

**A STICK TO BREAK OUR HEADS WITH:  
ELIZABETH BLACKWELL AND  
PHILADELPHIA MEDICINE**

**D**URING THE early part of the nineteenth century Philadelphia was the leading center of medical activity in the United States. Its medical schools attracted students from throughout the country, while its hospitals, almshouses, and other institutions provided clinical experience for untried practitioners, as well as a variety of human subjects and pathologies for the nascent investigations of scientific medical research.<sup>1</sup>

Despite the professional progress being made in its medical institutions, Philadelphia's medical environment, like that throughout the United States and Europe, was completely dominated by men. Although female midwives had played a significant part in American health care until the beginning of the nineteenth century, the increasing professionalization of medicine, accompanied by a rigid compartmentalization of female gender roles into "appropriate" domestic spheres, spelled an end to women's formal involvement in medicine.<sup>2</sup> By the 1840s, however, participants in a small but

1. See William Frederick Norwood, *Medical Education in the United States before the Civil War* (Philadelphia: University of Pennsylvania Press, 1944), pp. 63-108; and Harold J. Abrahams, *Extinct Medical Schools of Nineteenth-Century Philadelphia* (Philadelphia: University of Pennsylvania Press, 1966).

2. Of course, women continued to act as nurses, both in institutions and in the home. This was, however, primarily custodial rather than medical care. Not until the latter part of the century would nursing be regarded as a health care profession requiring formal institutional training.

For a discussion of female gender roles in the nineteenth century see, for example, Barbara Welter, "The Cult of True Womanhood: 1820-1860," *American Quarterly* 18 (1966): 151-74; Charles Rosenberg, "Sexuality, Class and Role in 19th-Century America," *American Quarterly* 25 (1973): 131-53; Carroll Smith-Rosenberg, "The

vocal feminist movement began to challenge the justice of these ideas. One of these women, Elizabeth Blackwell, would in 1849 become the United States' first woman medical school graduate, from Geneva Medical College in upstate New York. The efforts of numerous biographers writing for the popular press have assured that this fact is known.<sup>3</sup> Yet when one examines the primary sources relating to Blackwell, it is evident that the medical profession and institutions of Philadelphia played at least as significant a role in her medical education as did her *alma mater*.

A native of Bristol, England, Blackwell had emigrated as a child with her family to the United States. In 1838, after living for several years in New York City, the Blackwells moved to Cincinnati, where Elizabeth's father, Samuel, planned to operate a sugar refinery. His unexpected death shortly after their arrival caused financial hardship for the family, and each of the children was compelled to go to work. Elizabeth went into teaching, more by default than by choice. Her lack of satisfaction with this occupation, as well as her general concern about choosing a role in life which would enable her to maintain her independence and be of service to women, led her in the direction of medicine. By 1845 she had decided to become a doctor.<sup>4</sup>

Blackwell was immediately confronted with the dual problems of where to study and how to obtain the money to pay for her education. She also needed preparation in science and classical languages. Fortunately, a teaching position was offered her in Asheville, North Carolina, in an academy run by the Reverend John Dickson. A former physician, Dickson was in favor of Blackwell's studying medicine, and permitted her free use of his library of medical books. In December 1845, after Dickson closed his school, Blackwell moved

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Female World of Love and Ritual: Relations Between Women in Nineteenth-Century America," *Signs* 1 (1975): 1-29; and, with Charles Rosenberg, "The Female Animal: Medical and Biological Views of Woman and Her Role in Nineteenth-Century America," *Journal of American History* 60 (1973): 332-56.

3. See, among others, Ishbel Ross, *Child of Destiny* (New York: Harper, 1949); Rachel Baker, *The First Woman Doctor* (New York: Julian Messner, 1944); and Dorothy Clarke Wilson, *Lone Woman* (Boston: Little, Brown, 1970). Not only is there a lack of documentation in these works, but they also totally ignore Blackwell's activities as a social reformer and writer in England, where she lived from 1869 until her death in 1910. For a fuller discussion of Blackwell's life see my study, "Elizabeth Blackwell, M.D. (1821-1910): A Biography" (Ph.D. diss., University of Pennsylvania, 1974).

4. For a discussion of Blackwell's motivation for studying medicine see Sahli, "Elizabeth Blackwell," pp. 47-49.

to Charleston, South Carolina, where she continued to teach, and simultaneously pursued private pre-medical studies with Dickson's brother Samuel, one of his generation's most prominent clinicians and teachers.<sup>5</sup>

It was undoubtedly Dr. Samuel Dickson who encouraged Elizabeth Blackwell to investigate the possibility of enrolling in a medical school in Philadelphia, although in her autobiography Blackwell credited educator Emma Willard with first suggesting this course of action. Willard, whom Blackwell met in Charleston during the winter of 1846-1847, told her about Dr. Joseph Warrington and his work with the Philadelphia Lying-in Charity. Blackwell wrote for his advice, and in his reply, while not totally approving of her plan, he invited her to consult him if she ever came to Philadelphia.<sup>6</sup> Like many of his colleagues in the medical profession, he felt "that woman was designed to be the help meet for man, & that in the responsible duties of relieving ills which flesh is heir to, it is appropriate that *man* be the *physician* & woman the *nurse*."<sup>7</sup>

In May 1847 Elizabeth Blackwell left Charleston for Philadelphia, determined to investigate personally the opportunities for medical study in that city as well as in New York. Foremost in her mind was her desire to be admitted to one of the Philadelphia medical schools. Her first step was to discuss her idea with leading medical

5. Samuel H. Dickson (1798-1872) was a graduate of the medical school of the University of Pennsylvania. One of the founders of the Medical College of South Carolina, in 1847 he moved to New York City, but returned to Charleston about 1850. In 1858 he assumed the chair of the institutes and practice of medicine at Jefferson Medical College in Philadelphia. See Howard A. Kelly and Walter L. Burrage, *Dictionary of American Medical Biography* (New York and London: D. Appleton, 1928), pp. 327-28; Samuel X. Radbill, "Samuel Henry Dickson, Pioneer Southern Medical Educator," *Annals of Medical History, Series 3*, 4 (1942): 382-89; and Joseph Ioor Waring, "Samuel Henry Dickson (1798-1872)," *The Journal of Medical Education* 35 (1960): 421-28.

6. It is not clear through either correspondence or her autobiography how Elizabeth Blackwell and Emma Willard met, nor whether their relationship was more than a strictly formal one. See Elizabeth Blackwell, *Pioneer Work in Opening the Medical Profession to Women* (New York: E. P. Dutton, 1914), p. 40; and Elizabeth Blackwell to Emma Willard, 24 May 1847, Blackwell Family Papers, Library of Congress, Washington, D.C., hereafter cited as Blackwell Papers. Joseph Warrington, Jr. (1808-1888), an obstetrician, had graduated in 1828 from the University of Pennsylvania medical school. In that same year he organized the Philadelphia Lying-in Charity, a society for aiding indigent maternity cases in their own homes. It is not insignificant that many of Blackwell's early supporters, such as Warrington and William Elder, were Quakers.

7. Elizabeth Blackwell to Hannah Lane Blackwell, 28 February 1847, Blackwell Papers.

men in the city. Warrington expressed his sympathy by allowing Blackwell to visit his patients, attend his lectures, and use his library. His general attitude, however, remained rather ambivalent; he discouraged her idea of studying at an American school, but nevertheless thought that she might study in Paris, the leading European medical center, if she were to disguise herself as a man.<sup>8</sup> Disguise was also suggested by Dr. Joseph Pancoast, professor of surgery at Jefferson Medical College:

He thoroughly approved of a woman's gaining complete medical knowledge; told me that although my public entrance into the classes was out of the question, yet if I would assume masculine attire and enter the college he could entirely rely on two or three of his students to whom he should communicate my disguise, who would watch the class and give me timely notice to withdraw should my disguise be suspected.<sup>9</sup>

The opinions of other Philadelphia physicians—Samuel Jackson, William E. Horner, William Darrach, and William Ashmead—were varied. Warrington had consulted Ashmead regarding study in Paris, but Ashmead thought the city was so morally unsuitable for a single woman that Blackwell should give up any idea of a medical education rather than go there. Blackwell replied to Warrington “that if the path of duty led me to hell I would go there; and I did not think that by being with devils I should become a devil myself—at which the good Doctor stared.”<sup>10</sup>

Dr. William Elder, with whom she boarded in Philadelphia, was encouraging, and gave her much assistance during the months she was investigating opportunities for a formal medical education.<sup>11</sup> While in Philadelphia she also studied anatomy privately with Dr. Jonathan M. Allen:

He gave me as my first lesson in practical anatomy a demonstration of the human wrist. The beauty of the tendons and exquisite arrangements of this part of the body struck my artistic sense, and appealed to the sentiment of reverence with which this

8. Elizabeth Blackwell to Emma Willard, 24 May 1847, Blackwell Papers.

9. Blackwell, *Pioneer Work*, pp. 49–50. Joseph Pancoast (1805–1882), a graduate of the medical school of the University of Pennsylvania, taught at Jefferson Medical College until 1874.

10. Blackwell, *Pioneer Work*, pp. 48–49.

11. William Elder (1806–1885), although a physician by profession, had given up this occupation in 1845 when he moved to Philadelphia from Pittsburgh to become a writer and lecturer.

anatomical branch of study was ever afterwards invested in my mind.<sup>12</sup>

She was determined to succeed: "I must accomplish my end. I would sooner die than give it up. I consider it the noblest & most useful path that I can tread, & if one country rejects me, I will go to another."<sup>13</sup>

Blackwell, however, met with no success in her applications to Philadelphia and New York City medical schools. The most obvious reason, of course, was that medicine was viewed by the male members of the profession as a totally unsuitable undertaking for a real lady, one who should be content with her domestic role and not be exposed to the potentially corrupting influences of male patients and gross anatomy. Even if a woman were to venture outside the home, she should, as Warrington had suggested, be an adjunct to the man rather than an autonomous professional equal. Almost as threatening to the maintenance of this role configuration was the possibility that a woman might be a success. As an innovator for her sex, Blackwell would be a threat to the male members of the profession. Equally apprehensive were the medical schools, which were highly competitive in attracting students, and feared the admission of women would lead to ridicule, loss of status, declining male enrollments, and decreased revenue:

The fear of successful rivalry which at that time often existed in the medical mind was expressed by the dean of one of the smaller schools, who frankly replied to the application, "You cannot expect us to furnish you with a stick to break our heads with"; so revolutionary seemed the attempt of a woman to leave a subordinate position and seek to obtain a complete medical education.<sup>14</sup>

Another problem within the profession which militated against

12. Blackwell, *Pioneer Work*, p. 47. Jonathan Moses Allen (1815-1867) began to teach and demonstrate anatomy privately after his graduation in 1840 from the medical school of the University of Pennsylvania. Later he became a professor at the Pennsylvania Medical College. He was the author of *The Practical Anatomist; or, the Student's Guide in the Dissecting-Room* (Philadelphia: Blanchard and Lea, 1856).

13. Elizabeth Blackwell to Emma Willard, 24 May 1847, Blackwell Papers.

14. Blackwell, *Pioneer Work*, p. 49. That this was a realistic fear can be seen by the fact that Rush Medical College in Chicago, where Blackwell's sister Emily completed her first year of study in 1853, was censured by the state medical society because of her attendance. The college would not admit her for the second year of the course. Fortunately, she was able to complete her degree at Western Reserve Medical College in Cleveland.

Blackwell's being encouraged to pursue her studies was the insecurity caused by various innovative methods of treatment to the practitioners of so-called regular medicine. The popularity of Thomsonian medicine, water cures, phrenology, and homeopathic physicians caused regular physicians to assume a defensive posture and led directly to the organization of the American Medical Association in 1847. Any threat to the status quo, be it from a woman or an eclectic, was equally condemned.<sup>15</sup>

Faced with this situation, Blackwell persevered and applied to twelve "country schools."<sup>16</sup> Finally, in October 1847, she was accepted at one of these, Geneva Medical College. Leaving Philadelphia on 4 November, she arrived two days later in the upstate New York town of Geneva, where she found the school term already several weeks in progress.<sup>17</sup>

Formal medical education in the 1840s was by no means the thorough grounding in clinical and theoretical medicine that we know today. Each Geneva term ran only sixteen weeks, and students were expected to supplement the required two terms of classroom instruction with three years of study under a physician. Blackwell had completed two of these by her work with Samuel Dickson and Jonathan Allen. Therefore at the end of her first term at Geneva she returned to Philadelphia hoping to fulfill the third year requirement. At the time of her arrival, however, she had not yet obtained an appointment with an institution or physician. She was also disappointed because no letters of recommendation had been prepared for her at Geneva prior to her departure, although

15. Another less apparent reason for resisting the entrance of women into the medical profession was the fear that they would become abortionists rather than legally recognized practitioners. Blackwell herself was well aware of the stigma attached to the words "woman doctor," and her lifelong concern with sexual ethics can in part be seen as an effort to assure the respectability of women in the profession.

16. Blackwell, *Pioneer Work*, p. 52. The names of all these schools are not known. Besides Geneva Medical College in New York, where Blackwell was accepted and took her degree, Castleton Medical College in Vermont also accepted her application for admission. See Elizabeth Blackwell to James Perkins, 8 October and 24 November 1847, Autograph Collection, Institute of the History of Medicine, The Johns Hopkins University, Baltimore, Md.

Frederick C. Waite's assertion that Blackwell applied to only Geneva and Castleton is not logically substantiated by the existing documentary evidence. See Frederick C. Waite, "Two Early Letters by Elizabeth Blackwell," *Bulletin of the History of Medicine* 21 (1947): 110-12.

17. Blackwell, *Pioneer Work*, pp. 53-54.

the faculty there promised to send them along to Philadelphia.<sup>18</sup> Blackwell, who was once again staying with William Elder, finally obtained a letter of introduction to broker John F. Gilpin, one of the Guardians of the Poor, the city commission which ran Blockley Almshouse. Because she had not yet finished medical school, she could not apply for a regular post as resident physician; therefore her goal was to be admitted as an unpaid observer to gain the clinical experience and knowledge of hospital procedure not available to her at Geneva.<sup>19</sup> Even so, she had to lobby among the Whig, Democrat, and Native American factions of the Guardians of the Poor for this unprecedented appointment. She was successful, and on 28 February 1848, the Guardians resolved by a vote of nine to four "that permission be granted to Miss Elizabeth Blackwell to enter this Institution, enjoy such accommodations as can be conveniently afforded her, and occupy such a position as may be assigned her by the Chief Resident Physician."<sup>20</sup> Blackwell soon began her observations at the institution, where she remained until late September.<sup>21</sup>

Blockley, the city almshouse of Philadelphia, was located on the west bank of the Schuylkill River on the present site of its successor, Philadelphia General Hospital. The main building, designed by William Strickland, had opened in 1834, and was intended to accommodate only a portion of the poor of the city.<sup>22</sup> Despite its relatively recent construction, by 1848 the facility had become overcrowded. It was poorly heated and lacked adequate ventilation;

18. *Ibid.*, pp. 60–61.

19. A similar application was made in 1851 by Sarah Adamson, who was also accepted as an observer in the hospital. Two standard authorities on the history of Blockley erroneously state that she was the first woman to be accepted for such an appointment. See Charles Lawrence, *History of the Philadelphia Almshouse and Hospitals* (Philadelphia: privately printed, 1905), pp. 178–79, and John Welsh Croskey, *History of Blockley: A History of the Philadelphia General Hospital From Its Inception, 1731–1928* (Philadelphia: P. A. Davis, 1929), p. 99.

The so-called Western Hospital, which was supposed to provide clinical instruction at Geneva, was merely the second floor of the building housing the "Geneva Shoe Store." See Norwood, *Medical Education in the United States*, pp. 155–59.

20. Blackwell, *Pioneer Work*, p. 62; Guardians of the Poor, Minutes, 28 February 1848, Record Group 35, Philadelphia City Archives.

21. Blackwell's departure from Blockley is referred to in Guardians of the Poor, Minutes, 25 September 1848, Record Group 35, Philadelphia City Archives.

22. Lawrence, *History of the Philadelphia Almshouses*, p. 132.

23. *Ibid.*, passim. For another description of the physical conditions at Blockley see Elizabeth Blackwell to Marian Blackwell, 14 March 1848, Blackwell Papers.

the Guardians tried to cut costs by using pauper labor as attendants in the lunatic department.<sup>23</sup>

The staff was of mixed merit. Dr. Nathan Dow Benedict was chief resident physician. Under his supervision were several other resident physicians, chosen mainly from recent graduates of the University of Pennsylvania medical school.<sup>24</sup> The nursing and service staff, however, left much to be desired. Besides the pauper labor, the employees included such questionable characters as Ann Welsh, nurse in the obstetrical ward, who was consistently absent from her duties, and in August 1848 made off with two wagonloads of Blockley property, including furniture and bed linen.<sup>25</sup>

Blackwell's opinion of Blockley was ambivalent. She was assigned a pleasant room on the third floor of the women's hospital, and her presence there was evidently a great curiosity to the patients:

At first it was very trying to me—all eyes, & such queer eyes, were fixed on every movement, I was afraid every patient I questioned would think me an intruder, & that my questions would seem very absurd to the nurses—but already I am getting a little bolder, people are becoming accustomed to the quiet apparition, I am not scrutinized so inquisitively, & I find that some of the patients like to detail their symptoms.<sup>26</sup>

She had words of praise for Dr. Benedict and the matron of nurses. Nurse Welsh, however, thoroughly dismayed her, as did the young resident physicians, who walked out of the wards when she walked in, and refused her any assistance in diagnosing and treating the patients.<sup>27</sup>

24. Nathan Dow Benedict (d. 1871) was a graduate of the medical school of the University of Pennsylvania, and was appointed Chief Resident Physician at Blockley in 1845. He resigned the post in 1849.

25. Lawrence, *History of the Philadelphia Almshouses*, pp. 162–63; Guardians of the Poor, Minutes, 14 August and 25 September 1848, Record Group 35, Philadelphia City Archives.

26. Elizabeth Blackwell to Marian Blackwell, 14 March 1848, Blackwell Papers.

27. Blackwell, *Pioneer Work*, p. 63. Another reason, besides simple prejudice, which probably caused the young physicians to at first resent Blackwell's presence, was that they were not only unsalaried, but also had to pay for their own board and expenses, unlike Blackwell, who, while also unpaid, was furnished with room and board. Shortly after Blackwell's arrival at Blockley, the Guardians of the Poor, as a result of complaints by the assistant resident physicians, surveyed similar institutions in other cities, and as a result instituted a modest rate of compensation. See Guardians of the Poor, Minutes, 20 March 1848, Record Group 35, Philadelphia City Archives.

There was no question, however, about the value of Blackwell's medical experience at Blockley. The women patients afforded Blackwell her first example of "the hideousness of modern fornication." Particularly appalling in the syphilitic ward were the many young servant girls who had been seduced by their masters. She was dismayed when one of these patients tried to escape from Blockley by tying sheets together; they gave way, and the woman suffered brain damage and other injuries. "All this is horrible! Women must really open their eyes to it. I am convinced that *they* must regulate this matter. But how?"<sup>28</sup> As her career developed, Blackwell became increasingly concerned with problems of sexual morality, evidence of the lasting effect of these initial impressions at Blockley.

Of more immediate value to Blackwell were her clinical observations of the many Irish immigrants brought to Blockley suffering from ship fever, or typhus.<sup>29</sup> These observations formed the substance of her graduation thesis at Geneva Medical College, which was published in the *Buffalo Medical Journal and Monthly Review* in February 1849.<sup>30</sup> Blackwell correctly defined the disease as a form of typhus, but, adhering to the ideas of English theorists and French physician Jean Cruveilhier, also considered typhoid to be a form of typhus. Therefore, in her observations at Blockley, she probably included cases of both typhoid and typhus under the rubric "ship fever."<sup>31</sup> There was real irony in this erroneous categorization, for the classical clinical-pathological differentiation between typhoid and typhus had been made at Blockley in 1837 by William Wood Gerhard.<sup>32</sup> Gerhard's work, however, was not mentioned in Blackwell's thesis. There was still much uncertainty in medical circles regarding the

28. Blackwell, *Pioneer Work*, pp. 63–64.

29. See O. MacDonagh, "Irish Emigration to the United States of America and the British Colonies During the Famine," in Robert Dudley Edwards and T. Desmond Williams, eds., *The Great Famine: Studies in Irish History, 1845–52* (New York: New York University Press, 1957).

30. Elizabeth Blackwell, "Ship Fever: An Inaugural Thesis, submitted for the degree of M.D., at Geneva Medical College, Jan. 1849," *Buffalo Medical Journal and Monthly Review* 4 (1849): 523–31. The manuscript of the essay is in the Blackwell Family Papers, Schlesinger Library, Radcliffe College.

31. Samuel Sanes, "Elizabeth Blackwell: Her First Medical Publication," *Bulletin of the History of Medicine* 10 (1944): 86; Sir Arthur Newsholme, *Evolution of Preventive Medicine* (Baltimore: William & Wilkins, 1927), pp. 128–29.

32. See William Wood Gerhard, "Dothinenteritis or the Typhoid Fever with Alteration of the Follicles of the Small Intestine," *The American Journal of the Medical Sciences* 38 (February 1837): 289–322 and 40 (August 1837): 289–322.

distinction between typhoid and typhus. Blackwell chose a legitimate viewpoint, although one that was, after the development of bacteriology, proven incorrect.

This absence of bacteriological means for classifying ship fever caused Blackwell to believe its source to be some vague "seeds of disease" present in the immigrants before they left their native land. Their vulnerable condition caused many to fall prey to the disease during the ocean voyage:

Here, deprived of all excitement, without employment or exercise, their minds had time to brood over the fearful scenes they had left—fear, sorrow, anxiety, joined with the physical evils of their condition, tended to depress the vital energy, and the seeds of disease broke out with great violence.<sup>33</sup>

At Blockley various types of medication were used, depending on the individual patient's symptoms:

Where the symptoms were in the last degree urgent, more powerful stimulation was necessary; pure brandy was frequently administered; mustard or cayenne pepper was applied to the extremities and the inside of the thighs; hot fomentations, blisters applied for their rubefacient effect only; the temperature of the skin being maintained by hot water, bricks or sand.<sup>34</sup>

Crude as these remedies were, they produced a relatively low mortality rate, between seven and ten per cent. The beginning of a humanitarian attitude toward disease, the equation of physical with moral problems which was to permeate much of Elizabeth Blackwell's later work, can be seen in her conclusion to the thesis:

When the laws of health are generally understood and practised:—when a social providence is extended over all ranks of the community, and the different nations of the earth interlinked in true brotherhood—then we may hope to see these physical evils disappear, with all the moral evils which correspond to, and are constantly associated with them.<sup>35</sup>

While it is difficult to assess the impact of Blackwell's thesis on the profession, it has definite historical significance as the first medical publication by an American woman in a recognized professional journal.

33. Blackwell, "Ship Fever," p. 525.

34. *Ibid.*, p. 529.

35. *Ibid.*, p. 531.

In addition to the valuable clinical experience which she gained at Blockley, Blackwell became increasingly involved in various areas of social reform during her months in Philadelphia. One continuing interest was in the ideas of French social theorist Charles Fourier, whose ideas she had first read about in *The Harbinger*, George Ripley's journal of associationism:

I am reading Fourier with great interest, & drinking in every hint I can pick up, in relation to the Law of the Series, which presents to my mind, the most beautiful glimpses of order & true science, that I have ever yet been blessed with.<sup>36</sup>

During her tenure at Blockley, Blackwell joined "the little band of Associationists," a discussion group with about a dozen members, of which she was the only woman.<sup>37</sup> While the only concrete achievement of the group seems to have been the preparation of a set of resolutions directed to French socialist leader Alphonse de Lamartine, they did maintain extensive contact with other American communitarian groups, and received visits from such leaders in the movement as Albert Brisbane, William Henry Channing, and George Ripley. Like her concern with sexual morality, this interest in communitarian organization as a means of social reform remained with Blackwell throughout her life, particularly after she moved to England in 1869.<sup>38</sup>

Blackwell also began to be more articulate about the position of women in society, although her opinion of the average American woman was far from optimistic:

I do not think there can be any successful attempt to unite families closer, till women are more fully developed & have strong attractions brought out, which will lead them to absorbing occupations & stop off this infernal gossiping, & frivolity which would create a real Hell in a fortnight. . . . The majority of women do not seem to me formed for strong action or high aspiration.<sup>39</sup>

36. Elizabeth Blackwell to Marian Blackwell, 22 June 1847, Blackwell Papers.

37. Elizabeth Blackwell to Marian Blackwell, undated, Blackwell Papers.

38. See Elizabeth Blackwell to Henry Browne Blackwell, 24 May 1848; Elizabeth Blackwell to Emily Blackwell, undated; Elizabeth Blackwell to Marian Blackwell, undated, Blackwell Papers.

Alphonse de Lamartine (1790-1869) was a poet and statesman who had been *de facto* head of the provisional government at the time of the revolution in 1848.

39. Elizabeth Blackwell to Emily Blackwell, undated, Blackwell Papers.

A similar tone was taken in a letter to Emily Collins: "Women are feeble, narrow, frivolous at present: ignorant of their own capacities, and undeveloped in thought and feeling; and while they remain so, the great work of human regeneration must remain incomplete."<sup>40</sup> Blackwell felt that a slow reformation of women could be facilitated by shaping and adapting society to the needs and wants of all humanity.<sup>41</sup> Education was one key to this goal, and she was heartened to meet two men, Dr. Lewis Knight and one of his friends, who were interested in this question.<sup>42</sup>

After her graduation from Geneva Medical College in January 1849, Blackwell returned to Philadelphia. She did not, however, immediately plan to establish a medical practice. Rather, despite the dire predictions of Dr. Ashmead, she had decided to do postgraduate work in Paris, where her sister Anna was already living. During the weeks before her departure she attended medical lectures, practiced dissecting with a Geneva friend, George Field, and tried to improve her French.<sup>43</sup> In late March she left Philadelphia, and after spending a few days with her family in Cincinnati, sailed for England, where she arrived 30 April. There, as well as in France, she pursued postgraduate studies in obstetrics and general medicine at such institutions as La Maternité in Paris and St. Bartholomew's Hospital in London.

In 1851 Elizabeth Blackwell returned to the United States in order to begin her medical practice. It would have seemed logical, given her experience, for Blackwell to have settled in Philadelphia.

40. Elizabeth Blackwell to Emily Collins, 12 August 1848, in Elizabeth Cady Stanton, Susan B. Anthony, and Matilda Joslyn Gage, *History of Woman Suffrage* (Rochester, N.Y.: Charles Mann, 1889), 1: 90. In later correspondence with her sister-in-law Lucy Stone, Elizabeth Blackwell tried to deny the authenticity of this letter: "By the bye Barbara showed me a disagreeable letter which I certainly never wrote, printed in the Suffrage volumes. I have not the smallest idea who Mrs. Emily Collins may be. If I ever as a student sent a note to such a person, it has been changed, enlarged, stilted into something that I utterly repudiate." However, the style of the Collins letter and the attitude toward women it displays is so similar to that of the letter from Elizabeth to Emily Blackwell cited in note 39 that it would indicate the probable authenticity of the Collins letter.

41. Elizabeth Blackwell to Emily Collins, 12 August 1848, in Stanton, Anthony, and Gage, *History of Woman Suffrage*, 1: 91.

42. Elizabeth Blackwell to Emily Blackwell, undated, Blackwell Papers. Lewis Washington Knight (1816-1904) was an 1847 graduate of the University of Pennsylvania medical school and at this time was one of the resident physicians at Blockley. He is cited in Blackwell's thesis on ship fever as having provided her with facts relating to the *post mortem* appearance of the patients.

43. Blackwell, *Pioneer Work*, pp. 74-75; Elizabeth Blackwell to Hannah Blackwell, 25 February 1849, Blackwell Papers.

Instead, she chose New York City. While she never clearly articulated her reasons for doing so, Blackwell probably was trying to avoid competition from graduates of the newly established Female Medical College of Pennsylvania. Blackwell acutely realized that her professional future depended in part on her exploiting her unique position as America's first woman doctor. Her decision to stay in New York City was a wise one, for not only did she succeed in her private practice there, but also founded the New York Infirmary for Women and Children and its school of medicine for women.

Was Philadelphia's role in Elizabeth Blackwell's development as a physician a significant one? Philadelphia and its physicians and institutions afforded Blackwell a wide range of experience in such varied subjects as anatomy, epidemiology, and professional politics. Geneva, on the other hand, where Blackwell spent a total of only seven months, compared to fifteen in Philadelphia, gave her only a conventional grounding in medical theory, no clinical experience, and certainly no exposure to the social reform ideas which formed an essential part of her Philadelphia education. Moreover, the Philadelphia experience familiarized Blackwell with the organization of the American medical profession and its institutions. By denying her admission to its medical schools, the Philadelphia profession acted in no small way as a catalyst for Blackwell's nascent feminism, while at the same time assuring her, by her admission to Blockley, for example, of the reality of her professional competence. It was an ambivalent configuration of positive and negative elements, which affected Blackwell's entire career and certainly had great impact on her development of a physically and intellectually distinct course of study and professional role for women physicians. It is this relation to the history of medicine as a profession for women that gives Elizabeth Blackwell's Philadelphia experience its greatest significance.