lahana to AIU, November 21, 1906, 937, Iran I C, Collection 6, AIUAH.

¹⁰⁷ Joseph Lahana to AIU, August 19, 1907, Iran I C, Collection 3, 35–38, AIUAH.

¹⁰⁸ Bathia Cuenca to AIU, September 26, 1956, Iran AM E 062-Z8, AIUAM.

¹⁰⁹ Schayegh, *Who Is Knowledgeable Is Strong*, 4.

document interactions with other Iranians, such as sympathetic police chiefs, provincial governors, and powerful leaders like Agha Nurullah in Isfahan.¹¹⁰

Given the Francocentric prejudice outlined above, another explanation for the absence of Iranian modernizers in the AIU letters could be a failure of the colonial and Western imagination, which could not imagine Iranians as capable of such modes of thought. However, most of the staff's epistolary performances to the AIU Central Committee were designed to achieve a personal or professional end; therefore, demonstrating their connections to Iranians who could help increase their effectiveness was just as powerful a rhetorical strategy as the performance of a discourse that validated European superiority. For these reasons, I contend that it is reasonable to take the AIU staff at their word that most had almost no interaction with Iranian modernizers, and this absence indicates an unevenness in the landscape of modernization and a sparsity of such modernizers in provincial cities.

In the decades after the Constitutional Revolution, beginning in the late 1920s in particular, this apparent rift between the AIU and Iranian modernizers began to close. Bathia Brasseur's letter from 1928 discussing *esagharé* offhandedly mentions two young men who had either received or were about to receive a European education, one a young doctor and the other, "the son of one of our servants, sent by the Persian government [who] had to go to finish his studies in France."¹¹¹

Beginning in the early 1930s, the AIU letters show the organization engaging in a new kind of relationship with the Iranian state, one in which they shared hygienic ideologies. On November 30, 1930, Shah Reza Pahlavi visited Yazd and its AIU schools. Bathia reported that the little girls, whom she had dressed up and whose hair she had combed for lice, "were the success of the day and His Imperial Majesty was very happy to see them." According to Bathia, the little girls made a great impression on "the people, accustomed to seeing Jewish girls and women [as] dirty and lice-ridden."¹¹² She included a translation of a letter written to her personally by the Director of Public Education, Mr. Nourbagheh:

Taking into account that on the arrival of His Imperial Majesty you showed great dedication, and that in a very short time you managed to dress your little girls in a uniform that was especially remarkable for its beauty, which had been the cause of special attention and satisfaction on the part of His Imperial Majesty, it [is] essential for the administration of Public Instruction to show you its gratitude for all the trouble.¹¹³

Student hygiene, externally manifested as cleanliness and attractive uniforms, was a way to demonstrate the AIU's loyalty to the Pahlavi regime and its modernization programs. It additionally represented the AIU's contribution to raising the status of Jews in Iranian society through education, as well as its directors' dedication to partnering with the leadership of Iranian state bureaucracies in their joint efforts to please the shah. In short, in 1930s Iran, clean and well-dressed little Jewish girls made for good politics.

Eight years later, the AIU letters continued to highlight the expansion of the state's medical institutions. In 1939, Wanda Brasseur was serving as the director of the AIU's girls' school in Isfahan and looking for a new site for expansion. On a walk with her father,

¹¹⁰ Adolphe Brasseur to AIU, May 19, 1910, Iran VI E 64d, Collection 10, 477–478, AIUAH; Joseph Lahana to AIU, September 15, 1907, Iran I C, Collection 3, 31–34, AIUAH; Adolphe Brasseur to AIU, May 19, 1949, AM Iran E 013T, AIUAM.

¹¹¹ Bathia Brasseur to AIU, November 1, 1928.

¹¹² Bathia Cuenca to AIU, December 10, 1930, Iran (XVIII) E 0173, Collection 16, 253–256, AIUAH; Bathia Cuenca to AIU, February 15, 1931, Iran (XVIII) E 0173, Collection 16, 244–246, AIUAH. In the December 10 letter, Bathia uses the word "juives," which is not age-specific.

¹¹³ Bathia Cuenca to AIU, December 10, 1930.

Adolphe, who no longer worked for the AIU but still provided assistance to his daughter, they stopped by the office of the director of the local municipal hospital. She reported:

The director of the hospital who studied in France has a lot of affection for my father, as the latter did favors for him. He asked me to procure him intelligent young Jewish girls to train them as nurses. I don't need to tell you that in these circumstances this is a remarkable thing. I unfortunately could only send him one for now.¹¹⁴

As the Brasseur family had lived in Iran for thirty years by then, Adolphe had cultivated important and long-term relationships with both Jewish and non-Jewish Iranians. He was thus able to pass these relationships down to his daughters, which provided them with important professional and social capital that served them in working with the Iranian government and in their standing with the AIU's Paris leadership.¹¹⁵ This particular letter evidences the existence of a municipal hospital run by the Iranian state rather than foreign missionaries, as well as a connection between the AIU and the Iranian professional class with whom it shared concerns about modern health care delivery. Additionally, it reveals an active collaborative effort to increase medical personnel in Isfahan and thereby grow the local medical infrastructure.

Even with that growth, other hospitals continued to serve communities. In 1949, representatives from the Jewish community of Mashhad wrote to the AIU requesting a school. In the letter, they reported that there was a Jewish hospital in the city: "The Jewish hospital of Mashhad receives Jewish and Muslim sick people; it is very appreciated by the Muslim population." Most of the funding for the hospital came from the Mashhadi Jewish diaspora in New York and London.¹¹⁶

By the middle of the twentieth century, in contrast with its activities from the 1900s through 1930s, the AIU had become less involved in its students' day-to-day health concerns. Discussions of student medical problems in the correspondence shifted to focusing on rare emergencies. Even when the same health issues arose as before, the AIU was now able to outsource its medical care, thanks to the Iranian state's expansion. In 1950, André Cuenca told Sélim Nassi, the director of the Borujerd school:

Sick students – I am saddened to learn that you have 150 sick students, some with ring-worm, others with trachoma. I hope you are doing what is necessary to give them the necessary care.

You can contact the Hygiene Administration of the Department of Public Education for this, which must operate in your city as everywhere else.¹¹⁷

Nonetheless, crises did occur, usually as a result of accidents or preexisting conditions. In 1953 in Isfahan, a student fainted and died, possibly of a heart attack. The thirteen-year-old boy, Khodadad (Yonatan) Gourzad, was from an impoverished family and malnourished despite participating in the school's clothing and food program; he weighed less than 21 kg (46 lbs.). The circumstances and response to Khodadad's collapse attest to the multiple interconnections between the AIU and Iran's growing health infrastructure at this time—particularly the health care provided by other international Jewish organizations. The boy was brought to the school's infirmary where several staff attempted to revive him, as did a doctor from the American Joint Distribution Committee and another from a nearby school. Once the death was confirmed, the school's director had to inform the police chief, the

¹¹⁴ Wanda Brasseur to AIU, April 9, 1939, 40, Iran VI E 65, Collection 22, 40, AIUAH.

¹¹⁵ Headrick, "A Family in Iran."

¹¹⁶ Jewish Marrano Community of Mashhad to André Cuenca, February 18, 1949, Iran AM E 013-D, AIUAM.

¹¹⁷ André Cuenca to Selim Nassi, January 17, 1950, AM IRAN E 0010A, AIUAM.

doctor for the Department of Public Education, the medical examiner, and, of course, the parents.¹¹⁸

By this time, the AIU was operating in a landscape in which European doctors and Christian missionaries were no longer the only resources for seeking medical care. With the expansion of the Iranian state under Reza Shah, the state invested in building hospitals, schools, and the bureaucracies needed to regulate them. Furthermore, as at least some AIU staff developed deeper relationships with Iranians due to the length of their stay in Iran, as the AIU hired more Iranians, and as the Jewish and non-Jewish children whom it had educated grew up and went on to serve in government institutions, the Iranian professional “modernizing” class became visible to the AIU in ways it had not before.

Conclusion

The teachers and directors of the AIU wrote thousands of letters from various Iranian cities to AIU headquarters in Paris. The letters reveal how their jobs as educators and purveyors of French universalism were entangled with health and medical concerns for their students and the Iranian Jewish communities in which they worked. This entanglement was both professional and deeply personal: medical issues were not only a set of problems to be intellectually conceptualized and professionally solved on others’ behalf, but something that could and often did cause stress and distress to the staff themselves. The letters serve as a deep reservoir of evidence that corroborates other sources about incidence and types of disease and practices for resolving health problems in Iran. Furthermore, they also provide insight into the landscapes of Iran’s provincial cities and communities.

At the same time, when deeply interrogated to tease out the living situation and motivations of their individual authors, the letters richly reveal the formation and expression of a “rational” Western subject, in opposition to perceived Iranian epistemologies. Adding a layer of complexity, this subject formation took place in triangulation with the staff’s often contentious relationship with their employer. The letters held up a mirror to the AIU’s effectiveness and self-consciously valorized its mission but also insisted on the writers’ own contributions to the organization’s success on the ground and the fact that the staff deserved just recompense for their sacrifices, in addition to the resources required to do their work.

Reading the AIU letters for information about health concerns shows that as the AIU staff engaged with a discourse of exhaustion, it mirrored the developing class consciousness of the small but growing Iranian professional middle class. Finally, through descriptions of relationships, the AIU letters reveal the emergence of other actors in a changing landscape. Over the course of the first four decades of the twentieth century, that landscape became more populated with other professionals who not only shared the AIU’s concerns and aspirations, and spoke the same language of modernization, but who were in view of, and in relationship with, the AIU staff. In this way, the social and spatial distances visible in the early twentieth century closed. Therefore, reading the letters allows us a glimpse of an increasingly dense web of relationships, bringing into view the gradual integration of the AIU’s mission with that of the growing Iranian state and the processes and progress of implementing of a newly shared and collaborative vision.

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¹¹⁸ Jacques Pérez to AIU, May 17, 1953, Iran AM E 059-B, AIUAM.

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