

RESEARCH ARTICLE

Regenerating bodies, shaping minds: school colonies in Italy between the First World War and the postwar years

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Abstract

This article examines the development and transformation of school colonies within the Italian child welfare system between the First World War and the immediate postwar period. Originally conceived as prophylactic institutions aimed at strengthening the bodies of frail and undernourished children, these colonies gradually assumed broader functions, becoming spaces shaped by new political and social imperatives. The article focuses on the impact of wartime mobilisation, the reconfiguration of welfare networks involving public authorities, voluntary organisations, and humanitarian agencies, as well as the growing role of doctors and teachers in structuring the daily life of these institutions. In particular, the text analyses how health prevention practices became intertwined with moral education and forms of political mobilisation. The result is a complex picture that highlights the emergence of a hybrid model which anticipated the subsequent welfare and educational policies of Fascist totalitarian pedagogy.

Keywords: Italian history; First World War; childhood; welfare; education; health

Introduction

This article examines the role played by ‘school colonies’ – also referred to as ‘health colonies’ or ‘holiday camps’ – within the child welfare system that gradually took shape in Italy between the First World War and the immediate postwar period. Although they shared certain features with seaside sanatoriums and other comparable institutions of a curative nature, school colonies were intended solely for the temporary care of ‘frail or weak children suffering from early-stage or suspected cases of tuberculosis, provided they were not contagious’ (*Le Colonie Scolastiche* 1919, 87). Rather than treating disease, they were conceived as preventive measures designed to strengthen children’s physical health and reduce the risk of illness.

The term ‘colonia’, of Latin origin, was first employed by the Swiss pastor Hermann Walter Brion in the second half of the nineteenth century to refer to facilities providing accommodation for children during the summer holidays. The word evoked the idea of a settlement established far from the homeland and governed by principles of order and hierarchy (Salustri 2025, 139–140). The ‘colonies’ were distinguished by their typically out-of-town location and by a rigorous organisation of daily life, structured around activities that were meticulously arranged according to a rational management of time and space.

These institutions expanded in response to the social crisis and children's physical decline during the Great War. Their growth was part of a wider commitment to providing assistance, based on unprecedented collaboration between the state and civil society. This involved charities, humanitarian associations, public administrations and the education sector (Fava 2010; Genovesi 2025; Pisa 2022). As in other European societies, these initiatives were directed primarily at children shaped by the experience of war – children of soldiers, the wounded and maimed, war orphans and refugees – but gradually extended to abandoned and marginalised children as well (Audoin-Rouzeau 1993; Donson 2010, 2014; Faron 2001; Kind-Kovács 2021).

Despite the wealth of research on the experiences of the latter half of the twentieth century (Pironi and Salustri 2023) and the Fascist Ventennio – often seen as a cornerstone of the regime's totalitarian pedagogy (Mira and Salustri 2018; Pivato 2023; Salustri 2025) – the years under consideration in this study remain largely unexplored. However, it was precisely this period of transition, characterised by the consolidation of numerous initiatives trialled between 1915 and 1918, that constituted a crucial turning point in the shift from traditional charitable practices to the emergence of a more structured system of social protection, directly fuelled by the experience of wartime mobilisation and its material and political legacies (Gal 2007; Obinger, Petersen and Starke 2018; Pavan 2019; Pironti 2017; Procacci 2013).

On the other hand, these institutions also reflected new ideas about children, as shown by the growth in child protection, laws about child labour, and scientific research into children's well-being. (Cambi and Ulivieri 1988, 53–80; Cunningham 2021, 137–147; Guarneri 2006; Tasca 2024). Furthermore, the modernisation of the educational system functioned as a crucial platform for the political mobilisation and militarisation of children, practices that witnessed escalating intensity during the first half of the twentieth century (Gabrielli 2016; Gibelli 2005).

School colonies provide a valuable vantage point from which to examine the development of child welfare. This article also explores how the 'climatic stay' was conceptualised in the discourses and practices of the main actors involved. I argue that the war resulted in a progressive transformation of school colonies into institutions where the objectives of health and hygiene prevention became increasingly intertwined with the moral education and political mobilisation of minors. The research is founded upon an extensive bibliographic review and archive research.¹ When considered as a whole, these sources allow the outline of some fundamental interpretative frameworks to be provided, without an attempt at systematic reconstruction, which is complicated by the variety of organisational models and local contexts.

The emergence of the hygienist paradigm

The origins of school colonies in Italy can be traced genealogically speaking to the sea-side hospices that provided shelter for children suffering from scrofula. These hospices were founded by the Florentine physician Giuseppe Barellai from 1856 onwards in various coastal towns along the Tyrrhenian and Adriatic Seas. This model gradually shifted in the final two decades of the nineteenth century, due to a belief in the beneficial properties of thalassotherapy. At this time, facilities began to emerge that were no longer geared towards the treatment of established diseases, but rather towards their prevention. Consequently, the children admitted were no longer considered to be acutely unwell, but rather, they were categorised as impoverished and deemed to be rickety, anaemic, or generally 'frail'. This designation placed them at an elevated risk of contracting tuberculosis, which was the foremost cause of mortality in the Kingdom during that period (Taroni 2021, 30).²

When compared with American summer camps, which were originally conceived as predominantly educational experiences aimed at shielding the children of the middle classes and the urban bourgeoisie from the corrupting and morally ambiguous influence of modernity whilst developing their characters through direct contact with nature (Paris 2008; Van Slyck 2006), Italian school colonies manifested a marked class connotation and a preventive character, a trait shared with other countries of continental Europe (Bakker 2007; Downs 2002). The flourishing of these institutions in the late nineteenth century cannot therefore be separated from the growing influence of those forces – particularly those of a progressive and socialist orientation – which promoted a ‘social medicine’ aimed at improving the living conditions of the working classes and sanitising the urban and domestic spaces in which they lived. Nor, above all, can it be separated from the institutionalisation of hygiene as a medical-scientific discipline, legitimised within universities and public administration (Cosmacini 1987, 383–403).

As proponents of preventive public health measures aimed at society as a whole, implementing them through the application of the new positive sciences, the hygienists were the architects of a genuine political project (Oosterhuis and Huisman 2014) aimed at the nation’s economic prosperity, the rehabilitation of the social body and the disciplining of the subordinate classes through the construction and dissemination of a hygienic consciousness (Cea 2019, 129–188; Pogliano 1984). The practice of climatic cures, which encompassed activities such as fresh air, sea bathing, sunbathing, along with a hearty diet and physical exercise, was firmly embedded within this cultural framework. This approach was predicated on the notion of preventive action, positing that these activities could effectively contribute to enhancing bodily strength. As vice-president of the Turin Society of Hygiene, Giulio Bizzozzero stated that the responsibility of hygiene was to treat ‘neither the rachitic nor the scrofulous’ – a task for medicine – but rather to ‘make or keep robust that vast mass of the population which, due to social necessities, is forced to live in crowded conditions in cities, schools, factories and barracks, in circumstances unfavourable to the development and preservation of the body’.³

Rapid urbanisation and overcrowding led to an increased demand for seaside and mountain health stays for poor children, especially in large urban centres where physicians and organisations campaigning against tuberculosis were most active. The first alpine colony for economically disadvantaged children from Milan’s schools was established in 1881, promoted by the hygienist Malachia De Cristoforis. This was followed by similar initiatives that emerged in the subsequent decades in numerous provincial capitals of central and northern Italy (Comerio 2018; Neri 1967, 33–37). The founding of new facilities was further encouraged by the various strands of the Italian anti-tuberculosis movement (Detti 1994, 115–150).

Nevertheless, these initiatives were confronted with the limitations imposed by the state’s inaction, as it persisted in delegating responsibility to the private sector. Consequently, during the Giolitti era, the establishment of school colonies was predominantly initiated by private promotional committees representing Catholic circles or the liberal elite, with prominent philanthropists and upper-class women assuming leading roles. This resulted in significant disparities between the Centre-North and the South, but also between urban and rural areas, as assistance depended on the presence of benefactors. Indeed, the financial support for their operations was derived from a variety of sources, including donations, subscriptions, lotteries, bequests, and gifts from industrialists, large landowners, and credit institutions (Neri 1967, 38–39). As with other charitable institutions, the school colonies thus retained a marked paternalistic character. Despite the presence of ‘nobles and socialist doctors, clergymen and politicians of the most varied persuasions’ within their governing bodies, these institutions continued to reflect the ‘solid

clerical-moderate hegemony' that had historically characterised the field of public charity (Detti 1994, 142).

The key figures within the hygiene-based medical-administrative system – which took shape following the 1888 health law and was consolidated during the reforms of the Giolitti era – were the provincial doctors and the heads of hygiene offices. These figures identified schools as their primary field of action, but in many cases, these inspections were disregarded, owing both to the scarcity of municipal resources and to the lack of a widespread 'schooling consciousness' on the part of local authorities (De Fort 1979, 177). Despite variations in the regulations of individual school colonies, the responsibility for identifying suitable pupils fell to the medical staff. At the conclusion of the pupils' stay, the medical staff were tasked with assessing the outcomes through clinical observations and anthropometric measurements. Instead of the psychological dimension or other intangible aspects of childhood experience, it was the body that attracted the interest of healthcare staff. This resulted in the body becoming the primary focus of an 'inquisitive gaze' that treated it as a surface upon which scientific truths and the promises of social progress could be inscribed (Tasca 2024, 112–113), as part of a broader process of the medicalisation of society (Berlivet 2011).

The efforts of doctors were facilitated by the involvement of primary school teachers, who, leveraging their intimate knowledge of the classroom environment, reported cases deemed most problematic or conducted preliminary selections themselves. The development of school hygiene in the early twentieth century led to this form of collaboration, which was mandatory but not always easy (Gianfrancesco 2019). Concurrently, as part of the reform movement that culminated in the Daneo–Credaro Act, school welfare boards (*patronati scolastici*) also began to organise summer health camps directly (De Fort 1996, 266–291).

A relationship of subsidiarity thus began to take shape between the holiday camps and the schools, formalised by a circular of 1913, which encouraged the school welfare organisations to develop, alongside basic forms of assistance such as school meals, and 'mountain and seaside treatments in dedicated school colonies' (*Leggi, regolamenti, decreti* 1920, 745). Consequently, a model came into existence that would become firmly established during the war years and in the immediate postwar period.

School colonies in the context of wartime mobilisation

The war resulted in a significant increase in the establishment of school colonies, which experienced a notable surge in numbers from 1915 onwards. This development was part of a broader phenomenon of the 'flourishing of supplementary educational institutions', created to strengthen children's physical constitution and make them more resilient 'to the attacks of evil' (*Le Colonie Scolastiche* 1919, 84). Compared with the prewar context, the primary beneficiaries of these health stays were no longer marginalised and neglected children – that is, those 'affected by poor living conditions, inadequate nutrition, alcoholism, syphilis and tuberculosis among their parents and relatives' (*Comunicazione al VII Congresso* 1912, 10) – but the children and siblings of those called up, the wounded, the maimed and the fallen. This changed particularly from autumn 1917 onwards when hundreds of thousands of refugees were added. Providing assistance to these children, who had been 'weakened by the necessary restrictions imposed by the war, by the inevitable repercussions on their delicate bodies, by the anxieties, the sorrows and the economic hardships that had troubled their families', became an ethical and patriotic imperative (*Firenze e Le Opere Di Guerra* 1920, 250).

Action in support of these groups met two needs: it sustained the home front's resilience through policies that invested in children, showing national solidarity with families

affected by the conflict, especially orphans; and supported the war effort and national productivity, including through the mobilisation of the female workforce in a context of changing gender roles and relationships (Grayzel 2024; Molinari 2014; Sharp 2007). The school colonies, in addition to providing after-school clubs, nurseries and leisure centres, facilitated the provision of childcare outside standard classroom hours. These programmes offered free meals, hygiene education, national-patriotic instruction and recreational activities as well. A crucial role in the governance of these institutions was played by women's associations and teachers, who constituted the majority of the 'social workers for the fatherland' army. They volunteered to take charge of the youngest children and supervise them, based on what was seen as the 'natural' aptitude of the female gender (Molinari 2016).

The public charity sector, which remained predominantly under the influence of practices and institutions of the *ancien régime* and had only been partially reformed, was unable to adequately address the emerging social crises (Della Perruta 2009; Quine 2002, 43–63; Vicarelli 1997, 101–124). In the context of civil mobilisation, the diverse *opere pie* – predominantly religious in nature and subject to the oversight of *congregazioni di carità* – were joined by new initiatives promoted by committees for assistance, *patronati scolastici* and anti-tuberculosis organisations. Consequently, traditional philanthropy became intertwined with new forms of social intervention, while public authorities began to promote coordination and rationalisation to accommodate a greater number of children.

The resurgence of tuberculosis, driven by overcrowded conditions and the mixing of vulnerable urban conscripts and recruits from rural areas, accelerated this process, spreading the infection to the civilian population. In an effort to address the escalating mortality rate,⁴ a series of measures was implemented with the objective, as articulated in the constitutions of the Anti-Tuberculosis League of the province of Genoa – a region particularly severely affected by the disease – of ensuring 'unity of action' among the network of prophylactic colonies, seaside sanatoriums, open-air schools and anti-tuberculosis dispensaries along the coast, 'in accordance with the directives of the provincial and municipal authorities'.⁵

In the absence of direct state intervention, the main drivers of coordination were the provincial councils and local authorities. The latter functioned to ensure the smooth operation of the Civil Assistance Committees, to coordinate the efforts of private individuals, and to subsidise facilities providing healthcare and childcare, particularly in the major centres of the Centre-North (D'Ascenzo 2019; Punzo 1987), and, in a new development, also in some large cities of the South (Pisa 2022, 189–205). Conversely, in rural areas, such practices were virtually non-existent.

In the municipalities under the administration of the Socialists, the role of local councils evolved from a mere coordinating entity to a more direct managerial function. This shift was part and parcel of a broader policy of municipalising welfare provision. This was exemplified in Bologna, where 'municipal school colonies, freer and less subject to restrictions' were established. In the second year of the war, 'after having abandoned the premises offered courtesy of public bodies or through the generosity of private individuals', the councillor for education converted 'a number of schools scattered across the hills surrounding the city' and a series of rented buildings into health camps.⁶ In Milan, by contrast, the Municipal Welfare Committee – formed through collaboration between the socialist administration of Mayor Emilio Caldara and various interventionist parties and associations, but subject to municipal oversight to ensure effective welfare provision – went on to coordinate as many as 29 facilities in 1918, including climatic colonies, preventive nurseries and summer camps, by harnessing the voluntary efforts of citizens and associations and making use of existing institutions.⁷

During the war years, the school colonies relied on a variety of actors, with outcomes varying according to context. However, there was a 'complex interplay' between the various strands of civil society and the guiding role of the state. This increased its power to steer these processes through a system of incentives and restrictions, designed to channel financial and material resources towards some of the many associations that had been established or strengthened in the wake of the war (Fava 1997, 54).

The Opere Federate di Assistenza e Propaganda Nazionale (OFAP) served as the paradigmatic manifestation of this hybrid system. This entity functioned as a consortium of cultural, patriotic and professional organisations, bound to the state by close ties and founded in August 1917 (Fava 1982). Led by Ubaldo Comandini, Minister for Organisation in the Boselli government, the OFAP constituted, until their gradual disbandment during 1919, a network extending across the country with the task of coordinating and organising that jumble of welfare initiatives that had sprung up 'almost haphazardly [...] without any rules or guidelines'.⁸

From the start of his term, Comandini was committed to promoting school colonies as a way of protecting children in wartime. In June 1918, as summer approached, he sent a detailed circular to the prefects and local offices of the OFAP. This set out a series of regulations for the establishment and running of these institutions. He insisted that the camps should be set up wherever possible, providing they were in 'healthy and pleasant' locations where children could 'lead a healthy and hygienic lifestyle'. If this proved impractical, he allowed for the 'simple gathering of children in a rural setting', with daily returns to their families.⁹ The OFAP also signed an agreement with the State Railways to give soldiers' children special travel concessions.¹⁰

The OFAP's final report stated that the school colonies were present in all Italian regions except the occupied Veneto. Despite the facilitation of assistance by the military authorities, the Ministry of War and the Ministry of the Interior, various impediments hindered the provision of aid. The Adriatic coast, 'the most heavily bombarded by the enemy', for example, did not offer safe conditions and made it necessary to abandon many seaside facilities. Other available facilities, such as those situated on the Ligurian coast, were rendered inaccessible due to their occupation by refugees (Caffarena and Mamone 2024). In other cases, sanatoriums and seaside holiday camps were requisitioned to house wounded or sick soldiers and, under the circumstances, it was not easy to 'improvise and set up new barracks' or to ensure adequate provisions.¹¹ The Spanish flu spread, forcing authorities to adopt preventive measures (Cutolo 2020, 166–172), including closures and suspensions: nevertheless, 30,000 children had been accommodated by July 1918, with a forecast of 'a threefold increase' for August.¹²

Humanitarian organisations and the role of the state

During the four-year period 1917–1920, under pressure from the exigencies of war and, subsequently, from the growing influence of the international debate on childhood and the bodies established within the League of Nations (Bolzman 2008; Rollet 2001), there was a growing involvement of humanitarian organisations and state bodies in the organisation and funding of climatic stays.

As Comandini noted, following the defeat at Caporetto, the Italian Red Cross (CRI) and the American Red Cross (ARC) provided, in fact, 'to the greatest extent possible, pavilions, tents, camp beds, household goods of all kinds, medicines, clothing, condensed milk, tinned meat, chocolate and other foodstuffs', and in some cases took on 'the direct organisation and management of other school colonies'.¹³

The involvement of CRI was rather limited during the war, despite the existence of a tradition of public health intervention that had already been tested in the anti-malaria

campaigns in the Agro Romano (Snowden 2006, 53–65). The organisation's activities were restricted to initiatives promoted by the Commission for Anti-Tuberculosis Measures and, subsequently, by the Office for Social and Health Welfare, which was entrusted with the initiation of a programme specifically focused on women and children. During the summer of 1918, approximately 1,940 children were admitted to the sanatoriums operated by the Italian Red Cross, amounting to a total of 70,000 days of attendance (Bartoloni 2005, 36). These figures were set to rise in the following years, when attempts were made to build a more robust support network for children affected by tuberculosis or at risk of infection, building on the work of the local committees and sub-committees of the Italian Red Cross (Germani 2018, 191). According to statistics compiled by the Higher Council of Public Health in 1920, there were nine seaside and 15 mountain school colonies in operation at that time. It is estimated that 2,962 children had taken turns in treatment periods ranging from 30 to 180 days (*La tutela dell'igiene* 1922, 137). Conversely, the Central Committee of the Red Cross reported that 3,032 children were admitted in 1919, 3,049 in 1920 and over 4,500 in 1922 (*Tre anni di lavoro* 1922, 31).

The ARC played a much larger role, combining humanitarian aid with propaganda (Irwin 2009; Rossini 2023). The school colonies supported by the ARC, adorned with Stars and Stripes flags, manifested as genuine instruments of soft power, with the objective of showcasing to the Italian civilian population the organisational efficiency and abundance of material resources deployed by the United States in support of children. A similar function characterised the ARC's interventions more generally across postwar Europe, from France to Central and Eastern Europe, where child welfare went hand in hand with the dissemination of organisational models and cultural practices presented as expressions of American modernity (Kind-Kovács, 2016). By May 1919, the ARC had helped to set up 26 seaside and mountain school colonies. Of these, eighteen, jointly administered by local authorities and the ARC and staffed by a mix of Italian and American personnel, were located on the Italian mainland, while eight were on the islands (Galazzetti 2021, 107).

Humanitarian aid alone proved insufficient, prompting greater state intervention in an area that many considered to be the responsibility of the private sector, with direct intervention by public authorities being reserved exclusively for 'exceptional cases'.¹⁴ One of the first signs of this direct state involvement was the survey by the ministerial inspector Gallo Cabrini in August 1918 of Italy's school colonies. Inspecting the central and northern regions, where school colonies were most developed,¹⁵ Cabrini judged the system positively overall but identified uneven standards caused by the hurried establishment of many colonies and varying admission criteria (*Le Colonie Scolastiche*, 1919, 89–91).

The survey had been commissioned by the Ministry of Education (MPI), in agreement with the General Department of Public Health (DGSP) of the Ministry of the Interior (MI). These two ministerial bodies had begun to provide subsidies to school colonies from 1917 onwards, thus marking the State's direct entry into the sector of childcare. An initial step in this direction was taken by Law No. 1143 of 18 July 1917, which entrusted the responsibility for the care of war orphans to the MI and a network of provincial committees. These committees were charged with the allocation of funds for the care of vulnerable orphans residing in seaside and mountain school colonies. The Committees were to use these funds 'both for the direct establishment of such colonies and, more frequently, to support the numerous initiatives undertaken in this field by voluntary organisations' (*La protezione e l'assistenza degli orfani* 1920, 183), including certain national institutions recognised by law (Pisa, 2022 256–257).

This was followed by the Lieutenant-Governor's Decree-Law No. 1231 of 26 July 1917, which was converted into the much more structured Law No. 1382 of 24 July 1919. It was through this latter piece of legislation that the fight against tuberculosis took on, for the

first time, ‘the characteristics and dignity of a state task’ (*La tutela dell’igiene*, 1922, 89). The *Cassa Depositi e Prestiti* was authorised to grant loans to local authorities and charitable organisations, and the government was authorised to allocate subsidies for treatment and prevention facilities, with the aim of creating a permanent network focused on anti-tuberculosis dispensaries, which were reorganised and strengthened and became the main point of reference for sending children to school colonies. However, the gap between the rhetoric of the ‘duty of the State’ and its capacity for intervention remained evident, partly due to underfunding and the failure to implement reforms, which were halted with the end of the Nitti era and the long wave of wartime welfare policies (Detti 1994, 191–208).

The ministerial circulars explain the initiative’s practical details, including how funding is allocated. This is based on the estimated number of children taken in, staff employed and contributions already guaranteed by other bodies. As the Minister of Education, Agostino Berenini, observed, until the end of the war, funding for the school colonies came mainly from the DGSP, ‘thus making up for the scarcity of this Ministry’s appropriations’ (*Leggi, Regolamenti, Decreti*, 1920, 754). It was not until February 1919 that the two ministries initiated forms of coordination, with the objective of ‘encouraging and assisting, in equal measure, the institutions emerging in this field’.¹⁶ The involvement of the DGSP was not substantially altered – it also provided ‘tents, bedding and furnishings’ – nor was private funding called into question.¹⁷

The statistics vary, partly due to the often short-lived nature of initiatives, but in 1920, the DGSP disbursed approximately 9 million lire to 215 committees and organisations promoting school holiday camps: 144 of these were in central and northern Italy (excluding Lazio), and the remainder in the south (*Assistenze Climatiche* 1921, 147).¹⁸ These figures marked the start of a gradual spread of the school colonies to the southern regions, albeit in forms that were still uneven and often precarious. For instance, until 1921, war orphans from the province of Potenza were accommodated in facilities located in the Cosenza area, as there were no similar institutions in their home region.¹⁹ A subsequent survey conducted by Cabrini in 1924 confirmed this trend, recording a significant increase in the number of facilities surveyed, which had risen to 117 (*Le Colonie Scolastiche* 1925, 215–222).²⁰ However, this quantitative growth did not translate into a commensurate increase in available resources. The data don’t fully reflect the lack of funding, which limited accommodation and put committees in a ‘painful position’.²¹ They had to make restrictive selections, even for multiple sessions, at a time when they were tasked with accommodating hundreds of thousands of children rendered socially vulnerable by the war.

Physician and teachers in the postwar school colonies

With demobilisation and the wartime emergency easing, holiday camps once again focused on the care of marginalised children. However, the war had by then permanently reshaped the profile of their beneficiaries. As Augusta Muggia, the promoter of the Società Umanitaria’s welfare activities, noted, the use of these institutions had become commonplace even amongst ‘the lower middle classes ... impoverished, disoriented and demoralised by the war’ and therefore more vulnerable to ‘disease-causing factors’ (Osimo Muggia 1922, 28). A significant indication of this transformation was provided by Achille Beltrame, who published an illustration in the August 1910 issue of *Domenica del Corriere*. The illustration depicted a group of children, in customary middle-class attire, returning to Milan from the seaside school colony at Porto Maurizio operated by the Primavera Italica association.²² While the association prioritised children from municipal charity networks, it also accepted ‘boys and girls not receiving charity, upon payment of a daily fee’.²³

While in most cases the school colonies’ managers opted to ‘overlook a few dozen children’ who were going ‘to the seaside without any real need’, to give priority to the ‘truly

needy',²⁴ there were those who sought to distance themselves from traditional forms of public charity. From 1920 on, the Opera Pia Colonie Cremonesi del Po, for example, introduced a registration fee to distance the institution from 'notions of charity', which it viewed as a threat to moral quality.²⁵ Though an extreme case, it highlights the shift in the health stay concept, despite the persistence of the hygienist cultural paradigm interpreting revitalisation and moral education as interconnected. Indeed, the cultivation of refined manners and moral discipline of a national-patriotic nature had been identified as an objective of the climatic stay from its inception (Frabboni 1971, 103–107). However, in the postwar context, these aims assumed added importance, emerging as potential responses to the pervasive expectations of renewal that were centred on childhood in various sectors of public opinion.

The Italian case paralleled developments elsewhere in Europe. In France, the 'colonies de vacances' of the immediate postwar period underwent a gradual shift in function, transitioning from their original hygienic and preventive role to becoming integrated into municipal policies on popular education promoted by various political movements (Downs 2002). In the United Kingdom 'country holidays' were conceptualised as instruments for the reform of habits and behaviour, grounded in the conviction that environment and education could cultivate healthier and more disciplined citizens (Barron 2016).

In Italy, the evolution of school colonies from mere recreational facilities to comprehensive educational institutions was accompanied by a re-evaluation of their role. Despite their diverse ideological and political cultural backgrounds, the primary proponents of these camps converged on the notion that the regeneration of childhood was a prerequisite for the comprehensive renewal of society. This approach was given significant expression in the conference entitled 'Assistenze climatiche e balneari alla fanciullezza', which was organised in Milan in October 1920 by the city's socialist administration. The initiative's stated objective was to protect 'the fragile bodies of working-class children from the threat of the great diseases afflicting humanity', with the 'primary aim of preparing a better generation, one better suited and better equipped to meet the demands of social life'.²⁶ It emerged clearly from the papers presented that the school colonies had by now outgrown their original function, having assumed 'an importance that had to be considered not only by health professionals, for reasons of prevention and treatment, but also as an educational, pedagogical and administrative issue' (*Assistenze Climatiche* 1921, 15). Gallo Cabrini hoped that the physician's word would be complemented by that of the teacher, since the issue had to be considered 'from both a paediatric and a pedagogical perspective' (*Assistenze Climatiche* 1921, 73). The conference brought together doctors, educators and public administrators, who endorsed guidelines including clearer separation between prophylactic colonies and sanatoriums, stronger state funding and age limits. They also recognised the colonies as a 'logical and necessary extension of the school' and consequently the need for 'specific training' of staff (*Assistenze Climatiche* 1921, 128).

Physicians continued to interpret climatic stays by prewar conceptualisations. Guido Salvini, head of the Milan Office of Hygiene, defined it as 'the more or less complete correction of the unhealthy environment that may harm the rising generation from the most diverse points of view', understanding environment as the combined influence of family, housing, social, and school conditions. In order to facilitate the optimal development of the 'young seed', it was imperative that the environment in which they were cultivated was conducive to the 'corrective virtues' that could address any deficiencies in their original environment (*Assistenze Climatiche* 1921, 21). These theoretical formulations were grounded in the conviction – which remains prevalent among hygienists despite the progressive advances of microbiology – that environmental and social conditions constitute a decisive factor in the onset and development of disease (Pogliano, 1984). The medical reports

produced by individual school colonies similarly reflected this understanding, describing dietary regimes, therapeutic practices, meticulous anthropometric measurements, and the clinical course of illnesses. They repeatedly referred to the harmful influence of the streets and the family environment, portraying children who, once removed 'from unhealthy surroundings and hunger' and placed in hygienically appropriate settings, emerged from the camps 'transformed'.²⁷ It was asserted that this transition resulted in a reawakening 'of all their organic, physical, and moral faculties' making 'the individual better equipped to face the struggle for existence'.²⁸

However, a marked shift in the political and cultural climate was evident when compared with the prewar years. Voices that had previously remained marginal – calling for hygiene and child welfare on the grounds that childhood constituted 'the indestructible wealth of a people' and embodied 'the very future of the race' – now found much greater resonance (*Assistenze Climatiche* 1921, 91). The regeneration of the child's body was thus increasingly conceptualised as part of a broader collective project of national recovery and strengthening, informed by a collectivist ethic according to which 'the health and vigour of the nation as a whole' could not exist 'without the strength of each of its constituent parts' (Cardini 1919, 114). Within this framework, the principles of hygiene found a significant conceptual continuity in eugenics, understood less as a fully developed scientific doctrine than as an ideal inspiration reinforced by the experience of war (Cassata 2006; Mantovani 2004).

However, the physician alone was not considered sufficient to achieve these aims, since the most significant effects of the holiday camp were often regarded as lying 'outside his field', beyond the reach of medical expertise.²⁹ Consequently, medical intervention was expected to be complemented by that of the teacher, who had long been assigned a compensatory educational role alongside the family, particularly in matters of hygiene instruction (Bonetta 1990, 311). As a 'moral and social physician', the teacher was considered best placed to recognise the stay's 'immediate effects' on children's character.³⁰ This role involved supervising educational and recreational activities, including gymnastics, walks in the open air, singing, games, and edifying readings. Together with medical treatment, they were believed to contribute to the 'reconstruction of bodies weakened by past or recent deprivation'.³¹

However, in practice, the responsibility for this role was primarily shouldered by female teachers rather than their male counterparts. Drawing upon the experience gained during the war, they were entrusted with organising and overseeing the daily life of the colonies, 'entertaining, educating and instructing the children, thus contributing to the hygienic, moral and intellectual formation of their character'.³² They were supported by supervisors, nurses and wardens with varying degrees of professional training, onto whom the qualities attributed to bourgeois femininity were projected, illustrating how the war had reshaped the very concept of motherhood, extending it into the public sphere (Molinari 2016). The holiday camp gradually evolved into a setting where preventive care, discipline and national-patriotic indoctrination were increasingly intertwined. As stated in the regulations of the CRI holiday camp in Castelnuovo Berardenga, which met all the 'requirements to be a model school colony' (*Le Colonie Scolastiche* 1919, 69): 'in the morning, whilst the national flag is being raised at the entrance to the camp, the children shall sing patriotic hymns in unison, and their thoughts, filled with affection, admiration and gratitude, shall be directed towards those who, in these times, sacrificed everything in defence of Italy's rights and greatness'.³³ On their return, this practice was symbolically extended into the home, where parents were reminded of their responsibilities: 'the fatherland demands that you ensure the healthy development of your young children, who will tomorrow be the strong workers in its prosperous factories and its fertile fields'.³⁴

Conclusion

In the immediate postwar period, the role of school colonies evolved. They no longer served solely as preventive institutions for children in need. Instead, they increasingly became tools for physical, moral and political education designed to regenerate childhood. The war not only increased their prevalence but also transformed their nature, broadening the target audience, multiplying the number of stakeholders involved in their management, and redefining their aims within a different political and cultural context. However, this process should not be read simply as a precursor to Fascist youth policy. Instead, it was the result of the war and the growing importance of children's issues, which led to the development of practices and discourses based on the subordination of individual interests to the collective good and on a state-productivist rhetoric. Children's issues were capable of garnering cross-party support, ranging from socialist reformism to nationalism.

The gradual establishment of the school colony as an educational institution did not, however, take place in a uniform manner. As is evident from the contemporary debate, a variety of views have coexisted, some of which are sometimes in conflict. On the one hand, there has been a call for care free from ideological aims, according to which control over a child's life should be entrusted to those who recognise the child's right 'above any political principle, any religious tendency, any petty personal interest or selfish aim' (*Assistenze Climatiche* 1921, 118). On the other hand, there have been concerns that during their stays, children might be reduced to 'docile, unwitting instruments in the service of this or that political clientele', thereby polarising the 'conscience of future citizens'.³⁵ It is precisely in this tension between welfare imperatives and the politicisation of childhood that one of the most significant aspects of the summer camp experience lies during the transition from the war to the postwar period.

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Notes

1. The archival research was carried out at the Central State Archives (ACS), specifically in the collections of the Presidency of the Council of Ministers (PCM) and the General Department of Public Health (DGSP) of the Ministry of the Interior (MI). Unfortunately, it was not possible to consult the Ministry of Education (MPI)'s documentation, as it is now considered lost.
2. Deaths from tuberculosis, which averaged around 64,500 per year during the three-year period 1887–1889, fell to 52,337 in the period 1912–1914; however, they remained at levels high enough to make this disease a structural and long-term public health problem, particularly for the most vulnerable sections of the population (Detti 1994, 110).
3. G. Bizzozero, 'Il cittadino e l'igiene pubblica', *Nuova antologia* 632, 1898, 622–623.
4. In 1918, it exceeded the 1912–1914 average by 41.5% (Detti 1994, 153).
5. ACS, MI, DGSP, b. 298, 'Statuto della Lega antitubercolare di Genova', 1918.
6. ACS, MI, DGSP, b. 298, 'Le colonie del comune di Bologna', 1919.
7. ACS, MI, DGSP, b. 298, 'Schema delle colonie coordinate dal municipio di Milano', 1918.
8. ACS, PCM, Commissariato generale per l'assistenza e la propaganda interna (CGAP), b. 15, 'Relazione Comandini', 1919.
9. ACS, PCM, CGAP, b. 15, 'Circolare n. 44 del CGAP', 10 June 1918.
10. 'Per le colonie marine e montane', *Bollettino delle Opere federate di assistenza e propaganda nazionale*, 36, 11 August 1918.

11. ACS, PCM, CGAP, b. 15, 'Relazione Comandini', 1919.
12. ACS, PCM, CGAP, b. 15, 'Relazione Comandini', 1919.
13. ACS, PCM, CGAP, b. 15, 'Relazione Comandini', 1919.
14. ACS, PCM, CGAP, b. 15, 'Relazione Comandini', 1919.
15. The inspection was conducted only in selected regions of central and northern Italy, namely Liguria, Piedmont, Lombardy, Emilia, Tuscany, and Lazio.
16. ACS, MI, DGSP, b. 298, 'Circolare del MI ai prefetti', 28 February 1919.
17. ACS, MI, DGSP, b. 299, 'Circolare del MI ai prefetti', 19 April 1920.
18. The official DGSP report stated that there were 311 subsidised children's homes in 1920, accommodating a total of 57,000 children (*La tutela dell'igiene*, 1922).
19. ACS, MI, DGPS, b. 298, 'Relazione del prefetto di Cosenza', 15 February 1921.
20. This refers to the regions of southern Italy, including Lazio.
21. ACS, MI, DGPS, b. 301, 'Relazione della mutualità scolastica di Carpi', 1921.
22. 'I bambini della Primavera Italica di ritorno a Milano', *La domenica del Corriere*, 10-17 August 1919.
23. 'Statuto', Primavera italica. Bollettino dell'associazione colonie climatiche balneari permanenti, 1 May 1919.
24. ACS, MI, DGSP, b. 298, 'Relazione dell'Opera bergamasca per la salute dei fanciulli', 28 October 1920.
25. ACS, MI, DGSP, b. 298, 'Relazione dell'Opera pia colonie cremonesi del Po', 1920.
26. 'Convegno nazionale e internazionale pro infanzia', *Sanità proletaria* 8, 31 October 1920.
27. ACS, MI, DGPS, b. 301, 'Relazione della colonia per orfani di guerra torresi', 1921.
28. ACS, MI, DGPS, b. 301, 'Relazione della colonia per orfani di guerra torresi', 1921.
29. ACS, MI, DGPS, b. 298, 'Le colonie del comune di Bologna', 1919.
30. ACS, MI, DGPS, b. 298, 'Le colonie del comune di Bologna', 1919.
31. ACS, MI, DGSP, b. 298, 'Relazione del Comitato pro colonia alpina cremasca', 1919.
32. ACS, MI, DGPS, b. 302, 'Circolare del MI ai prefetti', 3 April 1922.
33. ACS, MI, DGSP, b. 300, 'Regolamento della colonia di Castelnuovo Berardenga', 1919.
34. ACS, MI, DGSP, b. 300, 'Alla mamma senese', 1919.
35. 'La rigenerazione fisica della gioventù', *L'Italia sanitaria* 5, 20 February 1922.

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Italian summary

L'articolo esamina lo sviluppo e la trasformazione delle colonie scolastiche nell'ambito del sistema italiano di assistenza all'infanzia tra la prima guerra mondiale e l'immediato dopoguerra. Originariamente concepite come istituzioni profilattiche volte a rafforzare la costituzione fisica di bambini fragili e denutriti, queste colonie assunsero gradualmente funzioni più ampie, trasformandosi in spazi plasmati da nuovi imperativi politici e sociali. L'articolo si concentra sull'impatto della mobilitazione bellica, sulla riconfigurazione delle reti assistenziali che coinvolgevano autorità pubbliche, organizzazioni di volontariato e agenzie umanitarie, nonché sul ruolo crescente di medici e

insegnanti nell'organizzazione della vita quotidiana di queste istituzioni. In particolare, il testo analizza come le pratiche di prevenzione sanitaria si siano intrecciate con l'educazione morale e con forme di mobilitazione politica. Il risultato è un quadro complesso che mette in luce l'emergere di un modello ibrido che anticipava le successive politiche assistenziali ed educative della pedagogia totalitaria fascista.

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