Reproductive Health Care from Fascism to Forza Nuova

La famiglia, elemento primo e cardinale della società, va quindi sostenuta e privilegiata, il lavoro della donna entro le mura domestiche incentivato, le famiglie numerose adeguatamente incoraggiate.

[The family, the first and cardinal element of society, will thus be supported and privileged, women’s work inside domestic walls incentivized, large families adequately encouraged.]

—Forza Nuova petition for “Reddito alle madri” (Income for mothers) campaign, August 2017

In August 2017, the far right political party Forza Nuova papered the walls of Rome with political posters heralding their vision of Italian motherhood. An image of a woman breastfeeding her child provides the sole

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1 Citation presents an ethical dilemma in the study of neo-Fascism. On the one hand, it is important to make research sources available to readers. On the other hand, direct links risk driving traffic to far-right sites. Conversations with fellow scholars at the Berkeley Center for Right-Wing Studies guide the decisions here. Throughout this article, all citations have been web archived for accuracy. Clicking on these links will bring you to a nonlive snapshot of the information referenced. While this approach captures only one piece of a larger site, it retains the original information available on a given date and does not contribute to the site’s current analytics. This means that if a political group changes the website text in the future, an archived record of the original information remains available here. See August 4, 2017, web archive, processed May 4, 2021: https://web.archive.org/web/20210504121006/http://www.forzanuova.eu/reddito-alle-madri/.

2 Forza Nuova (New Force, known by the Italian acronym FN) was founded by current National Secretary Roberto Fiore in 1997. Their approach to reproductive rights draws on Fascist
illustration. At once realistic and iconic, contemporary and timeless, the breastfeeding woman is depicted in the burned ochre and peach blush tones of a Mediterranean fresco. Quiet internal action centers the composition: the mother breastfeeds and her infant suckles, with their hand pumping her swollen breast. Set in three-quarters profile, the angle emphasizes her Roman nose; her bobbed brown hair falls in soft curls from her downcast eyes to her upturned lips. These compositional elements frame Forza Nuova’s breastfeeding mother as the contemporary heir to early twelfth-century Catholic imagery of the *Madonna lactans*, the breast-feeding mother of Christ and a prescriptive model for Italian womanhood (fig. 1).³ Read in terms of Laura Mulvey’s oft-cited articulation of gendered scopophilia (1975), this voyeuristic observation blurs Catholicism into pornography. The *Madonna lactans* provided pretext for pious contemplation, presenting passersby with a church-sanctioned indulgence to stare at a woman’s milk-engorged breast. Noteworthy historical examples included Michelangelo Buonarroti’s 1520–25 “Madonna and Child,” Giorgione’s 1506 “Tempest,” and Orazio Gentileschi’s 1625–26 “Rest on the Flight to Egypt.” Vernacular artists painted the *Madonna lactans* into every nook of public and private life—in churches and bedchambers, in sermons and on street corner tabernacles, as Yael Manes (2014) has observed (see also Bymum 1984). How fitting that this latter-day *lactans* watches over Roman thoroughfares today.

Indoctrination to equate womanhood with breastfeeding continued to cover Italy’s urban centers across the temporal interval. The origin of this iconography dates back to the Renaissance, but the poster’s other mother was born more recently: the Fascist period *donna 900* (fig. 2). Graphic artist Gino Boccasile drew robust calendar girls to advertise the then-popular literary magazine *900*, and later *Grande Firme* (Big companies). Large hips and breasts were, apparently, alluring for heterosexual men.⁴ To the regime, they also hinted

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³ Usage of the depiction crested alongside the rise the Cisterian Order in the twelfth century, as part of the period’s more general upsurge in Marian theology and devotion. Milk was seen as processed blood, and the milk of the Virgin to some extent paralleled the role of the Blood of Christ. Appropriately for the contemporary poster’s dissemination in Rome, the earliest surviving imagery of the *Madonna lactans* can be found in Trastevere, in the late Middle Ages facade of the neighborhood’s Santa Maria Church.

⁴ The inherent contradiction animating the *Madonna lactans* corresponds with that of the ideal Fascist woman as identified by Victoria De Grazia (1992): a woman at once active and fertile.
Figure 1 “Nascite ai minimi storici/L’Italia ha bisogno di figli/non di unioni gay e immigrati” (Births at historic lows/Italy needs children/not gay marriage and immigrants). Forza Nuova poster, summer 2017, Rome. A color version of this figure is available online.
Figure 2  Magazine cover for *Grande Firme* (Big companies). Gino Boccasile, April 1937. A color version of this figure is available online.
at high female fertility. The dictatorship celebrated the *donna 900* along with other florid female archetypes like the *massaia* (countrywoman) and *mondina* (female rice weeder). For negative contrast, the skeletal *donna crisi* stood for the so-called crisis woman, the frigid intellectual urbanite (Chang 2015). Ample female bodies held the potential to offset the nation’s demographic decline if only the regime could convince women to birth and breastfeed as many infants as possible.

Propaganda rose to the occasion: Marcello Dudovich’s infant-centric posters promoted a new holiday, the Giornata della Madre e del Fanciullo (Day of the mother and the child, later Mother’s Day; fig. 3), inaugurated on December 24, 1930, to coincide with the anniversary of Mother Mary’s labor pains. Illustrations visually elided mothers by using them as human pedestals to loft babies into center frame—an artistic incarnation of state policies that valued women as isolated body parts rather than their human whole.⁵ Posters, films, and booklets by less famous names promoted hygienic breastfeeding practices and rationalist obstetric clinics. But among these many politicized graphic designers, Boccasile was considered the best. Today Boccasile’s interwar advertisements for coffee, soap, olive oil, radios, and sewing machines are prized by collectors (fig. 4). Less celebrated are the political posters that he designed to support the Fascist party. Boccasile supported the dictatorship in art and deed. He used his fame as a graphic designer to lend ballast to Fascist legislation, serving as a signatory for the 1938 *Manifesto della razza* (Manifesto of the race), the document that ushered in Italy’s anti-Semitic and imperial race laws in Italy and Italian East Africa (modern-day Ethiopia, Eritrea, and Somalia).

In 2017, Forza Nuova brought the far-right political resonance of Boccasile’s popular prints back to the places they had papered during the Fascist *ventennio* (twenty-year period of dictatorial rule). The breastfeeding mother and child appeared in a series of posters reframing Boccasile’s authoritarian artwork for the contemporary period. One poster, “*Difendila,*” lifted Boccasile’s original 1944 imagery directly. Then as now, the poster depicts a caricatured Black soldier grinning lasciviously as he rips the white dress off a protesting white woman. At the time of its creation, the man evoked a generalized racism aimed at Black soldiers from Allied countries, both African American soldiers from the United States and Moroccan soldiers.

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⁵ On the reduction of women to body parts in European film, see Pajączkowska (2000) as well as more general antecedents of looking as breaking, articulated by Mulvey (1975) and Mandy Merck (2007).
serving in the French auxiliary units (fig. 5). Forza Nuova added three new words to Boccasile’s accompanying text, “Defend her . . . from the new invaders,” assumed now to be African migrants (fig. 6). Endless repetition of the schema suggests that far-right fears dwell on what Rosi Braidotti
(1999) has termed the “maternal imagination,” the belief that mothers possess the power to kill or deform their infants during the gestational period. Citing Pierre Darmon, Braidotti notes that, following the landing of the Allied troops in Normandy, blonde Norman women claimed that they
Figure 5  “Difendila! Potrebbe essere tua madre, tua moglie, tua sorella, tua figlia” (Defend her! She could be your mother, your wife, your sister, your daughter). Designed by Gino Boccasile, Rome, 1944. A color version of this figure is available online.
Figure 6 “Difendila dai nuovi invasori! Potrebbe essere tua madre, tua moglie, tua sorella, tua figlia” (Defend her from the new invaders! She could be your mother, your wife, your sister, your daughter). Designed by Forza Nuova, summer 2017, Rome. A color version of this figure is available online.

had delivered Black babies because they had been “frightened” by the first Black soldiers they had seen. Historical accounts of the maternal imaginary are inevitably freighted with the question of how race relates to female reproductive power.
What’s at stake in the new pronatalism

Breastfeeding imagery anchors far-right propaganda past and present. As intimated by the historical antecedents of the Forza Nuova poster, breastfeeding symbolically connotes ideal Fascist motherhood. Scholars of the history of gender under Fascism, including Victoria De Grazia (1992), Elizabeth Dixon Whitaker (2000), Perry Wilson (1993, 2002), and Lesley Caldwell (1991), have generally defined the ideal Fascist mother in terms of physical qualities like high fertility and physical robustness. I expand on this characterization by examining ideal Fascist motherhood primarily in terms of this specific form of nurturing and secondarily as a collection of physical and moral characteristics that supposedly enhanced breast milk’s consistency and flavor, ultimately leading—the regime hoped—to infant health and a larger domestic population. To combat infant mortality, the Senate established the National Bureau for the Protection of Maternity and Infancy, known by the Italian acronym ONMI. Originally titled Opera Nazionale Fascista per la Protezione della Maternità e dell’Infanzia, this group was created by a subsection of law 2277 on December 10, 1925.6 On April 15, 1926, additional regulatory procedures for ONMI were published.7 Collections of the 1927 Bachelor Tax, which assigned an increased tax to able-bodied, adult men for every year spent single, went straight into ONMI coffers. Prevention, rather than treatment of disease, was the focus of ONMI’s activities.

More broadly, Fascism transformed maternity from a duty toward the family and the Catholic Church to an obligation to the state. Associated actions like breastfeeding switched from the private sphere to the public, and they were regulated on this level through the institutionalization of maternal health care. With the creation of ONMI, the regime moved to rationalize reproductive health care: newsreels like Alle madri d’Italia (To the mothers of Italy; 1935) promoted new clinics that Taylorized breastfeeding, turning it into a prescriptive public practice. By controlling the quantity and quality of breast milk, the regime hoped to shape the future body politic from the inside out. Belying claims to scientific rationality, Fascist breastfeeding propaganda insisted that infants could only be properly nourished by their own mothers and decried professional breastfeeding by wet nurses as harmful to developing bodies and minds. Nutrition and pronatalism provided a pretext for controlling women and forcing them to be not just mothers but a very particular kind of mother—one firmly circumscribed in the socially conservative Fascist family. As the Renaissance iconography

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6 This is the standard English translation for ONMI used by scholars of Fascist maternal policy, such as Elizabeth Dixon Whitaker (2000), David Horn (1994), and Maurizio Bettini (2008). Translations are my own unless otherwise specified.

7 On the regime’s legislative and financial support of ONMI, see Cioccetti (1956).
and modern continuity of the *Madonna lactans* demonstrates, framing breastfeeding as a target for government intervention was not new. What was new, however, was breastfeeding’s galvanic charge and cultural centralization within the nationalist, eugenic context.

Let the archive speak: put the small museum’s ephemera at the center and support it with the major archive’s government records. This constitutes a methodological thesis: nontraditional sites hold the everyday ephemera that speaks to the embodied experience of Fascist reproductive policy. Although the Ministry of Health archive strives for political neutrality, the structure and foundational legislation of this government branch—and even the concrete block in the EUR neighborhood of Rome that houses the current generation of policy makers—remains largely unchanged from when it was first constructed in the Fascist *ventennio*. This is not a call to stop using government archives but rather a model to show how these different museums, archives, and materials might be placed in conversation, providing cohesive testimony to the most intimate horrors of Fascism. Into the clinic, into the body: this is an article about insides. Following Anne Fausto-Sterling (2012) and Jana Sawicki’s (1991) centering of reproductive bodies within government medical zones and technologies of control, small archives write history in an ink of blood and milk. Methodologies of resistance can amplify quiet voices, providing a powerful antidote to the pervasive silencing under Fascist regimes.

At stake in these artistic antecedents are the constellation of far-right causes and religious concerns that anchor and inform the current call for pronatalism. What makes the Italian case particular is who stands at the center of the debate. Breastfeeding mothers, in imagery and didacticism, represent an ongoing obsession of the Italian far Right. To follow the figure of the breastfeeding mother, this article enumerates the visual and architectural strategies used by Fascist-period breastfeeding propaganda to explain how dictatorial regimes have historically attempted to construct control over women’s reproductive care. Contemporary far-right breastfeeding propaganda continues these strains, making their stance not merely populist but explicitly Fascist.

### Economics of maternity, present and past

Forza Nuova frames their bid for Italian women to birth more children as oppositional: “Births at historic lows/Italy needs children/not gay marriage and immigrants.” Saying yes to more Italian babies means saying no

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8 Here I echo Gayatri Spivak’s famous question, “Can the Subaltern Speak?” reposing the question to draw attention to the power relations inherent in Italian archive selection for historical research (Spivak 2010).
to gay marriage and migration because the former unions do not produce children and the latter unions produce non-Italian children. The trinity in this slogan—one pro versus two cons—mirrors the tripartite financial legislation supporting this pronatalist push. Both the poster’s phrasing and the campaign’s fiscal makeup merge previously unrelated social issues by setting them in financial opposition. Forza Nuova uses the breastfeeding mother poster to promote the #redditoallemadri campaign, a stipend for mothers. #redditoallemadri proposes to pay Italian women 650 euros per month for their first child from the seventh month of pregnancy until the child turns eighteen years old. An additional 350 euros per month will be paid for each additional child. As Forza Nuova’s official press release indicates, these funds are meant to raise the current Italian birthrate of 1.34 children per potential mother by incentivizing women’s work within the domestic sphere: “The family, the first and cardinal element of society, will thus be supported and privileged, women’s work inside domestic walls incentivized, large families adequately encouraged.”

Like the “Diffendila” poster, this rhetoric makes explicit reference to Fascist pronatalist policies as a positive social model for women. The concept of famiglie numerose (large families) dates from the Fascist period and typically meant a family with at least six children. Mothers of such families were eligible to receive financial remuneration in the form of prizes from the regime (fig. 7). To fund a modern-day equivalent of such prizes, Forza Nuova suggests redirecting funds from the Agenzia delle Entrate (the Italian Revenue Agency), the government sector deputized to process work stay permits, study visas, and Italian citizenship for those born abroad. By reducing funds meant to “incentivize immigration,” Forza Nuova promises to “obligate even the Internal Revenue Agency to contribute to the future of Italy.”

Forza Nuova’s #redditoallemadri proposal and the breastfeeding poster promoting it are the most recent iteration of a much longer legacy of bids for far-right state power over maternal bodies and health care in Italy. Nowhere was ONMI’s commitment to government control over breastfeeding clearer than in their one and only feature-length newsreel: Alle madri d’Italia. Produced by the Istituto Nazionale Lucc, directed by Pietro Francisci, this forty-one-minute silent film was commissioned for the tenth anniversary of the ONMI organization (Caldwell 1991, 43) to instruct women on how to hygienically breastfeed and care for their young children in the

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10 Ibid.
new state clinics. Indeed, the film states its pedantic intent at the very beginning: “The film shows how the Institute prepares the woman for her divine mission of motherhood, and teaches her how to raise her children to be healthy and strong.” This film celebrates the maternal body as a productive apparatus, manufacturing infants and milk with the time-bound regularity of a factory whistle.

The popular press echoed ONMI’s evaluations of the audience’s bodies and minds, and echoed their assumption that the built environment would play a critical role in supporting the regime’s pronatalist goals. After a showing of Alle madri d’Italia in a popular Roman piazza, Il Corriere della Sera published a laudatory review of the film. The article notes that principles of

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11 The Istituto Nazionale Luce (L’Unione Cinematografica Educativa) produced and disseminated propagandistic and didactic films, as well as entertainment films, on behalf of the Fascist Regime. See Forgacs (1990) and Forgacs and Grundle (2007). During the Fascist period, Francisci directed a number of short films and documentaries before turning to more commercially viable initiatives such as Artista (1954) and Le fatiche di Ercole (1958). See Landy (2014).

12 This Corriere della Sera article reprints sections from the September 1936 edition of Maternità ed Infanzia. Lacking other authorial information, the reappearance of ONMI text
hygiene and nutrition (educazione alimentare) govern ONMI’s activities and that their ultimate importance lies in “the health and development of our race.” To the unnamed journalist, the built environment serves as a hygienic factory to produce the regime’s ideal Italian mothers. In turn, their bodies serve the same purpose as these buildings: they temporarily house and nourish new bodies for the nation, until the young Italians are strong enough to leave the proverbial nest.

Alle madri d'Italia: Context in the history of medicine

Prior to the Fascist period, patients received health care primarily in private homes. During the 1930s, the regime attempted to move health care out of the domestic realm and into public clinics. Broadly speaking, the regime moved to nationalize and industrialize the medical services available to pregnant and nursing mothers. Alle madri d'Italia provides a microcosm of these parallel developments in its gendered treatment of a professional dichotomy: the midwife and the doctor. The film’s approach to these two figures offers a lens through which to examine the construction of the rhetoric of hygiene and how it came to be imbued with moralistic tones. The regime sought to constrict reproductive options down to one: birth, the state’s preferred outcome. Demographic legislation like the Rocco Code defined abortion as a crime against the integrity and health of the race, classifying it under “crimes against procreation,” a new category of violations. ONMI then translated Fascist law into propaganda. Propaganda worked to discredit the medical authority of midwives due in part to their dual role as abortionists. Eliminating midwives eliminated choices: not only of whether or not to have a child but also of whether to see a male or female clinician and whether to be treated in a private home or a public clinic. The regime could

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13 The industrialization of health care also correlates with the system’s expansion under Benito Mussolini. Prior to the Fascist period, the state invested little in national medical services.

14 In distinct contrast with the other terms used in the period, such as the neutral levatrice or the explicitly abortionist term “angel-maker” (fattor d’angeli), the suffix ona and the modifier qualunque work in concert to intensify the visceral sense of negativity in the film’s phrasing. See “Praticona,” Garzanti Linguistica On-line. http://garzantilinguistica.sapere.it/it/traduzione/en/cerca?q=praticona&dizionario=iten&commit=%C2%A0.
bring women into the nascent industrial health care created to encourage pronatalism, but to do so, they first had to discredit midwives in propaganda.

*Alle madri d'Italia* opens with a paradox: ONMI created this film to encourage working-class women to visit their clinics. And yet every film sequence that might demonstrate the content of a medical examination slams the clinic door on the audience, their potential clients, with an abrupt camera cut. The closed door opens a question: Why does the film linger here, at the threshold of public and private? The answer has broad implications for how ONMI used *Alle madri d'Italia* to redefine the appropriate spaces, people, and practices for women’s health care. In the film’s first extended sequence, the camera accompanies a prospective ONMI client on her visit to an obstetric clinic (Consultatorio Ostetrico). The camera follows her into the examination room, with its sheet-covered table and elevated metal stirrups. By shooting at the woman’s shoulder level from a distance of two feet, the camera’s perspective allows the audience to experience the entrance to the examination room as though they were this client, or perhaps a female friend or family member. This shared perspective ends as the exam begins: now the camera pans back to the threshold, shooting the scene from the door frame. Standing, the woman turns to face the doctor. She begins to take off her coat in preparation for the exam. The doctor, also standing, watches her, slightly slumped with his hands in his white medical coat pockets as a nurse washes an array of medical tools at the back corner sink. The film cuts here, at five minutes and twenty-one seconds. The next two shots draw attention to this visual lacuna: first, the camera trains on the closed door to a pediatric clinic. The audience will not see the woman disrobe, although it is understood that the doctor will. They also will not see the doctor-patient interactions that comprise a standard exam at an ONMI clinic. Instead, the audience reads intertitles introducing the next filmic vignette projected onto the closed clinic door: “ONMI is always present in the home at the time of birth.” This ordering suggests that the private home can become a public clinic simply by inserting a doctor to act as a medical agent of the state. Closed or closing doors, followed by camera cuts to intertitles, shut the audience out of ONMI-controlled medical visits in the next film segment as well. Following this metaphoric sequence of the private home as public clinic, the film deposits the audience at an actual ONMI clinic, this time to witness the swiftly closing door of the delivery room (*sala da parto*). Although these occlusions of the naked female body and its medical examination may initially appear meant to preserve the woman’s privacy, the filmic emphasis on this gap in the narrative arc points to respect for a different subject altogether. Only ONMI, personified by the doctor, possesses the authority to
examine, quantify, and prescribe actions to potential mothers. He can go where cameras, and by extension, the audience, cannot—at least not as witnessing subjects rather than witnessed objects.\footnote{This sequence divides the audience’s identity into their dual roles as filmgoers and clinic clients. As filmgoers, they cannot enter the exam room, but as ONMI clients, they must. In other words, the camera work divides the audience into subjects who are not allowed to look and as objects to be looked at by others. This type of division occludes the possibility of establishing and maintaining a female perspective on the clinical scene.}

In this film, as in reality, ONMI hoped to use doctors to penetrate formerly intimate spaces so as to instruct mothers in new, regime-approved approaches to breastfeeding and early childcare. Blending the public and private spheres of life accomplished two demographic goals for the regime. Put telegraphically, this propaganda deploys the hit parade of gendered signifiers: rationality, science, technology, progress, productivity, and access to the public sphere stand as masculine privileges. The feminine is always embodied, inevitably maternal. Primitive, irrational, and dirty, the female private sphere must be penetrated with a public gaze through filmic propaganda to promote supervision and control. Explicitly, Alle madri d’Italia promoted hygiene to reduce infant mortality. But it also implicitly advocated for labor-intensive maternal practices. So complex were these new procedures that they required an affiliate of ONMI to demonstrate how they are done, thus opening the private sphere to state surveillance and control. But to introduce the state into private homes, ONMI had to create a demand for such advice. Traditionally, the midwife, not the doctor, instructed women during pregnancy, childbirth, and breastfeeding. Discrediting midwives broke local social bonds and, with them, the “secret routes of female solidarity” referred to by French sage femme Louise Bourgeois as the option of abortion (in Gissi 2004, 131). Discrediting female midwives allowed male doctors to assume the primary advisory role for women’s reproductive care.

**The dirt on midwives: Gender, rurality, and ethnicity as markers of poor hygiene**

Under Fascism, propaganda promoted hygienic breastfeeding through negative binary contrast, writ in the physical language of houses, clinics, and country lanes. Countrified spaces, the film suggests, lead to harmful medical practices. It is within this latter context of superstition and disorder that Alle madri d’Italia first introduces the midwife, damning her through her associative context. The film suggests that medical practitioners who work in such spaces should not be treated as authorities on maternal or infant diets. Following an injunction not to drink or smoke during pregnancy and to eat
lots of fruits and vegetables during breastfeeding, intertitles warn, “Do not listen to those who give bad advice.” The film cuts to a sunlit country house with two chickens pecking at the ground outside. Two elderly women round the corner of the house, animatedly conversing and using expressive hand gestures. The negative text primes the audience to view this positive scene with doubt. Note that the film does not attack female bodies of knowledge directly—it does not name these women as midwives, and it does not offer intertitles revealing the content of their speech. Instead, preface this scene with negative insinuation encourages the audience to use their imagination—What awful things did those women say? Did I listen to similar bad advice?—to cast a specific location, the country village, in disrepute.

With this negative spatial context established, the next scene formally introduces the midwife. Grim and still, this first filmic portrayal recalls the faux-anthropological ethnic types and hierarchies depicted in La Difesa della Razza (The defense of the race), a periodical published by the regime to justify and popularize East African imperialism abroad and anti-Semitism at home. These images worked to construct ethnicity and race by naming differences in facial features, bodily structure, and skin tone, and assigning a relative value to each. In the case of the midwife, the film labels her as a practiciona qualunque (literally, “just any would-be practitioner”). As with fattor d’angeli, this terminology recalls the Fascist regime’s fears of independent health care providers and the possibility that they privately engaged in abortion practices despite the pronatalist laws enacted by the government. Through imagery as well as labeling, the film encourages the audience to read the woman as an undesirable racial other. The camera remains still and shoots the midwife in a lengthy three-quarters shot. This close-range long shot allows the audience ample time to note the dark pigment of practiciona’s skin. In contrast to the Aryan fairness of the doctors, nurses, and visitatrici domiciliari (home visitors) presented in other segments, the midwife’s skin is strikingly dark. Dressed in the traditional black of southern Italian women, she could be from a small town in the Mezzogiorno or Calabria, or even from one of the gypsy encampments dotting the city outskirts. Ironically, women had little choice but to consult a midwife in these regions. New ONMI obstetric

16 On the intersections of anti-Semitism, Catholicism, and the 1938 Race Laws as applied to Italian Jews, see Zuccotti (2002). For records and visual analysis of anti-Semitic constructions in La Difesa della Razza, see Pisanti (2006).

17 “Roma,” not “gypsy,” is currently the academic and journalistic term favored for these ethnic communities. However, I use the term “gypsy” here for two reasons: first, because the term “Roma” is anachronistic to the Fascist period, and second, because contemporary Italian gypsy communities generally do not refer to themselves as Roma, but as gypsies.
clinics tended to be built in major urban centers like Rome and Milan, or in relatively affluent northern and central regions like Tuscany. By associating this woman with the Italian south, the film also invokes racial and ethnic inferiority as well as low social class. As Gaia Giuliani and Cristina Lombardi-Diop (2013) have shown, early twentieth-century understandings of race in Italy conflated region with race and class. Southern Italy, they note, both threatened and constituted the whiteness of northern and upper-class Italians by representing the peninsula’s internal Blackness. The still portrait of ethnic disdain comes alive, to make a tiny but significant movement. The midwife rubs her hands together. Those hands, her most important tools in caring for the health of the maternal body, are too dangerous to touch. To cement these regional and ethnic characteristics as markers of medical jeopardy, intertitles intervene: “Questa donna è sporca!” (This woman is dirty!) written in white, are superimposed over her face (fig. 8).

Sporca is a loaded term. What forms of dirt and disorder are implied by the word choice and imagery used in this brief scene? Let us first consider why the intertitles label the midwife as dirty in the sense of microbial contamination, as the film addresses this element of her hygiene in the most strident terms. This film sequence shows one action only: we see the midwife rub her hands together. The next sequence mirrors this action and her actions, but through a glass lightly: a blonde nurse in a white uniform sterilizes a set of plastic gloves in hot, soapy water. The words “Cleanliness! Cleanliness!” pop at the center of the screen. Gloves were in fact a major concern.

Figure 8 Film still of Alle madri d’Italia (1935). Intertitles read “Questa donna è sporca!” (This woman is dirty!).
for the regime. In the *Lucinda*, an important Fascist periodical for midwives, gynecologist Cesare Micheli repeated reminds “midwives, including those who worked in the countryside or assisted poor women, of the need to use gloves while delivering a baby, something which is often not done, according to official investigations that have been carried out” (quoted in Gissi 2004, 125). A healer’s hands are the primary tools: hence the gravity of the difference between plastic gloves and bare hands, and between washing with soap and hot water versus not washing at all. By twinning these scenes, the film invites the audience to compare the midwife to the nurse in terms in opposing, but not opposite, characterizations of hygiene. In a Catholic country, sinks and hand washing inevitable raise the specter of Pontius Pilate, trying to wash his hands of the blood of Christ. Here as in the Bible, morality is judged at the sink.

Four hands—two clean and two dirty—carry an additional dimension in the film’s definition of hygiene. Between the hand rubbing and the implied exam to come, both women, it is implied, have made a moral choice. Read in this light, the midwife’s conspicuous hand rubbing calls attention to the fact that she has chosen not to perform this same physical gesture with the soap and water used by the nurse. And further, she elects not to wear plastic gloves. These three elements, unlike medical objects and spaces, were freely available to all. Faced with the choice between dirtiness and cleanliness, the midwife voluntarily elects the unhygienic option. This is the first moment in which the film implies a sort of moral dirtiness, in the midwife’s decision not to wash her hands, and thus to potentially infect her client with germs. And it is this willful decision not to wash her hands, rather than the hand washing itself, that marks the midwife as *sporca*: figuratively as well as literally dirty.

Such tendencies are not confined to the past, nor to the far Right. The Fascist-era Ministero della Salute remains the Italian Ministry of Health today. Harkening back to the terms of interwar propaganda, race and ethnicity denote reproductive hygiene or the lack thereof. Consider the exclusively white models of the nine-poster #FertilityDay set. Explicitly, the companion poster to the series conflates racial mixing with bad health habits like smoking, visually blaming Blackness for white sterility and infertility (fig. 9). The poster splits two images, on top, “The good habits to promote”: two white couples with toothpaste-commercial grins frolic by the ocean. Below a cartoon page rip, a second image, stained nicotine yellow: a Black man looks directly out of the poster at the viewer, a white woman sucks a cigarette, a Black woman—her face obscured, to frame her hair instead—smokes from a bong, and a white man passes out at the table. In this 2016 poster produced by the Ministry of Health, race marks degeneracy, the “the bad ‘friends’ to abandon.” This attribution of essential dirtiness to women and to racial minorities in the medical realm has
been theorized by Lynda Birke (2000) and other feminist scholars of biology as the abject, that is, as something both essential and abhorred. But this contemporary equation adds a new variable. Here, interracial contact does not threaten white female chastity, as it does in Forza Nuova’s Boccasile update, but fertility itself. In the neo-Fascist poster, the woman may be sexually assaulted, but she can get pregnant again; in the Health Ministry poster, the possibility for future procreation ceases to exist. On occasion, the far-right ideology of reproductive threat is stronger in mainstream messaging than in neo-Fascist propaganda.
Posters like this one, as well as filmic and architectural propaganda, follow a three-step cognitive strategy. First, the insinuation of poor hygiene ruptures preexisting bonds between women of reproductive age and their medical counselors who work outside the state system. Second, the conflation of hygiene panic with racial and ethnic minorities broadens and intensifies the rupture, creating isolation. Here, posters and films typically explain a white Italian woman’s low fertility as the result of physical proximity to Blackness; whether this contact is with a clinical professional or personal friend does not seem to matter so much as the comparative darkness of their skin. Third, enter the hero, in the form of new and ever more restrictive far-right legislation over reproductive bodies. Typically this takes the form of a baby bump, a small but memorable economic bonus trailed by a series of obscure bylaws with pronatalist intent.

Call the doctor! The high stakes of poor hygiene

By establishing a moralized rhetoric of hygiene, Alle madri d’Italia casts the medical work of the midwife into disrepute. This move created a professional vacuum, one that ONMI hoped to fill with their preferred figure of medical expertise, the doctor. To hasten this exchange of medical authority, the next section of the film works to cast the world as an inherently hostile and dangerous place. The film admonishes the audience to remain ever vigilant, as “A thousand dangers threaten your child at every moment. You have the duty to supervise him” (fig. 10). Mothers must combat a visual parade of hazardous elements and products: boiling water and blazing fire, needles and scissors, benzene and bleach. By exaggerating the level and likelihood of environmental threat through these violent vignettes, Alle madri d’Italia engenders a keen and immediate desire for a powerful new medical figure to battle these modern terrors.

This is very much the case in the film chapter titled, “Il bimbo e il medico” (The infant and the doctor). Following an image of an eerily still infant in a bed with his eyes closed, the film presents the viewer with the intertitles, “It is a grave error to call the doctor when an illness is already advanced” (fig. 11). Next to the intertitles, three phantoms gasp: poor mothering can scare a ghost. The image of this infant, who appears nearly dead, is coupled with text that evokes an aura of guilt around the absent mother who has failed to call for the doctor’s aid. By rapidly juxtaposing this image and text, the film suggests that this infant’s mother is implicitly responsible for his state. In other words, the advanced state of the infant’s illness is portrayed as a result of the mother’s choice not to call the doctor. While the film does not explore her motives for this decision, her grave errore is painted in terms that imbue the practical decisions involved in child rearing with moral implications. The
Figure 10  Film still of Alle madri d’Italia (1935). Intertitles read “Soveglianza! Mille pericoli minacciano in ogni momento il tuo bambino, hai il dovere di sorvegliarlo” (Surveillance! A thousand dangers threaten your child at every moment. You have the duty to supervise him).

Figure 11  Film still of Alle madri d’Italia (1935). Intertitles read “È grave errore chiamare il medico quando una malattia è già avanzata” (It is a grave error to call the doctor when an illness is already advanced).
viewer thus perceives that the mother is guilty of poor decision making. Mothers, as well as midwives, can be guilty of poor moral hygiene. As Whitaker (2000) has observed, women were widely held accountable for the loss of a pregnancy. She notes that this type of reasoning “reflect[s] the growing belief that medical interventions were harmless to women and children, but that women’s misbehavior could have grave and fatal consequences” (144).

Establishing medical authority: How clinics and test tubes make the doctor

Traditionally, the midwife’s medical authority derived from years of service and long-standing relationships with a specific geographic community. But time invested and bonds forged are both intangible, local forms of value. By contrast, the doctor’s medical authority is manifested in outwardly visible signs: his diploma, his clinic, and his tools. Nancy Triolo notes, “the authority of the surgeon/obstetrician, as distinguished from that of the midwife, was based on the physician’s exclusive use of surgical instruments. By the end of the 18th century, in many parts of Italy, this new authority was being legislatively reinforced as laws were passed forbidding the midwives’ use of surgical instruments and manual versions” (1994, 261). The Fascist regime both intensified and extended this legislation by obstructing midwives’ access to higher education and certification in obstetrics. New laws fixed this professional competition from the start by putting doctors in control of all new medical spaces and technologies. Ultimately, these legislative moves placed female reproductive power in doctors’ hands. Alle madri d’Italia takes pains to emphasize these places and objects in the next section—they not only mark and maintain the doctor’s authority over the maternal body; they also commemorate the doctor’s victory in this professional battle.

In a filmic incarnation of Fascist legislation, the camera defines the doctor’s medical authority through his surroundings and his tools. An extended pan shot sweeps the immaculate clinic floor. A long cut follows, drinking in the sparkling test tubes and shining glassware arrayed in the open shelving above. These two sequences demonstrate ONMI’s fetishistic approach to technology. This filmic treatment of the doctor in the clinic suggests that medical spaces and objects do not simply support the health provider’s work but actually constitute his expertise. No patients mar the perfect hygiene of this modern, scientific space. In a later film sequence, the camera treats the

18 On a literary front, Luigi Pirandello (1945) explores Fascist society’s diverging expectations for a country-based midwife (levatrice) and a city-educated obstetrician (obstetrician) in the short story “Donna Mimma.”
dentist’s office in a similar way, lingering over the space and objects and largely ignoring the agents who use them. We see a line of dentist’s chairs, with one infant being examined at each. The room is so conspicuously clean that it reflects the entire scene in a mirrored lake of artificial light. A close-up zooms toward a little girl atop a large gurney. She sits marooned on this bright medical island. Depopulating the clinic in this way suggests how ONMI viewed perfect hygiene: it lay in the quarantining or absence of working-class female bodies, even the smallest ones, the better to manage their microbial mess.

The evolution of clinical space

After their free Alle madri d’Italia screening, audience members received a parting gift: an instructional pamphlet, La tutela della Maternità e dell’infanzia in Italia. An article for ONMI clinic directors in Maternità ed Infanzia explains the gift’s purpose. The pamphlet would provide a means for working-class women to study the film’s messages and absorb its dictates long after projection. La tutela could traverse borders that Alle madri d’Italia, being projected to groups in public spaces, could not. Tucked into a pocket, La tutela carried ONMI-approved images and dictums into individual women’s private homes. But the brevity of the pamphlet format constrained ONMI to select only the most important photographs and film stills for inclusion. Would they select images of hygienic breastfeeding? Baby bottle preparation? No; the majority of the images selected for this booklet do not show how one ought to breastfeed, but where.

La tutela offered a photo album of the rationalist clinics filmed for Alle madri d’Italia, captioned with descriptive titles. Rationalism, a then-new architectural style, was characterized by severe grids and extreme regularity that connoted functionality. Rigid grids promised to fence in unruly humanity, which may account for why rationalist style dominated prisons and hospitals in the public sphere and bathrooms and kitchens in the private. It was a style meant for top-down control rather than leisurely living. The booklet features a collection of buildings (“A Prophylactic Colony for Weak and [Disease-] Prone Children,” “The Observation Center for Wayward, Abandoned, and Delinquent Minors,” and numerous homes) marked by rationalist aesthetics.¹⁹ Images of buildings dominate images of breastfeeding by

¹⁹ Like the buildings constructed in the New Towns, these buildings constitute the vanguard of architectural innovation and should not be interpreted as a norm for the buildings in use in Italy during the 1920s and 1930s. Internal colonization marked these urban sites, all built from scratch in a resolutely rationalist architectural style between 1932 and
almost three to one. This ratio underscores the importance that ONMI assigned to the built environment in promoting breastfeeding as the means to achieve its pronatalist goals. But would the working-class women reading La tutela have chosen to use ONMI’s services based on the architectural style of their clinics? The unlikelihood of such a scenario suggests an alternate explanation for the huge number of rationalist buildings in this pamphlet, and the preponderance of this style in similar Fascist publications focused on the institutional care for women and children. To understand why rationalist structures eclipsed maternal practices as La tutela’s key photographic subject, we must look closer, at the buildings themselves.

Here we note the qualitative aspects of these clinics: they visually impress with their modernity and cleanliness. Forced to express Alle madri d’Italia’s key arguments pictorially, and in extreme synthesis, La tutela shows what the pages of Maternità ed Infanzia tell: for ONMI, rationalist clinics gave physical form to the abstract ideal of moral hygiene. Analyzing the architectural features of one ONMI center, the Home of the Mother and Child (Casa della Madre e del Bambino; see fig. 12), demonstrates how the regime mobilized architectural aesthetics toward this scientific-religious paragon. Like many rationalist structures, this Casa appears at once substantial in form and weightless in design. A curved porch breaks the monotony of the cubist block of reinforced concrete, its sharp swoop centered in this photographic composition. This white, three-story building gives one the impression of a futurist ship sailing above the empty Pontine plain. Note that La tutela uses a titling system for the photographs of these structures, defining them on the basis of their intended function and inhabitants when an official name for the building is not available. This editorial decision points to the dual importance of the buildings’ appearance and specialized utility for ONMI operations.

In a pamphlet whose title seems to indicate content relating to childcare, architecture emerges as the most prominent photographic theme instead. Pictures of happy mothers and children are a distinct minority. Even when present, these pairs are ensconced in interior architectural spaces marked by

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1939. Situated within the broader Fascist perception of the city as a barren, diseased body and the countryside as a fertile and healthy zone, the towns of Littoria (1932), Pontinia (1933), Sabaudia (1934), Aprilia (1937), and Pomezia (1939) simply shift the Taylorist objective of the factory from maximized production of goods to maximized production of healthy children.

20 This group could not be indoctrinated with textual propaganda and was often too poor to attend the cinema, where LUCE newsreels highlighted ONMI activities before the feature film. Photography-based booklets provided a way for ONMI to reach its target audience.

21 See Ministero dell’educazione nazionale (1940) and Assistenza igienico-sanitaria negli impianti industriali (1935).
the rationalist aesthetic. Everywhere we see them lined up in orderly rows, moving from the ONMI clinic filled with gleaming metallic surfaces, to the similarly spotless refectory, to the orderly on-site gardens and sunlit terraces. The building appears built to process the normal domestic activities of the mothers and children en masse. It Taylorizes the daily rituals of the private home. Below a photo featuring children washing their faces in sync at a line of sinks (fig. 13), the text proclaims, “Life in the ONMI nurseries: cleanliness

Figure 12  Photograph of Casa della Madre e del Bambino, 1936, unspecified city, uncaptioned. *La tutela della Maternità e dell’Infanzia in Italia*, 1936. A color version of this figure is available online.
and hygiene.” And indeed, the cleanliness of this building impresses itself upon the reader, as do the sheer number of people “processed” by the building. The rationalist exteriors of these buildings gesture to the rationalized activities that occur therein.

Taken in sum, La tutela suggests a porous understanding of what constituted a factory: this structure evoked the conventional image of an industrial plant producing commercial goods, but it could also refer to a clinical center
producing an ideal environment for breastfeeding. It might have even suggested a biological entity, such as the mother’s body with its reproductive capacities. An open-ended definition of the factory, coupled with the centrality of this structure to Fascist urban planning, grounds the peculiar relationship of buildings to bodies that pervades ONMI propaganda.

The regime obsessively tracked the number of bodies processed by its health care services. ONMI’s role in this endeavor cannot be underestimated. In the year 1935 alone, 255,605 pregnant mothers came to an ONMI-run obstetric clinic for their first visit, and 485,958 infants were taken to their first visit at an ONMI-run pediatric clinic, according to the Istituto Centrale di Statistica del Regno d’Italia (the Central Statistics Institute of the Kingdom of Italy, or ISTAT), the Fascist government’s official arm of statistical analysis. Further data details visitor totals for ONMI’s refectories, milk dispensaries, and nurseries. ISTAT data for ONMI’s activities lists increasingly specific and numerous public institutional settings for the years 1936–46. By and large, architecture trumped agency: demographers working on behalf of the regime divided this data not by who served the mothers and children but rather by where they were served, that is, primarily in clinical settings rather than in the home. Rationalist ONMI centers emerged as an architectural solution to a seemingly vast demographic problem.22

Dictatorial approaches to reproductive health care not only outlived the regime, they knit together strong stitches of historical continuity regarding how Italian state systems, both liberal and conservative, have interpreted maternity and infant care. Italy’s national health board, the Servizio Sanitario Nazionale, introduced a series of reforms to ONMI during the economic boom, shifting from ONMI’s emphasis on maternal monitoring to focus instead on pediatric care. Soon after, these new health-care services folded into national programs for generalized social assistance. New clinics associated with the Unità Sanitarie Locali (local health unit, now known as the Azienda Sanitaria Locale [local health company], or ASL) absorbed clients from ONMI’s regional centers, decreasing their utility to young mothers and, relatedly, diminishing their perceived medical legitimacy. ONMI’s fall from grace in the wake of late 1960s not only reflected the ascent of ASL but also a popular referendum on former Fascist policies: many women considered this decline to be a referendum on sexist and racist maternal policies during the 1930s.23 The board was officially dissolved on December 31, 1975.

22 These themes are not confined to the auspices of ONMI. Similar preoccupations figure in the city planning of the New Towns in the Pontine Marshes.

23 Whittaker analyzes this phenomenon in her conclusion to Measuring Mamma’s Milk (2000).
Ironically, it was only with ONMI’s decentralization and declining use that Italian health care began to achieve the board’s practical aims: moving women’s health care from the home and into public hospitals and private clinics. Starting in the 1970s, Italian women began to build consultori, an autonomous countermodel to government-controlled Fascist clinics. Self-managed health-care centers taught women how to conduct self-exams, how to self-administer an abortion, how to use a speculum, and how to detect common sexually transmitted diseases and treat them. Firsthand accounts by staff and clients suggest that community followed autonomy, as alliances developed between “the women who go there to give birth or have and abortion and those who work there as nurses, midwives, telephone operators, and cleaning women.”

Clinical architecture and staff powerfully inflected the both the actions and tone of reproductive care.

**Breastfeeding from ONMI to #FertilityDay: Continuities and legacies**

“To be mothers, to be workers, to be ourselves.” This slogan from Tempo di Essere Madri (Time to be mothers), a women’s organization associated with the neo-Fascist movement Casa Pound, evokes the long-standing Italian challenge of integrating motherhood with gainful employment. The liberal-at-first-glance stance is in keeping with the movement’s origins. The neo-Fascist movement developed when a constellation of far-right social groups coalesced through a coordinated squat on government property to protest rising rent in Rome’s Esquilino neighborhood in 2003. As a form of social protest, squatting is typically associated with the Left rather than the Right. Similarly, Casa Pound’s approach to pay parity dresses its proposals in leftist language to obscure the retrograde goals of these policies. Casa Pound’s “Tempo di Essere Madri” slogan parallels Forza Nuova’s #redditoallemadri campaign: the first argues that mothers deserve more time, the other that they deserve more money. Both far-right Italian political groups propose statutes focusing on traditionally progressive measures such as reducing mothers’ daily work hours while maintaining standard total pay. Tempo di Essere Madri even advocates for paternal leave. For mothers with children under age six, Casa Pound promises a reduction of the workday from eight to six hours a day for the same total pay, 85 percent of which would be guaranteed by the workplace and 15 percent by the government. When the child reaches age six, mothers would have the choice to return to work full time. Alternately, fathers would also have the opportunity to assume these benefits, but parents cannot double up, with both partners

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24 For testimonials, see Toupin and Roth (2018).
accepting full pay for reduced hours. The Casa Pound proposals turn on twinned concepts: first, women are represented by the party as mothers, or not at all; second, infants, not women, are the ultimate beneficiaries of social welfare.

At the center of the proposal is the role of woman in her entirety and completeness, in her most beautiful essence, in the greatest human and social potential she expresses.

At the center of the proposal “the child” who deserves love and attention and has the right to be followed by the family for its own course of development. (Casa Pound Italia, Progetti, 2009)\(^\text{25}\)

Despite the seeming liberalism of such measures, Casa Pound addresses women only in terms of their reproductive capacity. Beyond this special interest group, Casa Pound has no groups for women’s welfare. What appears progressive in workplace policy is regressive in social intent.

It bears repeating—such tendencies are not confined to the far Right. Former prime minister Matteo Renzi’s Democratic Party introduced financial incentives to encourage couples to conceive. A “baby bonus” provided low- and middle-income families with 80–160 euros (roughly $90–$180) per month. More controversial was the ministry’s poster promotion series for #FertilityDay. Recall that the Fascist regime also introduced propagandistic holidays to inscribe their desired activities within the yearly calendar. The Giornata della Madre advocated not just maternal observance but also annual procreation. Flash forward to the modern period: Minister of health Beatrice Lorenzin inaugurated the event on September 22, 2016, as a means to counteract Italy’s precipitously falling birthrate through postcards and posters encouraging young Italians to have children sooner rather than later. The new pronatalist initiative echoed ONMI in its focus on women rather than both sexes to solve the birth crisis. Slogans ranged from the guilt inducing (“fertility is a common good”) to the awkward (“Young parents. The best way to be creative”) to the pushy (“Hurry up! Don’t wait for the stork”). The most widely reproduced image of the nine-poster campaign showed a young woman with one hand on her stomach and the other holding an enlarged hourglass out toward the viewer: “Beauty has no age limits. Fertility Does” (fig. 14). Although Minister Lorenzin maintained that #FertilityDay was not meant as “an invitation to pregnancy” but rather “to knowledge,” ridicule erupted. Professors and doctors explained that Italy’s economic precarity created forced choices; journalists began to note Fascist

echoes in current campaigns (Coppolaro-Nowell 2016; Pianigiani 2016). Countermemes mimicking the original posters (fig. 15) began to circulate (fig. 16). Roberto Saviano, the Neapolitan journalist known for his investigation of the Gomorrah mafia, delivered a point-by-point address of each poster’s slogan that was widely shared on social media. To the claim, he wrote in a viral Facebook post:


[It means, simply, hurry up and have kids: you do not have a steady job? What does it matter. You are not sure that your partner is the
one? My god how fussy you are. Go on, procreate, do it with a light
heart, because it’s as easy to feed two as three.\textsuperscript{26}

Writ broadly, Lorenzin’s promotion of and Saviano’s response to
#FertilityDay articulate political nuances swirling around the question of
who speaks for Italian women’s reproductivity. The Ministry of Health, in

\textsuperscript{26} For coverage of Saviano’s post, see De Luca (2016) and Di Grazia (2016).
2016 as in 1936, frames fertility as a common resource like tap water. In other words, the insides of reproductive bodies belong to the state. Close analysis of the Fascist period film Alle madri d’Italia reveals the politicized medical agendas that informed maternal health care on the eve of industrialization, when contemporary clinics were legislated, built, and staffed. Filmic technique conflated rurality and ethnicity with dirtiness, used to diminish midwives’ credibility. Menacing intertitles accompanied by terrifying cartoons framed the selection of doctors over midwives as a choice of life over death. To further
enhance the authority of male medics, clinical tools like plastic gloves and medical spaces such as government clinics marked hygiene and conveyed medical ability. Clinics mattered not only in terms of the sterility of their sinks and floors but also in terms of their clean design, a hallmark of their rationalist architectural style. *Alle madri d’Italia*’s companion text, *La tutela*, featured a photo album of these rationalist obstetric clinics, where mothers could breastfeed unhindered but also under surveillance.

### Dictatorial approaches to reproductive health

This article has examined Fascist breastfeeding propaganda in the broader context of changing professional norms in the field of obstetric health care. Specifically, it describes how the regime worked to discredit female medical aides and authorities on breastfeeding in order to create a space for male medics to open new, state-affiliated clinics for Taylorist breastfeeding. *Alle madri d’Italia*, ONMI’s keystone piece of filmic propaganda, and its associated photographic booklet, *La tutela*, provide the central case study to decode the visual techniques used to discredit midwives and at-home health care so as to promote obstetric care by male doctors in government-affiliated clinics. At stake in this analysis is the specifically Fascist nature of the industrialization of maternal health care in modern Italy: propaganda broke the social bonds between female patients and female health-care providers, creating a system of government control over women’s bodies that remains largely in place and unexamined in contemporary clinics. Addressing mothers directly from *Alle madri* in 1931 to #allemadri in 2017, far-right groups reinvent a singular trope for new times, reducing all of Fascist motherhood to the act of breastfeeding. The legacies of authoritarian breastfeeding propaganda as a key means to increase the national population include not only overt examples like Forza Nuova’s poster but also covert examples like the Ministry of Health’s infant- rather than mother-centric model of breastfeeding campaigns like “Mamma Che Latte” (Mama, what great milk, or Wow, what milk!), an initiative paired with the #FertilityDay campaign and its panic-inducing slogan “La bellezza non ha l’età. La fertilità sì” (Beauty has no age limits. Fertility does). The Ministry of Health is not Fascist—they are not even far right. However, their structures and policies evoke dictatorial approaches to reproductive female bodies constructed during the interwar period.

While Fascism’s original pronatalist goals ultimately failed, the means that the regime used to achieve this goal persist.\(^{27}\) Today, we see the reduction of

\(^{27}\) This was likely due to the regime’s deep infiltration into everyday life. Although the justifications for hygienic breastfeeding have changed, the activity itself has not, likely due to its
motherhood to breastfeeding in far-right posters from Forza Nuova and campaigns by Casa Pound. Contemporary far-right groups have not simply continued to apply the old Fascist ideologies of maternity. Rather, the Italian political system, as a hulking bureaucratic assemblage, provides cover for both the Right and the Left. Public celebration of breastfeeding mothers, coupled with subsequent legislative repression of their reproductive rights, seems to be one of the very few arenas where Italian politicians agree. Such a system is intrinsically generative of dictatorial approaches to fertility.

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daily repetition and connections to the material world. Today, many Italians continue to medicalize maternity. On the legacies of Fascist maternal health care among working-class women, see Bettini (2008).


