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**Managing Maternity: Reproduction and the
Literary Imagination in the Eighteenth
Century**

A. Blackwood

PhD

2017

**Managing Maternity: Reproduction and the
Literary Imagination in the Eighteenth
Century**

Ashleigh Blackwood, MRes B.A. (Hons)

A thesis submitted in partial fulfilment of the requirements of the University of Northumbria at Newcastle for the degree of Doctor of Philosophy Research undertaken in the Faculty of Arts, Design & Social Sciences

October 2017

Managing Maternity: Reproduction and the Literary Imagination in the Eighteenth Century

This thesis demonstrates how literary and medical authors explored changing concepts of childbirth and reproductive medicine between the years 1737 and 1798. Considerable changes took place during this period that transformed birth from a social rite of passage into a medical event. Questions such as who and what was involved in reproduction, how childbirth was managed by individuals and communities, as well as how common understanding about these matters were reached, were brought to the fore in a way that they had never before been raised. A key means by which these ideas were communicated was through the rapidly developing print market with its overlapping interests in literature and medicine. Scholarship of medical humanities and medical history has grown exponentially in the last few decades, including that relating to the history of midwifery and the professionalization of what would become obstetric discourse, yet no study has brought together the theme of reproduction with trends in medical and literary publishing directly. The methodology employed here favours neither the literary nor historical, nor the feminist over the biographical, but rather brings these approaches together, drawing on medical theory of the period, trends in publishing, the rise of both women's writing and the novel, as the texts considered require. The thesis widens the source pool consulted for purposes of developing a detailed understanding of the history of reproductive medicine. In doing so, the materials analysed reveal that both lay and professional authors found a range of creative ways of relating to changes in the medical management of pregnancy and childbirth, using personal stories and broader medical information, some of this illicit.

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Declaration

I declare that the work contained in this thesis has not been submitted for any other award and that it is all my own work. I also confirm that this work fully acknowledges opinions, ideas and contributions from the work of others. I acknowledge the role played by my association with a major funded project conducted by Northumbria University and Newcastle University, 'Fashionable Diseases: Medicine, Literature and Culture 1660-1832' (1st February 2013 – 31st May 2016) in the production of this research. Chapters Four and Five of this thesis have appeared as the following publications, those versions which appear here have been reworked for purposes of the larger arguments of this thesis:

Ashleigh Blackwood, "I wish the child, I call my own": [Pro]Creative Experience in Eighteenth-Century Poetry', *Voice and Context in Eighteenth-Century Verse: Order in Variety*, ed. Joanna Fowler and Allan Ingram (Palgrave Macmillan, 2015) pp.155-172.

———, 'Sterne's "Little Gentleman": Tristram Shandy and the Male Participant in Childbirth', Sterne, Tristram, Yorick: Tercentenary Essays on Laurence Sterne, ed. Melvyn New, Peter de Voogd, Judith Hawley (Delaware University Press, 2015) pp.101-120.

A further publication of my own is not included here, but makes reference to of one of the midwifery case studies used in Chapter Three and throughout this thesis:

———, 'Toxic Texts and Reading Remedies: Literary Medicine in Eighteenth-Century Print Cultures', *Literature and Medicine*, Volume 34, No. 2 (Fall 2016) pp.278-98.

Any ethical clearance for the research presented in this thesis has been approved. Approval has been sought and granted by the Faculty Ethics Committee on 17th January 2013.

I declare that the Word Count of this Thesis is 84, 871 words

Name: Ashleigh Blackwood

Signature:

Date: 27th October 2017

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Introduction

Maternity, Medicine and Literary Creativity

Birth is a fundamental occurrence affecting all communities throughout history. Though the process of childbirth itself is an unchanging constant, how reproduction has been understood and managed, has been subject to enormous variation throughout time and across the world. Considerable changes took place in the British Isles during the eighteenth century that transformed birth from a social rite of passage into a medical event, and with this brought into question who and what was involved in birth, how childbirth was managed by individuals and communities and how common understandings about these matters were reached. A key means of exploring and communicating these ideas was through the rapidly expanding literary and print market. This thesis answers the question of how changes in eighteenth-century reproductive medical cultures were represented through creative literature, and does so by examining how both literary and medical authors utilised the theme of childbirth to explore the changing face of reproductive medicine. Although many other aspects of eighteenth-century scientific and medical development have been uncovered, not least of all the rise of empiricism, and the history of midwifery and the professionalization of what became obstetric discourse is well documented, no study has yet brought together how authors of varying backgrounds and experiences interpreted and responded to these changes in medical and social cultures. Each chapter of this thesis contributes a range of new perspectives to a variety of specific themes relating to reproduction in print, including looking at readers and writers of women's medical writing, literary form and style within midwifery manuals, the documentation of maternal experience in prose, poetry and autobiography, the place of men in birthing and the appearance of illicit forms of obstetric and pharmaceutical practice in literary works. I will consider how developments in both medical practice and technologies associated with childbirth, as well as a variety of changes in cultures of authorship and the print market, influenced literary and cultural perceptions of maternity between 1737 and 1798. As Raymond Stephanson and Darren Wagner explain, 'the combination of a quickly expanding print culture at the end of the seventeenth century in addition to an

escalating consumer interest in printed matter about sex and reproduction produced a body of materials whose quantity and availability were unlike anything before', and there remains much to learn about the impact of these medical, cultural and literary changes.¹

The terms 'literature' and 'literary' are of considerable significance to this research and as such require some framing for the benefit of clarity and accessibility in what follows. The term literature in this thesis is governed by a broad definition and application of its meaning, denoting printed works of various types, including fiction, non-fiction and medical texts. Literary texts, however, are a more specific genre of writing, comprising those that are presented to the reader with a specific focus on the artistic construction of their narratives. In their most commonly recognised form, 'literary texts' are those including novels, poems, essays, published diaries and letters. One of the key arguments presented here, with the caveat that genre is not understood today as it was during the eighteenth century, is that many medical texts did possess literary qualities, even though medical texts may not have been considered to have been in the same genre as literary ones. Authors of these texts engaged with literary as well as scientific styles, devices and traditions to deliver their new approaches and ideas to increasingly wide readerships who were only just becoming familiar with the concept of integrating childbirth into medicine and broader science.

Particularly important to this examination is the contribution of women writers, with texts provided by those who were practicing midwives and others pursuing literary ambitions through poetry, prose fiction and autobiography. The rise of women's writing during the eighteenth century has received substantial scholarly attention through feminist and historicist studies. There is, however, limited scholarship focusing specifically on women's agency in writing on subjects over which they could claim a unique ownership, such as childbirth, qualified by their experiences and not just their biological predisposition. The chronology selected is framed by the first and last midwifery publications of the eighteenth century written by female practitioners. Though male-authored medical publications remain of

¹ Raymond Stephanson and Darren N. Wagner, eds., 'Introduction', *The Secrets of Generation: Reproduction in the Long Eighteenth Century*, (Toronto, Buffalo, London: University of Toronto Press, 2015) p.6.

key importance here, those written by female midwives, of which there are only six as far as records have revealed, are among those lacking critical attention. The first of these was a set of case histories published by Sarah Stone in 1737, and the last by a midwife known only as 'Mrs. Wright' in 1798. All literary texts examined were also published between these two dates. Though the depiction of the midwife is an integral part of some texts examined here, my research extends beyond representations of midwives themselves. I am interested in finding out how reproductive experience was depicted more broadly in literature, and how both medical and lay authors represented the interests and concerns of all parties involved, including men, women, practitioners and patients.

Male authors' works are also addressed here, however, as no single-gendered history of reproduction could be truly representative of the realities of eighteenth-century cultures. A range of contributions from medical and literary authors including William Giffard, Sir Richard Manningham, George Cheyne and Laurence Sterne support an understanding of how male medical professionals and the lay public sought to understand, relate to, and participate in, the medical support of maternity health. These medical and imaginative texts from both male and female authors played a central role in publicly attempting to newly relocate and understand birth as a society and medical matter. In order to contextualise sufficiently prose and poetry texts from lay authors, this thesis also offers the only complete catalogue available to date of obstetric publications printed in England between 1540 and 1799.² By treating published material produced by practitioners and literary authors, for both professional medical and lay readers, alongside one another I will illustrate the perspectives of both practitioners and patients in detail, developing a thorough assessment of both personal and broader cultural ideas of reproduction in the eighteenth century.

Methodology and the Question of [Inter]Disciplinarity

Maternity is a wide subject and there are multitudes of factors that can affect individual or collective experiences of procreation. Medicine and literature also carry a long history of interconnectivity. In fact, a study such as this, concerning medicine of a historical nature, maternity and

² See Appendix A.

literature, might be considered to be under the umbrellas of a number of discipline-specific labels, depending on the reader's point of view. 'Medical history', 'literature and medicine', and 'medical humanities' are all rising sub-fields within humanities research and have been for some time. The problematic nature of selecting one of these labels above another can be traced back through the last few generations of scholarship to debates such as that highlighted by C.P. Snow's 1959 Rede Lecture on 'The Two Cultures and the Scientific Revolution'. Within his lecture Snow expressed the viewpoint that 'the intellectual life of the whole of western society is increasingly being split into two polar groups', which he then went on to define as '[l]iterary intellectuals at one pole—at the other scientists'.³ In an updated exploration of this argument, Judith Hawley points out that science and literature encompass different actions. 'Science', she explains, 'is a set of practices, and not just another form of writing.'⁴ By making this distinction, far from divorcing the two types of activity however, Hawley is actually able to acknowledge their closeness by suggesting that science and literature operate as elements of a wider culture, a relationship which is particularly apparent in eighteenth-century 'cultures of letters and science'.⁵ Like Hawley's desire to explore difference in the interests of similarity, Snow's were those shared with his audience in the interests of a growing apprehension, rather than any advocacy of a separation to be preserved. Within the same lecture, he opted to describe himself in the following way: 'by training... a scientist. By vocation [...] a writer'.⁶ Had Snow been able to see the research of the past two and a half decades since his death, including the work of contributors such as Hawley, he might have been relieved to see that these divides have not been preserved unanimously. Scientists and literary critics alike continue to look far beyond their own heritage for opportunities to be creative in cross-disciplinarity in looking for new answers to new questions. As Sharon Ruston explains in her 2008 collection of essays

³ C.P. Snow, *The Two Cultures*, ed. Stefan Collini (1959 and 1964) (Cambridge: Cambridge University Press, 2012) p.3-4.

⁴ Judith Hawley, 'General Introduction', *Literature and Science 1660-1834: Volume 1: Science as Polite Culture* (London: Pickering & Chatto, 2003) pp. xi-xvii, p. xiii. Other contributions to this debate include George Lewis Levine and Alan Rauch, eds., *One Culture: Essays in Science and Literature* (Madison and London: University of Wisconsin Press, 1987); Elinor Shaffer, ed. *The Third Culture: Literature and Science* (Berlin and New York: Walter De Gruyter & Co, 1998).

⁵ Hawley, 'General Introduction', p. xii

⁶ Snow, p.1.

entitled *Literature and Medicine*, ‘we can find in both literary and scientific texts common ground, common purpose and common means’.⁷ The pursuit of bringing the two types of text together continues through a number of different means and methods for seeking science within the written word, and literature within scientific research and development.

Medicine is one such area of science that increasingly attracts the attention of literary scholars. As Hawley further observes, ‘medicine can be useful in a number of ways to a novelist: births, deaths, wounds and sickness are the stuff of the narrative’.⁸ Yet it is not only novelists, who would seek to create narratives. While it is true that the human life cycle offers a range of challenges to the individual both physically and psychologically and literary imaginations need look no further than this to find the ‘stuff of the narrative’ within its progressive stages, medical practitioners have, for centuries, also sought to tell stories. They have done so as part of their own learning and practice and as part of communities of practice which have informed the ways in which medical professionals have come together to create advancements in theory and application. Tristanne Connolly and Steve Clark even indicate a ‘frequent biographical overlap between doctors and writers’, citing ‘Smollett, Akenside and Armstrong through to Erasmus Darwin and John Keats’ as examples.⁹ Patients too, have a history of sharing their own experiences, with a whole host of reasons for doing so, from the therapeutic value of recounting their experiences, through raising awareness for particular conditions, to advising fellow sufferers on techniques for management or even suggested cures.

As Rita Charon points out ‘[h]ealthy people, who enjoy the “silence of health”, have little reason to dwell on their bodies or their bodies’ relationships with the world’, where those who might be considered to be acutely ill, or managing chronic health conditions do not. These words should be handled with increasing caution, however, in terms of the assumed binary created by the implication of being either ‘ill’ or ‘healthy’, as a criteria for considering what medicine might be included in any given

⁷ Sharon Ruston ed., ‘Literature and Science’, *Essays and Studies*, No.61 (2008) pp.1-11, p.11

⁸ Judith Hawley, ‘The Anatomy of Tristram Shandy’, *Literature and Medicine during the Eighteenth Century*, eds. Roy Porter and Marie Mulvey Roberts (London: Routledge, 1993) pp.84-100, p.85.

⁹ Tristanne Connolly and Steve Clark, eds., ‘Introduction’, *Liberating Medicine, 1720-1835* (London: Pickering & Chatto, 2009) p.2.

literature. In place of an either/or approach to health and illness, it is helpful to acknowledge that the line between health and illness is quite often a blurred one.¹⁰ One such example, where the demarcations between the states of ‘well’ and ‘unwell’ have been historically disordered, is reproduction, which may be one reason for the underrepresentation of reproduction as a subject in eighteenth-century cultural studies. The blurring of these lines can be seen throughout this thesis as medical and literary texts speak out to broader audiences than those that may be assumed from what we would now recognise as their genre. Many of the midwifery manuals considered, for example, employ literary styles and devices, and the poetry and novels, which I explore here, engage with medical thought and ideas of the period.

Jonathan Andrews’s assessment of the recent past, present and future of disciplinarity within eighteenth-century studies specifically in relation to the history of medicine and science, tackles the difficulty of categorising research such as this into a particular disciplinary, or interdisciplinary grouping. ‘[T]he current richness of eighteenth-century studies of health and medicine’, he asserts, ‘is already rendering medical history a misleading misnomer; scholars appear keener than ever to embrace a greater variety of theoretical perspectives and methodological approaches.’¹¹ His observations are borne out in the work of scholars such as Roy Porter and George Rousseau, Clark Lawlor and David E. Shuttleton, who have each contributed a range of insightful studies of the cultural, as well as medical, significance of disease and disorder through time.¹² Conditions such as gout, consumption and smallpox have all been repositioned within contemporary understandings of historical medical and social cultures by these examinations of ill health and medicine as they appear in literature. Much like the belief expressed by Andrews, my own research also embraces the emerging methodologies employed by these authors, using a wider source base than traditional medical history, or even English literature, might at one time have

¹⁰ Rita Charon, *Narrative Medicine: Honoring the Stories of Illness* (Oxford: Oxford University Press, 2006) p.88.

¹¹ Jonathan Andrews, ‘History of Medicine: Health, Medicine and Disease in the Eighteenth Century’, *Journal for Eighteenth-Century Studies*, Vol. 34, No. 4 (2011) pp.503-515, p.510.

¹² See Roy Porter and George S. Rousseau, *Gout: The Patrician Malady* (1998) (New Haven, CT and London: Yale University Press, 2000).

Clark Lawlor, *Consumption and Literature: The Making of the Romantic Disease* (Houndmills: Palgrave Macmillan, 2007).

David E. Shuttleton, *Smallpox and the Literary Imagination 1660-1800* (Cambridge: Cambridge University Press, 2007).

accepted. Rather than offering a traditionalist medical-historical study based on considering practitioners and how they handled and interacted with childbirth in isolation, my primary aim is to provide a more holistic and inclusive history of eighteenth-century cultures of reproduction which captures an array of perceptions and responses to changing standards of professionalizing medical practice of proto-obstetrics both public and practise-based. In doing so I will avoid simply presenting a history of midwifery and the development of professionalized obstetrics. Practitioner-based histories of childbirth are already well-documented, if too well in the sense that too many studies of this nature show a tendency to reach redacted, over-simplistic conclusions about the tensions between female midwives and male physicians and surgeons for the ‘ownership’ of birthing attendance as a profession and trade.¹³ In doing so, I will move away from traditionalist methodologies of medical history, which, as Roy Porter indicates ‘ignored the patient.’¹⁴ This is not to say that practitioners were not a driving force of innovation and development of reproductive medical discourse. Their contributions remain of critical importance to the study of the written history of reproductive medicine.

So important is this practitioner-based component of the literary history of reproductive medicine that appended to this thesis is an original catalogue of reproductive medical manuals produced between 1540 and 1799, providing a thorough chronology of seminal and less prominent works that appeared on the British print market between these dates. Beginning with Richard Jonas’s first English translation of Eucharius Rösslin’s *Der Swangern Frauwen und Hebammen Rosengarten*, the catalogue includes all original works, translations and reprints of texts which appeared in published print on the British bookselling market regarding obstetric health and practice. This is an original piece which, when judged

¹³ See Jean Donnison, *Midwives and Medical Men: A History of Inter-Professional Rivalries and Women’s Rights* (London: Heinemann Educational Books, 1977) p. 23.

Barbara Brandon Schnorrenberg, ‘Is Childbirth Any Place for a Woman? The Decline of Midwifery in Eighteenth-Century England’, *Midwifery and the Medicalization of Childbirth*, eds. Edwin Van Teijlingen, George W. Lewis, Peter McCaffery and Maureen Porter (New York: Nova Science Publishers, 2004) pp. 89-96, p.93-4.

Sheena Sommers, ‘Transcending the Sexed Body: Reason, Sympathy and “Thinking Machines” in the Debates over Male Midwifery’, *The Female Body in Medicine and Literature*, eds. Andrew Mangham and Greta Depledge (Liverpool: Liverpool University Press, 2011) pp.89-106, p.91.

¹⁴ Roy Porter, ed., *Patients and Practitioners: Lay Perceptions of Medicine in Pre-Industrial Society* (1985) (Cambridge: Cambridge University Press, 2002) p.2.

against a history of similar scholarship, has not been attempted elsewhere. Though Pam Lieske has published a collection that gives many extracts and full replications of eighteenth-century midwifery texts, and Chris Galley and Robert Woods give lists of texts which may have been particularly significant, neither contributions contains the same level of detail contained in Appendix A.¹⁵ The bibliographical timeline created by entries also allows for a new type of analysis about what information was available to the literate public at any given time, and how other authors of other types of texts utilised and responded to the changes in medical culture that were captured by these texts. The ability to connect the influences and dialogues, both direct and indirect, which occurred between medical and literary texts, is essential to developing a full comprehension of how reproduction was understood in broader eighteenth-century culture. Chapter One offers further information regarding the catalogue's construction and its value in terms of what such a document can add to knowledge about the development of obstetric practice and, more importantly to this thesis, what information was available to the public at a given point in time.

Aside from the long-standing focus on competition within local medical practice markets, which often included both female midwives and male practitioners, there are many other personal and societal aspects of how reproduction was understood that have been neglected. These largely unseen aspects of procreation in literature, which include patient narratives, responses to paternity and other male-role involvements in childbirth, emotional and imaginative retellings of experiences of pregnancy, birth and

¹⁵ Pam Lieske, *Eighteenth-Century British Midwifery*, 12 vols. (London: Pickering & Chatto, 2007-12); Robert Woods and Chris Galley, *Mrs Stone and Dr Smellie: Eighteenth-Century Midwives and their Patients* (Liverpool: Liverpool University Press, 2014) p.467-73. Woods and Galley offer two appendices to their work, the first which lists forty texts identified as '[i]mportant British midwifery and anatomical textbooks, and books of case notes, arranged by date of publication, 1656-1864', and fifty-two '[i]mportant British midwifery and anatomical textbooks, and books of case notes, arranged by date of publication'. From the similarity of the titles of these two lists, any reader could be forgiven for assuming the two to be the same list organised in different ways, however, the two different numbers of entries confirm this not to be the case. Where authors such as Elizabeth Nihell, William Smellie and Thomas Denman are among those who appear in both the alphabetical and chronological lists (Appendix 2), there are also authors whose works, appearing in the chronology, that have no place in the alphabetical list, including Louyse Bourgeois, Benjamin Pugh and William Perfect. Curiously, Galley and Woods also provide publication details in the chronological list, but no titles. Therefore, there are a number of instances, typically caused when an author was prolific enough to have written and published multiple titles by the date listed, whereby it is not always possible to identify precisely which text or edition is being highlighted as significant for the reader. There are, for example, two entries given for Charles White, whose name does not appear in the alphabetical list at all, where the texts being referred to are unclear without considerable further research on the part of the reader.

the less desirable issues of single parenthood, destitution and abortion, offer a wealth of knowledge about how individuals and the collective public both understood and experienced reproduction. Furthermore, Porter's distinction between the terms 'patient' and "sufferers" or "the sick", though not entirely or directly translatable in the case of pregnancy or delivery, does help to demonstrate the grey area in medical terminologies that have historically been applied to the pregnant or birthing woman. Not all medicine or medical development is aimed at alleviating or curing specific conditions; alternatively, a proportion of care, treatment and remedies are intended simply to accommodate for natural bodily processes, or otherwise improving and sustaining health and wellbeing. While confinement and lying-in periods applied during the eighteenth century to remove the expectant or postpartum mother from daily life both within the household and wider public activity, pregnancy itself has never been defined clearly or categorically as an illness. As eighteenth-century publishing midwife Martha Mears explains, '[a] state of pregnancy has too generally been considered as a state of indisposition or disease: this is a fatal error and the source of almost all the evils to which women in childbearing are liable'.¹⁶ Her assessment raises questions about how the medical professions and public thought about and related to childbirth and reproduction more widely.

Patients are undoubtedly present in the course of this analysis. As writers of poetry, prose and medical texts, authors including Jane Cave Winscom, who had given birth themselves, contributed to how the public accessed ideas surrounding childbirth as an evolving subject. By considering texts written by practitioners, patients and the wider public, my aim is to develop a detailed understanding of the complex and dynamic ways in which society engaged with the professionalization of obstetric medicine that occurred during the eighteenth century. By avoiding concentrating on any one specific group, such as patients or practitioners, I hope to be able to reveal an image of cultural engagement which aligns more closely with the likely reality of cultural perceptions of maternity and childbearing of the period than has been achieved by previous generations of historians and literary critics. Similar to the ways in which Sara

¹⁶ Martha Mears, *The Pupil of Nature; or Candid Advice to the Fair Sex* (London: Faulder, Murray and Highly, 1797) p.4.

Read has explored understandings of menstruation in early modern England, my range of literary sources is not restricted to those genres, primarily prose fiction, poetry and drama, which might typically and exclusively have been defined to be literature. Read undertakes to bring the two as closely together as she can, claiming that ‘medical texts are treated as literary sources; to read [these] as purely scientific theses would be anachronistic as the divide that exists between science and literature had not yet happened’.¹⁷ The very nature and modern direction and trajectory of medical humanities as a research field in recent years reveals an attempt to create an understanding of literature and published print that emulates or at least broadly parallels the experience of eighteenth-century readerships. While it would be unrepresentative of literate culture to say that eighteenth-century readers made no distinction between medical manuals and novels or poetry, Read’s words do reflect the fact that differences between the literary and scientific were not as divergent as we have come to expect of these respective genres today, particularly in terms of style. The range of rhetorical devices and variety of ways in which narrative expression and written style could be employed in medical manuals, particularly those written by women practitioner authors, bore a clear resemblance to those that might have been selected for use in literary texts during the period. Beginning by bringing together both traditional literary texts with medical research in the form of essays, treatises and manuals offers a more organic view of the information transfer and cultural connections being made by both medical and lay populations of the eighteenth century in Britain.

Defining Maternity

Alongside the need to develop parameters which define the chronology to be examined, and the type of literature to be included in this analysis, it is also essential to ask the fundamental question of just what is meant by the word ‘maternity’. Even within eighteenth-century studies alone, such a definition is prone to fluctuation, inconsistency and continual shaping depending on the context within which it is positioned. Julie Kipp has explored this issue in her analysis of Romantic literature as an original source

¹⁷ Sara Read, *Menstruation and the Female Body in Early Modern England* (Houndmills: Palgrave Macmillan, 2013) p.3.

for ‘contemporary theoretical debates about maternity’.¹⁸ She offers, ‘[w]hile motherhood has become a fairly trendy topic among Romantic-period scholars, few acknowledge fully the extent to which the category of maternity has proven to be a source of great contention among feminist scholars’.¹⁹ The distinction between ‘motherhood’ and ‘maternity’ in Kipp’s language here is an astute one. The two concepts were treated differently in literature of the period. Where, as Marilyn Francus demonstrates in *Monstrous Motherhood* (2012), that a mother-character ‘prevent[ed] the relation of her story and those of others, while her absence or death facilitates the telling of the narrative’, meaning that she quickly disappeared from eighteenth-century narratives, the same cannot be said of maternal experience specifically in the context of reproductive science.²⁰ Instead of side-lining maternity as a subject for medical study and creating an ‘erasure of mothers and motherhood from the cultural landscape in eighteenth-century Britain’, the first maternal experiences, those of childbirth, were subject to significant interest and scrutiny in research, practice and published print.²¹ This difference between what was obscured, in terms of women’s longer term experience of child-rearing, and what was brought to the fore, the immediate events of gestation and birth, makes drawing a distinction between studies of ‘motherhood’ and those of ‘maternity’ even more important.

A key means of doing this is through the chronology of experience and what was involved in either type of experience. In the context of research focused on the eighteenth century, Rebecca Davies’s *Written Maternal Authority and Eighteenth-Century Education in Britain* employs a different definition of maternity to my own, one that is attached to the concept of motherhood and parenting in a long-term sense, through mothers providing education and discipline to their children. This is necessary for her focus, the ‘literary construction of an authoritative maternal voice in educational discourses creates a pattern for motherhood that ultimately only exists in the literary realm’ which discussed the development

¹⁸ Julie Kipp, *Romanticism, Maternity, and the Body Politic* (Cambridge: Cambridge University Press, 2003) p.4.

¹⁹ Kipp, p.3.

²⁰ Marilyn Francus, *Monstrous Motherhood: Eighteenth-Century Culture and the Ideology of Domesticity* (Baltimore: The Johns Hopkins University Press, 2012) p.19.

²¹ Francus, p.18.

of children through their education at home well beyond their infant days.²² Similarly, Susan C. Greenfield focuses on maternity in the context of mothers and daughters in eighteenth-century literature. Even in doing so, however, she emphasises from the outset that she is '[d]ispelling the possibility of a politically unified maternity', an astute and appropriate observation given the multitude of ways in which the concept of a woman's maternal role was, as Davies suggests, constructed, understood and, in some cases, idealised.²³ In doing so, Greenfield additionally explains, it was women writers of this period who sought to define maternity on their own terms, influencing 'modern' interpretations of the word.²⁴ This thesis does not engage in any depth with domestic education beyond Jane Cave Winscom's maternal advice poems discussed in Chapter Four, but Greenfield's rejection of a unified concept of maternity is helpful in making the point that effective mother characters may have been largely absent from literature, and yet authors still sought to explore maternity in the context of the public and private management of reproduction. This public and private divide also manifested in political senses. As Toni Bowers comments, 'Augustan establishment writers were much preoccupied with defining and enforcing virtuous motherhood', yet the private, seemingly messy business of childbirth along with discussions of women's reproductive anatomy and bodily functions was rapidly increasing, and hard to reconcile with such ideals of mother figures.²⁵ These inherent tensions between discourses of motherhood and maternity in its medical context during the eighteenth century are another reason to regard the two concepts as distinct, if overlapping, entities.

Closer to the parameters applied by Kipp, who restricts her own focus to matters relating 'the ways in which revolutions in the childbirth industry were negotiated discursively', my own definition is

²² Rebecca Davies, *Written Maternal Authority and Eighteenth-Century Education in Britain: Educating by the Book* (2014) (Abingdon and New York: Routledge, 2016) p.3.

²³ Susan C. Greenfield, *Mothering Daughters: Novels and the Politics of Family Romance, Frances Burney to Jane Austen* (2002) (Detroit: Wayne State University Press, 2003) p.14. Like these long-range definitions of maternity from Davies and Greenfield, Kirsty Byrne's 1993 thesis 'Literary Representations of Maternity in the Eighteenth Century', also examines maternal experience using a timeline beginning with pregnancy and childbirth, moving through to child rearing beyond infancy. See Kirsty N. Byrne, 'Literary Representations of Maternity in the Eighteenth Century' (Ph.D. Thesis: Durham University, 1993).
<http://etheses.dur.ac.uk/5803/1/5803_3218.PDF?UkUDh:CyT>[last accessed 20 October 2017].

²⁴ Greenfield, p.114.

²⁵ Toni Bowers, *The Politics of Motherhood: British Writing and Culture 1680-1760* (1996) (Cambridge: Cambridge University Press, 2005) p.16.

more strictly grounded in the earliest parts of women's parental experience.²⁶ The period between conception and neonatal care was focused upon most intensely in eighteenth-century research, learning and teaching within academic medical pedagogy and the area of maternity in which I am primarily interested and does not reach into what might be defined as later 'motherhood', an area of study that, as Francus demonstrates, is able to stand independent of any form of medical humanities. In these teachings and writings of medical professionals, both male and female, maternity was discussed as the experience of women, psychologically and physiologically, between conception and the end of lying-in which, although there was no definitive end date, Lisa Forman Cody suggests 'ideally' continued for 'a month or more' after the birth.²⁷

Critical Scholarship: The History of Midwifery Practice and Writing 1540-1799

There has been much long-term interest in accounting for the history and developments affecting the midwifery and surgical professions during the eighteenth century, with many predating the recent developments in humanities and medical research discussed by Andrews. The following review of contributions made by historians to date includes those works that have discussed midwifery directly, associated developments in technology, and how midwives and accoucheurs experienced their day-to-day practice. Given that this thesis is less interested in considering developments in practice, however, (which, as can be seen from the works of historians to date, is relatively well documented) the coverage of existing literature presented here goes beyond discussing secondary sources that do just that. In the past three decades research has also emerged which has further utilised histories of reproduction and midwifery in print in attempts to understand what other, perhaps less direct, impacts these written works had on public understandings of sex, gender and the role of reproduction in wider society and public life.

Medical historian James Hobson Aveling produced the first-known substantive study of female-led midwifery, entitled *English Midwives, Their History and Prospects* (1872). Aveling's text was

²⁶ Kipp, p.8.

²⁷ Lisa Forman Cody, *Birthing the Nation: Sex, Science and the Conception of Eighteenth-Century Britons* (Oxford: Oxford University Press, 2005) p.39.

organised chronologically, beginning in the sixteenth century and ending in the nineteenth century, with a 'prospective' reflection of the future appended to his account of the profession to that date. His work addressed some of the key thematic issues that have affected matters of change and continuity in midwifery practices, including midwives' oaths, licensing and education. With an approach that was mainly biographical, Aveling conveyed history to readers through recording the existence and practice of individual female midwives. Though a breakthrough in the recognition of the work of female practitioners that had gone largely unnoticed beforehand, each entry was recorded in isolation and the book was limited by the fact that it did not attempt to explore the contribution made by individuals or groups to medical practice more widely than their own, or public perceptions of the profession.²⁸ It was not until the early twentieth century that H. R. Spencer followed up Aveling's work with *The History of British Midwifery* (1927). Spencer, an obstetrician himself, organised his investigation first by theme: the Chamberlens and their forceps, 'the Doctors and their Midwives' and puerperal fever were those which chiefly led his organisation of chapters.²⁹ Within this thematic approach, he then used a large chapter, comprising most of the text, to take a similar biographical approach to that which Aveling had employed. Paying limited attention to the famed contribution of William Harvey's *Exercitationes de Generatione Animalium* (1651), later known in English print as *Anatomical exercitations, concerning the generation of living creatures: to which are added particular discourses, of births, and of conceptions, &c.*, and none to Nicholas Culpeper's ground-breaking *A directory for midwives: or, A guide for women, in their conception, bearing, and suckling their children*, he concentrated largely on 'the Chief Writers on Midwifery', twenty-eight male university-educated practitioners of reproductive discourse.³⁰ Where Aveling had focused on female midwives exclusively, Spencer took an alternative perspective, referring

²⁸ As an example, see Aveling's entry for Royal midwife Margaret Cobbe. James Hobson Aveling, *English midwives, their history and prospects* (London: J. & A. Churchill, 1872) p.15.

²⁹ Herbert R. Spencer, *The History of British Midwifery from 1600 to 1800: The Fitz-Patrick Lectures for 1927 Delivered Before the Royal College of Physicians of London* (London: John Bale, Sons & Danielsson Ltd., 1927) p. 1, 143, 150.

³⁰ Though Harvey is listed among these twenty-eight individuals, his work is dealt with in less than six short pages, in which the focus of the text ranges from the initial contribution of the forceps by the Chamberlen family, and the work of Harvey's personal friend Percivall Willughby, leaving little room to discuss Harvey's own research. See Spencer, p.1-6.

only to male-led practice. A direct successor to Spencer's work, *Historical Review of British Obstetrics and Gynaecology* (1954) brought together the work of a number of authors from clinical practice to create a sequel, both honouring his contributions to medical history and obstetric practice.³¹ Their work, however, picked up where he left off; documenting the progression of medical management from 1800, up to 1950, and did not revisit any of the conclusions drawn by Spencer himself on the seventeenth and eighteenth centuries.

The more recent research of historians including Jean Donnison, Jean Towler and Joan Bramhall, Hilary Marland and Adrian Wilson have brought the subject under scrutiny in ways that are more detailed than those methods used by their predecessors. These authors have asked a plethora of questions about midwifery of the past, including who midwives were, what was required of them in terms of skills and experience, as well as what their place in society might have been. Donnison's *Midwives and Medical Men* (1977) takes a comparative view of how childbirth had been managed by gendered groups of practitioners throughout history. Beginning with the seventeenth century, she traces the progress of male professional interests in childbirth through to their domination of the birthing medical market, and the re-emergence of female-led midwifery leading up to the establishment of the Midwives Act in 1902, which provided legislation for regulating midwifery as a recognised profession.³² As one of the early products of social and cultural history turning towards women specifically, Donnison's text is useful in terms of detailed information in relation to the history of legal, economic, medical and ecclesiastical influences on the midwifery trade. As a product of its time, her research offered subsequent generations of medical and gender historians much to build upon.

Audrey Eccles contributed to these discussions in 1982 with her text *Obstetrics and Gynaecology in Tudor and Stuart England*. A slim volume with little in the way of an introduction or a conclusion, the book is primarily focused on how published childbirth manuals presented practical information on a range

³¹ J. M. Munro Kerr, R. W. Johnstone, Miles H. Phillips, *Historical Review of British Obstetrics and Gynaecology* (Edinburgh and London: E. & S. Livingstone, 1954) p.viii.

³² Donnison, p.176-77.

of topics including childbirth in published medical texts prior to 1740, female sexuality, reproductive anatomy, gynaecology, conception, gestational growth, pregnancy care, fertility and contraception as well as deliveries and their complications. These topics are all touched upon in short summaries in the interests of presenting a broad coverage of information rather than developed for very detailed studies, but the final chapter, ‘Two Centuries of Obstetric Change Reviewed’, makes some useful remarks, most poignantly that ‘[h]istorians such as Aveling and Spencer in their anxiety to give credit where credit was due [had] tended to minimise and underestimate the role of the patient in obstetric development,’ that pre-empted the future of reproductive historical studies as they later developed.³³

While medical historians were developing the history of reproductive history in leaps and bounds, literary scholar Robert A. Erikson makes the key observation in his book chapter, “‘The books of generation’”: some observations on the style of the English midwife books 1671-1764’, published the same year as Eccles’s text, that ‘British midwife books, from the sixteenth to the mid eighteenth century, ha[d] been undeservedly neglected by the student of literature’.³⁴ Some slippage exists in the essay between Erikson’s discussion of midwifery texts as ‘English’, or ‘British’, the consistent use of the term ‘British midwifery’ rather than ‘English’ would have been more appropriate to Erikson’s analysis given his use of the works of Scottish man-midwife James McMath and Irish practitioner James Wolveridge as well as English medical professionals. Where McMath published in Edinburgh, Wolveridge opted to send his text ‘over the impetuous waves of the Irish Seas’ to London rather than Dublin.³⁵ Even though Erikson’s chronology covers only as far as the publication of all three volumes of William Smellie’s obstetric guidance, his research revealed the significant potential for other perspectives to be introduced and applied to eighteenth-century reproductive health history as a whole in order to further develop

³³ Audrey Eccles, *Obstetrics and Gynaecology in Tudor and Stuart England* (Kent: The Kent State University Press, 1982) p.119.

³⁴ Robert A. Erikson, “‘The books of generation’”: some observations on the style of the English midwife books 1671-1764’, *Sexuality in Eighteenth-Century Britain*, ed. Paul-Gabriel Boucé (Manchester: Manchester University Press, 1982) pp.74-94, p.74.

³⁵ James Wolveridge, ‘The Author to the Reader’, *Speculum matricis hybernicum, or, The Irish midwives handmaid* (London: E. Okes, 1670) n.p.

modern understandings of the changing worlds of the eighteenth-century medical and print markets. In staking his claim to the subject, Erikson explicitly outlines that, even in working with medical books, his ‘main subject in th[e] paper is not medical history’, and while he hopes there would be sufficient overlap to be of some use to medical historians, his key interest lies in ‘the style and language of selected midwife books, and the attitudes toward “Man”, women, sex and the midwife book itself embodied in this language’.³⁶ This thesis takes its approach, in part, from Erikson’s having introduced literary methodologies to midwifery texts and looks at how both medical and literary writings understood and negotiated changes in reproductive medical care.

In 1986 Jean Towler and Joan Bramhall maintained the traditional focus on practice rather than midwifery writing and publishing, viewing the history of midwifery through a distinctly feminist lens in their *Midwives in History and Society*. These authors focus solely on women’s history and the efforts of female practitioners to work against ‘the potential demise of the midwife’ through opportunities for education, training and raising their political presence as a professional group.³⁷ Beginning with early history and biblical recordings of midwives’ roles, Towler and Bramhall’s study travels up to the modern day, concluding with developments in 1980s practice. Early modern and eighteenth-century midwifery cultures are captured in three chapters, covering early publishing, training and licensing, alongside the increased interest of male medical professionals in childbirth, technological advancements and the advent of hospital care for maternity purposes. The book does not attempt to delve into the written works of individual female practitioners in any depth, referencing the works and practise of Jane Sharp, Elizabeth Cellier, Elizabeth Nihell and Sarah Stone but sparingly and, if anything, makes more of male contributions to practice development than those from women. The closing line of the text, ‘To womankind the midwife is irreplaceable. Midwives [...] *Quo Vadis?*’ is both a bold claim and a call to arms.³⁸ The proclaimed ‘irreplaceability’ of such a female-centric profession stakes its claim in the

³⁶ Erikson, p.75

³⁷ Jean Towler and Joan Bramhall, *Midwives in History and Society* (1986) (London: Croom Helm, 1988) p. ix.

³⁸ Towler and Bramhall, p.301.

importance of women's place in medical practise for the immediate and long-term future, based on the historical roots discussed earlier in the texts. 'Quo Vadis?' deliberately posed as a question, challenges female practitioners, rather than historians, of the late-twentieth century to open up their minds and utilise their skills to extend the remit and expertise of midwives further than their predecessors have been able to exert their influence. In the same year, another monograph presented an alternative perspective through which to examine childbirth in the eighteenth century. Judith Schneid Lewis's *In the Family Way: Childbearing in the British Aristocracy, 1760-1820* (1986) considered the extent to which patients played a role in shaping medical cultures surrounding childbirth during the period. Her conclusions make clear a belief that the aristocratic population contributed significantly, as patients, to the development of maternity medicine. About the latter half of the eighteenth century Schneid Lewis comments, 'new notions of motherhood depleted the symbolic richness of childbirth. Birth was no longer the end of a process, the culmination of an effort: it was now the beginning.'³⁹ This reconfiguration caused ripples beyond simply changing how mothers faced birth as a rite of passage, albeit now a medical one, and introduced the perspectives of a range of individuals whose roles and perspectives on the subject of birthing, its associated practices and cultures, had gone largely unacknowledged.

Shortly after Lewis's work was published, encouraging researchers to take risks in thinking about the history of midwifery in new and original ways, Roy Porter contributed a chapter to a collection which he edited alongside George Rousseau, *Sexual Underworlds of the Enlightenment* (1987). Porter's work steers away from charting the progress male midwifery and the decline of female midwifery, pulling back what he termed to be 'the veneer of respectability' on male-led practice.⁴⁰ 'A touch of danger: The man-midwife as sexual predator' questions the complex codes attached to the new ways of handling childbirth in society. His concluding lines reads '[w]hether or not there was truth in the allegations...of sexual goings-on between fine ladies and man-midwives, well might the rise of the man-midwife have left

³⁹ Judith Schneid Lewis, *In the Family Way: Childbearing in the British Aristocracy, 1760-1820* (New Brunswick: Rutgers University Press, 1986) p.225.

⁴⁰ Roy Porter, 'A touch of danger: The man-midwife as sexual predator', *Sexual Underworlds of the Enlightenment*, ed. George S. Rousseau and Roy Porter (Manchester: Manchester University Press, 1987) pp.206-233, p.208.

husbands feeling dubious about the part they were prepared to play in helping to conceal the fruits of adultery. The enduring role of the doctor as the ambivalent ally of wives in their manoeuvres against their spouses had obviously begun.’⁴¹ Though the severe language of the final sentence is perhaps suggestive of a more calculated set of decisions than was actually the case, Porter’s work began to look beyond patients or even practitioners, and towards other associated groups, in this case fathers and male medical professionals. Brian McCrea claims that eighteenth-century literature depicted a ‘demographic crisis’ during the late seventeenth and early eighteenth century, with men failing to produce male heirs in order to satisfy old traditions of inheritance through primogeniture.⁴² With this in mind, themes of sexual virility and patrilineal authority were questioned in new ways, with the added concern of how men should be involved and demonstrate authority where procreation was concerned. Chapter Five addresses questions surrounding this transition during the eighteenth century and looks more closely at how literary author Laurence Sterne perceived the uncertainties which came with these changes to be a source of simultaneous anxiety and comedy.

With an increasing number of stakeholders identified as having interests in birthing during the eighteenth century, and a range of new dimensions brought by historians, this slowly expanding corpus of criticism on childbirth turned towards broader, more imaginative themes and concepts. As a result, the final decade of the twentieth century brought a more intense concentration on probing the possibilities of reproductive medical history, and sought to capitalise on the finding by earlier historians more quickly than had been known before. The range and diversity of themes that now emerged broadened out the spectrum of possibilities in terms of what could be learned from birthing manuals of the past. Though not an actual study of midwifery itself, Thomas Laqueur’s *Making Sex: Body and Gender from the Greeks to Freud*, first published in 1990, holds its roots of origin in the author’s early explorations of ‘seventeenth-

⁴¹ Porter, p.224.

⁴² Brian McCrea, *Impotent Fathers: Patriarchy and Demographic Crisis in the Eighteenth-Century British Novel* (Cranbury, London and Ontario: University of Delaware Press, 1998) p.15.

century midwifery manuals—in search of materials on how birth was organized [sic].⁴³ Laqueur's examination of the links and separation of concepts of sex and gender and, more specifically, ideas of one and two-sex models of conceiving gender in its physiological forms, utilises a number of midwifery manuals and other treatises based on reproduction. Works by practitioners including Nicholas Culpeper, Francois Mauriceau, Jane Sharp and William Smellie all feature in his work, but are worked into a wider consideration of understandings of sex and gender across the time period of four centuries. He postulated

what we call sex and gender were in the “one-sex model” explicitly bound up in a circle of meanings from which to escape to a supposed biological substrate—the strategy of the Enlightenment—was impossible. In the world of one sex, it was precisely when talk seemed to be most directly about the biology of two sexes that it was most embedded in the politics of gender, in culture. To be a man or a woman was to hold a social rank, a place in society, to assume a cultural role, not to *be* organically one or the other of two incommensurable sexes. Sex before the seventeenth century, in other words, was still a sociological and not an ontological category.⁴⁴

Laqueur's views have attracted significant amounts of attention, generating much comment and debate from historians, whether to agree with or challenge his views. For example, Michael Stolberg's 2003 article 'A Woman Down to Her Bones: The Anatomy of Sexual Difference in the Sixteenth and Early Seventeenth Centuries', opposes Laqueur's view directly and argues for the acknowledgment of science which delved into sexual difference before the dates that Laqueur focused on. Stolberg looks first to knowledge about human skeleton structures and the differences between gendered bone structure as it was known in the early sixteenth century, before moving on to written works which examined physiological genital features of men and women. His findings in this section, from as early as 1603, assert that 'sexual difference was not just a theoretical issue. It also possessed great practical relevance.'⁴⁵ Stolberg's final area of analysis, changes in the increasingly professional medical world of academic input and a growing professional industry, though perhaps more generalised and broad-brush than his earlier line of argument, does indicate that there may have been many reasons for practitioners to point to the female body as

⁴³ Thomas Laqueur, *Making Sex: Body and Gender from the Greeks to Freud* (1990) (Cambridge and London: Harvard University Press, 1992) p. vii.

⁴⁴ Laqueur, p.8.

⁴⁵ Michael Stolberg, 'A Woman Down to Her Bones: The Anatomy of Sexual Difference in the Sixteenth and Early Seventeenth Centuries', *Isis*, Vol. 94, No. 2 (June 2003), pp. 274-299, p.289.

entirely different to that of the male. His arguments, while working with early modern sources, are supported by ideas which he traces back to Galenic and Hippocratic theory, and seek to discredit the cleanness of the lines with which Laqueur drew up the one-sex model. He did so by highlighting that complex debates and speculations about the relationship between the formation of male and female bodies had long been using essential differences in women's anatomy, such as the structure of the pelvis, as part of medical commentaries.

Laqueur responded to this in writing, producing a follow-up article to Stolberg's answer to his monograph. Among his opening claims is the statement that he and Stolberg 'do not differ about the existence of claims for sexual dimorphism before the eighteenth century or about the rejection by earlier anatomists of what I construe as anatomical evidence for the one-sex model'.⁴⁶ Instead, he remarks, that the case to be considered is one of majority-minority, insofar as the one-sex model was not an exclusive one and that 'scientific theories, much less worldviews, do not change because of a few facts that do not seem to fit'.⁴⁷ In essence, Laqueur, presenting his argument as a meaningful engagement with Stolberg's reasons for disagreement, maintained a firm position that dimorphist beliefs about sex were exceptions to the general rule of the one-sex model in early modern medicine and broader society. In 2013 Helen King, a well-established historian of women's health medicine further responded to perspectives offered by both Stolberg and Laqueur by publishing *The One-Sex Body on Trial: The Classical and Early Modern Evidence*. The premise of her research was based on re-examining classical sources that formed early modern thinking on sex, gender and reproduction, building specifically on Stolberg's explanation that 'there was already a broad movement toward a much more explicit sexual dimorphism that encompassed skeletal and sexual anatomy' by the sixteenth century.⁴⁸ In essence, this means that any key shift away from a one-sex model was not initiated during enlightenment cultures of the eighteenth century. King traces a history of the reception of *Making Sex*, recording where the book was well received, as well as

⁴⁶ Thomas Laqueur, 'Sex in the Flesh', *Isis*, Vol. 94, No. 2 (June 2003), pp. 300-306, p.300.

⁴⁷ Laqueur (2003), p.306.

⁴⁸ Stolberg, p.276.

where it faced opposition, before exploring Galenic ideas from which, King claims, a one-sex model emerged. She goes on to cross-examine Laqueur's work through the use of two particular classical narratives. The first, she explains, is that of the Hippocratic case study of Phaethousa, a woman who was perceived to have potentially changed gender after the cessation of her menses for a significant period of time.⁴⁹ The second is that of Agnodice, a young woman who employed cross-dressing techniques in order to access formal medical training, before then revealing her true gender to female patients as a means of developing trust in her work on women's ailments specifically.⁵⁰ First concentrating on each woman's physiological body as evidence of their gender, each also constituted a direct challenge to cultural perceptions of gender as it was constructed by their contemporaries. Furthermore, the story of Agnodice also highlights the role in which narratives of reading women's bodies as patients were inextricably linked to their ability to read their own bodies, thereby simultaneously constituting the patient and the practitioner. King's work reveals how, whether correct or not, Laqueur's work alongside her own, has exposed the full complexity of decoding understandings of gender and, by extension, reproduction throughout history.

In the time that these important, if slightly slow-growing debates were developed over a period of almost twenty years, the progression of the history of midwifery did not stop in its tracks. In between these contributions from Laqueur, Stolberg and King, outputs continued to accumulate from scholars interested in reproduction and in how medical practice itself had been subject to change and development. In 1993, Hilary Marland returned the focus of research to the core theme of midwifery itself, bringing together eight historians, alongside herself to produce an edited collection, *The Art of Midwifery*. In seeking to make a new contribution to medical-historical studies, the book widens the objectives of midwifery history, 'challeng[ing] some of the long-held beliefs about midwives, their lives, work, social

⁴⁹ Helen King, *The One-Sex Body on Trial: The Classical and Early Modern Evidence* (2013) (Abingdon and New York: Routledge, 2016) p.19.

⁵⁰ King, p.22.

standing and place in public life'.⁵¹ In addition to bringing new dimensions to midwifery studies, Marland's edited volume also takes a diverse view with respect to the geographical coverage achieved by its authors, 'covering England, Germany, Holland, France, Italy and Spain'.⁵² An essay offered by David Harley, for example, continues to highlight the increase in male professional attendances at births, claiming that '[t]he women's space of the elaborate lying-in ritual [of the recent past], governed by the midwife and excluding the husband, had no place in the companionate home of the Enlightenment'.⁵³ When focusing on a previously made point in relation to cultures of medical practice, Harley draws attention to two important factors that had not previously received any level of in-depth consideration: the prevalence of rural locations to midwifery studies, and changes in domestic cultures that had a direct impact on the decision-making conducted by families in relation to birth attendance. In unveiling these points through individual essays, Marland observes the diversity that was apparent in early modern midwifery practice by practitioner and location, as well as the difficulties historians have faced in attempting to depict fully the world of the individual midwife, due to an enormous range of variables affecting their experiences. She is at pains to stress 'the need for wariness in approaching midwifery history from the standpoint of a contest, in which the midwife was ultimately the loser, between female and male obstetric practitioners'.⁵⁴ This warning was accompanied by an opening up of other key contexts that Marland and her fellow contributors saw as relevant to compiling a more accurate and fruitful depiction of midwifery of the past. As well as listing 'shifting social, economic, political and religious forces' that still required further exploration in relation to female midwives, Marland leaves her readers with one final thought-provoking remark in her introduction. Early modern midwifery, she summarises, was 'rich and diverse; the midwife remained throughout the period, the normal attendant in childbirth, and yet her role was much wider. Nor was the midwife a passive victim of events; she

⁵¹ Hilary Marland, *The Art of Midwifery: Early Modern Midwives in Europe* (London and New York: Routledge, 1993) p.1.

⁵² Marland, p.1.

⁵³ David Harley, 'Provincial midwives in England: Lancashire and Cheshire, 1660-1760', *The Art of Midwifery: Early Modern Midwives in Europe*, ed. Hilary Marland (London and New York: Routledge, 1993) pp.27-48, p.43.

⁵⁴ Marland, p.4.

adapted, [and] fought back'.⁵⁵ Even today, her words ring with the suggestion of agency on the part of female practitioners, an area of study that remains largely neglected by historians and literary critics alike. Chapters Two and Three in particular examine the contribution that women have made to medicine, and specifically midwifery.

In 1995 two monographs were published, both of which attempted to delve deeper into the subject of reproduction in the eighteenth century. One focused on midwifery as a profession, the other extended Laqueur's application of knowledge about the medicalization of childbirth into a wider 'survey...of the codification of sexuality' between 1650 and 1950.⁵⁶ Adrian Wilson's *The Making of Man-Midwifery: Childbirth in England 1660-1770* remains the best-known and most commonly cited book of recent times on the subject of the medicalization of childbirth. His chief motivation for attempting to rebuild the past of midwifery and the ways in which male professional interest impacted on how the birthing market changed, he explains, is 'a profound sense of puzzlement and surprise at the eighteenth-century transformation of midwifery from a female sphere to a central part of male medicine'.⁵⁷ Unlike Donnison, Towler and Bramhall, Marland or even Aveling, his focus moves away from female-led midwifery altogether.

Wilson's study offers a comprehensive account of the role of numerous individual men, and groups, who made significant contributions to the absorption of birthing practices into academic medical research and practice. Unlike the works of his predecessors, Wilson takes a different approach, if one more akin to that of Spencer than other historians. This focus upon male-led practice is aimed at answering questions such as

⁵⁵ Marland, p.7, 8.

⁵⁶ Roy Porter and Lesley Hall, *The Facts of Life: The Creation of Sexual Knowledge in Britain, 1650-1950* (New Haven and London: Yale University Press, 1995) p.4.

⁵⁷ Adrian Wilson, *The Making of Man-Midwifery: Childbirth in England 1660-1770* (London: UCL Press, 1995) p.2. Wilson has continued to build upon his contribution to the history of the rise of the man-midwife, this time exploring the social aspects of childbirth management. Less angled at the history of midwifery itself, *Ritual and Conflict: The Social Relations of Childbirth in Early Modern England* (2013) specifically works towards understanding the 'social relations of seventeenth-century childbirth: that is, the network of associated relationships, institutions and customs'. See Adrian Wilson, *Ritual and Conflict: The Social Relations of Childbirth in Early Modern England* (2013) (Abingdon and New York: Routledge, 2016) p.2.

How had [male-led practice] come about? Why did women desert the traditional midwife? How was it that a domain of female control and collective solidarity became instead a region of male medical practice? Why did a torrent of criticisms directed against “male-midwives” fall upon deaf ears? What was the relation between the new male knowledge and the new male practice? What had broken down the barrier that had formerly excluded the male practitioner from the management of birth? Was this a sudden development, or a gradual one; a matter of insidious growth, or a series of distinct steps?⁵⁸

Wilson was not the only historian who had been required to grapple with the idea of a binary gender-model of progress, moving from female-led dominance of the midwifery market to any sort of invasion of this territory on the part of male medical professionals. Like Marland, Lianne McTavish, in her textual and visual exploration of the history of childbirth in France, is also quick to respond that relations between female midwives and male physicians and surgeons in Europe cannot be summarised simply as an outright case of ‘gender war’.⁵⁹ In line with the growing belief that changes in the landscape of the medical birthing assistance market were more nuanced than this, Wilson’s research contributes a more complex answer to the questions he posed in his introduction. Though he initially concedes that by mid-century ‘the female midwife had lost her former monopoly’, he quickly follows this up by highlighting the continued presence of women practitioners by claiming that, even at that stage, ‘the rivalry between them [and man-midwives] had only just begun’.⁶⁰ Ultimately, Wilson suggests that the real victor in a changing world was ‘industrial capitalism’ and that rivalry, though producing the decline of female-led midwifery up until 1902, was not purely formed on the basis of gendered practice.⁶¹ He also refers to the diversity of medical backgrounds of a range of well-known man-midwives, including as ‘apothecaries (Smellie), surgeons (Bamber), and physicians (Manningham)’, which brought with it inherent tensions with other groups, such as the London College of Physicians.⁶² Rather than signifying an outright dispute among historians, these comments offered by Wilson, McTavish and Grundy indicate a consensus that it would be insufficient to continue to characterise the history of midwifery as a war of attrition between

⁵⁸ Wilson, p.2.

⁵⁹ Lianne McTavish, *Childbirth and the Display of Authority in Early Modern France* (Aldershot: Ashgate Publishing, 2005) p.145.

⁶⁰ Wilson, p.199.

⁶¹ Wilson, p.205.

⁶² Wilson, p.200.

gendered groups of practitioners. Their comments make the poignant suggestion that the ramifications of changes in obstetric practice was wider than the growing involvement of male practitioners, to the point of complete professionalization. Work on women's practice specifically is also lacking, meaning that there are further conclusions to be drawn. My approach seeks to answer to this demand, placing not just women's midwifery practice but also their writing and publishing into its rightful place in the history of midwifery.

Responding directly to Wilson's work, Isobel Grundy, while crediting Wilson implicitly with having explored new ground in midwifery studies, also counters that his research did not break the mould of looking at midwifery through the lens of gender dominance. Grundy labels his analysis to be 'symptomatic' of the trend that had gone before him.⁶³ Her article 'Sarah Stone: Enlightenment Midwife', published in the same year as Wilson's monograph, draws on his earlier preparatory research to reveal that the growth and development of midwifery publishing was not an exclusively male matter. Grundy distanced herself from focusing on male-led practice and opened up a new avenue, considering the role of female-led practice and publishing in its own right through an examination of Stone's *A Complete Practice of Midwifery* (1737). Her concluding line reveals much about work remaining in order to fully understand midwifery in the eighteenth century: '[w]e shall improve our present understanding of the Enlightenment, as it did historically occur, when we recognize [sic] the complexities which have been concealed by gendering it male'.⁶⁴ More in line with Erikson than other predecessors including Wilson, Grundy contributes that women practitioners were not simply hands-on attendants, and men the developers of a new science. Focusing on Sarah Stone's authorship of a set of case histories, Grundy's article emphasises the need to look at women's innovations and works relating to how childbirth changed in the eyes of the public. This thesis takes a number of cues from Grundy's suggestion. Although the works of male medical professionals are accounted for here, Chapters Two and Three draw together the

⁶³ Isobel Grundy, 'Sarah Stone: Enlightenment Midwife', *Medicine in the Enlightenment*, ed. Roy Porter (Amsterdam: Rodopi, 1995) pp.128-144, p.128.

⁶⁴ Grundy, p.142.

history of women's proactive engagement with medical publishing, particularly their own written contributions and the ways in which they self-fashion their authorial identities and narratives. Furthermore, Grundy, like Erikson, directs historians towards considering the validity of literary methodologies for reading midwifery manuals.⁶⁵ Medical interpretations of maternity were formed on the pages of printed literature of multiple genres. This thesis takes literary analysis a step further in the context of reproductive medicine. Just as medical literature employed literary devices and rhetoric, literary texts also asked questions about medical issues and referred to scientific language and terminologies, examples of which will be considered in the following chapters.

In the same year that Wilson published *The Making of Man-midwifery*, another book was released that took the alternative perspective on midwifery, turning to the broader applications of knowledge about reproduction and midwifery on other areas of medical, cultural and literary history. Positioned specifically in the study of the history of sex, Roy Porter and Lesley Hall's *The Facts of Life: The Creation of Sexual Knowledge in Britain, 1650-1950* (1995) created 'the first scholarly survey of the rise of English-language treatises of sexual knowledge and guidance, and it closely scrutinizes teachings about sexual functions and disorders, physical and moral tenets about sexual activity, prescribed and proscribed coital positions, and views about sexual pleasures and proprieties'.⁶⁶ Though choosing the same date range as Laqueur, Porter and Hall differentiate their study considerably from constructs such as the one-sex model, choosing instead to concentrate on the text-based interpretation and dissemination of information relating to sexual guidance rather than how gender was interpreted within these types of sources. These authors bring together the numerous motivations of both writers and readers for engaging with such an ambiguous yet attractive subject in terms of the multiplicity of themes that could be discussed in sex manuals and medical texts. These two genres, though potentially overlapping in significant ways, are distinct from one another. Where reproductive medical texts tended to address specific health problems and issues ranging from conception and infertility through to delivery and the

⁶⁵ Grundy, p.131.

⁶⁶ Porter and Hall, p.3.

care of infants, sex manuals and guidance materials took a wider view of information related to sexuality, focusing on developing successful marital relationships which would likely include producing healthy offspring.

Part One of this two-part book focuses on writings ‘from the Restoration to the [a]ccession of Queen Victoria’, making medical advice around reproduction and childbirth a central concern for these authors.⁶⁷ They first consider the ‘most successful primer in English’ for the provision of sexual information to be *Aristotle’s Master-Piece*.⁶⁸ If any text might be considered to have taken on multiple personalities, *Aristotle’s Master-Piece* could most certainly be it. Its authorship consisted of a quagmire of uncertainties, its sources unclear, and its lifespan and impact unknown. Despite these formidable obstacles, the product of which is to open up at least as many questions as are answered, Porter and Hall succeeded in generating many useful observations as well as a publishing record of the text in its various forms. Similar to the work of these two authors, my own research looks at English texts, with Appendix A accounting for books published on the British print market in the vernacular as well as other languages. I have chosen to exclude *Aristotle’s Master-Piece* as an obstetric text, however, for three reasons. First, because its content is orientated towards sex guidance rather than childbirth per se, but also because it is impossible to characterise the book as an original contribution to obstetric medicine between 1540 and 1799. Common consensus among historians, including Porter and Hall, accepts that a proportion of the information contained within the book has its origins in older material, including ‘[s]egments of the sexual doctrines of Greek and Roman physicians and philosophers’ mediated through ‘encyclopaedic texts [from] the Middle Ages, and [texts occasioned by] Renaissance humanism’.⁶⁹ Third, Porter and Hall’s publication history of *Aristotle’s Masterpiece* is an excellent source of information, representing a good amount of what is known about the text, as well as what remains unknown. These authors provide

⁶⁷ Porter and Hall, p.14.

⁶⁸ Porter and Hall, p.36.

⁶⁹ Porter and Hall, p.36.

thorough information about the different versions of the text that were made available to the public which needs no replicating here.

In addition to a detailed analysis of *Aristotle's Master-Piece*, Porter and Hall also look at the sex advice in Nicolas Venette's *Tableau de l'amour humain considéré dans l'état du mariage* (1686), known later in English print under various titles including *Conjugal love, or, The pleasures of the marriage bed* (1744). Venette's text, though referring to conception and reproduction, was ultimately one of the best-selling sex manuals of its time alongside *Aristotle's Master-Piece* despite its reliance on similar classical and medieval sources. Their narrative concerning the rise of sexology, partly because of these publications, ensured that they also covered prevalent issues of concern in historical sex commentaries of the seventeenth and eighteenth centuries such as masturbation, known in the context of an unproductive use of seminal fluid as '*Onanism*'.⁷⁰ Porter and Hall acknowledge that theirs is a vast undertaking, and that due to the inevitable breadth and depth associated with uncovering different types of sexual knowledge during the Enlightenment and beyond, they were not able to cover the full scope of what was offered in medical manuals of the period. To a degree, *The Facts of Life* constitutes the other side of one research coin, endeavouring to look at sexual activity and how knowledge about sex as both a social and medical issue appeared in published print, including the clear references to fertility in sex manuals. My own research takes its lead from Porter and Hall's approach, picking up at the point of conception and considering how pregnancy and reproduction were understood and represented in published print.

Philip K. Wilson's five-volume edited collection *Childbirth: Changing Ideas and Practices* (1996), compiled with co-editors Charles R. King and Ann Dally, examines developments on both sides of the Atlantic. The primary objective of these authors is organisational, bringing together and 'provid[ing] readers with key primary sources and exemplary historiographical approaches through which they can more fully appreciate a variety of themes in British and American childbirth, midwifery, and

⁷⁰ Porter and Hall, p.96.

obstetrics'.⁷¹ This impetus for compiling the collection as a whole was, unlike many other examples discussed here, was 'bringing together key articles illuminating a number of issues from different perspectives that have long concerned the expectant mother and the attendants of her delivery regarding the health of the newborn infant'.⁷² Wilson's reference to 'key articles' is not restricted to contemporary scholarship and his volumes encompass both '[p]rimary and secondary sources [that] have been culled from British and American publications that focus on childbirth practices over the past three hundred years'.⁷³ Clear from the outset is the need for parameters to Wilson's attempt, particularly given its vast chronology and scope in terms of the type of writing included in the collection. Notable exclusions which Wilson himself points to include abortion. While other matters he indicates touching on, such as 'the legal issues surrounding childbirth' are largely out of the scope of this thesis, or are touched upon in connection with other themes, abortion itself is a central concern in Part Three. When considering how reproduction was managed in a period of change and uncertainty it is essential to look not only at what was being assimilated into legitimate medical practice in public, but also what was excluded and left to the shadows of pseudo-medical guesswork and quackery. Despite being one of the longest publications for its multi-volume length, Wilson's text is less cited than others within the field today. It may be that in his aim to appeal to multiple disciplines 'including history, women's studies, human biology, sociology, and anthropology', historians are not those who have benefitted most from the collection. Alternatively, it may have been the birth of digital humanities and the advent of primary and secondary resource databases making access to these collected publications easier in their original forms that somewhat eclipsed Wilson's careful compilation. The need to bring so many disparate sources together in text form was no longer as urgent after the late 1990s as access to the internet grew among institutions and personal users. Around this time, digital humanities experienced a 'coming of age' and a fashion for digitisation projects

⁷¹ Philip K. Wilson, Charles R. King and Ann Dally, 'Midwifery Theory and Practice', *Childbirth: Changing Ideas and Practices*, 5 Vols (New York: Garland Publishing, 1996), i, x.

⁷² Wilson, p. x.

⁷³ Wilson, p. x.

increased access not only to primary source material that might otherwise have been lost, but also to older scholarship, much like some of the criticism recovered and republished by Wilson.⁷⁴

Whether or not digital humanities had such an immediate and impactful effect on the history of midwifery beyond this is unclear, but as Doreen Evenden's research makes clear, the archives still had a considerable amount to contribute to shaping and altering the history of midwifery. In 2000, Evenden published an archival study of London midwives of the seventeenth century, delving further into the experiences of female practitioners in the metropolis than others before her had dared go. Challenging long-held stereotypes that early modern midwives were 'ignorant, incompetent, and poor', her use of historical records concerning ecclesiastical and medical licensing and personal documents referring to apprenticeship training and broader practice meant that Evenden has been able to find that the opposite was in fact true.⁷⁵ Given their proactive engagement with training, willingness to bear the expenses associated with licensing, as well as their organisation of themselves into a network for purposes of hierarchical support, midwives, Evenden corrects, were 'respected and acclaimed for their expertise not only by their clients, but by members of their parish communities, both rich and poor'.⁷⁶ Having been able to identify some rare examples of midwives who sought out ways to become more advanced in their work, such as the case of Elizabeth Francis who successfully applied in 1690 for a license that would permit her to practise in surgery as well as midwifery, Evenden points out that, though this would not be a typical request, '[p]erhaps if more women had been afforded the opportunity to train in both fields, the history of obstetrics would have been written in a completely different way'.⁷⁷

⁷⁴ Dene Grigar, 'Electronic Literature and digital humanities: Opportunities for practice, scholarship and teaching', *Doing Digital Humanities: Practice, Training, Research*, eds. Constance Crompton, Richard J Lane and Ray Siemens (London and New York: Routledge, 2016) pp.193-6, p.193.

⁷⁵ In doing so, she particularly objected to the use of male-authored sources such as Percivall Willughby's *Observations in Midwifery* to understand women's experiences in these roles. *Observations in Midwifery* was published in part, in Holland in 1754 but originally a manuscript record of Willughby's own experiences as a practitioner, it did not reach print in its entirety until Henry Blenkinsop produced an edited version in 1863. Doreen Evenden, *The Midwives of Seventeenth-Century London* (Cambridge: Cambridge University Press, 2000) p.1.

⁷⁶ Evenden, p.177.

⁷⁷ Evenden, p.185.

Further remaining on the themes of professionalism and competency, in 2001 *Body Talk: Rhetoric, Technology, Reproduction*, a volume of essays aimed at those researching human or social sciences and gender studies, contained an essay by a then-doctoral student Janette Herrle-Fanning arguing ‘that the female body bec[ame] a site for the production of professional identity by the practitioner-authors of midwifery publications’.⁷⁸ Where Grundy attempts to underline the presence of at least one female practitioner-author during the eighteenth century, the potential for this research to expand has not been met by any outpouring of works from other historians with interests in medicine or literature. Herrle-Fanning’s essay, however, draw attention to another midwife’s written work, as well as Stone’s *A Complete Practice of Midwifery*. Where Stone had been a midwife working in the early to mid-century, Martha Mears was a midwife from a later time writing and practicing sixty years later. Her midwifery text *The Pupil of Nature* (1797), which will be examined in Chapter Three, attracted Herrle-Fanning’s notice for what, she claims, was increased passivity on the part of the female midwives as the ‘encroachment of male practitioners’ had only grown. Where Herrle-Fanning uses Mears’s work as an isolated example of late eighteenth century women’s midwifery authorship, my own approach will be to contextualise Mears’s authorial voice with other women publishing in the field around the same time. Though Herrle-Fanning mentions seventeenth-century midwives who had published their own texts (see Chapter Two), she does not mention the presence of another three publishing female midwives throughout the eighteenth century: Elizabeth Nihell, Margaret Stephen and the elusive Mrs. Wright, which Chapter Three will discuss in full.

In 2001, Elaine Hobby published the first edited version of the first British female-authored midwifery manual since the period itself. Jane Sharp’s *The Midwives Book* (1671) represents a landmark in the history of reproductive medicine and, and as will be seen in Chapters One and Two, the new establishment of an authoritative female voice in childbirth as part of a wider medical science of

⁷⁸ Janette Herrle-Fanning ‘Figuring the Reproductive Woman: The Construction of Professional Identity in Eighteenth-Century British Midwifery Texts’, *Body Talk: Rhetoric, Technology, Reproduction*, ed. Mary M. Lay, Laura J. Gurak, Clare Gravon and Cynthia Myntti (Wisconsin: University of Wisconsin Press, 2000) pp.29-48, p.29.

reproduction. Hobby's skilful editing, resulting in the introduction of Sharp's work to new audiences, opened up discussions among historians over differences between male and female obstetric authorship, referred to in Chapters Two and Three of this thesis, as well as posing other questions such as who in fact this midwife, for whom few biographical details remain, might have been. Caroline Bicks and Katherine Phelps Walsh are chief among those for whom Sharp's midwifery manual became attractive in its new edited form. New questions about a previously neglected group of practitioner-authors now emerged. Bicks's article, published in 2007, 'Stones like Women's Paps: Revising Gender in Jane Sharp's "Midwives Book"' interpret Sharp's work as an 'intervention into the rhetorical constructions of gender and patriarchy in the early modern period', renegotiating the terms of language and the representation of women's bodies on the page on her own terms.⁷⁹ Conversely, Phelps Walsh sees something different in the significance of the identity of the author of *The Midwives Book*. Where Hobby defines Sharp to be 'one of a group of women who occupied an extraordinary position in early modern Britain', Phelps Walsh questions everything about Sharp, including her gender, suggesting that 'the author may have been a man writing under a female pseudonym'.⁸⁰ Though the rhetoric of the text would seem to suggest otherwise, as does the claim to being a 'Practitioner in the Art of Midwifery above thirty years' in a period during which male practitioner did not attend normal deliveries, the change in direction and pace in debates about midwives and written texts is nonetheless a refreshing one as historians and literary critics alike have sought to be less risk-averse, posing new challenges to the material in front of them.⁸¹

The success of *The Midwives Book* as a research project and publication further led Hobby to continue her work within the field, editing a version of Thomas Raynalde's *The Birth of Mankind, Otherwise Named, The Woman's Book* (2009). This time, opting to take a text produced by a male author, Hobby takes readers back to the very beginning of obstetric writing in English print. Again, increased

⁷⁹ Caroline Bicks, 'Stones Like Women's Paps: Revising Gender in Jane Sharp's Midwives Book', *Journal for Early Modern Cultural Studies*, Vol. 7, No. 2 (2007) pp. 1-27. p.3.

⁸⁰ Elaine Hobby, 'Introduction' in Jane Sharp, *The Midwives Book: Or the Whole Art of Midwifry Discovered*, (Oxford: Oxford University Press, 1999) p. xi; Katherine Phelps Walsh, 'Marketing Midwives in Seventeenth-Century London: A Re-examination of Jane Sharp's *The Midwives Book*', *Gender & History*, Vol.26, No.2 (August 2014) pp. 223-41, p. 224.

⁸¹ Sharp, title page.

accessibility to primary texts with informed annotations has increased scholarly access to these sources, and has advanced the types of questions being asked about them. Following Hobby's edition of *The Midwives Book*, Mary Fissell moved the conversation on, no longer focusing only on what medical writers said, but how they did so, and to what response in *Vernacular Bodies: The Politics of Reproduction in Early Modern England* (2004). Fissell's research moves away from considering medical texts in isolation, particularly those published in Latin about which she claims '[v]ery few English men and even fewer women ever read a Latin anatomical text'.⁸² Her idea that public and personal ideas around the body were not only influenced by medical publishing of the period, which could be expensive, but also by the fact that 'almost everyone encountered models of the body in the ballads, jokes, religious works, and popular medical works' of the period.⁸³ Her renegotiation of the types of source material constituted an important broadening out of the types of text that can be utilised for patterns of cultural interpretation of changing scientific and medical practices. Fissell's own selection of suitable genres and individual texts was borne out of her focus on an earlier chronology than my own, moving from the Reformation to the Restoration, and so in extending this to the eighteenth century, my own research brings together medical texts, largely written in the vernacular, with the most popular literary vehicles of the period, prose fiction and poetry.

Moving further still into the analysis of changing medical concepts and ideas through published texts, Ernelle Fife's 'Gender and professionalism in eighteenth-century midwifery' (2004) continues the work begun by Erikson and Grundy, developed by Hobby, in the close reading of midwifery manuals. Her work takes a comparative view, considering 'two texts written by women, Jane Sharp and Sarah Stone, and three by men, William Smellie, William Hunter, and Thomas Denman'.⁸⁴ For Fife, women's written contributions represent the early stages of obstetric professionalization, before changes to the

⁸² Mary E. Fissell, *Vernacular Bodies: The Politics of Reproduction in Early Modern England* (2004) (Oxford: Oxford University Press, 2006) p.2.

⁸³ Fissell, p.1-2.

⁸⁴ Ernelle Fife, 'Gender and professionalism in eighteenth-century midwifery', *Women's Writing*, Vol.11, No.2, (2004) pp.185-200, p.186.

management of childbirth ‘replace[d] empathy with scientific professionalism’.⁸⁵ The works of Smellie, Hunter and Denman, therefore, represent the roles of male medical professionals as modernisers, favouring quantitative, empirical methods of analysis over qualitative personal observations relating to each patient’s case. Her research offers a range of valuable observations about variations in style employed by male and female practitioners respectively, and these will be explored in full in connection with women’s authorship of midwifery in Chapter Three. However, it is also important to note that the demarcations between male and female practice are not so clear-cut as they might appear in this article. Stone was by no means the last woman to write and publish a midwifery text, nor was Smellie the first man. As Appendix A evidences, the lines of transition to a more scientific model of practice were not a simple matter of a handover signalling the end of women’s leadership of birthing support and the beginning of the male medical professional intervening in the process. This blurring of lines between different models of practice and ideas for progress among groups of practitioners was considerably more complex and requires further thought, particularly where women midwives and their written works were concerned.

An outstanding contribution to the history of midwifery since the millennium has been Lisa Cody’s *Birthing the Nation: Sex, Science and the Conception of Eighteenth-Century Britons* (2005). Cody’s book looks at public thought on the subject of reproductive science in the context of the formation of national identity during the period. Her research begins to bridge the gap between traditions of accounting for midwifery in terms of its core characteristics through the century, and other cultural developments of the period. Extending outwards into both the seventeenth and nineteenth centuries as part of her research, Cody’s discussions include events such as the Seven Years War, the flight of James II and the introduction of the 1834 New Poor Law to develop a full image of the factors at play in the society which saw man-midwives recognised as the leading authority on health during pregnancy and birth for the first time, and also experienced ‘male anxiety about lacking or losing patriarchal control over

⁸⁵ Fife, p.198.

households and bodies'.⁸⁶ Cody's offering reveals that the transitions being made in the world of medical professionalism were much more than a set of discrete changes affecting only women's lying-in periods. These significant alterations in medical culture saw their impact far beyond the enclosed, private spaces of birthing chambers, and this thesis aims to take forward these ideas of broader ramifications, seeking to understand how British people negotiated these new ideas through literature.

In addition to debating Laqueur's perspective on understandings of gender, Helen King also analysed sixteenth-century gynaecological and obstetric texts within and beyond midwifery. *Midwifery, Obstetrics and the Rise of Gynaecology: The Uses of a Sixteenth-Century Compendium* (2007) explores how subsequent generations of medical practitioners used various editions of the European *Gynaecorium Libri*, a text which brought together the works of a variety of early authors whose works addressed gynaecological and obstetric care, including Trotula, Ambroise Paré and Jacob Rueff.⁸⁷ Though concentrating on a text that was produced earlier than the period concerned in this thesis, and focusing on gynaecology as much, if not more than childbirth, King's work indicates a further shift towards more complex and advanced uses for early medical material, specifically in relation to how knowledge of matters related to childbirth were, in some cases, maintained and in others altered to suit an increasingly professional service market. Her chapters explore the continued use of the *gynaecorium libri* from the sixteenth through to the late nineteenth century, asking questions related to how such a medical text can take on a life of its own, beyond being important in its own time, because of the specific qualifications or reputation of its author. This is an important concept, particularly in relation to considering how published works contributed to public and private understandings of a blossoming discourse that had previously not existed in the form in which it began to present itself in the eighteenth century.

⁸⁶ Cody, p.87.

⁸⁷ Helen King, *Midwifery, Obstetrics and the Rise of Gynaecology: The Uses of a Sixteenth-Century Compendium* (2007) (Abingdon and New York: Routledge, 2016) p. 31, 3. In King's text the name 'Jacob Rueff' is written as 'Jakob Ruf'. Spellings vary by publication, however, my own choice has been made for purposes of consistency with how the name was presented in other contexts relative to this thesis.

Also in 2007, Eve Keller brought together her own past research on childbirth and reproductive medicine, publishing a full-length study, *Generating Bodies and Gendered Selves: The Rhetoric of Reproduction in Early Modern England*. Her approach continues to utilise literary methodologies to medical texts, as Erikson, Grundy and Fife had done, 'seeking in the rhetoric of bio-medical writing about reproduction the ideas about selfhood that come to animate the modern period'.⁸⁸ Earlier than my own period, Keller's research applies the same methods to the writings of individuals such as Helkiah Crooke and William Harvey. Her examination ends with an examination of birthing case history texts from authors including Edmund Chapman, Percivall Willughby and William Giffard. Keller completes this chapter with an analysis of Stone's midwifery manual. My own research takes an alternative focus, looking at the broader cultural management of reproduction in its increasingly professionalized contexts and begins at the point, in 1737, where Keller's ends.

Possibly the most significant offering in the context of seeking to stimulate further research and engagement with the history of midwifery in recent years has been Pam Lieske's major collection, *Eighteenth-Century British Midwifery* (2007-12).⁸⁹ Lieske offers a detailed insight into the burgeoning eighteenth-century midwifery industry through the only major edited collection containing facsimiles and extracts of a large number of original texts by both male and female midwifery practitioners in British midwifery. Like my own approach, her chronology gives some context which predates the century itself, drawing from texts written and published between 1651 and 1800. In some cases, Lieske has included texts that do not appear in the *English Short Title Catalogue* (ESTC), such as Christopher Kelly's *A course of lectures on midwifery* (1757) and Samuel Patterson's *A catalogue of the entire and inestimable apparatus for lectures in midwifery, contrived with consummate judgment, and executed with infinite*

⁸⁸ Eve Keller, *Generating Bodies and Gendered Selves: The Rhetoric of Reproduction in Early Modern England* (Washington DC: University of Washington Press, 2007) p.3.

⁸⁹ Pam Lieske, *Eighteenth-Century British Midwifery*, 12 Vols. (London: Pickering and Chatto, 2007-12).

labour, by the late ingenious Dr. William Smellie, deceased (1770).⁹⁰ As a publication, Lieske's research is a generous effort that will remain highly valued by medical historians for generations to come.

Most recently, Chris Galley and Robert Woods co-authored *Mrs Stone and Dr Smellie: Eighteenth-century midwives and their patients* (2014), with Galley completing the manuscript and seeing it to publication after Woods' death. The book takes the published case notes of both Stone and Smellie to consider in detail questions including 'how did midwives deliver women in the past? How did they cope with problems of unnatural presentations, haemorrhage, miscarriage and stillbirth? How was knowledge established, communicated and received? And, perhaps of greatest importance, was progress being made?' Though some of these questions had been touched upon in other studies, Galley and Woods stress the need for further close reading of sources that had only been mentioned briefly in broader historical studies of midwifery. No book-length project before theirs had brought case notes under such scrutiny, with a view to uncovering the same depth of information for which they aimed. Their conclusions are not drawn up along gendered lines with Sarah Stone and William Smellie representing opposite sides of debates about practice and methods. Instead, these two authors see Stone's practise as part of the effort to modernise and improve techniques and outcomes, as a result. '[T]he new obstetrics', they suggest, 'had a generally positive impact on mothers and their unborn children and that there were more 'Mrs Stones and Dr Smellies', with their superior delivery techniques based on sound principles, working at the end of the eighteenth century than there were at the beginning.'⁹¹

Critical Scholarship: Creating and Procreating Literature and Maternity

Whereas the history of midwifery is a fully-fledged and developed sub-field of medical history, the same cannot be said for the study of literature and reproduction. Although literary analyses of medical texts have slowly increased in number, an approach which has brought with it many benefits, the perception of birth as absent in literature is not uncommon and has been emphasised by Terri Coates. In

⁹⁰ These texts are included in Appendix A and are labelled as 'N/A' in fields pertaining to an ESTC number for these entries.

⁹¹ Robert Woods and Chris Galley, *Mrs Stone and Dr Smellie: Eighteenth-century Midwives and their Patients* (Liverpool: Liverpool University Press, 2014) p.459-60.

her article 'Impressions of the midwife in literature', Coates bemoans the fact that midwives are virtually non-existent in literary texts.⁹² As an interested party in the documentation of birth, her perspective implies a distinct lack of literary heritage for birth as part of narratives among previous generations of authors producing books. Tess Cosslett, on the other hand, examines how 'birth stories' have been depicted relatively recently by writers such as Doris Lessing and Enid Bagnold and attempts a 'recovery of maternal subjectivity' within their texts.⁹³ Her examination positions itself so as to highlight a conscious reclaiming of birth within twentieth-century literature. Ingrid von Rosenberg offers an argument somewhere between the two, reasoning that 'the birth process with the pains, the blood and the danger for life has apparently seemed less attractive to the male imagination', meaning that it less often appeared on the printed page than other, more attractive subjects.⁹⁴ While she points out that this absence is notable, her research also shows that a small proportion of contemporary male authors, focusing on the work of Toby Litt and Bernard McLaverty, have developed interesting examples of birth scenes.⁹⁵ Also, like Cosslett, she too identifies Bagnold as having been one of the earliest female writers to make childbirth explicit in fiction.⁹⁶ Bringing these perceptions together, any conclusions which might be drawn from the examples above, of Bagnold and Lessing as pioneers of writing childbirth into literature, would have to suggest, however, that the relationship between literary creativity and the subject of childbirth began in the early twentieth century.

Yet, over the last two decades, comparatively recently compared to studies in the history of midwifery such as those by Aveling and Spencer, these written works by Coates, Cosslett and von Rosenberg have been part of a movement which has seen an increasing number of publications have dealing with the relationship between human reproduction and literary production, particularly in the area

⁹² Since its publication, Coates' article is best known as a key source of literary inspiration that encouraged retired midwife Jennifer Worth to write her a best-selling memoir *Call the Midwife*, which was later turned into a hit television drama series. Terri Coates, 'Impressions of the midwife in literature', *RCM Midwives*, Vol.1, No.1 (1998) pp.21-22.

⁹³ Tess Cosslett, *Women writing childbirth* (Manchester: Manchester University Press, 1994) p.2.

⁹⁴ Ingrid von Rosenberg, 'Childbirth – Women's Very Own Topic? Imaginations of the Female Birth Experience in Male Authors' Novels', *Anglistik*, Vol. 24, No. 1 (2013) pp.19-28, p.19.

⁹⁵ von Rosenberg, p.21, 24.

⁹⁶ von Rosenberg, p.20.

of women's writing. Other authors including Tina Cassidy, Cristina Mazzoni, Sharon Ruston and Penny Sumner have each come up with ways of linking and negotiating the two processes of procreating and creativity.⁹⁷ The connections which these authors have identified are diverse and wide-ranging. For example, Alicia Ostriker, the author of *The Mother-Child Papers*, a collection of poems about her own experiences as a mother, a publication considered a feminist triumph, also makes a series of critical feminist comments regarding the presence, or absence, of motherhood as a sense of identity within the writing community.⁹⁸ In 1983, she opened her analysis of writing and motherhood with the statement '[t]hat women should have babies rather than books is the considered opinion of Western civilization. That women should have books is a variation on that theme.'⁹⁹ While Ostriker's analysis of the contemporary marketplace for literary arts demonstrates how modern women have been considered to have a choice to make, there is the additional possibility that they can become accomplished in both areas, employing their own maternal experiences, as well as maternity as a wider theme, in order to develop a distinct identity through their written works.

In a choice between babies or books, this third option of both may appear to hold any appealing answer. Women's writing about maternity has appeared to have emerged from a story of modern social liberation through feminist movements and, as Sumner suggests, 'now that the woman is an artist herself (as if she hadn't always been)', implying that the professional creativity of women writers has only recently been recognised when compared to a reality whereby women have been making creative contributions to literature for far longer, and that maternity as a subject was part of these offerings.¹⁰⁰ With this claim in mind, it is easily possible that the place of childbirth in literature prior to 1900 has not been considered fully and requires further examination, particularly with reference to women's writing.

⁹⁷ Tina Cassidy, *Birth: A History* (2006) (London: Chatto & Windus, 2007); Cristina Mazzoni, *Maternal impressions: pregnancy and childbirth in literature and theory* (Ithaca: Cornell University Press, 2002); Sharon Ruston, *Creating Romanticism* (Houndmills; Palgrave, 2013); Penny Sumner, *The Fruits of Labour: Creativity, Self-Expression and Motherhood* (London: The Women's Press, 2001).

⁹⁸ See Alicia Suskin Ostriker, *The Mother-Child Papers* (1980) (Pittsburgh: University of Pittsburgh Press, 2009).

⁹⁹ Alicia Ostriker, 'A Wild Surmise: Motherhood and Poetry', *Mother Reader: Essential Literature on Motherhood*, ed. Moyra Davey (New York: Seven Stories, 2001) pp.155-160, p.155.

¹⁰⁰ Sumner, p. ix.

Contributions from male authors also need examining to in order to argue holistically for any literary tradition surrounding the subject of reproduction that may have existed.

Barbara Korte has made the most admirable attempt to date of charting the progress of the increasing appearance of childbirth as a literary theme from the seventeenth up to the twentieth century, explaining how ‘novels [and poetry] have...served as sources for historical and anthropological investigations of birth customs’.¹⁰¹ Specifically with regard to eighteenth-century literature, Korte lists a number of texts that discuss birth in greater and lesser ways; Anne Bradstreet’s ‘Before the Birth of One of Her Children’ (1678), Daniel Defoe’s *Moll Flanders* (1722) and *Roxana* (1724), Samuel Richardson’s *Pamela; or, Virtue Rewarded* (1740), Henry Fielding’s *The History of Tom Jones, a Foundling* (1749) and Laurence Sterne’s *The Life and Opinions of Tristram Shandy, Gentleman* (1759-68).¹⁰² This list provides an excellent and necessary set of signposts to potential sources which reveal the history of birth in literature, yet Korte’s work represents the start rather than the end of a full history of procreation in creative contexts.

Four years before Korte’s article was published, and four years after his own first foray into analysing midwifery manuals as literary sources, Robert A. Erikson extended his research on birth into literary fiction texts as well as medical genres as, he claimed, ‘[a]lthough much literary criticism ha[d] been written about “rebirth” and “deliverance”, very little ha[d] been written about birth itself and its impact on human experience in literature’.¹⁰³ *Mother Midnight: Birth, Sex and Fate in Eighteenth-Century Fiction (Defoe, Richardson and Sterne)* (1986) applies Erikson’s learning on midwifery manuals, using broadly the same timeframe as his earlier article had, ‘1660 to 1760 in England from the genesis of three important books on midwifery by Sharp, Sermon, and Wolveridge to the publication of the first volumes of *Tristram Shandy*’.¹⁰⁴ This was the first occasion upon which literary and medical sources had

¹⁰¹ Barbara Korte, “‘In Sorrow Thou Shalt Bring Forth Children’: On Childbirth in Literature”, *Orbis Litterarum*, 45 (1990) pp. 3-48, p.31.

¹⁰² Korte, p.32-3.

¹⁰³ Robert A. Erikson, *Mother Midnight: Birth, Sex and Fate in Eighteenth-Century Fiction (Defoe, Richardson and Sterne)* (1986) p. xi.

¹⁰⁴ Erikson, p.x-xi.

been brought together in this type of analysis in eighteenth-century studies, where midwifery texts and novels containing plots concerning reproduction were examined alongside one another. Erikson's key theme is the role of fate within these selected texts, but the role of the midwife, particularly the 'Mother Midnight' figure. His introductory comments note that 'the midwife of the seventeenth and eighteenth centuries was, in life and literature a figure who carried with her a complex of possible associations linked to but going beyond her role in childbirth'.¹⁰⁵ Building on Erikson's findings that literary authors engaged with new and emerging ideas relating to childbirth during the period, Though I continue to consider the possibilities of what Sterne's text, as well as another of his works *A Sentimental Journey through France and Italy* (1768), captured about cultures and ambiguities around the involvement of a range of different individuals in childbirth, Defoe's works sit outside of the chronology defined within this thesis, which begins six years after Defoe's death on 24th April 1731, and have not selected Richardson as one of my own case studies. Since Erikson's having published *Mother Midnight*, Lois Chaber and Elizabeth Ruth Raisanen have also worked on childbirth within Richardson's writing, which complement this analysis and do not require repetition.¹⁰⁶

Departing further from Erikson's methodological choices, I have also avoided selecting literature that was written exclusively by either male or female writers. As there has been no women's writing project or publication devoted entirely to the representation of childbirth in eighteenth-century literature, and Erikson started with the works of male authors, more of the literary sources which demand analysis in this thesis are those that were written by women, but I do not exclude the work of male authors. Literary critics have increasingly moved trends in scholarship towards considering the works of women authors alongside those of their male counterparts. As Catherine Gallagher suggests, increases in female authorship throughout the eighteenth century did not signify the beginning of 'their belong[ing] to a

¹⁰⁵ Erikson, p.3.

¹⁰⁶ Lois Chaber, "'This Affecting Subject": An "Interested" Reading of Childbearing in Two Novels by Samuel Richardson', *Eighteenth-Century Fiction*, Vol. 8, No. 2 (January 1996) pp. 193-250; Elizabeth Ruth Raisanen, 'Literary Gestations: Giving Birth to Writing, 1722-1831' (Ph.D. Thesis: University of California, 2013).

separate tradition’, but rather the generation of a new tradition within the print market altogether.¹⁰⁷ Patricia Meyer Spacks, who also resists the habits and omissions of previous generations, ‘treat[s] male and female novelists as members of the same species’.¹⁰⁸ Her negotiation of two previously disparate populations of writers provides a more realistic and complete view of the eighteenth-century print market, particularly in relation to the novel. In line with these views from Gallagher and Spacks it is, therefore, just as important to consider the contributions of male authors alongside their female counterparts to literary representations of maternity and childbearing.

Taking a different type of literary case study, Tristanne Connolly and Steve Clark both contributed essays on birth in the context of poetry to a volume they edited together, *Liberating Medicine 1720-1835* (2009). Where Clark opted to consider the influence of Thomas Gray’s writing, specifically his ‘Elegy Written in a Country Churchyard’ (1751) on Anna Letitia Barbauld’s ‘To a Little Invisible Being who is Expected Soon to Become Visible’ (1799), Connolly revisits the question of authorial voice in Barbauld’s poem, and questions ‘who could claim authority to write about maternity’ during the period, an issue that, as she claims, ‘was struggled over in the medical sphere’ as much as the literary one.¹⁰⁹ By looking closely at the poem, Connolly identifies both its ‘unusual intimacy’, as Barbauld wrote the poem for a friend, and Barbauld’s position, like female medical author Martha Mears, ‘mediat[ing] between patient and medical establishment’.¹¹⁰

Raymond Stephanson and Darren Wagner also produced an edited collection of their own, *The Secrets of Generation: Reproduction in the Long Eighteenth Century* (2015), this time making the reproduction the subject of the whole volume. A full and detailed offering of twenty-two essays was aimed at a number of different academic audiences including those involved in ‘medical history, art

¹⁰⁷ Catherine Gallagher, *Nobody’s Story: The Vanishing Acts of Women Writers in the Marketplace 1670-1820* (1994) (Berkeley: University of California Press, 1995) p. xv.

¹⁰⁸ Patricia Meyer Spacks, *Novel Beginnings: Experiments in Eighteenth-Century English Fiction* (New Haven: Yale University Press, 2006) p.5.

¹⁰⁹ Tristanne Connolly, ‘Anna Barbauld’s “To a Little Invisible Being...”: Maternity in Poetry and Medicine’, *Liberating Medicine 1720-1835*, eds. Tristanne Connolly and Steve Clark (London: Pickering & Chatto, 2009) pp. 209-24, p.209.

¹¹⁰ Connolly, p.224.

history, biomedicine, literary history, sex and gender, culture and the body, medical humanities, reproductive science [and] social anthropology'.¹¹¹ Theories of conception and gestation, attitudes and depictions of incest, violence in relation to reproduction, disability and the formation of the maternal and infant body, maternal (ill)health, breastfeeding, male reproductive health, legitimacy and foundlings are all subjects up for discussion among the essays offered by individual authors.

In August 2017, Jenifer Buckley published an excellent monograph exploring one specific area of crossover between reproduction and literary production during the eighteenth century. Buckley employs medical and literary texts to demonstrate that a specific cross-genre discourse existed around the concept of 'maternal imagination' that had developed by the early eighteenth century, yet had all but disappeared one hundred years later. Her aim throughout this intriguing tracing of history is 'to clarify the different ways in which maternal imagination was understood over the course of the eighteenth century and how it effected major developments in medical, social and artistic culture'¹¹². Her contribution to interdisciplinary studies which draw on both historical and literary approaches to reproductive medicine is a significant step towards constructing a new cultural history of childbirth in the eighteenth century, one which accounts for the full array of influences affecting the professionalization of obstetric medicine including patients, practitioners and the print market.

Chapter Summary

'Managing Maternity' is made up of three parts, Part One (Chapters One to Three) relates to medical writing, considering the changes and distinct characteristics of published advice and guidance on childbirth offered mainly by practitioners, but occasionally patients also. Chapter One of this thesis, 'Breeding Books': Readers and Writers of Reproductive Medical Literature', identifies the place of midwifery manuals in the published print market, particularly those written by women that have gone neglected as a small but important collective of the total number published during the eighteenth century.

¹¹¹ Stephanson and Wagner, p.3.

¹¹² Jenifer Buckley, *Gender, Pregnancy and Power in Eighteenth-Century Literature: The Maternal Imagination* (Basingstoke: Palgrave Macmillan, 2017) p.25.

This chapter takes on a range of questions, including who these manuals may have been written for and to what purpose, and also examines data gathered in Appendix A, ‘Obstetric Publishing in the British Isles 1540-1799’, attempting to take a more detailed look at the publication history of obstetric medical advice and guidance than has previously been undertaken.

Chapter Two, ‘Early Women’s Medical Writing’ questions whether, for female author-practitioners, there was a distinct heritage of medical publishing to which they could refer and base their new writings on about childbirth. Chapter Three, “‘To take up the pen for public perusal’”: Narrative, Metadiscourse and Literary Engagement in Women’s Reproductive Writing’, focuses on medical literature itself and the emergence of a low level of female authorship in the market for midwifery manuals. Although the practice of midwifery had belonged to women for centuries, male practitioner-authors increasingly dominated published print on the subject.

The work of female midwives publishing between 1737 and 1798 will be used to demonstrate how women writers used alternative styles of rhetoric and expression to make a significant offering to reproductive medicine by producing an alternative model of scientific discourse to those used by many man-midwives and other male medical professionals writing and publishing during the period. Personal storytelling, anecdotal evidence and direct engagement with other types of literary material were important features of these texts, as well as being integral to these authors’ methods of disseminating valuable information with regard to reproductive health. Female midwives publishing between these dates were Sarah Stone, Elizabeth Nihell, Margaret Stephen, Martha Mears and Mrs. Wright, all of whose works will be examined within this chapter.

Part Two (Chapters Four and Five) examines literary depictions of childbirth through literary poetry and prose. Of the two chapters, one offers the work of a woman writer, the other a man, one focused on personal maternal experience during pregnancy, childbirth and early motherhood, the other concerned about social anxieties that came with the professionalization of obstetrics. Chapter Four, ‘[Pro]Creative Experience in the Poetry of Jane Cave Winscom’, examines the work of one of the early female writers to develop not just one poem, but a small collection, of poems based on her own early

experiences of maternity and apprehensions about childbirth itself. An author who is only now emerging into critical notice, Winscom's poems offer a series of candid and creative insights into that, as we have seen, was so often assumed to have been out of bounds for literary authors.

Following on from this, Chapter Five, "Slow steps of casual increase," examines the slightly later Laurence Sterne's *The Life and Opinions of Tristram Shandy, Gentleman*, first published in 1759, and considers male interactions with the processes of gestation and birth both in terms of medical practice and paternity. Fatherhood constituted an unsettled issue throughout the eighteenth century. As well as demonstrating their ability to conceive, men's role and involvement with pregnant and birthing women was subject to a new set of questions and uncertainties, a result of the increased involvement of male medical practitioners in health during pregnancy and deliveries. Although it would be centuries before the place of fathers in the delivery room was confirmed, both the importance of patrilineal inheritance and the place of husbands as involved with their wives' choice of birth attendant and care were topical issues of the period. This meant that problematic paternity and births were well-established literary tropes by the mid-century and held considerable value for both writers to use for comical, as well as deeper, effect when addressing questions around the place of men in society and in the household. Sterne's characters Walter Shandy, Dr. Slop and Uncle Toby provide caricatures for the uncertainties experienced by men, both as practitioners and members of a household, as conventions of social conduct surrounding birth changed due to the increasing involvement of surgeons and physicians in events that occurred within the lying-in chamber.

Having considered the depiction of how men and women, both as authors and characters, engage with reproduction as a physiological and domestic occurrence, as well as managing reproduction as a literary theme and plot device, Part Three (Chapters Six and Seven) uses both medical and literary sources to explore the darker, under-investigated historical subject of abortion. Chapter Six, "A damnable remedy": Abortifacients in Eighteenth-Century Medical Literature', analyses what can be found out from medical writings and domestic books about abortion through abortifacient preparations and how medical practitioners responded to an area that they were unable to embrace as part of their profession,

but on occasion raised as part of their written discourse. Building on Chapter Six, Chapter Seven “‘The dreadful potion’”: Abortion in the Novel’, considers abortion further, in the context of literary representations of a range of difficulties experienced by women during pregnancy, both social and economic, leading to abortion. I have selected two case studies, Phebe Gibbes’ *The Life and Adventures of Mr Francis Clive* (1764) and Mary Wollstonecraft’s *Maria, or the Wrongs of Woman* (1798) that provide explicit narratives about the consumption of these types of remedy, and the powerful responses of individual women who found it necessary to do so.

Each chapter contained within this thesis is intended to reflect specific literary themes and genres which were influenced by change in reproductive medical discourses throughout the long eighteenth century. These themes of maternity, and in some cases the personal experiences of authors both male and female, were part of new developments within the print market. Together with the emergence of the novel, the rise of women’s authorship and dramatic increases in medical publishing, particularly with regard to obstetric professionalization, created a changing landscape for both authors and readers throughout the eighteenth century. The wide representation of individual writers becoming involved in discussions about reproduction through published print indicates that questions about the management of maternity were not to be left to the medical professions alone. The lay public, being more interested stakeholders in health development than ever, both responded to and helped to shape the management of maternity for the present and the future.

Part One

Chapter One

'Breeding Books': Readers and Writers of Reproductive Medical Literature

Introduction

The place of midwifery treatises in the world of publishing might be labelled as somewhat anomalous. Not considered to be part of the male-dominated academic study of medicine until the mid-eighteenth century, nor unskilled enough to constitute unqualified 'quack' practise, the place of midwifery itself raises many questions about where books on the practices of childbirth might have belonged. 'Indeed,' Kirstin Collins Hanley explains, 'manuals on midwifery are tricky textual artifacts, with slippage from expectant mother to a more tight-knit professional network as the intended audience for the text.'¹ This chapter questions who the earliest reproductive medical texts were aimed at, before looking more closely at medical authors' ideas of readership and whether their visions of who their texts were intended to reach were realistically fulfilled. In addition, I will also consider how these readerships changed over time, moving from an audience largely made up of midwives and increasingly man-midwives during the late seventeenth and early eighteenth centuries, to appealing to the wider lay public in the later eighteenth century. In focusing on these issues I will also explore the history of obstetric publishing in more detail, considering what can be learned from my own cataloguing of those midwifery texts which became available on the print market in Britain between the years 1540 and 1799.² Nicholas Culpeper's *Directory for Midwives* (1651) and Jane Sharp's *The Midwives Book* (1671) provide early examples of original midwifery treatises. Manuals from Nicolas Fonteyn and Richard Bunworth demonstrate the progression of the increasing professionalization of midwifery through appealing to male medical professionals. Tracing the development of the obstetric print market, contributions from Philip Thicknesse and Seguin Henry Jackson exhibit new narrative methods used by authors of texts on childbirth and associated

¹ Kirstin Collins Hanley, *Mary Wollstonecraft, Pedagogy, and the Practice of Feminism* (Abingdon and New York: Routledge, 2013) p.80.

² See Appendix A for full catalogue.

matters, inviting a new, public audience to share not only in receiving advice from practitioners, but also in the debates about emerging issues as stakeholders and consumers of midwifery services.

Writing for a Readership: Female Midwives

Whether by a male or female practitioner, just who were midwifery manuals written for? The answer to this question has the potential for either blunt simplicity or obscure complexity depending on the perspective employed. A simple, uncritical answer might say that midwives and man-midwives, or accoucheurs, wrote for their own professional circles. The targeting of this exclusive group, with authors writing for one another in the interests of improving practice, would not be an unreasonable or incorrect conclusion to reach and could be evidenced by the prefacing documents and early sections of numerous midwifery treatises. Jane Sharp certainly viewed her own midwifery text in this way, addressing '[t]he Midwives of England' directly in the introduction to *The Midwives Book*, further referring to them as 'Sisters'.³ Even though the book was published early in the period of transition for midwifery, in which professionalization occurred and male practitioners took an increasingly active interest in the events of birth, Sharp is clear that she does not perceive those male practitioners who were at that time taking an interest in midwifery to be part of her target audience. She explains her views on the importance of female midwives operating in a profession to which women are biologically predisposed and have a historical record of fulfilling:

It is commendable for men to imploy their spare time in some things of deeper Speculation than is required of the female sex; but the Art of *Midwifry* [sic] chiefly concern us, which, even the best Learned men will grant, yielding something of their own to us, when they are forced to borrow from us the very name they practise by, and to call themselves *Men-midwives*.⁴

Her use of the words 'us' and 'they' raises questions about ideas of the authorial audience in comparison to the actual audience for Sharp's book. 'Sisters' further implies that that the audience she intended the book for is made up exclusively of female readers and that male practitioners are in some

³ Sharp, front matter, address 'To the Midwives of England'.

⁴ Sharp, p.13.

way ‘others’ who do not participate in the reading experience. Though the number of years’ experience she claimed to have was significant to asserting her individual authority as a writer, this familial term used for other midwives rejects any sense of hierarchy in Sharp’s instruction. She introduces her guidance as a friendly, collegial discussion rather than an attempt to place herself atop a hierarchical pyramid of authority or seniority, instructing ignorant students.⁵ In reality, any claim that can be made about the reception of Sharp’s text as having attracted only women readers is not one which can be substantiated and is, in all likelihood, highly improbable at best, particularly given that male literacy rates were higher than women’s at the time, and that men’s professional medical curiosities had already been piqued by medical matters of childbirth. The fact that she ‘commends’ interested male parties at all suggests that she did not believe that her text would only be read by women, and that the point itself was political, made in the interests of being approving towards male physicians and surgeons developing a theoretical knowledge, but not a practical one. Sharp maintains an adamant stance that practice-based midwifery should remain within the domain of female professional expertise.

Her work offered the unique selling point of the writing of an English woman, able to speak with confidence and authority on the subject of her own profession, in vernacular print to male and female readers, which had never before been attempted. In this case the presentation of women’s authorship, and more importantly a female practitioner author, was essential for creating a new appeal for actual readers. For *The Midwives Book* this was the development of a strong woman’s speaking voice in the reader’s mind throughout the text. That the reader, whether an actual female midwife or not, should perceive a female narrative voice to be embedded in *The Midwives Book* was especially important in giving the book a sense of authority in terms of having been informed by the real-life practice of the author.

⁵ This narrative technique, aimed at attracting a female readership, does not reflect the real experience of midwives, particularly in urban centres. Doreen Evenden explains of London midwives that having worked with more experienced midwives was a regular part of midwives training and was referenced on a regular basis in licence applications. She explains that between 1661-1671, the decade leading up to Sharp’s publishing *The Midwives Book*, that ‘36% of the testimonials [submitted for licensing] indicate a relationship with at least one other experienced midwife’. See Evenden, p.62. As Sharp markets her own experience as being extensive, stretching over thirty years, this treatment of other midwives wanting to learn through reading as equals may be part of what made Sharp’s approach all the more interesting to readers who were female midwives.

For all that Sharp's female authorial voice was new to published print on midwifery in the late seventeenth century, the technique of appealing specifically to a women's readership was not without precedent. Twenty years earlier Culpeper's *A Directory for Midwives* had also been positioned on the medical print market so as to target women in the midwifery profession. As a male author, Culpeper addressed the text 'To the Midwives of England', shortly after referring to the women within this professional community as 'worthy matrons'.⁶ Though Culpeper could not claim the same proximity to female midwives as Sharp, nor the shared experience of having been among their 'sisterhood' as she does, he continues to refer to his female readers as being 'of the Number of those whom my Soul loveth, and of whom I make daily mention in my Prays [sic]', and to the existing systems of medicine as a means by which to 'uphold a company of lazy Doctors, most of whose *Covetousness* outweighs their *Wits* as much as a Millstone out-weighs a Feather?'⁷ His insistence on placing women at the centre of midwifery whilst taking the profession out of the world of female social support and placing it firmly within the scientific research was aligned to his political view about the institutionalisation of medical practice, which is further revealed within his text. Culpeper firmly believed that the public should be educated to self-medicate 'when they are sick, and have Herbs in their Garden conducing to their cure', to prevent them from being 'hood-winked' by male medical professionals.⁸

As his harsh words indicate, despite being himself a trading male medical professional though an apothecary rather than a physician or surgeon, Culpeper made no attempt to disguise or temper his criticisms. His inclusion of these outspoken comments might be considered especially bold at the point at which he was writing, particularly given that while Culpeper might have claimed that his text was intended to speak primarily to female midwives he was by no means blind to the interest that it was likely to generate from a professional male audience. Where his predecessors had made use of many apologies and apprehensions as part of their rhetorical strategies to make tentative steps towards discussing female

⁶ Nicholas Culpeper, *A Directory for Midwives: or, A guide for Women, in their Conception, Bearing, and Suckling their Children* (London: Peter Cole, 1651) p.2.

⁷ Culpeper, p.3.

⁸ Culpeper, p.3.

anatomy as Mary Fissell suggests, Culpeper ‘did not worry about male readers or about the improprieties of writing about the female body. He revelled in them.’⁹ His sense of enjoyment in attempting to empower the public through female midwives is palpable in a range of the statements directed at his intended reader. ‘This World [of medical hierarchy] will not last alwaies’, he reassures, before further promising that if a midwife deigns to make good use of his text ‘you will find your work easie, you need not call for the help of a Man-Midwife, which is a disparagement, not only to your selves, but also to your Profession’.¹⁰ His direct emphasis of women’s practical skills is intended to highlight the potential female practitioners had, if following detailed guidance and supplementing their experience with reading. By use of his book, he claims implicitly, female midwives will become a more knowledgeable and influential collective, without the need of male practitioner intervention that, he further suggests, is unnecessarily belittling to the practising female population. His words indicate that Culpeper was able to interpret and capitalise on a particular moment in time when female practitioners noticed the growing involvement of male medical professionals, creating uncertainty and a desire to retain their own place of professional authority against increasing competition.

Writing for a Readership: Male Medical Practitioners and the Development of Reproductive Medical Publishing

Even with his scathing criticisms of male-led practice, however, Culpeper’s explicit use of the term ‘Man-Midwife’ betrays his acute awareness of increasing market potential through the growing interests through professional networks and his familiarity with the medical business. With a lack of other texts or open sources of information that readily ventured into the unknown territory of practical midwifery, Culpeper took the opportunity to convey his political standpoint within a book that he knew would draw attention to itself by what it promised to offer. His criticisms were not restricted to the hierarchy and exclusivity of professional medical culture. Without a medical degree or membership of a

⁹ Mary Fissell, *Vernacular Bodies: The Politics of Reproduction in Early Modern England* (2004) (Oxford: Oxford University Press, 2006) p.22

¹⁰ Culpeper, p.3

professional body, Culpeper was not restricted in the same ways that physicians or surgeons were, particularly in the context of dissection. Though methodologies of dissection were emerging as a key means of investigating the functions of the human body, the professionalised medical world in the mid-seventeenth century still relied on animal dissection for information. To provide an example, famed physician William Harvey had used specimens of chicken and deer for his research into conception and pregnancy, leading to the production of his *Exercitationes de Generatione Animalium*, later known in its English-language version, first published in 1653 as *Anatomical exercitations, concerning the generation of living creatures: to which are added particular discourses, of births, and of conceptions, &c.* Jonathan Sawday stresses that '[t]he question of the status of the dead human body is a fraught one'.¹¹ During the late seventeenth century, though the concept of dissection was one for popular discussion, the legal restrictions on acquiring human samples for dissection remained a problem for medical professionals. Harvey's friend and colleague Percivall Willughby bemoaned the difficulties this caused when a clear view of a medical issue that had proved fatal could not be viewed clearly from the inside of the body. His complaint was

[i]n France and the Low Countries they have many privileges, and customes which we cannot obtain in England. They open dead bodies, without any mutterings of their friends. Should one of us desire such a thing, an odium of inhumane cruelty would bee upon us by the vulgar, and common people.¹²

Despite such limitations, Culpeper appears not to have been concerned with conforming to common practice, and dissected a gravid cadaver to enable him to see first-hand the growth and development of the human foetus. A copy of a sketch included in his *Directory for Midwives* is shown as Figure 1 below. About the experience he claimed, '[m]y self saw one woman opened that had died in Child-bed, not delivered, and that is more than most of our Dons have seen', stressing the unique nature

¹¹ Jonathan Sawday, *The Body Emblazoned: Dissection and the Human Body in Renaissance Culture* (1995) (London: Routledge, 1996) p.3.

¹² Percivall Willughby, *Observations in midwifery: as also The country midwives opusculum or vade mecum*, ed. Henry Blenkinsop (Warwick: H. T Cooke and Son, 1863) p.254.

of his work, above and beyond anything completed by physicians who significantly outranked his own position as an apothecary.¹³

Figure 1 – Culpeper’s sketch of the unborn foetus during a dissection, from *Directory for Midwives* (1651)¹⁴



Whether or not practitioners found his analysis of current medical provision by male-led practice insulting or not, or in fact his use of a gravid female cadaver, his text gave them the opportunity to develop their knowledge and possibly increase their profits by being able to provide their services to women as man-midwives. The success of the book in terms of the number of editions, twenty-three in the time period covered by Appendix A, if not more through prints for which we no longer have record, attests to the strong probability that female midwives were not the only ones purchasing copies.¹⁵

Culpeper’s text sold remarkably well, yet it did not have an immediate impact on popular medical practice in terms of jump-starting a publishing trend for producing treatises or manuals on reproductive medicine that one might expect to see in publishing histories.¹⁶ The long-term impact of a small number of practitioners writing about childbirth, however, was substantial. Table 1 summarises the data contained in Appendix A: Obstetric Publishing in the British Isles 1540-1799, separating the total number of texts

¹³ Nicholas Culpeper, *Directory for Midwives* (London: Peter Cole, 1651) unpaginated leaf between pages 40 – 41.

¹⁴ Culpeper, p.55-56.

¹⁵ See editions of Culpeper’s *A Directory for Midwives* in Appendix A.

¹⁶ See Appendix A for chronology of publications between 1651 and 1671.

published in each decade, from the total number of new and original texts appearing among those totals, beginning in the decade 1650-1659 when the first edition of Culpeper's text was published.

Table 1 – Obstetric Texts published between 1650 and 1799¹⁷

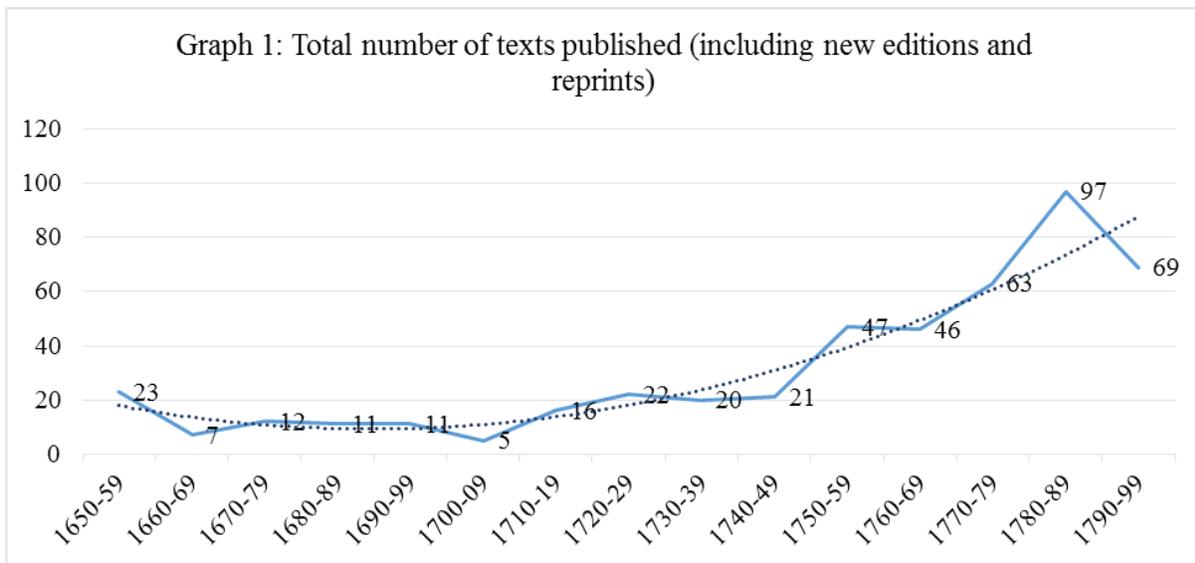
Decade	Total number of texts published (including new editions and reprints)	Total number of original texts published (including first prints of translated texts)
1650-1659	23	9
1660-1669	7	2
1670-1679	12	5
1680-1689	11	1
1690-1699	11	5
1700-1709	5	1
1710-1719	16	4
1720-1729	22	9
1730-1739	20	11
1740-1749	21	12
1750-1759	47	29
1760-1769	46	23
1770-1779	63	34
1780-1789	97	58
1790-1799	71	44

The overall pattern of production includes periods in which interest in obstetric writing, as measured by output, peaked and also experienced small declines at more than one point. The graph below presents the

¹⁷ See Appendix A: Obstetric Publishing in the British Isles 1540-1799: Rationale and Methodology, p.269.

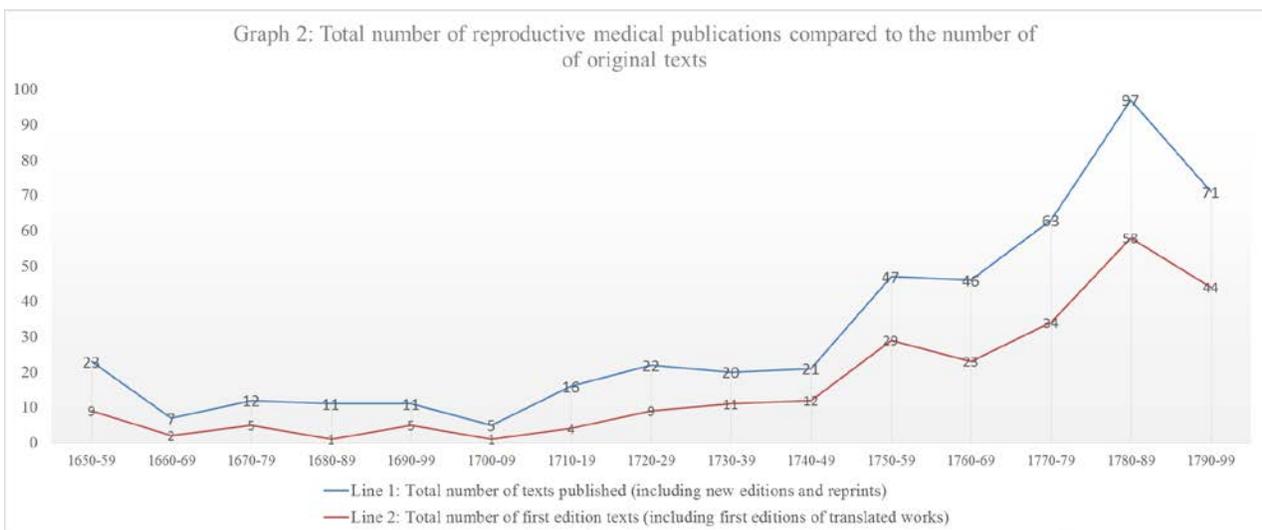
fluctuation of each decade shown by the solid line and numerical values displayed, in line with a broad trend line of increase represented by the dotted line. A straight increase in the actual number of publications is not shown. In addition to these peaks, Graph 1 also indicates that the decades 1660-1669, 1700-1709, 1730-1739 and 1790-1799 each represent decades that saw the publication of fewer obstetric texts than the previous decade. 1650-1659 was the period of time during which the highest number of publications was produced for the next one hundred years. It was not until the years 1750-1759 that a higher number of texts on reproductive health were published, and perhaps even the 1780s before midwifery was fully adopted as a medical discourse of its own, following over two centuries of gradually expanding interest. Following a levelling out of the rate of production of these types of text, the number of reproductive medical texts appearing on the market peaked in the 1780s. Whereas the reproductive medical publishing in early part of the eighteenth century was dominated by translations and subsequent editions of earlier texts, including numerous editions of Culpeper's book, the latter half of the century was characterised by a rapid expansion in the number of medical authors communicating new ideas through their own publications.

Graph 1 – Total number of texts published (including new editions and reprints)



Building on this information, Graph 2 below further reveals information contained in Appendix A, showing the number of original texts produced in each decade compared to the total number of texts produced. The definition of ‘original’ applied here is any reproductive medical text making its first appearance onto the print market, either as a first or only edition. By removing reprints of texts from these results, Line Two plotted on the graph gives a clearer indication of how new published outputs expanded dialogue about reproductive medicine, and the rate at which newly presented information became available.

Graph 2 – Total number of reproductive medical publications compared to the number of original texts



As the two lines show, although new texts do not consistently make up the majority of texts published in any decade, in fact it is rare that they do, the pattern of new texts published broadly mirrors publication trends of all texts, including reprints. The periods 1730-1739, 1750-1759 and 1770-1789 prove to have been particularly fruitful, with more first editions being published than reprints of older texts. Between the years 1760-1769 there was an exact even split, whereby half of the texts printed were new, and half were second or subsequent editions. From these publication trends, it is possible to look at not just the rate at which texts were produced, but the point at which they were published in relation to other texts and the growth of professional and public interests in themes of reproduction.

Taking a closer look at the decade in which Culpeper's text was published as an example, his was among nine original texts produced. This was the result of the potential market for midwifery manuals being, in reality, larger than texts such as Sharp's and Culpeper's had identified their respective readerships to be, and of the increased attention paid to midwifery by the male medical professions and their interests as readers, as well as by female midwives themselves. Two other original publications among these nine, Nicolaas Fonteyn's *The Womans Doctour* (1652) and Richard Bunworth's *The Doctresse* (1656) reveal further changing attitudes towards midwifery, indicating that male medical professionals were seeking opportunities to combine theory with practice, extending their experience beyond academic learning about reproduction and into practical experience within the lying-in chamber. In the preface to *The Womans Doctour* Fonteyn identified his book as a guide specifically intended for male practitioners through his narrative style. He opens with the line '[i]t is acknowledged by the most able Physitians [sic], that it requires great diligence, and Judgment to contrive an exact Partition, or Explanation of Women's Diseases'.¹⁸ Fonteyn's expression here implies the need for skill and intelligence in order to practise in women's health. His reflections, while suggesting that the information which he will share with readers is in some respect advanced, do not acknowledge female midwives as possessing the due 'diligence' or the decision-making abilities to successfully care for patients. He then progresses on to introduce his topic further with the belief that '[w]omen were made to stay at home, and to looke after Houshold employments, and because such business is accompanied with much ease, without any vehement stirrings of the body, therefore hath provident Nature assigned them their monethly Courses'.¹⁹ Instead of making a concerted effort to attract a female audience as Culpeper did, or even just female midwives specifically, Fonteyn puts considerable distance between his reader and the subject of his observations and expertise, women and their health. Throughout his text he continues to position

¹⁸ Nicolaas Fonteyn, *The Womans Doctour* (London: John Blague and Samuel Howes, 1652), unpaginated front matter, 'The Proem'.

¹⁹ Fonteyn, 'The Proem'.

male practitioners in a position of closeness, guiding them with references to ‘your Patient’ of ‘that Sex’.²⁰

When Bunworth, an author with both medical and religious interests and an advocate of the doctrine of signatures, the belief that plant material indicated its useful medicinal purpose through its physical appearance, published *The Doctresse* (1656) he ensured from the very first words of the book’s introduction that the reader was aware of his practical interests and experience.²¹ ‘Having continually experience in a more particular manner in those diseases which are peculiar to women’, he claims, was ‘by reason of my constant and daily employment, which is, to be assistant to those that have hard and difficult labours’.²² At lengths to emphasise his working involvement with childbirth, Bunworth immediately sets himself up as an active authority in the area of delivery practices before pointing out the complexity of cases he would have dealt with on a regular basis. Though he might be accused of exaggerating the difficulty of cases in order to suggest that his knowledge of birthing practices was as heightened as possible, his texts most likely represents his day-to-day role with reasonable accuracy. In keeping with those widespread cultural preferences relating to modesty and the gendered separation of health matters considered to be in any way intimate, Bunworth’s role would have been established by responding to the requests of midwives and families where a birth was thought to involve sufficient complication for the life of the infant, or more likely the mother, if not both, to be at risk. There were also occasions, even well into the eighteenth century, upon which delivery practices could rely on physical strength to such a degree that the practitioner risked exhaustion or injury. In cases where this was a reality

²⁰ Fonteyn, ‘The Proem’.

²¹ The term ‘doctrine of signatures’ denotes a common medieval and early modern belief that plant life with medicinal properties was intended, by its natural design and physical appearance, to indicate what of the part of the body the individual plant was effective in treating. One notable advocate of the doctrine was seventeenth-century botanist William Coles. His published text *Adam in Eden, or, Natures paradise the history of plants, fruits, herbs and flowers* (1657) explains that ‘[t]he Signatures likenesse [the appearance of the plant] are taken notice of, they being as it were the Books out of which the Ancients first learned the Vertues of Herbes; Nature or rather the God of nature, having stamped on divers of them legible Characters to discover their uses, though he hath left others also without any, that after he had shewed them the way, they by their labour and industry, which renders every thing more acceptable, might find out the rest, which they did not neglect, but prosecuted [sic] with extraordinary diligence, yet have they left sufficient Inquiries for succeeding Ages’. See William Coles, *Adam in Eden, or, Natures paradise the history of plants, fruits, herbs and flowers* (London: J. Streater, 1657) unpaginated section, ‘A Further Account, or short Explication of the Method used in the ensuing Work’.

²² Richard Bunworth, *The Doctresse* (London: J.F., 1656) p. A4.

female midwives had the option of requesting additional support from a local surgeon or physician.²³ Yet, for all the practical experience he may have brought to his written work where other male professionals in a comparable position had not, Bunworth's narrative method was opposed to that chosen by Culpeper, who was also experienced by virtue of his experimental dissection work, and strikingly similar to that which Fonteyn employed. He too chose to alienate a female readership by referring to 'the female sex' in the book's preface, as if women constituted a group that existed entirely outside of the author-reader relationship.²⁴ Sharp sensed these changes in professional attitudes among male practitioners and attempted to establish a firm case for women's practice to remain the dominating force of birth assistance in England during the late seventeenth century.

'By the 1690s', Mary Fissell claims, cultures surrounding maternity management had experienced a dramatic shift, and 'pregnancy was compared to a merchant voyage'.²⁵ This mercantile, business-like way of framing the matter of attending to childbirth in the late seventeenth century indicates the slow absorption of midwifery practices into medical care as an industry. Data from the table and graph shows that the decade she identifies, just before the turn of the century, maintained the same level of publishing output among medical authors as the previous two decades. The fact that these figures show a steady, if not large, set of additions to the growing corpus of obstetric publishing evidences sustained interest in reproduction as a medical theme, and was a sign of the further acceleration in the production of obstetric discourse that was to follow. Furthermore, when looking at where these texts came from, there is an equally steady increase in the number of new authors who added their guidance and perspectives for others to read, almost all of these by male authors. Apart from Jane Sharp's manual, the only other women whose works on midwifery were published in England prior to 1690 were French court midwife Louyse Bourgeois's 'Instructions of the *Midwife* of the Queen of *France* (given to her Daughter a little before her death) touching the practice of the said Art', a translated summary of her French publications,

²³ For further discussion of midwives' physical strength being used in deliveries, see Chapter Three on the practise of Sarah Stone and her narrative based on her own experience and case studies.

²⁴ Bunworth, p. A6

²⁵ Fissell, p.247.

included in Thomas Chamberlayne's *The compleat midwives practice* (1656), and Elizabeth Cellier's *To Dr. ----- an answer to his queries concerning the Colledg [sic] of Midwives* (1688), a text that will be examined in more detail in Chapter Two. With so few women contributors throughout the seventeenth century and so many male authors, Fissell further explains that a new perception arose about childbirth. 'No longer was pregnancy women's work', she observes, '[o]n the contrary, women were just the containers, loaded and unloaded by men.'²⁶

During the early eighteenth century, these male professional interests experienced further growth, though those men of privileged social and economic status who did attend university to obtain a medical degree still did not find gynaecological or obstetric practices included in their taught curricula. Ornella Moscucci explains that the first institution in the British Isles to include midwifery in its curriculum was Edinburgh University where the subject was offered as part of medical degrees from 1756 by a resident professor, Thomas Young.²⁷ Looking once again towards the numbers generated by publication data contained in Appendix A, this new provision of formalised education and the development of pedagogical approaches to midwifery by the university coincides with the rapid acceleration of obstetric texts appearing in print. The level of output by medical authors in relation to the medical management of childbirth more than doubled from one decade to the next. During the 1740s twenty-one texts were published, where in the 1750s this became forty-seven.

As teaching at Edinburgh only began in the middle of the decade, Appendix A also makes clear that this increase in writing and publishing activity was not a response to the university making changes in their medical curriculum: in fact the opposite appears to have been true, as most of the increase in published outputs came before 1755. In the first half of the decade 1750-1759 thirty-two of these forty-

²⁶ Fissell, p.248. Where Cellier's work will be explored in the next chapter, Bourgeois's work is slightly outside of the scope of this thesis which focuses on original works produced in Britain. It should be noted, however, that Bourgeois was in fact the first female midwife in Europe to produce a printed midwifery text, with the first of two texts published in 1609. For further information, see Wendy Perkins, *Midwifery and Medicine in Early Modern France: Louise Bourgeois* (Exeter: University of Exeter Press, 1996).

²⁷ Ornella Moscucci, *The Science of Woman: Gynaecology and Gender in England, 1800-1929* (1990) (Cambridge: Cambridge University Press, 1993) p.51.

seven publications were printed and sold, whereas in the latter half of the decade only fifteen were produced.²⁸ University education therefore appeared to be responding to an increased demand for insight into childbirth, rather than books emerging as a result of more advanced education. For a short period prior to Young's establishment of this new teaching, some male practitioners involved with advancements in maternity care and childbirth offered private courses of lectures. The first of these was advertised by a pamphlet, William Smellie's *Course of lectures upon midwifery*, given in 1742 in London.²⁹ These private providers continued to operate after 1756, making medical education regarding pregnancy and childbirth more accessible, particularly in London where medical academic education on childbirth was still not yet commonplace, and provided part of the impetus for the expanding print culture on reproductive science. Pamphlets such as John Leake's *A course of lectures on the theory and practice of midwifery* (1767), referring to his own delivery of teaching directed at birthing practices, were published and distributed in London. These types of obstetric publication reveal a continuing demand from local male practitioners to be taught the practical aspects of childbirth, allowing small private enterprises such as Leake's to fill a gap in the medical education market.³⁰

Writing for a Readership: Literacy and Access to Reading for Stakeholders of Reproductive Medicine

As written resources, it was necessary for *The Midwives Book, A Directory for Midwives* and indeed all other midwifery manuals written to assume some level of education, in the form of adequate reading skills, on the part of their audiences in order to impart knowledge. Before being able to make this leap between text-based marketing and readership, uncovering whether authorial visions of audience,

²⁸ See Appendix A.

²⁹ See Appendix A for the book's publication history.

³⁰ In terms of the professional reading markets Elizabeth Lane Furdell explains the impact of the development of publishing centres in London and the physical locations of many booksellers in relation to their potential readerships. Westminster Hall, she explains, had its own cluster of booksellers and stationers '[d]ue to its proximity to the courts' and, similarly, that part of the popular attraction to St. Paul's and Little Britain as sites for publishers to set up shop was their short distances to the Royal College of Physicians and St. Batholemew's Hospital and the Barber-Surgeons' College respectively. See Elizabeth Lane Furdell, *Publishing and Medicine in Early Modern England* (Rochester: University of Rochester Press, 2002) p.118, 120.

such as those provided by Sharp and Culpeper, particularly for female audiences, were at that time a feasible and realistic endeavour, we must be able to address whether literacy rates of the period made this possible. Though male medical professional audiences were increasingly educated academically in medicine at universities such as Edinburgh, and literacy presented no issue, the same assumptions are more difficult to make of those who did not receive this education, which was not open to women in particular, including female midwives.

As well as providing practical support to a woman in childbirth, midwives may have been required to, or at least found it useful to, employ their own literacy skills in a professional context for the purposes of managing a mother's case. In her investigation of women's work in eighteenth-century Edinburgh, Elizabeth Sanderson recounts the events of an illegitimate birth, whereby the letter-writing activities of a midwife became important to a divorce case. The letters of the midwife involved, named as forty-year old Mrs. Jean Jack, had been an essential part of arranging care for a new-born child whose father was keen to avoid the scandal of revealing an extramarital affair in his own home. Mrs. Jack's letters played a key role in seeking to manage the difficulties which later arose when the head of the household in which the child was being cared for, a Mr. Begg, demanded increasing amounts of money from the child's biological father, thereby evidencing the father's known connection with a child outside of his own marital home.³¹ Although seemingly outside of a midwife's core duties relating to hands-on support, in situations such as these there was a case to be made for midwives' further involvement with families where their sense of community responsibility could make significant contributions to social welfare. Their reading and writing skills had the potential to have a meaningful impact on the circumstances of individual families, such as that handled by Mrs. Jack.

No primary dataset has been found, or indeed likely ever existed, to give a thoroughly accurate measure of English midwives' literacy rates, yet Adrian Wilson suggests that 'it is possible that all or

³¹ Elizabeth C. Sanderson, *Women and Work in Eighteenth-Century Edinburgh* (Houndmills: Macmillan Press, 1996) p.61-2.

most midwives in our period could read'.³² Here Wilson distinguishes specifically between the acts of reading and writing, implying the same view advocated by both Houston and Whyman, that there were many different types of literacy in pre-industrial England. Most of these categorisations and types of partial literacy can be defined by identifying traces of an individual's interactions with reading and writing materials and the requirements of these interactions within their daily lives. Despite this recognition, Wilson cites evidence that 'of the order of 80%' of midwives were at least able to sign their names in both Bury and London by 1700', once again blurring these lines of defining exactly what literacy was, or was not, during the period.³³ After all, the ability to write one's name is not indicative of being able to interpret other letters, words and sentences in a manner commensurate with being considered more broadly literate. Even though Wilson's argument might be based on something of a tenuous link between claim and evidence, his point does hold sufficient weight to suggest that, even for those who were not literate before entering the trade, this may not have remained the case throughout the duration of their working lives. Evenden further concurs with this view in her own measures of London midwives' literacy. Using research conducted by Peter Earle, she claims that '[a]t 86%, their literacy was second only to that of female schoolteachers'.³⁴ On the other hand, in his *Observations in Midwifery* Percivall Willughby decried having encountered practising midwives who 'could not read, with severall that could not write', therefore implying that, in his experience, such a lack of skills would be untenable and at odds with the demands of the job.³⁵ As Willughby's comment indicates, the likelihood of there being a proportion of midwives who practised without any sort of literacy skills or ability is high. Nevertheless, this proportion could well have been small if the need to supply a signature had the potential to arise as part of the professional duties of a midwife, as Evenden suggests was the case for most senior midwives if not also those in more junior positions.³⁶ The reality of these experiences was

³² Wilson, p.30.

³³ Wilson, p.34.

³⁴ Evenden, p.123. For Evenden's own source, see Peter Earle, *A City Full of People: Men and Women of London 1650-1750* (London: Methuen, 1994) p.120.

³⁵ Willughby, p.2.

³⁶ Evenden, p.125.

that, even in the case of only partial or signature literacy, a midwife who was able to form a selection of letters and associate these with the phonetic sounds of her own name had already opened the door of opportunity to making intellectual as well as hands-on activities part of her practise.

Seeking evidence of literacy beyond signatures is more difficult. Aside from samples of writing such as the letters stored in court records like those from Mrs. Jack, other traces of midwives engaging with the written word are few and far between. Though one possibility is to look towards what midwives read, any available evidence of their contact with books and other literature remains thin. David Harley believes one reason for this is that '[m]ost books in a household would belong to the husband, so it is difficult to assess what midwives were reading'.³⁷ Harley was able to find just one midwife across Lancashire and Cheshire who possessed a single midwifery manual in her small collection of books and just a few others who quite possibly had libraries of their own. The largest of these, he shares, was 'that of Margaret Chorley, who left a bookcase and forty books'.³⁸ Harley either does not, or is unable to, provide further details on Chorley's book collection, but this finding alone goes some way to evidencing that some midwives possessed greater literacy skills than being able to offer just their signatures.

Jennifer Richards's research is not dissimilar to Harley's in approach, as she attempts to identify who was reading Thomas Raynalde's *The Birth of Mankind otherwise named The Womans Booke* in its various editions. Having carefully studied seventy-nine surviving copies of the text, she considers any markers of ownership with a view to identifying, where possible, who might have interacted with these individual books. Her results do not focus on midwives but rather the interactions of the wider population with published material on reproductive health. In pursuing this line of enquiry she attempts to trace 'the "life" of any single midwifery book among its possible women readers'.³⁹ Richards takes pains to acknowledge that the transfer of information from books during the early modern period included strong elements of orality in the tradition of books being read aloud, meaning that her results are not

³⁷ David Harley, 'Provincial midwives in England: Lancashire and Cheshire, 1660-1760', *The Art of Midwifery: Early Modern Midwives in Europe*, ed. Hilary Marland (1993) (London: Routledge, 1994) pp.27-48, p.34.

³⁸ Harley, p.34.

³⁹ Jennifer Richards, 'Reading and Hearing *The Womans Booke* in Early Modern England', *Bulletin of the History of Medicine* (Autumn 2015) Vol. 89, No. 3, pp. 434-462, p.435.

comprehensive in that if any of her sample copies of *The Birth of Mankind* were read aloud, these texts would not reflect the fact that there were more readers than a single individual. Nonetheless, her analysis of marginalia and other inscriptions made on printed texts to identify the book's journey to and with particular readers provides a number of interesting and valuable observations. Among the seventy-nine copies of the text that she examined, Richards found that 11.5% (nine books) bore inscriptions which indicated that they had been owned by a woman, who may or may not have been a midwife.⁴⁰ Although less than the equivalent statistic for male owners, who accounted for 30% of the overall sample, the fact that nine copies can be ascribed to female owners is not insignificant. While it is important to note that the ownership of a book does not provide concrete proof that the book was indeed read by the person whose name was written into its pages, the markings which she points to do establish, at least on a prima facie basis, that women did access copies of reproductive texts such as the one offered by Raynalde.

As Richards's analysis indicates, other groups of women were also stakeholders in the practice and development of good reproductive health care and the emergence of associated publications. Growth in women's literacy skills, though possibly higher among female midwives, was not occurring exclusively within a single group and, in fact, those outside of this select profession more than likely made up a sizeable proportion of the female readers identified by Richards. The increase in published output of works across various genres by women writers between the end of the seventeenth and the late eighteenth centuries was vast, suggesting the greater numbers of women who were able to engage with published print on all levels. Although both genders had been affected by changes in print culture, including decreasing costs, women's writing, which had been largely excluded from publication in most genres previously, blossomed as never before. In subsequent chapters we will encounter male and female writers, including poets and novelists of the lay public, who were interested and engaged with exploring the theoretical, practical and emotional concepts which surrounded reproduction and childbirth but were by no means practitioners of midwifery themselves.

⁴⁰ Richards, p.437-8.

Rab Houston's examination of literacy in early modern Europe adopts the estimate of approximately one million families living in England in total during the period 1660-1669, the decade between Culpeper and Sharp each having published their texts. From this approximation, he then suggests that '400,000 copies of popular almanacs and chapbooks were sold every year'.⁴¹ He uses these two figures concurrently in an attempt to draw some conclusions on the reading public of the period. Houston's interpretation offers up the possibility that between a half and a third of all families each bought one of these books, or the alternative figure that a tenth of the population may have accounted for these sales, in real terms buying three to four of these printed products in each year.⁴² Although these calculations do not offer the precise figures that historians might prefer, there is value in examining these numbers, which estimate that the reality is likely to have been somewhere between the two extremes. The focus on families also begs further questions as to how individuals fared within family groupings. Where Houston addresses topics such as education and schooling systems across the continent, for many of these families early literacy and education, particularly for girls and young women, would have occurred through more informal channels that did not rely on academic tuition. For elite families sending a daughter or young female relative to school or employing a tutor for a similar purpose may have been options for consideration. Women training in the midwifery profession, and indeed most of the female population beyond just those being apprenticed for a career in midwifery, were far more likely to have experienced a lower ranking socio-economic family life, thus making their educational opportunities more limited. Their education prior to their professional training was, therefore, much more likely to have been based at home.

In her discussion of women's education, Leonie Hannen notes that, although women's literacy rates remained lower than men's, there were multiple reasons why women of all social backgrounds might learn or even become substantially accomplished at reading and writing. One explanation she gives is that 'a long tradition of morally sanctioned female religious reading existed and reading the Bible had a

⁴¹ R.A. Houston, *Literacy in Early Modern Europe: Culture and Education 1500-1800*, 2nd edn (1988) (Abingdon and New York: Routledge, 2002) p.126.

⁴² Houston, p.126.

strong influence on early modern women's own writings'.⁴³ Early modern women's religious reading and writing are fields of literary history which have been well covered by historians, including Femke Molekamp, Erica Longfellow and Kim Coles. Though these types of research extend beyond the scope of this thesis, writing traditions which were deeply connected to spiritual faith and moral guidance are evident in many of the female-authored medical texts to be reflected upon in Chapters Two and Three.⁴⁴ Hannen's own concern is not how religion shaped literacy for women, but rather the ways in which women's epistolary writing reveals how these women sought to educate themselves and develop their minds further than their literacy training, however formal or informal, had allowed. She links the two by proposing that the focus on 'religious reading and private meditation' as a general cultural theme and more specifically, as her examples demonstrate, within women's domestic education, encouraged the development of literacy skills.⁴⁵ This concentration on religious reading practices within the lay public, Hannen also proposes, influenced women's writing, and this is something that will become clear in the course of examining women's midwifery manuals both before and after 1737.⁴⁶

Susan Whyman's exploration of different types of full and partial literacy with a specific view to highlighting the importance of letter-writing practices across the whole English population as a measure of literacy emphasising the importance of domestic literacy and the skills gained through associated activities.⁴⁷ '[L]etter writing', Whyman offers, 'helped promote literacy further down the social scale than we have imagined'.⁴⁸ Her use of case studies, in which she analyses the quality of family members'

⁴³ Leonie Hannen, *Women of Letters: Gender, Writing and the Life of the Mind in Early Modern England* (Manchester: Manchester University Press, 2016) p.4.

⁴⁴ For further discussion of women's religious writings, see Femke Molekamp, *Women and the Bible in Early Modern England: Religious Reading and Writing* (Oxford: Oxford University Press, 2013); Erica Longfellow, *Women and Religious Writing in Early Modern England* (Cambridge: Cambridge University Press, 2004); Kim Coles, *Religion, Reform, and Women's Writing in Early Modern England* (Cambridge: Cambridge University Press, 2008).

⁴⁵ Hannen, p.130

⁴⁶ Hannen, p.4.

⁴⁷ Within this discussion of her approach to research and the methodology for her work, Whyman emphasises the potential for the holdings of local institutions such as small-scale archives and record offices to transform the ways in which literacy is recognised as having been more widespread than has been previously recognised during the late seventeenth and eighteenth centuries. Susan Whyman, *The Pen and the People: English Letter Writers 1660-1800* (Oxford: Oxford University Press, 2009) p.6.

⁴⁸ Whyman, p.6.

writing as well as the quantity of information given, reveals that although ‘boys had epistolary advantages over their sisters’, girls and young women did have many reasons to learn to read and write and did so more often than previous histories of literacy may have accounted for.⁴⁹ Girls and even older women’s writing was more likely to display ‘phonetic spelling, awkward spelling and [a] lack of self-confidence’, yet their attempts to become more accomplished in these areas are visible, with many wishing to be able to write as well as the men with whom they were communicating, such as fathers, brothers and uncles.⁵⁰

With an increasingly literate population, particularly among women, and the growth of male professional interests in reproductive medicine, multiple readerships opened up to medical authors wishing to communicate areas of their expertise and ideas about reproduction. As Mary Fissell comments about medical publishing in general, ‘[d]uring the latter half of the seventeenth century popular health books, explicitly intended for a lay audience, enjoyed a publishing boom’.⁵¹ Medical discourse on conception, pregnancy and childbirth may have been slightly slower to expand into a ‘boom’ in publishing, but the production of texts on these subjects could be described as just that by the mid-eighteenth century. The content of reproductive medical texts reflected this shift, with authors becoming much more aware of the potential to attract readers who were not among the professional medical community.

An early example of changing the format of a reproductive medical comment to address the patient rather than the practitioner was published in 1764, by writer Philip Thicknesse. A curious character of eighteenth-century print and social circles, his biography indicates a colourful life spent in England, America, Jamaica, France and Italy. Seemingly controversial by nature, Thicknesse maintained a reputation as an eccentric type with a habit of making enemies and falling out with friends over his opinions and attempts to improve his status and financial position. Though not a medical professional himself, he held strong opinions on the development of man-midwifery and his *A Letter to a Young Lady*

⁴⁹ Whyman, p.32.

⁵⁰ Whyman, p.44.

⁵¹ Mary Fissell, *Patients, Power and the Poor in Eighteenth-Century Bristol* (Cambridge: Cambridge University Press, 1991) p.16.

shared these with the public. The text itself attacked the concept and practise of man-midwifery in any circumstances, with the notable exception of a life-threatening emergency. Thicknesse explains

Our Grandfathers were not usher'd into the World by Men, nor would have our Grandmothers have admitted a Man; not even an Husband, to be present at such a Time; and yet I will venture to affirm, that there were fewer Women and Children lost on those Occasions, in those Days of Decency, than in ours of the highest Indelicacy.⁵²

He takes a take a two-pronged approach here to protesting against the employment of male birthing support, first addressing the historical principles and conduct attached to childbirth, before also suggesting that changes in the cultural management of delivering mothers of their infant children also had an impact on deaths occurring in childbirth. Though opting not to elaborate on either point with historical examples or further reference to instances of maternal or infant mortality, Thicknesse remains resolute in his resistance against 'a prevailing Fashion' or male attendance at births.⁵³

Instead of aiming to address his text to male-midwives themselves, pointing out the inappropriateness of their behaviour in his view, Thicknesse takes a different approach. Katherine Turner indicates that '[m]any of his books were reviewed by the *Monthly Review* and the *Critical Review* (with which latter journal he conducted a long-standing feud), in whose pages he became something of a comic celebrity', something that Thicknesse was self-consciously aware of when writing.⁵⁴ Thicknesse knew that reviewers, who would be 'chiefly composed of Surgeons and Men Midwives, who have very little Practice in their Profession', would be unlikely to embrace his text with a warm welcome.⁵⁵ He highlights the likelihood of being criticised in published print, referring to the growing literary review culture as 'the great Tribunal of the monthly and critical Reviewers, before whom I am so soon to appear, and from whom I am on the First of next Month to receive Judgment', making his aiming of his text, at a women's lay readership rather than a professional medical one all the more deliberate.⁵⁶ Although he knew that this

⁵² Philip Thicknesse, *A Letter to a Young Lady* (London: R. Davis, T. Caslon and C. Henderson, 1764) p.5.

⁵³ Thicknesse, p.3.

⁵⁴ Katherine Turner, 'Thicknesse, Philip (1719–1792)', *Oxford Dictionary of National Biography* (2004) (Oxford: Oxford University Press, 2008) <<http://www.oxforddnb.com/view/article/27181>> [accessed 7 October 2017].

⁵⁵ Thicknesse, p.23.

⁵⁶ Thicknesse, p.23.

would not protect the text from critical perspectives being expressed, the marked aim of reaching a female audience ensured that his literary efforts are targeted at changing the minds of consumers of midwifery services with a view to reducing demand for men-midwives. Taking a personal line of persuasive argument, Thicknesse does not make the 'young lady' to whom he writes his letter simply any female friend or acquaintance: the lady in question was in fact his own daughter. His publication is styled as a response to a letter she sent to him before her marriage. The text implies, but does not state, that the author's key motivation for holding man-midwifery in contempt is out of affection and concern for his child as she leaves his protection through her impending marriage. Placing himself in the role of a doting father, as well as that of a caring husband, whose wife was 'attended by a Woman, a Determination of her own', Thicknesse insinuates that his worries are such that he was compelled to share these anxieties with other women as well as his daughter in the hope that they would consider their decisions about pregnancy and delivery care with caution.⁵⁷ Pam Lieske interprets his choice of a letter format for his publication as a manifestation of Thicknesse's financially-motivated thinking, which influenced his literary form and style. He was, she claims, 'aware of the popularity of epistolary literature and the conservative nature of mid-century literature', and further speculates that it was these changes in the literary marketplace that helped him to identify that 'he could make money by writing a letter of advice to women'.⁵⁸ Her analysis of Thicknesse's work is astute and would seem to fit the undercurrents apparent in his writing.

By 1764 a number of epistolary works had proved successful in terms of their reception including Samuel Richardson's *Pamela, or Virtue Rewarded* (1740) and *Clarissa* (1748), as well as John Cleland's *Memoirs of a Woman of Pleasure*, also published in 1748. This literary form would continue to grow in prominence and popularity with readers throughout the rest of the eighteenth century and beyond. Letter-writing as a larger form was also significant to eighteenth-century lives. Claudine van Hensbergen identifies distinctions that have traditionally been made by scholars between manuscript letters and those appearing in print, and of those in print, 'familiar letters, written as forms of written communication', and

⁵⁷ Thicknesse, p.11.

⁵⁸ Pam Lieske, 'Lying-In Hospitals and Male/Female Midwifery Debates', *Eighteenth-Century British Midwifery*, Vol. 7 (London: Pickering & Chatto, 2008) p.104.

other types of published letters that have been grouped together under the umbrella term of ‘epistolary genre’.⁵⁹ Examples she provides of texts categorised as being part of the eighteenth-century epistolary genre include verse epistles and epistolary novels. Though a commonly used term, she points out, this division between familiar letters and texts included within the epistolary genre is not always helpful to developing a full understanding of letters more generally throughout the period. She argues that ‘[l]etters — both personal and public, familiar and fictional — are a discourse operating throughout texts and society: we should think in terms not of epistolary *genre*, but rather of epistolary *discourse*’.⁶⁰

This perspective is useful in the context of Thicknesse’s text which might be framed as a familiar letter but, as Lieske points out, actually falls outside of the definition of a familiar letter in the rhetorical strategies he employs to make comment on much broader debates than simply whether his daughter, as an individual, should use a man-midwife during any future lying-in or not. Although unmentioned by van Hensbergen in her list of examples, the literary form of the letter also had a significant role to play in medical literature, perhaps justifiably unlisted because medical treatises sat between the personal and the more general in terms of what is being communicated. Providing medical advice itself or guidance on matters related to health and medicine such as those Thicknesse discusses, was a familiar act, requiring a personal knowledge of the individual patient to make an assessment, and a diagnosis if necessary, before further recommending any treatment.⁶¹ Yet, the act of producing printed medical guidance is always carried out with the intention of being non-personal because of the need to attract the widest possible readership, or at least enough to make the text a commercial success. As an author Thicknesse walked the line between the personal and the public, using the form of a familiar letter to his daughter as a device

⁵⁹ Claudine van Hensbergen, ‘Towards an Epistolary Discourse: Receiving the Eighteenth-Century Letter’, *Literature Compass*, Vol. 7, No. 7 (2010) pp.508-518, p.509.

⁶⁰ van Hensbergen, p.512.

⁶¹ The provision of medical advice by doctors through the form of letter writing was not uncommon, as Wayne Wild has uncovered in his monograph *Medicine-by-post: The Changing Voice of Illness in Eighteenth-Century British Consultation Letters and Literature* (Amsterdam and New York: Rodopi, 2006). More recently, David Shuttleton has further developed this line of enquiry by creating an online database, ‘The Cullen Letters: The Consultation Letters of Dr William Cullen (1710-1790) at the Royal College of Physicians of Edinburgh’ < <http://www.cullenproject.ac.uk/> > [accessed 1 October 2017]. These contributions reveal the prevalence of the letter as a mechanism for communicating medical concerns and advice, but also leave a challenge to literary and medical-historical scholars to further investigate the impact of literacy, and acts of writing and reading on human health throughout the eighteenth century.

with which to attempt to assert the sincerity of his feelings on the wider politics of man-midwifery and the development of practices associated with male interventions in birthing procedures, such as the use of the forceps. Tom Keymer's description of the familiar letter emphasises the form's 'characteristic tones of candour and spontaneity', intended to be indicative of the authenticity of the author's feeling on their chosen subject, thus creating an impression of conversational intimacy between the narrative and the reader.⁶² As Lieske indicated, Thicknesse was not ignorant of these trends in literature, utilising a similar construction of the familiar letter for *A Letter to a Young Lady* to bring his ideas to the public.

In addition to styles like Thicknesse's text that leaned less on medical terminologies or narrative frameworks such as case studies, other techniques were also in use by end of century to draw in the lay public which were intertwined with literary references or styles. Seguin Henry Jackson's *Cautions to women, the progress of labour and delivery; the confinement of child-bed; and some constitutional diseases: including directions to midwives and nurses* (1798), for example, took a much broader approach to creating this sense of appealing to the public, entering into the world of literary genres from its opening lines in the book's 'Advertisement':

The propriety of drawing up the following cautions, and observations, was suggested to the Author, by perusing the Memoirs of the late Mrs. Woolstoncraft [sic] Godwin, in which an account has been given of the unfortunate illness which terminated her life; an illness that, as far as a conclusion can be drawn respecting it, from a bare recital only, appears to him, in a great measure, if not wholly, to have been occasioned by a want of attention to those things, which ought to be regarded by women in that situation; and not to have *clearly* originated from the circumstance, hinted at in that publication, as connected with her labour.⁶³

Unlike Thicknesse, Jackson does not employ a mode of writing that would be closely linked to other forms of writing such as a letter and, like more traditional forms of medical writing addressing specific issues such as 'the Incipient State, or first Four Months, of Pregnancy', and 'On the Progress of a Natural Labour'. His inclusion of the phrase 'cautions to women' in the book's title makes clear that the content

⁶² Thomas Keymer, *Richardson's Clarissa and the Eighteenth-Century Reader* (1992) (Cambridge: Cambridge University Press, 2004) p.1.

⁶³ Seguin Henry Jackson, *Cautions to women, the progress of labour and delivery; the confinement of child-bed; and some constitutional diseases: including directions to midwives and nurses* (London: G.G. and J. Robinson, 1798) p. v (unlabelled).

was not only targeted at medical practitioners but, rather like *A Letter to a Young Lady*, was intended for a more public female audience. Pointing towards an example that would have been known to readers (as Barbara Taylor notes, 'Wollstonecraft died a celebrity'), Jackson attempts to make his text relatable to a broad audience by making reference to a public figure whose death had recently occurred, as well as entering the landscape of literary publications by mentioning Godwin's even more recent *Memoirs of the Author of A Vindication of the Rights of Woman* (1798).⁶⁴ His engagement with contemporary popular culture and literature immediately indicates that a woman need not have an extensive knowledge of medical science in order to benefit from the book itself, which was aimed at equipping patients and their families with information that would be of practical use. The sentences that followed this introduction also indicate that his reference to Wollstonecraft was not only intended as a means of communicating with the reader on familiar terms, but was also a source of inspiration to the author himself. He remarks:

On the whole of those Memoirs, (particularly the last chapter) the Author had intended to publish some remarks, which he announced by an Advertisement in several newspapers. But he has now laid aside that intention, thinking that it would be more usefull [sic], to guard the fair sex in general against these errors, which so often prove injurious to both themselves, and their offspring. With this view he offers the following pages to their consideration.⁶⁵

Having first contemplated writing about women's health and raising concerns about the medical progression of the management of Wollstonecraft's delivery of her infant daughter through a literary review piece, he then reconsidered the positioning of his text within the print market. Though Wollstonecraft's circumstances may have warranted clinical reflection and commentary based on the occurrence of her death, in search for lessons of where such tragic consequences were the ultimate outcome, Jackson likely realised that responding to Godwin's *Memoirs* would have a limited impact, if any at all, whereas Wollstonecraft herself provided an example of the sufferings of other women and the dangers that continued to be inherent in a certain number of births, regardless of improvements in the management of difficult cases. His experience of a literary text, as a reader, therefore influenced

⁶⁴ Barbara Taylor, *Mary Wollstonecraft and the Feminist Imagination* (Cambridge: Cambridge University Press, 2003) p.9.

⁶⁵ Jackson, p.vi.

reproductive medicine by compelling him to seek to improve it by writing, making his work as accessible to patients as possible.

Conclusion

Writers and readers of reproductive medical texts between 1540 and 1799 were instrumental in the vast number of changes that took place in medical culture, resulting in the almost complete professionalization of obstetrics by the nineteenth century. English writers started out by opening up the London print market to written information on childbirth and midwifery as a medicalised part of the natural lifecycle through translating European texts. In the mid-seventeenth century Nicholas Culpeper identified the broader and more innovative possibilities that came with this, no longer following the translations of European works alone, but also contributing original ideas and perceptions about the present and future of midwifery practice. Appealing to a possible readership of female midwives, he attempted to instruct and give power to midwives who were willing to learn from his textual guidance. Jane Sharp followed his contribution, further showing readers that midwives were not only capable in practical terms if properly educated, but also in speaking out as authorities on a subject which was integrally attached to their practical expertise. Though both authors focused on the abilities of female midwives, Culpeper's text shows a greater awareness of the future of man-midwifery as continuing to grow despite any protestations, which proved to be the case.

The production of midwifery texts, both original and reprinted or translated, did not increase directly and exponentially, with the print market experiencing decades in which the rate of publishing slowed in comparison to previous years, but increased overall throughout the decades through to the end of the eighteenth century. Appendix A of this thesis reveals this to be true, and has the potential to offer more information than I have had the space to discuss here, but will provide fruitful material for further studies in midwifery and medico-literary studies. With a rapidly increasing number of male practitioner-authors in the field of reproductive medical publishing in comparison to women writers, the professionalised and academic aspects of the growing attentiveness towards the management of childbirth reached a point where midwifery was accepted as a medical discourse in its own right. This can be

evidenced by a noticeable increase in publications during the 1750s as well as the introduction of midwifery into the curriculum of medical degrees, beginning at Edinburgh University during the same decade.

Even with this absorption of what had been a lower-ranking, necessary trade into academic study and research by learned men, childbirth was not a subject that was contained within the practitioner population. Though midwives and man-midwives perhaps had a greater range of uses for literacy skill than at least some of the lay population, as public literacy rates improved, and the diversity of matters for discussion concerning childbirth expanded, lay readers had a greater investment and reasons to engage with these types of medical text. Authors actively made efforts to appeal to a wider lay readership by engaging, as Thicknesse and Jackson did, with other genres and literary themes. On examining these medical books, it becomes apparent that the history of reproductive medical publishing and the development of literature throughout the eighteenth century were more intertwined than has previously been recognised.

Chapter Two

Early Women's Medical Publishing

Introduction

Despite the publication of both Jane Sharp and Louyse Bourgeois's midwifery texts during the seventeenth century, a time when a tradition for writing on reproductive medicine was only just beginning to surface, the presence of works by women practitioners continued to be low in numbers.¹ As Appendix A indicates, there were no other female authors of midwifery manuals prior to 1737. Before looking at the works of eighteenth-century female midwives, with this lack of immediate successors to Sharp and Bourgeois in mind, it is therefore important to explore what other types of medical, and even domestic household texts women practitioner-authors might have had in mind when attempting to make their own contributions to the medical print market. The closest approximations of works produced beforehand which might be considered similar can only be drawn from other areas of medicine or more general domestic health management. Medical texts, or those broadly associated with medicine, produced between 1658 and 1737, with the exception of Sharp and Bourgeois's texts, differed from, or were more generic, than midwifery itself. Those works to be considered include Mary Trye's *Medicatrix, or, The Woman Physician* (1675), almanacs by Sarah Jinner, Mary Holden and Dorothy Partridge (1658-94), Elizabeth Cellier's *To Dr. ----- an answer to his queries concerning the Colledg [sic] of Midwives* (1688), a brief discussion of women's historical right to practise midwifery based on religious precedent and a proposal to re-organise the midwifery profession through regulation, and finally, Elizabeth Blackwell's *A Curious Herbal containing five hundred cuts of the most useful plants, which are now used in the practice of physick* (1737-9).² Some but not all of these texts were written by authors who can be

¹ Appendix A shows that during this time, as well as reprints of Culpeper's text, publications relating to reproductive medicine were also produced by Peter Chamberlen, Robert Turner, William Sermon and James Wolveridge.

² The format by which Blackwell's text was originally produced, that of serialisation, means that while she had begun work and published some of her herbal during the year 1737 but the actual publication date of her completed work is in fact 1739. This variation of dates will be duly accounted for where appropriate.

identified either within their own writing or through other biographical contextual information as midwives.

The available historiography surrounding the specific examples of women's medical writing discussed in this chapter is limited. The lack of scholarship surrounding these works is indicative of the status of women's authorship within wider medical humanities studies to date, with few studies giving full credit to women's contributions to changes in medical culture during the eighteenth century. This lack of critical attention may be due to difficulties with attribution and doubts as to whether a female pseudonym may have been used to present a male author's work to the public. In her literary history of female authorship Susan Staves acknowledges that '[m]any attributions of works written in the early eighteenth century remain insecure and many anonymous works remain unattributed', a fact which is also true of literature from the late seventeenth century.³ In this chapter, I will look at those works that have been identified as having been written by female midwives, or other women involved in licensed medical practice or, less professionally, domestic medicine. As well as considering the realities and problems of attribution for historians Staves also promotes the value of breaking away from traditional historical perspectives on women's writing which, she suggests, has typically placed a disproportionate amount of emphasis on the novel as a genre. In place of what has, she thinks, been an unbalanced view, Staves suggests the need to recognise more widely that 'much of women's most intellectually vigorous writing was in nonfiction prose'.⁴

Although this thesis accounts for both fiction and nonfiction, using novels, medical manuals and a range of other genres, Staves' perspective is useful when considering the overall lineage of writing on reproduction and comes to the fore when attempting to trace any sort of literary heritage for women's involvements in writings that were specifically borne out of scientific or professional expertise. Women's overall contribution to medical publishing was not at a sufficiently developed stage during the late

³ Susan Staves, *A Literary History of Women's Writing in Britain, 1660-1789* (Cambridge: Cambridge University Press, 2006) p.206.

⁴ Staves, p.2.

seventeenth and early eighteenth centuries to make a strong, collective statement about the application and practise of midwifery, but this chapter reveals that this population of professional women was by no means absent from the medical print environment. Furthermore, these individual medical texts reflect the variety and full range of approaches and strategies that their authors utilised in order to break new ground in publicly acknowledging their skills and abilities as practitioners and writers. The setting out of these precedents by early female medical authors was of great value to successive generations of women writers, who were then able to develop their texts further, in order to convey even stronger statements about their practice and ambitions in published print.

'The Woman Physician': Mary Trye

Mary Trye's *Medicatrix, or The Woman Physician* (1675) was a product of the author's participation in the chemical medical market. Her position in medicine, as a female chemical physician, was less common than women qualifying in midwifery. Trye was able to inherit her practise after the death of her father, Thomas O'Dowd, in 1665.⁵ Along with this inheritance came issues of professional relationships and reputation. Charlotte Otten notes that '[t]hroughout his life [Trye's] father had been attacked by Dr. Henry Stubbe, a physician whose practise largely depended on the use of surgical instruments and phlebotomy.'⁶ Stubbe objected to the practice of chemical medicine and, as Sara Read points out, continued his abusive attacks on O'Dowd and the practice of chemical medicine after O'Dowd's death.⁷ Trye's response to these criticisms came in the form of her *Medicatrix*, the primary focus of which was 'vindicating Thomas O'Dowd' rather than publishing as a means of seeking to advance her own position as a woman practitioner.⁸ In order to establish credibility, however, the matters of her positions, both as female practitioner and author, at least had to be addressed. Marie Loughlin

⁵ Doreen G. Nagy, *Popular Medicine in Seventeenth-Century England* (Ohio: Bowling Green State University Popular Press, 1988) p.30, 71.

⁶ Charlotte F. Otten, ed., *English Women's Voices, 1540-1700* (Florida: University of South Florida Press, 1992) p.178.

⁷ Sara Read, "'My Method and Medicines': Mary Trye, Chemical Physician", *Early Modern Women: An Interdisciplinary Journal*, Vol. 11, No. 1 (Fall 2016) pp.137-148, p.137.

⁸ Trye, p.1.

points toward this when she explains ‘Trye’s comment in her dedication to Jane Lead that “it is of little Novelty to see a Woman in print” is characteristic of her ironic tone.’⁹ Though her narrative was more dry in tone, some of Trye’s techniques were comparable to Sharp’s in paying tribute to women as a collective, addressing the text ‘To the Glory of her Sex’ before acknowledging the one individual lady who was possibly her patron.¹⁰ Her defence of her father’s practise and criticisms levied at Stubbe explains, ‘I am satisfied there is Ability enough in my Sex, both to discourse his envy, and equal the Arguments of his Pen in those things that are proper for a Woman to engage.’¹¹ Though Trye’s central aim was not based on the sharing of good practice among women, nor was her intended audience even identified as female, her confidence in women’s intellectual capacities is clearly apparent from early in her text.

Authors of Almanacs

Another area of publishing that attracted women who were associated with medicine and midwifery from the mid-seventeenth century was the production of almanacs. This is perhaps unsurprising given the lack of previous opportunities for women to publish in the medical market when contrasted with the likely higher rate of literacy among midwives than other women, as well as the domestic nature of the almanac as a literary product. For those women who did not have openings such as that which presented itself to Trye through her father’s profession, almanac publishing was another means of developing an authorial identity through which useful information on domestic medicine could be disseminated. These short household guides engaged with subjects including astrology and the seasonal changes in the environment to provide useful household information, sometimes including domestic medical remedies. In her study *English Almanacs, Astrology and Popular Medicine, 1550-1700*, Louise Hill Curth identifies three examples of female authors’ names being attributed to almanac publications

⁹ Marie Loughlin, ‘Mary Trye, Medicatrix, or The Woman Physician (1675)’, *Reading Early Modern Women: An Anthology of Texts in Manuscript and Print, 1550-1700*, ed. Helen Ostovich and Elizabeth Sauer (2004) (New York and London: Routledge, 2005) pp.108-110, p.108.

¹⁰ Trye, title page.

¹¹ Trye, p.2.

between the years 1658 and 1694.¹² Of the three women whose names are attached to published almanacs, Sarah Jinner (Ginnor), Mary Holden and Dorothy Partridge, two are identified as midwives by the texts bearing their names. The front covers of both Holden and Partridge's texts are labelled so as to identify each as a midwife. Though Jinner's works do not suggest her to be a member of the profession of midwifery, her books also include relevant information such as 'Another excellent good Plaister to strengthen women with Child that do not use to go out half their times'.¹³ In these specific examples, for which the quality and format was varied, the information proffered to readers spans across calendars which identified the best months to conceive in, through to the provision of some useful recipes or receipts, such as those for regulating menstruation.¹⁴ Though there is nothing extraordinary in this content, with the information offered relating to concerns which might have been considered part of the everyday life of seventeenth-century women, Hill Curth questions the authenticity of these publications as legitimate products of women's authorship such as they claimed to be.

Partridge's almanac is accepted as likely having been the work of a woman, but in the case of those volumes attributed to Jinner, Hill Curth astutely points out that of 'the two editions in 1659 the [print labelled with the spelling] Sara Ginnor is clearly a satirical copy of the first and contains highly misogynistic references which suggest that it could have been written by a man'.¹⁵ Her analysis of Jinner's work further takes into account the structural differences of the second edition produced in 1659 to that of her first publication, including the repeated use of some of the remedy material and the noticeable lack of preface or introduction. As she concludes, it would seem likely that the text was a cheap attempt to produce an almanac that would sell under Jinner's supposed authorship. In a similar vein, she also draws attention to both of Mary Holden's almanacs, published in 1688 and 1689. Hill Curth

¹² Louise Hill Curth, *English Almanacs, Astrology and Popular Medicine, 1550-1700* (Manchester and New York: Manchester University Press, 2007) pp. 68-9, 71.

¹³ Sarah Jinner, *An almanack and prognostication for the year of our Lord 1659 being the third after bissextile or leap year: calculated for the meridian of London, and may differently serve for England, Scotland, and Ireland* (London: J. Streater, 1659) p.31.

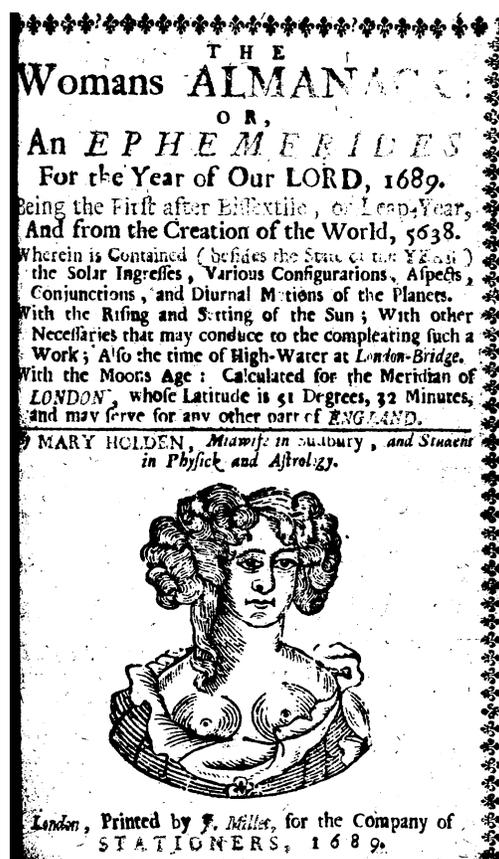
¹⁴ Jinner, p.25-6.

¹⁵ Hill Curth, p.48.

explains of these almanacs that there are ‘a number of clues that cast doubt on the idea of its author being a provincial midwife’.¹⁶ Her reasons for this include the lack of information presented on women’s health or any connecting specialist knowledge that a midwife might be expected to possess, as well as the specifics of what is claimed to be the author’s portrait in the front matter of the book, shown below.

Figure Two (left) - Mary Holden, *The Woman’s Almanack, For the Year of our Lord, 1688*.¹⁷

Figure Three (right) – Mary Holden, *The Woman’s Almanack, or, An Ephemeris for the Year of our Lord, 1689*.¹⁸



The image, included in both of Holden’s volumes, displays a woman with dressed hair, whose dress suggests a style which seems not to fit the conventions of modesty and respectability associated with midwives, or in fact the financial restraint of a woman required to work for a living. Each reflects high fashion as shown on the woman who was allegedly Holden herself. The cut of her dress, seen only

¹⁶ Hill Curth, p.71.

¹⁷ Mary Holden, *The Woman’s Almanack, For the Year of our Lord, 1688* (London: J. Millet, 1688), cover page.

¹⁸ Mary Holden, *The Woman’s Almanack, or, An Ephemeris for the Year of our Lord, 1689* (London: J. Millet, 1689), cover page.

on the upper half of the body, reveals her breasts which, as Alanna Skuse indicates, was a popular style in dressmaking at the time.¹⁹ As late as 1798 female midwife Mrs. Wright, in her short treatise *An essay to instruct women how to protect themselves in a state of pregnancy from the Disorders incident to that Period, or how to cure them*, discussed the key characteristics of successful ‘Accoucheurs and Accoucheuse’, or male and female midwives, as including rules on dress and appearance. ‘A midwife’, she explains, ‘ought to be turned of thirty, clean and neat in her person, pleasant in her manners, gentle, attentive, and kind to her patients’.²⁰ Though the word ‘fashion’ was an increasingly powerful one in midwifery treatises, it was not typically used in relation to the dress of medical practitioners, or indeed about female midwives themselves who were among the group of women who were required to work to supply themselves and their families with an income. ‘Modesty’ was a more consistent term for referring to the behaviour and appearances of midwives. Sir Richard Manningham made clear in his treatise *An abstract of midwifry, for the use of the lying-in infirmary* (1744) that ‘a most decent and modest Behaviour in every one practising Midwifry, will be absolutely necessary’, making this a top priority in the selection of midwives for his lying-in hospital, with no mention of the ‘fashionability’ of any individual or group of midwives.²¹

Concepts of fashion and dress were typically only referenced in relation to choices made by patients. Similar to Manningham’s reference to recruiting female midwives with particular characteristics, the selection of a practitioner to attend a birth in a patient’s home was a subject of ‘fashion’. The anonymous author of *The danger and immodesty of the present too general custom of unnecessarily employing men-midwives* (1772) invoked the concept of fashion in protesting against the involvement of man-midwives in births, ‘[b]lush, ye women of fashion, to own that any man, besides your husbands, is

¹⁹ Alanna Skuse, *Constructions of Cancer in Early Modern England: Ravenous Natures* (Houndmills and New York: Palgrave Macmillan, 2015) p.33.

²⁰ Mrs. Wright, *An essay to instruct women how to protect themselves in a state of pregnancy from the Disorders incident to that Period, or how to cure them* (London: J. Barker, Lee and Hurst, and J. Kirby, 1798) p.17.

²¹ Sir Richard Manningham, *An abstract of midwifry, for the use of the lying-in infirmary* (London: T. Gardner, 1744) p.vi.

admitted to liberties with your persons'.²² The only regularly discussed aspects of clothing choices and fashion in midwifery manuals were those relating to patients and their health. Practitioners including Thomas Cooper, John Maubray and Alexander Hamilton all remarked on the risks of tightly laced stays on pregnant women, but none of these authors stipulated what a midwife should wear when attending to patients.²³ Given that few midwives would have been part of anything except the working ranks of society in their own social and economic lives, and that they were expected to be of a modest character, it is unlikely that the lady depicted on the cover of the almanac was a midwife. There is no way to even be sure that the image was in fact a likeness of a midwife named Mary Holden. Though the term 'midwife' may have sought to offer a sense of authority to a text which would have been used in the domestic environment, where midwives worked, it would seem unlikely that the almanacs attributed to Holden were true early works by a midwife. Though I suggest it is important to acknowledge the presence of almanacs in the print market and their public association with midwives, both before and after Sharp's publication, these types of text are best taken with caution as their links with medical literature can perhaps be described as tenuous at best.

The 'Popish Midwife': Elizabeth Cellier

If these types of domestic texts are unlikely to provide concrete examples of practise-based medical publishing, it is important to consider where else women, specifically female midwives, had an impact in the world of published print that may have set precedents for author-midwives of the eighteenth century. Another example of work by a midwife in pre-industrial England was the 1688 text *To Dr. _____ An Answer to his Queries concerning the Colledg [sic] of Midwives*, written by Elizabeth Cellier. Though well known as a political piece, the reputation of the pamphlet itself has far been outweighed by the fame

²² Anonymous, *The danger and immodesty of the present too general custom of unnecessarily employing men-midwives* (London: J. Wilkie, J. Almon, F. Blyth, and G. Woodfall, 1772) p.35.

²³ Thomas Cooper, *A compendium of midwifery, under the three general heads of theory, practice, and diseases* (London: s.n., 1766) p.117; John Maubray, *The female physician, containing all the diseases incident to that sex, in virgins, wives, and widows* (London: Stephen Austen, 1730) p.75; Alexander Hamilton, *A treatise on the management of female complaints, and of children in early infancy* (Edinburgh and London: printed for Peter Hill; and John Murray, 1792) p.192.

of its even better known author. Eight years before the pamphlet's publication, Cellier had been arrested and tried for involvement in an alleged Catholic conspiracy plot which came to be known as 'the Meal-Tub Plot', the intention of which was said to be the murder of Charles II. The story of the plot, though questionable in terms of there being any truth in it, was repeated by numerous publications.²⁴ Despite the fact that she was fully acquitted in her first encounter with the law, and her first publication, *Malice Defeated; or a brief relation of the Accusation and Deliverance of Elizabeth Cellier* (1680) was aimed at giving her own account of events relating to the accusation, her reputation has remained somewhat notorious. The reasons for this notoriety are not known in full, however the combination of her association with wrongdoing (even if founded on falsehood), protest in print, which was unusually outspoken for a woman who had been involved in legal entanglement, as well as a subsequent second arrest shortly afterwards. This time the arrest was for a crime of a different nature, although still related to the story of the alleged plot. Part of the content of Cellier's *Malice Defeated* featured an attack on the government regarding the treatment of prisoners. Rather than vindicating her name Cellier actually found herself arrested for libel and was this time charged. In sentencing, she was 'fined £1000, imprisoned in Newgate, and pilloried, at which time onlookers pelted her with stones and other missiles'.²⁵ This finding of guilt may well have been sufficient to ensure that her name was tarnished for the long term. Though James Hobson Aveling suggested that this legacy has been unjust, and that Cellier's 'biography has been written by her enemies', it is only much more recently that historians have undertaken to reinvestigate who Cellier really might have been.²⁶ Accounts of her actions and her written works continue to be matters for debate as to whether her endeavours should be celebrated or dismissed in terms of her personality and motives for seeking public attention through publishing.

²⁴ See Jody Greene, *The Trouble with Ownership: Literary Property and Authorial Liability in England, 1660-1730* (Philadelphia: University of Pennsylvania Press, 2005) p.88-90.

²⁵ Lisa McClain, 'Neither Single nor Alone: Elizabeth Cellier, Catholic Community, and Transformations of Catholic Women's Piety', *Tulsa Studies in Women's Literature* (2012) Vol. 31, No.1, pp.33-52, p.33

²⁶ James Hobson Aveling, *English midwives, their history and prospects* (London: J. & A. Churchill, 1872) p.72.

Mihoko Suzuki and Doreen Evenden, for example, interpret her pamphlet on the subject of midwifery in different ways. *To Dr. ____ An Answer to his Queries concerning the Colledg of Midwives* is a short text, consisting of only eight pages, leaving at least as many questions as it answers about the author, her life and professional experience, as well as her motivations for publishing. On examining Cellier's writing, Suzuki implies a positive view of her work, claiming that she was writing, rather admirably, 'on behalf of the tortured accused and midwives who were denied recognition as professionals'.²⁷ Evenden, on the other hand, judges that while Cellier's work has been used to support the view that a new training system for midwives was required, '[w]hen the terms of Cellier's grand scheme for a training school for midwives are examined [...] it becomes apparent that the major beneficiary would have been Mrs. Cellier herself'.²⁸ She pursues her line of argument by drawing attention to Cellier's dissatisfaction with the licensing system and the fact that her own proposal would have permitted the midwife to acquire a license for herself, which she had thus far been prevented from doing. In order to consider these arguments and come to any conclusions about the Cellier's meaning and motivations for writing, it is first important to examine the content of the text itself.

Cellier's pamphlet presents two arguments, the first for female ownership of the midwifery profession, and the second advocating a reorganisation of the administration of midwifery in London. The narrative style of the text is framed as the continuation of a conversation between Cellier herself and an unnamed male medical professional she had come into contact with, presumably the unidentified medical practitioner she acknowledges in her title. Her opening could be described as beginning in medias res, with the phrase 'To answer your Query, Doctor'.²⁹ From this early point, the reader is immediately drawn into Cellier's world, in which a passionate debate about the control and organisation of midwifery as a licensed profession is at the centre of her thoughts. Cellier's response to whatever the views expressed by

²⁷ Mihoko Suzuki, *Subordinate Subjects: Gender, the Political Nation, and Literary Form in England, 1588-1688* (Aldershot and Burlington: Ashgate Publishing, 2003) p.266.

²⁸ Doreen Evenden, *The Midwives of Seventeenth-Century London* (Cambridge: Cambridge University Press, 2000) p.74-5.

²⁹ Elizabeth Cellier, *To Dr. ____ An Answer to his Queries concerning the College of Midwives* (London: s.n., 1688) p.1.

her male counterpart in the discussion were both informed and assertive. The personal significance of the topic at hand, the present and future of midwifery, is unmistakable, indicated by Cellier's mention of having made a 'Promise' to set forth a proof that midwifery colleges existed 'some Hundreds, if not Thousands of Years before you can prove one of Physicians'.³⁰ In attempting to put her case forward, Cellier does not look for evidence of formalised institutions that controlled birthing practices, instead she focuses on the historical position of women as leading authorities on childbirth and the practical implications of the stories recorded in the Bible and classical medical texts. 'I will begin with the first; and desire you to read the first Chapter of Exodus', she instructs the reader, before giving the following select verses:

Vers. 15. *And the King of Egypt spake to the Hebrew Midwives, of which the Name of the one was Shiprah, and the other Puah.*

Vers. 16. *And he said unto them, When ye do the Office of a Midwife to the Hebrew Women, and see them upon the Stooles; if it be a Son, you should kill him: but if it be a Daughter, then she shall live.*

Vers. 17. *But the Midwives feared God, and did not as the King of Egypt commanded them but saved the Men Children alive.*

Vers. 20. *Wherefore God dealt well with the Midwives: and the People multiplied, and waxed very mighty.*

Vers. 21. *And it came to pass, because the Midwives feared God, that he made them Houses.*³¹

Where other texts analysed here have given little indication of the specific styles and rhetorical devices that might have been important to midwife-authors, Cellier's specific choice of religious material for her pamphlet indicates some of the earliest traditions among this small group of authors. The verses presented here are the same 'holy Scriptures' which Sharp also referred to in *The Midwives Book*, in which she summarised:

God hath given a special example of [midwifery], *Exod. I.* in the Midwives of Israel, who were so faithful to their trust, that the Command of a King could not make them depart from it, viz. *But the Midwives feared God and did not as the King of Egypt commanded them, but saved the*

³⁰ Cellier, p.1.

³¹ Cellier, p.1

*men children alive. Therefore God dealt well with the Midwives; and because they feared God, he made them Houses.*³²

Though she gives no direct reference to Sharp's text that would have indicated her awareness of the book, the similarity in their use of Exodus reveals the ways in which female midwives were taught about the seriousness of their role, not only as a public service, but also as one which constituted an important religious duty within their communities. Both midwives, by drawing attention to these verses, remind their readers of the significant role played by midwives in the Bible and the reward given to these women for performing the duties of their professional office to the highest possible standard, without allowing obstacles to stand in their way.³³

Where Sharp left this point to resonate in the mind of her reader, Cellier opted to pursue the argument further, interpreting what these verses implied about the history of midwifery. Her own, somewhat mathematical, reflection on these familiar passages claims, 'I believe no Rational Person will think that these two Women could in their own Persons act as Midwives to all the Women of that mighty *People*, who about 100 Years after went up out of *Egypt* 600000 Fighting Men, besides Women and Children'.³⁴ The case she makes her extends not only to the number of midwives who were required to have made this possible, but also to what this suggests about the creation of a skilled workforce of women who sought to serve their community. Her suggestion that the two midwives originally mentioned, Shiprah and Puah, could not have undertaken midwifery duties for every family proposes that they would then have found it necessary to act as educators to pass on their skills. In doing so, they therefore ensured that there would be sufficient midwives to sustain such a population over time. Without a documented

³² Jane Sharp, *The Midwives Book: Or the Whole Art of Midwifry Discovered*, ed. Elaine Hobby (Oxford: Oxford University Press, 1999) p.11.

³³ There may be a further link between Sharp and Cellier's religious reflections on their profession in so much as there are indications that both may have been practising Catholics at least at some point in their lives. Where Cellier is known to have been born into a Protestant family, and converted to Catholicism upon her marriage to a French merchant Peter Cellier, Sharp did not register herself as a practising midwife through the Anglican ecclesiastical licensing system, and her choice of patron for her text 'Lady Ellenour Talbutt', notes a possible Catholic connection. Talbutt, or Talbot, was the sister of John Talbot, 10th Earl of Shrewsbury whose family were known to have retained Catholic beliefs and practices throughout the turbulent political events of the seventeenth century. My thanks to the Hon. Christopher John Fletcher-Vane, Portcullis Pursuivant, at the College of Arms, London, for confirming Eleanor's appearance in Howard family pedigree sixty-three.

³⁴ Cellier, p.1-2.

history of women's professional achievements to refer to, Cellier was required to be a creator of early women's history. Penny Richards's analysis of the pamphlet explains that '[a]s with other women writers of the day, Cellier does not claim pre-eminence or equality for women in terms of their current situation, but through historical and biblical precedent' as a means of building an authoritative argument.³⁵

Her narrative moves from biblical quotations to the teachings of Hippocrates, and on to the stories of Agnodicea and Phaenarota, also known as Phaenarete, the mother of Socrates, in order to demonstrate the volume of evidence available at the time of her writing of women's desires to learn and their ability to '[s]tudy and [p]ractise all parts of Physick *to their own Sex*'.³⁶ Cellier's point was, in fact, more targeted than being able to provide medical help of all types to women. Though midwives could often be found advising women on gynaecological complaints, as well as care of infants and children, they were not a complete replacement for physicians, surgeons and apothecaries, who also treated women for other general ailments. Cellier was happy to acknowledge this, and the places where midwifery gave way to other areas of medical care that were beyond the remit of a midwife's knowledge. In doing so, however, she maintains a set of boundaries by which groups of practitioners can operate mostly independently of one another, while collaborating where necessary. '[W]e desire you not to concern your selves,' she advises her male addressee, 'until we desire your Company, which we will certainly do as often as we have occasion for your Advice in any thing *we do not understand, or which doth not appertain to our Practice*.'³⁷

In line with this admission of midwives' limitations, she does not claim that the broader operation and maintenance of midwifery as it existed in late seventeenth-century London was without fault. Contesting the system of ecclesiastical licensing of midwives to practise, Cellier makes a brief explanation of a proposal for which, she claims, she has been promised 'a Corporation' for midwives,

³⁵ Penny Richards, 'A Life in Writing: Elizabeth Cellier and Print Culture', *Women's Writing* (2000) Vol. 7, No.3, pp. 411-425, p.421.

³⁶ Cellier, p.4.

³⁷ Cellier, p.5

formalised by a Royal Charter [promised, she claimed, by James II himself] and the establishment of a ‘Cradle-Hospital, to breed up exposed Children, to prevent the *many Murders, and the many Executions which attend them*’ as victims of infanticide, and perhaps also potential abandonment.³⁸ Her description of an alternative method for ensuring a better quality of professional organisation for midwives reveals that she perceived there to be issues with the existing system as it was in 1688. A distinct lack of a formal institution for women practitioners, she felt, meant that midwives were at risk of being insufficiently equipped to practise to the best of their ability and, by extension, that mothers and children suffered as a result. The case that she presents against the practise of ecclesiastical licensing relies on an impersonal argument, that of London mortality rates. ‘I will make no Reflections on those learned Gentleman the Licensers,’ she explains to readers, ‘but refer the curious to the Yearly Bills of Mortality, from 42 to 62’.³⁹ This source, she suggests, speaks for itself by exposing the difference in these rates during the time in which midwifery licensing was managed by medical professionals at ‘*Chirurgions-Hall*’ compared to the ecclesiastical control at ‘*Doctors Commons*’ before 1642 and again after 1662. This continued to be the case at the time of her writing.⁴⁰ Her proposal, as it is outlined, favours an administration run by the medical establishment alongside the inclusion of assessment as part of licensing requirements, specifically that which had been tried and tested before in the form of ‘*pass[ing] three Examinations*’.⁴¹ Useful as this measure may have appeared for testing skills and abilities, should it have been reinstated, it was not the only further benefit offered by Cellier’s plan. Her scheme also took account of public health needs by developing a new set up of organisation and training, which she recommended, should operate through the founding of a hospital intended for the provision of patient care and obstetric teaching. Pairing a strategy for learning and teaching with the fulfilment of public needs appears surprisingly modern to anyone familiar with practice and placement-based learning techniques used in health and

³⁸ Cellier, p.7.

³⁹ Cellier, p.6.

⁴⁰ Cellier, p.6.

⁴¹ Cellier, p.6.

social care today. In addition to caring for mothers and infants in delivery, her plan shows possibilities for also protecting orphaned and illegitimate children who could not be raised in a family setting.

As a midwife herself, as Evenden suggests, it is possible that Cellier may have benefitted personally from the scheme. Any recognised body, which had the power to license and represent professionals, would require a structure whereby some individuals would take more senior roles than others. Given her ownership for explaining the idea to the public, it would seem likely that she envisaged an active role for herself in implementing the plan, possibly as the Corporation's head midwife, or at least one of a select number of senior midwives. For all that Cellier had found herself on the wrong side of the establishment more than once before, her situation appears to have improved by 1688, indicated by the favour she seems to have culled from the monarch. Richards and Helen King provide sufficiently convincing evidence to suggest that a reversal of fortunes had taken place. King looks to the Treasury papers of 1687, shortly before Cellier's midwifery pamphlet was published, and refers to 'the king's mercy [granted] to Elizabeth Cellier in regard to the sentence imposed on her in 1680'.⁴² Richards connects the midwife with the Royal family in a closer and more personal way. While concrete facts about the latter years of Cellier's life have not been fully established, she reveals:

The account of Francisco Riva, a member of the household of Mary of Modena, describes the Queen's flight from England with the five-month old Prince of Wales, Lady Powis, now his governess, and two nurses. It seems plausible to speculate that Cellier was one of these nurses, given her connection with Mary of Modena and Lady Powis. Certainly, there is tantalising evidence with regard to Cellier's existence in France in 1689. A Pierre and Elizabeth 'Sellier' were briefly imprisoned in the Bastille accused of Protestantism. Two references that refer to Cellier or to members of her family have been found in the parish records of St Germain-en-Laye dated 1693.⁴³

Whether or not Cellier did leave with the Royal family as Richards suggests, her feelings of loyalty were no secret, having been outlined in her pamphlet. To her critics she chose to take the Queen's

⁴² Helen King, 'The politick midwife: models of midwifery in the work of Elizabeth Cellier', *The Art of Midwifery: Early Modern Midwives in Europe*, ed. Hilary Marland (1993) (London: Routledge, 1994) pp.115-30, p.119.

⁴³ Richards, p.414. This viewpoint poses potential opposition to older views which located the site of Cellier's grave to be at a cemetery in Great Missenden. While this would not indicate immediate agreement with Richards's views, it is important not to rule out the possibility that the Celliers had gone to France and later returned to England before Elizabeth's death.

pregnancy at the time as a proof of her attachment to the family, and intelligence on her own part. She claims:

some Doctors have accounted me a Mad Woman, these last four years for saying Her Majesty was full of Children, and that the Bath would assist her Breeding: 'Tis now proved so true, that I have cause to hope my self may live to praise God, not only for a Prince of Wales, and a Duke of York, but for many other Babes by Her.⁴⁴

Her comment on the Queen's health was coupled with the pamphlet's explicit claim that 'in September last, our Gracious Sovereign was pleased to promise to unite the Midwives into a Corporation, by His Royal Charter, and also to found a *Cradle-Hospital*, to breed up exposed Children'.⁴⁵ The political events of that same year, precipitated by the birth of the very infant to whom Cellier referred in her pamphlet make it impossible to gain any measure of truth in her words, as James II was overthrown in favour of James's daughter Mary and her husband, William of Orange, before sufficient time or opportunity was made available for these plans to come to any sort of fruition. Given the lack of surviving material evidence to support Cellier's claims of having had royal backing, historians may question the authenticity of the level of support James may have wished to extend in reality. Such a direct reference to the support of a monarch would seem unwise, however, had it been either fabricated or exaggerated, especially in such a case as this where the author had already been subject to criminal proceedings and prosecution for libel because of a previous publication. Whatever her reflections may have been on past legal proceedings in which her writing played a key role, this did not prevent her from employing a strong narrative voice and making bold statements in her subsequent work. Her work, like Sharp's, contains very few clues as to what her own experience as a practising midwife may have been like. Unlike her predecessor, however, she gave no instruction or guidance to fellow midwives on the details of practise or proficiency in the skills needed in successful midwifery. Taking into account both the similarities and differences of the published outputs of these two authors, Cellier's short text can still be considered a successor to *The*

⁴⁴ Cellier, p.7.

⁴⁵ Cellier, p.7.

Midwives Book as it is an undeniable attempt to provide female midwives with a legitimate voice in an increasingly turbulent professional environment.

‘A Curious Herbal’: Elizabeth Blackwell

The only other midwife known to publish during this period was Elizabeth Blackwell, one of the most successful women to have produced a medical text on herbal remedies. Her work, *A Curious Herbal* (1737-1739), published first as a serialisation of prints before appearing as a complete volume, represents a woman’s commercial and entrepreneurial success in a way that had not previously been achieved, as well as the establishment of a previously unknown level of association with male medical professions, as her book was produced on the suggestion of, and with the assistance of, famed physician Sir Hans Sloane. Blackwell’s determination outweighed the obstacles she faced in attempting to make her name for herself as a herbalist.⁴⁶

Easily confused with a later pioneer of women’s medical education and practise of the same name and a somewhat obscure figure in biographical terms, little is known about either her own life or personal experience of midwifery. Bruce Madge has started to address some of these gaps by offering his own view on a number of conflicting claims that have emerged about Blackwell’s date of birth. The year of her birth has been given as both 1707 and 1713, dates which have been derived from christening registers identifying an infant born named Elizabeth Blachrie.⁴⁷ Madge attempts to calculate when she was most likely to have been born, based on other significant dates attached to Blackwell’s life including the years of which Blackwell, known before her marriage as Blachrie, was married, her death and the publication of her text. Based on these factual pieces of information he expresses the belief that Blackwell

⁴⁶ See Henrietta Nickels Shirk, ‘Contributions to Botany, the Female Science, by Two Eighteenth-Century Women Technical Communicators’, *Technical Communication Quarterly*, Vol. 6, No.3, pp.293-312, p.297.

⁴⁷ Bruce Madge, ‘Elizabeth Blackwell—the forgotten herbalist?’, *Health Information & Libraries Journal* (2001) Vol. 18, No.3, pp.142-52<<http://onlinelibrary.wiley.com/wo11/doi/10.1046/j.1471-1842.2001.00330.x/full#b4>> [accessed 22 August 2016] (para. 2 of 40). In the interests of distinguishing the two, the nineteenth-century physician Elizabeth Blackwell, the first woman to achieve a medical degree awarded in the United States was born considerably later, in February 1821. See Julia Boyd, *The Excellent Doctor Blackwell: The Life of the First Woman Physician* (London: Thistle Publishing, 2013) p.2.

was born in 1713, or perhaps late in 1712 if a christening was held early in the following calendar year.⁴⁸ From the small pieces of information historians have been able to glean about her life it seems to have been her husband, Alexander Blackwell, who was the main source of Elizabeth's exposure to both medical education and financial hardship. While the two need not necessarily be intertwined, in Blackwell's case it was her medical knowledge and the need of an income that brought her to training in midwifery. Madge cites the earlier work of Aveling and Alexis Delacoux with reference to Blackwell's having been educated in midwifery by her husband who, it is thought by these authors, studied medicine at Leiden.⁴⁹ He undertakes to question critically whether this version of events is plausible, given that Alexander Blackwell had joined the print industry by the 1730s. Even if it was not the case that the Blackwells shared medical learning in a family setting, the alternative possibility is that a woman named Elizabeth Blackwell is known to have participated in teaching offered by famed man-midwife William Smellie.⁵⁰ This might easily have been the same woman seeking other avenues to pursue her chosen trade.

Blackwell's publication is distinct from others discussed here, both in its content and the way in which it was produced. First, the central theme of Blackwell's book is neither medical practice nor the politics of women as participants in the medical environment. The text, fully titled of *A Curious Herbal containing five hundred cuts of the most useful plants, which are now used in the practice of physick, to which is added a short description of ye plants and their common uses in physic* is, as suggested, a herbal and one which relied less on the printed word than it did of Blackwell's detailed drawings, though any background to the development of her artistic skills remains unknown.⁵¹ *A Curious Herbal* was designed to be a botanical catalogue of the appearance and medicinal properties of a wide range of plants, most of

⁴⁸ Madge's explanation for two births registered with the same name, which is reasonable and logical, is the possibility of 'an older sibling Elizabeth, born in 1707, who died in infancy.'

Madge, para. 3 of 40.

⁴⁹ Madge, para. 8 of 40.

For Madge's own sources see Aveling p.113; Alexis Delacoux, *Biographie des Sages-femmes Célèbres, Anciennes, Modernes et Contemporaines* (Paris: Chez Trinquart, Librairie Editeur, 1834) p.37.

⁵⁰ Madge, para. 8 of 40.

⁵¹ Madge makes a general reference to Blackwell's early education which, he claims, would have included art. This would not necessarily explain her having skills sufficient to specialise in botanical drawings.

Madge, para. 4 of 40.

which came from the Chelsea Physic Garden. Blackwell's access to the plant material was provided willingly, through encouraging gestures extended to her by a number of medical professionals including members of the Worshipful Society of Apothecaries of London and Sir Hans Sloane, all of whom were involved in the Garden's maintenance and scientific usage.⁵² Her contribution to the medical print market was unique in its image-heavy nature and in its gradual production. Roy McKen Wiles includes Blackwell's work in his analysis of serialisation in English publishing prior to 1750. He does so in order to demonstrate the potential benefits of serialisation in financial negotiations surrounding an author's work. In the event that 'a work had already demonstrated by extensive sales that it was a money maker,' Wiles elucidates, 'the prices paid for shares of the copy were sometimes surprisingly high'.⁵³ In the context of Blackwell's case, he describes, that '[o]n September 28, 1737, John Nourse gave Alexander Blackwell notes for £150 in payment for one third share in the five hundred superb original plates of Mrs. Elizabeth Blackwell's *A Curious Herbal*, eighty numbers of which had by that date been published.'⁵⁴

One of Blackwell's key motivations for working on the *Herbal* was her personal financial situation. Pressures on the family's income derived from a court case in which Alexander Blackwell became embroiled due to an accusation of his trading in the print trade without having been apprenticed to do so. While the verdict returned was not that of imprisonment, the burdens of the payment for damages alongside the costs of his defence reduced him to being unable to pay debts, for which he was then imprisoned.⁵⁵ Blackwell required a project, therefore, from which she could generate an independent income in order to repay her husband's arrears and presumably maintain financial stability for the household at the same time. No information has been recovered that would enable historians to determine whether she was also practicing midwifery during this time, though as Ann Shteir notes, Blackwell went

⁵² Madge, para.26 and 1 of 40.

⁵³ R.M. Wiles, *Serial Publication in England Before 1750* (1957) (Cambridge: Cambridge University Press, 2010) p.176

⁵⁴ Wiles, p.176.

⁵⁵ Charles Henry Timperley, *The Dictionary of Printer and Printing, with the Progress of Literature, Ancient and Moderne* (London, Edinburgh, Glasgow, Dublin and Manchester: H. Johnson, Symington & Co, Fraser & Co, Curry & Co and Bancks & Co, 1839) p.651-2.

Sue Minter, *The Apothecaries' Garden: The History of Chelsea Physic Garden* (2000) (Stroud: Sutton Publishing, 2003) p.22-3.

so far as to relocate to accommodation nearer to the Gardens so that she would have easier access to the materials that were offered to her by friends.⁵⁶ This is possibly an indication of how dedicated she became to her work, the volume of drawings she produced and the information documented, showing the time-consuming nature of the project to which she would likely have had to be completely committed in order to negotiate the lengthy processes of serialisation and book production. Beginning in 1737, Blackwell took two years to produce the whole content of drawings and text before publishing the entire collection in two volumes. The finished product was published in 1739, and as Shteir further points out, provides one of the only examples of a female-authored herbal on record for the period.⁵⁷

Another of her motivations to pursue such an endeavour was the opportunity that was offered to her by a gap in the print market. Herbals themselves were by no means a new type of document, even in Blackwell's own time, but what Blackwell shared with readers was something different to what had gone before. Agnes Arber, herself the first woman to be elected a Fellow of the Royal Society for her work in the field of botany, highlights the earliest flourishings of western philosophical botany to have taken place in 'the unparalleled mental activity of the finest period of Greek culture'.⁵⁸ From Aristotelian botany to European herbal incunabulum, Arber traces a lineage indicating the long-standing traditions of the exploration of plant types and their uses. Though her work of documenting 'a chapter' of botanical history ends with the mid to late seventeenth century, this is not an indication that the study of botany itself suffered a stagnation or any sort of collapse in terms of professional or public interests. If anything, quite the opposite was true.⁵⁹ As well as the sustained interest of the apothecary population, there was plenty of interest from other groups too, including members of the professional medical community and many upper ranking women. Unlike many other scientific pursuits, botany was widely accepted as a suitable discipline for high-ranking women's interest and participation. Adorned with little descriptive

⁵⁶ Ann B. Shteir, *Cultivating Women, Cultivating Science: Flora's Daughters and Botany in England, 1760-1860* (Baltimore: Johns Hopkins University Press, 1996) p.40.

⁵⁷ Shteir, p.40.

⁵⁸ Agnes Arber, *Herbals: Their Origin and Evolution: A Chapter in the History of Botany, 1470-1670* (1953) (Cambridge: Cambridge University, 2010) p.xxvi.

⁵⁹ Arber, p.1, 6, 13.

embellishment other than notes about the plants which Blackwell chose to include in her text, her focus appears to have been making the text as practicably employable to as many readers as possible. As Blackwell explains in the opening lines of her complete volumes:

The Undertaker, being desirous to make this Work more useful to such as are not furnished with other Herbals, is resolved (for their Sake) to give a short Description of each Plant; the Place of Growth and Time of Flowering with its common uses in Physick, chiefly extracted from M^r. Joseph Miller's *Botanicum Officinale*, with his consent; and the ordinary Names of the Plant in different Languages.⁶⁰

Her words point towards the fact that readers may not have had recourse to a herbal publication before her own. At first glance, this may seem an odd claim especially given the longevity of botanical studies as a whole. It is not the lack of available texts that she alludes to, however, but rather the accessibility of those that did exist. Many scientific texts continued to be produced in Latin, which in essence limited their readership to those who had received the benefit of some kind of academic education in which classical languages played a role. While a small number of elite women were taught to read and write in Latin by governesses and tutors, few others would have had the same advantage. We cannot be certain that even Blackwell herself was sufficiently fluent in Latin in order to have been able to make a conscious decision about which language to write in, though her references to providing information in a variety of languages and her background of being from an educated Scottish family may suggest that she had academic privileges which were not open to all women. Whether she was or not, the fact that her text was published in vernacular print has considerable significance in the context of what she was trying to achieve. Despite what may be suggested by the Latin title, her model text, *Botanicum Officinale*, had been written with similar considerations in mind. The prefacing introduction of Joseph Miller's own book, published in 1722, explains his intentions for his book. He confides in readers that his own motivation to write did not stem from the 'Ambition of becoming an Author' but rather the need, as identified by friends, for a botanical text which would condense the vast amounts of information that were already available about botany into something more digestible that would not be too onerous a burden on the

⁶⁰ Elizabeth Blackwell, *A Curious Herbal containing five hundred cuts of the most useful plants, which are now used in the practice of physic*, Vol. I (London: John Nourse, 1739), No.1.

reader's time or efforts.⁶¹ '[N]othing to the Purpose,' Miller asserts, 'in this Kind, having yet been Published in English' had been produced.⁶² He then goes on to describe the efforts of 'Mr Dale' and 'Mr Ray', both of whom had already published botanical treatises. Miller praises Dale's text for its ability to meet the aims that he has outlined for his own text, but his own perspective on the text indicates that the information offered is insufficiently detailed as well as being in Latin, where 'Mr. Ray's Method (which too few understand) makes it not of so general Use, as it would otherwise be.'⁶³

In making her book 'useful' Blackwell opened up her knowledge to the broadest possible literate public, which meant writing in English, as well as giving much in the way of visual representation, making the plants which she described more easily recognised and thus more accessible to her audience. Among her descriptions of specific plants are discussions of how these might be used to cure common illnesses and injuries such as 'Disorders of the Head, Nerves, Womb, convulsion and Hysteric Fits, the Collick, Weakness of the Stomach and Bowels' as well as 'Inflammations of the Liver, Obstructions of the Gall-Bladder, and Jaundice'.⁶⁴

Blackwell's admission of taking medical information from another published source might seem, at least to a modern audience, tantamount to suggesting that her work was not an original medical publication or even her own work. Her approach to using of Miller's work within her own book and her lack of references to his text beyond the front matter might be viewed by some as plagiarism or at least 'poor academic practice' today, yet this is not the case when examining an eighteenth-century text. As Richard Terry explains in his exploration of eighteenth-century plagiarism allegations, how plagiarism was understood and identified during the period was not only different to our own present day concept but also somewhat fluid in that interpretations of plagiarism changed as the century progressed.⁶⁵

⁶¹ Joseph Miller, *Botanicum Officinale; or a Compendious Herbal* (London: E. Bell, J. Senex and J. Osborn, 1722) 'Preface'.

⁶² Miller, 'Preface'.

⁶³ Miller, 'Preface'.

⁶⁴ Blackwell, No. 2, plate 7; No.15, plate 59.

⁶⁵ Richard Terry, *The Plagiarism Allegation in English Literature from Butler to Sterne* (Houndmills: Palgrave Macmillan, 2010) p.4

Furthermore, Terry makes the astute observation that ‘it would be misinformed to suppose that even if the meaning of the term “plagiarism” in the eighteenth century were identical to our own, this would mean that the pattern of usage of “plagiarism” [i.e. places where it was used and, indeed, remained absent], or the working life of the concept of plagiarism, could then be assumed to be constant across time’.⁶⁶ As a result it is important to take into account the contemporary standards and traditions of authorship within which Blackwell would have sought to operate rather than attempting to retrospectively apply meanings and parameters that did not exist for the author. This is a central point of consideration, not just for Blackwell’s text but also other works written by eighteenth-century female midwives that will be explored.

The front matter of Blackwell’s text contains a ‘Recommendation’ that endorses her publication. This document is signed off in print by a number of leading medical men of the age including Isaac Rand, James Douglas and Richard Mead, to whom the text is also dedicated and, even more interestingly, Miller himself.⁶⁷ So supportive were these individuals that the recommendation itself reads:

We whose names are underwritten, having seen a considerable Number of the Drawings from which the Plates are to be Engraved, and likewise some of the Colour’d Plants, think it a Justice done the Publick to declare our Satisfaction with them, and our good Opinion of the Capacity of the Undertaker.⁶⁸

This short declaration leaves the reader in no doubt that Blackwell’s authorship, representative of her authority on her subject, should be trusted by the reader. An assurance of the book’s quality was included

⁶⁶ Terry, p.2.

⁶⁷ Blackwell, front matter, ‘Recommendation’. Penelope Hunting suggests that part of the encouragement Blackwell received to complete her text also came from Rand, the Director and Lecturer in Botany at the Society Physic Garden. Penelope Hunting, ‘Isaac Rand and the Apothecaries’ Physic Garden at Chelsea’, *Garden History*, Vol. 30, No. 1 (Spring, 2002) pp. 1-23. James Douglas was a well-known Scottish physician who practiced as one of the first man-midwives of the eighteenth century in London. He is also known to have been an early teacher of William Hunter, to whom he offered a position as his assistant. Cody, p.43; Mungo Campbell, ‘Introduction’, *William Hunter’s World: The Art and Science of Eighteenth-Century Collecting*, ed. Geoffrey Hancock, Nick Pearce and Mungo Campbell (Farnham: Ashgate Publishing, 2015) p.5. Richard Mead was a ‘highly significant figure for London medicine’, a member of the Royal Society along with Sir Hans Sloane, and was noted for his work on contagious diseases and also his involvement in the Foundling Hospital. See Ludmilla Jordanova, ‘Portraits, People and Things: Richard Mead and Medical Identity’, *History of Science*, Vol. 41, No. 3 (2003) pp. 293–313, p.294, 303.

⁶⁸ Blackwell, front matter, ‘Recommendation’.

in this expression of views by these prominent members of the educated professional medical population. The fact that Miller appears as a signatory to this statement and that the use of his work was ‘with consent’ indicates that he was happy to lend his support, not only to the overarching concept of Blackwell’s herbal, but also her use of his own material as part of the book. If nothing else, her use of ‘extracts’ implies that there was other information contained within Miller’s volume that she had not touched.⁶⁹ It would seem reasonable then to speculate that he may have viewed this as a useful opportunity to engage in promoting his own work and viewed another text with similar aims as a means of fuelling public curiosities about botany in a way that would bring benefits for those who were actively involved in research and publishing.

Blackwell’s reference to Miller’s text, as well as her inclusion of the names of other medical professionals who offered support, also served another, slightly different purpose. In the same way that Sharp made a point of accounting for her own reading of English and European authors and Cellier demonstrated her awareness of the medical practise of ‘Ambrose Perre’, the basic intertextuality signposted here operated as a means of Blackwell demonstrating her own informed, authoritative contribution to the medical world.⁷⁰ By mentioning other work in the same field as early as possible she refutes any notion that may have been implicit in a woman’s name appearing on the cover of the text as an ignorant or less-informed source than those produced by her male counterparts. In the instances of Trye, Cellier and Blackwell’s texts being published, these women writers show a clear understanding of

⁶⁹ Blackwell, No.1.

⁷⁰ Here Cellier makes reference to the medical practice of the renowned French ‘Chirurgion’ Ambroise Paré. Paré was employed as a military surgeon, or *chirurgien*, to Henri III of France. His published works were some of the first to include sections dedicated to developing a deeper understanding of reproduction. Although criticised by the *Faculté de Médecine*, whose members attempted to restrict the dissemination of Paré’s ideas, his work remains known for its reintroduction on classic techniques for safer births including podalic version as a response to placenta praevia. Those who studied with Paré, or were influenced by his works, included his son-in-law Jacques Guillemeau (see Appendix A) and Martin Boursier, a military surgeon and his wife Louyse Bourgeois, midwife to the French court. Lianne McTavish, *Childbirth and the Display of Authority in Early Modern France* (Aldershot: Ashgate Publishing, 2005) p.146; Bridgette Sheridan, ‘Whither Childbearing: Gender, Status and the Professionalization of Medicine in Early Modern France’, *Gender and Scientific Discourse in Early Modern Culture*, ed. Kathleen P. Long (Farnham: Ashgate Publishing: 2010) pp. 239-258, p.247-248. For further reference to Paré’s influence on Bourgeois see Susan Broomhall, *Women’s Medical Work in Early Modern France* (Manchester: Manchester University Press, 2004) p.133. Cellier, p.5.

the need to integrate their works within the existing textual corpus of their respective fields. There is a further, silent, implication that, because they were among the first women to position themselves in medical publishing, references to male-authored works were felt to be required as a mark of authentic interest and ability to reflect on the technical nature of their subjects.

Conclusion

While public interest in matters of health increased from the late seventeenth century onwards, and the changing interests of medical professionals toward childbirth as part of the scientific discourse of the period, the momentum of publishing on these subjects was a matter of gradual acceleration prior to 1737. With the notable exception of Jane Sharp given in Chapter One, the number of texts published by women that could be classified in any way as medical remained relatively sparse over the period of almost eighty years between 1658 and 1737. Additionally, while the range of content among these texts has proved wide and varied, it is difficult to point out any single author who might constitute an immediate successor to Jane Sharp as far as being able to identify a female midwife writing and publishing on the subject of her professional practise is concerned. Only Cellier comments in any detail on the profession itself but, even so, her contribution is led by her motivation to advance political views of the status of the profession rather than sharing expertise she herself had gained from assisting women in the parish of St. Clement Danes with their own childbirths.⁷¹ Though her tract undoubtedly added to the presence of authoritative women's voices in print, the short space provided by a pamphlet inevitably limits what the author is able to convey of her own perspective, including the details of her own practise.

Yet, despite the array of limitations which meant that women's writing on childbirth was not a sizeable genre, these texts do play a considerable role in, and achieve many things for, women's medical writing as a whole. Elizabeth Tebaux finds these early examples of what she refers to as women's technical writing so significant that she suggests they 'provide a microcosm for studying the rise of

⁷¹ *The Triall of Elizabeth Cellier, at the Kings-bench-Barr on Friday June the 11th, 1680* (London: Randal Taylor, 1680) p.4.

modern English prose and what we now call technical (or plain) style'.⁷² Each text analysed here without doubt offers evidence of female authors facing up to the challenges of innovation, creating their own types of narrative without having a strong tradition of literary history behind them. They were required to start from grass-roots, and to navigate their way through difficult terrains of contemporary politics, whether this meant discussing the monarchy, religion or the institutionalised cultures of male education. None of these women was known to have reached professional author status, or indeed achieved a great deal of fame or fortune from their works, but their texts laid much essential groundwork upon which women authors of the eighteenth century, both medical and literary, were able to build.

⁷² Tebeaux, p.126.

Chapter Three

'To take up the pen for public perusal': Narrative, Metadiscourse and Literary Engagement in

Women's Reproductive Writing

Introduction

Is it not very surprising, nay and unaccountable, that tho' almost all the other parts of Surgery have been cultivated with great assiduity, by the most knowing Men, ever since Hippocrates, nay and before him, yet ('till about the middle of the last century) the operations necessary for the safety of women in labour, and their children; operations of more consequence to mankind than almost the rest...seem to have been entirely left to a parcel of ignorant women, or to Men little better qualified than they, who upon any difficulty (as too many still do) took hooks or knives, and carved the children to pieces; and often also destroyed the Mother?¹

John Douglas's *A short account of the state of midwifery in London, Westminster, &c* (1736) opens with the claim that midwifery, or accouchement, remained the most underexplored area of surgical practice, despite there having been translated works available for almost two centuries, and original English works for almost half of that time. Douglas's analysis of medical discourse points out that there remained a sense of slow progress in terms of the research and practice which led reproductive medicine from the shadows, out into the light. As the works listed in Appendix A indicate, Douglas's statement may have been taken as something of a sounding call, given the acceleration of the production of medical literature on the subject of reproduction after 1736 through the remainder of the century. Particularly noticeable is that Douglas himself posited this viewpoint while also arguing for increased legitimacy around the terms of 'man-midwife', which he saw as a ludicrous and inaccurate reference to male practitioners due to its use of the word 'wife', and 'midwife', over which he argued that a 'maid', or unmarried young woman, could still practice and therefore was not required to be married, or a 'wife'.² In doing so, his suggested replacement titles of 'accoucheurs' and 'Midwomen', though still reflective of a hierarchy that persisted within the medical community, offered each group of practitioners a sense of distinction of one group

¹ John Douglas, *A short account of the state of midwifery in London, Westminster, &c* (London: Printed for and sold only by the author, 1736) p.1.

² Douglas, unpaginated leaf, 'N.B.'.

from the other while allowing both to develop expertise, practicing and publishing on matters relating to their medical expertise.

Though a number of male professionals' names and published works have become synonymous with the history of eighteenth-century obstetrics development, including William Smellie, William Hunter and John Leake, the majority of women's written contributions to eighteenth-century midwifery have gone almost entirely unnoticed for generations. Though much scholarly attention has been paid to Sharp's seventeenth-century *The Midwives Book* (1671) surprisingly little has been explored in relation to the book's direct successors. Sharp's written work, alongside that of Louyse Bourgeois, pioneered a model of women's theoretical and practical experience being applicable and contributing to the research and development of reproductive science and pedagogy. While only six female midwives and one woman of the lay public published on their working subject of expertise, their texts are particularly important individually and in context with one another. Each one reflects the small but certain presence of the female authorial voice in the medical field, differing considerably from the works of male contributors in the field.

This chapter uncovers what the specific contributions of five female practitioner-authors were and how their texts interacted with broader literary developments of the eighteenth century.³ Female practitioners used alternative forms of rhetoric to those which had traditionally been employed by male medical practitioners, including a more literary based set of narrative structures, to convey their own advice and methods regarding obstetric care. Ernelle Fife's analysis of gendered medical publishing claims that female-authored texts possessed an exclusive form of rhetoric which she labels 'circular discourse: language that is more metaphorical than analytical, non-technical, highly discursive and

³ There was also one more female author to write on matters relating to childbearing during the eighteenth century than is included in this chapter. Sarah Brown, though writing on matters relating to childbearing, gives no indication of being a midwife within her text. Instead, she offers a narrative of guidance she thought would be useful to the public from the perspective of a mother rather than a practitioner. Her work is not included in this chapter or Appendix for this reason, as these documents maintain a focus on the work of practitioners only. Though interesting to the development of thinking on reproduction, her written work would require a separate analysis of her rhetoric and style, given that she appears not to have been apprenticed or educated in the same ways as the five women whose works are examined here.

attuned to the emotional as well as the physical health of the patient' than the style of similar outputs from their male counterparts.⁴ By focusing on the literary styles and narration of each midwifery manual, scrutinising how each was written, rather than solely concentrating on the scientific knowledge advocated among midwives, these sources begin to reveal their importance not only as medical treatises, but also as larger contributions to the eighteenth-century print market.

Perceptions of Eighteenth-Century Midwives' Narratives

Male midwifery writing had strong roots in the old traditions of medical writing which, in the latter half of the seventeenth century, still appeared frequently in Latin print. As Appendix A indicates, the male-led area of reproductive medicine and research, as a relatively new discourse, opened up opportunities for information to be handled in alternative ways, including the rapid uptake of the option to write in vernacular English rather than Latin. Fife describes the writing of a range of male-practitioner authors throughout the period as being made up of

linear discourse: discourse that is highly analytical, rarely metaphorical or discursive, and while possessing numerous details of the patient's physicalness, rarely notes her emotional state of being. The male midwives' vocabulary is more technical, with frequent use of Latin, but with far less repetition and metadiscourse than the women's. The male midwives also provide far more specific details of the labo[u]r process, including measurements, but rarely give details of the patient or child; the pregnant woman is treated merely as a body. None of the men invokes God to any great extent, and then, in the most general way.⁵

Fife readily acknowledges that her findings are not applicable to all reproductive treatises and manuals produced. Her discussion concentrates on texts written by Thomas Denman, William Smellie and William Hunter, however a minority of examples such as Culpeper's *A Directory for Midwives* rely more heavily on qualitative, informal discussion of its themes than others produced by male practitioners. The majority of texts featured in Appendix A do in some way resemble the description offered here.

⁴ Ernelle Fife, 'Gender and professionalism in eighteenth-century midwifery', *Women's Writing*, Vol.11, No.2, (2004) pp.185-200, p.186.

⁵ Fife, p.186-87.

The same cannot be said of those produced by female authors. Women writers in the field of midwifery operated their practices on the basis of a different set of experiences, learning and interactions with patients. Numerical measurements are rare within their work, Fife notes, as is Latin, which is not used as a substitute for English in the texts she examines by female midwives Jane Sharp and Sarah Stone.⁶ When compared to writing produced by Thomas Denman, William Smellie and William Hunter, she suggests:

Both [of these authors] have more frequent use of metadiscourse and repetition. While neither gives much attention to the entirety of their patients' life experiences during delivery, their descriptions do include other aspects of women's health and a greater sensitivity to the women's pain. Also, both women invoke the importance of God's help for a safe childbirth in difficult situations.⁷

Though these findings by Fife are useful in gaining insights into what the impact of educational differences between male and female practitioners was on published outputs, Appendix A reveals that there are a number of limitations presented by the case studies selected. In terms of range, while more than one case study from men's and women's writing is used, these five texts represent only a very small proportion of an expanding market. Those selected also show a divergence in chronology of publication between male and female authors. Sharp and Stone represent the early part of medical publishing on the subject of childbirth, having published before 1750, where Smellie published *A Treatise on the Theory and Practice of Midwifery* between 1752 and 1766, Denman's *An Introduction to the Practice of Midwifery* appeared between 1788 and 1795, and though Hunter's diary of practise was unpublished until 1908, its chronology covers dates between 1762 and 1765. As a result, gendered authorship is not the only variable in Fife's comparison but also time.

Building on the findings of the previous two chapters, this chapter expands the evidence base of medical texts produced by women practitioners throughout the eighteenth century from those who have been explored by scholars to date. In doing so, my aim here is to uncover how women practitioner-

⁶ Fife, p.186.

⁷ Fife, p.186.

authors in the field of midwifery used distinct forms of narrative of which they could take unique ownership in order to convey their own advice, methods and unique perspective on obstetric care, essentially creating their own medico-literary tradition. Isobel Grundy has also indicated that modern historiography has been too often inclined to disassociate ideas of change and progress within Enlightenment cultures from women's midwifery practice. 'Enlightenment midwife', she protests, 'sounds like an oxymoron.'⁸ Yet, her detailed examination of Sarah Stone's *A Complete Practice of Midwifery* (1737), one of the texts to be examined here, challenges exactly this idea that female practitioners could not be a part of shaping midwifery as it was during the 1730s, and as it would be for the decades to follow. Grundy makes her greatest contribution to women's literary-medical history in her concluding remarks about the specific contribution Stone was able to make in terms of redefining what it meant to be a midwife through her text. 'Her book', she shares, 'constructs its author: a woman who works with women, who works with brain and brawn, with study, emotion and prayer.'⁹ This concept of the ability of a text to shape not only its author, but the contexts and communities surrounding the author is a powerful one to extend across this group of women and their literary outputs. Both Fife and Grundy's analyses contain the implicit suggestion that these women contributed to women's literary history as well as medical history by using their knowledge of procreation to be creative, an idea which is worthy of detailed consideration. Alongside Stone's text, the works of Elizabeth Nihell, Margaret Stephen, Martha Mears and Mrs. Wright will be considered for their ability to tell stories, introducing a new form of medical writing. Each lends itself toward considering the ways in which women practitioners specifically related to the subject of childbirth and the ways in which this empowered women to learn, practise and write with authority.

⁸ Isobel Grundy, 'Sarah Stone: Enlightenment Midwife', *Medicine in the Enlightenment*, ed. Roy Porter (Amsterdam: Rodopi, 1995) pp.128-144, p.128.

⁹ Grundy, p.140.

The Literary Midwife: Sarah Stone

During the time in which Elizabeth Blackwell was producing and selling her botanical drawings and accompanying information as serialised prints, and Douglas was publishing his commentary on midwifery in England, another midwife was also looking to engage with the public through publishing a medical text of her own. Sarah Stone's *A Complete Practice of Midwifery* (1737) was unlike its forerunners discussed in Chapter Two, as this text continued the work begun by Sharp's book by directly addressing the subject of midwifery and recounting methods of practice whilst simultaneously addressing the matter of women's positive contributions to childbirth management in England. Changes in medical practice and publishing meant that the specific issues surrounding birthing attendance as a profession were different for Stone compared with what they had been for Sharp. Where Sharp had undertaken to address the increasingly visible rise in male interests towards childbirth as a matter of intervening on a simple misconception that male practitioners were in any way best placed to undertake the duties of a midwife, Stone's relationship with man-midwives is more complicated. On occasions she decries the practice of insufficiently trained male practitioners, but advocates the role of the physician where a difficult birth occurred. This need to engage with men on a professional level meant that, unlike Sharp, she could not reject male interest and involvement in the trade outright in favour of female-led practice. Instead, she chose to levy some of her criticisms specifically at those practitioners, both male and female, who she saw as ignorant and lacking in proper training opportunities.¹⁰ The desire to explore and emphasise practical skills and training involved in the tasks associated with these roles outweighed any need in Stone's eyes to attempt ousting the growing population of physicians and surgeons who were offering their services inside of the birthing chamber.

¹⁰ As Chapter One of this thesis indicates training opportunities such as lectures and courses were more easily accessed by practitioners in metropolitan location such as London and Edinburgh, making physical distance and cost barriers to participation for provincial and rural-based practitioners, see p.73-74.

Sharp's theoretical style of writing had developed in a way which meant that she organised her book by relevant topics, dealing first with anatomy before progressing to matters of midwifery practice, but Stone focuses strictly on the applied aspects of learning by presenting a collection of cases from her own personal experience. It is possible that she made a conscious decision to depart from Sharp's style, whose work she may have read as the only English example of a female midwife sharing her expertise in print. Her use of the case study format meant that she was able to simultaneously utilise and resist the fashions of medical literature that were promulgated largely by men with medical degrees, as we will encounter in her style of recording individual cases. The choices Stone made for her own text appear to have been influenced by a more recent contributor to the market for midwifery texts, William Giffard. A 'man-midwife of extensive practice in London', his text *Cases in Midwifery* (1734) was only published posthumously under the supervision of Edward Hody three years after his death.¹¹ Though it would be near impossible to tell which editing choices were Hody's compared to Giffard's original manuscript work, for the text to comprise two hundred and twenty-five detailed complex cases it would seem a difficult publication to assemble, even for a medical practitioner, if the caseload at hand was not their own.¹²

The format of the case study was particularly significant for writing during the eighteenth century. Though, as Gianna Pomata points out, the case study was certainly not a new invention of the period and actually dated back to ancient medicine, new possibilities emerged for the genre, particularly in relation to published print, during the eighteenth century.¹³ Like Giffard, Stone chose a range of her own cases which demonstrated her involvement with more difficult birthing scenarios, particularly those

¹¹ Philip K. Wilson, Charles R. King and Ann Dally, eds., *Midwifery Theory and Practice*, vol. 2 of *Childbirth: Changing Ideas and Practices* (New York: Garland Publishing, 1996) p. x.

¹² The format of case studies and volume of those included suggests that Hody had access to a full set of detailed records which had already been produced by Giffard himself. Given that the text is thought to comprise cases handled throughout his career, the cases themselves suggest that Giffard was consistent with his record-keeping and made notes of almost all of his patient cases. Edward Hody is listed in *The Roll of the Royal College of Physicians of London* as a physician of Devonshire origin, who studied medicine at Leyden and Rheims. He practiced at St. George's Hospital and died in London in 1759. See William Munk, *The Roll of the Royal College of Physicians of London*, Vol. II (1701-1800) (London: Longman, Green, Longman and Roberts, 1861) p.147.

¹³ Gianna Pomata, 'The Medical Case Narrative: Distant Reading of an Epistemic Genre', *Literature and Medicine*, Vol. 32, No. 1 (Spring 2014) pp. 1-23, p.7.

in which her intervention occasioned a more positive outcome than was otherwise expected. As Jane Beal explains, Stone ‘follows a process that has been codified in modern times in the SOAP acronym and note-taking approach’ which represents the method of providing a ‘subjective report, based on her listening to the woman’s own explanation of her concerns’ before further examination wherever necessary.¹⁴ This structure places particular emphasis on the physical presentation of the patient, and with Stone further referring to the emotional state of patients on her first encounter with each individual, the judgments she makes as a result, and her immediate and later decisions and actions required for the specific case. Though her text promoted a more learned approach for midwives, one which encouraged women to aim at extending their professional knowledge through practice and reflection, Stone prioritised the telling of stories of individuals and the centrality of birth to individual families, seeking to raise the profile of birthing assistance as a whole.

In contrast to Giffard’s voluminous text, Stone presented a much smaller number of cases, organised as forty-three individual ‘observations’.¹⁵ Her ‘Preface to the Reader’ highlights the wealth of experience she had accumulated through her training as an apprentice, and through which she had become a deputy midwife within her mother’s practice, before then moving on to taking on a senior position within the communities of Taunton, Bristol and London.¹⁶ The very cover page of Stone’s book refers to having ‘selected’ them from a ‘very EXTENSIVE PRACTICE’.¹⁷ Though her criteria for choosing cases to share is not made explicitly clear to the reader anywhere within the text, those which are included do represent some of the more complex of Stone’s experiences with patients. In the event that a difficult case was beyond the capabilities of most midwives, a senior member of the profession may be called, or even a physician. In thirty-one of Stone’s cases she was not the only practitioner to attend the birth at

¹⁴ SOAP is an acronym used in contemporary clinical record keeping and stands for ‘subjective, objective, assessment, and plan’. Jane Beal, ‘Sarah Stone: An Early-modern English Midwife’, *Midwifery Today*, Issue 113 (Spring 2015) pp.50-52, p.51.

¹⁵ Sarah Stone, *A Complete Practice of Midwifery* (London: T. Cooper, 1737) cover page.

Observations VII describes the delivery of two women, making the total number of pregnant women included in the book forty-four. Two of Stone’s observations, XIV and XX, include multiple births which brings the total number of infants delivered throughout the course of the text to forty-six.

¹⁶ Stone, p. xv.

¹⁷ Stone, cover page.

hand, indicating her presence as an authoritative voice, advanced in her technical abilities in comparison to the other midwives who had attended the women whose cases are described. Her acceptance of man-midwives who fitted her own description of ‘men of erudition, grave and sedate, and whose judgements are unquestionable’ meant that on occasion, she also saw the value of calling upon such a man if the situation required additional support. In Observation XLII Stone notes having repeatedly ‘urg’d the Woman, her Mother, and Friends to send for a Man’ specifically because she ‘despaired of delivering her without an Instrument’.¹⁸ Stone, first taking pains to describe her own efforts to deliver the woman of a child ‘Fac[ing] towards the Belly’, continued to explain how she ‘desired to relinquish [her] place, insisting on having a Man-midwife sent for’.¹⁹ In this case neither the patient nor those supporting her through the birth would consent to having a male practitioner complete the delivery with instruments, and so Stone was tested in her ability to resolve a difficult delivery by other means. She reports having eventually come ‘to a Resolution to turn the Child, and bring it by the Feet’.²⁰ Her attempt at a manual intervention of ‘turning’ to deliver the child in breech position, she further comments, was successful. The infant survived the delivery and, Stone reports, ‘[t]he Woman and Child did well’.²¹

This development of events within the lying-in chamber was not typical, however, of Stone’s cases and her narration most often discusses her later career whereby she was the senior practitioner making a late intervention into a delivery rather than relying on help herself. Observation VI describes the delivery of a ‘Tucker’s wife in *Taunton*’, who had been attended by a physician and three midwives for complications surrounding the delivery of the ‘*Secundine* (or After-Birth)’ before Stone’s presence was requested.²² The narrative of the Observation itself is divided almost exactly into two, with the first twenty-seven lines giving the reader the context of the various struggles of the four practitioners who attended first, and the next near twenty-seven lines being used to describe Stone’s own actions and their

¹⁸ Stone, p.151, 152.

¹⁹ Stone, p. 149, 151.

²⁰ Stone, p.152-53.

²¹ Stone, p.153.

²² Stone, p.14.

consequences. In the events of the case itself Stone, unusually, did not deliver the infant for herself, as the birth had already taken place. This being the case, the Observation focused on her postpartum interventions, made in the interests of saving the mother's life from dangers associated with an undelivered placenta.

Stone's choice of language to indicate that the infant 'came from [the patient]', alongside a gestational date of twenty-two weeks without any further reference to the child in the concluding notes of the case, makes the only reasonable conclusion that the child died due to premature birth.²³ In focusing then on the health of the mother, Stone stresses the actions of the woman's own midwife in delivering her of the infant, the physician who 'order'd her Medicines', and a further two female midwives who joined the attempts to manage her 'extreme[ly] weak condition, with continual Floodings'.²⁴ With these efforts detailed, the subsequent progression of the story allows Stone to highlight the desperate circumstances that she faced in fighting to help the woman who was in considerable danger. In addition, Stone also ensures that the reader is aware that her role in assisting her patient did not come until eight days after the delivery of the child, emphasising the length of time the patient had been in danger, as an undelivered after-birth was a precarious situation even for short periods of time. With the likelihood of a positive outcome fading fast, and with others unable to claim the least bit of success through remedies, the case appearing to be up against 'all human reason expiring', Stone was still able to ensure that the patient did not die.²⁵ By manually introducing her hand into the womb, Stone was able to deliver the remainder of the secundine, meaning that the patient was able to recover, though '[i]t was near five months before she recover'd strength to go abroad'.²⁶

Her narrative presents her action as swift and certain. No time scales are offered by Stone as to how long it might have taken her to '[bring] off the After-Birth in divers pieces, [which was] very rotten

²³ Stone, p.14.

²⁴ Stone, p.15, 14.

²⁵ Stone, p.15.

²⁶ Stone, p.16

and offensive', and she declines to comment on any discussion she had with the other practitioners who had attended the woman, in which she must have participated in order to have gained details of the woman's treatment prior to Stone's arrival.²⁷ The central point around which the remainder of the account revolves is the fact that Stone had single-handedly succeeded where others had failed, even a male medical professional vastly more qualified than she in academic terms. Although she does allow the physician a place of knowledge and authority, by reporting his having shared his beliefs with her that 'twas his opinion [the After-Birth] must be brought off; but her Midwives said it could not be done', Stone herself remains the victor in having saved the patient without any assistance from any of the involved practitioners.²⁸ Grundy further identifies this trait in her observation that Stone's 'was unlike most midwifery treatises in the importance to it of the author's self-construction' and 'demands literary analysis, not only because of the literary skill it displays, but because of the degree to which it is shaped by techniques borrowed from heroic romance and scriptural narrative'.²⁹

Indeed, as Grundy reflects, the presence of a conscious 'self-construction' of Stone as a character does appear in her own writing, colouring her case recording. Though her style does not compromise the text as a medical treatise as a whole, there is a natural inclination towards conveying a pattern of triumphs in Stone's practice. Observation XXVI highlights Stone's having overcome obstacles that thwarted two other midwives in their attempts to deliver a woman.³⁰ The title reflects as much, and the details provided in the first line of the case study reiterates the same. Stone's entrance upon the scene was made after 'a Day and a Night' spent 'endeavouring to turn the Child', with both midwives 'at hard labour; but the poor Woman at much harder'.³¹ With the disarray of so many efforts and so little progress, Stone wasted no time in pursuing a course of action. No hesitation is documented, or even a period of planning. She simply recalls having 'laid [the patient] on the bed, on her left side, and search'd for the Feet, which [she]

²⁷ Stone, p.15.

²⁸ Stone, p.16.

²⁹ Grundy, p.131.

³⁰ Stone, p.85-86.

³¹ Stone, p.85, 86.

easily found', words which imply decisiveness and dexterity in her management of the woman's case.³² After which, she recounts having 'turn'd the Child, and deliver'd her with a great deal of ease in less than ten minutes'.³³ Though she acknowledges that the midwives' efforts prior to her arrival 'had made such way, that occasioned the [d]elivery to be easy', she continues to point out that the practices that had been employed, in attempting to 'return the Arm [that delivered first]' and deliver by the head or feet first, were not those that she would have recommended, as she claimed to be able to 'pass by the Arm and come at the Feet' without the difficulty of additional manoeuvres.³⁴ In pointing to the variation of her own practice from that of her fellow midwives, the implication is clear that her knowledge and skills were superior to those of her contemporaries.

The two genres selected by Grundy, 'heroic romance and scriptural narrative', are not those that would necessarily be most closely associated with treatises on childbirth or even medical literature, but they are among those in which bold or unique exploits by a central character would reap the greatest benefits, therefore the advertising benefits of writing in a mode akin to these two are clear for a medical practitioner. Stone was not the only practitioner to employ this type of strategy as a means of conveying their advice and experience. As Eve Keller points out in her analysis of male-authored midwifery case histories, not all male medical professionals involved in deliveries during the eighteenth century conveyed their experience in the same ways. 'If [Edmund] Chapman constructs the mother as a hapless victim in order to advance the lessons of his own heroics,' she explains, 'William Giffard takes another tack to achieve quite similar results, nearly effacing the mother altogether or reducing her to a litany of body parts.'³⁵ Here Stone's departure from Giffard's methods of writing is at its most pronounced, alternatively sharing some traits of style with Chapman.

³² Stone, p.85-86.

³³ Stone, p.86.

³⁴ Stone, p.86

³⁵ Eve Keller, *Generating Bodies and Gendered Selves: The Rhetoric of Reproduction in Early Modern England* (Washington DC: University of Washington Press, 2007) p.179.

Edmund Chapman first published *An Essay on the Improvement of Midwifery* in 1733, a text which was then followed up with subsequent editions in 1735, 1753 and the last in 1759.³⁶ His examination of medical practices surrounding childbirth is initially more theoretical than Stone's slightly later contribution in terms of its written style; the first section of the book is, as the title suggests, an essay devoted to issues of technical competence. Chapman's first four chapters, 'Of a Child presenting with its head', 'Of the Method of turning a Child, when, it is to be done', 'Of the placenta, or After – Birth' and 'Of floodings', each address common themes that medical practitioners frequently came into contact with in their practice, and as Fife indicates in her definition of 'linear discourse', conforms to the standards of impersonal analysis of the facts at hand. The final section of his text comprises a series of case studies from his own practice. Chapman first deals with his reason for taking on the matter in each case study by including details of key symptoms such as 'violent *Floodings*' (Case VIII), or 'the Child presented with the *Feet*' (Case XV), usually in the first line, before focusing on his own interventions.³⁷

The 'heroics' referred to by Keller are evidenced in his record-keeping of cases, the individual narratives of which Chapman himself is most frequently the main subject. He and Stone share a philosophy in relating their experience of each case in order to prove what their expertise was able to offer given the stage they had entered upon the activity of providing medical support. An example of Chapman's depiction of himself as a life-saving force for good is contained in Case XXVIII. A short case about a woman 'delivered of a dead Foetus after the Birth of a living Child' reads:

A Large Child was born by natural Pains in about two hours after the Mother was taken in Labour: I attended her, and passing my Hand, (as my constant Practice is,) into the Womb the Moment the Infant was born, in order to receive the *Placenta*, I found another Child: I then delivered her of a *decayed* Child, about the Bigness of a Foetus in the *Sixth* Month, and of two distinct *Placenta's* [sic]. Now had an ignorant Midwife been concerned in this Case, who had only taken the first *Child* and *After-Birth*, the last would probably have been left behind, and so

³⁶ Chapman also entered into dialogue with John Douglas in publishing *A reply to Mr. Douglass's Short account of the state of midwifery in London and Westminster* (1737).

³⁷ Edmund Chapman, *An Essay on the Improvement of Midwifery* (London: A. Blackwell, A. Bettesworth, C. Hitch, J. Walthoe and T. Cowper, 1733) p.61, 70.

either violent *Floodings*, or a bad *Fever* would have ensued: and as the Woman was before very ill and extremely weak, it would have very likely cost Her her Life.³⁸

Chapman highlights his own actions within the first sentence, emphasising the significance of his role in saving the woman, before pointing out the reasons why another practitioner may well have failed where his own powers of observation and investigation had succeeded. Both Stone and Chapman serve as protagonists in their respective works and their ultimate success within their careers, which is measured by what they each faced and controlled in the lying-in chamber. Yet, where Stone was keen on educating by ‘weav[ing] a series of tales which possess the complex, compelling shapes of narrative art, and which succeed in realizing the [full] experience of birth-attendance’, Chapman rarely included any details which indicate the humanity and individuality of a patient, at most referring to attending ‘a Gentlewoman’ or ‘the Wife of a Captain of a Ship’ before progressing on with clinical comments or contextual details of the situation at hand.³⁹ Stone’s view of recording her practise meant that that her narrative style included a wealth of detail about the patients themselves and sometimes their perspectives relating to their pregnancy. Observation XXXVI begins: ‘A Farmer’s Wife that lived two Miles in the Country, came to speak with me, and told me, she had four months to reckon, tho’ by her Bigness, I thought she could not have one; but she told me, she was sure it was so.’⁴⁰ Though her concerns were evident, the patient’s view was valuable to her nonetheless, and from the earliest possible point that the case was brought to her attention. Rather than adopting what might have been considered the appropriate scientific or at least technical rhetoric, focusing on anatomy and procedure over experience, Stone puts her own mark on the text by being just as interested in conveying a narrative as a message of medical practice.

Her case studies were not restricted, however, to simply regaling the reader with tales of her own victories. Unlike Chapman’s narrative style, which as Keller notes makes little of the delivering mother,

³⁸ Chapman, p.81-82.

³⁹ Grundy, p.136.

Chapman refers to having attended gentlewomen on numerous occasions throughout his set of case histories. Examples are to be found in Chapman, p. 55, 63, 65, 73, 74, 86. His attendance on a Captain’s wife is detailed in Chapman, p.86

⁴⁰ Stone, p.126.

Stone's practical techniques and part of her own narratological method were based on a female-centric model of care which placed the mother, as the patient, in a position of power and autonomy to control the process as far as possible. She specifically retains a perspective throughout which advocates the belief that each of her patients should be permitted to choose their own birthing position, unless a complexity developed during the course of the birth which demanded certain emergency practices. Although she suggests that the midwife may advise on birthing positions that may contribute to the comfort of her female patient, her stance largely subscribes to a more flexible view, commenting 'I don't approve of compelling Women to any particular place against their inclinations.'⁴¹ Her text places women at the centre of midwifery practise, both as patients and practitioners. She does so in realistic ways that do not deplore male-led practise of birthing attendance altogether, but still seeks to assert the potential female midwives possessed to become voices of independent authority with good guidance, while also rejecting the idea of a patient being a passive component in her work. Stone's book provides a useful example of a female practitioner placing her own professional experiences at the heart of a published text. Her case studies also reveal indications of the variety of literary techniques which she was likely to have been aware of, whether consciously or not, and used within her writing. These narrative techniques empowered her voice, not only as a female midwife, but also as a woman writer more broadly.

The Polemical Practitioner: Elizabeth Nihell

In line with Cheryl Turner's suggestion made in her study of women's literary publishing, *Living by the Pen: Women Writers in the Eighteenth Century* (1992), that a women's writing 'slump' occurred between approximately 1740 until 1760, another female-authored obstetric text did not appear during this time.⁴² The first women's guide to childbirth produced after Stone's, therefore, was London-midwife Elizabeth Nihell's *A Treatise on the Art of Midwifery Setting Forth Various Abuses Therein, Especially as to the Practice with Instruments* (1760). Published first in English before being reprinted in French in

⁴¹ Stone, p.47.

⁴² Cheryl Turner, *Living by the Pen: Women Writers in the Eighteenth Century* (1992) p.38. See Appendix A for publication details.

1771, Nihell's was the first female-authored obstetric text to be translated into another language, opening up the potential for women in England impacting upon European as well as English midwifery development. It is likely that Nihell herself undertook the translation, or may even have produced an original French manuscript for herself, given that her medical education was undertaken in France, at the famous Hôtel-Dieu in Paris.⁴³ Her experience in Paris proved to be a key source for her text, and an area from which she perceived herself to have a unique authority for the book's eclectic variety of observations about contemporary practice.

Nihell's discussions of childbirth ranged across matters including technology used in assisting deliveries, personal observations of cases she had dealt with, as well as numerous scathing critiques of male-led practice. Unlike Stone's approach, Nihell did not include any form of case records in her publication. *A Treatise on the Art of Midwifery* is made up of two parts, the first a series of 'Objections' against male involvement in midwifery, before offering 'various observations on the labors [sic] and delivery of lying-in women, including a description of the pretended necessity for the employing instruments'.⁴⁴ In making her voice heard Nihell opens her treatise by reflecting on the universal necessity of birthing attendance to the sustaining of mankind. 'All the other arts', she claims, 'are no further necessary to man, than to procure him the conveniences or luxuries of life; that of midwifery is of indispensable necessity to his living at all, imploring as he does its aid for his introduction into life.'⁴⁵ Her claim, though possible to make in the introduction of any obstetric text, and indeed made frequently, nevertheless stresses the importance of her observations to the changing world of birthing assistance in the mid-eighteenth century.

After establishing the importance of what she has to say, Nihell turns swiftly to the question of gender and practice. The style of her prose remains in keeping with the traditions of female obstetric

⁴³ Robert Woods and Chris Galley, *Mrs Stone and Dr Smellie: Eighteenth-century midwives and their patients* (Liverpool: Liverpool University Press, 2014) p.363, n.111.

⁴⁴ Elizabeth Nihell, *A treatise on the art of midwifery* (London: A. Morley, 1760) Contents p. i, iv.

⁴⁵ Nihell, p. B1.

authorship to that date, perhaps even implying an intertextual relationship between her own works and those written by earlier midwives. Like Sharp and Cellier, she employs the same biblical reference to justify women's place as owners of midwifery as a specialist trade:

But to return to the Egyptians. We read in Exodus, chap. i. v. 15, "and following, that Pharaoh said to the midwives, "When ye do the office of midwife to the Hebrew women, and set them upon the stools, if it be a son then ye shall kill him, but if it be a daughter she shall live.

"17. But the midwives feared God and did not as the king of Egypt commanded them, but saved the men-children alive."

The king reproached them, as may be seen in the same place.⁴⁶

Nihell extends this argument further than her predecessors, however, informing readers that 'PROPHANE history has preserved to us the names and talents of a number of illustrious women who have distinguished themselves in all kinds of arts.'⁴⁷ Moving away from religious references she includes numerous historical references to female practitioners who 'applied themselves to the profession, and have left behind them valuable works' on obstetric care including Queen of Egypt, Cleopatra and ancient Greek midwife, Aspasia.⁴⁸ She also pays tribute to a more recent predecessor 'Madam Justin, midwife to the Electress of Brandenburg, [who] has also given us a very good treatise'.⁴⁹ Though Nihell clearly approved of Siegemund's publishing her work as a female practitioner as well as an author, the methods employed by both women differ in one important respect: the use of clinical instruments in the treatment of obstructed deliveries.

⁴⁶ Nihell, p.22-23.

⁴⁷ Nihell, p. D1.

⁴⁸ Nihell, p. D1

⁴⁹ Nihell, p. D2. A question still remains regarding how Nihell gained access to Siegemund's text, as the treatise was only known to have been published in German until Lynne Tatlock's recent translation into English. That Nihell was able to obtain copy, despite the lack of an English printed copy during this period suggests that she had access to a translated manuscript version. Although Tatlock is only able to identify printed versions made available in German and Dutch, it is well-known that Nihell was fluent in French as well as English. Given the long history of involvement of French practitioners, both male and female, in the accelerated development of obstetrics, it is more than a mere possibility that French manuscript versions of Siegemund's text also existed. For the first English translated version: Justine Siegemund, *The Court Midwife*, ed. Lynne Tatlock (Chicago: Chicago University Press, 2005).

Where Siegemund aimed to be recognised as skilful in her practise in much the same way as her male contemporaries, and was one of the first women to provide instruction on the use of ‘a little hook or some other appropriate instrument’, Nihell refuses any association with such practices.⁵⁰ She comments

For my part I dare maintain it, that the surgeons, in the form of men-midwives, have been the death of more children, with their Speculum matricis, their crochets, their extractors or forceps, their tire-têtes &c. than they have preserved. If in killing the children, they have saved the lives of some mothers, they have hurt and damaged, not to say murdered, a number of others.⁵¹

For this reason, Nihell has been represented as strongly proto-feminist about her defence of female-exclusive practice. Cody first coined the term ‘anti-obstetric midwife’ in reference to Nihell’s attitude to the professionalized practices of male practitioners.⁵² Her dislike of male-led practice is intrinsically linked, as shown above, to the technological developments of instruments that could be used in difficult deliveries. ‘Anti-obstetric’ is therefore an indication of Nihell’s distaste for and resistance to these invasive surgical practices as a means of delivering a labouring woman. Her attempt to advance the cause of female midwives in protecting their claim to be able to practise, along with her aversion to the use of surgical instruments in delivering women, culminated in a broader critique of male-led midwifery. Much like the view expressed by Philip Thicknesse four years later in his *A Letter to a Young Lady and Man-Midwifery analysed: and the tendency of that practice detected and exposed*, Nihell disputes that male interests in delivering women were genuinely based on the desire to advance and improve midwifery, and goes so far as to suggest that the very term ‘*accoucheur*’ was as disagreeable as the nature of male-midwifery practise. As an alternative Nihell suggests: ‘change it for the Latin one of *Pudendist*: a word of not one jot a more pedantic coinage than *Dentist*, or *Oculist*’, further emphasising her distaste for

⁵⁰ Siegemund, p.99. On the use of instruments, Siegemund admits ‘I cannot refrain completely from using the crochet despite evil gossip’, suggesting that her choices may have been questioned on previous occasions. She does, however, stand firm that it is proper use of these tools which brought her to being recognised as a highly skilled practitioner, ‘for this reason’, the midwife character she develops to offer advice to a young apprentice explains, ‘I am often summoned to assist when the infant is lying right but the attending midwives have pushed and squeezed it in hard and tight through excessive forcing of the pains during four or more days of lingering labor [sic].’ See, Siegemund, p.60.

⁵¹ Nihell, p.54.

⁵² Lisa Foreman Cody, *Birthing the Nation* (Oxford: Oxford University Press, 2005) p.146

increased interests on the part of male practitioners for the practical aspects of reproductive medical discourse.⁵³

Unlike Sharp's prior reading and inclusion of sources written by her male counterparts as part of her guidance, Nihell use of references to male-authored material serves a different purpose. Where Sharp frequently references the names of a range of male medical authors, including Bartholin and Culpeper, to prove that she is well-read on the subject, and often manipulates their own language, integrating their words into her own descriptions, Nihell's engagement with male-authored publications is much more direct and much less complimentary. She makes frequent reference to the population of male accoucheurs as a collectivized entity, and repeatedly draws attention to the inadequacies of the work of specific individuals including 'Deventer, Peu, La Motte, Mauriceau, Levrety, Smellie, &c'.⁵⁴ With regards to changes made in obstetric techniques through professionalization and male practitioner-led research, Nihell's narrative voice is much stronger than that of her forerunners, referring to the man-midwife's surgical bag as 'a bag of hardware'.⁵⁵ Her description implies that the man-midwife, or accoucheur, relies on the bag rather than any skill or experience he might possess.

In March 1760, a review of Nihell's text featured in *Critical Review or Annals of Literature*, a periodical first launched in 1756. Hers was the first female-authored midwifery text to receive a review. This was predominantly the product of timing. As Frank Donoghue explains, though the publication of journals had been met with limited success previously, in the years leading up to 1750 'a flurry of reviewing activity and planning of Review journals occurred, marking a vital turning point in the English

⁵³ Nihell, p.151.

The label 'Pudendist' is used as a term derived from the word 'pudendum', used to describe external genital organs of which the *Oxford English Dictionary* points to the vulva in particular. Nihell uses the word as a derogatory term to describe a person, or in this case a man, who makes it their business to be in visual or sensory contact with women's genitalia.

See: "pudendum, n." *OED Online*. Oxford University Press (December 2014) <<http://www.oed.com/view/Entry/154149?rskey=95xDdi&result=7&isAdvanced=false#>> [accessed 16th March 2015].

⁵⁴ Nihell, p.146.

⁵⁵ Nihell, p.329.

literary trade's perception of its public'.⁵⁶ Among the earliest vehicles that enabled such a change to take place were magazines and periodicals that bought into the concept of review writing. From the first publication of *Monthly Review* in February 1749, the writing of reviews developed into a genre of its own. Periodicals, including *Gentleman's Magazine*, developed their book advertisements into more detailed parts of the publication, and new magazines such as *Critical Review* met with success when received by the public.⁵⁷

Though reviews contained in the *Critical Review* were printed anonymously, there is a general consensus among literary scholars, including Thomas Laqueur and Richard L. Jones, that the review of Nihell's work was written by none other than the well-known author, and editor of the *Critical Review*, Tobias Smollett.⁵⁸ Smollett had pursued a dual career, developing his skills as a surgeon, and subsequently a physician before becoming an author and editor, and therefore took a particular interest in medical texts.⁵⁹ His review opens with Latin wordplay, derived from Nihell's own name: 'Ex nihilo nihil fit!' which translates as 'out of nothing, comes nothing', thus, setting the tone for the rest of the eleven page analysis of her text.⁶⁰ Smollett's review is merciless and mocking. Though he may have disagreed with many of her views and methods on a personal level, it is highly likely that he had additional motives for publicly denouncing Nihell's text. Aside from the literary works which are attributed to him, including *The Adventures of Roderick Random* (1748) and *The Life and Adventures of Peregrine Pickle* (1751), Smollett has since been recognized as a collaborator, specifically a ghost-writer, on Smellie's renowned obstetric works.⁶¹ Throughout *The Art of Midwifery*, Nihell repeatedly made Smellie the target of her

⁵⁶ Frank Donoghue, *The Fame Machine: Book Reviewing and Eighteenth-Century Literary Careers* (Stanford: Stanford University Press, 1996) p.20.

⁵⁷ For a brief timeline of the progression of review publishing see Donoghue, p.21.

⁵⁸ Thomas Laqueur, *Making Sex: Body and Gender from the Greeks to Freud* (1990) (Cambridge: Harvard University Press, 1992) p.112; Richard L. Jones, *Tobias Smollett in the Enlightenment: Travels through France, Italy and Scotland* (Plymouth: Bucknell University Press, 2011) p.34.

⁵⁹ Aileen Douglas, *Uneasy Sensations: Smollett and the Body* (Chicago and London: The University of Chicago Press, 1995) p. xviii-xix.

⁶⁰ Tobias Smollett, 'Nihell's Treatise of Midwifery', *The Critical review: or, Annals of literature*, Volume 9 (March 1760) pp.187-197, p.191.

⁶¹ See: Philip Thicknesse, *Man-Midwifery analysed: and the tendency of that practice detected and exposed* (London: R. Davis, 1764) p.5.

accusations against man-midwives, naming him in many of her criticisms of male-specific practices which often ran to the length of full chapters of the book. He is listed no less than five times in the headings of her contents page, written in the format of male objections to female traditional practices followed by her own responses.⁶² Among her criticisms Nihell included:

[S]peaking of the midwives of the Hôtel Dieu of Paris, [Smellie] first indeed tells us, that the surgeons had, in that hospital, perfected themselves in the art of midwifery; but then for fear that from thence occasion might be taken of saying, that to women it was they were beholden for that perfection; he takes care immediately after to add, that what “got the better of those ridiculous prejudices which the fair sex had used to entertain,” was, that the women or midwives of this hospital had recourse to the assistance of men in all difficult cases of midwifery.⁶³

Her defensiveness over female-midwifery at the Hôtel Dieu is understandable given her personal experience there, however, her central criticism is not about the training itself, but the implication of Smellie’s words that male practitioners held the greater level of expertise, and always had done, in matters of complex midwifery. Reading Smellie’s original inclusion of these words it must be noted that his discussion of the hospital relates to earlier practice than the time of Nihell’s own training, or in fact Smellie’s writing. His precise reference reads

About the end of the sixteenth century, or in *Paræus*’s time, surgery was more cultivated and improved in *Paris* than in any other part of the world, by means of the hospitals which had been from time to time erected, especially the *Hotel Dieu*, into which poor women with child, destitute of the necessaries of life, were admitted.

By such opportunities, the surgeons improved their knowledge in Midwifery; and by degrees established a better method of practice: The success which, together with the progress of polite literature that began to flourish about this time in *France*, got the better of those ridiculous prejudices which the fair sex had been used to entertain, and they had recourse to the assistance of men, in all difficult cases of Midwifery. This conduct was justified by experience; and the lives of many women and children were saved by the skill of the man-practitioner.⁶⁴

Even though Smellie discusses the earliest development of reproductive medicine, Nihell does correctly indicate that his language over-accentuates the previous roles of male practitioners. Mortality rates did decrease eventually, but while obstetrics and reproductive publishing were in stages of infancy, female

⁶² Nihell, p.173.

⁶³ Nihell, p.40.

⁶⁴ William Smellie, *A treatise on the theory and practice of midwifery*, vol. I, 4th edition (1752) (London: D. Wilson and T. Durham, 1762) p. liv-lv.

practitioners continued to be the larger trading group in birthing assistance. Tim McHugh argues in his research on *Hospital Politics in Seventeenth-Century France* that it was the seventeenth century, rather than the sixteenth, that ‘was significant both for the expansion of the physician’s duties and for the creation of new medical posts at the hospital’.⁶⁵ Philip A. Kaslisch, Margaret Scobey and Beatrice J. Kaschlisch argue in fact that during the late sixteenth century training at the Hôtel Dieu, ‘the institution used four apprentice-midwives to assist the chief midwife for three-month periods’, suggesting that female-led practice still dominated the systems of operation at the hospital.⁶⁶ Overall, there is a measure of truth in both Nihell and Smellie’s claims, though both tend towards an over-exaggeration of their respective points. In later years male medical professionals did exert a greater influence on practice than women, but these dates were not the same as those supplied by Smellie. By Smellie’s own time of practice, male practitioners in both England and France were exerting the type of influence that he refers to, but claiming such a strong historical trend for these developments would seem, in reality, out of place in English or French medical history. Nihell, on the other hand, though correct in her challenge of the alleged indebtedness of midwives to male practitioners for such a long period, also does not acknowledge, as Stone did, the truth in contemporary practice that placed a value on calling in a man-midwife in the event of an obstructed or complex birth.

In response to her critique of his peer, Smollett drew as much attention to Nihell’s comments about Smellie as she had to the doctor herself. Smollett’s personal interests and associations within the medical field, including that with Smellie, are most revealed in his claim that ‘[t]his candid Mrs. Nihell accuses Dr. Smellie of certain ridiculous exhibitions’.⁶⁷ He then continues to further emphasise his point: ‘As she pecks continually at Dr. Smellie, we shall aver in our turn, that she either does not know that

⁶⁵ Tim McHugh, *Hospital Politics in Seventeenth-Century France: The Crown, Urban Elites and the Poor* (Aldershot: Ashgate Publishing, 2007) p.61.

⁶⁶ Philip A. Kaslisch, Margaret Scobey and Beatrice J. Kaschlisch, ‘Louyse Bourgeois and the Emergence of Modern Midwifery’, *Midwifery and the Medicalization of Childbirth*, ed. Edwin Van Teijlingen, George W. Lewis, Peter McCaffery and Maureen Porter (New York: Nova Science Publishers, 2004) pp.75-88, p.76.

⁶⁷ Smollett, p.190-191.

gentleman's method of teaching, or scandalously misrepresents it.'⁶⁸ His careful selection of the word 'peck' belittles Nihell's comments and, in defence of Smellie, attempts to trivialise her condemnations of his work. Despite being an uncomplimentary discussion of her work, his article nevertheless ensured that her name appeared in the March 1760 edition of the *Critical Review* alongside rising and established literary figures including Laurence Sterne and Samuel Johnson. That the text was given a review at all demonstrates the mark that medical literature, in particular a female-authored example, was making on the literary marketplace. Even if dissatisfied with Nihell's perspective, the review was itself recognising women's writing as increasingly present in the public domain and offered a token gesture of legitimacy to a woman medical writer, though the review itself sought to discredit her work.

Nihell was not blind to the emergence of discussion outside texts themselves as initiated by reviews, and produced her own written reply to Smollett's comments that was printed by her own publisher.⁶⁹ The document, *An answer to the author of the Critical review, for March, 1760. Upon the article of Mrs. Nihell's Treatise on the art of midwifery*, was as forthright as the treatise itself. Her criticisms of the 'Reviewer', as she refers to Smollett (whether she knew his identity or not remains unknown) are as waspish as those she makes of man-midwives. As early as the third page she challenges the role Smollett took as a reader, and questions his role as a fair and objective reviewer. Her explanation for such a dispute is not on the basis of any connection between the reviewer and Smellie, but on a broader basis of how the review itself was structured and styled. She admonishes:

[B]efore I proceed any further in my defence, I must beg leave to remark, that my candid critic seems to have over-stepped his province of a Reviewer into that of controversist [sic]; which certainly cannot be fair, unless he gives warning to his reader, that he is laying aside the

⁶⁸ Smollett, p.191.

⁶⁹ Elizabeth Nihell, *An answer to the author of the Critical review, for March, 1760. Upon the article of Mrs. Nihell's Treatise on the art of midwifery* (London: A. Morley, 1760). Though Pam Lieske dedicates a full volume of the twelve-volume *Eighteenth-Century British Midwifery* to Nihell's work, following the text itself with Smollett's review, she omits to include further dialogue that occurred between the two suggesting that the full extent of this dialogue is an additional area of midwifery writing that has not been explored by literary scholars. See, Pam Lieske *Eighteenth-Century British Midwifery*, Vol. 6 Elizabeth Nihell (London: Pickering & Chatto, 2008)

character of the judge for that of a party. He cannot surely consistently with the laws of candor or common-sense be both at once.⁷⁰

The argument makes the case that the review given was questionable on the grounds of fairness, claiming that Smollett had a vested interest in besmirching the reputation of Nihell and her book. Given that he likely had a hand in producing Smellie's works, this interpretation may well have been an astute and valid assessment by Nihell. Furthermore, her choice of the word 'defence' lingers, reminding other readers that where the reviewer slipped so easily into the role of Smellie's defender, female midwives did not so easily find champions of their practical or written work.

The forty-two page response appears lengthy compared to Smollett's review and her counter-argument takes pains to contest as many of his points as possible. The potency of her choices of language and the vigour of her words remains a stark feature of Nihell's work. No midwife before her had ever placed such a defiant argument before the public and practitioners, nor gone to such lengths to make their points clear. Her response also shows that she paid clear attention to the reception of her work, having read *Critical Review* for herself. Though Stone's work reveals that she was familiar with other types of literature, Nihell shows the changing nature of education and the increased access that individuals had to scientific writing and other types of literature.

Just as Nihell had read the review of her work, Smollett also appears to have accessed a copy of Nihell's response and took up her invitation to treat her work 'with as much contempt as he pleas[ed]', penning a further reply to her views, also publishing it in *Critical Review*.⁷¹ This response highlights the 'voluble' nature of Nihell's reply, but does not attempt to enter into continuing debate with her, noting that 'we cannot pretend to answer in less than as many volumes'.⁷² Instead, only a brief answer is offered. In less than a page, of only twenty lines, this further reply ensures in its first lines that the original review should be perceived as a personal attack on Nihell herself, confining itself to dismissing the concept of

⁷⁰ Nihell, *An answer to the author of the Critical review*, p.3.

⁷¹ Nihell, *An answer to the author of the Critical review*, p.22.

⁷² Tobias Smollett, 'Article 22. An Answer to the Author of the Critical Review, for March 1760, upon the Article of Mrs. Nihell's *Treatise on the Art of Midwifery*. By Mrs. Elizabeth Nihell, professed midwife. 8 vo. Pr. Is. Morley', *The Critical review: or, Annals of literature*, Volume 9 (March 1760) p.412.

generating additional debate. The passage beseeches Nihell '[p]ray be easy, good madam, we are ready to grant whatever you require; even to acknowledge that your tongue is *sensible*'.⁷³ Though seemingly making this concession, the tone of the line is mocking and continues to be so throughout the piece. In rejecting the idea of further discussion, the response continues by referring to Nihell's commentary of Smollett's review in the following metaphorical terms, 'that you have delivered yourself of a monstrous birth, that fully evinces your dexterity in the obstetric art: may it, however, be the last of our begetting!'⁷⁴ So it was. With no extension of the dialogue on record, it would seem that Nihell came to agree with Smollett, willingly or unwillingly, that there was nothing to be gained from a further exchange.

There is much to be praised and criticised in Nihell's writing, and the tone that it sustains over a work of extended length, as well as her reply to Smollett's review, makes hers the fiercest of any eighteenth-century midwife's defence of, or attempt at the development of, her professional expertise for the benefit of others. This fiery method of expressing herself was at times damaging to the nature and succinctness of her arguments, but as the first midwife to engage with the literary trend for reviews, there can be no doubt that she made a mark on women's medical publishing, however strong the voice of opposition with which *A Treatise on the Art of Midwifery* was met. The culture of literary and scientific reviewing would be one of longevity, and while it would be a tenuous claim that Nihell won a battle of principles, loyalty and wit, her contribution was nevertheless a brave one that had no precedent on which to rely.

A 'Teacher of Midwifery': Margaret Stephen

Similar to the gap created by a lack of female-authored midwifery texts produced between 1737 and 1760, another gap ensued between 1760 and 1795 where no woman who referred to herself as a qualified midwife published a treatise of their own. Margaret Stephen's *Domestic midwife* (1795)

⁷³ Smollett, 'Article 22. *An Answer to the Author of the Critical Review*', p.412.

⁷⁴ Smollett, 'Article 22. *An Answer to the Author of the Critical Review*', p.412. For further discussion of monstrous births see Jenifer Buckley, *Gender, Pregnancy and Power in Eighteenth-Century Literature: The Maternal Imagination* (Houndmills: Palgrave Macmillan, 2017) and Sharon Ruston, *Creating Romanticism* (Houndmills: Palgrave Macmillan, 2013).

therefore demonstrates how one woman was able to move debates of both gendered practice and education onwards, updating the position of female midwifery in the birthing assistance market while still maintaining the female-centric forms of both narrative and practice created by her forerunners. Stephen's precise identity in terms of her practice is not known for certain. Although she was an instructor of midwifery, the most significant on-going debate surrounding Stephen and her career concerns her own practice and success, measured by the clientele that her business attracted. Ornella Moscucci, Andrea Henderson and Anne Witz have all concurred with a belief originally proposed by James Aveling, that Stephen, like French midwife Louyse Bourgeois, was a royal midwife.⁷⁵ These historians each suggest that Stephen attended Queen Charlotte, wife of George III.

This conclusion is implicitly contested, however, in others' research including that of James Drife who was of the view that the only midwife to attend to Charlotte was a woman known as Mrs. Draper, before her deliveries became the responsibility of male physician William Hunter.⁷⁶ Whilst there has been much speculation as to the realities of Draper's role, whether she did in fact attend all fifteen of the Queen's births or not, insufficient study has been conducted with regards to Queen Charlotte's reproductive role as queen consort, or indeed broader women's healthcare at court, to know what exact arrangements might have been. Kate Campbell Hurd-Mead's *A History of Women in Medicine*, points out that Stephen's publication appeared shortly after the Queen's final births.⁷⁷ These dates used by Hurd-Mead imply that even if Draper had been the attending midwife at Charlotte's earlier births including the future George IV, it remains plausible that Stephen was an attendant at later births, those of the monarch's younger children.

⁷⁵ Ornella Moscucci, *The Science of Woman: Gynaecology and Gender in England, 1800-1929* (1990) (Cambridge: Cambridge University Press, 1993) p.48; Anne Witz, *Professions and Patriarchy* (London: Routledge, 1992) p.107; Andrea K. Henderson, *Romantic Identities: Varieties of Subjectivity, 1774-1830* (Cambridge: Cambridge University Press, 2006) p.169; James Hobson Aveling, *English Midwives, their history and prospects* (London: J.A. Churchill, 1872) p.126.

⁷⁶ James Drife, 'The start of life: a history of obstetrics', *Postgraduate Medical Journal* Vol. 78, (2002) pp.311–315, p.313.

⁷⁷ Kate Campbell Hurd-Mead, *A History of Women in Medicine from the Earliest Times to the Beginning of the Nineteenth Century* (Brooklyn: AMS Press, 1977) p.477.

Whether or not Stephen, Mrs. Draper, or in fact both, attended to Queen Charlotte, Moscucci's emphasis on Stephen's alternative role in society as 'a midwife who delivered Queen Charlotte [and] ran a school of midwifery in London' demonstrates that, regardless of her clientele, she remained an important figure in eighteenth-century midwifery for other reasons.⁷⁸ From the front cover of her text, Stephen styles herself not as a 'midwife' but rather as a 'Teacher of Midwifery to Females' and in doing so, exerts a different type of authority to that of her predecessors.⁷⁹ Her description of herself suggests that she was already established as an instructor before the publication of the text itself and was therefore able to write with the confidence that her methods were already those received by female students as part of their learning. About the lessons she gave, Stephen describes

I teach my own pupils the anatomy of the pelvis, &c. and of the foetal skull, on preparations which I keep by me, with every thing else relative to practice in nature, at labours; also, turning, and the use of the forceps, and other obstetric instruments, on a machine which I believe few teachers can equal.⁸⁰

Her practice as an educator reveals much about the changing status of a number of methods relating to the use of instruments as part of regular midwifery practice. Unlike Nihell, who abhorred the very idea of using hooks and forceps during difficult births, Stephen clearly embraced what she knew about these objects and utilised them as aids in ensuring that births were safe and manageable. Her belief that her provision for students was the kind that 'few could equal' suggests that she was aware that many practitioners sought to become proficient in the use of these tools, but also that the skills required to do so were not taught to female practitioners as a matter of course. Different to the other midwives whose works are discussed in this chapter, Stephen's own education she claims to have 'received from a gentleman, who had been a pupil of Dr Smellie', whom Pam Lieske identifies as most likely having been eighteenth-century man-midwife John Harvie.⁸¹ This personal experience of male-led practice, which

⁷⁸ Moscucci, p.48.

⁷⁹ Margaret Stephen, *Domestic midwife; or, the best means of preventing danger in child-birth* (London: S.W. Fores, 1795) cover page.

⁸⁰ Stephen p.4.

⁸¹ Stephen, p.18; Pam Lieske, *Eighteenth-Century British Midwifery*, Vol. 7 Lying-In Hospitals & Male/Female Midwifery Debates (London: Pickering & Chatto, 2008) p.263.

would have influenced her thinking on methods of practice, may well explain how Stephen was so familiar with these kinds of techniques, and therefore able to teach them to other women.

This training background and practical engagement with a man-midwife presents an interesting set of choices for Stephen to make when it came to expressing a view on gender and midwifery practice. In further contrast to her immediate predecessor Nihell, Stephen does not attack man-midwives outright but does, as her teaching suggests, support the continuation and development of female-led midwifery. Her only remark in tracing the history of midwifery that might be considered a criticism of man-midwives relates to the origins of male involvement in the birthing chamber, where she references John Astruc's account of the rise of accouchement as having originated with 'the first lying-in of Madame De La Valiere', a mistress of Louis XIV, who was attended by a noted surgeon rather than a female midwife in her delivery during the year 1663.⁸² Those following De La Valiere in opting for a man to attend them, Stephens claims, should reflect on their choice and make a decision as to 'how far their imitating her conduct in any respect is to their honour'.⁸³

Sufficiently critical of male-led practice to maintain a focus on female midwifery, but perhaps still ambiguous enough not to explicitly offend any male practitioner who might pick up a copy of the text, Stephen's words steer readers away from the long-debated role of men in birth and towards the possibilities that midwifery continued to offer her own sex. Women, she argues, were not only capable of supporting and being assistants to male practitioners, a subordinate role for which they were becoming increasingly recognised, they too could act as an independently organised workforce in terms of learning and teaching as well as practice. She explains of her own motivation to teach, 'I intend to continue my lectures as usual to women entering upon the practice of midwifery until the men who teach that

⁸² Stephen, p.13-14; John Astruc, *Elements of Midwifry* (London: S. Crowder and J. Coote, 1766) p. xxii- xxiii.

⁸³ Stephen, p.15.

profession render them unnecessary, by giving their female pupils as extensive instructions as they give the males'.⁸⁴

Her argument for female-led education and practice was embedded in the traditional response of midwives to establishing an historical basis on which to lay claim to midwifery as a set of duties. She states:

As there were no men-midwives in the world for near six thousand years, it can be no stretch of imagination to suppose, that God furnished women with the powers of preserving each other in bringing forth their offspring; for when the midwives of Egypt (because they feared God) would not comply with *Pharoah's* dreadful mandate, we do not find that he applied to men-midwives to effect his purpose; a thing he could not have failed to do, had there been any; nor do we find, that ignorance in midwives proved destructive to the Hebrews, for they multiplied very fast.⁸⁵

Despite writing over a century later than both Sharp and Cellier, as well as significantly later than Nihell, her narrative returns to religion and the same biblical passage that had been used by midwives throughout that time. An enduring tradition within women's obstetric writing, Stephen's passage offers one iteration of the most consistent point of reference from which publishing midwives asserted their authority and involvement in birthing practices prior to the nineteenth century. In a striking parallel with Sharp's earlier self-promotion, Stephen also makes a point of advertising her experience of 'above thirty years in the practise of midwifery', indicating that her length of service to the community and extensive practise equipped her with the ability to manage a diverse range of cases, and qualified her as a senior midwife who was able to instruct younger, less experienced women in their efforts to develop their skills surrounding care for mothers and infants.⁸⁶

Stephen's teaching, she claims, was a form of resistance, not towards man-midwives as a group, but to the inequality in educational opportunities for female midwives compared to male students of physic, surgery and accouchement. She explains:

It has been alledged [sic], that woman's understanding does not admit of receiving such knowledge as is necessary in the practise of midwifery; but women's understanding is not so

⁸⁴ Stephen, p.17.

⁸⁵ Stephen, p.9-10.

⁸⁶ Stephen, p.17.

limited as some would represent. I only wish, that those who teach midwifery, would give them as clear a knowledge of that science, as they are capable of receiving.⁸⁷

She evidences women's academic capabilities as well as their practical aptitude by using herself as an example, telling readers, '[t]hough I have many of the best ancient and modern publications, both foreign and English, nothing will be found in the following sheets, but what I have experienced in the course of my own practice'.⁸⁸ Once again, just as Sharp did, Stephen emphasises both her own academic learning as more than adequate for her role, and the relevance of her own experiences to both her practical methods and her writing. Her strong leaning towards conveying the importance of practical learning, rather than summarising her own reading, also echoes the centrality of learning from practice that Stone favoured in presenting a compilation of case records.

As a teacher of her trade, Stephen's narrative voice reflects the fact that she advocated women's literacy and education, not only for midwives but also for the wider public. She expresses a personal belief within the text that all women could find medical texts such as her own useful. Stephen comments about the readership of her book, 'I would not confine its usefulness to midwives only, because it will be of service to any woman who is, or may be a mother.'⁸⁹ As well as seeking to increase sales of her publication, her view that mothers may be better informed in their maternal duties and experience by reading furthers her argument that there was no reason to suggest that women should not seek out practical and academic information to obtain an understanding of anatomy and the workings of their bodies.

These features of her writing, her reference to her academic reading and the works of man-midwives including John Astruc, the high value she places on her position as an educator of women, and concerns over the accessibility of information available to all women during their maternal experiences, suggest that Margaret Stephen was only too aware of the disadvantages women had suffered at the hands

⁸⁷ Stephen, p.17.

⁸⁸ Stephen, p.5.

⁸⁹ Stephen, p. ii.

of eighteenth-century systems of education that excluded women from the types of learning that men were so readily able to access. Stephen's writing was much shaped by the growing heritage in women's midwifery publishing, but also made new and innovative contributions towards increasing the visibility of women within the medical community and beyond.

'Take Nature's Path': Martha Mears

Shortly after the publication of Stephen's *Domestic Midwife*, another female midwife followed in the tradition of becoming both a practitioner and a writer. In 1797 Martha Mears published *The Pupil of Nature; or Candid Advice to the Fair Sex*. Just as Grundy suggested about Stone, Mears was another practitioner-author whose work was affected by literary trends and fashions of the period as it was influenced by scientific traditions. Her treatise, unlike her predecessors, is not organised by means of short chapters but essays, covering a variety of eventualities and circumstances that she herself had faced throughout her career, from which the reader could benefit. Comparable to Stone's treatise in its literary qualities, *A Pupil of Nature* is styled in easily readable prose, much more concerned with accessibility and simple language than many medical guidance manuals of the period, though the content continues to focus on the care of pregnant and birthing women. Mears explains of her own aims for her book:

I hope my own sex will grant a candid hearing to one who is herself a mother—who has united the advantages of experience with those of a regular education and a moderate share of practice;—who knows no language but that of the heart;—and whose fondest wish, in the present attempt, is to allay the fears of pregnant women, to inspire them with a just reliance on the powers of nature, and, above all, to guard them and their lovely children against the dangers of mismanagement, of rashness, of unfeeling and audacious quackery.⁹⁰

Like Stephen, Mears undertook to make her remit the education of readers through her own experience and insight though, unlike her contemporary, her audience was literate women of the lay public in place of trainee practitioners.

⁹⁰ Martha Mears, *The Pupil of Nature; or Candid Advice to the Fair Sex* (London: Faulder, Murray and Highly, 1797) p.3.

In order to appeal to this non-professional audience, her narrative presents itself as one infused with feelings of personal attachment and empathy. In her dual role as both midwife and mother, she appreciates the ‘fears’ of others as if they were her own and seeks to remedy those issues that she perceived to be manageable through reassurance and good guidance. Where Edmund Chapman’s earlier work contained few references to female patients that would depict them as anything but passive components of a largely bio-mechanical process that was led by medical, often surgical, interventions, Mears embraced the more holistic depiction and consideration of each patient and their wellbeing.⁹¹ She first establishes a relationship with readers by addressing the significance of each female patient to the circumstance of birth, referring to patients as ‘[nature’s] darling object’ before further emphasising the need to place a high value on comforting and supporting pregnant and birthing women in a range of different ways.⁹² Previous authors of midwifery texts both male and female had largely focused on the physiological processes related to pregnancy and childbirth, yet emotional and psychological health was a key priority for Mears in her own professional belief system and instruction of patients.

Earlier authors including Daniel Turner, James Blondel and John Mauclerc had previously debated issues of health surrounding maternal imagination, but their focus was fixed firmly upon the impact of a woman’s thoughts on her unborn child.⁹³ None of these male practitioners had achieved what Mears did in turning the argument towards the welfare of the mother rather than the infant.⁹⁴ Essay III within her text is dedicated to addressing issues of women’s mental health in relation to pregnancy and birth. ‘Fear, melancholy and even despair’ are included in a list of ‘painful emotion[s] of the mind [that]

⁹¹ Chapman’s narrative style and omission of details that would codify the active position of each woman in her own delivery was not uncommon, nor a characteristic trait exclusive to early-century midwifery treatises. As Fife indicates, other midwifery texts such as William Smellie’s *A treatise on the theory and practice of midwifery* (1752-1764) is distinctive in its ‘failure to include any hint of the patient’s emotional or psychological reactions [during or] following childbirth or even how the patient fared after delivery’. Fife, p.193.

⁹² Mears, p.5.

⁹³ For further information on controversies surrounding maternal imagination during the eighteenth century, see Jenifer Buckley, *Gender, Pregnancy and Power in Eighteenth-Century Literature: The Maternal Imagination* (London: Palgrave Macmillan, 2017).

⁹⁴ See Appendix A entries for accoucheurs Daniel Turner, James Augustus Blondel and John Henry Mauclerc.

impair the health of the body'.⁹⁵ The text shows a compassionate understanding of the psychological trauma that could occur in women during the progression of gestation in anticipation of birth. Her response to managing these negative emotions is as refreshing as the fact that she addressed them at all. One of a range of solutions that Mears suggests is familial support. She explains, 'though the glooms arising from the influence of imaginary danger may be dispelled by the force of fair argument, there are many other causes of melancholy, which nothing but the fond attention of the husband can allay'.⁹⁶ Advice appearing throughout Mears's text leads Jeanette Herrle-Fanning to argue that *The Pupil of Nature* depicts 'the hysterical female body...as a cluster of symptoms to be managed, particularly with regard to her psychological state'.⁹⁷ Herrle-Fanning's interpretation of Mears's rhetoric points towards a perception of the female body as a weak and problematic entity relying on other, more orderly and controlled interventions by ore rational influences, such as a supportive husband, in order to properly function. Though a reasoned conclusion, her reading of Mears's content and expression overlooks another fundamental difference between the ways in which one female author dealt with what would now be recognised as antenatal care compared to her contemporaries. Stemming from her concern with emotional health, Mears was unafraid of admitting that pregnancy constituted a psychological journey, as well as a physiological state of being, of which fears and vulnerabilities were inherent elements. Rather than allow these aspects of health to go unacknowledged, Mears tackled them head-on in what could be seen as a continuation of Stone's advocacy of appreciating the patient's experience of pregnancy and birth.

Her method for validating the sympathetic consideration of what was a changeable and daunting experience for women constitutes the 'candid' nature of the text as it was titled and an acceptance of 'nature' taking its course, with the roles of practitioner and patient responding accordingly to the

⁹⁵ These words would appear to be suggest a very early movement towards recognising that physiological and biochemical changes that were a direct result of pregnancy caused hormonal fluctuations in women's bodies, rather being than a fixed trait of women's identities. Mears, p.30, 32.

⁹⁶ Mears, p.28-29.

⁹⁷ Herrle-Fanning, p.41.

sequence of bodily events caused by conception.⁹⁸ The only female-authored midwifery text to use an appropriate literary quotation on the front cover of her book to pre-empt the philosophies underpinning the text itself, the title-page of *The Pupil of Nature* featured the words ‘Take Nature’s Path, and mad Opinions leave’, from Epistle IV of Alexander Pope’s *Essay on Man*, ‘Of the Nature and State of Man, with respect to Happiness’.⁹⁹ Mears’s precise reasons for selecting Pope’s work as a front piece for her own text remain uncertain: she does not make further comment herself, but this quote suggests a higher level of literacy and intellectual capability than was traditionally associated with female midwives. Given its prominent place in her text it would seem likely that, even if she was not particularly well-read beyond a number of midwifery texts and select knowledge of literature, Mears knew of and admired Pope’s literary output. The sense of deference expressed by Pope towards nature (as part of the divine order) is matched in many of Mears’s ideas. She opens her first essay with the words: “‘Follow Nature” is the great lesson which the wisest and best of men have never been tired of repeating.’¹⁰⁰ By expressing this sentiment, and using Pope’s language to reinforce the meaning of her guidance to the public, Mears also demonstrates her own education and knowledge with a view to developing credibility and authority with readers, seeking to exhibit her approach to maternity care as one of common sense as well as intellect. Her text represents a view of medical healthcare, combining an appreciation for obstetrics and psychology, different to those who had come before her. Mears’s position as a female midwife allowed her to break with the conventions of impersonal scientific writing to make a unique offering.

The Forgotten Author: Mrs. Wright

Janette Allotey’s examination of midwifery, like others, brings her investigation to a close with Mears’s contribution to obstetric publishing.¹⁰¹ The consequences of this mean that the final text written by a female midwife is missed out of what might otherwise be a more comprehensive account of the

⁹⁸ Mears, cover page.

⁹⁹ Alexander Pope, *An Essay on Man* (London: J. and R. Tonson, and A. Millar, 1760) p.90.

¹⁰⁰ Mears, p.2.

¹⁰¹ Janette C. Allotey, ‘English midwives’ responses to the medicalization of childbirth (1671-1795)’, *Midwifery*, Vol. 27, No.4 (2010), pp. 532-538, p.533.

development of authorship from female obstetric practitioners. The little-known and often disregarded, Mrs. Wright's *An Essay to Instruct Women how to protect themselves in a State of Pregnancy, from the Disorders incident to that Period, or how to Cure them* was the final contribution of women's writing to reproductive medicine of the eighteenth century. Although a vastly condensed text in comparison with those produced by earlier female practitioner-authors, Wright's essay, was not aimed at providing a comprehensive dissection of all areas of obstetric practice.¹⁰² Instead, the elusive author 'Mrs. Wright' for whom no concrete biographical material has ever been recovered, opted to provide a short yet concise guide that targeted the subject of ill health during pregnancy and birth, with which she also includes a variety of observations on neonatal and infant care.

Despite taking a narrower, potentially more specialist focus within obstetric practice, Wright laid claim to modest beginnings for her text. She introduced her text as follows

To a woman who never wrote more than a common letter, it seemeth somewhat awkward to take up the pen to write for public perusal, but my friends desire that I may do it; they have a better opinion of me, than I have of myself; they say if I give nothing new to the world, I may still be useful to my own sex, by recommending many things familiar to my experience, which they may have had few opportunities of knowing; much experience is not the portion of many young women; few read large elaborate works, and many would be glad to receive instruction advantageous to themselves and their families.¹⁰³

These reflections on her experiences and motivations for writing and publishing her own midwifery treatise in 1798 reveal the continued issue of limited opportunities for women, even those with a skilled profession, to apply and share their skills in settings other than the homes of their families, friends and their patients. Medical authorship by women was still a very small minority, with only the contributions of these five women in comparison to the vast number of publications from male authors featured in Appendix A, meaning that the exposure a small text from an unknown midwife would receive would likely be limited, a factor Wright herself was probably aware of at the time of writing. This did not deter her from 'tak[ing] up the pen' however, and in doing so was also able to offer a variety of information.

¹⁰² Where Nihell's text, the longest of the obstetric treatises selected, is four hundred and seventy-one pages long, the length of Wright's *Essay* is a much smaller thirty-seven pages.

¹⁰³ Mrs. Wright, *An Essay to instruct Women how to protect themselves in a State of Pregnancy, from the Disorders incident to that Period, or how to cure them* (London: J. Barker, 1798) p. i.

Maintaining a similar narrative approach to that which Mears had used, her entire text was labelled as one essay, with five sections covering different themes relative to the role and duties of a midwife.

The structure she employs is broadly chronological to the progression of gestation and birth, dealing first with ‘Diseases of early Pregnancy’, and those of ‘advanced Pregnancy’.¹⁰⁴ In Sections III and IV, Wright moves on to discussing practitioners themselves, their key role being in the actual delivery. To effectively convey her feelings regarding women midwives, she adapts the word ‘accoucheur’, to denote a man-midwife, into ‘accoucheuse’, to raise the profile of female-led practice.¹⁰⁵ Her final Section of *An Essay to Instruct Women* focuses on caring for infant children after birth. Wright’s overarching philosophy on practising midwifery, and her argument for female-led midwifery, is strikingly similar to that of Mears, as she explains to readers:

In the obstetric art, as well as in other branches of the science of healing, it might be better if we could wait patiently, and would humbly rate ourselves as the handmaids of nature. Premature practitioners, are apt, like the philosopher in *Rasselas*, to suppose they can govern the natural course of things, but after a few trials, they must find out their incapacity.¹⁰⁶

Also like Mears, Wright includes literary references within her essay, though this is not advertised on the cover or even within the front matter of her text. She appears to have been an admirer of Samuel Johnson in particular, whose *Rasselas* (1759) she uses here, and his *Dictionary of the English Language* (1755) which she uses to inform her glossary on the final page of her text. Her reference to ‘the philosopher’ is an allusion to Chapter XL in which Johnson’s character believes himself independently capable of exercising control over ‘the regulation of weather, and the distribution of the seasons’.¹⁰⁷ Wright uses the well-known story to convey a parallel in her beliefs, that new approaches to midwifery, typically those advocated by man-midwives, were effectively attempts to rule as master over nature. By this she proposes that man-midwifery was often flawed in its aims and methods, focusing on the advancement of

¹⁰⁴ Wright, p.9, 12.

¹⁰⁵ Wright, p.17.

¹⁰⁶ Wright’s passage here does not italicise the title of Johnson’s *Rasselas*, I have therefore left the text unaltered as it appeared in its original print.

¹⁰⁷ Samuel Johnson, *The Prince of Abissinia*. A tale. Vol. 2 (London: R. and J. Dodsley and W. Johnston, 1759) p.105.

technology and methods that resulted in the practitioner acting ‘in a great hurry to exhibit [their] dexterity’ rather than considering the natural progression of labour and delivery, as would be best to ensure the safety of the patient.¹⁰⁸

Writing with a view to changing the outlook of midwifery practise, Wright explains that she envisions the key readership for her text would be ‘[her] fellow amiable country-women’, in the interests of ‘teach[ing] others with less experience’ so that female midwives could act with greater confidence and autonomy.¹⁰⁹ In doing so, she brings together a number of techniques and forms of rhetoric use by her predecessors as she attempts to establish a claim to expertise, as well as the right to speak out in published print without facing criticism for having attempted what still few women had done. She was in doubt, however, that a negative reception may still have awaited her shortly after her text had circulated in public. She postulates:

If this little Essay should make its way into the hands of a learned critic, it is not improbable, that after reading the title page, and seeing it comes from a midwife, he may throw it aside with disdain, supposing it smells too strong of gruel, caudle, and the slops of the nursery and so I may escape a scourging from him; but another, after some investigation, may tell us that this obstetric dame might have employed herself better with her needle; a third, with as much good nature, and full as much science, may kindly invite her into the field of literature, hoping that a little more study may enable her to correct her deficiencies, and I will bend to him with obedience and the lowest courtesy of my acknowledgment for his gentleness and liberality.¹¹⁰

This passage shows an acute awareness on Wright’s part of changes in both the scientific and literary publishing landscape far above what earlier midwives had been able to engage with. Her language around the role of a midwife, making explicit reference to ‘gruel, caudle and the slops of the nursery’, indicates that Wright was dissatisfied with what she had witnessed of a trade that had once been considered learned for a women and seen it become one that was considered on much of a level with a household nurse or domestic servant. It was not a simple matter of professional invasion from a growth in individual practising man-midwives and their tools as Nihell feared, but the additional factor that childbirth had in

¹⁰⁸ Wright, p.21.

¹⁰⁹ Wright, p. iii.

¹¹⁰ Wright, p. ii.

part already been institutionalised through the strong presence of lying-in hospitals which, by the end of the century, had been a part of the social and medical management of childbirth for over fifty years.¹¹¹ Wright's words reflect a changing literary trend that in Victorian England would reposition the cultural stereotype of the midwife to a figure of low standing, and often incompetence. Such a representation would later be firmly affixed into cultural memory with Charles Dickens's depiction of midwife Sairey Gamp in *The Life and Adventures of Martin Chuzzlewit*, first serialised between 1842 and 1844.

Wright actively resists this shift in perception, while also recognising that it had, in part, occurred because of a lack of opportunities for women. She further anticipates that while female authors' works, particularly those attempting to enter the spheres of science or medicine, would not be treated with the same credibility as an academically qualified male author's contribution they would not necessarily escape scrutiny and criticism. Given how few midwifery manuals had been produced by women writers, and that only one of these had been subject to a review, it would seem that she could only have come to the conclusion that this was a possibility for her own work by being aware of the review of Nihell's work that had appeared in *Critical Review*, or by having seen other women's texts, those that were not related to midwifery, also receive reviews. Wright's projections of her work making its way into the hands of an unknown reviewer are filled with apprehension, but the overriding sense of her feelings is that she did want the book to come into critical notice, and is flagging this possibility to readers herself. Having had less access to education than she would have personally liked, Wright wanted a reviewer to see her text for what it was and to also to enter into a discussion about any gaps in her knowledge that a reviewer observed to be preventing her from reaching the highest standard of scholarship. Her text seeks to challenge boundaries and obstacles faced by women in becoming respected scholars in their own field, by teaching other midwives and also by drawing attention to the fact that she had done all that she conceivably was able to achieve within the parameters of her own learning and experience. She saw no reason why she, like any male author, could not be considered an authoritative voice on obstetric practise.

¹¹¹ See Appendix A for references to lying-in hospitals, and the increasing numbers that published reports on the operation of these institutions.

Whether *An Essay to Instruct Women* would have attracted attention anyway, or Wright herself pre-empted this with her comments on a possible review, the text was examined in the *Critical Review*. Appearing two years after the initial print of the text itself, the review reads:

Mrs. Wright professes that she has published in order that she may be known, and insinuates that she is acquainted with some medicines of peculiar efficacy. The essay itself, if we except a few common rules of managing women during pregnancy, and some remarks of still a lighter texture on new-born children, is a desultory disquisition on the qualifications of a midwife, and the preference which ought to be given to the female practitioner, except in extraordinary cases, which are asserted to be very rare. The only precept to which we positively object relates to washing children in luke-warm water. After the two or three first days the water should always be cold.¹¹²

Unlike the equivalent review dedicated to Nihell's text, this was the full extent of the analysis given to *An Essay to Instruct Women*, though the content offered a more positive overview of Wright's work. The reviewer, who by 1800 was not Smollett yet remains anonymous, claims to have little 'objection' to Wright's narrative, yet any clear praise is not forthcoming.¹¹³ Nor does the review deign to explore the merits of Wright's narrative or style of writing at all. Though it achieved a review, *An Essay to Instruct Women* failed to attract the further interest of the reviewer in anything but a superficial way, and is summarised as a largely inconsequential offering, beyond perhaps being useful to some female midwives.

Though she was not single-handedly successful in her attempts to make women's medical publishing more prolific, and did not receive the support of friendly stakeholders as she had hoped, this lack of constructive response does not diminish the worth of Wright's own efforts. She recognised the threat to women's status in one of the few places they had a claim to medical involvement and sought to add her name to the number of women who wanted to fight against the repercussions of losing what little authority had ever been given to midwives. Further than this, however, she saw a broader future for women in terms of their education and writing. Her own goals had not been met as a midwife as changes in the birthing industry itself prevented her from receiving the level of education she would have liked,

¹¹² Anonymous, 'An essay to instruct women how to protect themselves in a state of pregnancy from the Disorders incident to that Period, or how to cure them. Also, some observations on the treatment of children, which if attended to, may ward off dangerous diseases, and prevent future evils. By Mrs. Wright, Midwife', *Critical Review or, Annals of Literature* (January 1800) p.344.

¹¹³ 'An essay to instruct women how to protect themselves', p.344.

which was broader than improving the practise of midwifery. Her specific trade was a vehicle to connect women to ‘science [... that] may kindly invite [them] into the field of literature’.¹¹⁴ The four midwives before Wright desired to enter the world of literature by writing their texts, but none had expressed this ambition so clearly on behalf of themselves or others. Wright’s fight to prevent the door to professionalised midwifery from closing against women, and indeed to open it further, was focused on allowing women prospects that included being received as equals into academic debate.

Conclusion

These women authors, though never growing in numbers beyond a very small group, faced additional challenges to those encountered by male medical authors. The five women whose texts have been considered in this chapter, Sarah Stone, Elizabeth Nihell, Margaret Stephen, Martha Mears and Mrs. Wright, therefore constitute an important minority in obstetric publishing. Despite the extent to which changes were made to the medical management of childbirth, and the limiting effect of those changes on public perception of female practitioners’ authority and specialist skills, these authors strove to ensure that women’s place in midwifery could be maintained. Their work is not a medical triumph, however, but a literary one. The impact of any of these books was little in medical circles. Each only appeared in print as a first edition, with the exception of Nihell’s that did have a translation rather than a reprint or edited version. More importantly, however, each one played a distinct role in expanding the number of forms and styles that were part of women’s authorship during the eighteenth century. Sarah Stone ensured that women’s medical writing could be personal rather than theoretical. Her case histories reject the technical styles and terminologies of traditional medical texts in order to bring a sense of literary imagination and creativity to midwifery education. Elizabeth Nihell provided a dissenting voice against her male contemporaries, protesting in such strong terms that she attracted the notice of those who were involved in the growing literary genre of reviewing. This inclusion of a woman’s medical work in the literary discussion of the period established that, whether or not her text contained points to be agreed with, her

¹¹⁴ Wright, p. ii.

writing itself could not be disregarded altogether. Smollett may have offered bad publicity, but his extended debate with Nihell brought her a kind of publicity that neither Sharp nor Stone had received, and once he had done so the attention could not be revoked.

Though without a review, Margaret Stephen's work went a step further, moving past attempting to credit female practitioners as the right and true professional group for handling childbirth. Her approach to her narrative advocated the position of women not only as individuals to be trained up for practise, but also to educate others. Her book supported women's education and increasingly the availability of delivery formats such as lectures that women might attend to develop their learning and skills, possibilities that could be applied not just to midwifery, or even medicine, but other academic disciplines. Martha Mears's style of writing took on a more literary approach than was the case for any of her predecessors, utilising what knowledge of literature she had to communicate with the lay public on matters of childbearing. Mears also took a broad view of women's health during pregnancy, paying particular attention to the psychological needs of patients. Her appreciation for her subject and patients extends beyond what many midwifery manuals of the period included, and resists treating women as subjects for scientific experimentation, or as medical problems to be solved. Her descriptions bring women and childbirth out into public discourse as subjects deserving more than they had yet received. Mrs. Wright applied some of the features used by her predecessors, such as an essay format and references to literary materials, but in doing so she made clear that even though shifts in practice did not favour women's development, she wanted to expand rather than reduce the role of her sex in educated debate and authorship of different kinds.

Each of these authors utilised her practical skills to make a unique contribution to women's writing and publishing at large during the period. Their distinct forms of rhetoric and increased personal involvement in their narratives compared to the works of their male peers ensured that their contributions, though making limited impact in the subject of midwifery itself, played a key role in advocating the position of women as intellectual equals, deserving of more recognition than they had yet received. Stone,

Nihell, Stephen, Mears and Wright actively sought to improve access to education, increase respect for women's academic and professional authority, as well as highlighting the importance of women's personal experiences and stories to larger audiences in ways that were not yet evident in eighteenth-century social, medical and literary cultures.

Part Two

Chapter Four

'I wish the child, I call my own': [Pro]Creative Experience in the Poetry of Jane Cave Winscom

Introduction

I wish the child, I call my own,
A soul that would adorn a throne!
With keen sensations, soft, refin'd,
A noble, but an humble mind.¹

Jane Cave Winscom's 'To My Dear Child' imagines a child, as yet unborn, with descriptions which are as pregnant as the poem's speaker. Alongside a rapid increase in the amount of medical literature that had been made available in relation to maternity and neonatal care, women's own interpretations of procreation also emerged in other genres. Poetry was a particularly fruitful genre for maternal voices, though this has not always been explored by literary scholars. Roger Lonsdale's anthology, *Eighteenth-Century Women Poets*, contains no less than nine poems which address birth as a central subject and Paula Backscheider and Catherine Ingrassia have dedicated an entire section of their anthology *British Women Poets of the Long Eighteenth Century* to the subject of motherhood, yet there remains a notable absence of birth poetry from much contemporary scholarship.² Like Winscom's 'To My Dear Child', poems by female authors, including Isabella Kelly, Anna Laetitia Barbauld, and Joanna Baillie, attempt to depict the experience of motherhood, whether during pregnancy, or later, as mothers to infant children, and give great insight into individual perceptions of pregnancy and birth during the eighteenth century. Their choice of poetry as a form through which to communicate maternal advice is particularly significant. As Patricia Meyer Spacks explains, alongside the popular genre of conduct literature, which had continued to be a source of guidance, eighteenth-century readers also 'turned to poetry for

¹ Jane Cave Winscom, 'To My Dear Child', *Poems on Various Subjects: Entertaining, Elegiac, and Religious* (Bristol: N. Biggs, 1794), p. 117, lines 41-4. The poem is alternatively titled 'The Author's Address to her first Child previous to its Birth' in the contents page of the volume. For purposes of consistency across Jane Cave Winscom's work I will refer to the 1794 edition of her collection, the first volume in which all of her birth poems feature, unless otherwise stated.

² Paula Backscheider and Catherine Ingrassia, *British Women Poets of the Long Eighteenth Century: An Anthology* (Baltimore: Johns Hopkins University Press, 2009) pp. 630-696.

investigation of such matters as how one should live, not primarily because of the absence of other resources, but rather because they believed poetry a particularly authoritative literary mode.’³ Even poetry of the most personal nature could provide advice to a wider audience than might first be perceived. Some authors who wrote poems on the subject of reproduction were mothers themselves, while others were not. Joanna Baillie, for example, whilst never giving birth herself, was the niece of famed obstetric practitioners William and John Hunter and sister of physician Matthew Baillie.⁴ Whether having experienced motherhood or not, each poet’s work has the potential to expand our knowledge and appreciation of lay perceptions of maternity and reproduction during the eighteenth century.

This chapter offers particular insight into the work of Jane Cave Winscom, a female poet whose work, unlike that of Baillie and Barbauld, has often been overlooked in examinations of eighteenth-century women’s poetry, perhaps due to her location in provincial towns, leading to a lack of contact with writers’ circles, and subsequent further development of her writing skills. Though she is not as well known as some of her contemporaries, her poetry is perhaps the most plentiful source of poems on childbirth from a single author from the period. I will first examine a gap in historiography and criticism relevant to Winscom and her work, before moving on to an analysis of the poet’s work on maternal experience that was included in a series of editions of her published collection *Poems on Various Subjects, Entertaining, Elegiac and Religious* across a period of almost twenty years.⁵ These ‘Birth

³Spacks draws attention to the work of well-known poets who offered advice in their writing, such as Alexander Pope and the Countess of Winchilsea. Patricia Meyer Spacks, *Reading Eighteenth-Century Poetry* (Chichester: Wiley-Blackwell, 2009), p. 7, 38.

⁴Dorothy McMillan, ‘Dr Baillie’, *1798: The Year of the Lyrical Ballads*, ed. R. Cronin (Basingstoke: Macmillan, 1998), pp. 68-92, p. 70-1. Regardless of their own reproductive history, women could rarely avoid the events of birth altogether, as attendance on other women was still a traditional and regular duty within female social culture during the late eighteenth and early nineteenth centuries. The Duke of Sutherland highlighted the expectations placed on women in families when writing of the events surrounding the unexpected timing of the birth of a grandchild, by his daughter Constance, Lady Grosvenor. In an account of household events, he recollected that ‘the ladies were all in attendance on Constance who has been moved from her temporary place of rest into Elizabeth’s room’. Even if not giving birth themselves, women often bore witness to the birth of infants who were the children of relatives or close friends. See Judith Schneid Lewis, *In the Family Way: Childbearing in the British Aristocracy, 1760 – 1860* (New Brunswick: Rutgers University Press, 1986) p. 162.

⁵ The first edition was produced in 1783, followed by others in 1786, 1789, and 1794. A reprint of the final edition was also sold in 1795. Although these are the only editions which have been counted on previous occasions, the front cover of the third print which is known about, the 1789 edition printed at Shrewsbury, is labelled ‘Second

Poems', a label that I apply to six of Winscom's poems: 'Written a few Hours before the Birth of a Child', 'The Author's Address to her first Child previous to its Birth ('My Dear Child')', 'To My Child, If A Son', 'To My Child, If A Daughter (Including a Letter)', 'Written a Month after the Birth of the Author's Son', and 'On the Death of Mrs Blake, who died in Child-Bed (of her sixth Child)', first cover issues including maternal health and mortality, before later developing into infant care and childhood guidance.⁶ As a collective, these poems capture a strong sense of the importance of reproduction as a cultural concept in the late eighteenth century and require further exploration in order to offer a full depiction of how the creative identity of a female writer may have been affected by any procreative experiences. Furthermore, this essay also considers the place of these poems in wider traditions of maternal instruction literature and advice poetry.

Recovering Winscom Scholarship

Although *Poems on Various Subjects, Entertaining, Elegiac and Religious* was published in at least four editions during Winscom's lifetime (along with one additional reprint of the final edition a year later), very little critical coverage of her works has ever emerged.⁷ From over 100 poems produced and published by Winscom, A. Elizabeth McKim has produced one of the only studies devoted entirely to her output, focusing on three particular works: 'The Head-Ach, Or An Ode to Health', 'Written the first Morning of the Author's Bathing at Teignmouth', and 'An Invocation to Death'. McKim collects these

Edition'. As there is variation in the content between this edition and the one printed in 1786, indicating that it is not a reprint of the second edition, this additional print would therefore be the third edition if each edition were numbered consecutively, regardless of the printing location. The 1789 edition is probably a second edition produced in Shrewsbury, meaning that Winscom's collection probably appeared in at least five separate editions rather than four with a minimum of one further reprint.

⁶ There are more than six poems in Winscom's complete collection which make reference to birth or children, those which I have selected as 'birth poems' are those which make direct reference to pregnancy, birth or an unborn infant. Although a similar format is maintained throughout the 'Address' to her unborn child to the two 'To My Child' poems which appear sequentially in the volume and might be read as a single narrative, each poem is given a title in its own right according to whether the verse addresses a male or female child and both are labelled separately in the details of the contents page.

⁷ Critical scholarship remains largely undecided over whether to refer to Jane Cave Winscom as 'Cave' or 'Winscom' due to the fact that in each edition of her collection after the first she is referred to as 'Miss Jane Cave. Now Mrs. Winscom.' As she is listed as married on all but one edition, I will refer to her as Cave Winscom or Winscom.

three under the label of the ‘Headache poems’, due to their ‘valuable historical record of the treatments [...] in England in the 1790s’ and an ‘account of the physical and psychological effects of [Winscom’s own] experience of headache’.⁸ Since McKim’s article was published in 2005, however, there has continued to be little in the way of further expansion on critical perspectives of Winscom’s poetry. It is only recently that another article has appeared which focuses exclusively on Winscom and her literary output. Norbert Schürer’s ‘Jane Cave Winscom: Provincial Poetry and the Metropolitan Connection’ offers the most detailed biographical research on Winscom’s life to date before also examining the implications of the Winscom family locating themselves in provincial towns rather than a metropolitan centre of commerce and publishing such as London, on the wider recognition of her poetry within contemporary scholarship.⁹ His review of places where Winscom’s name appears, as well as places where it is omitted, reveals that the scarce few references to her which do exist, such as those offered by Sarah Prescott, Roland Mathias, and Catherine Brennan, have been inclined to make reference to her predominantly for her nationality, as a Welsh writer.¹⁰ Although Winscom held strong familial connections to Wales, as well as having lived there for some time, she was, in fact, born of equal Welsh and English descent and spent much of her life in England, meaning that her work might be included in both English and Welsh Anglophone categories of eighteenth-century poetry.

While Schürer’s analysis in particular considers a range of themes from Winscom’s poetry, such as politics, religion, and local communities, he misses out others, including birth. By no means one of the author’s most obscure topics of choice, of six of Winscom’s poems selected by Roger Lonsdale for inclusion in his anthology *Eighteenth-Century Women Poets*, one of these was ‘Written a Few Hours

⁸ A. Elizabeth McKim, ‘Making Poetry of Pain: The Headache Poems of Jane Cave Winscom’, *Literature and Medicine*, Vol. 24, No.1 (Spring 2005) pp.93-108, p. 93.

⁹ Norbert Schürer, ‘Jane Cave Winscom: Provincial Poetry and the Metropolitan Connection’, *Journal for Eighteenth-Century Studies*, Vol.36, No.3 (September 2013) pp.415-31, p.416-17.

¹⁰ Sarah Prescott, ‘Anglophone Welsh Women’s Poetry 1750-84’, *The History of British Women's Writing, 1750-1830*, ed. Jacqueline Labbe (Basingstoke: Palgrave Macmillan, 2010) pp. 102-124; Roland Mathias, ‘Poets of Breconshire’, *Brycheiniog*, Vol.19 (1980/81) pp. 27-49; Catherine Brennan, *Angers, Fantasies and Ghostly Fears: Nineteenth-Century Women from Wales and English Language Poetry* (Cardiff: University of Wales Press, 2003) p. 37.

Before the Birth of a Child'.¹¹ Though a short verse, Winscom's poem reveals much about the speaker's thoughts prior to the birth of a child. These thoughts, offered in poetic prayer, express the fears and anxieties of a woman submitting herself to the pains of labour in the hope of producing a healthy, living child. The poem itself gives no indication as to whether author and narrator are in fact one in the same; yet, what is evident throughout Winscom's collection is that there was much of the poet in her poetry. Across her wide range of subject matter and themes, many involved people, events, or experiences which surrounded Winscom or her family at the time of her writing.¹² As Schürer and McKim have both claimed in relation to the 'Headache Poems', Winscom herself was the sufferer from debilitating headaches thought to have been migraines. The connection between Winscom and her subject matter in the headache poems has been proved further by Schürer's having found that 'The Head-Ach, or an Ode to Health' appeared in *Bonner and Middleton's Bristol Journal* in May 1793, prior to its publication in Winscom's volume of 1794.¹³ In this version she included a correspondence address for readers to contribute their own treatments and remedies for head pain. When read together, these three 'Headache Poems' indicate that one of Winscom's interests as a poet lay in creating a patient narrative of her own life and bodily experiences.

Birth in Poems on Various Subjects

The timeline provided by changes in the various editions of Winscom's work adds much information that is useful to an examination of her writing. The first edition of her poetry, printed and sold in 1783, gave her name as 'Miss Jane Cave', thus indicating that she was not married at the time of its publication. As might be expected from these dates, while "On the Death of Mrs Blake, who died in Child-Bed (of her sixth Child)" was featured, the first volume did not include 'Written a few Hours before the Birth of a Child' or any of her other birth poems. Jane Cave had married Thomas Winscom on 17

¹¹Roger Lonsdale, ed., *Eighteenth-Century Women Poets: An Oxford Anthology* (1989) (Oxford: Oxford University Press, 1990) p. 376-7.

¹² Winscom is known to have lived in Brecon or Talgarth, Bath, Winchester, Chagford, Bristol, and Monmouthshire. See Schürer, p. 421.

¹³ Schürer, p. 420. Winscom herself made reference to the fact that the poem was inserted 'in the Bristol Newspaper' but does not give the name of which local newspaper: see Winscom, 'The HEAD-ACH, or AN ODE TO HEALTH', p. 152.

May 1783, most likely a relatively short time after the publication of the first edition of *Poems on Various Subjects, Entertaining, Elegiac and Religious*.¹⁴ It was then only in the second edition of the collection, in 1786, that 'Written a few Hours before the Birth of a Child' was printed alongside 'The Author's Address to her first Child previous to its Birth ('My Dear Child')', 'To My Child, If A Son' and 'To My Child, If A Daughter', each of which discusses a woman's imaginings of her unborn child.¹⁵

Genealogical records make clear that these poems were not based on her pregnancy with her first surviving child on record, Thomas, who was not born until October of the following year, making it impossible for the timings suggested in the text to refer to this pregnancy and birth.¹⁶ Given that the Winscoms had been married approximately three years by the time the second edition of Jane's poetry was published, however, it may well be the case that the poem may have been based on her own personal experience of giving birth to her daughter Harriot, for whom a date of birth remains unknown, or another child who did not survive to adulthood.¹⁷ In another of the birth poems, 'To My Child. If A Daughter', Harriot is named suggesting that she was the expected child during the year that these poems were possibly written, and certainly published.¹⁸

Alternatively, as Tristanne Connolly claims about Anna Laetitia Barbauld's 'To a Little Invisible Being who is Expected Soon to Become Visible', the author may have been writing from a perspective of 'feminine sympathy', imagining the experience of others whom she has known (perhaps Mrs. Blake, or

¹⁴ Schürer, p. 418.

¹⁵ The only poem which had appeared in the first edition was 'On the Death of Mrs Blake, who died in Child-Bed (of her sixth Child)'. It was originally included in a larger section entitled 'Elegies'.

¹⁶ Schürer, p. 420.

¹⁷ Schürer, p. 420.

¹⁸ Winscom, 'To My Child, If A Daughter', pp. 126-129.

Although no records have been found to prove Harriot Winscom's date of birth, 'To My Child, If A Daughter' would suggest that she was in fact older than her brother Thomas and would have been born between 1783 and 1786. Alternatively, there remains the possibility that the expected child referred to in these poems was neither Harriot nor Thomas, or in fact another infant named Harriot who did not survive into adulthood. Another poem in Winscom's collection does address childhood mortality but there is no suggestion that the child's mother is Winscom herself. Unlike the birth poems, 'Written By Desire of a Mother who had lost an only Child' includes no first-person reference to the poem's speaker and as it appeared in the 1783 edition would have been likely to have been written before or around the time of Winscom's marriage, whereas the 'Mother' in the poem is referred to as a 'Widow' in the 1794 edition. See Winscom, 'Written By Desire of a Widow on the Death of her only Child', pp. 49-50.

other female acquaintances) to have given birth.¹⁹ Further than simply taking this poem in isolation, however, when placed together and read in relation to one another, Winscom's other 'Birth poems' also make further connections between the author and her subject matter. Like the identification of her daughter Harriot in her earlier poems, the last of her birth poems to appear in print, 'Written About a Month after the Birth of the Author's Son', published in her 1789 collection when Thomas, whose name is given in the first line, was approximately two years old, clearly demonstrates that the speaker is Winscom herself.²⁰

A later volume of literary *Prose and Poetry, on Religious, Moral and Entertaining Subjects*, although attributed only to a Mrs. Rueful, bears a similar title to Winscom's earlier editions and contains many of her own poems.²¹ The text claims to be authentic in its retelling of a true story of the 'history of Orenzo and Sarah', an unhappily married couple. The prose narrative also reiterates the author's sorrow on being closely connected with the story of financial misfortunes and a husband's infidelity by frequenting a local establishment described by the author as a 'sink of abominations' and only further identified as 'D—e's Brothel'.²² Alongside descriptions of personal struggles experienced by the author in needing to support her children in times of financial and domestic hardship, the editing of pre-existing poetic material also suggests that this book is in fact an autobiographical account from Winscom herself. Prose is interwoven with relevant poetry from earlier editions as a means of documenting the personal experiences of Winscom or 'Sarah'. One of the Headache poems, 'An Invocation to Death', was retitled as the more personal 'Sarah's Invocation to Death', making a direct connection between the protagonist character Sarah and the author, Winscom herself, who had appealed to the public of Bristol for remedies

¹⁹ Tristanne Connolly, 'Anna Barbauld's "To a Little Invisible Being...": Maternity in Poetry and Medicine', *Liberating Medicine 1720-1835*, eds. Tristanne Connolly and Steve Clark (London: Pickering & Chatto, 2009) pp. 209-24, p.224.

²⁰ Jane Cave Winscom, 'Written About a Month after the Birth of the Author's Son' in *Poems on Various Subjects: Entertaining, Elegiac, and Religious* (Shrewsbury: T. Wood, 1789) pp. 182-7.

²¹ Schürer, p. 423.

²² Mrs Rueful [Jane Cave Winscom], *Prose and Poetry, on Religious, Moral and Entertaining Subjects* (Bristol: George Routh, [n.d.]) p. 3.

and relief from her own head pain.²³ Although unchanged in the contents page of the volume, the title of ‘Written a few Hours before the Birth of a Child’ was also included in Sarah’s story, tellingly relabelled as ‘Written a few Hours before the Birth of my first child’, again emphasizing the autobiographical nature of her writing.²⁴

‘Written a few Hours before the Birth of a Child’

Although these indications do indeed point towards the authenticity of Winscom’s birth poems being based on her own maternal experiences, we may at least question the legitimacy of the claim made by the title of ‘Written a few Hours before the Birth of a Child’. As the timing of the writing in relation to the event of the birth itself is given in retrospective terms as ‘a few Hours before’, it would be reasonable to assume it was at least titled after the event itself, or may not be accurate to any particular number of hours. Her key interest in capturing this experience through verse was focused on documenting both the psychological and emotional preparations which a woman might make before giving birth, rather than any physiological sensation or pain which she was likely to have felt prior to delivery. Her language surrounding the physical aspects of childbirth, which anticipates birth with the phrase ‘prepare me for that hour’, suggests that the time period which she points towards is that which either narrowly precedes or follows the onset of early labour.²⁵

Winscom used common metre, a popular choice of the period, for ‘Written a Few Hours Before the Birth of a Child’. Written as a ballad quatrain, the poem maintains simple language throughout, making its meaning accessible to the broadest possible literate readership. Though popular, Winscom’s use of common metre might be considered unusual when paired with her subject matter. As Madeleine Forrell Marshall and Janet Todd explain in their exploration of the hymn form ‘[t]he predominant characteristic of hymns, however expressive of conviction or religious passion they may be, may only be

²³ Winscom, ‘Sarah’s Invocation to Death’ in *Prose and Poetry, on Religious, Moral and Entertaining Subjects*, p. 195-196.

²⁴ Winscom, *Prose and Poetry, on Religious, Moral and Entertaining Subjects*, p. viii and p. 137.

²⁵ Winscom, ‘Written a Few Hours Before the Birth of a Child’, p. 115, line 1.

described as their impersonality'.²⁶ This is clearly not the case in Winscom's poetry. Her subject matter, in both birth poems and other poetry, is highly personal, linked to her own life, the local communities in which she lived and those subjects to which she could immediately relate. Though perhaps not as well-educated as other woman poets of the period, her prefacing words to subscribers, which appeared as early as the first edition, includes a list of authors, 'Seward, Steele [and] More', whose works she may have tried to emulate in form and style, suggesting that she sought to read and access literary materials where possible. The personal importance of Winscom's attempts to acquire reading material and expand her literary knowledge is further evidenced in the poem 'To a Lady who lent the Author, (tho' quite a stranger) two valuable Volumes &c.'²⁷ Winscom is not only grateful for the lady's kindness in sharing books with her, she also acknowledges the 'value' of her having done so, though she does not detail how she perceives them to be valuable, whether economically, in the sense of how much the books would have cost to buy, or emotionally, in terms of how much the books could contribute to Winscom's own learning.

As well as referring to the work of other poets, her poem, 'Written a Few Hours Before the Birth of a Child', along with a number of others hymns in her collection, including 'An Hymn for Consecration, sung at the Opening of the Countess of *Huntingdon's* Chapels in *Brecon, Worcester, &c.'* and 'An Hymn for a Child who has lost its Father or Mother', suggests that the hymn form was equally important, if not more so, as a signifier of the influence of her own faith on her poetic works.²⁸ Few literary critics who have engaged with her work have debated the specific details of Winscom's personal religious beliefs. This issue of biography is particularly important to Winscom's birth poetry given that this small collection is predominantly made up of spiritual meditations on both motherhood and raising children. Even though many of her poems and aspects of biographical information give a clear indication that she was Methodist, the details of whether her own Methodism was that which subscribed to Calvinist or Wesleyan teachings appears to be an issue which has not yet been fully resolved. Roland Mathias

²⁶ Madeleine Forrell Marshall and Janet Todd, *English Congregational Hymns in the Eighteenth Century* (Lexington: The University Press of Kentucky, 1982) p.1.

²⁷ See Winscom, 'To a Lady who lent the Author, (tho' quite a stranger) two valuable Volumes &c.', pp. 163-5.

²⁸ Winscom, 'An Hymn for Consecration, sung at the Opening of the Countess of *Huntingdon's* Chapels in *Brecon, Worcester, &c.'*, pp. 83-85; 'An Hymn for a Child who has lost its Father or Mother', pp. 103-104.

interprets Winscom's having written in English as a clear sign that she was a follower of 'Wesley's Methodism rather than that of Daniel Rowland and the Calvinist followers of Whit[e]field', which may well have seen her write in Welsh language instead.²⁹ Alternatively, Sarah Prescott argues against this, asserting the belief that Winscom's poetry 'clearly aligns her with the Calvinist Methodism which flourished in, and was associated with, Wales'.³⁰ Prescott's view is derived from close analysis of a variety of Winscom's poetry including three of her elegiac verses: 'On the Death of Mr. Whitefield', 'On the Death of the Rev. Mr. Howell Harris', and 'On the Death of the Rev. Mr. Watkins'. Though Schürer does not establish a firm position on either assessment, but does admit that Winscom's elegy for Harris is 'more personal in tone, figuring him in terms of friendship and family', his own findings include reference to correspondence between Jasper Winscom, Jane's father-in-law, and John Wesley and even between Wesley and Jane herself.³¹ These exchanges of letters between the family and Wesley draw attention to the distinct possibility that Jasper Winscom, if not Thomas also, raised his family as followers of Wesleyan Methodism.

Winscom and Religious Faith

Clear answers regarding Winscom's religion may come from negotiating with both of these views which, although they appear to be incompatible, are nevertheless significant interpretations of Winscom's adult life and work, alongside information regarding the faith which Winscom may have been taught from early childhood. Among the critics mentioned above only Mathias has looked towards any biographical history of Winscom's parents and their religious beliefs. Winscom's father, John Cave, a glover and former excise officer, also published a book entitled *An Epistle to the Inhabitants of Gillingham, In the County of Dorset: wherein is a Looking-Glass for the Faithful*, a treatise which details the author's own experience of religious learning. In his prefacing address to the reader, Cave makes reference to his encounters with 'the Ministry of Mr. Howell Harries', during which he explains, 'the Lord was graciously

²⁹ Mathias, p. 35.

³⁰ Prescott, p. 105.

³¹ Schürer, p. 419.

pleased to reveal himself unto me'.³² His devotion to Harris's teachings as 'the true Knowledge of God' indicates that Cave subscribed to Calvinist Methodism and was likely to have encouraged his daughter in a similar education in her early life. Yet her husband's family, it would seem, were not persuaded by the same influences. As Schürer has discovered, Jasper Winscom corresponded with John Wesley with some frequency, and Wesley's letters in response to Jasper's descriptions of family life provide evidence that there was either a level of personal confidence which the two men shared, or at least that Winscom sought advice from Wesley, perhaps due to his position as a religious leader and educator. If it was the case, then, that the Cave and Winscom families were guided in the direction of different types of Methodism, Jane Cave Winscom would have been brought up as a follower of Calvinist thought and practices, but would have joined a family with Wesleyan connections, suggesting that they embraced Arminianism.

Schürer's research into Wesley's correspondence further reveals that Thomas Winscom married without his father's approval, a matter which caused unrest within the family. Wesley, having written to both Jasper and his daughter-in-law with advice on repairing the tenuous relationship that existed between Jasper and his son and daughter-in-law, appears to indicate that Jane Cave Winscom was keen to obtain the approval of her in-laws and to be accepted by them as a member of the family. Just as Wesley advised her to remain agreeable and polite with her husband's father, it may also be the case that Jane attempted to assimilate her once-Calvinist beliefs more closely with the Winscom family's Wesleyan views, hence also receiving guidance from Wesley. On the other hand, she may simply have been influenced by her husband's beliefs in their cohabiting and raising children within the household.

While Prescott looks to the first edition of Winscom's poetry to evidence her Calvinist beliefs, the only version published prior to her marriage, Schürer refers to the later 1794 edition which may account, at least in part, for some of the differences in interpretation.³³ As each edition was edited, the poems which were published within each were subject to revision and variation – some poems were removed and

³² John Cave, *An Epistle to the Inhabitants of Gillingham, In the County of Dorset: wherein is a Looking-Glass for the Faithful* (Brecon: E. Evans, 1781) unpaginated leaf, 'To the READER'.

³³ Mathias does not refer to any specific edition of Winscom's poems.

newer material was added. Where the 1783 edition includes the three examples of elegiac verse that Prescott finds to indicate Winscom's Calvinist beliefs, including 'On the Death of Mr. Whitefield', 'On the Death of the Rev. Mr. Howell Harris', and 'On the Death of the Rev. Mr. Watkins', only the last of these three remains included in the 1794 printed text. Schürer takes this as a sign that 'Winscom was trying to make her volume less Welsh', yet also admits that, if this is the case, 'On the Death of Mrs. Maybery, of Brecon' was not also removed.³⁴ This type of editing might also indicate a shift in her religious beliefs, away from the earlier Calvinist teachings which she had received towards a Wesleyan model, in the passage of time since her marriage. Poems such as those elegies, written as tribute to Calvinist ministers, were replaced with others which, as Prescott comments, 'deal specifically with her experience of marriage, childbirth and motherhood'.³⁵ Marshall and Todd explain that Wesley's approach to faith 'grounded spiritual life in the interior emotional process of the heart', the influence of which may explain Winscom's shifting emphasis away from tributes to public figures of religious significance and towards her personal emotional experiences, such as those of childbearing.³⁶ By the time Winscom wrote her birth poems she had been married to Thomas for some time and may well have integrated his family's Wesleyan beliefs into her own faith and religious practices.

In addition to beliefs surrounding supernatural intervention and healing, those who subscribed to the Methodist faith during the eighteenth century, as Robert Webster comments, 'saw themselves fitting into an *ars moriendi* tradition that attempted to value the experience of a good death. In various narratives that depicted final hours of suffering a glimpse was offered into the state of the departing soul [...] often the desire for healing was eschewed by the faithful in favour of transportation into another realm of existence where peace and harmony were actualized'.³⁷ 'Written a Few Hours Before the Birth of a Child' can be read as a final hours prayer in which, in the face of uncertainty, Winscom attempts to assure

³⁴ Schürer, p. 422.

³⁵ Prescott, p. 106.

³⁶ Marshall and Todd, p.117.

³⁷ Robert Webster, "'Health of Soul and Health of Body": The Supernatural Dimensions of Healing in John Wesley', *Inward & Outward Health: John Wesley's Holistic Concept of Medical Science, the Environment and Holy Living*, ed. Deborah Madden (Eugene: Wipf & Stock), pp. 213-232, p. 215.

herself a ‘good death’. In addition to descriptions that not only obey, but also readily acquiesce to the will of God, Winscom also seeks to convey honesty, integrity, and a candid approach to being guided by divine will through the poem’s form and language. These choices of simple wording and a lack of complexity in any of her descriptions of feeling or emotion further complement the impression given by the use of an intimate prayer, of the speaker’s openness and honesty in her plea for ‘aid’ during birth.³⁸

Among those poems which were printed in subsequent editions of Winscom’s collection, were featured an increasing number which focused on matters of health, discussing headaches as well as childbirth, indicating that she may have taken some interest in Wesley’s views specifically in relation to links between physical and spiritual health. Wesley is documented as having treated medical care with an almost equal respect to that which he awards religious faith in his published guidance to his followers. In his treatise *Primitive Physick*, Wesley claims “[t]is probable, Physick as well as Religion, was in the First Ages chiefly traditional”.³⁹ His narrative indicates that he pursued an active interest in research and publications by practitioners, including Thomas Sydenham among others, yet also maintained a strong belief in the power of prayer as a means of communicating bodily needs for purposes of encouraging divine intervention and supernatural cures for physical ailments. Furthermore, Wesley also recognised the possibility of a public shift away from viewing religious worship as a means of improving health and curing illness in favour of professionalized, empirical medical discourses. In addition to his discussion of ‘Regimen, or Manner of Living’, made up of medical advice ‘chiefly transcribed from Dr. *Cheyne*’, Wesley also advises “[a]bove all, add to the rest, (for it is not labour lost) that Old, Unfashionable Medicine, Prayer. And have faith in GOD, who “killeth and maketh alive, who bringeth down to the Grave and bringeth up.””⁴⁰ This belief of his is not dissimilar to that which Winscom draws attention to in ‘Written a few Hours before the Birth of a Child’ in which she contemplates the possibility of death in childbirth and prays to God as an acknowledgment that only God’s will shall control the events of

³⁸ Winscom, ‘Written a Few Hours Before the Birth of a Child’, p. 115, line 2.

³⁹ John Wesley, *Primitive Physick: or, an easy and natural method of curing most diseases* (London: Thomas Trye, 1747) p. vi.

⁴⁰ Wesley, p. xviii-xix.

birthing. Similarly, Winscom, like Wesley, shows a degree of familiarity with commonplace domestic medical literature that would have been accessible during her lifetime in *Prose and Poetry, on Religious, Moral and Entertaining Subjects*. She makes direct reference to Hugh Smythson's *The Compleat Family Physician*, yet her sentiments, as expressed in 'Written a few Hours before the Birth of a Child', equally parallel Wesley's faith in the power of prayer and in God over life and death rather than seeking to introduce forms of practical medical care to this already complex equation.⁴¹ As the poem describes the feelings of a woman who readies herself for 'pain, or agony, or death', all reasonable apprehensions in the context of eighteenth-century birthing, the verse also points towards religious devotion as both a means of self-medicating and as an emotional coping mechanism in response to fears relating to the painful and physically exhausting work of giving birth.⁴²

Winscom's poetic prayer demonstrates her deference and willingness for God to determine the outcome of the delivery, claiming '[w]ith joy shall I give up my breath' should any complications result in her death.⁴³ As these personal hopes and fears unfold, she asks for strength as well as 'patience to submit, / To what shall best thy goodness please'.⁴⁴ Her final request is still more revealing about her personal apprehensions of childbirth as she asks that

If death thy pleasure be;

O may the harmless babe I bear

Haply expire with me.⁴⁵

This request, initially startling to the modern reader, is underpinned by a fear of leaving her child without a mother's care should she die in childbirth. Winscom was by no means alone in these fears and was not the only women to express similar feelings through poetry. Elizabeth Hands, a writer who much like

⁴¹Mrs. Rueful [Jane Cave Winscom], *Prose and Poetry, on Religious, Moral and Entertaining Subjects* (Bristol: George Routh, [n.d.]) p. 3. See also Hugh Smythson, *The Compleat Family Physician: Or, Universal Medical Repository* (London: Harrison and Co., 1781). As well as its original 1781 print, Smythson's domestic medical manual was also reprinted in 1785. It is unknown which copy Winscom was familiar with; however, for the page in the original 1781 edition which she refers to see Smythson, p. 396

⁴² Winscom, 'Written a Few Hours Before the Birth of a Child', p. 116, line 9.

⁴³ Winscom, 'Written a Few Hours Before the Birth of a Child', p. 116, line 11.

⁴⁴ Winscom, 'Written a Few Hours Before the Birth of a Child', pp. 115-16, lines 6-7.

⁴⁵ Winscom, 'Written a Few Hours Before the Birth of a Child', p. 116, lines 14-16.

Winscom, was ‘born in obscurity, and never emerg[ed] beyond the lower stations in life’, also drew on her own maternal experiences and fears of birth for her poem ‘On the Author’s Lying-In, August, 1785’.⁴⁶ Hands’ poem shares a number of features with Winscom’s birth poems, most closely with ‘Written a few Hours before the Birth of a Child’. Like this verse of Winscom’s, Hands’ poem is also written as a prayer and takes the possibility of death in childbed as its central focus. In contrast to the perspective of Winscom’s poem however, in which the speaker reflects upon her fears of death in childbirth prior to actually giving birth, Hands’ speaker gives thanks to God for preserving her life. ‘I live!’ she exclaims:

I live! my God be prais’d, I live,
And do most thankfully receive,
The bounty of my life[.]’⁴⁷

These joyful expressions are suggestive of the range of fears which the speaker experienced both prior to and during the delivery of her infant daughter and the relief she now feels having been safely guided through the ordeal so that she may ‘live, still longer’.⁴⁸ The realities of childbirth during the eighteenth century included the risks of both infant and maternal mortality, or potentially both. Statistics provided by Robert Woods suggest that, at the time of Winscom’s writing, ninety in every ten thousand deliveries in England resulted in maternal death.⁴⁹ Winscom herself experienced pregnancy on at least two occasions during a period which mostly saw declines, with only intermittent or small increases in infant and maternal mortality as well as stillbirths. Yet the remaining loss of life and memories of generations of women who had faced higher risks, often with lesser medical care, were still present within public consciousness.

⁴⁶ Elizabeth Hands, *The death of Amnon. A poem. With an Appendix: Containing Pastorals, and other Poetical Pieces* (Coventry: N. Rollason, 1789) unpaginated dedication ‘To Bertie Greatheed, Esq.’

⁴⁷ Hands, ‘On the Author’s Lying-In, August, 1785’, pp. 123-4, p.123, lines 7-9.

⁴⁸ Hands, ‘On the Author’s Lying-In, August, 1785’, p. 123, line 10.

⁴⁹ Robert Woods, *Death before Birth: Fetal Health and Mortality in Historical Perspective* (Oxford: Oxford University Press, 2009) p. 95.

Birthing Risks and Mortality

Arrangements made specifically for Winscom's confinements are among biographical details which remain unknown. It is likely that she gave birth at home given that, as Schürer indicates, her life was spent in provincial rather than metropolitan areas such as London or Manchester where public lying-in facilities would have been more likely to have been readily available to a middle-class family such as the Winscoms.⁵⁰ Even in rural and provincial towns maternity care was subject to much improvement by the late eighteenth century and the number of medical manuals which offered instruction and advice to attending practitioners had increased steadily since the mid-sixteenth century. As Helen King notes, the female reproductive body became subject to 'intense interest', particularly from male medical professionals whose academic training had not prepared them for the seemingly social and non-professional duties of managing childbirth.⁵¹ As has been seen in previous chapters, this population of physicians, surgeons and man-midwives sought to technologically enhance and improve birthing practices in general. While these developments contributed to decreasing rates of mortality for women and children, medical literature continued to make no secret of the pains of labour and delivery. Manuals offered by female midwives, including Jane Sharp and Elizabeth Nihell and male practitioners, such as Henry Bracken, Thomas Denman, and Giles Watts, openly acknowledged the hard and painful process of 'travail' or labour before delivery.⁵² In spite of this though, there was considerably less content directed specifically at women's particular fears and apprehensions surrounding birth. Martha Mears' midwifery guidance text *The Pupil of Nature*, published in 1797, was one of the earliest manuals to address such personal issues as anxiety during pregnancy through an in-depth discussion. 'Essay III' of the eleven which make up her text examines the psychological journey that women undertake throughout pregnancy

⁵⁰ Schürer, p. 420.

⁵¹ Helen King, *Midwifery, Obstetrics and the Rise of Gynaecology: The Uses of a Sixteenth-Century Compendium* (Aldershot: Ashgate Publishing, 2007) p. 9.

⁵² See Jane Sharp, *The Midwives Book: Or the Whole Art of Midwifry Discovered*, ed. Elaine Hobby (1671) (Oxford: Oxford University Press, 1999) p. 131; Elizabeth Nihell, *A treatise on the art of midwifery* (London: A. Morley, 1760) p. 153; Henry Bracken, *The midwife's companion; or, a treatise of midwifery: wherein the whole art is explained* (London: J. Clarke and J. Shuckburgh, 1737) p. 117; Thomas Denman, *An essay on natural labours* (London: J. Johnson, 1786), p. 3; Giles Watts *Reflections on slow and painful labours, and other subjects in midwifery* (1755) (London: G. Keith, 1786) p. 3.

and childbirth, highlighting a number of key issues which were liable to affect women's mental wellbeing, as well as the development of her unborn infant, and methods for managing a healthy progression of gestation. With regards to fears about???, similar to those expressed by Winscom, Mears warns that '[o]ne of the first and most prevailing passions in the breasts of pregnant women is fear. The happiness of becoming mothers is sourly checked by preposterous ideas of danger.'⁵³ 'Hope', she continues, is 'so justly, so emphatically called the *balm* and *life-blood* of the soul', a message not dissimilar to the hope and comfort which Winscom's speaker finds in her own prayer and reflection.⁵⁴ In both literary and medical texts of the late eighteenth century, such as those written by Winscom and Mears, an increased level of public discussion around women's experiences of childbearing, especially those that were personal, is apparent.⁵⁵

These written reflections indicate that Winscom had spent time seriously contemplating the possibilities of delivery and was realistic in her assumptions about the risks and potential complications associated with giving birth. Like the final lines of 'Written a Few Hours Before the Birth of a Child', anxieties surrounding maternal death and subsequently leaving an infant without a mother's care are echoed in other poems written by Winscom, including 'To My Dear Child', an address to her as-yet-unborn child.⁵⁶ Her verse describes these fears in detail:

What unknown cares obstruct my rest,

What new emotions fill my breast!

I count the days so oft re-told

E'er I my infant can behold.

Thought after thought intrudes a dart,

⁵³ Martha Mears, *The Pupil of Nature* (London: Faulder, Murray and Highly, 1797) p. 27.

⁵⁴ Mears, p. 28.

⁵⁵ G. J. Barker-Benfield, *The Culture of Sensibility: Sex and Society in Eighteenth-Century Britain* (Chicago: University of Chicago Press, 1996) p. 160.

⁵⁶ As well as 'To My Dear Child', Winscom also produced another poem on a similar theme entitled 'A Hymn for a Child who has Lost its Father or Mother'. These poems, alongside 'On the Death of Mrs Blake', suggest that Winscom was familiar with families who had children in her local community and had suffered the loss of at least one parent. See Winscom, 'A Hymn for a Child who has Lost its Father or Mother', pp.103-4.

And strange forebodings fill my heart.⁵⁷

These 'new' feelings which pervade the mind of an expectant mother, disturbing her happiness and contentment at the prospect of the birth of her child, bear striking similarities to those which Mears later described in her medical manual. Although dark in their very nature, Winscom's thoughts are only those which contemporary readers, a female audience in particular, would be likely to empathize with, and would be understood as part of her preparations for birth and a potential transition from life into death. The poem contains two particular wishes. The first, like 'Written a few Hours before the Birth of a Child', desires that, in the event of her fear of maternal death being realized the infant might 'breathless with thy mother lie'.⁵⁸ In the second, the speaker more optimistically hopes 'Perhaps I yet may live to see / My child grow up and comfort me.'⁵⁹

Though chiefly foreboding and fearful, these thoughts are quickly expanded upon by an intrinsically practical approach to the possibility of the unborn infant being left without a mother's care. The stanzas of the poem which follow are dedicated to providing a written record of hopes and advice which the child, should they survive, would be able refer to in later life, again in the event that

Perhaps the time which gives you life,
Deprives Eusebius of his wife;
And you for circling years may spare,
Who ne'er will know a mother's care.⁶⁰

The figure of Eusebius is one which not only occurs in 'To My Dear Child', but also in another of Winscom's birth poems, 'On the Death of Mrs Blake'. Here Eusebius represents a husband left widower, possibly with a surviving infant, after his wife has given birth. Although he is not described in any detail, the use of the word 'deprives' is somewhat sympathetic, suggesting that such a loss may be keenly felt by the mourning husband. In the elegy 'On the Death of Mrs Blake', the widowed Eusebius is again used as

⁵⁷ Winscom, 'To My Dear Child', p. 118, lines 9-14.

⁵⁸ Winscom, 'To My Dear Child', p. 119, line 24.

⁵⁹ Winscom, 'To My Dear Child', p. 119, lines 29-30.

⁶⁰ Winscom, 'To My Dear Child', p. 118, lines 15-18.

an indication of maternal mortality as the name is a substitution for the presumably real Mr Blake, ‘The fond Eusebius view[ing] his lovely wife’, who initially appeared to have recovered from the birth of her sixth child, but died within a week of delivery.⁶¹ A first glance, the choice of the name Eusebius specifically to depict a loving husband and father appears puzzling, and one wonders whether Winscom had in fact read a history of the life of roman historian Eusebius which is now lost to modern readers. On deeper examination, however, a more likely source for these references to Eusebius than a history volume is William Darrell’s *The Gentleman Instructed, in the Conduct of a Virtuous and Happy Life*. Darrell’s manual was first published in 1704 and reprinted on many occasions, meaning that although the text predates Winscom’s own birth, it is nevertheless likely to have been an accessible and appealing read in domestic households such as Winscom’s own. Darrell offers guidance on the instruction of young gentlemen through a dialogue between an instructor and his pupil; Eusebius advises Neander on a series of topics including the ‘Duties of a Christian’.⁶² It is not difficult to see why the manual may well have attracted the eye of Winscom, whose interests in parenting and the instruction of children are evidenced in her birth poetry as well as others within her collection including ‘To a Youth, inclinable to Gaiety’, ‘A Poem for Children, on Cruelty to the Irrational Creation’ and ‘To a Young Gentleman much addicted to Detraction’.⁶³ A biography and history of Darrell’s character Eusebius is also provided in the preface to the text. Eusebius, he explained, represents ‘a Scholar, Soldier and Courtier, and in all these States a Saint’, thus providing Winscom with a model figure on which to base her advice to her unborn child.⁶⁴ Such an image, it would be reasonable to suspect, may have been particularly attractive to Jane Cave Winscom, given the difficulties that she experienced within her own marriage, as relayed in her history of Orenzo and Sarah. In addition to these desirable traits, Darrell’s Eusebius is also noted to have ‘*had the good Fortune to be born of a Mother, whose Wisdom vied with her Piety, and both indeed were*

⁶¹ Winscom, ‘On the Death of Mrs Blake’, p. 55, line 12.

⁶² William Darrell, *A gentleman instructed in the conduct of a virtuous and happy life*, 2nd edition (London: E. Evets, 1704) pp. 45-76.

⁶³ Winscom, ‘To a Youth, inclinable to Gaiety’, pp. 37-40; ‘A Poem for Children, on Cruelty to the Irrational Creation’, pp. 51-53; ‘To a Young Gentleman much addicted to Detraction’, pp. 148-149.

⁶⁴ Darrell, unpaginated section, ‘The Preface’.

extraordinary: She trained him up from the Cradle in the Duties of a Christian', attributes which Winscom herself would have been likely to aspire to in raising her children.⁶⁵

Personal Hopes and Fears

Further than the use, or at least influence, of the character Eusebius, is also the possibility that Darrell's ideas contained within the book also had some bearing on Winscom's own views as expressed within her poems. Her guidance, offered in the form of maternal instruction, undertakes to express a variety of directions for intellectual, social, and emotional wellbeing:

Be courteous, prudent, virtuous, wise,
Each friend's instruction always prize.
And if you're cast in learning's way,
Improve each moment of the day,
And grasp at knowledge whilst you may.⁶⁶

These values which were upheld by Winscom as essential to the education, personality and behaviour of her child, include some of those which were also advocated by Darrell. In 'Duties of a Christian', Eusebius emphasized the importance of education, instructing: 'In a word, Neander, enrich your Understanding by the Knowledge of Things that become your Quality; and when you are doubly equipp'd (I mean with a fair Estate, and a good fund of Learning) what can you desire more but an ordinary Stock of Prudence to lay them out to Advantage?'⁶⁷ In the same way that Darrell emphasised those characteristics which he labelled to be among the duties of a Christian, Winscom suggested a focus on learning as a formula for a good life, and a means of obeying and attending God.

The two poems which immediately followed 'To My Dear Child', 'To My Child, If A Son' and 'To My Child, If a Daughter', also offer practical instruction to an unborn infant intended for later life. So much are these two prepared in the same spirit as the previous poem that without additional titles and entries into the contents pages of the volume they might be mistaken for one and the same verse. Unlike

⁶⁵ Darrell, unpaginated section, 'The Preface'.

⁶⁶ Winscom, 'To My Dear Child', p. 120, lines 43-46.

⁶⁷ Darrell, p. 28.

‘To My Dear Child’, however, both of these poems are specific to the gender of the child which they address and the advice contained within each is focused on issues of courtship. In ‘To My Child, If A Son’, Winscom’s speaker is keen to encourage her son to exercise caution over his affections and treat the object of his desires with care and respect. First, her primary interest lies in protecting her son against entering into a marriage which he may later regret:

If you, my son, should e’er incline
In Hymen’s careful bands to join
Observe the maid who suits your heart.

Progressing to more serious warnings, she advises: ‘With ardour seek —her love obtain—/ Then to desert and give her pain’.⁶⁸ She cautions, with more than a hint of apprehension that her unborn son might, without guidance, fall into a pattern of insalubrious behaviours with regard to his treatment of women.⁶⁹ In her guidance to her daughter, Winscom warns, ‘External beauty has no charms, /If disengaged from Virtue’s arms’, stressing that her unborn child Harriot should pay close attention to the cultivation of her mind and manners, regardless of how comely she may be in her appearance.⁷⁰ Like ‘To My Child, If A Son’, the poem then turns to courtship as its chief matter of concern. While Winscom is not necessarily troubled by her daughter’s duty and behaviour towards male suitors in the way she is of her son, her speaker emphasises the need for young women to be watchful of ‘Whom to accept and whom to refuse’.⁷¹ Her maternal anxieties for her daughter’s future focus on the possibility that ‘the deep deceits of men’ might go undetected during courtship, later entrapping Harriot in a loveless marriage. Moreover, she is painfully aware of the fact that her poem ‘own[s] a task beyond her pen’, and that her advice may yet prove ineffective in her daughter’s future relationships. A letter, also addressed to an unborn child, was printed alongside ‘To My Child, If A Daughter’ as a further explanation of the poem itself.⁷² The letter, while being noted as being attached to one poem only, makes no specific reference to gender and might

⁶⁸ Winscom, ‘To My Child, If A Son’, pp. 124–6, p. 124.

⁶⁹ Winscom, ‘To My Child, If A Son’, p.125, lines 12-13.

⁷⁰ Winscom, ‘To My Child, If A Daughter’, p. 126, lines 7-8.

⁷¹ Winscom, ‘To My Child, If A Daughter’, p. 127, line 12.

⁷² Winscom, ‘Letter’, pp. 129-130.

apply as well to Winscom's poem addressed to a son, as to that addressed to a daughter. The poet makes clear that, as is the case with all of Winscom's birth poems with the exception of 'On the Death of Mrs Blake', which still deals directly with maternal death, the 'To My Child' poems are intended as guidance in the event of maternal death before she herself could administer the advice.

The series of considerations made by a mother in preparing her child for later life is a theme which remains consistent in the majority of poems examined here and provides another valid justification for viewing Winscom's birth poetry as a collective beyond the generic subject of the poems themselves. If displayed in isolation, any one of these verses would be incomplete at least without the other two advice poems, if not the whole body of Winscom's work, which is centred on pregnancy, birth, and the experience of motherhood. In each instance the speaker's imagination is projected so as to be experiencing motherhood purely through her own imagination, yet the advice presented might be real enough. These three poems locate Winscom within two different yet connected literary traditions: maternal instruction manuals for children and advice poetry. Like Winscom, earlier women writers, including Dorothy Leigh, Elizabeth Joscelyn, Susannah Bell, and Elizabeth Grymeston, had also written and published records of advice to their unborn offspring in the event that they might die during childbirth.⁷³ While the unfortunate truth behind these documents is that many of these women pre-empted their own fate and did in fact die due to complications related to giving birth, Winscom was not among them for this reason. Happily, the date of her death, in 1812, indicates that, perhaps as a result of improved delivery methods, she had the use of her own reflections and was able to offer her advice to her children in person.⁷⁴

Winscom claimed in her collection that most of these poems were 'not intended for publication, nor would they have been inserted here, but in compliance with the request of several friends'.⁷⁵ Given

⁷³ See Dorothy Leigh, *The Mothers Blessing* (London: John Budge, 1616); Elizabeth Joscelyn, *The Mother's Legacie to her Unborne Childe* (London: John Haviland, 1624); Susanna Bell, *The legacy of a dying mother to her mourning children* (London: John Hancock Senior and Junio, 1673); Elizabeth Grymeston, *Miscelanea. Meditations. Memoratiues* (London: Melch Bradwood, 1604).

⁷⁴ Schürer, p. 421.

⁷⁵ Winscom, author's note accompanying 'To My Dear Child', p. 117.

that her work suggests her to have been an avid reader, and that this comment is not dissimilar to that used by the midwife, Mrs. Wright (considered in Chapter Three) used to market her midwifery text, she was most likely to have been aware of a possible appeal to the broader public, and contemporary reading trends that existed of viewing poetry as material through which one might reflect on matters of lifestyle, including parenting. Although it may have been the case when she initially set down her thoughts about maternity on paper that these poems were written as personal reflections, the fact that they had been seen by others at all suggests that they were not completely private documents, or that the statement was inserted as a purely cautionary measure. She may well have perceived that her reflections on maternity were not the stuff of canonical poetry, or even remotely similar in content to the works of those authors, such as Steele and More, that she so admired. Yet, as Schürer indicates on more than one occasion, Winscom appears not to have made any attempt to establish herself within higher-profile, London-based literary circles, and never published there.⁷⁶ Perhaps it was the very fact that she remained within small-town surroundings, therefore, which gave her the freedom to publish poetry of a different kind. Ann Yearsley, writing in 1795, offered a range of views on child-rearing from the earliest days of motherhood expressed through a dialogue of friendship, one mother to another, in her poem ‘To Mira, On the Care of her Infant’.⁷⁷ Winscom’s own approach assumes a position of authority as a mother. She extends her advice beyond her own children to readers through publication about the early days of parenthood, whilst also acting as an advocate for self-medication against the pains of labour through the medium of prayer.

Conclusion

These poems, of which Winscom’s ‘Written a Few Hours Before the Birth of a Child’ is just one example, illustrate childbirth as an important social, medical, physical, and psychological event for their respective protagonists. Each one presents a unique way of thinking about these experiences, whether discussing practical advice or metaphysical interpretations of birth, describing joy in new life, or detailing

⁷⁶ For references to Winscom’s life in provincial settings and her lack of connections to the London literary market, see Schürer, pp. 415-16, p. 420, p. 423, and p. 428.

⁷⁷ Ann Yearsley, ‘To Mira, On the Care of Her Infant’, *The Rural Lyre; A Volume of Poems Dedicated to the Right Honourable the Earl of Bristol, Lord Bishop of Derry* (London: G.G. and J. Robinson, 1796) pp. 115-16.

fears of death either for themselves or their children. The quantity and content of Winscom's birth poetry means that she is a key figure in the production of literature based on maternity. Like McKim's identification of Winscom's collection of 'headache poems', I have been able to apply a similar categorization to Winscom's 'birth poetry', for which a personal narrative is similarly evident. Her work applies conventional forms used by other, well-known female poets in order to produce verse based on less conventional themes. Reading all six birth poems together, it is clear that they make up a highly original collection, distinctive for their clear depictions of the earliest stages of the life cycle: pregnancy, birth, and neo-natal care, as well as offering a range of practical thoughts to readers. Far from creating an idealized image of childbearing, Winscom's candid commentaries offer a detailed insight into how women's creative ambitions could be shaped by the frightening ordeal of childbirth and the experience of motherhood, often related to the apprehensions that came with parenting in the eighteenth century. Her work presented brave new content for women's poetry and contributed to developing the landscape of women's writing, so that subjects such as childbirth became increasingly accessible throughout the eighteenth- and into the nineteenth-century print market.

Chapter Five

'Slow steps of casual increase': Laurence Sterne and Social Anxieties of Reproduction

Introduction

'Man is a creature born to habitudes': *The Life and Opinions of Tristram Shandy, Gentleman* highlights the inescapable structure of human identity, first imposed at birth and intended to provide each individual with a framework in which to grow and develop.¹ Like the production of a marbled page, the genesis of a human being is unique and its effects cannot be reproduced to an exact likeness. The dispersal of his 'animal spirits' at the initial point of conception followed by a disastrous delivery during which his nose was crushed are occurrences which, Tristram claims, caused irreversible damage to his person, ensuring that his '*misfortunes began nine months before ever he came into the world*'.² Walter Shandy's remark, coupled with his 'wiping away a tear which was trickling down his cheek', indicates the significance of the events of his son's conception, gestation, and birth to his own understanding of reproduction.³ This chapter considers the way in which both the plot and narrative of Sterne's novel joins these debates and extends into commenting on childbearing, and the event of childbirth itself, as both a medical and social concept.

Literary and medical historians alike have been drawn to Sterne's depiction of childbearing as a valuable source that demonstrates elements of cultural changes as a result of the increased involvement of male professionals in maternity care, including delivery. Sterne's intense interest in a variety of aspects of medicine is clear throughout the nine volumes of *Tristram Shandy* and is part of what Thomas Keymer suggests is 'an act of conversation' between Sterne and his readers.⁴ His use of a wide range of medical information to inform his own narrative, and readers themselves also reciprocated, sometimes within

¹ Laurence Sterne, *The Life and Opinions of Tristram Shandy, Gentleman: The Text*, eds. Melvyn New and Joan New, The Florida Edition of the Works of Laurence Sterne vols. 1 and 2 (Gainesville: University of Florida Press, 1978) p. 608. Subsequent references to this text will take a standard format of 'TS' with the volume and page number from this edition. Both volumes are numbered sequentially.

² TS 1.3.4.

³ TS 1.3.4.

⁴ Thomas Keymer, *Laurence Sterne's Tristram Shandy: A Casebook* (Oxford: Oxford University Press, 2006) p. 12.

medical texts. Mrs. Wright, an English midwife and the last known female author of a birthing manual in the eighteenth century, recognized an invitation within *Tristram Shandy* to share her own view of obstetric professionalization. Dr. Slop's character offered a stereotyped exemplification of the poorly equipped male practitioner:

Then the physicians and the surgeons, being men skilled in physiology, rescued many unfortunate patients from the fangs of ignorant women, and it becoming a lucrative branch of business, they kept it snug, till a numerous body in the inferior departments, desiring to share the profits, came forth, like a hord of hungry untaught men, from the labours of the pestle and mortar, with a few hooks, forceps and crotchets, in a bag, like Dr. Slop, they call themselves accoucheurs, or men-midwives, but for obstetric knowledge, we have seen some of them as ignorant as messengers of the contents of their dispatches, yet some of these men have arrived at eminence, or rather have acquired extensive practice and fortunes, but in cases of difficulty, they are as awkward as any of the most ignorant female practitioners.⁵

Wright's work has been overlooked in studies of eighteenth-century midwifery and has never been brought to any historiographical analysis of Sterne's impact on the practicing medical community. Her words make an assumption that both medical practitioners and members of the public would be familiar with her reference to Dr. Slop, almost forty years after the character first appeared in print. Her words imply a cultural currency inherent in mentions of Slop's name in medical circles, creating a shorthand label for the incompetent man-midwife. The reception of various groups of readers, both professionals of medicine and the wider community, highlights an issue of social commentary on which critics have focused much attention since: the supposed incompetence of the man-midwife. Roy Porter's analysis of the public reception of male-led midwifery practise identifies mistrust and suspicion around the position of the male birth attendant who, as a figure within society, was vulnerable to accusations such as unscrupulous profiteering, corruption, and sexual impropriety with patients.⁶ Sterne's Dr. Slop, while guilty of lesser crimes than some of these more serious allegations, is nevertheless a figure for ridicule and a 'savagely caricatured' depiction of Dr. John Burton, a well-known man-midwife and political figure

⁵ Mrs. Wright, *An Essay to Instruct Women how to protect themselves in a State of Pregnancy, from the Disorders incident to that Period, or how to cure them* (London: 1798) p.18-19.

⁶ Roy Porter, 'A touch of danger: The man-midwife as sexual predator', *Sexual Underworlds of the Enlightenment*, eds. George S. Rousseau and Roy Porter (Manchester: Manchester University Press, 1987) p.206-233, p. 207, 209. Porter cites cases where male practitioners compromised their professional positions by sexual acts, thus justifying the suspicions of the time.

in York society.⁷

Both his representation of Dr. Slop as part of the professionalizing discourse of reproductive medicine and his use of contemporary or historical medical works have been popular topics for discussion among Sterne's modern critics. One might even assume, given the existing genealogy of notable criticism of this aspect of Sterne's work, including contributions from C.H.G. Macafee, Madeline Descargues-Grant, and Judith Hawley, as well as many useful observations made by Arthur Cash, that there is little more to say about the shambolic, or rather Shandean, birth of the infant Tristram.⁸ Yet, there are several additional implications of gender at play within Tristram's narration of his gestation and birth that are worth exploring. Donna Landry and Gerald MacLean's 'Of Patents, Forceps and Paternity' offers one of the most comprehensive examinations of Sterne's inclusion of obstetric discourse to date, focusing specifically on 'interrelations of class and gender.'⁹ Among many valuable insights, the article also contains a range of comments surrounding popular medical and public cultures that are worth further consideration. Most poignantly, Landry and MacLean point out that 'Sterne was shrewdly observant of how, amidst the socio-technical developments of his day, birth had come to have rather more to do with male anxieties and social regulation than it did with biology or medicine.'¹⁰

Building on this hint, this chapter will explore the socio-political context of obstetric professionalization in order to analyse the experience of three male characters, Dr. Slop, Walter Shandy, and Tristram, and how each interacts with birth as both a medical and social concept. I will argue that the

⁷ C.H.G. Macafee, 'The obstetrical aspects of *Tristram Shandy*', *Ulster Medical Journal*, Vol. 19, No. 1 (May 1950) pp. 12-22, p.13. Both Sterne and his uncle Jaques opposed many of Burton's political views as a Tory; the uncle's rabid anti-Catholic views led him to take particular umbrage at Burton's suspected sympathies with the Jacobite Rebellion of 1745, and he had even had him arrested for a time. Burton continued to practice medicine and published his treatise on midwifery in 1751 (see Notes to *TS*, 1:85, n. to 50.15-22, for an account of his career). See also Carol Ann Stewart, *The Eighteenth-Century Novel and the Secularization of Ethics* (Farnham: Ashgate, 2010) p. 134.

⁸ See Madeleine Descargues-Grant, 'The Obstetrics of *Tristram Shandy*', *Etudes Anglaises*, 59 (2006) pp. 401-13; Judith Hawley, 'The Anatomy of *Tristram Shandy*', *Literature and Medicine During the Eighteenth Century*, eds. Roy Porter and Marie Mulvey Roberts (London: Routledge, 1993) pp. 84-100; Arthur H. Cash, 'The Birth of *Tristram Shandy*: Sterne and Dr. Burton', *Sexuality in Eighteenth-Century Britain*, ed. Paul-Gabriel Boucé, (1968) (Manchester: Manchester University Press, 1982) pp. 198-224.

⁹ Donna Landry and Gerald MacLean, 'Of Forceps, Patents, and Paternity: *Tristram Shandy*', *Eighteenth-Century Studies*, 23 (Summer 1990) pp. 522-543, p.523.

¹⁰ Landry and MacLean, p. 525.

involvement of these three characters with Mrs. Shandy's delivery creates an important birth narrative, reflecting the uncertainties and anxieties that men faced because of their culture's changing relationship between themselves and childbirth. Whilst man-midwives were able to gain empirical insights into reproduction, fathers and members of the male lay public remained dislocated from birth and left to grapple with their own perceptions of reproduction. Furthermore, issues of gender affecting perceptions of childbirth in the eighteenth century will also be considered through a selection of midwifery manuals, particularly those written by female midwives, produced both before and after the publication of the first of nine volumes which made up Sterne's complete novel. Furthermore, I will also expand on issues of gender affecting perceptions of childbirth in the eighteenth century by considering links between Sterne's work and a selection of midwifery manuals, particularly those written by female midwives, produced both before and after the publication of the first volume of *Tristram Shandy*.

Delivering Novel Births

Rodger Kamenetz's analysis of the psychological and social implications of contemporary paternity discusses a range of anxieties that men have faced throughout history when attempting to relate to either the physical or the emotional processes of childbirth. 'Birth', he claims, 'is one act men have trouble mapping on their bodies'.¹¹ During the eighteenth century, few literary authors dared to go to lengths similar to Sterne's by describing childbirth or obstetric management explicitly within their narratives. Despite the fact that Smollett's *The Adventures of Peregrine Pickle*, first published in 1751, makes direct reference to 'Culpeper's Midwives Directory', as well as discussing at some length issues of gestation and health during pregnancy, the act of birthing itself is dealt with in a mere few lines:

. . . Mrs. Grizzle reaped the long wished fruits of her dearest expectation in the birth of a fine boy, whom her sister in a few months brought into the world. I shall omit the description of the rejoicings, which were infinite on this important occasion, and only observe that Mrs. Pickle's mother and aunt stood godmothers, and the commodore assisted at the ceremony as godfather to the child, who was christened by the name of Peregrine, in compliment to the memory of a

¹¹ Rodger Kamenetz, "Conceiving Conception + Thoughts on Fatherhood," *New England Review – Middlebury Series*, Vol. 13, No. 3/4 (Spring - Summer, 1991), pp. 139-144, p.139.

deceased uncle.¹²

Aileen Douglas points out that ‘the plot of *Peregrine Pickle* has more pregnancies, comic and tragic, than any other eighteenth-century novel, and none of them is straightforward’, yet Smollett’s ‘omit[ing] the description of rejoicings’ of the birth contradicts the author’s seeming intention to place birth center-stage in the novel’s plot.¹³ His narrative, while claiming to avoid details of the emotional responses of kin to Peregrine’s arrival, also evades any discussion of the act of childbirth itself. Despite an interest in obstetric medicine, Smollett, who was also a surgeon and physician and involved in the production of William Smellie’s famed obstetric manuals, perhaps questioned the suitability of graphic descriptions of delivery to literary genres.¹⁴ Sterne, on the other hand, appears to have had few such qualms. *Tristram Shandy* provides a rare, early example of a male author, or indeed any author of the eighteenth century, representing the direct relationship of his characters to the physiological and psychological aspects of pregnancy and birth. Barbara Korte suggests that obstetrics and childbirth are so much intended as a key theme of the novel that the misnaming of the child intended to be Trismegistus as Tristram is more than a mere accident of mispronunciation. She claims, as many others have before her, that Sterne selected the name as an allusion to Sir Thomas Malory’s fifteenth-century *The Book of Sir Tristram de Lyones*, a retelling of the legend of Sir Tristram, a knight of the round table, whose story opens with the complicated birth of its protagonist.¹⁵ In Malory’s tale Sir Tristram’s birth is a sorrowful tale of loss. His mother’s labour, or travail, and the subsequent delivery takes place in a forest. ‘[D]efault of help’ other

¹² Tobias Smollett, *The Adventures of Peregrine Pickle, in which are included Memoirs of a Lady of Quality*, ed. James. L. Clifford (London: Oxford University Press, 1969) p. 27.

¹³ Aileen Douglas, *Uneasy Sensations: Smollett and the Body* (Chicago: University of Chicago Press, 1995), p. xxv.

¹⁴ For Smollett’s involvement with Smellie, see Helen King, *Midwifery, Obstetrics and the Rise of Gynaecology: The Uses of a Sixteenth-Century Compendium* (Aldershot: Ashgate, 2007), p.112. In addition to the story constructed in *The Adventures of Peregrine Pickle*, Smollett also draws attention to childbirth in his earlier work, *The Adventures of Roderick Random* (1748). As in *Peregrine Pickle*, the plot unfolds from the birth of its protagonist, and again demonstrates Douglas’s observation of a tendency for Smollett to suggest complications in his literary births. Roderick’s mother dies in childbirth and as a result, his father’s mental health suffers from grief. Similar to the birthing scenes in *Tristram Shandy*, the paternal figure is rendered helpless against the potential dangers and complexities of delivery.

¹⁵ Barbara Korte, “‘In Sorrow Thou Shalt Bring Forth Children’: On Childbirth in Literature”, *Orbis Litterarum*, 45 (1990) pp. 3-48, p. 32. The spelling of Sir Tristram’s surname is variable between ‘de Lyones’ and ‘de Liones’. My own spelling standardizes any use of the name to ‘de Lyones’. See Sir Thomas Malory, *Le Morte D’Arthur*, Vol. 1, ed. Janet Cowen and John Lawlor (1485) (Harmondsworth: Penguin Books, 1986).

than a single gentlewoman and exposed to the elements Tristram's mother, who like Mrs. Shandy is also named Elizabeth, dies almost immediately after giving birth.¹⁶ Her final words are directed at her newborn son whom, she claims, 'has murdered thy mother' and then to her attending gentlewoman.¹⁷ 'When he is christened', she explains, 'let call him Tristram that is as much to say as a sorrowful birth.'¹⁸ Given the difficult nature of Mrs. Shandy's labour and delivery, Elizabeth's words might as easily be applied to the infant Tristram Shandy as her own son.

Whether or not Sterne was consciously aware of the tale that gave rise to the character's name, which appears likely, his commentary surrounding obstetric professionalization and the development of associated surgical practices does not rely on implicit allusions. Birth is clearly outlined as a subject to be addressed from the first volume. Tristram's narrative includes obstetrics in a list of discourses the novel discusses in its many digressions from the central plot:

thus it is, by the slow steps of casual increase, that our knowledge physical, metaphysical, physiological, polemical, nautical, mathematical, ænigmatical, technical, biographical, romantical, chemical, and obstetrical, with fifty other branches of it, (most of 'em ending, as these do, in *ical*) have, for these two last centuries and more, gradually been creeping upwards.¹⁹

Obstetrics is subsequently framed throughout the novel as a science of disconcerting and unsettling, if 'gradual', change. Sterne's interest in detailing birth as an unusually substantial part of Tristram's autobiography is also further emphasized by placing the word 'obstetrical' at the end of his list, leaving this evolving medical discourse in the minds of readers as the narrative continues.²⁰ The two-century period identified in the passage also applies neatly to the time span during which women's health had been undergoing significant revaluation and professionalization in terms of its medical management. A long-term, continual increase in male-led academic interest toward reproductive medicine disrupted a

¹⁶ Malory, p. 304

¹⁷ Malory, p. 304

¹⁸ Malory, p. 304

¹⁹ *TS* 1.21.72.

²⁰ Documentary evidence of letters between Sterne and his York-based apothecary Theophilus Garencieres shows that Sterne was eager to take advice and learn of remedies that would be 'comforting' to his wife after childbirth Laurence Sterne, *The Letters of Laurence Sterne: Part One, 1739–1764*, eds. Melvyn New and Peter de Voogd, The Florida Edition of the Works of Laurence Sterne vol. 7 (Gainesville: University of Florida Press, 2009) p. 39.

tradition for maintaining female exclusivity within the walls of the lying-in chamber.²¹ The occurrence of these developments between the sixteenth and eighteenth centuries blurred social boundaries around birthing traditions, meaning that the roles and expectations of men, both as fathers and practitioners, were not yet clearly defined within popular or medical cultures. Although the activity of male practitioners and their contact with real deliveries increased, fathers rarely attended births and had limited, if any, involvement with their labouring wives.

Problem Births

The trial of a cause between Richard Maddox, Gent. Plaintiff, and Dr. M---y, Defendant, Physician, and Man-Midwife, before Sir Michael Foster, Knt. One of the Justices of the King's-Bench. At Guildhall, London, March 2, 1754, published five years before the first instalment of Sterne's novel, reveals the ambiguity over a father's role in pregnancy and birthing and, more poignantly, the difficulty he faced in being unable to provide any practical help or support during labour and delivery. Mr. Maddox brought forward his case against the man-midwife who had initially assessed his wife during labour for failure to provide the assistance he promised in delivering the lady. After examining her and leaving Mr. Maddox's home, he then refused to return on the basis of having been dissatisfied with the remuneration received on a previous occasion of supporting Mrs. Maddox in a delivery, having first acknowledged Mrs. Maddox's case to be dangerous. After a protracted and difficult labour during which the man-midwife refused several times to attend her, both Mrs. Maddox and the infant died. The finding made by the jury in the case was in favour of the Plaintiff, Mr. Maddox, with 'one thousand Pounds Damages, with Costs of Suit'.²²

With this tragic result in mind, the very first page of the text, in a section titled 'ADMONITIONS TO ALL HUSBANDS', the narrative addresses one specific area whereby a man is able to act in such a ways as

²¹ Adrian Wilson, *The Making of Man-Midwifery: Childbirth in England, 1660-1770* (London: UCL Press, 1995) p. 200.

²² *The trial of a cause between Richard Maddox, Gent. Plaintiff, and Dr. M---y, Defendant, Physician, and Man-Midwife, before Sir Michael Foster, Knt. One of the Justices of the King's-Bench. At Guildhall, London, March 2, 1754* (London: printed for H. Jefferys, in Mercer's-Chaple, Cheapside, C. Sympson, in Chancery-Lane, 1754) p. 24.

to meaningfully shape his wife's experience of childbirth. The unnamed author questions 'what Care, Tenderness, and Affection ought every Husband to express for his Wife at such a critical Juncture?', then seeking to answer this self-same question with the following response:

'Tis true, it is out of his Power to afford her any immediate Assistance in the Time of her Travail; yet there is one Thing he can do, which may greatly contribute to the Safety both of her and her Offspring; and that is, to provide her a careful, prudent and skilful Midwife, which can give her the Assistance requisite on that dangerous Occasion; one of known Sobriety, and watchful to favour and promote every Opportunity of forwarding a happy Delivery.²³

The selection of a suitable practitioner was, therefore, a man's duty as both husband and father, in the interests of securing the best services he could afford to assist his wife. Though the gender of the practitioner is not specified in the passage above, the author's expectation was unquestionably that in the first instance a female midwife, if chosen carefully, would likely be equipped to manage the birth. Such a detail is easily discernible in the comments that follow, outlining that 'if she is not too conceited of her own Judgment' she will become aware of difficulties as soon as they arise, or even beforehand, and 'give the Husband timely notice of the Danger'.²⁴ At this point, when an 'untoward Situation' occurs, the author suggests that the responsibility for action and ensuring safety transfers back to the birthing woman's husband, who would 'not hesitate a Moment to procure the Assistance of a Man-Midwife'.²⁵

Of course, not all opinion was unanimous or indeed clear-cut in terms of protocol for practitioners' duties. Although increasing numbers of women were attended by male medical professionals in their deliveries, there were still noticeable movements of resistance against the idea of so intimate a job being undertaken by a man. As seen in Chapter Three, Elizabeth Nihell, publishing within a year of Sterne's publication of his early volumes, intensely disliked the idea of male-midwives taking a lead in the birthing chamber. Though not her central criticism of man-midwifery, Nihell criticised the indecency of giving male practitioners access to intimate examinations of female patients, going so far as to suggest that the very term '*accoucheur*' was disagreeable for this reason. As an alternative Nihell

²³*The trial of a cause between Richard Maddox*, unpaginated preface, 'ADMONITIONS TO ALL HUSBANDS'.

²⁴*The trial of a cause between Richard Maddox*, unpaginated preface, 'Admonitions to All Husbands'.

²⁵*The trial of a cause between Richard Maddox*, unpaginated preface, 'Admonitions to All Husbands'.

suggests: ‘change it for the Latin one of *Pudendist*: a word of not one jot a more pedantic coinage than *Dentist*, or *Oculist*’ further emphasising her distaste for increased interests on the part of male practitioners for the practical aspects of reproductive medical discourse.²⁶ The label ‘Pudendist’ is used as a disambiguation of the word ‘pudendum’, describing external genital organs, for which John Maubray’s *The Female Physician* (1730) points to the vulva in particular.²⁷ Nihell uses the word as a derogatory term to describe a person, or in this case a man, who makes it their business to be in visual or sensory contact with women’s genitalia.

It was not only female midwives who raised this type of complaint. In 1764, writer Philip Thicknesse authored a pamphlet entitled *Man-Midwifery Analysed: and the tendency of that practice detected and exposed*, decrying the practice of man-midwifery, or accouchement in its entirety. Thicknesse’s text, like the account of the trial concerning Richard Maddox, begins with an address to ‘A LETTER addressed to all Men in general, AND To all Married Men in particular’, in which he outlines that his ‘motive [for writing] is thereby to put a stop to impure acts, immodest actions, and the indelicate, unchaste, and unnecessary transactions of Men Midwives’.²⁸ Any blame that might be laid against the crime of letting the practice of allowing male practitioners to oversee deliveries, Thicknesse lays at the door of the people of France. ‘That such a practice as this should begin in France, be encouraged by the ladies, and be encouraged the men, does not surprise me; because chastity, in that country, is rather an unfashionable part of high breeding and high life’.²⁹

One contributor to this debate went so far as to suggest that it was impossible for a man-midwife not to commit an indiscretion, as he could not be of continuous assistance for the full duration of labour and

²⁶ Nihell, *A Treatise on the Art of Midwifery*, p.151.

²⁷ John Maubray, *The female physician, containing all the diseases incident to that sex, in virgins, wives, and widows; together with their causes and symptoms, their Degrees of Danger, and respective Methods of Prevention and Cure* (London: Stephen Austen, 1730) p.183.

²⁸ In the same letter Thicknesse also makes direct reference to a previous publication of his own entitled *A letter to a young lady*, in which he advised the same on the subject of rejecting man-midwifery as a medical practice, but further comments that he felt himself to be ‘under many restraints in point of decency’ when addressing himself to a lady. For this reason, he informs the reader, he opted to address this publication to the male population. Philip Thicknesse, *Man-Midwifery analysed: and the tendency of that practice detected and exposed* (London: printed for R. Davis, in Piccadilly, 1764) p.1-2.

²⁹ Thicknesse, p.4.

therefore, when he was not executing his duties, was committing an act of immodesty by default, simply by observing his patient. The anonymous author of *The danger and immodesty of the present too general custom of unnecessarily employing men-midwives* (1772) remonstrated

If any lady, desirous of exculpating herself from my censure, pleads that “she never admits a Man-midwife to familiarities but when in actual labour”— I answer, that even in actual labour, a woman has many intervals of ease, for many minutes together quite free from pain—in those intervals, her mind cannot maintain its spotless whiteness — in those intervals she cannot but be conscious, that the DOCTOR is infringing on the HUSBAND.’³⁰

Similarly, John Blunt, author of *Man-midwifery dissected; or, the obstetric family-instructor* (1793) publishing just over two decades later, criticised the British adoption of medical trends from elsewhere and women’s willingness to engage with male practitioners:

From the levity and versatility of French women, we need not wonder that they were the first to admit male-practice: as to French husbands, Sterne, and others who have delineated their character, shew us, that they are too polite to take notice of their wives’ intercourse with other men, provided it not be of a criminal nature. By degrees man-midwifery reached this country, where it now appears in its zenith.³¹

Like Thicknesse, the theme of French culture is at the surface of Blunt’s comment, and the idea of a more fluid approach to interactions between both genders in their personal and professional relationships. Furthermore, Blunt’s comment makes explicit reference to Sterne’s work. In this case, the text alluded to is Sterne’s later work, *A Sentimental Journey through France and Italy* (1768), a work of sentimental fiction describing Yorick’s travels in Europe. Blunt’s mention of ‘French husbands’ is taken from an encounter between Yorick himself, and an attractive ‘grisset’ in her glove shop in Paris. On seeking directions from the grisset, Yorick is much obliged of her assistance. ‘Any one may do a casual act of good’, he explains, ‘but a continuation of them shews it is part of the temperature; and certainly, added I, if it is the same blood which comes from the heart, which descends to the extremes (touching her wrist) I am sure you must have one of the best pulses of any woman in the world’.³² On her further offering that

³⁰ *The danger and immodesty of the present too general custom of unnecessarily employing men-midwives* (London: J. Wilkie, and F. Blyth, 1772) p.12.

³¹ *The danger and immodesty of the present too general custom of unnecessarily employing men-midwives*, p.7.

³² Laurence Sterne, *A Sentimental Journey through France and Italy and Continuation of the Bramine’s Journal*, eds. Melvyn New and W. G. Day, The Florida Edition of the Works of Laurence Sterne vol. 6 (Gainesville:

Yorick should feel her pulse, he notes the potential for moral, or rather sexual, ambiguity, while also confirming his own view, 'I care not if all the world saw me feel it'.³³ After Yorick 'had counted twenty pulsations, and was going on fast towards the fortieth', the grisset's husband makes his entrance. Where questions might be expected to be asked on the husband's witnessing another man making contact with his wife, he simply 'took off his hat, and making [Yorick] a bow, said, I did him too much honour---and having said that, he put on his hat and walk'd out'.³⁴ The husband's acknowledgment of the activity between Yorick and his wife, without protest, captures Blunt's reasoning for using Sterne's depiction of 'French husbands' as lax in their vigilance and regard for other men's attentions towards their wives.

Figure Four – Thomas Rowlandson, 'Yorick Feeling the Grisset's Pulse' (1808)³⁵



Few artists' interpretations of this scene include the figure of the grisset's husband who passes through the shop as Yorick is feeling her pulse. One shown above, produced by Thomas Rowlandson in

University of Florida Press, 2002) p.71. Subsequent references to this text will take a standard format of 'ASJ' with the page number from this edition.

³³ ASJ, 71.

³⁴ ASJ, 72.

³⁵ Thomas Rowlandson, 'Yorick Feeling the Grisset's Pulse' (1808) Graphic Arts Collection, *A Sentimental Journey through France and Italy* / by Mr. Yorick. A new ed. embellished with two caricature prints (London: T. Tegg, 1809). Graphic Arts Collection, Rowlandson 1809.3, Rare Books and Special Collection, Firestone Library, Princeton University < <https://graphicarts.princeton.edu/2013/08/28/picturing-a-sentimental-journey/> > [accessed 9 August 2017].

1808, includes all three characters. W. B. Gerard identifies that ‘a tension between restraint and sexual energy is suggested by the contrasting figure of the monk, frowning on the activities in the shop from the busy street, and the pert poodle and smiling head mannequin near the grisset; these bold and bright symbols of sensuality win out against the distant and dim figure of the monk.’³⁶ Though the figure of the husband is set to the left of the caricature, closer to the monk than to Yorick and the grisset, indicating the awkwardness that should be inherent in the situation of Yorick making physical contact with another man’s wife, but the husband’s expression and mannerisms are, if anything, the picture of acquiescence, as if he is the intruder to the scene rather than Yorick. The image itself presents an underlying question of medical treatment and the question of the appropriateness of male doctors treating women in a range of circumstances. Although Yorick is a cleric rather than a medical professional, his contact with the young woman emulates that of a doctor and highlights the sexual ambiguity of a man entering another man’s household and gaining intimate access to his wife, just as the role of a man-midwife dictated.

Adrian Wilson suggests that, ultimately, increases in those accessing the services of man-midwives were led by changed in the public understanding of female modesty which, ensuring that male-midwives were an exception to norms of social modesty for the sake of skilled and safe delivery, offered male practitioners valuable access to practical experience and equipped them to undertake further research throughout the eighteenth and nineteenth centuries.³⁷ Lisa Cody argues differently, however, pointing towards other cultural changes that also played a role, meaning that the transition which ensured that man-midwifery was successful as a business. Her proposal offers a series of more subtle yet significant changes than simply the relaxing of a specific standard which had for so long largely prevented any man from setting foot into the protected space where birthing took place. ‘[T]he man-midwife’, Cody explains, ‘had a pivotal role to play in Georgian life. He challenged expectations about the relations between sexes, and entered into relations with women of all socio-economic ranks, from

³⁶ W. B. Gerard, *Laurence Sterne and the Visual Imagination* (2006) (Abingdon and New York: Routledge, 2016) p.120.

³⁷ Wilson, p.200

beggars to aristocrats.’³⁸ The reason that she gives for man-midwives being able to pose such a challenge to long-standing norms and proponent for change, was their openness, as a group, to ‘developing close and confidential relationships with both men and women’.³⁹ Through these relationships, she further elucidates, they ‘helped to facilitate a broader discussion of Georgian subjectivity’.⁴⁰ Although the theme of subjectivity as it developed during the eighteenth century is beyond the scope of this thesis, Cody’s point should not be underestimated, given how easy it would be to see the professionalization of obstetric medicine as part of the larger narrative revolution of enlightenment medicine, but view such a revolution in isolation, disconnected from other changes in society. The rise of large-scale cultural phenomena and the manifestation of these themes within human minds and bodies, such as sensibility, placed greater emphasis on emotions, self-awareness and perception. Within these cultural shifts, which Ildiko Csengei dates from the 1740s to the end of the century, choices made by individuals of all types, from socializing to medical choices, could be culturally interpreted to reflect the inner workings of a person’s sense of refinement.⁴¹ As the medicalization of emotions took place, through the increasing popularity of nerve theory from Thomas Willis to George Cheyne, medical interactions increasingly made a statement about individuals’ and families’ status, not only in relation to their wealth, but also their social classification. Purchasing the services of academically qualified men purported to have the qualities of sociability and intellect that it was perceived that gentlemen possessed, upper and middle ranking families began to secure the place of man-midwifery for the long term. In the same way that famed printer and author Samuel Richardson has so often been depicted as both friend and patient of George Cheyne, the consultation of doctors for those who could afford to do so involved an inherently social element to their rapport.⁴² Anne Digby highlights the need for eighteenth and nineteenth-century male medical physicians

³⁸ Lisa Forman Cody, *Birthing the Nation: Sex, Science and the Conception of Eighteenth-Century Britons* (Oxford: Oxford University Press, 2005) p.197.

³⁹ Cody, p.195.

⁴⁰ Cody, p.195.

⁴¹ Ildiko Csengei, *Sympathy, Sensibility and the Literature of Feeling in the Eighteenth Century* (Houndmills: Palgrave Macmillan, 2012) p.1.

⁴² Louise Curran, *Samuel Richardson and the Art of Letter-Writing* (Cambridge: Cambridge University Press, 2016) p.30.

to have cultivated '[a] polished social demeanour, with the ability to make good conversation' for acquiring and maintaining a number of elite families as patients.⁴³ 'The norms of gentility', she furthers, 'were seen as being crucial to a successful career'.⁴⁴ While her assertion relates specifically to practitioners residing and working in provincial areas, much the same would have been true of those working with the same clientele in metropolitan areas.⁴⁵ Cody further points out the proactive steps taken by man-midwives to establish this position of convivial trust inside the homes of patients. For this, she selects the best-known of all eighteenth-century man-midwives, William Smellie, as an appropriate example. '[N]early every single case [in Smellie's three-volume treatise]' she reveals, 'also imparted additional lessons about cultural conflict and negotiation, and the proper demeanour of the midwife and man-midwife, often by contrasting Smellie's own reasoned, patient behaviour with more hot-headed participants at lyings-in.'⁴⁶ In his *A Treatise on the Theory and Practice of Midwifery* (1742) Smellie devotes a chapter to 'the requisite Qualifications of Accoucheurs, Midwives, Nurses who attend lying-in women, and wet and dry Nurses for Children'.⁴⁷ About the accoucheur, he instructs

he ought to be endued with a natural sagacity, resolution and prudence; together with that humanity which adorns the owner, and never fails of being agreeable to the distressed patient: in consequence of this virtue, he will assist the poor as well as the rich, behaving always with charity and compassion. He ought to act and speak with the utmost delicacy of decorum, and never violate the trust reposed in him, so as to harbour the least immoral or indecent design; but demean himself in all respects suitable to the dignity of his profession.⁴⁸

Smellie's words, though advice and encouragement to more junior man-midwives, ring with a sense of caution and awareness for those views which presented opposition to his life's work, and the midwifery work that other men were attempting to pursue.

⁴³ Anne Digby, *Making a Medical Living: Doctors and Patients in the English Market for Medicine, 1720-1911* (Cambridge: Cambridge University Press, 2002) p.172.

⁴⁴ Digby, p.172.

⁴⁵ Patients did not necessarily maintain a social relationship as well as a professional one with the medical practitioners who treated them, though as Lisa Smith points out, there was the potential for families to be involved in arrangements relating to medical care, particularly those for women, meaning that there was potential for numerous, possibly ongoing, interactions between the family and the selected medical practitioner. See Lisa W. Smith, 'Reassessing the Role of the Family: Women's Medical Care in Eighteenth-century England', *Social History of Medicine*, Vol. 16 No. 3, pp. 327-342, p.331.

⁴⁶ Cody, p.187.

⁴⁷ William Smellie, *A Treatise on the Theory and Practice of Midwifery* (London: D. Wilson, 1742) p.426.

⁴⁸ Smellie, p.427.

It is not difficult to see how, theoretically, cultures of modesty and, larger still, cultures of sensibility could have been perceived to stand in direct opposition to the increasing engagement of man-midwives with patient cases, specifically with regards to women's delicate nerves and sensitivity to emotional states such as nervousness or embarrassment. In the long-term, however, this was not to be the case.⁴⁹ The appeal of man-midwives attending births and their social seniority to female midwives, even if they were traditionally less likely to have shared in less experience of day-to-day births was becoming a subject of fashion and emulation, even if not everyone was convinced by male-led practise itself at that time. During the mid-century, more male practitioners than ever were sought out and paid well for attending to highborn women rather than first selecting a female midwife alone, factors of celebrity and reputation became prevalent considerations for any male doctor attempting to build up his own practice. Sterne, for example, makes direct reference to 'the famous Dr. *Man[n]ingham*' who was 'not to be had' at the time of Mrs. Shandy's lying in, ensuring that rather than a safe delivery, guided by a highly respected professional, comical farce and catastrophe ensue at the hands of Dr. Slop.⁵⁰ Sir Richard Manningham was no work of fiction like other characters. In reality, he was a leading practitioner in eighteenth-century accouchement whose name would have been familiar to Sterne's readers.⁵¹ Manningham's contributions to the field included an active role in the examination of the 'rabbit breeder' Mary Toft, as well as his

⁴⁹ McTavish, relates an earlier anecdote from the work of French court midwife Louyse Bourgeois, who tells of needing to bring a male practitioner into the lying-in chamber to examine a birthing patient without the lady's knowledge. Bourgeois feared that if the patient, who was already experiencing difficulty in labour, knew of a male practitioner's presence in the room as well as his touching her that she may 'die of dread and shame.'

See Lianne McTavish, *Childbirth and the Display of Authority in Early Modern France* (Aldershot: Ashgate Publishing, 2005) p.57.

⁵⁰ *TS* 1.18.50.

⁵¹ Macafee, 'The obstetrical aspects of *Tristram Shandy*', pp. 16-17, took Tristram's acknowledgment of the fact that Manningham was not available for Tristram's birth as a sign that he had in fact delivered Mrs. Shandy of her first child (*TS* 1.18.50). As several critics including Macafee have also indicated, however, while Sterne's references to Manningham and Burton are particularly illuminating when considering key influences on childbirth attendance as a medical business, they are also anachronistic; at the time of Tristram's birth, 5 November 1718, Manningham, born in 1690, was just beginning practice although is noted to have produced a "five shilling book" on his practice by this date. Burton would have been eight years old. Manningham's own rise to prominence came after being knighted by George I in 1721; see Susan C. Lawrence, *Charitable Knowledge: Hospital Pupils and Practitioners in Eighteenth-Century London* (Cambridge: Cambridge University Press, 1996) p. 186. For further discussion of the selection of Tristram's birthdate see *The Life and Opinions of Tristram Shandy, Gentleman: The Notes*, eds. Melvyn New, Richard A. Davies and W. G. Day, Volume 3 of the Florida Edition of the Works of Laurence Sterne (Florida: University Press of Florida, 1984) 1:51-53, n. to 8.1-3. Subsequent references will be given as the standard abbreviation *Notes to TS*.

opening a small private establishment in Jermyn Street, London which offered lying-in services to women.⁵²

In doing so, Sterne was conscious of these debates that were being fuelled by changes in practice and the burgeoning medical specialism of man-midwifery, and personified the wider debate of gendered practice by introducing a similar discussion over Mrs. Shandy's lying-in and delivery:

my father was for having the man-midwife by all means,--- my mother by no means. My father begg'd and intreated, she would for once recede from her prerogative in this matter, and suffer him to choose for her;--my mother, on the contrary, insisted upon her privilege in this matter, to choose for herself,--and have no mortal's help but the old woman's.⁵³

A gender divide is immediately apparent in this scenario of eighteenth-century pregnancy, and any patriarchal power that Walter Shandy has within the household is displaced within the context of paternity. While Walter places his faith and trust in the academic knowledge of a male 'scientific operator', Sterne suggests a response of defiance and determination, uncharacteristic of what some readers will come to expect of Mrs. Shandy, particularly as her initial request had been to have her lying-in in London assisted by Dr. Manningham.⁵⁴ Through this change of heart towards gendered practice when faced with the prospect of a rural setting for the birth looming, Elizabeth adheres to generations of historical tradition which saw female midwives and neighbourhood women as the only attendants to childbirth. Elizabeth Nihell's depictions of a population of ill-equipped male practitioners, over-confident of their technical methods and equipment, as described in Chapter Three, were more graphic than the scenario offered here by Sterne. Her accounts of deliveries by man-midwives also resulted, she claims, in

⁵² Toft's story is known to be one of the most infamous examples of deception within medicine during the period; see the account in Pam Lieske, ed., 'The Toft Affair', *Eighteenth-Century British Midwifery*, Vol. II (London: Pickering & Chatto, 2007), and Doreen Evenden, *The Midwives of Seventeenth-Century London* (Cambridge: Cambridge University Press, 2000) p. 187. Bonnie Blackwell, 'Tristram Shandy and the Theater of the Mechanical Mother', *ELH*, Vol. 68, No.1 (Spring 2001) pp. 81-133, p. 102-103, suggests that Mrs. Shandy's phantom pregnancy, diagnosed as pseudocyesis by Macafee (p. 15), is modelled on the Toft Affair. Both women travelled to London to consult Manningham and neither had an actual birth. Further, Mrs. Shandy's maiden name, Mollineux, was also the name of the one of the scientific practitioners who became involved with examining Toft, Samuel Mollineux; his wife eloped with another examining physician, Mollineux's colleague, Nathaniel St. Andre, on the very night of her husband's death. For an alternative suggestion on the origin of Elizabeth Shandy's maiden name see Notes to *TS*, 1:94, n. to vol.1 chap.15.

⁵³ *TS* 1.18.55.

⁵⁴ *TS* 1.18.50.

more tragic consequences for newborn infants than Sterne opted to integrate into his plot. It takes little imagination, however, to align her description with Dr. Slop's blunders with his own forceps, causing the infant Tristram painful injuries (and Toby's skinned knuckles). Although Tristram does not pass further comment on Mrs. Shandy's postnatal condition, one can only wonder at the consequence of the actual birth on her body and the trauma Dr. Slop's procedures may have caused.

Uncle Toby has comparatively little to do with the actual event of Tristram's birth, and indeed Walter claims that his brother knows little about women at all, but precisely for these reasons, the single comment he does make is of utmost importance to the gendered understandings of birth during the period: 'My sister, I dare say,' he ventures, "does not care to let a man come so near her ****".⁵⁵ Tristram's remark of not being able to offer 'ONE WORD which would have improved' the remainder of his sentence, although passed off by Walter as Toby's own modesty, serving as a representation the views of those who viewed man-midwifery with disdain for its perceived impropriety.

It may have been that Mrs. Shandy's first choice of Dr. Manningham was made in the knowledge that he was, by the time of Sterne's writing if not Tristram's birth, a prolific name in accouchement and, in essence, an early exception to this culture of gendered practice. As events developed Mrs. Shandy's delivery was not to be managed in London and because of this Sterne ensures that Elizabeth's trust is placed in the personal experience of women over the reputation and education of Dr. Slop. Her refusal to yield to Walter's request and submit her body to the sole care of Dr. Slop, notwithstanding her desire to have Manningham attend her delivery, provided another opportunity for Sterne to mock Burton, particularly as the two men would have been competitors in medical practice. Mrs. Shandy's preference is stalwart in her insistence of a female midwife, even when no qualified woman resided closer than 'six or seven long miles' away.⁵⁶ Though little is provided to the reader concerning the midwife or her skills in delivery, presumed unequivocally inadequate by Walter Shandy, further than the payment of her license

⁵⁵ *TS* 2.6.115.

⁵⁶ *TS* 1.7.11.

by Parson Yorick, sufficient comment is made about Dr. Slop's actions preceding his entry to the birthing chamber for the reader to mistrust his ability to deliver the infant safely.

The midwife, assisted in the costs and requirements of her midwifery license by Parson Yorick as the need for a birth attendant in the village was so great, gains the trust of the reader, unlike Dr. Slop whose qualifications are cast in doubt from the moment he enters the house. Although Mrs. Shandy struggles upstairs with an obstructed delivery, aided only by the female midwife, Tristram issues a warning: 'Dr. *Slop!*--stay thy obstetrick hand;--return it safe into thy bosom to keep it warm;--little do'st thou know what obstacles;--little do'st thou think what hidden causes retard its operation!'⁵⁷ At the literal level, the obvious meaning of 'little do'st thou think what hidden causes retard its operation!' is that Dr. Slop has forgotten the 'green bays bag' of surgical instruments and cannot practice without them, though Sterne also uses this statement to foreground the events of the delivery itself.⁵⁸ That Dr. Slop should 'stay [his] obstetrick hand' because there may be factors which 'retard its operation', forms an idea in the mind of the reader that he is unequipped to deal with delivering the infant Tristram with or without the bag of instruments.⁵⁹

Tristram's narrative, which develops a detailed critique of the male practitioner, was taken by an anonymous reviewer to indicate Sterne's desire to participate in a literary dialogue with medical texts on the issue of gendered obstetric care. Although Sterne never names Nihell, the review claims that 'his sneers in p.99. must alarm our men-midwives, and make them apprehend that the author of TRISTRAM is entered into an association with Mrs. *Elizabeth Nihell*, whose book against men-midwives hath, as is rumoured, greatly piqued them.'⁶⁰ This perhaps not altogether humorous response to Sterne's novel assumes that the author's ridiculing Dr. Slop was offered in support of exclusive female practice, and of Nihell herself, whose manual, although published a year later than Sterne's first volume of *Tristram*

⁵⁷ *TS* 2.11.126

⁵⁸ *TS* 3.7.194.

⁵⁹ *TS* 2.11.126.

⁶⁰ Anonymous, *The Clockmakers Outcry Against The Author of The Life and Opinions of Tristram Shandy* (London: J. Burd, 1760) p. 31. 'p.99' refers to *TS* 1.18. 50-51.

Shandy, had been publicly anticipated some time beforehand.⁶¹ The reviewer remains so preoccupied with contextualizing Sterne's narrative within contemporary medical debates and with accusing Sterne of holding a somewhat radical perspective, that the larger issues behind the conflicting techniques of male and female practitioners goes entirely unnoticed. When Dr. Slop is considered alongside Walter Shandy, Sterne makes it clear to the reader that his commentary takes a much broader view of the social aspects of obstetric medicine. Slop is not only a male practitioner, but also a representative of the collective society of eighteenth-century men who were still wrestling to understand the process of giving birth.

Despite the difficulties Mrs. Shandy experiences when

Walter Shandy, caught up as he was in sapience about the cerebellum and theories of the preponderate influence of Christian names and noble noses, was insulated from the raw truths of human birth. He could not understand his wife's dread of Dr Slop. Yet birth in the eighteenth century was a fearful thing, and the sight of a man-midwife struck terror in the hearts of most women. Dr Slop entered the house as an Angel of Death.⁶²

This reference to 'an Angel of Death' clearly demonstrates the problems created by early adjustments in public engagement to male as well as female practitioners offering obstetric services. These anxieties, although vocalized by Mrs. Shandy in her adamant choice of the local midwife, are not feelings which Walter, or indeed Dr. Slop, are able to empathize with, their emotional experience being quite different from Mrs. Shandy's. Women understandably developed fears of male practitioners, associating them with complications in childbirth because indeed they were often called on when advanced, and often highly invasive, procedures were necessary. Both infant and maternal mortality rates were sufficiently high during the eighteenth century that it was not uncommon for a woman of childbearing age to be aware of individuals, or to at least know stories of others, who had died or lost children, either during birth or soon afterwards. Figures provided by Robert Woods claim that maternal mortality occurred at a rate of 95 per

⁶¹ Rene Bosch, *Labyrinth of Digressions: Tristram Shandy as Perceived and Influenced by Sterne's Early Imitators* (Amsterdam: Rodopi, 2007) p. 210.

⁶² Cash, p. 206

10000 births in England between 1750 and 1774.⁶³ His calculation of early-neonatal-mortality (0 to 6 days after birth) and stillbirth rates for the same period of time also show 50 occasions of infant death per 1000 births.⁶⁴ Although the numbers reflected in these calculations are significantly lower than those given for the years 1725-49, the threat of death in the birthing chamber still loomed large over birthing women and their unborn children. The multitude of factors which affected the outcome of births during the eighteenth century, such as maternal health and reproductive history or any complications during the birth itself, means that it is not clear whether the presence of a male or female birthing attendant was more likely to ensure a safe delivery. Midwifery manuals published in the decades before the first two volumes of *Tristram Shandy*, such as those by William Giffard and Sarah Stone, placed emphasis on the role of the male practitioner as a last resort when, in the face of complications, a midwife had exhausted all of the skills and techniques at her disposal.⁶⁵ Cash concludes, therefore, that man-midwifery was the ‘art of the abnormal’, giving male practitioners little or no frame of reference for normal, problem-free deliveries, thus making it still harder for them to empathize with the experience of natural childbirth.⁶⁶ In order to increase training opportunities for students of both female midwifery and “accouchement,” or man-midwifery, a variety of devices were developed to create simulations of birth, ranging in mechanical operation from Madame du Coudray’s anatomical fabric birthing dolls to “Dr. Smellie’s Mechanical Labor [sic] Device” and Manningham’s “Glass Machine.” Blackwell argues that Mrs. Shandy’s character is intended as a “mechanical mother,” given her passivity during birth in comparison to the roles played

⁶³ For purposes of consistency, I have used Woods’s calculations in both this section and in Chapter Four in reference to Jane Cave Winscom’s birthing experience. The figures cited vary slightly due to Winscom having written at a later into the eighteenth century than Sterne, and later still when considering that Sterne set the birthdate of his protagonist some forty-one years before the publication of the first two volumes of *Tristram Shandy*. Woods, p.95.

⁶⁴ Woods, p.95.

⁶⁵ See Woods, p.111, 113.

⁶⁶ Cash, p.206. Pam Lieske, “‘Made in Imitation of Real Women and Children’: Obstetrical Machines in Eighteenth-Century Britain,” *The Female Body in Medicine and Literature*, eds. Andrew Mangham and Greta Depledge (Liverpool: Liverpool University Press, 2011) pp. 69-88, provides an overview of the development of obstetric machines emerging from both French and English practice.

by Dr. Slop and Walter Shandy, who attempt to impose their own template on her birthing experience, even to the point of positioning her physically, as one might a machine.⁶⁷

Dr. Slop is depicted much as Nihell describes the man-midwife, unsympathetic to both mother and infant, causing injury to Tristram by crushing his nose with forceps. His main concern is to view birth from a theoretical perspective and to prove the success of his own design of forceps rather than considering the comfort or welfare of Elizabeth Shandy or Tristram. Similarly, Walter Shandy also copes with childbirth through obstetric theory. Unable to relate to the physical processes of childbirth, Walter has recourse to the available scientific literature in his attempt to understand the events he is faced with during the embryonic growth and birth of his second son. Aware of his own active role in conception, which has since become a passive role in the lying-in chamber, Walter is represented as an amateur obstetrician who has immersed himself in abstract theories of conception and the latest practical techniques of delivery, including the use of forceps and even caesarean sections. Despite Mrs. Shandy turning ‘as pale as ashes at the very mention’ of the latter procedure, and perhaps equally suspicious of deliveries which involved devices that had been introduced into practise only relatively recently by male practitioners, her husband nonetheless remains determined to try another invasive form of delivery, facing the risks he perceives there to be in cephalic foetal presentation, or head-first birthing.⁶⁸ These issues, he thought, might be resolved by his finding ‘the secret, that when a child was turn’d topsy-turvy, which was easy for an operator to do, and was extracted by the feet’.⁶⁹ Sterne’s reference to a ‘secret’ of delivery, or ‘extraction’ whereby ‘the cerebellum ... was propell’d simply towards the cerebrum’ alludes to the surgical technique of internal podalic version. The manoeuvre was introduced by classical medical scholars but fell out of use in medieval practice. It was reintroduced by Ambrose Paré during the sixteenth century but, once again, has fallen out of favour with contemporary practitioners. Internal podalic version

⁶⁷ Blackwell, p.91.

⁶⁸ *TS* 2.19.179.

⁶⁹ *TS* 2.19.177.

is most commonly replaced with alternative options such as external cephalic version or, surgically, caesarean section procedures.⁷⁰

On making this discovery Walter is filled with enthusiasm for the technique, questioning ‘What is it to me which end of my son comes foremost into the world, provided all goes right after, and his cerebellum escapes uncrushed?’⁷¹ His attempts to engage with contemporary methods are well-intentioned, meant to protect Tristram from the problem faced by his elder brother Bobby who, it is hinted, experienced brain damage in the birthing process. The fact that Bobby was delivered ‘with his head *foremost*’, gives rise to ‘Mr. *Shandy*’s hypothesis’, namely, that it was this that turned him into ‘a lad of wonderful slow parts’.⁷² Sterne’s depiction of Walter’s thought processes and the associated reading he undertakes indicates that he is able to consider the direct impact of the delivery on the child, on himself, and even on Dr. Slop, but that he quite fails to connect his plan to any further pain or trauma the procedure might cause Mrs. Shandy. In an attempt to explain the psychological processes that motivate Walter’s behaviour, Juliet McMaster suggests that ‘Tristram makes it clear that both husband and wife are pregnant.’⁷³ Throughout the pregnancy, while Mrs. Shandy’s body contributes to the growth and development of the embryonic Tristram, Walter’s mind is simultaneously conceiving and growing his ideas with regard to human life, ideas which only reach full term during Tristram’s birth. His appreciation of his own, and Dr. Slop’s, inability to control the events of childbirth despite his plans to involve instruments only occurs when he belatedly retracts his support of the use of forceps in response to Toby’s

⁷⁰ *TS* 2.19.177. For further reference to Paré’s obstetric involvement, see McTavish, *Childbirth and the Display of Authority*, p. 146-48.

⁷¹ *TS* 2.19.177.

⁷² *TS* 2.19.179.

The events of Bobby’s birth and early death made a lasting impression on Walter and, as Amelia Dale indicates, motivated him to write his *Tristrapaedia*, in order to educate his younger son. These actions represent Walter’s attempt to compensate, with Tristram, his own failure to continue his family line through Bobby and the reader’s journey. For reference to Walter’s failed attempts at educating Tristram, see Amelia Dale, ‘Dolly’s inch of red seal wax, or, impressing the reader in *Tristram Shandy*’, *Sterne, Tristram, Yorick: Tercentenary Essays on Laurence Sterne*, eds. Judith Hawley, Peter de Voogd & Melvyn New (Delaware: Delaware University Press, 2016) pp.133-51, p.138.

⁷³ Juliet McMaster, ‘Walter Shandy, Sterne and Gender: A Feminist Foray’, *Critical Essays on Laurence Sterne*, ed. Melvyn New (1989) (London: G.K. Hall, 1998) pp. 198-215, p. 203.

injury, declaring ‘tis well ... that the experiment was not first made upon my child’s head piece’.⁷⁴ Only then is Walter able to appreciate that the male practitioner’s academic qualifications will not automatically ensure the safe delivery of the infant Tristram. Although Madeleine Descargues-Grant argues that McMaster’s interpretation is ‘a reduction of life to birth and its processes’, the point resonates that Walter’s thought process mirrors the delivery of the child.⁷⁵ Sterne goes to some length to make this connection, with Tristram even describing Walter’s ideas using pregnancy terminology, such as: ‘when my father was gone with this about a month’.⁷⁶ As one might watch a woman grow during pregnancy, so the reader watches Walter’s idea grow in a like manner. Walter’s development in this process, from his initial difficulties to understand the experience of birthing through to his increasingly cautious attitude toward Dr. Slop’s methods, raises the question of who might be considered a patient in this scenario. Sterne’s narration of the episode suggests that, while in theory both the accoucheur and female midwife are present to attend Mrs. Shandy in her physical delivery, Walter, too, is a patient by association. He struggles as much to locate his own place in the birthing process psychologically and appreciate his wife’s experience, as she does physically with the difficulties of an obstructed delivery.

Birthing Tristram’s Narrative

One of the most substantial comic depictions made in *Tristram Shandy* concerning issues of foetal growth concerns the Catholic concept of intrauterine baptism, a process whereby a syringe or similar device is used to administer baptismal fluids into the womb, ensuring that the infant receives this first important sacrament before delivery where neonatal death was perceived to have been likely. Tristram’s narration ‘squirted full in the faces of Mess. *Le Moyne, De Romigny, and De Marcilly*, doctors of the Sorbonne’ thereby mocking the practice of intrauterine baptism itself.⁷⁷ His narrative joke reaches beyond the physical practice to the specific religious knowledge necessary for the reader to grasp that Tristram is, in fact, discussing baptismal practices used by the Catholic Church in the event of an obstetric

⁷⁴ *TS* 3.16.220.

⁷⁵ Descargues-Grant, p. 404.

⁷⁶ *TS* 2.19.177.

⁷⁷ *TS* 4.20.357.

emergency.⁷⁸ It is at this point that ‘Sterne’s humour’, as Melvyn New points out, ‘depends on requiring from his readers a knowledge they could not possibly be expected to have.’⁷⁹ Tristram executes the jest with subtlety, demanding of the reader:

-----How could you, Madam, be so inattentive in reading the last chapter? I told you in it, *That my mother was not a papist.*----Papist! You told me no such thing, Sir. Madam I beg leave to repeat it over again, That I told you as plain, at least, as words, by direct inference, could tell you such a thing.--Then, Sir, I must have miss’d a page.- -No, Madam,--you have not miss’d a word.----Then I was asleep, Sir.--My pride, Madam, cannot allow you that refuge.----Then, I declare, I know nothing at all about the matter.--That, Madam, is the very fault I lay to your charge; and as a punishment for it, I do insist upon it, that you immediately turn back, that is, as soon as you get to the next full stop, and read the whole chapter over again.⁸⁰

The conversation created between narrator and reader reveals how Tristram, much like his father, feels most comfortable when immersing himself so deeply into theoretical and historical knowledge that he feels justified in making an automatic--and in this case likely correct--assumption of ignorance on the part of his readers, whom he then offers to instruct. Walter’s efforts to expand his own knowledge on behalf of his young son, whether for purposes of improving his son’s mind or ensuring him a safe delivery, are a source of amusement for the reader as well as an opportunity for the narrator to digress into subsidiary tales. His direct address to readers, recurring throughout the novel, indicates Tristram’s kinship with Walter's own volubility. Despite this, however, he seems willing to disparage his father’s ideas with wry superiority at every possible turn, both for their oddity and their indifference to others, as, for example, Elizabeth Shandy's birthing apprehensions. Tristram’s self-confidence in his own theories and his demands on the reader to see his perspective are much akin to traits that can be seen in Walter’s personality, but Tristram appears quite unaware most of the time of the similarities which exist between them.

While Tristram remains preoccupied with his own views of Walter’s notions, particularly his grappling with the latest developments in obstetric surgery and technique in an attempt to prevent injury

⁷⁸ For further discussion of the doctors of the Sorbonne see Notes to *TS*, 1:102-105, n. to 65.27ff.

⁷⁹ Melvyn New, “‘At the backside of the door of purgatory’: A Note on Annotating *Tristram Shandy*”, *Laurence Sterne: Riddles and Mysteries*, ed. Valerie Grosvenor Myer (London: Vision, 1984) pp. 15-23, p. 17.

⁸⁰ *TS* 1.20.64-65.

during the birthing process, Sterne and his readers enjoy another joke, this time at the protagonist's expense. Tristram's narrative description, at the very beginning of the first volume, of his perceived 'misfortunes' resulting from events even before his initial conception, exposes parallels between his thoughts and Walter's avid reading; both resort to theoretical accounts in their efforts to understand the experience of pregnancy and childbirth. Repeated references to particular embryological theories reveal that Tristram's perception of reproduction is coloured by his own gender and masculinity, most poignantly in his retelling of his own conception. His mother's question at Tristram at the very moment of his conception, '*Pray, my dear . . . have you not forgot to wind up the clock?*', unexpected by his father, begins the series of events which, in Tristram's view, decide his fortunes, or rather misfortunes, for the rest of his life.⁸¹ Though the question itself may appear of trivial consequence to the unsuspecting reader, Tristram is quick to indicate otherwise and avoid such a presumption: 'Then let me tell you, Sir', he explains, 'it was a very unseasonable question at least,--because it scattered and dispersed the animal spirits, whose business it was to have escorted and gone hand-in-hand with the *HOMUNCULUS*, and conducted him safe to the place destined for his reception'.⁸² The typographic appearance of the word *homunculus* in italicized capital letters highlights its significance for both the narrator and the reader, and is the first of several repetitions of the unusual word. Tristram repeatedly describes his pre-birth self as a homunculus, referring to the small being as 'him' or 'my little gentleman', a further indication of his understanding of reproduction as a male-dominated process.⁸³ As Louis Landa suggests, Sterne's manipulation of terms relevant to these scientific debates of the period make clear Tristram's commitment to animalculist theory; the belief that the development of the foetus was based on the growth of a preformed miniature human being, contained in the male gamete cell prior to fertilization.⁸⁴ The context of Sterne's description suggests, however, that his conjectures about foetal development were made in the

⁸¹ *TS* 1.1.2.

For further discussion of the significance of female imagination on Tristram's conception, see Dale, p.135-6.

⁸² *TS* 1.2.2.

⁸³ *TS* 1.2.3.

⁸⁴ Louis A. Landa, 'The Shandean Homunculus: The Background of "Sterne's Little Gentleman"', *Restoration and Eighteenth-Century Literature: Essays in Honor of Alan Dugald McKillop*, ed. Carroll Camden (Chicago: University of Chicago Press, 1963) pp. 49-68, p. 57.

spirit of good humour rather than in any serious analysis of eighteenth-century embryological theory. William Harvey's *Anatomical Exercitations Concerning the Generation of Living Creatures*, written just over a century before Sterne published the first volume of *Tristram Shandy*, had been one of the first works to suggest that the development of the foetus occurred by embryogenesis rather than preformationism, which Eve Keller describes as 'the *sequential* production and development of embryonic parts from an originally *homogenous* substance.'⁸⁵ Harvey's beliefs, like those which had been offered by 'Swammerdown, Malphigi, Leeuwenhoek [and] de Graaf', were part of the fabric of scientific debate and advancement in the late seventeenth and early eighteenth centuries that later informed Sterne's literary play with animalculist ideas.⁸⁶

Despite Tristram's self-confidence in the tale of his 'journey' and 'begetting', his elaborate imagining of his own conception creates a series of ironic sites within which Sterne satirizes animalculist theory. His wry comments in relation to the homunculus indicate some grasp of the ongoing prevalence of these debates within the scientific culture, whilst still offering Tristram and Walter a 'scientific' means of associating themselves with a reproductive explanation that emphasizes the centrality of the male contribution to conception. Although his depiction of the journey of the homunculus to its resting place makes no direct reference to competing theories, such as Harvey's, it is nevertheless presented in so comical a manner as to suggest Sterne's awareness of more serious scientific accounts of human gestation. While male practitioners found a place to position themselves within the later stages of pregnancy and ultimate birthing through their scientific profession, the lay male public found it ever more difficult to recognize a clearly defined set of social expectations for fathers, who were certainly not professionals, but also not at all disinterested parties.

Tristram's thought processes resemble his father's when it comes to applying theory to practise in order to achieve a greater understanding of reproduction. Just as Walter fails to consider Mrs. Shandy's

⁸⁵ Eve Keller, 'Embryonic Individuals: The Rhetoric of Seventeenth-Century Embryology and the Construction of Early-Modern Identity', *Eighteenth-Century Studies*, 33 (Spring 2000) pp. 321-348, p.330-331.

⁸⁶ Landa, 51; Notes to TS, 1:44-46 n. to 2.19ff.

views, Tristram also does not offer any details of his mother's pregnancy leading up to the birth. Aside from her few comments regarding her desire to have the services of the midwife, any other input from Elizabeth is only indicated when she questions whether Walter has wound the clock, and then again when she feels the pains of labour.

As Hawley comments about Walter, '[a]ll his theories--animalculism, traducianism and his Filmerian arguments about the origins of society--support his arguments about the divine right of fathers', beliefs not dissimilar to those inherent in Tristram's rhetoric about his journey as a homunculus.⁸⁷ This is not to say, however, that the author himself maintained these same beliefs. Even without the advantages of modern science, which now equips readers with the certain knowledge of the presence of both male and female sex cells in fertilization and gender determination, Sterne had already dismissed ideas of vitalism and preformationism within his own mind.⁸⁸ As Landa further indicates, 'Sterne saw the intrinsic comedy in such theories', and his approach to gestation and foetal growth indicates his disdain, even incredulity, toward any serious consideration of animalculist theory as plausible.⁸⁹ The dominant role played by the male sexual partner within this set of beliefs serves Sterne's purpose well: the central

⁸⁷ Hawley, 'The Anatomy of *Tristram Shandy*', p. 88.

⁸⁸ Preformationist beliefs developed from the basis that a miniature but fully-formed organism would already exist, or be pre-formed, at the point of conception. The process of gestation was therefore assumed to be a process of growth and expansion in physical size rather than epigenetic development. Eve Keller, *Generating Bodies and Gendered Selves: The Rhetoric of Reproduction in Early Modern England* (Washington DC: University of Washington Press, 2007) p.139.

Set apart from other scientific principles, vitalist beliefs were those which were underpinned by the theory that living, animate beings are infused with a 'life force' or otherwise ethereal substance from which all life is derived.

Robert Mitchell, *Experimental Life: Vitalism in Romantic Science and Literature* (Baltimore: Johns Hopkins University Press, 2013) p.6.

⁸⁹ Landa, p. 60. Attempts to justify Sterne's knowledge of various subjects by referring to his library of books identified in *A Facsimile Reproduction of a Unique Catalogue of Laurence Sterne's Library* (London: James Tregaskis, 1930) are flawed, because, as W. G. Day indicates in his discussion of Sterne's collection, the catalogue include books from other owners and is also unlikely to include Sterne's complete library. Melvyn New makes the astute observation, however, that while no catalogue would ensure a certain means of accounting for all of Sterne's reading, the concept of the inventory itself may represent a more generic representation of the genres and types of books Sterne was likely to have consulted when writing. The most famous example, and one used by Day, is Sterne's reference to Burton's *The Anatomy of Melancholy*. The early edition listed in the catalogue may have been Sterne's, but he clearly used a later copy than the one listed for his borrowings in *Tristram Shandy*. Whether or not he acquired one or multiple copies of Burton's text, it is one of many "medical" texts that seem to have piqued Sterne's interest as both a collector and reader, showing that he read widely, and across medical as well as literary genres. See W.G. Day, 'Sterne's Books', *The Library*, 5 (1976) pp. 245-46; Melvyn New, 'Sterne and the Narrative of Determinateness', *Laurence Sterne's Tristram Shandy: A Casebook*, ed. Thomas Keymer (1992) (Oxford: Oxford University Press, 2006) p. 209.

figures in the birth of Tristram, Walter, Dr. Slop, and narrator Tristram, all locate themselves at the centre of reproduction.

In order to get to his original purpose beyond his digressions, Tristram is able to articulate the events of his birth within the confines of his gendered psychology, formulated by a restricted set of preconceptions inherited, at least in part, from his father. Similar to the way in which Walter assumes, when speculating on how the child should be delivered, that the infant is male, Tristram's narrative appropriates gendered language, in particular the label 'little gentleman'. Although Tristram relates the story in hindsight, as a retelling of stories he himself has been told, the term 'gentleman' suggests that the child was assumed male even when there was no way of obtaining a clear indication of this. Furthermore, his male-dominated descriptions attach additional significance to the male role in reproduction after the release of seminal fluid.

Conclusion

Anxieties and uncertainties about the social expectations placed on men to participate in childbirth were prevalent within eighteenth-century culture. Sterne recognized this shifting and tentative attitude toward birthing and developed Tristram's narrative accordingly. The interventions and assistance of man-midwives in delivering women only served to exacerbate the dislocation of men from reproduction after initial conception. Although these practitioners had a closer, more intimate view, of birthing women's experiences than their predecessors had experienced, as Cash notes, even their perceptions were compromised by their reliance on academic learning, as well as their lack of appreciation for their patients' experiences of birth. Their place within public social culture more broadly was also a point of uncertainty, the closer they got to women the more they tended to alienate the male population and ran the risk of having their work viewed with suspicion.

Much like Walter's, Dr. Slop's vision lacks a holistic consideration of mother and child. Tristram's calamitous birth, which crushes the infant's nose, reflects how each male character is able to

identify with the physical and emotional processes of reproduction only through his own masculinity; all remain unsure of their place within the household event of childbirth. While Uncle Toby may be considered the exception to the typical male experience of birth in *Tristram Shandy*, his observations are severely distanced by the fact that he does not know one end of a woman from the other. His primary involvement with his nephew's birth is to participate in the testing of Dr. Slop's forceps, with disastrous effects. Although well-meaning, Walter has no experiential frame of reference or even a precedent to work from, as few fathers during the eighteenth century would consider such close involvement, even if they did probably determine arrangements for the care for their wives--at least among the gentry. Only after witnessing Dr. Slop's series of blunders does he begin to appreciate that his efforts to secure his services and to himself acquire an extensive knowledge of the latest surgical techniques for childbirth have not ensured his infant child a safe delivery. His lack of empirical evidence for the realities of childbirth leaves him with a second-hand view constructed from books and theories. The only male role-model available for Walter to look toward is, of course, Dr. Slop. While each of the three male characters examined here are all anxious to develop their own comprehensive understandings of birth, their efforts to convert theory into practise are continually thwarted by a lack of experience and an inability fully to appreciate the female experience of childbearing. Sterne captures these male uncertainties in *Tristram Shandy* as he caricatures, perceptively and comically, an array of cultural inconsistencies that reveal the halting process of acclimatizing men to the pains and difficulties of childbirth. In the mid eighteenth-century, their education was far from complete.

Part Three

Chapter Six

Abortifacients in Eighteenth-Century Medical Literature

Introduction

Like the case managed by midwife Jean Jack in Chapter Two, not all conceptions signalled the coming of a happy event and sometimes it was preferable to conceal, or even terminate, a pregnancy rather than face the consequences of the birth of an infant, or the public acknowledgment of conception having occurred. This chapter considers how the subject of abortion, specifically caused by the oral ingestion of remedies, appeared in medical literature. As a medical-historical theme, abortion is currently under-represented in cultural history studies, and almost non-existent in literary criticism, but has been a long-standing popular topic for demographers, geographers and population historians. Angus McLaren, one of the only medical and cultural historians to work on abortion and contraception through qualitative research methods, has emphasised that ‘for the social and cultural historian of sexual behavio[u]r concerned with hopes and fears, desires and delusions that escape statistical analysis, the abortion issue is of major importance: it provides us with some precious insights into the ways in which pre-industrial woman's childbearing role and her right to control it were perceived in the past’.¹ In order to begin filling the remaining gap in humanities scholarship, which has not fully explored sources discussing abortion, I will first consider the problems with studying abortion history to date, before examining how abortion could be achieved by remedies. Following this, I will focus specifically on legal and public views of the use of abortifacients and the repercussions of doing so, before turning to medical texts of the period, analysing how medical narratives were constructed to comment on pseudo-medical practices that were forbidden by their very nature. I do not propose to focus on women’s personal actions in this chapter, but conclusions drawn here will also be important to Chapter Seven, which explores the appearance of abortion as a literary theme in eighteenth-century fiction by women writers.

¹ Angus McLaren, “‘Barrenness against nature’: Recourse to abortion in pre-industrial England’, *The Journal of Sex Research*, Vol. 17, No.3 (1981) pp.224-237, p.225.

The Challenge of Abortion History

There are several historiographical problems with the study of abortion in the past that provide possible reasons for the ongoing reluctance on the part of historians to delve far into the subject of abortion. The first of these is the obscurity of material that refers to and considers abortion directly. While demographic studies have aimed to provide a mathematical insight into family planning and birth control throughout history, as John Riddle points out, '[t]he data for the[se] models are, however, based on the experience of the nineteenth and twentieth centuries, for which evidence is considerably more abundant than for previous periods. When investigators turn to the premodern era, their mathematical models, and their imaginations, twirl.'² Figures for the eighteenth century, therefore, are non-existent. With this in mind, much of Riddle's earlier work focuses on abortion in ancient and Renaissance medicine and culture. Although *Eve's Herbs: Abortion and Contraception in the West* remains one of the most significant contributions that have been made to this still relatively under-researched field, the book appears to accept silent defeat in the absence of such data, devoting little time or attention to long eighteenth-century Europe.³ While my approach here aims to fill a gap in chronology, there remains this commonly perceived issue of the obscurity of sources and information. In keeping with my overall approach to eighteenth-century maternity in this study, I will use medical sources to explore the places where factual and archival records have kept abortion in the shadows of history. McLaren's observations highlight the value of examining narrative sources for purposes of researching abortion, and Etienne van de Walle has also demonstrated the value of narrative descriptions in constructing a full history of abortion.⁴ The respective research of these two scholars attempts to deal with the lack of numeric information in relation to abortion directly, using descriptive references to abortion in literature instead.

² John M. Riddle, *Eve's Herbs: A History of Contraception and Abortion in the West* (Cambridge and London: Harvard University Press, 1997) p.7.

³ Riddle's analysis touches on emmenagogic preparations, those remedies targeted at stimulating menstruation, in eighteenth-century medical guidance, though the overview provided moves from Sharp's 'sparse information as she had provided on birth control', to Smellie's 1752 publication *A treatise on the theory and practice of midwifery*. As Appendix A indicates, there were many contributors to obstetric development between the publications of the works of these two authors.

⁴ Etienne van de Walle, 'Towards a Demographic History of Abortion', *Population: An English Selection* Vol. 11 (1999), pp. 115-131, p.116.

van de Walle's focus fixed upon working out the commonality of abortion before 1800, for which he concluded that 'although abortion has always existed, it was a rare occurrence in the past, generally reserved for non-marital conceptions'.⁵ While my own focus concentrates upon what information was known about abortion methods, rather than how often those methods were used, van de Walle's methodology of using information contained in literature to find out more about abortion throughout history is useful to this analysis and moves abortion away from being the exclusive subject of demographers and population historians. By taking leads from both McLaren and van de Walle, and looking to medical literature directly for new information on abortion, it is possible to overcome some of the obstacles which have arisen through relying on sketchy mathematical data as key source material for learning about hidden cultures of reproduction.

The second potential obstacle that arises from undertaking a qualitative literary study of abortion, is Riddle's assertion that '[d]ocumentary evidence from a woman's perspective is difficult to find'.⁶ His assessment of available material, he suggests, relates specifically to classical and medieval abortion, yet this is also true of his work all the way up to the nineteenth century. Riddle's specific focus on medical literature means that his only references to records from women are either mediated through court records or given as an exemplar of authorship from a midwife. While these sources are undoubtedly useful, and the work of both male and female practitioners is referred to in this chapter, they are not the only public documents from which women, or men, might draw an informal education on matters which might not be addressed on another open or communal platform. A range of the medical perspectives referred to in this chapter were offered by women practitioners, revealing that documents written by women were available during the period, and continue to be accessible to scholars of literature, history and medicine. Furthermore, each of the literary case studies examined in the next chapter were written by women and are among those eighteenth-century publications that discussed abortion directly within their narratives. Considering the representation of abortion in the eighteenth-century literature alongside the real social

⁵ van de Walle, p.116.

⁶ Riddle, p.8.

and medical contexts in which these books existed takes a significant step towards satisfying the voids in existing research identified by Riddle and van de Walle.

The third issue, which then manifests itself in discussions of reproduction both current and historical, is a sense of mixed terminologies and the inherent political implications of any description of abortion in any context. As James Davison Hunter and Joseph E. Davis suggest of modern debates surrounding abortion, ‘language both reflects and shapes social reality, for words frame how we make sense of experience’.⁷ This is particularly important when considering both how authors depicted abortion and conveyed ideas to their readers. Although I am concerned exclusively with elective abortion that was carried out with intent, whether or not with free will, authors of texts that appeared on the eighteenth-century medical print market did not distinguish consistently between these practices and spontaneous abortion, or miscarriage. This means that it is important to proceed with caution where textual references to abortion are concerned, assessing the wider context in which abortion takes place to understand the social, cultural and medical connotations of each depiction.

Without an agreed set of professionalized medical practices, abortion in the eighteenth century was often a matter of resorting to practices that were makeshift or the product of hearsay and orally transmitted knowledge. In the absence of a medical discourse to guide such undertakings, a deliberate absence which recognised contemporary religious and ethical beliefs, it proved impossible to protect against all methods that might be attempted to procure abortion. The language employed in Lord Ellenborough’s Act of 1803, also known as the ‘Offences of the Person’ Act which covered abortion, demonstrates the range of problems with not only punishing abortion crimes but also, more fundamentally, ambiguity over what types of activity might actually constitute an attempt to cause abortion. The Act, which came into effect in July of that year, states:

[I]f any person or persons, from and after the said first day of July in the said year of our Lord one thousand eight hundred and three, shall wilfully and maliciously administer to, or cause to

⁷James Davison Hunter and Joseph E. Davis, ‘Cultural Politics at the Edge of Life’, *Politics of Abortion and Birth Control in Historical Perspective*, ed. Donald T. Critchlow (Pennsylvania: The Pennsylvania State University Press, 1996) p.109.

be administered to, or taken by any woman, any medicines, drug, or other substances or thing whatsoever, or shall employ any instrument or other means whatsoever, with intent to cause the miscarriage of any woman...shall be liable to be fined, imprisoned, set in and upon the pillory, publicly or privately whipped, or to suffer one or more of the said punishments, or to be transported beyond the seas for any term not exceeding fourteen years, at the discretion of the Court before which such Offender shall be tried and convicted.⁸

John Keown draws attention to the broad references to the phrase ‘any medicines, drug, or other substances or thing whatsoever’, suggesting that, because individuals could employ such a diversity of methods for procuring abortion, a wording that would act as a catch-all for all methods of attempting abortion was required.⁹ This sense of uncertainty was by no means new as a social and legal anxiety. In many cases where documents referred to or hinted at abortion as part of their subject matter, or even in passing, the specific details of events or methods used were not made clear.

A pamphlet written by Samuel Bruckshaw, for example, entitled *One More Proof of the Iniquitous Abuse of Private Madhouses*, published in 1774, provides one such narrative:

there came a servant maid out of a respectable family in Manchester, and wanted Wilson to cure her complaint in one week, which he undertook to do; Wilson’s family gave it out, “*that her disorder was a dropsey and lowness of spirits*, which made her incapable of doing her business.” – I being of opinion that this woman might have got superior advice in Manchester, and that real dropsies were not to be cured in a week, happened to say that this woman’s disorder, must certainly, from her applying to Wilson, be of a nature that required secrecy and the assistance of a rogue.¹⁰

Bruckshaw is not explicit about his meaning, yet he hints that Wilson, a surgeon and proprietor of the ‘madhouse’ or asylum in question, makes it part of his business and trade to carry out abortion procedures. If his accounts, contained in both his pamphlet and the court trial relating to his case, are to be believed for their accuracy, he suggests that Wilson, possibly fearing that his supplementary business and income might be discovered, punished Bruckshaw for voicing his opinion that it was unwanted pregnancy, rather than any other condition for which the serving girl came to be ‘cured’. The reference to

⁸ See Dorothy McBride, *Abortion in the United States: A Reference Handbook* (Santa Barbara, Denver, Oxford: ABC-Clio, 2008) p.162-3.

⁹ John Keown, *Abortion, Doctors and the Law: Some Aspects of the Legal Regulation of Abortion in England from 1803 to 1982* (1988) (Cambridge: Cambridge University Press, 2002) p.13.

¹⁰ Samuel Bruckshaw, ‘One More Proof of the Iniquitous Abuse of Private Madhouses’, *Voices of Madness: Four Pamphlets, 1683-1796*, ed. Allan Ingram (Stroud: Sutton Publishing, 1997) p.96.

‘dropsey’, or dropsy, an earlier medical terminology for the condition today known as oedema, certainly provides a rationale or even excuse for physical swellings which might have been a sign of pregnancy, whether around the abdomen or in other parts of the body. Yet, while Bruckshaw casts significant doubt on the authenticity of the publicly disseminated story of the girl’s ailment, it would be impossible to discern many further specific details about the serving girl’s experience behind the closed doors of Wilson’s establishment. A week-long stay might suggest the use of surgical, or at least physical, methods of treating her, leading to a number of days’ recovery. Alternatively, it is no less possible that she was treated by a drug or other substance which was either given to her on numerous occasions, or once, then also requiring a period of recovery.

Despite the fact that demographic data has proved insufficient in being able to draw detailed conclusions about the frequency of abortion, both van de Walle and Riddle agree that, although physical and pseudo-surgical treatments could be sought out as a means of terminating an unwanted pregnancy, throughout history ‘[d]rugs’, or abortifacients, ‘are clearly the most popular method’ to appear in the historical record.¹¹ In parallel with these claims, the use of abortifacient substances is the method with which medical authors engaged most readily in published print. Riddle further points out that any description of substances that constituted an abortifacient drug would also encompass the use of pessaries as a form of administering the drug or alternative substance.¹² A survey of texts by eighteenth-century literary authors who depicted abortion in their writing, however, leaves us in no doubt that those practices that were most popular, involved an oral-route abortifacient. Any attempt to identify even a vaguely comprehensive list of the substances used is likely to reveal a significantly problematic task in many respects, or at least one for which the chance of coming up with accurate results is highly improbable. Furthermore, such a list of substances would require confirmation by way of being able to establish how effective each remedy was likely to be. Though these issues continue to complicate historical studies of population and medicine, and it would be difficult to see how they could be surmounted by a single study

¹¹ van de Walle, p.120. Riddle focuses on oral-route preparations in his comments on eighteenth-century abortion practices, see Riddle, p.201-2.

¹² Riddle, p.38.

at present, there are sufficient sources which do provide some indication of ingredients and methods that were used as part of abortion practices.

Ways and Means

Modern science would suggest that an abortifacient used during the eighteenth century might be categorised into one of three likely types of substance: emmenagogues, uterotonics and emetics. These groupings are based on the physiological effects of the substance on the female body. While the word 'emetic' or 'emetick' would have been easily recognisable as a means of occasioning vomiting, the distinction we make between emmenagogues and uterotonics is a modern means of understanding the effects of drugs, and was not recognised in the same way during the eighteenth century. These categories remain helpful to this analysis, however, insofar as being able to identify why particular substances were relied upon as an effective solution where allowing a pregnancy to continue to full term was undesirable.

Among these three it was emmenagogues, those substances used to provoke or increase menstruation that were most often detailed in reproductive medical texts. Their uses extended far beyond the singular aim of abortion, and almost all were aimed at regulating menstruation to cure broader diagnoses, making them a legitimate part of women's health medicine of the period. As Susan E. Klepp explains, '[e]mmenagogic medicines were applicable in cases of congestion, swelling, infestation, and anxiety.'¹³ Sharp's *The Midwives Book* provides an example of a midwife offering up a recipe for an emmenagogue intended to support women's general good health. She instructs:

Things that provoke the terms are hot and thin: take sirrups of Mugwort, and of the Figwort of each one ounce and a half; Oximel simple, one ounce; Water of Motherwort and Mugwort, of each two ounces; Pennyroyal and Nip, or each one ounce, sweeten it with a spoonful or two of Cinnamon water, make a Julip to drink at thrice.¹⁴

In addition to this particular receipt, Sharp also offers alternative methods such as '[f]umes', pessaries and blood-letting to stimulate menstruation. Sharp recognised the pointedly blurred line between suggesting an emmenagogue that might cure a malady and the use of one as an abortifacient specifically. She

¹³ Susan E. Klepp, 'Colds, Worms and Hysteria: Menstrual Regulation in Eighteenth-Century America', *Regulating Menstruation: Beliefs, Practices, Interpretations*, eds. Etienne van De Walle and Elisha P. Renne (Chicago and London: Chicago University Press, 2001) pp.22-38, p. 26.

¹⁴ Sharp, p.219.

concludes her chapter with a disclaimer of sorts: ‘none of these things to women with child, for that will be Murder’.¹⁵

Pennyroyal, one of the ingredients included in her recipe, was often referred to in cases of needing to stimulate menstruation. While recognised for its abortifacient properties, this herb was sufficiently available to be included in culinary recipes as well as for medical purposes. *The Accomplish'd Housewife; or, the Gentlewoman's Companion* (1745) includes advice for using it in one of the book’s recipes for veal cutlets:

Take a Neck of *Veal* and cut it into Steaks, fry the Steaks in Butter only. Boil the Cragg for strong Broth with two Anchovies, two Nutmegs, Lemon-peel, Pennyroyal and Parsley finely shred; then burn a piece of Butter and pour it into the Pan, adding a Glass of White-Wine; then put in the Steaks, and toss them all up together; serve it up in one Dish, squeezing an Orange over it.¹⁶

This example of a culinary recipe is particularly striking for the ‘normality’ with which pennyroyal was used, implying its ready availability in homes and gardens as an everyday household ingredient. Active ingredients used in remedies to regulate or provoke menstruation were often items that would not have looked out of place in a domestic kitchen or garden. Savin (*Sabina*), rue (*Ruta graveolens*) and wild ginger root (*Asarabacca* root) have all been identified as regular components of these preparations.¹⁷

Uterotonics, those preparations used to induce uterine contraction and therefore childbirth itself, appear to be less commonly referenced as an appropriate means of procuring abortion during the eighteenth century than emmenagogues, though the two have been known to be difficult to distinguish. This is exacerbated by the fact that some uterotonics were also used for purposes of stimulating menstruation. Among many possible reasons that the use of uterotonics as abortifacients was less popular than the alternative of emmenagogues, timing appears to have been a key issue. The fact that uterotonic substances accelerate birth itself means that delivery would have to occur and the difficulties associated with concealing this, for purposes of the social and economic ramifications an illicit birth would be likely to have a lasting impact on the life of the woman involved. Suspicions of infanticide remained a

¹⁵ Sharp, p. 221.

¹⁶ Anonymous, *The Accomplish'd Housewife; or, the Gentlewoman's Companion* (London: J. Newbery, 1745) p.193.

¹⁷ Schiebinger, p.124.

possibility where stillbirth or neonatal death had taken place and there were few or no birth attendants present. Secrecy and discretion were high priority requirements of any attempted abortion, observed by the pregnant woman herself and any parties who may have been involved with assisting her.

One substance which has been used throughout history for its uterotonic properties is ergot. Known today for their potential hallucinogenic and more generally ‘psychoactive effects’, ergots are naturally occurring ‘toxic fungal metabolites contaminating the food supply, usually rye’.¹⁸ Though the use of ergot in obstetric contexts has typically been with reference to the controlled acceleration of childbirth by medical practitioners from the early nineteenth century, as Riddle explains ‘[a]ncient peoples [already] knew of its devastating effects’ on the human body. One of these effects was the potential for it to act as an abortifacient when applied to late-term pregnancy.¹⁹ The first recorded suggestion of the properties of ergot in relation to pregnancy and childbirth was by German botanist Adam Lonicer (Lonitzer) in his *Kräuterbuch*, ‘Herb Book’ of 1582.²⁰ Ergot was not widely referenced in eighteenth-century medical treatises or remedy books, and the popularity of the substance for use in deliveries increased vastly during the nineteenth and early twentieth centuries, but this in itself suggests that some aspects of pseudo-medical knowledge, including the applications of ergot, may have relied on oral or manuscript transmission between generations, or reference to earlier books such as Lonicer’s volume.²¹

Emetics, on the other hand, constitute a different sort of oral-route treatment and, like emmenagogues, were also in regular medical use for many other reasons, making their total concealment most likely unnecessary. So common were emetics as treatments, many eighteenth-century medical texts omitted to give a full description of what emetics were. In most cases authors likely assumed that their audiences, professional or lay, would be familiar with the term. John Bentick’s 1786 dictionary provides a

¹⁸ J. W. Bennett and Ronald Bentley, ‘Pride and Prejudice: The Story of Ergot’, *Perspectives in Biology and Medicine*, Vol. 42, No. 3 (Spring 1999) pp.333-355, p.334-5.

¹⁹ For original discussion of the use of ergot in obstetrics see W. Michell, *On difficult cases of Parturition; and the use of ergot of rye* (London: Thomas & George Underwood, 1828) p.66-7. Riddle, p.69.

²⁰ Thomas Baskett and Ronald Cyr, *Caesarean Birth: The Work of François Rousset in Renaissance France - A New Treatise on Hysterotomotokie or Caesarian Childbirth* (London: RCOG Press, 2010) p. 100n154.

²¹ Ergot has since fallen out of use in favour of oxytocin and prostaglandins.

definition in simplest if vague terms, as that ‘which induces vomiting’.²² An emetic, when used as an abortifacient, was aimed at causing sufficient disturbance to the body’s wellbeing to lead it to abort the unborn child. Rhubarb, tobacco and pepper were all common household products employed as emetics. Emetic tartar was also a common remedy employed for the same purpose.

Abortion in Public Discourse

In order to understand how oral-route abortion was achieved, it is first important to appreciate the cultures, however illicit, that surrounded the practice of abortion in eighteenth-century England. The management of abortion as a public concern has a complex history prior to the introduction of Ellenborough’s Act. While the act of causing abortion may not have been clearly defined as a criminal offence before the early nineteenth century, documents produced with regard to local law in the final decade of the eighteenth century alluded to the procurement of abortion as an illegal, and punishable, offence. Patrick Colquhoun, a Scottish magistrate and founder of the Thames River Police, produced the legal guide, *A treatise on the police of the metropolis, explaining the various crimes and misdemeanors which was reproduced on numerous occasions*, first published in 1796. Early editions of the text demonstrate how attention was increasingly being drawn to termination procedures and the seriousness of their implications. Colquhoun makes no mention of the subject of abortion in his first edition of the book but direct reference to crimes relating to abortion were included in the second edition, produced later the same year. These passages continued to feature in each revised print thereafter.²³ Under ‘Criminal Offences relative to Human Life and Bodily Safety’, alongside details of their associated punishments, Colquhoun wrote:

23. A Woman with child using means to procure abortion. Imprisonment, no less than 15, nor more than 30 years, and condemnation to the public works, augmented when married women.

²² Rev. John Bentick, *The spelling and explanatory dictionary of the English language* (London: Thomas Carnan, 1786) p.138.

²³ The British Library’s *English Short Title Catalogue* lists seven editions of Colquhoun’s text, six of which were published in London and one in Philadelphia.

24. Accomplices advising and recommending abortion. Imprisonment, not less than one month, nor more than 5 years, and condemnation to the public works.---- Punishment increased when the accomplice is the father of the infant.²⁴

It is unlikely that Colquhoun was able to practically enforce his recommendations prior to the introduction of Ellenborough's Act but his text, produced within a decade of the Act being passed, with abortion specifically included in the second and subsequent editions, may indicate a growing public consciousness of abortion as a criminal and immoral activity. Although both documents indicate a significant potential for the crime to be committed on an individual or collective basis, each is noticeably vague with regards to specific methods and techniques of procuring abortion itself. This is reflective, at least in part, of the most complex issue regarding the law and abortion, that of giving evidence and the argument of a clear case. There was a need to prove that conception had actually occurred before an attempt was made to terminate the life of the unborn child, whether or not that attempt had been successful. As methods both pseudo-surgical and pharmaceutical were those often conducted by members of the public rather than medical practitioners, typically within private households or neighbourhoods, both Ellenborough's Act and Colquhoun's text indicate the near impossibility of policing abortion and producing a single law to act as a catch-all.

The history of ethics in relation to abortion in England prior to this law being established remains somewhat murky and difficult to discern in precise terms. While Ellenborough's Act appears as the first of its kind insofar as being a clear-cut answer to the fact that abortion was in itself outlawed, even if answers regarding through what means were less than obvious, this is not to say that such actions had been approved of formerly. Schiebinger summarises the state of play to be that '[n]o legal consensus governed early modern European practices of "abortion" and the use of anti-fertility agents. Abortion in the modern sense —meaning the induced expulsion of a living conceptus was rarely condoned by church

²⁴ Patrick Colquhoun, *A treatise on the police of the metropolis, explaining the various crimes and misdemeanors which at present are felt as a pressure upon the community; and suggesting remedies for their prevention*, 2nd edition (London: H. Fry and C. Dilly, 1796) p.294.

or state', making localised mechanisms for dealing with such circumstances all the more important, though rarely consistent beyond individual area authorities.²⁵

Even before the Ellenborough Act came into effect, secrecy was a complex, if ever-present factor. English management of cases where abortion was suspected had the potential to involve both the ecclesiastical and common law courts, though common law was known largely to leave the issue to ecclesiastical jurisdiction where possible. The typical stance held in relation to identifying where an allegation might be made in both courts was to consider whether 'quickening' had occurred. Quickening, or the detection of foetal movement, was considered to be the point of 'ensoulment' by which the unborn infant is considered a human life in its own right by virtue of having developed a soul of its own.²⁶ While this may have presented a potential reference point in the chronology and progression of an individual pregnancy, quickening was far from a straightforward matter in the world of advocacy. Without a firmly established understanding of the standard duration of gestation, reliable methods of testing how far it had progressed or even dependable testing to reveal whether conception had taken place, quickening was only relevant if these ambiguities could be resolved within a case that had been brought forward. Barbara Duden observes that '[p]regnancy was a period of uncertainty that would not become a fact until the woman had given birth to a child', and securing definitive answers before birth could be challenging.²⁷ Pregnancy testing itself remained something of a speculative art with no reliable methods available during the period. Linda Pollock points to the identification of a typical combination of 'amenorrhoea, quickening, the size of the abdomen and increasing pains as the woman neared confinement' as the primary means for identifying that conception had taken place.²⁸ Quickening, the perception and sensation of foetal movements, was particularly significant among these as the most distinctly related to pregnancy where other signs could also be indicative of other medical conditions.

²⁵ Schiebinger, p.115.

²⁶ Schiebinger, p.116-7.

²⁷ Barbara Duden, 'The Fetus on the "Farther Shore": Toward a History of the Unborn', *Fetal Subjects, Feminist Positions*, ed. Lynn M. Morgan and Meredith W. Michaels (Philadelphia: University of Pennsylvania Press, 1999) pp. 13-25, p.16.

²⁸ Linda Pollock, 'The Experience of Pregnancy in Early Modern Society', *Women as Mothers in Pre-Industrial England: Essays in Memory of Dorothy McLaren* (1990) (Abingdon: Routledge, 2013) pp.39-67, p.44.

Even in the event that quickening could be proved, which advancing technology was still unable to truly answer for, a means of abortion would have to be further evidenced. Furthermore, a case would then have had to be made that the abortion had taken place only after the first signs of quickening had occurred. Schiebinger highlights the complexities of presenting evidence in court that have dogged the subject of conception in legal contexts throughout history:

As late as the twentieth century, medical lawyers labelled the following conditions “uncertain” and thus unusable in a court of law: the cessation of the monthly flow, morning sickness, darkening of the areola around the nipple, enlargement of the breasts, increased size of the abdomen, and the growth of the womb.²⁹

From Pollock’s list of identifiers used in public and private cultures, two of the three aside from quickening, amenorrhoea and physical body size could not contribute to a case. The unmentioned factor of increasing pains was likely to be sufficiently ambiguous without quickening to secure a finding that conception had certainly taken place. In practical terms this meant that, particularly in the early months of gestation, identifying the definite occurrence of abortion was difficult, if not impossible.

Medical Contributions

Medical practitioners across Europe, physicians, surgeons and midwives, were acutely aware of how any involvement with abortion would almost certainly compromise their authority and respectability. In 1626 French court midwife Louyse Bourgeois published a letter of advice to her daughter who was also a midwife, warning that ‘[a]bove all things, you must beware (for any treasure in the world) of adhering to one vice, such as they are guilty of who give Remedies to cause abortion’.³⁰ Bourgeois’s comment places a midwife’s reputation and professional conduct at the heart of her guidance when she admonishes that ‘those that do ill, and those that seek a damnable remedy, are wicked in a high degree’.³¹ Her focus on the ‘wickedness’ of these involvements suggests her spiritual concerns over an act she considered to be unethical.

²⁹ Schiebinger, p.118.

³⁰ Louyse Bourgeois, ‘Instruction of a famous and dying Midwife to her daughter, touching the practice of this Art’, *The Compleat Midwives Practice*, ed. T.C, I.D., M.S and T.B (London: Nathaniel Brooke, 1656) pp.119-126, p.120.

³¹ Bourgeois, p.120.

Much like their earlier French predecessors including Bourgeois and Mauriceau, many eighteenth-century practitioners in England also remained of the belief that it was unethical and certainly outside of their responsibilities to provide guidance and advice on abortion in their printed works. Some, such as Sarah Stone, avoided the subject completely whilst others limited themselves to providing details of common medical procedures that carried risks to pregnant women, such as blood-letting, as a means of avoiding unnecessary miscarriage. John Armstrong's *A Synopsis of the History and Cure of Venereal Diseases* includes one of these types of references, 'giv[ing] a Caution relating to pregnant Women, viz. that they neither use the bath too often, nor continue in it too long at a Time, lest it should occasion Abortion'.³²

One of the most revealing descriptions of elective abortion to appear in a medical treatise was by John Grigg and did not make reference to the caution that should be exercised by practitioners in their examinations at all. Instead Grigg offers anecdotal evidence, first supplied by Guillaume Marquest de la Motte, in which he explains that de la Motte knew of 'a case of a girl who to procure abortion took some violent purgatives, &c. but was found dead in her apartment, in which she had secreted herself'.³³ His text shows an additional concern of practitioners, that if medical professionals were to provide recommendations or assistance with abortions, there was a strong possibility that their endeavours might not achieve the desired results, alongside the risk of their being accountable for the death a patient. The repetition of stories and anecdotes taken from the practice of other professionals, whether of cases they had read in the works of others or had heard of through verbal conversation or written correspondence, further protected practitioners from being associated with abortion themselves.

Unlike those who sought to use the language and references which created as much emotional and physical distance between their own practice and the idea or reality of abortion procedures or remedies as possible, Martha Mears adopted the alternative position of addressing 'artificial' abortion directly in *The Pupil of Nature*. 'My blood runs cold,' she explains, 'and my hand trembles, in proceeding to describe the

³² John Armstrong, *A Synopsis of the History and Cure of Venereal Diseases* (London: A. Millar, 1737) p.472.

³³ John Grigg, *Advice to the female sex in general, particularly those in a state of pregnancy and lying-in* (Bath: S. Hazard, 1789) p.124. Grigg's text was also produced simultaneously in London and Bristol.

far more inevitable dangers that attend abortion brought on by artificial means.³⁴ Before making any substantive comment about the subject at hand Mears places her own emotions at the centre of her narrative and the personal pronouns, which appear in much of her writing, ensure that the reader understands the seriousness with which she takes abortion, even in abstract discussion. While there may be many reasons for choosing to do this it is likely that Mears, like Bourgeois, was considering her professional standing. Even though she was writing over one hundred and fifty years later than Bourgeois, the question of ethics and professional standing remained much the same. Mears continues:

Ah! What a struggle between the emotions of pity for the sufferer, and of horror at the fatal cause! So wicked an outrage upon nature is sure to be punished with tortures and with death. Let the monster who advises, and the wretched creature who is going to take any medicines, or rather poisons, to effect this shocking purpose, pause for a moment, and consider well the double murder they are going to commit. Frantic woman! what are you bent upon? Is the innocent embryo in your womb to be made the first victim of your guilty joys? And do you hope to survive the deed? Do not flatter yourself with the idea of escaping public shame, public justice, and personal danger? Be not mistaken --- A terrible avenger is at hand--- The stimulants you employ cannot succeed without producing very violent effects on the organs contiguous to the womb. They become inflamed; a mortification ensues; and you are consigned with the most excruciating agonies to the grave!³⁵

Here the difference between Mears' manual and those treatises offered by practitioner-authors who had gone before her is at its most marked. Her authorial voice is not directed at fellow midwives, but unquestionably at the reader on whom she imposes the role of the individual pregnant woman contemplating taking an abortifacient that would promise to remove and forever conceal her shame of giving birth outside of socially acceptable circumstances. Like Bourgeois, her tone introduces an implicitly religious argument, even opting to employ the same language by describing the act of abortion as 'wicked', yet how Mears frames her criticism is quite different.³⁶ The emphasis on the importance of psychological experience of pregnancy is retained in this section as with the rest of her work while her ethical and professional judgments are clearly set against sexual indiscretion and, as a result, seeking to terminate a pregnancy. It would not be accurate, however, to accuse Mears of a complete lack of

³⁴ Martha Mears, *The pupil of nature; or candid advice to the fair sex* (London: Faulder, and Murray and Highly, Fleet-Street, 1797) p.111.

³⁵ Mears, p.111.

³⁶ Mears, p.111.

sympathy with those women for whom consuming an abortifacient may have appeared to be a possible or necessary step to take. Though she acknowledges an unwanted pregnancy could be the result of 'guilty joys', she also takes 'pity' on the 'wretched creature' who finds herself in need of an abortifacient. It is important to acknowledge here that, while Mears steers clear of painting a pen portrait of the kinds of situation which bring a woman to this point of consideration, the individual who has participated in illicit sexual activity and the 'wretched' object of pity may in fact be two different cases for which abortion is considered. In a situation where a pregnant woman opted to take a risk with her reputation and future and did so knowingly through sexual indiscretion, Mears clearly indicates her belief that the consequences are and will be serious and that this is rightly so. Her close alignment of a woman's selfish acts and the place of her unborn child as a 'victim' denotes Mears' unwillingness to condone loose morals or promiscuous behaviour. Less obvious, however, is Mears' idea of the female 'sufferer'.³⁷ Though at pains to restrain her comments to discouraging young women from attempting abortions, her words clearly state that a 'struggle' exists within this scenario. While her first duty as a midwife, she indicates, is to present a morally and spiritually correct path, these words, alongside a reference to the 'frantic' emotional response to conception, implicitly acknowledge instances in which women find themselves pregnant through circumstances such as rape and sexual violence, those other than personal sexual indiscretion. Even in the strictest of rhetoric, ambiguities and controversies pervaded this difficult subject in ways which would also be addressed in literary genres.

Conclusion

Narrative descriptions of abortion during the eighteenth century provide enlightening and illuminating sources showing how at least one area of maternity management that remained outside of the increasingly professionalized world of reproductive medicine was handled. The range of sources used here reveals the complexity of social codes of secrecy that surrounded the discussion of abortion, whether in medical or other public contexts. These codes of secrecy have, in many ways, prevented historical abortion from being thoroughly researched and accounted for in terms of commonly used methods,

³⁷ Mears, p.111.

remedies and practices, as well being able to understand what public interpretations of these practices might have been like during the eighteenth century. The medical literature analysed here may not provide all of the answers to questions historians might have about abortion during the period, but I have shown that there was an undercurrent trend of making reference to abortion in published print without drawing attention to having done so. Hints could be dropped, or ambiguities left in texts where abortion was not to be admitted or, like Bruckshaw's pamphlet where it could not be proved, which might lead readers to question whether they were not in fact reading about something quite different to what appeared on the page at a superficial glance.

More explicit than that, medical texts offered recipes that explained, in no uncertain terms, how to stimulate menstruation as part of healthy living without ever referencing any intention that resembled, much less constituted, abortion. Precisely how alert to the movement between regulating menstrual cycles and procuring abortion the public was is something we may never know for certain, however, the warnings of midwives which accompanied their written childbirth advice suggests that the leap between appropriating a remedy for one purpose or the other was no great feat. As can be seen by the variety of recipes in which these abortifacient ingredients occurred, a range of the items that were used as emmenagogues were commonplace in domestic gardens or available for ready purchase without being items that would automatically arouse suspicion, though the association between plant material such as rue or savin was likely to have been reasonably well known due to featuring in midwifery manuals such as Sharp's.

Medical writings, produced both before and during the eighteenth century, reveal a reluctance on the part of practitioners to discuss abortion at length, in unambiguous and clear terms. These apprehensions, religious and social, had long since cast discussion about treatments and means of procuring abortion into the shadows, and kept them there. Legal ambiguities surrounding the interpretation of just what constituted abortion and at what point it might become a heinous act of intention further served to complicate this picture, meaning that patients and practitioners experienced uncertainty about where the distinction lay between a legitimate treatment for conditions such as delayed

or obstructed menses, and the wilful killing of an unborn child. Textual practices in medical fields leaned towards making veiled references, using and re-using narratives shared by others to create the perception of distance between the author and the scenario and cause of abortion.

These esoteric conventions did not completely deter medical practitioners or other members of the public from writing about abortion, but any depictions were delivered in ways that were designed to create distance between the author and the origin of the tale, such as was the case of John Grigg's retelling of an account of an abortion that was originally provided by Guillaume Marquest de la Motte. Even de la Motte's version avoided a direct association between himself and the patient, suggesting that the story was at least second-hand to his original narration, or that he wanted to make it seem so. Sufficient information is contained in these sources to identify that orally-administered remedies were available, that these were relatively accessible, but far less information is devoted to the broader contexts and situations in which abortifacients were used beyond a sparse appearance of references to women who lost their lives in desperate circumstances, intended as a warning to women contemplating abortion themselves. These omissions and limitations evident in medical literature, as well as the domestic manuals and pamphlet literature discussed, leave questions to be asked about where else information about individual experiences of abortion could be found, if anywhere, in print and how other sources portrayed this partly obscured area of maternal experience in ways that medical practitioners could not.

Chapter Seven

'The Dreadful Potion': Abortion in the Eighteenth-Century Novel

Introduction

Abortion in the late eighteenth century remained a backstreet practice, disguised from public knowledge and kept as secretive as possible. Even in the event of limited information from medical texts, however, publications from medical practitioners were not the only type of print that made direct reference to abortion practices during the period. This chapter considers how abortion could be used as a literary theme and explores how non-medical authors treated abortion, endeavouring to experiment where other genres of literature dared not tread. Factors including the expansion of the literary print market, the emergence of the novel as a popular genre and increases in the number of women writers who published, mean that much of the literature referring to abortion practices, particularly those from the latter half of the eighteenth century, were written by female authors. Phebe Gibbes's *The Life and Adventures of Mr. Francis Clive* (1764), a text that has never been considered for its description of abortion, and Mary Wollstonecraft's *Maria, or the Wrongs of Woman* (1798), will be used to demonstrate the type of information informally conveyed to the public and within what contexts each work was situated.

Though fictional literary texts do not prove the facts or reality of individuals' lives in the way that other types of historical record might, there is real value in discovering the ways in which authors thought about and utilized abortion as a plot device. Gibbes and Wollstonecraft's references to abortion serve as indicators of the kinds of information that these authors were able to obtain for themselves, and can, to some extent, be compared with other types of source material, including medical literature, as well as one another. Contrary to van de Walle's suggestion that there was an absence of abortion references in 'the libertine literature of the 17th and 18th centuries [sic],' these texts are indicative that literary sources did, and still do, exist for use in the further exploration of abortion history.¹ Only by considering plot and character development is it possible to investigate what social and political commentaries were provided

¹ Etienne van de Walle, 'Towards a Demographic History of Abortion', *Population: An English Selection* Vol. 11 (1999), pp. 115-131, p.117.

by these women writers on a subject that was so often avoided by writers of other genres. While authors in legal and medical professions largely refrained from creating specific references that might hint at techniques or substances that could be used distinctly for purposes of abortion, literary writers had fewer such qualms. Gibbes and Wollstonecraft produced similar female characters who are faced with decisions and scenarios relating to the possibility of aborting their unborn children from the outset, but their respective journeys through a dangerous endeavour are markedly different. As we will see, their contributions immediately show that there was no clear or automatic answer to an unwanted pregnancy. As one of the subject's few literary commentators Christine Cooper interprets abortion in literature to be 'a disruption in "natural" (or naturalized) processes', and therefore requiring 'explanation, "reading" and resolution', however this resolution was created.² Cooper continues to suggest that scenarios about abortion 'presented an opportunity for the (re)establishment of order [particularly for women to create that order] in discursive form—a "fix," so to speak, in words for that which was lost through bodies.'³ Gibbes and Wollstonecraft took on this challenge, attempting to demonstrate how much greater the complexities that surrounded abortion for individual women were than might be perceived in materials and attitudes reflecting the eighteenth-century moral code of rejecting abortion in all its forms.

Addressing Abortion and Agency in Literary Fiction

Phebe Gibbes is one of many eighteenth-century women writers who remains largely in the shadow of many of her better-known contemporaries. Yet, while facing the challenges brought by widowhood and raising three children in relative poverty, she is perceived as having been an industrious writer, publishing up to twenty-two novels during her lifetime.⁴ Fifteen of these have been recovered and are on record. Isobel Grundy suggests that 'Gibbes is creeping into critical notice but is not likely to be rediscovered in the foreseeable future except by those with access to a very good research library

² Christine Cooper, 'Reading the Politics of Abortion: Mary Wollstonecraft Revisited', *Eighteenth-Century Fiction*, Vol. 16, No.4 (July 2004) pp.735-782, p.739.

³ Cooper, p.739.

⁴ Ashok Malhotra, *Making British Indian Fictions: 1772-1823* (New York: Palgrave Macmillan, 2012) p.128; Jennie Batchelor, *Women's Work: Labour, Gender, Authorship, 1750-1830* (Manchester and New York: Manchester University Press, 2010) p.173.

indeed'.⁵ Grundy ascribes a number of reasons to Gibbes's continued relative obscurity including the fact that there have been few reprints of her work and her 'truly villainous handwriting', which has made relevant archival records difficult for scholars to interpret and further potential attribution of written documents to her uncertain.⁶ The only work of Gibbes's which has played a notable role in contemporary literary debates is her novel *Hartly House, Calcutta* (1789) edited by Michael J. Franklin and published by Oxford University Press in 2007. The attraction of this one novel above Gibbes's other works is its setting in India and topical political themes of English colonialism and trade in relation to India. The timing of the novel's publication makes it furthermore significant as it appeared a year after the attempted impeachment of Warren Hastings, the Governor-General of India at that time, the prosecution of which was led by Edmund Burke.⁷ As suggested by her experimentation with current and even controversial themes, Gibbes's contribution to the eighteenth-century literary market was greater than has yet been realised, particularly with respect to her treatment of subjects that specifically related to women's experiences. *The Life and Adventures of Mr. Francis Clive* includes a short exploration of abortion.

Gibbes has been noted as a proto-feminist author by Nicole Reynolds, a label corroborated by April London's analysis of her work.⁸ London considers *The Life and Adventures of Mr. Francis Clive* for its themes of power and property, pointing out Gibbes's use of 'central female characters' to invert traditional gendered roles, particularly in relation to the theme of 'the pursuer and the pursued'.⁹ The effect of doing so, London explains, makes Gibbes's main female players in the novel, Mrs. Smith and Mrs. Clive specifically, 'entrepreneurial successes'.¹⁰ While this is true, and points towards Gibbes having a proto-feminist political agenda within her writing, London's qualification of success for women

⁵ Isobel Grundy, '(Re)discovering women's texts', *Women and Literature in Britain, 1700-1800*, ed. Vivien Jones (Cambridge: Cambridge University, 2000) pp.179-196, p.190-191.

⁶ Grundy, p.191.

⁷ Betty Joseph, *Reading the East India Company 1720-1840: Colonial Currencies of Gender* (Chicago and London: Chicago University Press, 2004) p.80.

⁸ Nicole Reynolds, 'Gibbes, Phebe', *The Encyclopaedia of British Literature 1660 – 1789*, Vol. 1, eds. Gary Day and Jack Lynch (Chichester: John Wiley & Sons, 2015) pp. 535-536, p.535.

April London, *Women and Property in the Eighteenth-Century English Novel* (Cambridge: Cambridge University Press, 1999) p.127.

⁹ London, p.127.

¹⁰ London, p.127.

being 'central' to the plot is an important one and should not be missed as it does not apply comprehensively to all female characters in the novel, with others serving more minor purposes or being present for a lesser proportion of the novel's plot development. One character about whom London remains silent, possibly due to her lesser role in the overall trajectory of the book's plot, is Hannah, a young housekeeper seduced by the recently widowed Mr. Clive, who at that point is her employer. The affair ends in catastrophe. Contrary to promises made to Hannah, on discovering the unwanted pregnancy, Mr. Clive quickly admits that he is unwilling to marry her in order to legitimize their unborn child. Instead, he offers to organize accommodation and a small allowance to maintain both mother and child. Hannah rejects this proposal as insufficient to her needs. Her primary concerns are not those which surround material wealth, or even her ability to provide for the unborn child, but rather her personal reputation. In response to Mr. Clive's proposal she declares, 'I insist upon it, to some potion which may be the means of concealing my shame, and, should my life be the forfeit, I will freely forgive you.'¹¹ In parallel with the beliefs of van de Walle and Riddle, that oral-route substances were the preferred method for attempting abortion Hannah's first thoughts are directed towards procuring abortion by means of an abortifacient. Gibbes's lower order servant is fully aware that such remedies exist. In addition, like Martha Mears's later warning, that 'stimulants [a woman] employ[s] [for abortion] cannot succeed without producing very violent effects on the organs contiguous to the womb', Hannah is also aware of the risk to which she will expose herself on consuming the remedy.¹² Despite Mr. Clive's protests, she remains adamant and admonishes "I never will ... nor will I quit this room until I am furnished with what I request; I will take it instantly, and patiently wait the event."¹³ As her resolve remains absolute, Mr. Clive's only option is to reluctantly enter into her wishes:

John was again dispatched to a neighbouring apothecary to endeavour to procure the dreadful potion: the journeyman was his particular acquaintance, and upon making him an handsome

¹¹ Phebe Gibbes, *The life and adventures of Mr. Francis Clive*, Vol.1 (Dublin: E. Watts, J. Potts, A. M'culloh, and J. Williams, 1764) p.8.

¹² Martha Mears, *The pupil of nature; or candid advice to the fair sex* (London: Faulder, and Murray and Highly, Fleet-Street, 1797) p.111. For full quote see Chapter 6 of this thesis, p.227.

¹³ Gibbes, p.8-9.

tender he consented to prepare him in less than an hour a draught, that should answer the desired purpose. He accordingly delivered a vial to this trusty servant.¹⁴

Gibbes's narrative does not indicate at any point that Hannah's knowledge is sufficient that she would know what types of ingredients would be needed to make up such a 'potion', but her insistence on staying where she is potentially implies that she is aware that assistance is to be found nearby. Whether or not it was Gibbes's intention to do so explicitly, the passage also provides information which is more specific about abortifacients than any medical text of the period would endeavour to describe, though it continues to avoid naming a precise substance or recipe that might be used. The narration of Hannah's circumstances, highlights where these remedies might be accessed; that apothecaries could be used as a means of obtaining these abortifacient substances when required, as well as including an explicit reference to a 'vial'. Her depiction suggests to readers that an abortifacient substance is likely to be found in the form of a small volume of liquid.

Gibbes continues on to explain the effects the drug has on Hannah:

[S]he immediately swallowed the dire remedy. In a short time she was seized with a fit of convulsions, and continued in them without any visible intermission for a night and a day, and then expired in dreadful agonies; he was attended by the young fellow, who had prepared this horrid Medicine, who declared that her case, though shocking, was by no means uncommon, as many persons had lately been taken off in the same manner. The family were alarmed, her friends exceedingly grieved, but the cause remained a secret for many years with these three villains.¹⁵

Even without the exact name or ingredients of the 'remedy', *The Life and Adventures of Mr. Francis Clive* gives an explicit breakdown of the motivation of a young woman for wishing to engage with attempted abortion, how this might be carried out, as well as the risks associated with pharmaceutical abortion. Despite Hannah's portrayed innocence in the scenario of having been taken advantage of by her employer, her guiltlessness does not protect her from the effects described by Mears. Yet, while Hannah's character is not cut from the same cloth that London suggests of other women characters in the same text, she does possess an irrefutable sense of authority and agency in a situation which would not normally see

¹⁴ Gibbes, p.9.

¹⁵ Gibbes, p.9.

women increase in confidence and determination. There can be no doubt that Hannah faces a terrible choice over whether to keep the child and be ruined, or attempt abortion and risk the possibility of death. Seeking to avoid ruin at all costs, she will not be bought off or controlled by a male superior's attempts to make as tidy a repair of an uncomfortable circumstance as possible from his own perspective. Instead, she chooses to risk her own life rather than accept a financial solution that will see her comfortable, if without her personal sense of virtue and public reputation, for the remainder of her life.

There is no indication given in the text as to the expectations of any character involved in the abortion scenario as to the specific means by which the substance would provide an 'antidote', or whether it was intended to stimulate menstruation or childbirth itself, or as even act as an emetic. Based on the availability of abortifacients in midwifery manuals and household remedy books, it would not have been difficult for a woman such as Gibbes, running a household and raising children, to access information about emmenagogues and other abortifacients, thereby being able to identify ingredients such as pennyroyal or wild ginger root, that could have easily been prepared to Hannah's requirements. Though it is possible that Gibbes deliberately omitted any further information she had herself on abortifacients, neither plot nor narrative as they appear in the completed novel demanded that the author necessarily make a conscious decision as to precisely what the remedy was intended to do. Information offered in the narrative ensures that the reader's knowledge about the contents of the vial is level with that of the distraught Hannah on consuming its contents. The reader is as much a passive participant in the scene as any character other than Hannah once she uses the drug, certain and sympathetic of Hannah's resolve to take the remedy, but just as sure of the risk she takes in doing so.

It may be that Hannah's desperate story was intended to serve as a warning to some readers of the dangers inherent in making attempts to abort pregnancies, much like a fictionalised version of the passages included in midwifery manuals, but to take it as such would be to overlook the bolder message embedded in these events. London's analysis of major female characters in a selection of eighteenth-century literature including Gibbes's novel, draws attention to the individual behaviour of these characters

as well as what they demonstrate as a collective. She explains, '[in the novels surveyed...] women possess a remarkably varied agency: they can effect male reformation or corruption, advance or threaten the survival of existing institutions, authenticate or undercut customary representations of selfhood'.¹⁶ Though not a central character Hannah, like Mrs. Clive or Mrs. Smith, also possesses an element of agency in the abortion scenario and is at pains to ensure that her voice is heard. In the same way that these two married women assert agency over financial matters and their material comfort, Hannah claims authority over her own body.

Refusing to be bought off with a promise of financial security and a quiet life from Mr. Clive, Hannah insists on speaking out against his suggestions that her unwanted pregnancy should be dealt with in this way. Even in the knowledge that she may be ultimately silenced by death she will not 'passively and imperfectly absorb male wisdom', or even become a negotiator of equal influence at the table opposite a more traditionally powerful male counterpart.¹⁷ Hannah mobilises what little authority she possesses, however, to make a statement of choice on an issue specifically affecting women amidst a direct attempt to be quietened through becoming the product of what would effectively be a purchase of her freedom. London's concept of property becomes relevant to the circumstance of abortion as Hannah asserts her power over the only assets that she, as a working woman, could lay claim to: her body and her life. Her body, though remaining her own, has already been compromised by her having been seduced, leaving her with only one resource that is completely her own. On consuming the abortifacient of unknown contents and knowingly gambling her life, Hannah subverts the hierarchical relationship structures of employer-employee and male-female which would bind her to acting in accordance with the will of Mr. Clive. Her insistence on obtaining and consuming the unknown abortifacient makes her final act before her death a statement of her own and prevents him from shaping her life to suit his needs which, if she had followed Mr. Clive's suggestion, may well have seen her exit the novel's plot alive but in an unbreakable silence of shame and degradation. Rather than acting as a simple deterrent to readers

¹⁶ London, p.139.

¹⁷ London, p.148.

aimed at dissuading them from following similar paths, Gibbes's depiction of Hannah empowers the lower ranking woman to take a decision out of the hands of a male superior and points towards the injustice of her situation which ultimately results in her reclaiming her own body through death. This method of narrating abortion favours the characters in the room, rather than considering the unborn child. Gibbes's priority in her narrative communication is to focus on the fate of the mother, and the issue of scandal should Hannah give birth, rather than pursue any line of enquiry about the position of the foetus in this scenario. The silence itself suggests that in a moment of decision, where a woman's reputation and a man's choice in terms of support are at stake, social codes did not allow for a full consideration to be made of all aspects of the situation as it arose. Guilt is implied in Mr. Clive's behaviour following Hannah's death, as he 'soon contracted two vices, which he was not naturally addicted to, gaming and drinking; but they contributed at first to banish reflection, but soon established into customs' but not explored further.¹⁸ Whether he was keen to avoid recollections of the loss of his former lover or his unborn child goes unexplained. Gibbes's narrative reveals the numerous complexities of applying the ostensibly direct view advocated in religious and medical contexts of abortion, and the power which an individual's story had to complicate those beliefs for women and those who kept the knowledge of what they felt they had to do in order to conceal the truth.

A Vindication of the Neglected Woman

Another text depicting scenes of abortion through the use of consumable substances is Mary Wollstonecraft's *Maria, or the Wrongs of Woman* (1798). Though unfinished, *Maria* has been recognised as an important work of fiction that illustrates the unsatisfactory nature of the English political system which Wollstonecraft strongly believed legislated the subjugation of women.¹⁹ The completed sections of *Maria* were published posthumously in 1798, alongside notes for its completion, edited by William Godwin. In the space of what Wollstonecraft did manage to pen in her drafting before her untimely death,

¹⁸ Gibbes, p.9.

¹⁹ Godwin made his editorial interventions and published the unfinished work in 1798, shortly after his wife's death from puerperal fever following the birth of their daughter Mary Wollstonecraft Shelley on 10th September 1797.

she was able to confront some of the same questions that Gibbes had begun to experiment with in relation to abortion. Her own narrative includes two instances where abortion occurs or is a possibility, which she uses to represent the brutal reality of a society that maintained a patriarchal ideology that served only to uphold a double standard where the treatment of women was concerned. Both the institution of marriage and the relevant legal frameworks pertaining to women's lack of rights to property, wealth and independence are central targets of Wollstonecraft's criticisms, with women's bodies symbolising all of these things in *Maria*. Her critique also reaches further into social culture, indicating how relationships between women were negatively affected by these conditions.

The power and temerity with which the author's own convictions were delivered remained just as strong in her final work as it had been in her earlier works on the subject of society's treatment of women. Even though *Maria* was to remain an unfinished work, the text can still be read as part of the polemic that shapes Wollstonecraft's body of work as a whole. *Maria* imagines the sufferings of the eponymous protagonist, a woman incarcerated in an asylum by her manipulative husband George Venables, who is the embodiment of the numerous social institutions that underpin and maintain the suppression of women as autonomous beings. His kidnapping of his wife in her efforts to flee the country so as to distance herself from him is simply his reclaiming what is rightfully his by law, rather than a criminal act. Following his forcible return of Maria into his property, Venables seeks to exercise ultimate control over Maria and oppress her as far as possible, by having her incarcerated in an asylum due to alleged madness, thus denying her any form of physical freedom or access to her only child, an infant daughter.

Detained against her will and deprived of any physical or emotional comfort, Maria's only human interactions are with those who share her immediate environment: fellow in-mate Henry Darnford and Jemima, an attendant within the asylum with 'only a claim to a Christian name, which had not

procured her any Christian privileges' on account of being illegitimate.²⁰ During the time that Maria spends in her cell, Jemima explains in her own words how her illegitimacy is compounded by being an impoverished, unmarried woman whose past, reputation and future have been marred by ill-treatment by men, at one point resulting in abortion. Her account of her life moves from birth through to her employment in her present position. After accounting for her unfortunate beginning, her birth was the result of a brief relationship between unmarried domestic servants in a house much like the one Jemima herself works in as a young woman, her mother having been seduced by a fellow employee of the household who then refused to follow through a promise of marriage. The death of her mother, nine days after Jemima's birth, precipitates a series of events which render Jemima unable to defend herself against abuse or ill fortune. After being put out to an inexpensive and negligent nurse, Jemima is brought to the home of her father and his new wife who had, by that point, also given birth to a daughter. In recollection of these early years she explains, '[a]ccordingly I was brought to her house: but not to a home — for a home I never knew'.²¹ Her illustrations of the ill-treatment that she received within her father's family home include violence and torment, having been deprived of food and any of the lavish affections offered to her half-sister as well as being used excessively for household labour. From their household Jemima is sent out to work, again encountering a singular lack of kindness from all she met while in service. Her reflection, offered within the walls of the private asylum, gives her the distance of time to be able to look back at what the key disadvantages she suffered might have been. She points to one in particular, in lamenting 'I cannot help attributing the greater part of my misery, to have been thrown into the world without the grand support of life — a mother's affection.'²²

The place of maternity within Wollstonecraft's political perspective would be difficult to understate, but as Jemima's story indicates, it is by no means purified or idealised in her fiction. As Julie

²⁰ Mary Wollstonecraft, *Mary, A Fiction and The Wrongs of Woman, or Maria*, ed. Michelle Faubert (Canada: Broadview Press, 2012) p.167. Unless stipulated otherwise subsequent references to Wollstonecraft's text will be to this scholarly edition.

²¹ Wollstonecraft, p. 190-191.

²² Wollstonecraft, p.193

Kipp notes, ‘the painful story Maria relates [and that of Jemima...] veers dramatically from those proffered in standard novelistic treatments of motherhood’.²³ Instead of creating a version of idealised motherhood, Wollstonecraft’s depiction of Jemima’s life, and Maria’s, show their sufferings, as she writes out both mothers of her central female characters quickly, leaving the daughters to struggle without even the intervention of a caring father to supplement such a loss.²⁴ The narrative fragment written in full does not make clear whether Maria’s daughter suffered in her mother’s absence, though Maria’s efforts to tell her story in writing indicate her fears for the child if she does not learn from the mistakes, or rather the vulnerabilities, of others. The reverence and significance with which Jemima speaks of a mother’s impact on her children’s lives is reinforced by Maria’s own contemplations of being deprived of her daughter and the grief she feels over her mother’s death, despite her mother’s ‘indolence of character, which prevented her from paying much attention to our education’ and her ‘extravagant partiality’ towards her eldest brother, Robert.²⁵ In Maria’s case, her mother’s own education was not sufficient to guide her children equally, and in Jemima’s both mother and child would have been likely to suffer poverty and reputational ruin even had her mother lived to care for her. Though Maria presents a critical image of her own mother in her memoir addressed to her daughter, she recognises the essential part her mother played in her early life and the environment she was raised in through her grief after her mother’s death.²⁶ Even had Jemima’s mother lived, the surrounding context, her giving birth in a hidden room while facing the contempt of those around her, makes clear that while mother and child would have been subject to poverty and disgrace. Jemima remains of the view that this would have been preferable to being raised in her father’s marital home and the events that followed. It is not difficult to see Gibbes’s Hannah as comparably neglected to both Jemima and her mother insofar as having being seduced by a man within her immediate environment only to be cast off by him on receiving the news of her pregnancy.

²³ Julie Kipp, *Romanticism, Maternity, and the Body Politic* (Cambridge: Cambridge University Press, 2003) p.83.

²⁴ Although Maria and Jemima’s fathers do appear in the plot of *Maria*, neither seeks to take express any affection or protection for their child.

²⁵ Wollstonecraft, p.190-191.

²⁶ The story of Maria’s mother’s illness and subsequent death are described in Chapter VIII of the text. See Wollstonecraft, p.220-224.

Having escaped the tyranny of her stepmother through her employment as ‘an apprentice to one of my step-mother’s friends, who kept a slop-shop in Wapping’, the subject of maternity becomes no less painful to Jemima.²⁷ She recalls the repeated harassment and rape she suffered at the hands of the master of the household, when she was just sixteen.²⁸ In telling her story she expresses the prevailing emotion which accompanied her experience ‘I discovered, with horror – ah! What horror! – that I was with child’, before continuing, ‘[a]fter some weeks of deliberation had elapsed, I in continual fear that my altered shape would be noticed, my master gave me a medicine in a phial, which he desired me to take, telling me, without any circumlocution, for what purpose it was designed.’²⁹ Wollstonecraft undoubtedly employs a scenario similar to that which had been developed by Gibbes more than twenty years before though her manipulation of the surrounding circumstances introduce some significant differences. Gibbes emphasizes that Hannah’s decision to attempt to procure an abortifacient is made independently and without coercion from Mr. Clive. Only after making this decision does she look towards the involvement of others, Mr. Clive and his man John, in seeking out a suitable remedy from an apothecary. Wollstonecraft, on the other hand, opts to depict a situation in which a victim of sexual abuse comes to possess the abortifacient at the forceful command of her abuser. The very suggestion of the substance itself comes in direct opposition to Jemima’s beliefs on motherhood and the idea that a mother’s affection is a child’s essential protection from harm.

Wollstonecraft’s choice to convey Jemima’s story through first-person narration also affords her the opportunity to illustrate the character’s feelings of inner turmoil with regard to the moral implications of taking the abortifacient, unlike Gibbes’s Hannah for whom no concerns of this type are detailed by the author. Jemima’s repeated exclamations of the word ‘horror’ as she retells her past, deliver the news of conception to the reader as a shocking blow, in much the same way that Jemima herself, or any woman in her position, might have felt on coming to this realization. The ‘fear’ she expresses is so

²⁷ Wollstonecraft, p.192.

²⁸ By comparison, Gibbes describes Hannah as young, but does not provide her age. Gibbes, p.5.

²⁹ Wollstonecraft, p.194.

great that even when time has elapsed and her circumstances of living and employment have changed, Jemima can only allude to the ‘medicine in a phial’, rather than explicitly stating its intended use as an abortion medication. Her immediate and instinctive understanding of the situation leads her to sympathise with the plight of her unborn child as she perceives it and at first means that she ‘could not resolve to take this infernal potion’.³⁰ Though Jemima continues to resist taking the substance given to her, the circumstances which surround her pregnancy move quickly out of her control and a painful process of rational decision-making is required to supplant her maternal desire to offer security to her unborn infant in a way that she was aware she had not been able to experience for herself beyond the earliest days after her birth. The mistress of the household, having discovered Jemima’s pregnancy, turns her out of the house leaving a young, pregnant woman destitute, without status or any means of maintaining herself or the unborn child. Here Wollstonecraft personifies the struggle of so many women across the country to survive without access to independent means of living through Jemima’s character, placing her in a position of utmost vulnerability: impoverished, pregnant and alone, also demonstrating a lack of female compassion from any party, least of all her mistress. It is only when she reaches this state of absolute poverty, without a home or any financial means to provide basic self-care, much less provide for her child, aware that her child’s life may be a repetition of her own, that she finally succumbs to the unfortunate yet foregone conclusion of taking the abortifacient. In desperation, Jemima ‘sought for the potion that was to procure abortion, and swallowed it, with a wish that it might destroy [her], at the same time that it stopped the sensations of new-born life, which [she] felt with indescribable emotion’.³¹

Even in a moment which sees her undertake what may be considered, alongside infanticide, as the ultimate anti-maternal act, her reflections on the life of the unborn child continue to bear all the markings of maternal feeling and are parallel, if opposite, to those expressed by Winscom’s speaker in wishing that both mother and child should die, should fate allow for this.³² Rather than being concerned that her

³⁰ Wollstonecraft, p.194.

³¹ Wollstonecraft, p.195-96.

³² See Chapter Four of this thesis, p.171.

situation will leave a child without a mother, as was Winscom's fear, Jemima's guilt about the only avenue open to her leads her to believe that she does not deserve to live by causing the unborn infant to die. While the focus of her thought process is indicated to be the infant rather than herself at all times, Wollstonecraft's narrative reaches one of its most brutal moments of character treatment in which Jemima's situation denies her the luxuries of support or sanctuary from the cruelties which continue to impact upon her life and health. As the medical practitioners referred to above each warn against, the risks of abortifacients did not cease to be a problem as soon as Jemima, or any patient for that matter, had ingested the contents of the phial. Her tale continued, '[t]he effect of the medicine was violent, and I was confined to my bed several days; but, youth and a strong constituti[o]n prevail[ed]'.³³ Wollstonecraft's use of the word 'violent' draws parallels between the effect of the abortifacient on the young woman's body and the aggressive behaviour she has previously endured throughout the circumstances of her life and is no more forgiving than her earlier persecutions. Jemima's only triumph is her survival and physical recovery, while her mind continued to be tortured by the experiences and memories of sexual abuse and abortion, relieved only by her opportunity to share such harrowing recollections with Maria and Darnford.

Jemima's story is the only direct portrayal of an abortion scene included in what Wollstonecraft managed to complete of the text, but the possibility of another continues to haunt the contemporary critic of literature. The abrupt interruption of Maria's story, occasioned by Wollstonecraft being unable to complete the novel, left Godwin with the difficulty of making decisions as to how to present the end of the narrative. As his editorial input notes, she did leave a set of brief outlines of sketched ideas for the novel's ending, presented in broken sentences. The four possibilities presented alongside the fragment are:

I.

“Trial for adultery — Maria defends herself — A separation from bed and board is the consequence — Her fortune is thrown into chancery — Darnford obtains a part of his property — Maria goes into the country.”

³³ Wollstonecraft, p.196.

II.

“A prosecution for adultery commenced — Trial — Darnford sets out for France — Letters — Once more pregnant — He returns — Mysterious behaviour — Visit — Expectation — Discovery — Interview — Consequence.”

III.

“Sued by husband — Damages awarded to him — Separation from bed and board — Darnford goes abroad — Maria into the country — Provides for her father — Is shunned — Returns to London — Expects to see her lover — The rack of expectation — Finds herself again with child — Delighted — A discovery — A visit — A miscarriage — Conclusion.”

IV.

“Divorced by her husband — Her lover unfaithful — Pregnancy — Miscarriage — Suicide.”³⁴

A further passage entitled “THE END.”, Godwin notes, was also left by Wollstonecraft. His editorial input in introducing the piece to the reader explains that it ‘appears in some respects to deviate from the preceding hints’ as an ending to the plot.³⁵ This passage encapsulates a suicide attempt on Maria’s part, apparently prompted by the experience of a ‘hell of disappointment’.³⁶ During this scene, as well as in two of the four proposed outlines for the completion of Maria’s story, Wollstonecraft’s protagonist is revealed to be pregnant once again. Although none of the information presented in Godwin’s ‘Conclusion, by the Editor’ can be taken as a true ending for the text (after all Wollstonecraft may still have altered the ending had she had the opportunity to review her notes) it is possible to trace those ideas that remained constant themes in these notes and look at how Wollstonecraft might have sought to shape the text as a whole through its final chapters.³⁷ In the third and fourth labelled outlines a miscarriage occurs, in one case before Maria’s own demise by committing suicide. Corinna Wagner characterises the last of these scenarios as ‘a snapshot of what a woman’s life might entail’ during the period, a comment

³⁴ Wollstonecraft, p.285-86. Corinna Wagner, *Pathological Bodies: Medicine and Political Culture* (Berkeley and London: University of California Press, 2013) p.115.

³⁵ Wollstonecraft, p.286.

³⁶ Though the disappointment itself is not detailed, Darnford makes no appearance in the paragraph at all and Maria’s thoughts are focused initially on ‘an eager longing to forget herself’. The combination of these two factors possibly indicates another misfortune relating to Darnford himself. Wollstonecraft, p.286.

³⁷ Wollstonecraft, p.285.

that is indicative of Wollstonecraft's views about how easily women's lives could spiral out of their control, and tragically so, without any intervention to prevent this from being the case.³⁸

As suggested by Godwin however, the further fragmentary draft which follows does not carry forward any of these plans as they have been prescribed in the structures laid out. Instead, Maria is indeed pregnant but has not miscarried at the point she attempts suicide by means of laudanum. Her consumption of the drug while pregnant makes suicide and abortion two parts of a single act. Her thoughts about the repercussions of her decision to end her life are only offered to the reader once she has consumed the laudanum and lies awaiting its effects. In addition to the absence of Darnford, Maria finds herself without the companionship of Jemima, at least for the immediate duration of her suicide attempt. On having ingested the drug, Maria's first personal reflections reveal that she is fully aware of implications of her decision to end not only her own life, but also that of her unborn child. The strength of her own conviction that leads her to believe that she 'cannot live' forces her to recognise the difference between her own hopelessness and the helpless position of her child. Forced by a vision, possibly a hallucination caused by the laudanum, of her supposedly deceased daughter by Venables mourning the loss of her unborn sibling, Maria considers briefly two possibilities: that of killing the infant with herself or committing suicide after giving birth. 'Surely it is better', she reasons at first, 'to die with me, than to enter on life without a mother's care!'³⁹ Wollstonecraft's style of writing about this dilemma recalls Jemima's story of her life and belief that 'the greater part of [her] misery' was caused by losing the benefit of her mother's love and protection within days of her birth.⁴⁰ Maria then experiences feelings of doubt, after determining that she is unable to pursue her own life, over the idea of delaying her suicide. '[B]ut could I have deserted my child the moment it was born[?]' she asks of herself, considering whether she might have deferred her plan until after her pregnancy had progressed to full term and she had been

³⁸ Wagner, p.115.

³⁹ Wollstonecraft, p.286.

⁴⁰ Wollstonecraft, p.286.

delivered so that the child might live after her own death.⁴¹ Though she recognises her own question as worthwhile she dismisses the thought rapidly with a follow up thought which, again much like Jemima's emphasis on the importance of the maternal figure in a child's formative years, problematizes life as being a 'troubled wave' which the child may only suffer and never benefit from without a mother's care.⁴² Maria's thoughts, though irresolute and increasingly piecemeal as the laudanum begins to take hold, reflect an increasing cultural and medical tendency to acknowledge the lives of mother and child as intrinsically linked but separate during pregnancy. With each thought that surfaces in her mind, Maria fights against herself and the belief within her that condemns the potential loss of infant life but condones suicides through desperation.

Jemima returns to find Maria in the grip of the effects of the laudanum, the drug having impaired her ability to orientate herself within her environment and sensory perceptions. The structure of movement between narrative and dialogue once again aligns the experience of character and reader such that the reader only accesses those areas of Jemima's speech that Maria consciously hears, whereas pieces of a story of Jemima's own activities during the time that Maria has been alone appear intentionally missing. She perceives Jemima's entrance with 'a little creature' to be the product of another 'vision' rather than reality before attempting to move herself from her bed and subsequently fainting.⁴³ Only after her revival and a bout of severe sickness to expel the amount of laudanum affecting her does Maria begin to realise how the stakes and potential consequences of pursuing an end to her life have changed dramatically. From a situation of perceived social isolation and without a reason to live, Jemima's assistance in bringing her round indicates to Maria that she has not been deserted by all of those she had learned to care for. This significant shift in her character reveals Wollstonecraft's desire for women to be mutually supportive of one another, particularly when bound together by the emotional bonds of shared experience. Jemima's retrieval of her friend's young daughter, who immediately addresses her mother as

⁴¹ Wollstonecraft, p.286.

⁴² Wollstonecraft, p.286.

⁴³ Wollstonecraft, p.287.

‘Mamma’, returns Maria to her place as a mother of a living child as well as one unborn.⁴⁴ The impact of reversing the history which Maria thought to be true in the supposed death of her firstborn is palpable. While it is Jemima who has stepped between her friend and death, it is the prospect of motherhood that offers Maria a renewed sense of purpose. Her closing words, ‘[t]he conflict is over! — I will live for my child!’ pull Maria away from the precipice of despair and into a new potential future.⁴⁵ Though the reader can be sure that motherhood is a hopeful future that Maria envisages, these words do not offer certainty themselves. The word ‘child’ appears in singular form, where both children appeared in Maria’s mind shortly after taking the laudanum, one to mourn the loss of the other. The ambiguous reference could be directed towards her small daughter, who requires a mother’s care, or her unborn child for whom she must live if the infant is to survive even to the point of birth.

‘Morbid’ Maternity

Clear differences exist between Jemima and Maria’s stories in relation to abortion. Jemima’s experience represents the impossibility of a judgment being held over the head of a woman who had been the victim of rape, whether she deigned to attempt abortion, or possibly infanticide, or embarked on the lifetime journey of single parenthood for which she was likely condemned to a state of permanent disgrace and disapproval from the wider community. The outline of Maria’s possible pregnancy, on the other hand, is almost certainly the result of consenting sexual relations between herself and Darnford, with the use of ‘the sacred name of “husband”’ as the product of her independent thought framing her reflection on the relationship.⁴⁶ Unlike the information offered to the reader regarding Jemima’s circumstances of living, what Wollstonecraft committed to paper about Maria does not make absolutely clear her motivations for attempting suicide, an act that would also ensure the abortion of her pregnancy by virtue of her own death. Her financial situation is not clearly defined: the only details given note that Maria is able to access funds for her immediate needs from an attorney on leaving the asylum, and that

⁴⁴ Wollstonecraft, p.287.

⁴⁵ Wollstonecraft, p.287.

⁴⁶ Wollstonecraft, p.275.

the potential for a further income remains a ‘case [for] consideration’.⁴⁷ Similarly her reputation, while not discussed in explicit terms of scandal or ruin, is noted to have been compromised. In paying visits to properties where ‘she had formerly been intimate, but was refused admittance’, which is then followed up by distinct references to social isolation in the piecemeal information for the book’s outlined ending.⁴⁸ The third proposed ending to the novel refers to Maria being ‘shunned’ after providing for her father and before returning to London.⁴⁹ The only additional reference that Wollstonecraft offers in relation to the character’s life, between the end of the prepared draft section of the text and the jigsaw-esque clues to a possible conclusion to the plot, is that ‘nothing remained’ for Maria at the time of her taking the laudanum.⁵⁰ In contrast to Jemima, she is not the product of abject poverty and neglect. Instead, Maria’s life begins in a home that was, if by no means ideal, comfortable to an extent. Where Jemima was a stranger to such comfort, Maria’s sense of oppression and the situation in which she finds herself is the result of having lost the securities of her younger life including her mother, uncle, the prospect of a happy marriage, any money handed over to her husband’s squandering habits, culminating in the subsequent loss of her freedom and her young daughter at the hand of a merciless husband. Though not incarcerated herself, Jemima is as much a prisoner as Maria, given her lack of alternatives for sustaining herself, outside of working in an asylum. Both characters are brought into this environment by their respective experiences of wrongs perpetrated against women, which, until a significant political change could take place, would continue to act as a form of imprisonment for women, with no prospect of escaping the confines of patriarchy to any form of liberation.

Rachel Seiler-Smith’s analysis of Wollstonecraft’s depictions of maternity in her fiction and non-fiction texts furthers this perspective, explaining that ‘[m]orbid mothers [those mothers oppressed by

⁴⁷ Wollstonecraft, p.276.

⁴⁸ Wollstonecraft, p.277.

⁴⁹ Though Wollstonecraft includes this reference to Maria being shunned she is not clear in her planning as to who shuns Maria. Given that the reference to this social exclusion precedes that of Maria’s return to London, the most probable circumstance that the author intended that her protagonist be shunned by her own family, the local community surrounding her childhood home, or perhaps both. Wollstonecraft, p.286.

⁵⁰ Wollstonecraft, p.286.

either others or personal circumstances] become negotiators, if abused ones, for Wollstonecraft: figures who cast political futurity into a delicate condition where the terms of reproductive compliance hinge upon women's inclusion into political life'.⁵¹ This is true of both Maria and Jemima, as well as their own mothers. Maria's is the first character presentation of what Seiler-Smith refers to as 'morbid motherhood', in this case a woman deprived of her maternal role through imprisonment for refusing to submit to a domestic role that would see her financially ruined and abused, with no recourse to the law for protection against her husband.⁵² Later, Wollstonecraft's notes for the ending of her novel suggest that Maria becomes no more 'compliant' reproductively or politically in her relationship with Darnford as her sexual relations and cohabitation with a man who was not her husband were a transgression against society norms sufficient to see that she would not be accepted, not only by the patriarchal establishment, but also by other women. Jemima is another representation of Seiler-Smith's conceptualisation of Wollstonecraft's text, by the requirement to conform to the wishes of the men with whom she has come into contact. These demands placed upon her have led her to a scenario of becoming pregnant and risking her reputation and 'political inclusion', what little she had, by virtue of being gainfully employed in a private middle-ranking household. Maria's mother is only able to maintain her position in society through her marriage, despite the fact that in order to do so she is forced to submit to 'orders [from her husband that] were not to be disputed', and her lack of education permitted her no ability to see beyond this.⁵³ Jemima's mother is automatically cast out by what would have been perceived as licentiousness on the part of a woman, though not questioned with regard to her male sexual partner, meaning that she is unable to regain acceptance in the circle that surrounds her, made up of other servants and the employing family, regardless of her actions from that point forward.

Abortion presents a potential alternative to being cast out from society for Jemima, much as Gibbes's Hannah would have faced had she taken up Mr. Clive's offer of housing and financial support,

⁵¹ Rachel Seiler-Smith, 'Bearing/Barren Life: The Conditions of Wollstonecraft's Morbid Maternity', *European Romantic Review*, Vol. 28, No.2 (2017) pp.163-183, p.175.

⁵² Seiler-Smith, p.175.

⁵³ Wollstonecraft, p.211; Seiler-Smith, p.175.

and suicide is the ultimate exclusion from any social life for Maria. Both come with great risks and costs attached, however, and do not provide a solution for the injustice both characters have already suffered, only proffering an uncertain way out of allowing an immediate problem to create further barriers to their survival. In Maria's case, she sees no way in which continuing to live can improve her situation, and Jemima outlines in no uncertain terms that the abortifacient remedy 'might destroy [her]' as well as the unborn child.⁵⁴

'Pourtray[ing] Passions'

An emotionally loaded subject matter, Wollstonecraft's depiction of Jemima and Maria's attempts to end their pregnancies, and in Maria's case her own life, exposed a series of social and political difficulties faced by women. In her preface to *Maria*, Wollstonecraft states:

In writing this novel, I have rather endeavoured to pourtray passions than manners. In many instances I could have made the incidents more dramatic, would I have sacrificed my main object, the desire of exhibiting the misery and oppression, peculiar to women, that arise out of the partial laws and customs of society.⁵⁵

Her reference to the depiction of 'passions [rather] than manners' in the original preface indicates just how ingrained in human psychology and emotions she perceived the problems of 'misery and oppression' to be. The 'custom[ary]' norms of social interaction, in Wollstonecraft's view, reinforced these problems as much in relationships between women as in relationships between men and women. On a number of occasions throughout the text female characters' behaviours do not resist, but rather reinforce, their powerlessness against male control. For example, the wife of the heir to the household in which Jemima was housekeeper and the master's mistress does not consider the servant's plight should in removing her removed from her employed role in the house. Rather than taking time to discover the housekeeper's situation, the new lady of the house, better off for her husband's inheritance not her own, 'ordered [Jemima] to pack up [her] clothes', challenging her further on the few gifts she had received from her late master, turning her out without a reference which would be key to being able to evidence a good

⁵⁴ Wollstonecraft, p.195.

⁵⁵ Wollstonecraft, p.157.

reputation when acquiring a new position.⁵⁶ This episode in Jemima's history is the third time that Wollstonecraft describes her being thrown out of a home by another woman, as her stepmother had quickly arranged for her to leave home, and then the mistress of the house by whose maser she was raped and impregnated.

Godwin, as editor of the volumes in which *Maria* appeared, extended Wollstonecraft's own draft of the Preface by adding in an additional 'extract from the author [Wollstonecraft] to a friend [identified as George Dyson], to whom she communicated her manuscript'.⁵⁷ In doing so, he further highlighted his late wife's political thoughts on these misguided actions. Among the views she had shared with Dyson about what she had written in her drafts of *Maria* was included:

What are termed great misfortunes, may more forcibly impress the mind of common readers; they have more of what may justly be termed *stage-effect*; but it is the delineation of finer sensations, which, in my opinion, constitutes the merit of our best novels. This is what I have in view; and to show the wrongs of different classes of women, equally oppressive, though, from the difference of education, necessarily various.⁵⁸

No description is offered as to the specific reasons for Godwin's addition here, but this excerpt from Wollstonecraft's letter matches well the content of her preface, serving to highlight further her traceable pre-formed thinking about women's subordination and the limitations caused by discourses, such as law, medicine and pedagogy. Earlier works, including her debut publication *Thoughts on the Education of Daughters* (1787) and *A Vindication of the Rights of Woman* (1792), ensured that Wollstonecraft was well known as a reformer of education and, within this, a radical. She railed against the attitudes and values that were instilled in girls from a young age that they should be viewed as objects of delicacy and fashion which also limited the opportunities offered to them for academic learning. This structure of learning and acquiring affectations of excessive sensibility, Wollstonecraft reflected in a letter to her sister Everina in 1787, were a central part of the problems women faced. Discussing female friends and acquaintances she argues

⁵⁶ Wollstonecraft, p.199.

⁵⁷ Wollstonecraft, p.158.

⁵⁸ Wollstonecraft, p.159.

I am more than ever convinced that neither great virtues nor abilities will appear where refinement has gone beyond a certain pitch — selfishness gain[ing] ground and all the generous impulses, and warm affections are smothered — I like to see starts of affection and humanity — and on many occasions would have people consult their own heart only and if conscience does not check them act with vigor [sic] and dignity — as S^t Paul would advise, and not be conformed to the world.⁵⁹

Though her comments might just as easily have applied to men without context, in this case Wollstonecraft's protest is against eighteenth-century constructs of education, aimed at what girls and young women typically learned from a young age. As Michele Cohen has explored, girls' education throughout the eighteenth century lacked the consistency of any sort of systematic approach or pedagogy when compared to the equivalent for boys, and was focused on domestic skills and ensuring that young girls would grow to conduct themselves with moral virtue, fashioning themselves to become model wives and mothers. Innate female fragility was considered a mark of refinement in women, therefore the selfishness that Wollstonecraft discusses with Everina was based on women satisfying their own inclinations among the upper and middle ranks of society. Sue Chaplin reflects in her research into eighteenth-century women's fiction writing that '[v]irtue became dependent on the functioning of a moral sense finely tuned by the imagination in response to sensory experience'.⁶⁰ Even in the lower ranks, where cultures of sensibility were not widespread, Wollstonecraft perceived there to be a lack of emotional intelligence, whereby women's behaviour was governed by what they were taught by patriarchal social structures, rather than what they might otherwise have deemed to be right themselves.

Despite there being a significant lack of academic education for females that might have cultivated more independent political thought and free expression, as Chapter One indicates increasing numbers of women and children were able to read and write. This allowed the female population to access written materials such as recipe books, almanacs, chapbooks and domestic medical texts, and also novels, and poetry. Where texts were accessible and contributed to domestic and family life, these were

⁵⁹ Mary Wollstonecraft, 'To Everina Wollstonecraft, Eton, Sunday, October 9th [1786]', *The Collected Letters of Mary Wollstonecraft*, ed. Janet Todd (London: The Penguin Press, 2003) pp.79-83, p.81.

⁶⁰ Sue Chaplin, *Law, Sensibility and the Sublime in Eighteenth-Century Women's Fiction: Speaking of Dread* (2004) (Abingdon and New York: Routledge, 2016) p.42.

considered to be adequate learning. Yet the public relationship with other types of literature, including fiction and poetry, was far more complex. Beliefs were shared which referred to reading novels as ‘poisonous’ and harmful to the body and mind, particularly for women.⁶¹ James Kennaway and Anita O’Connell argue that ‘[o]ne of the main ways that reading novels could overstimulate the nerves of young women was with thoughts of love, which was widely associated with excessive excitement’.⁶² Novels and romances were consequently perceived to be in direct opposition to programmes of education for girls which focused on preparing them for their adult lives. These feelings of being highly ‘sensible’ of sensation and external stimuli, excessively so where fictional reading matter was concerned, had resulted in a culture whereby illness was, to an extent, desirable in order to denote the higher quality of a person’s perceptions and feelings, specifically in gendered contexts. In her analysis of eighteenth-century body image and sex roles, Ludmilla Jordanova outlines ‘the feminization of the nervous system’ as one of the key cultural inscriptions onto human bodies as a means of attempting to understand corporeal gender differences.⁶³ Wollstonecraft is perhaps best known for her critique of cultures of sensibility because of the disservice such fashions did to women’s minds. She referred to the iteration of sensibility so often accepted in popular culture as

pretty nothings — caricatures of the real beauty of sensibility, dropping glibly from the tongue, vitiate the taste, and create a kind of sickly delicacy that turns away from simple unadorned truth; and a deluge of false sentiments and overstretched feelings, stifling the natural emotions of the heart, render the domestic pleasures insipid, that ought to sweeten the exercise of those severe duties, which educate a rational and immortal being for a nobler field of action.⁶⁴

While she criticised these trends of delicacy and refinement, however, it would be untrue to suggest that she rejected all concepts of sensibility. Indeed, quite the opposite is true. Instead she recast the definition

⁶¹ For further discussion of reading as a cause of illness see Ashleigh Blackwood, ‘Toxic Texts and Reading Remedies: Literary Medicine in Eighteenth-Century Print Cultures’, *Literature and Medicine*, Vol. 34, No. 2 (Fall 2016) pp.278-98.

⁶² James Kennaway and Anita O’Connell, ‘Introduction: Pathological Reading’, *Literature and Medicine*, Vol. 34, No. 2 (Fall 2016) pp.242-251, p.268.

⁶³ Ludmilla Jordanova, *Sexual Visions: Images of Gender in Science and Medicine Between the Eighteenth and Twentieth Centuries* (Madison: The University of Wisconsin Press, 1989) p.58.

⁶⁴ Mary Wollstonecraft, *A vindication of the rights of woman: with strictures on political and moral subjects* (London: J. Johnson, 1792) p.8.

and meaning of sensibility as she perceived it to exist, underscoring that authenticity of emotions should take precedence over the appearance of being seen to feel acutely and to be affected by life experiences.

The character of Maria, though not exhibiting any physical symptoms of illness associated with excessive sensibility, is no less affected by these flawed beliefs of individuals and communities surrounding her from a young age. Wollstonecraft demonstrates the character's miseducation in manners, which indicates her view that sensibility was misapplied in popular culture and that this held a strong and wrongly directed influence over the way in which women lived their lives. She depicts her protagonist's change in perception with regard to her circumstances within the asylum on having made an acquaintance in Darnford to whom she is attracted: '[a] magic lamp now seemed to be suspended in Maria's prison, and fairy landscapes flitted around the room, late so blank. Rushing from the depth of despair, on the seraph wing of hope, she found herself happy. —She was beloved, and every emotion was rapturous.'⁶⁵ Her extreme difference in her mood, and the speed at which such a transition takes place, at a 'rushing' pace, points toward Maria's lack of skill in being able to read character, reserve judgment and calculate the risk of losing her heart to a near stranger. Furthermore, her viewpoint assumes the position of being 'beloved', even though Wollstonecraft's outlined endings suggest that Maria would in fact have been deserted by her lover, and therefore was less loved than she believed herself to be.

Shortly before giving this description, Wollstonecraft's opening to the fourth chapter of the text explores this same idea of environment and feeling, specifically referencing 'dispositions favourable to love'.⁶⁶ In unwrapping these ideas within the context of the plot, Wollstonecraft vacillates between painting the character of Maria as strong and sensible of the realities of life, and contradicting these *sensible* qualities with those crucial formative teachings of *sensibility* which so often inhibited women from reaching their intellectual potential in terms of academic accomplishments and reasoning skills. Wollstonecraft portrays Maria's personality in these terms:

⁶⁵ Wollstonecraft, p.187.

⁶⁶ Wollstonecraft, p.185.

[g]rief and care had mellowed, without obscuring, the bright tints of youth, and the thoughtfulness which resided on her brow did not take from the softness of her features; nay, such was the sensibility which often mantled over it, that she frequently appeared, like a large proportion of her sex, only born to feel'.⁶⁷

Though it is possible to take this fluctuation as a weakness, or at least a mark of inconsistency in Wollstonecraft's thinking and creation, such movement between these two positions appears to mirror Maria's experience of internally conflicting impulses and understandings of the world around her. By the age of twenty-six Maria has built up some life experience. The sources of her '[g]rief and care' are numerous: the loss of her mother, her father's marriage that changed her happy family home, her subsequent marriage to her self-centred husband and his incarceration of her in the asylum, all of which have contributed to shaping her mind and character.⁶⁸ Her experiences of these harsh realities influenced her ability to see beyond the limitations of her education and childhood but, as Wollstonecraft herself wrote, 'still, she was too much under the influence of an ardent imagination'.⁶⁹

Regardless of the differences between the lives of Jemima and Maria, their respective journeys towards stopping a pregnancy in its tracks show many similarities. The range of miseries and mistreatments each experiences leading up to and including each one's attempt at abortion, or suicide in Maria's case, support Wollstonecraft's efforts to develop a critique of popular interpretations of the treatment of and expectations surrounding women that she felt to be unjust. Both young women suffer injustice at the hands of men and women, neither has had the benefit of a strong mother-figure to turn to for guidance and support when it was most needed and, just as importantly, neither knows the luxuries of independence or the affection of a loving marriage where sexual relationships are concerned. Women,

⁶⁷ Wollstonecraft, p.185-186.

⁶⁸ Wollstonecraft, p.185-186.

⁶⁹ As Corinna Wagner indicates, the representation of Wollstonecraft's personae as an author became intrinsically linked to sensibility yet somewhat separate from her books, particularly after her death. 'Godwin,' she proposes, 'represents Wollstonecraft as a woman of sensibility', in his *Memoirs of the Author of "A Vindication of the Rights of Woman"* (1798), a perspective which could also be extended to his representation of her within the four-volume *Posthumous works of the author of A vindication of the rights of woman*, also published in 1798. In Godwin's own words, Wollstonecraft's sensibility comprised, from a young age, 'soundness of understanding, and decision of character.' See Wagner, p.121; William Godwin, *Memoirs of the author of A vindication of the rights of woman* (London: J. Johnson; and G. G. and J. Robinson, 1798) p.6.

according to Wollstonecraft, suffered oppression of many kinds including emotional and physical abuse at the hands of those within their immediate home environments. This ill-treatment extended beyond male-female relationships, with women so often reaching a point of being unable, or unwilling, to help or support others of their sex. Educational differences between men and women made this a self-sustaining state of affairs, in which women did not have sufficient skills to be able to challenge male authority or think critically about their own behaviour.

Conclusion

Texts such as those produced by Gibbes and Wollstonecraft included information about abortion far beyond what their medical counterparts could deal with in their texts. These two authors, though using a scenario that typically saw women ostracized and cast out from acceptable society, were able to represent the use of abortifacients in ways that highlighted key political views regarding the place of women and their ability to make independent decisions which might affect their present and future. Without legal status for women and the presence of continued pressures on them to follow an ideal image that did not leave room for having experienced rape or cruelty either within or outside of marriage. In these circumstances pregnancy became an impossible situation.

Phebe Gibbes's work offers an excellent example of the additional freedoms that some literary authors were able to exercise in building their narratives compared to medical authors. As a text that did not purport to give health advice to readers, *The Life and Adventures of Mr. Clive* was not restrained by the same codes of ethical caution and secrecy. In fact, Gibbes's use of abortion by means of a prepared remedy as a plot device throws off these same constraints to demonstrate the stark world that women in work might frequently have faced at the hands of their employers and male superiors. Not only this, Gibbes also utilised Hannah's potential vulnerability on learning of her pregnancy to transform the young woman into a strong force propelling the actions of others in ways which she saw fit. Though cornered, Hannah shapes the ending of her story so that it not only reveals to readers the reality of how abortion

might be procured, it also shows the potential consequences. Hannah's sacrifice of her life is not simply a tragic act of panic: her death symbolises her martyrdom for the sake of the freedom of her own mind and body. In death her reputation is not lost to the whim and fancy of Mr. Clive's sexual appetites and her child is not cast out as the bastard of a wealthy father and a poor, licentious mother. In demanding that the abortifacient be fetched, Hannah takes as much control of herself as she has ever likely had the opportunity to do before, or would ever do again. Her agency outshines the potential scandal hanging above her in the prospect of giving birth to an illegitimate child.

Wollstonecraft's writing presents two depictions of attempted abortion: one successful, the other prevented. Both are symbolic demonstrations of how abortion could play out in women's lives during the late eighteenth century. She, like Gibbes, offers a consistent approach to women's simultaneous strength and vulnerability in relation to abortion, regardless of their journey to that point. For her, abortion is not a matter to be taken lightly, nor is it the product of female licentiousness or wanton behaviour. These choices, while seemingly the very antithesis of fulfilling the natural role of maternity, are not enacted without love or compassion for the unborn infants they carry. Rather, she exposes the often contradictory nature of social norms against the reality of human behaviour. Motherhood and maternal feeling may have been identified as the most natural role for a woman to undertake yet, as these situations of sexual violence, poverty and possible desertion reveal, the conditions under which motherhood was expected to flourish were rarely realised. This double bind of unmatched expectations and reality, in Wollstonecraft's view, prevented any choice exercised by the woman affected from being the true product of free will, or being viewed as correct or respectable. Moreover, women in these situations almost always suffered from a past lack of political education that might have allowed them to speak out and represent themselves to society as something other than an undesirable character whom scandal had marked forever.

Both of these authors wrote during a period when to procure an abortifacient and use it was unethical and 'wicked', yet to allow a pregnancy to continue and give birth to an illegitimate child would almost certainly lead to social rejection and poverty. As a result, Gibbes and Wollstonecraft both criticised

the circumstances that brought their characters to having to consider abortion, but also demonstrated the strength of mind that was necessary for each one, Hannah, Jemima and Maria, to make these decisions and undertake, or even contemplate, abortion. Though an undesirable circumstance for maternity, and far from the ideals of eighteenth-century motherhood, these narratives based around the acquisition and consumption of abortifacients demonstrate that literary texts had an important role to play in providing socio-medical commentaries about abortion, its procurement and attendant risks.

Conclusion

The central question of this thesis, how changes in eighteenth-century reproductive medical cultures were represented through creative literature, presents a number of new conclusions that advance what can be known about how maternity and childbirth were renegotiated and understood during the eighteenth century. I have found that many forms of creativity existed in relation to how reproduction was explored by medical and lay authors, in some cases challenging the boundaries of genre and form as we know them today. Eighteenth-century medical texts could be as new and innovative in their approaches to communicating with readers as the latest novel to be published. Authors of both literary and medical works utilised the theme of childbirth to great effect and did so in an attempt to understand and shape the scientific and social changes which ultimately saw the management of maternity medicine absorbed into medical culture and develop a scientific discourse of its own, still referred to as obstetrics in modern medical practice. When brought together, the array of cultural responses to shifts in how maternity health was managed examined in this thesis presents a rich and multi-layered discussion initiated and maintained by many authors. Unlike the view so often referred to by cultural historians even today, the transforming culture of reproductive healthcare, ultimately leading to the professionalization of obstetrics, was anything but a simple case of a male-led takeover on the part of medical professionals. Men and women from diverse walks of life became aware not only of the changes to medical practice itself, but also to the impact of these changes on British society. Those who were literate were able to join in the discussion for themselves, whether by reading works concerning themes of reproduction, or by actively writing themselves to express a view, a concern, or to share their own experiences.

Though Appendix A reinforces the idea, promulgated by previous generations of historians, that male medical professionals did lead the way in terms of shaping the language and direction of new medical and surgical practices related to childbirth, this thesis by no means supports the idea that the emerging group of man-midwives, or accoucheurs, were the only members of a changing society

speaking out or being listened to on the subject of maternity. Part One of this thesis seeks to understand what changes took place in medical publishing, and what information was available to the eighteenth-century public, as obstetrics became increasingly professionalised. Chapter One, alongside data captured in the medical text catalogue, reveals that, taking off in the mid-seventeenth century, original exchanges of ideas on birthing practices and the medical cultures surrounding birth from British authors kept up a pace and traction that extended over fifteen decades. There were points at which new inputs were lacking, for example in the decades 1660-1669 and 1700-1709 when there were few new medical publications, yet even in these slower periods there was a healthy business to be found in reprinting older texts and referring to the guidance of earlier practitioner-authors. In addition to highlighting these trends, this chapter also shows that not only did women practitioner-authors exist but also that, even though small in number, there were more of these than have been acknowledged in accounts of eighteenth-century publishing on midwifery. Some written works have faded in the passage of time and have gone unaccounted for in medical-historical studies. Their very existence, however, points towards dimensions of medical history that remain under-explored, particularly those relating to women's involvement in medicine. As Marina Benjamin has observed, '[h]ealth was therefore more than an arena in which natural philosophers and physicians vied for the definitive word, it was also a concern that had captured public interest'.¹ A significant growth of medical texts focusing on reproduction and childbirth, together with a growing corpus of literary works that addressed a variety of aspects of reproduction, clearly evidences increased curiosity on the part of medical professionals and the public over the changing management of childbirth. Published print therefore had a significant role to play in establishing and cultivating new understandings of a rite of passage for women that was previously hidden from view.

Chapter One demonstrates the multiple readerships that midwifery texts had during the eighteenth century. Male and female practitioners as well as members of the lay public were all active stakeholders

¹ Marina Benjamin, 'Medicine, morality and the politics of Berkeley's tar-water', *The Medical Enlightenment of the Eighteenth Century*, ed. Andrew Cunningham and Roger French (1990) (Cambridge, New York and Melbourne: Cambridge University Press, 1999) pp.165-93, p.177

in the development of obstetrics through practice and published print. With literacy rates increasing a collective thirst for information that would empower individuals to care for their health independently, while making informed decisions where the input of a medical professional was required. With a public seeking to supplement and develop what learning they had on matters of medical care, demand for midwifery texts was continuously stimulated throughout the century. Practitioners from the earliest original authors including Nicholas Culpeper and Jane Sharp were acutely aware of public curiosities that they were able to feed with their professional guidance and opinions.

Building on these conclusions concerning authors and readers, Chapter Two exposes a distinct absence of tradition for authors of midwifery texts to draw upon, particularly female practitioner-authors producing midwifery manuals. With a lack of obvious examples and precedents, this chapter sought to identify where eighteenth-century female midwives might have found texts that they could relate to as being in some way similar to their own. The work of a woman chemical physician and several texts from authors claiming to be midwives were analysed. Among the works of these midwife-authors were several almanacs, a proposal for a 'Colledg of Midwives' as well as an illustrated herbal.² Almanacs proved to be sources over which some suspicion should be cast, with the word 'midwife' being used without evidence of professional competency. Mary Trye's *Medicatrix* (1675), however, a defence of chemical physic, her own profession as inherited from her father, provides an early example of an assertive female voice commenting on scientific practices. Elizabeth Blackwell's *A Curious Herbal* (1737) demonstrates the technical skill of a woman accomplished in illustration, in addition to possessing medical knowledge. This text indicates the versatility of Blackwell's mind and earnest endeavours to contribute to public health as a midwife and compiler of herbal information. Her willingness to apply her understanding of medical matters in different ways ensured that she was successful as an author and able to generate income streams that would have been daunting or even alien to other women. The most significant example of a midwife's work that acted as a predecessor for the published outputs of eighteenth-century

² Elizabeth Cellier, *To Dr. ____ An Answer to his Queries concerning the College of Midwives* (London: [n.p.], 1688) p.1.

female midwives was Elizabeth Cellier's *To Dr. ____ An Answer to his Queries concerning the College of Midwives* (1688). Her work, like Sharp's, contains very few clues as to what her own experience as a practising midwife may have been. Unlike her predecessor however, Cellier gave no instruction or guidance to fellow practitioners on the skills needed to be a proficient midwife. Nevertheless, an examination of Cellier's text shows that, like *The Midwives Book*, there can be no doubt that it was a noticeable attempt to provide female midwives with a legitimate voice in an increasingly turbulent professional environment.

Chapter Three shows that it was only from 1737 that women's midwifery authorship found a successor to Jane Sharp and Elizabeth Cellier. Sarah Stone and those who came after her had a small but important role to play within the changing nature of how childbirth was managed in medical terms, offering their own expertise in different forms and styles to the written works of their male contemporaries. The five female midwives who did publish during the mid- to late eighteenth century, Stone, Elizabeth Nihell, Margaret Stephen, Martha Mears and Mrs. Wright, each had unique methods of building a narrative that imparted their advice, insights and views on midwifery to wider audiences. Stone and Stephen concentrated their efforts on educating their fellow midwives, while Mears and Wright focused on providing patients and families with information conducive to good health during pregnancy and birth. Nihell, somewhat set apart from the others, made a broader appeal to convey a political view of the inappropriateness of man-midwifery while also offering her own technical guidance on delivering women. In line with interpretations offered by Ernelle Fife and Isobel Grundy on Sarah Stone's contribution, these women writers engaged with literary as well as medical traditions of writing in order to make their texts appealing, more so than many man-midwives publishing during the same period.³

Practitioners, though an important group of individuals who shaped a significant part of the discourse on the medicalization of childbirth, were by no means the only commentators on these scientific

³ Ernelle Fife, 'Gender and professionalism in eighteenth-century midwifery', *Women's Writing*, Vol.11, No.2, (2004) pp.185-200; Isobel Grundy, 'Sarah Stone: Enlightenment Midwife', *Medicine in the Enlightenment*, ed. Roy Porter (Amsterdam: Rodopi, 1995) pp.128-144.

shifts in public health. Part Two of this thesis analyses case studies of two non-medical writers, one female and one male, participating in discussion of what these changes meant for the lay population. Chapter Four restores the reputation of female poet Jane Cave Winscom as an author whose birth poems offer a detailed exploration of the psychological experiences of pregnancy and the anticipation of birth, as well as early motherhood. As an aspiring poet, Winscom utilised the theme of maternity to advance her literary goals in becoming a published author and did so with remarkable honesty and perceptiveness. Her birth poems took ownership of childbirth as a theme on behalf of herself and other women, demonstrating that the subject itself was fruitful for literary exploration.

In Chapter Five Laurence Sterne's comic representation of the conception and birth of a child in an individual household highlights that anxieties surrounding childbirth were not exclusively the purview of women. The problematic birth of Tristram Shandy exposes the issue that fathers, man-midwives and more broadly men of society could not avoid apprehensions about sexual propriety, virility and the ability to conceive children, as well as social and technological advancements in midwifery practice, and whether men were able to appreciate fully the process of birth without the ability to give birth themselves. Sterne astutely points to the fact that, while published texts provided an adequate theoretical knowledge of reproduction, a lack of traditional behavioural models or social codes of conduct for men to follow in order to navigate the subject of birth left the male population at large with concerns about their deficiency of knowledge and uncertain involvement in procreation beyond conception.

Turning from medical and lay concerns that were much in the open air of public discussion, Part Three considers the less socially-acceptable discussions that haunted the professionalization of obstetrics. Abortion was a murky and uncertain topic due to the religious, moral and ethical issues it posed, yet it was an on-going set of practices for which a demand for information existed regardless of its ambiguities. Chapter Six explores what can be ascertained about eighteenth-century abortion. With a lack of historiographical precedent, the first half of this chapter analysed the potential issues and pitfalls inherent in examining a topic that was little acknowledged in public. One of the key obstacles preventing detailed

discussion of abortion has historically been the multitude of ways in which abortion could be procured, without any records remaining to account for some of these methods. Demographic and social historians Etienne van de Walle, Angus McLaren and John Riddle agree that narrative methods of analysis are more productive in a search for information than those used in demographic or population studies. These authors also reach the same view that the best-utilised means of attempting abortion was via the consumption of supposed abortifacient substances. Though limited information was available to eighteenth-century patients in writing, substances thought to bring about abortion as a physiological process, including pennyroyal and savin, were typically those that had other domestic uses, and could be easily accessible without drawing attention to an individual attempt to terminate a pregnancy. Following these conclusions that oral-route abortifacients such as those mentioned above were popular methods for attempting to terminate pregnancy, this chapter then considered places where abortion appeared in public discourse, including medical literature. Although it was not until 1803 that legislation came into effect outlawing attempts to procure abortion, printed texts concerning public conduct, such as the second edition of Patrick Colquhoun's *A treatise on the police of the metropolis, explaining the various crimes and misdemeanors which was reproduced on numerous occasions* (1796), had already denounced the practice of abortion as a criminal act, or at least a 'wicked' endeavour.⁴ Particular caution was exercised in the writing of medical treatises to guard against the perception that any practitioner might deliberately offer advice for this purpose, with any comments being made largely referring to abortion as immoral and a significant risk to the woman who attempted it. There remained the possibility, however, for authors to hint at the greater complexity that was undoubtedly intertwined in any situation in which abortion was contemplated and even to offer remedies to stimulate menstruation that opened up the same possibility of abortion if conception had taken place.

Chapter Seven further contributed to this literary analysis of abortion, this time examining literary texts, specifically novels, by women writers. Phebe Gibbes's *The Life and Adventures of Mr. Francis*

⁴ Martha Mears, *The pupil of nature; or candid advice to the fair sex* (London: Faulder, and Murray and Highly, Fleet-Street, 1797) p.111.

Clive (1764) and Mary Wollstonecraft's *Maria, or the Wrongs of Woman* (1798) provide useful case studies, with more detailed descriptions of abortion scenarios and remedies than other types of literature. Both texts depict detailed cases in which a working servant girl finds herself in the situation of carrying her employer's child. In Gibbes's text the scenario used is one of seduction, where Wollstonecraft chose to portray a more extreme circumstance surrounding the consequences of rape. These different background stories present different reactions from servants Hannah and Jemima in terms of how each wishes to act on the news of her pregnancy. Where Hannah actively seeks out assistance in sourcing an abortifacient remedy as the preferable alternative to shame and social ruin, Jemima is given the substance by her abuser but resists consuming it for as long as possible before eventually relenting. Though contrasting in backstory, and in outcome, with the death of Hannah and the survival of Jemima, Gibbes and Wollstonecraft both formulate stories that allow their characters to reclaim their autonomy and exert authority over their physical bodies, however desperate their individual situations. In stories where the victimisation of women is expected, and an undeniable part of the plot, these eighteenth-century authors defy common expectations by inverting the traditional structure of hierarchical social relationships between men and women, employer and employee, abuser and abused, to allow women without protection or privileges the only rights left to them as human beings. These novels by Gibbes and Wollstonecraft emphasise the ambiguity of circumstances that, in other texts, might be read as cautionary tales against female licentiousness and expression of sexuality.

Maternity and reproduction are complex subjects in any period of history, never more so than when personal perceptions, feelings and anxieties were communicated in published print for the first time. Although this thesis has been able to demonstrate that both medical and literary authors were participants in a broad but in-depth renegotiation of how childbirth was understood, this topic remains abundant in possibilities for further research. Issues that remain under-investigated include the further use of literary references in male-authored midwifery publications and other debates that female midwives were possibly contributing to in medical development at large. The literary case studies used in Chapters Four

through to Seven are also not the only texts to examine birth as a matter of cultural and scientific change. Poetic contributions on birth are by no means the sole territory of Jane Cave Winscom, and will require a consolidated survey of how birth themes manifested themselves in verse. A small number of published works describing circumstances of abortion during the eighteenth century have also claimed to be true accounts and require further consideration as to what impact, if any, they had on public attitudes to these practices.⁵ As many authors of eighteenth-century midwifery texts alluded to or stated in explicit terms, reproduction is a universal and ever-present theme, therefore as a line of scholarly inquiry it has a large number of facets still to be explored.

As a whole, this thesis explains how important reproduction was as a changing and developing subject for eighteenth-century society, more so than has previously been identified. The contributions of authors whose works are examined here reshaped more than just medical theory and practice. Social perceptions of what maternity meant for women, families, practitioners and the public in the broadest possible sense of the word were irreversibly transformed by the introduction of new scientific methods and cultures to everyday life. Published print had an immense impact on how people constructed their own ideas about childbirth and what the professionalization of obstetrics meant for individuals and communities, as well as forming new social codes about how midwifery operated as a profession and was received by patients. In addition to providing scientific information and guidance for practitioners, midwifery manuals also allowed lay men and women to become better informed about their health, how practitioners should undertake to best support their needs, and were able to satisfy their growing curiosity on matters of conception, gestation, foetal development, and birth itself as never before. Unlike previous

⁵ Examples of this include Anonymous, *The Genuine History of Mrs. Sarah Prydden, usually called, Sally Salisbury and her Gallants* (London: Andrew Moor, 1723) and Anonymous, *The confessions of the Countess of Strathmore; written by herself. Carefully copied from the original, lodged in Doctor's Commons* (London: W. Locke, 1793). Though *The Confessions of the Countess of Strathmore* suggest that the text is autobiographical, the nature of the text's production has been into question by Carolyn Barros and Johanna Smith in their analysis of women's life-writing suggesting that even if Bowes did write the manuscript, she did not intend for nor arrange its publication. See Carolyn A. Barros, Johanna M. Smith, eds., *Life-writings by British Women, 1660-1815: An Anthology* (Boston: Northeastern University Press, 2000) p.300.

generations, none of these issues remained behind the closed doors of the lying-in chamber and both men and women had new roles to play.

The further ramifications of the professionalization of obstetrics were far-reaching, and by no means restricted to altering medical cultures alone. Women's writing saw significant change at the hands of female midwives who published. These practitioners sought to make use of their practical skills, experience, and qualifications as an avenue for creating new types of women's writing in the growing print market, ensuring that they and others like them were able to write and publish in scientific as well as literary forms. What they were losing in ground over the ownership of midwifery practice itself, they sought to make up in the areas of literature and publishing. Their efforts also had positive effects for lay women writers, who vastly outnumbered midwives who published during the period. Other women who had been patients themselves experiencing childbirth, or those who had experience of birth through friends and family, also began to utilise these experiences for their creative outputs. David Cressy's claim that women 'rarely set forth their experiences in writing' about childbirth may have been true for early modern England, but this was certainly not the case for eighteenth-century Britain.⁶ Their interpretations included both the lighter and darker sides of childbearing, capturing detail that was rarely, if ever seen, from earlier literature. The public discussion of reproduction as a medical subject paved the way for these women's authorial voices to be legitimised and respected on these matters, where maternity would previously have been most likely dismissed as a woman's private matter that had no place in public discourse.

This is not to say, however, that male authorship was in any way excluded from this renegotiation of how literature and medicine interacted. Male authors led the charge of progress for the emergence of obstetrics as a professional medical discourse. Their works gave the public an insight into the inner workings of the human body as had never before been possible, working through the mysteries of human

⁶ David Cressy, *Birth, Marriage and Death: Ritual, Religion, and the Life Cycle in Tudor and Stuart England* (1997) (Oxford: Oxford University Press, 2002) p.16.

existence and how each person came to be. The expanse of obstetric publishing that developed as a result could not be ignored by any party, and Appendix A presents historians and literary scholars with a new chronology through which to examine the increasingly close relationship between literature and medicine that, throughout the time period and context analysed here, became inextricable. As digital humanities continues to grow, exercises such as cataloguing specific types of text will generate metadata that will make literary themes, patterns and parallels of discussion easier to trace. The more information about the development of scientific and medical ideas that researchers have, the easier it becomes to trace how these professional debates became cultural touchstones, tropes, anxieties or, more often, a combination of these. Male literary authors such as Laurence Sterne and Tobias Smollett viewed continuing debates about issues such as gendered practice within midwifery, foetal growth and the use of technology in deliveries as important issues not just in medical texts, but also in literary works. Their books brought humour to the ways in which an uncertain public attempted to understand new sciences. These responses, like the examples of female authorship considered here, move reproduction beyond being a concern for medical professionals and out into public consciousness.

This thesis, in addition to establishing a new foundation in primary research for future studies of obstetric professionalization, demonstrates the importance of writing about childbirth and maternity during this key period on the shaping of modern medical consciousness. The work of women practitioners and lay writers is of particular significance, and indicates some of the ground that female professionalism, in medicine, authorship and self-expression, would break across the next two centuries, and up to the present day. With these findings in mind, this research has some claim to constitute a significant contribution to our understanding of modern women's identity, biologically, creatively and professionally. Once in the public domain, through a dynamic and vibrant set of medical debates appearing in print and a blossoming literary culture, reproduction was everybody's business.

Appendix A: Obstetric Publishing in the British Isles 1540-1799

Rationale

The purpose of this catalogue of obstetric publishing is to record data on each original and translated piece of published work from England, Ireland and Scotland (there are none from Wales) on the subject of scientific or practical guidance on reproduction, pregnancy and birthing, beginning in 1540 and ending in 1799. This type of exercise has never been undertaken by medical, book or literary historians of midwifery, meaning that the data presented here offers a new lens through which the development of obstetrics can be viewed. The real value of this work lies not in developing a chronology of scientific developments in midwifery, as this can and has been achieved by historians of midwifery by other means, but rather by providing a means of identifying where ideas were available and being received by a professional and/or public readership at any given time. The charting of where innovation took place in medicine is useful and valuable to charting progress, but invention is not the same as acceptance and existence is not the same as adoption into common use. Forceps had been in use for over a century before their design before their design and use was discussed in public documents. William Harvey's theory of epigenesis was published in 1651 yet there was still debate and contention on the subject in the 1740s.¹ Looking at a single text or historical artefact in either of these instances would proffer relevant information about when these new ideas first evolved, but nothing about when either came to full fruition in terms of influencing broader scientific development. By looking at trends of writing and publishing during this period, it is possible to gain an overview of the ebb and flow of obstetric publishing in terms of outputs, as well as being able to trace the more specific progression and impact of specific ideas. Some of these were long-standing, such as the use of simulation in medical pedagogy and training by

¹ Robin Dix, 'The Demise of the Preformed Embryo: Edinburgh, Leiden, and the Physician-Poet Mark Akenside's Contribution to Re-Establishing Epigenetic Embryology', *Scottish Medicine and Literary Culture, 1726-1832*, ed. David E. Shuttleton and Megan J. Coyer (Amsterdam and New York: Rodopi, 2014) pp.74-96, p.79.

practitioners including Sir Richard Manningham, and others that disappeared in much the way that Jenifer Buckley describes theories of maternal imagination and its impact upon the unborn child.²

Methodology

The sources used to build this dataset range across published and electronic collections of primary sources. Those primarily referred to are Gale Cengage's Early English Books Online (EEBO), *Eighteenth-Century Collections Online* (ECCO), the British Library's *English Short Title Catalogue* (ESTC) as well as Pam Lieske's *Eighteenth-Century British Midwifery* (2007-12). Each of the sources listed in the bibliography of this thesis has also contributed to the supplying and cross-referencing of items for this catalogue simply by examining references to primary sources used by other historians and literary critics in the interests of completeness. The amount of information provided for each text seeks to ensure as far as possible that each entry is distinctly identifiable. Where two sources may have provided differing or adjusted information for the same text, the entry featured in the ESTC is that which has been employed as the definitive entry. In the case of Lieske's multi-volume anthology text, a small number of the texts found here do not feature on any of the databases referred to, and as such do not have a current ESTC reference number.

Notable Exceptions

With this in mind, in addition to the notable exclusion of Aristotle's *Master-piece*, I have also excluded other texts which claimed to be the work of, or derived from the work of, classical authors. Journalism, broadside ballads or popular works relating to monstrous births or other subjects that were intended first and foremost as entertainment pieces are also absent from these records. These texts, though informative about the fears, apprehensions and humour of the public in relation to birth, more often obfuscate rather than clarify the type of guidance which made up most of the professional and public discourse on the development of reproductive medical science. This includes most work relating to the famous incident of Mary Toft, the young woman whose hoax based on the ability to give birth to rabbits. The Toft affair,

² Jenifer Buckley, *Gender, Pregnancy and Power in Eighteenth-Century Literature: The Maternal Imagination* (Basingstoke: Palgrave Macmillan, 2017) p.19.

while possibly the most famous example of a popular narrative about birthing to emerge from the eighteenth century, was largely covered in popular and satirical writing rather than those texts intended for public use for guidance and reference on birthing. The only texts on this subject which are included are those from the involved medical professionals who made their accounts and responses to the Toft affair part of their medical publishing. Incidentally, events relating to Toft's own case are outlying of the main chronology of this thesis, the hoax having taken place previously, in 1726. Other medical texts, such as Daniel Turner's *De morbis cutaneis. A treatise of diseases incident to the skin* (1726), only appears in the catalogue in editions other than the first. For example, in the case Turner's text, the third edition is the first referenced due to the fact earlier prints do not address subjects of pregnancy or childbirth.

Appendix A: Obstetric Publishing in the British Isles 1540-1799

Date	Credited Author Surname	Credited Author Christian name	Publication Title	Edition (if marked)	Place of Print	Language	Publisher/Printer	ESTC Citation
1540	Jonas	Richard	The byrth of mankynde,	newly translated out of Laten into Englysshe.	London	English	T[homas] R[aynald]	S116014
1545	Raynalde	Thomas	The byrth of mankynde, otherwyse named the womans booke.	Newly set furth, corrected and augmented.	London	English	Tho. Ray[nalde]	S116045
1552	Raynalde	Thomas	The byrth of mankynde, otherwyse named the womans booke.	Newly set forth, corrected and augmented	London	English	T. Raynald	S114370
1560	Raynalde	Thomas	The Birth of Mankinde otherwise known as The Womans Booke	Newly set forth, corrected, and augmented	London	English	Richard [Jugge]	S116047
1565	Raynalde	Thomas	The Birth of Mankinde otherwise known as The Womans Booke	Newely set fourth, corrected, and augmented.	London	English	Richard [Jugge]	S114566
1565	Raynalde	Thomas	The Birth of Mankinde otherwise known as The Womans Booke	Newely set fourth, corrected, and augmented.	London	English	Richard [Jugge]	S94926
1572	Raynalde	Thomas	The Birth of Mankinde otherwise known as The Womans Booke	Newely set fourth, corrected, and augmented.	London	English	Richard [Jugge]	S116022
1585	Raynalde	Thomas	The Birth of Mankinde otherwise known as The Womans Booke	Newely set fourth, corrected, and augmented.	London	English	Richard [Jugge]	S116025

1598	Raynalde	Thomas	The Birth of Mankinde otherwise known as The Womans Booke	Set foorth in English by Thomas Raynalde phisition, and by him corrected, and augmented	London	English	By [Gabriel Simson for] Richarde Watkins. Cum priuilegio	S116048
1604	Raynalde	Thomas	The Birth of Mankinde otherwise known as The Womans Booke	Set foorth in English by Thomas Raynalde phisition, and by him corrected, and augmented	London	English	[By George Eld?] for Thomas Adams. Cum priuilegio	S116049
1612	Guillemeau	Jacques	Child-birth or, The happy deliuerie of vvomen.	Written in French by James Guillimeau the French Kings chirurgion	London	English	A. Hatfield	S103545
1613	Raynalde	Thomas	The Birth of Mankinde otherwise known as The Womans Booke	Set foorth in English by Thomas Raynalde phisition, and by him corrected, and augmented	London	English	[By Thomas Dawson] for Thomas Adams. Cum priuilegio	S123264
1626	Raynalde	Thomas	The Birth of Mankinde otherwise known as The Womans Booke	Set forth in English by Thomas Raynald physitian, and by him corrected and augmented	London	English	Printed [by H. Lownes] for A. H[ebb] and are to be sold by Iames Boler	S113417
1634	Raynalde	Thomas	The Birth of Mankinde otherwise known as The Womans Booke	Set forth in English by Thomas Raynald physitian, and by him corrected and augmented.	London	English	Printed [by Robert Barker, Bernard Alsop, and Thomas Fawcet] for A. H[ebb] and are to be sold by Iohn Morret, at the two Tuns in little Britaine	S116051

1635	Guillemeau	Jacques	Child-birth or, The happy delivery of vvomen.	Written in French by James Guillimeau the French Kings chirurgion	London	English	Anne Griffin for Ioyce Norton and Richard Whitaker	S117900
1637	Rueff	Jacob	The expert midwife, or An excellent and most necessary treatise of the generation and birth of man.		London	English	E. G[riffin] for S. B[urton] sold by Thomas Alchorn	S101598
N.D. [EST C Date given as 1650 ?]	Culpeper	Nicholas	Culpeper's Directory for midwives: or, A guide for women	The second part. A reprint of "Practical physick; the fourth book" by Daniel Sennert, Nicholas Culpeper, and Abdiah Cole. Front leaves and litle page missing	London	English	s.n.	R224850
1651	Harvey	William	Exercitationes de Generatione Animalium		London	Latin	typis Du-Gardianis; impensis Octaviani Pulleyn in Cœmeterio Paulino	R17816
1651	Harvey	William	Exercitationes de generatione animalium		London	Latin	apud Octavianum Pulleyn	R231308
1651	Culpeper	Nicholas	A directory for midvvives: or, A guide for women, in their conception, bearing, and suckling their children.		London	English	printed by Peter Cole, at the sign of the Printing-Press in Cornhil, near the Royal-Exchange	R3967
1652	Sowerby	Leonard	The ladies dispensatory		London	English	printed for R. Ibbitson, to be sold by George Calvert at the Halfe-Moon in Watling street	R208889

1652	Fonteyn	Nicolaas	The womans doctour, or, An exact and distinct explanation of all such diseases as are peculiar to that sex.		London	English	Printed for John Blague and Samuel Howes, and are to be sold at their shop in Popes Head- Alley	R7033
1652	Culpeper	Nicholas	A directory for midwives: or A guide for women, in their conception, bearing, and suckling their children		London	English	s.n.	R483389
1652	Culpeper	Nicholas	A directory for midwives: or A guide for women, in their conception, bearing, and suckling their children		London	English	s.n.	R174425
1652	A.M.		A rich closet of physical secrets, collected by the elaborate paines of four severall students in physick, and digested together; viz. The child- bearers cabinet		London	English	printed by Gartrude Dawson, and are to be sold by William Nealand, at the Crown in Duck- Lane	R207034
1653	A.M.		A rich closet of physical secrets, collected by the elaborate paines of four severall students in physick, and digested together; viz. The child- bearers cabinet		London	English	printed by Gartrude Dawson, and are to be sold by [sic]	R41664
1653	A.M.		A rich closet of physical secrets collected by the elaborate pains of four several students in physick, and digested together, viz. The child-bearers cabinet		London	English	printed by Gartrude Dawson, and are to be sold by John Saywell at his shop at the sign of the Greyhound in little Britain without Aldersgate	R231044

1653	Culpeper	Nicholas	A directory for midwives: or, a guide for women, in their conception, bearing, and suckling their children.		London	English	printed by Peter Cole in leaden-Hall, and are to be sold at his shop, at the Printing-Press in Cornhil, neer the Royal Exchange: and R[ichard]. Westbrook at Deaths Arm, in Thredneedle-street, against the upper end of Broad-street	R171642
1653	Harvey	William	Anatomical exercitations, concerning the generation of living creatures: to which are added particular discourses, of births, and of conceptions, &c.	Translation of: De generatione animalium.	London	English	printed by James Young, for Octavian Pulleyn, and are to be sold at his shop at the sign of the Rose in St. Pauls Churchyard	R13027
1654	Raynalde	Thomas	The Birth of Mankinde otherwise known as The Womans Booke	The fourth edition corrected and augmented.	London	English	printed for J.L. Henry Hood, Abel Roper, and Richard Tomlins, and are to be sold at their shops in Fleet street; and at the Sun and Bible in Pie-Corner	R218053
1654	Raynalde	Thomas	The Birth of Mankinde otherwise known as The Womans Booke	Fourth edition.	London	English	by J. L[egate]. for L. Fawn	R182769

1656	Chamberlayne	Thomas	The compleat midwifes practice, in the most weighty and high concernments of the birth of man	from the experience not onely of our English, but als the most accomplisht and absolute practicers among the French, Spanish, Italian, and other nations	London	English	Nathaniel Brooke	R14527
1656	Bunworth	Richard	The doctresse: a plain and easie method, of curing those diseases which are peculiar to women		London	English	by J.F. for Nicolas Bourne	R209649
1656	Anonymous		The compleat doctress: or, A choice treatise of all diseases insident to women. With experimentall remedies against the same	translated out of Latin'	London	English	Edward Farnham	R224420
1656	Culpeper	Nicholas	A directory for midwives: or, A guide for women, in their conception, bearing, and suckling their children		London	English	printed by Peter Cole, at the sign of the Printing press in Cornhil, neer the Royal Exchange	R171643
1657	Massaria	Alessandro	De morbis foemineis, the womans counsellour: or, The feminine physitian.	Translated out of Massarius de morbis mulier. By R.T. philomathēs	London	English	printed for John Streater, and are to be sold by the booksellers in London	R209118
1659	Chamberlayne	Thomas	The Compleat Midwives Practice	The second edition corrected, by R.C. I.D. M.S. T.B. practitioners of the said art.	London	English	printed for Nath: Brooke, at the Angel in Cornhill	R209733

1659	Chamberlayne	Thomas	The Compleat Midwives Practice	The second edition corrected, by R.C. I.D. M.S. T.B. practitioners of the said art.	London	English	printed for Nath: Brooke, at the Angel in Cornhill	R173650
1659	Massaria	Alessandro	De morbis foemineis, The womans counsellour: or, The feminine physitian, enlarged.	Whereunto is added, [sic] The mans counsellour, healing of ruptures, and particular diseases belonging to men. The third edition. By R. Turner. philomath'es	London	English	printed for John Streater, and are to be sold by the book-sellers in London	R218019
1660	Culpeper	Nicholas	A directory for midwives: or, a guide for women, in their conception. Bearing, and suckling their children	Now are added, five brass figures, and explanations of them, at page 54. never printed before	London	English	printed by Peter Cole, and Edward Cole printers and book-sellers, at the Printing-press in Cornhil, neer the Royal Exchange	R171644
1662	Culpeper	Nicholas	Culpeper's directory for midwives: or, a guide for women		London	English	printed by Peter Cole, printer and bookseller, at the sign of the Printing-press in Cornhill, near the Royal Exchange	R171645

1663	Sir Theodore Mayerne, Dr Chamberlen, Nicholas Culpeper		The compleat midwife's practice enlarged	The third edition enlarged, with the addition of Sir Theodore Mayerne's rare secrets in midwifry, with the approbation of sundry the most knowing professors of midwifry now living in the city of London and other places ... With a further discovery of those secrets kept close in the brest of Mr. Nich. Culpeper	London	English	Printed for Nath. Brook at the Angel in Corn-hill	R33299
1664	Massaria	Alessandro	The womans counsellour: or, The feminine physitian	Whereunto is added the mans' counsellour. The fourth edition. By R.T. philomath'es	London	English	printed by J. Streater, and are to be sold by the N. Brooks, at the Angel in Corn-Hill	R212885
1665	Turner	Robert	The expert midwife's practice, or, A guide for women in conception, breeding, and nursing children.		London	English	s.n.	R477249
1665	Chamberlen	Peter	Dr. Chamberlain's midwives practice: or, a guide for women in that high concern of conception, breeding, and nursing children	Also attributed to Thomas Chamberlayne.	London	English	printed for Thomas Rooks at the Lamb and Ink-Bottle, at the East-end of S. Pauls; who makes and sells the best ink for records	R221461

1668	Culpeper	Nicholas	A directory for mid-wives: or, A guide for women, in their conception. bearing, and suckling their children.	Newly corrected from many gross errors.	Edinburgh	English	printed by George Swintoun and James Glen, and are to be sold at their shops	R174426
1670	Wolveridge	James	Speculum matricis hybernicum; or, The Irish midwives handmaid.		London	English	printed by E. Okes; and are to be sold by Rowland Reynolds	R15116
1671	Sharp	Jane	The midwives book. Or the whole art of midwifry discovered		London	English	printed for Simon Miller at the Star at the west-end of St. Pauls	R203554
1671	Wolveridge	James	Speculum matricis; or, the expert midwives handmaid.		London	English	E[dward]. Okes; and are to be sold by Rowland Reynolds	R231964
1671	Culpeper	Nicholas	A directory for midwives: or a guide for women. In their conception. Bearing; and suckling their children	Newly corrected from many gross errors	London	English	John Streater; and sold by George Sawbridge	R231722
1671	Culpeper	Nicholas	A directory for midwives: or a guide for women. In their conception. Bearing; and suckling their children	Newly corrected from many gross errors.	London	English	printed by John Streater, and are to be sold by George Sawbridge, at the sign of the Bible on Ludgate-Hill	R228396
1671	Sermon	William	The ladies companion, or, The English midwife		London	English	printed for Edward Thomas at the Adam and Eve in Little Britain	R22083

1672	Mauriceau	Francois	The diseases of women with child, and in child-bed: as also, the best directions how to help them in natural and unnatural labours. : With fit remedies for the several indispositions of new-born babes	Translated, and enlarged with some marginal-notes, by Hugh Chamberlen, M.D. and physician in ordinary to his Majesty	London	English	printed by John Darby in St. Bartholomew-Close; to be sold by R. Clavel in Cross-keys-Court, and W. Cooper at the Pelican in Little-Britain; by Benj. Billingsly at the Printing-Press in Cornhil near the Royal Exchange, and W. Cadman at the Popes-head in the lower walk of the New-Exchange	R202898
1673	Mauriceau	Francois	The accomplisht midwife, treating of the diseases of women with child, and in childbed	Translated, and enlarged with some marginal-notes, by Hugh Chamberlen, M.D. (and physician in ordinary to his Majesty) dwelling in Prujeans-Court in the Old-Baily	London	English	printed by John Darby; and are to be sold by Benjamin Billingsley, at the Printing-Press in Cornhil near the Royal-Exchange	R180476
1673	Mauriceau	Francois	The accomplisht midwife, treating of the diseases of women with child, and in child-bed	Translated, and enlarged with some marginal notes, by Hugh Chamberlen M.D. and Physician in Ordinary to his Majesty	London	English	printed by J. Darby, to be sold by Benjamin Billingsley at the Printing-Press in Cornhil, near the Royal Exchange	R217743

1675	Anonymous		Every woman her own midwife, or, A Compleat cabinet opened for child-bearing women furnished with directions to prevent miscarriages during the time of breeding, and other casualties which usually attend women in child-bed : to which is annexed cures for all sorts of diseases incident to the bodies of men, women and children		London	English	Printed for Simon Neale	R42020
1675	Culpeper	Nicholas	Directory for Midwives or A Guide for Women in their Conception, Bearing and Suckling of their Children	The first part. Newly corrected from many gross errors.	London	English	printed for George S[awbridge at the sign] of the Bible o[n Ludgate-Hill]	R23796
1676	Culpeper	Nicholas	Culpeper's Directory for midwives: or, A guide for women.	The second part.	London	English	printed for George S[awbridge at the sign] of the Bible o[n Ludgate-Hill]	R224998

1680	Chamberlayne	Thomas	The complete midwife's practice enlarged, in the most weighty and high concernments of the birth of man. Containing a perfect directory, or rules for midwives and nurses	from the experience of our English viz. Sir Theodore Mayern, Dr. Chamberlain, Mr. Nich Culpeper. and others of forreign nations. With instructions of the Queen of France's midwife to her daughter, a little before her death, touching the practice of the said art. The fourth edition enlarged, with the addition of Sir Theodore Mayerns rare secrets in midwifry, with the approbation of sundry the most knowing professors of midwifry now living in the city of London, and other places, viz. R.C. J.D. M.S. T.B.W.C.M.H. practitioners of the said art. With a further discovery of those secrets kept close in the breast o Mr. Nich. Culpeper, and other English writers; never made publick till now	London	English	printed for Robert Hartford at the Angel in Cornhill, near the Royal Exchange	R223305
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1680	Chamberlayne	Thomas	The complete midwife's practice enlarged, in the most weighty and high concernments of the birth of man	from the experience of our English viz. Sir Theodore Mayern, Dr. Chamberlain, Mr. Nich Culpeper. and others of forreign nations. With instructions of the Queen of France's midwife to her daughter, a little before her death, touching the practice of the said art. The fourth edition enlarged, with the addition of Sir Theodore Mayerns rare secrets in midwifry, with the approbation of sundry the most knowing professors of midwifry now living in the city of London, and other places, viz. R.C. J.D. M.S. T.B.W.C.M.H. practitioners of the said art. With a further discovery of those secrets kept close in the breast o Mr. Nich. Culpeper, and other English writers; never made publick till now.	London	English	printed for Obadiah Blagrove, at the Bear in St. Pauls Church-yard, over against the little north door	R223565
1681	Culpeper	Nicholas	A directory for midwives: or, A guide for women, in their conception. Bearing; and suckling their children.	Newly corrected from many gross errors.	London	English	printed for George S[awbridge at the sign] of the Bible o[n Ludgate-Hill]	R228394

1681	Culpeper	Nicholas	Culpeper's directory for midwives: or, a guide for women	The second part.	London	English	George Sawbridge	R171646
1682	Anonymous		The English midwife enlarged containing directions to midwives	With two new treatises	London	English	printed for Thomas Sawbridge, at the sign of the Three Flower-de-luces in Little Brittain	R218753
1682	Anonymous		The English midwife enlarged containing directions to midwives	With two new treatises	London	English	printed for Rowland Reynolds, next door to the Golden bottle in the Strand, at the middle Exchange door	R31432
1683	Mauriceau	Francois	The diseases of women with child and in child-bed as also the best means of helping them in natural and unnatural labors : with fit remedies for the several indispositions of new-born babes	Translated by Hugh Chamberlen, M.D. By whom this second edition is reviewed, corrected, and enlarged, with the addition the author's Anatomy	London	English	printed by John Darby, and are to be sold by the booksellers	R27109
1684	Culpeper	Nicholas	Directory for Midwives or A Guide for Women in their Conception, Bearing and Suckling of their Children	Newly corrected from many gross errors.	London	English	printed for H. Sawbridge at the sign of the Bible on Ludgate-Hill	R224849
1686	Massaria	Alessandro	De morbis foemineis, The womans counsellour: or, The feminine physitian, enlarged	Whereunto is added, The mans counsellour [sic], healing of ruptures, and particular diseases belonging to men. The fourth edition. By R. Turner. Philomath	London	English	printed for J. Streater, and are to be sold by the book-sellers in London	R231640

1688	Cellier	Elizabeth	To Dr. ----- An Answer to his Queries, Concerning the Colledg of Midwives		London	English	s.n.	R29948
1688	Mauriceau	Francois	Francisci Mauriceau artium magistri et antiqui præpositi magistrorum chirurgorum Parisiensium Societati, De mulierum prægnantium, parturientium, et puerperam morbis tractaus [sic], tradens veram optimamque methodum adjuvandi mulieres in partu naturali, & medendi culibet partui contra naturam, morbisque infantium recens-natorum; cum accurata descriptione omnium mulieris partium generationi inservientium; adjunctis multis figuris æri egregie insculptis. Opus chirurgis utilissimum, obstreticibusque omnibus ad obstreticandi artem perfecte discendam valde necessarium		London	Latin	prostant apud Abelem Swalle, ad insigne Minocerotis in Coemeterio Paulino	R477277
1693	Culpeper	Nicholas	Directory for Midwives or A Guide for Women in their Conception, Bearing and Suckling of their Children	Newly corrected from many gross errors.	London	English	Printed, and are to be sold by most booksellers in London and Westminster	R213457

1693	Rawlins	R	A dissertation on the structure of the obstetric forceps, pointing out its defects, and especially of those with double curved blades		London	English	printed for the author; and sold by B. and J. White, Fleet-Street	T53585
1694	McMath	James	The expert mid-wife: a treatise of the diseases of women with child, and in child-bed: as also, of the best ways and means of help in natural and unnatural labours		Edinburgh	English	Printed by George Mosman, and are to be sold at his Shop in the Parliament-Closs	R216678
1696	Pechey	John	A general treatise of the diseases of maids, bigbellied women, child-bed-women, and widows, together with the best methods of preventing or curing the same		London	English	printed for Henry Bonwick, at the Red-Lyon in St. Paul's Church-Yard	R1373
1696	Mauriceau	Francois	The diseases of women with child, and in child-bed; as also the best means of helping in natural and unnatural labors. With fit remedies for the several indispositions of new-born babes	Translated by Hugh Chamberlen, M.D. By whom this second edition is reviewed, corrected, and enlarged	London	English	printed by J[ohn]. D[arby]. to be sold by Andrew Bell at the Cross-keys in the Poultry	R180477
1697	Mauriceau	Francois	The diseases of women with child, and in child-bed as also the best means of helping them in natural and unnatural labours. With fit remedies for the several indispositions of new-born babes	Translated by Hugh Chamberlen, M.D. The third edition corrected.	London	English	printed for Andrew Bell at the Cross-Keys and Bible in Cornhill near Stocks-Market	R217397

1697	Chamberlayne	Thomas	The compleat midwife's practice enlarged, in the most weighty and high concernments of the birth of man	from the experience of our English authors. Viz. Sir Theodore Mayern, Dr. Chamberlain, Mr. Nich. Culpeper. and others of foreign nations. With instructions of the Queen of France's midwife to her daughter, a little before her death, touching the practice of the said art. As also a farther discovery of those secrets kept close in the breast of Sir Theodore Mayern, Mr. Nicholas Culpeper, and other English writers, not made publick 'till now. The fifth edition corrected, and much enlarged, by J.P. Fellow of the College of Physicians, London.	London	English	printed for R. Bentley in Russel-street, Covent-Garden, H. Rhodes at the corner of Bride-Lane, in Fleet-street, J. Philips, at the King's Arms, and J. Taylor at the Ship in St. Paul's Church-Yard	R204399
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1698	Chamberlayne	Thomas	The compleat midwife's practice enlarged, in the most weighty and high concernments of the birth of man	from the experience of our English authors. Viz. Sir Theodore Mayerne, Dr. Chamberlain, Mr. Nich. Culpeper. and others of forreign nations. With instructions of the Queen of France's midwife to her daughter, a little before her death, touching the practice of the said art. As also a farther discovery of those secrets kept close in the breast of Sir Theodore Mayern, Mr. Nicholas Culpeper, and other English writers, not made publick 'till now. The fifth edition corrected, and much enlarged, by John Pechey, fellow of the College of Physicians, London	London	English	printed for H. Rhodes at the corner of Bride-Lane, in Fleet-street, J. Philips at the King's Arms, J. Taylor at the Ship in St. Paul's Church Yard, and K. Bentley, in Russel-street, Covent Garden	R37452
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1699	Chamberlayne	Thomas	The compleat midwife's practice enlarged, in the most weighty and high concerns of the birth of man	from the experience of our English authors. Viz. Sir Theodore Mayerne, Dr. Chamberlain, Mr. Nich. Culpeper, and others of foreign nations. With instructions of the Queen of France's midwife to her daughter, a little before her death, touching the practice of the said art. As also a farther discovery of those secrets kept close in the breast of Sir Theodore Mayern, Mr. Nicholas Culpeper, and other English writers, not made publick till now. The fifth edition corrected, and much enlarged, by J.P., fellow of the College of Physicians, London.	London	English	printed, and sold by A[rthur]. Bettesworth, at the Red Lion on London-Bridge	R181583
1699	de La Vauguion	M.	A compleat body of chirurgical operations, containing the whole practice of surgery. With observations and remarks on each case. Amongst which are inserted, the several ways of delivering women in natural and unnatural labours.	By M. de La Vauguion. M.D. and Intendant of the Royal Hospitals about Paris. Faithfully done into English	London	English	printed for Henry Bonwick in St. Pauls Church Yard, T. Goodwin, M. Wotton, B. Took in Fleetstreet, and S. Manship in Cornhil	R25448

1699	Barret	Robert	A companion for midwives, child-bearing women, and nurses		London	English	printed for Tho. Ax, at the Blue Ball in Duck-Lane	R14416
1700	Culpeper	Nicholas	A directory for midwives: or, A guide for women, in their conception. Bearing; and suckling their children.	Newly corrected from many gross errors.	London	English	printed, and are to be sold by most book sellers in London and Westminster	R232056
1701	Culpeper	Nicholas	A directory for midwives: or, a guide for women, in their conception, bearing, and suckling their children	Newly corrected from many gross errors	London	English	printed for J. and A. Churchill, at the Black-Stran in Pater-Noster-Row	N2148
1702	de La Vauguion	M.	A compleat body of chirurgical operations, containing the whole practice of surgery. With observations and remarks on each case. Amongst which are inserted, the several ways of delivering women in natural and unnatural labours	The second edition. Faithfully done into English.	London	English	printed for R. Bonwick, J. Tonson, W. Freeman, Tim. Goodwin, J. Walthoe, M. Wotton, J. Nicholson, T. Newborough, B. Took, S. Manship and R. Parker	N27831
1705	Portal	Paul	The compleat practice of men and women midwives, Or The true manner of assisting a woman in child-bearing	Translated from the original	London	English	Printed by H. Clark, for S. Crouch, at the Corner of Pope's-Head-Alley, in Cornhil; and J. Taylor, at the ship, in St. Paul's Church-yard	N4923

1707	de La Vauguion	M.	A compleat body of chirurgical operations, containing the whole practice of surgery. With observations and remarks on each case. Amongst which are inserted, the several ways of delivering women in natural and unnatural labours	The second edition. Faithfully done into English.	London	English	printed for R. Bonwick, J. Tonson, W. Freeman, Tim. Goodwin, J. Walthoe, M. Wotton, J. Nicholson, T. Newborough, B. Yook, S. Manship and R. Parker	T121422
1710	Mauriceau	Francois	The diseases of women with child, and in child-bed: as also, the best means of helping them in natural and unnatural labours. With fit Remedies for the several Indispositions of New-Born Babes	The fourth edition corrected, and augmented with several new figures, and with the Description of an excellent Instrument to bring a Child that comes right	London	English	printed for Andrew Bell, at the Cross-Keys and Bible in Cornhill; and sold by Patrick Campbell, Bookseller in Dublin	N3334
1710	Mauriceau	Francois	The diseases of women with child, and in child-bed: as also, the best means of helping them in natural and unnatural labours. With fit Remedies for the several Indispositions of New-Born Babes		London	English	printed for Andrew Bell at the Cross-Keys and Bible in Cornhill near Stocks-Market	N14
1716	Culpeper	Nicholas	A directory for midwives: or, a guide for women, in their conception, bearing and suckling their children	Newly corrected from many gross errors	London	English	printed for J. Churchill, at the Black Swan in Pater-Noster-Row	T73143

1716	Mauriceau	Francois	The diseases of women with child, and in child-bed: as also, the best means of helping them in natural and unnatural labours. With sit Remedies for the several Indispositions of New-Born Babes	translated by Hugh Chamberlen, M.D. The fifth edition corrected, and augmented with several new figures	London	English	printed for A. Bell, at the Cross-Keys and Bible in Cornhill, near Stocks-Market	T123754
1716	de La Vauguion	M.	A compleat body of chirurgical operations, containing the whole practice of surgery. With observations and remarks on each case	The third edition, corrected. Faithfully done into English.	London	English	printed for R. Bonwick, J. Tonson, Tim. Goodwin, J. Walthoe, M. Wotton,' [and 6 others]' - BL notation	N3104
1716	Van Deventer	Hendrik	The art of midwifery improv'd.	Translated by Robert Samber	London	English	printed for E. Curll at the Dial and Bible, J. Pemberton at the Buck and Sun, both against St. Dunstan's Church in Fleet-Street; and W. Taylor at the Ship in Pater-Noster-Row	T120705
1716	A Physician		A rational account of the natural weaknesses of women, and of the secret distempers peculiarly incident to them. Plainly discovering their nature, true cause, and best method of cure,	The second edition, with several additions, and amendments.	London	English	printed, and sold at the Two Blue Posts; and A. Dodd	T18464

1717	Bellinger	Francis	Tractatus de foetu nutrito: or, a discourse concerning the nutrition of the foetus in the womb, demonstrated to be by ways hitherto unknown	Printed by William Bowyer.	London	English	Printed for W. Innys, at the Prince's-Arms, in St. Paul's Church-Yard	T51503
1718	Culpeper	Nicholas	Culpepper's compleat and experienc'd midwife	The third edition. Made English by W- S-, M.D	London	English	the booksellers	T136627
1718	Mauriceau	Francois	The diseases of women with child, and in child-bed: as also, the best means of helping them in natural and unnatural labours. With fit Remedies for the several Indispositions of New-Born Babes	translated by Hugh Chamberlen, M.D. sixth edition corrected, and augmented with several new figures	London	English	printed for A. Bell, at the Cross-Keys and Bible in Cornhill, near Stocks-Market	N13
1719	Dionis	Pierre	A general treatise of midwifery	Faithfully translated from the French of Monsieur Dionis	London	English	Printed for A. Bell, J. Darby, A. Bettesworth, J. Pemberton, C. Rivington, J. Hooke, R. Cruttenden, T. Cox, F. Clay, J. Battley, and E. Symon	T112693
1720	Dionis	Pierre	A general treatise of midwifery	A reissue of the 1719 edition with a new title page.	London	English	Printed for A. Bell, J. Darby, A. Bettesworth, J. Pemberton, C. Rivington, J. Hooke, R. Cruttenden, T. Cox, F. Clay, J. Battley, and E. Symon	T498280

1723	Van Deventer	Hendrik	The art of midwifery improv'd	Translated by Robert Samber. A re-issue of 1716 issue with a new title page.	London	English	printed, and sold by A. Bettesworth, W. Taylor, and J. Batley, in Paternoster-Row; J. Wyat and C. Rivington, in St. Paul's Churchyard; E. Bell and W. Meadows, in Cornhill, and J. Hooke against St. Dunstan's Church in Fleetstreet	N14582
1724	Culpeper	Nicholas	A directory for midwives: or, a guide for women, in their conception, bearing, and suckling their children.	Newly corrected from many gross errors	London	English	printed for T. Norris, A. Bettesworth, S. Ballard, and J. Batley	N2149
1724	Maubray	John	The female physician, containing all the diseases incident to that sex, in virgins, wives, and widows; together with their causes and symptoms, their degrees of danger, and respective methods of prevention and cure		London	English	printed for James Holland, at the Bible and Ball in St. Paul's Church-Yard	T45777
1724	Van Deventer	Hendrik	New improvements in the art of midwifery	Translated by Robert Samber	London	English	printed for T. Warner, at the Black-Boy, in Pater-Noster-Row	N20025

1724	Sharp	Jane	The compleat midwife's companion: or, the art of midwifry improv'd. Directing child-bearing women how to order themselves in their conception, breeding, bearing, and nursing of children ... With physical preparations for each disease incident to the female sex	The third edition	London	English	J Marsall [sic]	N493146
1725	Maubray	John	Midwifery brought to perfection by Manual Operation		London	English	printed for James Holland, at the Bible and Ball in St. Paul's Church-Yard	T27546
1725	Sharp	Jane	The compleat midwife's companion: or, the art of midwifry improv'd. Directing child-bearing women how to order themselves in their conception, breeding, bearing, and nursing of children.	The fourth edition	London	English	printed for John Marsall [i.e. Marshall], at the Bible in Grace church street	T117290
1726	Anonymous		A letter from a male physician in the country, to the Author of the Female physician In London		London	English	printed for T. Warner, at the Black-Boy, in Pater-Noster-Row	T55623
1726	Turner	Daniel	De morbis cutaneis. A treatise of diseases incident to the skin	The third edition revised and very much enlarged.	London	English	printed for R. and J. Bonwicke, J. Walthoe, R. Wilkin, and T. Ward	N08356

1726	Turner	Daniel	De morbis cutaneis. A treatise of diseases incident to the skin	The third edition revised and very much enlarged.	London	English	printed for R. and J. Bonwicke, J. Walthoe, R. Wilkin, and T. Ward	T136065
1726	Manningham	Richard	An exact diary of what was observ'd during a close attendance upon Mary Toft, The pretended Rabbet-Breeder of Godalming in Surrey, From Monday Nov. 28, to Wednesday Dec. 7 following		London	English	printed for Fletcher Gyles over-against Grays-Inn in Holborn, and sold by J. Roberts at the Oxford-Arms in Warwick-Lane	T56206
1726	Manningham	Richard	An exact diary of what was observ'd during a close attendance upon Mary Toft, The pretended Rabbet-Breeder of Godalming in Surrey, From Monday Nov. 28, to Wednesday Dec. 7 following	The second edition.	London	English	printed for Fletcher Gyles over-against Grays-Inn in Holborn, and sold by J. Roberts at the Oxford-Arms in Warwick-Lane	T56209
1727	A Physician		The ladies physical directory, or, a treatise of all the weaknesses, indispositions and diseases peculiar to the female sex from eleven years of age, to fifty or upwards	The third edition, with large additions. First published as 'A rational account of the natural weaknesses of women'.	London	English	Printed, and sold by the author's appointment, at the Gentlewoman's at the Two Blue Posts in Haydon-Yard in the Minories, London	T18465

1727	Blondel	James Augustus	The strength of imagination in pregnant women examin'd: And the opinion that marks and deformities in children arise from thence, demonstrated to be a vulgar error		London	English	Printed, and sold by J. Peele, at Locke's Head in Pater-Noster-Row	T7199
1727	Blondel	James Augustus	The strength of imagination in pregnant women examin'd: And the opinion that marks and deformities in children arise from thence, demonstrated to be a vulgar error		London	English	Printed; and re-printed in Dublin by J. Watts, for F. Davys in Essex-Street, near Essex-Gate	T177769
1727	Mauriceau	Francois	The diseases of women with child, and in child-bed: as also, the best means of helping them in natural and unnatural labours. With fit Remedies for the several Indispositions of New-Born Babes	translated by Hugh Chamberlen, M.D	London	English	T. Cox at the Lamb, and J. Clarke at the Bible under the Royal-Exchange in Cornhill ; and T. Combes at the Bible and Dove in Pater-Noster Row	T69151
1727	Douglas	James	An advertisement occasion'd by some passages in Sir R. Manningham's diary lately publish'd		London	English	printed for J. Roberts, in Warwick-Lane; and J. Pemberton, against St. Dunstan's Church, in Fleet-Street	T56026

1728	Van Deventer	Hendrik	The art of Midwifery improv'd	Translated by Robert Samber. Third edition, corrected.	London	English	printed [by Samuel Aris] for A. Bettesworth in Pater-Noster-Row; W. Innys at the west end of St. Paul's; and J. Pemberton against St. Dunstan's Church in Fleet-street	T115049
1728	Van Deventer	Hendrik	New improvements in the art of midwifery	Translated by Robert Samber.	Missing cover page	English	printed for A. Bettesworth, in Pater-Noster-Row; J. Pemberton, against St. Dunstan's Church in Fleet-Street; and W. Innys, at the west end of St. Paul's	N20024
1729	Blondel	James Augustus	The power of the mother's imagination over the foetus examin'd. In answer to Dr. Daniel Turner's book, intitled A defence of the XIIth chapter of the first part of a treatise, De morbis cutaneis		London	English	sold by John Brotherton, Bookseller, at the Sign of the Bible, next Door to the Fleece-Tavern in Cornhill	T117265

1729	Turner	Daniel	<p>A discourse concerning gleets. Their cause and cure. With a prefatory account of Professor Boerhaave's new comments on the venereal disease; and some Animadversions thereon. Address'd to the Surgeons in the City of London. To which is added, a defence of the 12th chapter of the first part of a treatise De morbis cutaneis, in respect to the Spots and Marks impress'd upon the Skin of the Foetus, by the Force of the Mother's Fancy: containing some remarks upon a discourse lately printed and entituled, The strength of imagination in pregnant women examin'd, &c. Whereby it is made plain, notwithstanding all the Objections therein, that the said Imagination in the Pregnant Woman, is capable of maiming, and does often both mutilate and mark the Foetus, or that the same, as he insinuates, is not a vulgar Error. In a Letter to the Author</p>	London	English	Printed for John Clarke, at the Bible under the Royal-Exchange	T136060
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1730	Maubray	John	The female physician, containing all the diseases incident to that sex, in virgins, wives, and widows; together with their causes and symptoms, their degrees of danger, and respective methods of prevention and cure		London	English	Printed for Stephen Austen at the Angel and Bible in St. Paul's Church-yard	T129689
1730	Turner	Daniel	The force of the mother's imagination upon her foetus in utero, Still farther considered: In the Way of a reply to Dr. Blondel's last Book, Entitled, The Power of the Mother's Imagination over the Foetus examined. To which is added, The Twelfth Chapter of the first Part of a Treatise De Morbis Cutaneis, as it was printed therein many Years past		London	English	printed for J. Walthoe, R. Wilkin, J. and J. Bonwicke, S. Birt, J. Clarke, T. Ward and E. Wicksteed	T7225
1731	Wreden	Johann Ernst	An essay on midwifery	[translated from: Unterricht für die Hebammen]	London	English	printed for T. Edlin	T151730

1733	Chapman	Edmund	An essay on the improvement of midwifery		London	English	printed by A. Blackwell over Somerset Water-Gate in the Strand, for A. Bettesworth and C. Hitch in Pater-Noster Row, J. Walthoe in Cornhill; and sold by T. Cowper in Ivy-Lane	T28454
1734	William Giffard and Edward Hody		Cases in Midwifery		London	English	printed for B. Motte, T. Wotton, and L. Gilliver, in Fleet-Street; and J. Nourse, without Temple-Bar	N14596
1734	William Giffard and Edward Hody		Cases in Midwifery		London	English	printed for B. Motte, at the Middle-Temple-Gate; and T. Wotton, at the Queen's-Head and Three Daggers. Fleet-Street	T95552

1735	Chapman	Edmund	A treatise on the improvement of midwifery	The second edition, with large additions and improvements	London	English	printed for John Brindley, at the King's Arms in New Bond-Street; John Clarke, under the Royal Exchange; and Charles Corbett, at Addison's Head against St. Dunstan's Church in Fleetstreet	T28452
1736	Dawkes	Thomas	The midwife rightly instructed: or, the way, which all women desirous to learn, should take, to acquire the true knowledge and be successful in ... the art of midwifery. With a prefatory address to the married part of the British ladies, concerning the choice of proper women to be employed as midwives; and directions for distinguishing the good from the bad		London	English	Printed for J. Oswald, at the Rose and Crown in the Poultry near Stocks-Market	T136221

1736	Douglas	John	A short account of the state of midwifery in London, Westminster, &c. Wherein An effectual Method is proposed, to enable the Midwomen to perform their office in all cases, (excepting those few where instruments are necessary) with as much Ease, Speed, and Safety, as the most dexterous Midmen: Whereby women and children's falling Victims to the Ignorance of Midwomen, so loudly complained of by Chamberlen, Giffard, and Chapman, may for the future be prevented, &c		London	English	printed for and sold only by the author in Lad-Lane, near Guild-Hall	T62746
1736	Mauriceau	Francois	The diseases of women with child, and in child-bed: as also, the best means of helping them in natural and unnatural labours. With fit Remedies for the several Indispositions of New-Born Babes	translated by Hugh Chamberlen, M.D. The seventh edition corrected, and augmented with several new Figures, and with the Description of an excellent Instrument to bring a Child that comes right	London	English	printed for T. Cox, at the Lamb, and J. Clarke, at the Bible, under the Royal Exchange in Cornhill	T132698

1737	Culpeper	Nicholas	A directory for midwives: or, a guide for women, in their conception, bearing, and suckling their children.	Newly corrected from many gross errors	London	English	printed for A. Bettesworth, and C. Hitch; J. Battley, and J. Wood; S. Ballard; S. Birt; R. Ware; and J. Hodges	N54492
1737	Bracken	Henry	The midwife's companion; or, a treatise of midwifery: wherein the whole art is explained		London	English	printed for J. Clarke, at the Golden Ball in Duck-Lane near West-Smithfield ; and J. Shuckburgh, at the Sun near the Inner-Temple-Gate in Fleet-Street	N4472
1737	Chapman	Edmund	A reply to Mr. Douglass's Short account of the state of midwifery in London and Westminster		London	English	printed for T. Cooper, at the Globe in Pater-Noster-Row; and sold by John Brindley, at the King's Arms in New Bond-Street; John Clarke, under the Royal Exchange; and Charles Corbett. at Addison's Head over-against St. Dunstan's Church in Fleetstreet	T27547

1737-8	Edinburgh Philosophical Society		Medical essays and observations	vol.4	Edinburgh	English	printed by T. and W. Ruddimans, for Mr. William Monro bookseller. Sold by the booksellers in Edinburgh; by Mess. Osborn and Longman, London; and Mess. Bruce and Smith, Dublin	
1737	Stone	Sarah	A Complete Practice of Midwifery		London	English	printed for T. Cooper, at the Globe in Pater-Noster Row	T163353
1739	A Physician		The ladies physical directory: or, a treatise of all the weaknesses, indispositions, and diseases peculiar to the female sex, from eleven years of age to fifty or upwards.	First published as 'A rational account of the natural weaknesses of women'. The seventh edition, with large additions, alterations, and amendments.	London	English	and sold, by the author's appointment, at the gentewoman's at the Two Blue Posts in Haydon-Yard in the Minories	N19116
1739	Anonymous		The Ladies dispensatory: or Every woman her own physician		London	English	printed for James Hodges, at the Looking-Glass on London-Bridge; and John James, at Horace's-Head under the Piazza of the Royal-Exchange	T127083

1739	Manningham	Richard	Artis obstetricariae compendium Tam theoriam quam praxin spectans: morborum omnium qui Foeminis inter gestandum in Utero, & in Puerperio, nec non Infantibus supervenire solent curationem totam complectens		London	Latin	impensis Edvardi Littleton, apud Insigne Mitrae ... in vico vocato Fleetstreet	T55620
1739	Mauriceau	Francois	Aphorisms relating to the pregnancy, delivery, and diseases of women.	Translated from the French of Mauriceau. ... By Thomas Jones, surgeon	London	English	printed for the author; and sold by Mr. Samuel Birt; and W. Chase, in Norwich	T22204
1739	Thomson	George	Syllabus. Pointing out every Part of the human system. Likewise the different Positions of the child in the womb, &c. As they are exactly and accurately shewn in the Anatomical Wax-Figures, of the late Monsieur Denoue		London	English	printed by J. Hughs; and sold only up one pair of stairs, at the grocer's shop, the corner of Durham-Yard in the Strand; where the said Figures are exhibited to View	T57375
1740	Anonymous		The Ladies dispensatory: or Every woman her own physician.	The second edition.	London	English	printed for James Hodges, at the Looking-Glass on London-Bridge	T129160

1740	Manningham	Richard	Artis obstetricariae compendium Tam theoriam quam praxin spectans: morborum omnium qui Foeminis inter gestandum in Utero, & in Puerperio, nec non Infantibus supervenire solent curationem totam complectens		London	Latin	impensis T. Gardner, apud Insigne Capitis Coulcii prope Temple-Bar	T65480
1740	Charitable Infirmary for the Relief of Poor Women Labouring of Child, and During their Lying-In.		From the charitable infirmary for the relief of poor women labouring of child, and during their lying-in; next door to Sir Richard Manningham's in Jermyn-Street, St. James's, Westminster.		London	English	s.n.	T40263
1740	Mauclerc	John Henry	The power of imagination in pregnant women discussed: With an address to the ladies, on the occasion		London	English	printed for J. Robinson, at the Golden-Lyon in Ludgate-Street	T28455
1742	A Physician		The ladies physical directory: or, a treatise of all the weaknesses, indispositions, and diseases peculiar to the female sex, from eleven years of age to fifty and upwards	First published as 'A rational account of the natural weaknesses of women'. The eighth edition, with some very material additions.	London	English	printed: and sold, by the author's appointment, only at the gentlewoman's at the Two Blue Posts in Haydon-Yard in the Minories	T18466
1742	Smellie	William	[A cour]se of lectures upon midwifery, wherein the theory and practice of that art are explain'd in the clearest manner		London	English	s.n.	N28206

1742	Ould	Fielding	A treatise of midwifry		Dublin	English	printed by and for Oli. Nelson at Milton's Head in Skinner-Row; and for Charles Connor at Pope's Head at Essex-Gate	T99259
1742	Southwell	Thomas	Remarks on some of the errors, both in anatomy and practice, Contained in a late treatise of Midwifry, published by Fielding Ould, man-midwife		Dublin	English	Printed by Thomas Bacon, printer and bookseller in Essex-street	T168833
1743	Astruc	Jean	A treatise on all the diseses incident to women	Translated from a manuscript copy of the author's lectures read at Paris, 1740. By J. R-n, M.D	London	English	printed for T. Cooper, at the Globe in Pater-Noster Row	T132641
1743	Astruc	Jean	A treatise on all the diseases incident to women	Translated from a manuscript copy of the author's lectures read at Paris, 1740	London	English	printed for M. Cooper at the Globe in Pater-Noster-Row	T149176
1744	Dawkes	Thomas	The nurse's guide: or short and safer rules for the management of women of each rank and condition in child-bed. With directions about the choice of a wet-nurse. In a dialogue betwixt a surgeon and a nurse		London	English	Printed: and sold by M. Cooper, in Pater-noster-row	N10006

1744	Manningham	Richard	An abstract of midwifry, for the use of the lying-in infirmary		London	English	printed by T. Gardner, at Cowley's Head opposite St. Clement's Church in the Strand	T55621
1744	Southwell	Thomas	Remarks on some of the errors, both in anatomy and practice, contained in a late Treatise of midwifry, published by Fielding Ould, man-midwife. Sequel		London	English	printed for Thomas Meighan	N61164
1746	Van Deventer	Hendrik	The art of midwifery improv'd	Translated by Robert Samber. The fourth edition corrected.	London	English	printed for W. Innys, and C. Hitch in Pater-Noster-Row; J. Hodges, near London Bridge; and J. Pemberton in Fleet-Street	N14581
1746	Mauquest de la Motte	Guillaume	A general treatise of midwifry: illustrated with upwards of four hundred curious observations and reflexions concerning that art	Written originally in French by Lamotte, Sworn Surgeon and Man Midwife at Valognes. And translated into English by Thomas Tomkyns, Surgeon	London	English	printed for James Waugh	T200419
1746	Mauquest de la Motte	Guillaume	A general treatise of midwifry: illustrated with upwards of four hundred curious observations and reflexions concerning that art	Written originally in French by Lamotte, Sworn Surgeon and Man Midwife at Valognes. And translated into English by Thomas Tomkyns, Surgeon	London	English	printed for James Waugh, at the Turk's Head, in Gracechurch-Street	T100593

1747	Mauclerc	John Henry	Dr. Blondel confuted: or, the ladies vindicated, with regard to the power of imagination in pregnant women: together with a circular and general address to the ladies, on this occasion	A reissue, with a new titlepage, of 'The power of imagination in pregnant women discussed' published in 1740	London	English	Printed for M. Cooper, in Paternoster-Row	T28451
1748	Douglas	William	A letter to Dr. Smelle [sic] Shewing the impropriety of his new-invented wooden forceps; as also, the absurdity of his method of teaching and practising midwifry		London	English	printed for J. Roberts	T121773
1748	Douglas	William	A second letter to Dr. Smelle [sic], and an answer to his pupil, confirming the impropriety of his wooden forceps : as also of his method of teaching and practising midwifery		London	English	printed for, and sold by S. Paterson	N21727
1748	Ould	Fielding	A treatise of midwifry		London	English	printed for J. Buckland	N63303
1749	Middlesex Hospital		An account of the Middlesex Hospital, for the reception of sick and lame, and lying-in married women, situated in Windmill-Street, in the road from St. Giles's church to Hampstead		London	English	s.n.	T230117
1750	Young	Thomas	A course of lectures upon midwifery		Edinburgh	English	s.n.	T167017

1750	Smellie	William	These are to certify, that [blank] hath carefully attended my lectures on midwifery, by which he has had the opportunity of being fully instructed in all the different operations and branches of that art. Witness my hand this [blank] day of [blank]		London	English	s.n.	N71139
1751	Nicholls	Frank	The petition of the unborn babes to the censors of the Royal College of Physicians of London		London	English	printed for M. Cooper in Pater-Noster-Row	N11750
1751	Culpeper	Nicholas	Culpepper's compleat and experienced midwife: In two parts.	The fifth edition. Made English by W.S. M.D	Glasgow	English	Printed by James Duncan, and are to be sold at his shop	T210608
1751	Anonymous		A defence of Dr. Pocus and Dr. Malus against the petition of the unborn babes to the censors of the Royal College of Physicians of London		London	English	printed for M. Cooper at the Globe in Pater-Noster-Row	N490
1751	Burton	John	An essay towards a complete new system of midwifry, theoretical and practical		London	English	printed for James Hodges, at the Looking-Glass, facing St. Magnus Church, London-Bridge	T117270
1751	Exton	Brudenell	A new and general system of midwifery.		London	English	Printed for W. Owen, at Homer's-head, near Temple-Bar	T130810

1751	Lying-In Hospital for Married Women (London, England)		An account of the rise and progress of the Lying-In-Hospital for Married Women, in Brownlow-Street, Long-Acre, from its first institution in November 1749, to July 25, 1751		London	English	s.n.	T4741
1751	Bracken	Henry	The midwife's companion; or, a treatise of midwifry: wherein the whole art is explained	The second edition.	London	English	printed for J. Shuckburgh; and W. Johnston	T172220
1751	Ruysch	Fredrik	The celebrated Dr. Frederic Ruysch's practical observations in surgery and midwifry	Now first translated from the Latin into English, by a physician	London	English	printed for T. Osborne, in Gray's-Inn	T116971
1752	Counsell	George	The art of midwifry: or, the midwife's sure guide: wherein the most successful methods of practice are laid down, in the plainest, clearest, and shortest manner		London	English	Printed for C. Bathurst, at the Cross-Keys, in Fleet-street	T117275
1752	Anonymous		A Vindication of Man-Midwifery, Being the Answer of Dr. Pocus, Dr. Maulus, and Dr. Barebones... to 'The Petition of the Unborn Babes'		London	English	printed for H. Carpenter	N64060

1752	Mauriceau	Francois	The diseases of women with child, and in child-bed: as also, the best means of helping them in natural and unnatural labours. With fit Remedies for the several Indispositions of New-Born Babes	translated by Hugh Chamberlen, M.D. The eighth edition corrected, and augmented with several new figures, and with the Description of an excellent Instrument to bring a Child that comes right	London	English	printed for T. Cox, and J. Clarke, under the Royal-Exchange. in Cornhill	N11
1752-64	Smellie	William	A treatise on the theory and practice of midwifery		London	English	printed for D. Wilson (vols. 2 and 3 D.Wilson and T. Durham)	T141453
1752	Smellie	William	A treatise on the theory and practice of midwifery	The second edition, corrected.	London	English	printed for D. Wilson, and T. Durham	T152322
1752	Lying-In Hospital for Married Women		An account of the rise and progress of the Lying-In-Hospital for Married Women, in Brownlow-Street, ... from its first institution in November 1749, to the 25th of December 1751		London	English	s.n.	T143685
1753	Smellie	William	A course of lectures upon midwifery		London	English	s.n.	T151085
1753	Burton	John	A letter to William Smellie, M.D. containing critical and practical remarks upon his treatise on the Theory and practice of midwifery		London	English	printed for W. Owen, at Homer's Head, Temple-Bar	T112489

1753	Chapman	Edmund	A treatise on the improvement of midwifery	The third edition, with large additions and improvements	London	English	printed for John Brindley, Book-Binder, Book-Seller, and Stationer to his late Royal Highness the Prince of Wales, in New Bond-Street; and James Hodges on London-Bridge	N14020
1753	Exton	Brudenell	A new and general system of midwifery		London	English	Printed for W. Owen, at Homer's-head, near Temple-Bar	T112480
1753	Portal	Paul	The compleat practice of men and women midwives: or, the true manner of assisting a woman in child-bearing	Translated from the Original	London	English	printed for J. Johnson, at Mead's Head, opposite the Monument	N4924
1753	Mauriceau	Francois	The diseases of women with child, and in child-bed: as also, the best means of helping them in natural and unnatural labours	translated by Hugh Chamberlen, M.D. The eighth edition corrected, and augmented with several new figures	London	English	printed for T. Cox, and J. Clarke	T182245
1753	Middlesex Hospital		An account of the Middlesex-Hospital, for the reception of sick and lame, and for lying-in married women, in Windmill-Street, Tottenham-Court Road		London	English	s.n.	T112269
1753	Anonymous		A Charity for the relief of poor lying-in women.		Dublin	English	s.n.	T202921

1753	Torriano	N.	Compendium obstetricii: or, a small tract on the formation of the foetus, and the practice of midwifry		London	English	printed for E. Comyns, under the Royal-Exchange; and J. Robinson, in Ludgate-Street	N3468
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1754	Anonymous	<p>The trial of a cause between Richard Maddox, Gent. Plaintiff, and Dr. M---y, Defendant, Physician, and Man-Midwife, before Sir Michael Foster, Knt. One of the Justices of the King's-Bench. At Guildhall, London, March 2, 1754. By a Special Jury. In an Action upon the Case, brought by the Plaintiff against the Defendant for promising and undertaking, and not performing his Office as a Man-Midwife in the Delivery of the Wife of Mr. Richard Maddox, the Plaintiff. With the Opinions of several Physicians and Man-Midwives upon the Case, as given in Evidence upon the Trial. Whereupon the Jury thought proper to give 1000 l. Damage to the Plaintiff. To which will be added, Some extraordinary Cases in Midwifry; extracted from the Writings of that very eminent Physician and Man-Midwife, Dr. Deventer, of Leyden.</p>		London	English	<p>printed for H. Jefferys, in Mercer's-Chaple, Cheapside, C. Sympson, in Chancery-Lane</p>	T18419
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1754	Anonymous	<p>The trial of a cause between Richard Maddox, Gent. Plaintiff, and Dr. M---y, Defendant, Physician, and Man-Midwife, before Sir Michael Foster, Knt. One of the Justices of the King's-Bench. At Guildhall, London, March 2, 1754. By a Special Jury. in an Action upon the case, brought by the Plaintiff against the Defendant for promising and undertaking, and not performing his Office as a Man-Midwife in the Delivery of the Wife of Mr. Richard Maddox, the Plaintiff. With the Opinions of several Physicians and Man-Midwives upon the Case, as given in Evidence upon the Trial. Whereupon the Jury thought proper to give 1000l. Damage to the Plaintiff. To which will be added. Some extraordinary cases in Midwifry; extracted from the Writings of that very eminent Physician and Man-Midwife, Dr. Deventer, of Leyden</p>				printed for H. Jefferys, in Mercer's-Chaple, Cheapside, and sold at the Royal Exchange	N13764
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1754	Smellie	William	A collection of cases and observations in midwifery	Vol.II	London	English	Printed for D. Wilson and T. Durham, at Plato's Head, in the Strand	N473594
1754	Smellie	William	A sett [sic] of anatomical tables, with explanations, and an abridgment, of the practice of midwifery, with a view to illustrate a treatise on that subject, and collection of cases		London	English	s.n.	T135372
1754	Manningham	Richard	Artis obstetricariæ compendium Tam theoriam quam praxin spectans: morborum omnium qui Foeminis inter gestandum in Utero, & in Puerperio, nec non Infantibus supervenire solent curationem totam complectens		London	Latin	impensis Edvardi Littleton, apud Insigne Mitrae ... in vico vocato Fleetstreet	T55620
1754	Pugh	Benjamin	A treatise of midwifery, chiefly with regard to the operation		London	English	Printed for J. Buckland, at the Buck in Pater-noster Row	T152311
1754	General Lying-In Hospital (Grosvenor Square, London, England)		An account of the rise, progress, and state of the General Lying-in hospital, in Duke's-Street, Grosvenor-Square. By order of an annual general-court of governors, held on Thursday, March 7, 1754		London	English	s.n.	T219576

1755	Culpeper	Nicholas	A directory for midwives: or, a guide for women, in their conception, bearing, and suckling their children.	Newly corrected from many gross errors	London	English	printed for S. Ballard, R. Ware, S. Birt, C. Hitch, and L. Hawes, and J. Hodges	N2151
1755	Anonymous		The ladies dispensatory: or every woman her own physician		London	English	printed for James Hodges, at the Looking-Glass on London-Bridge; and John James, at Horace's-Head under the Piazza of the Royal-Exchange	T112790
1755	Mauriceau	Francois	The diseases of women with child, and in child-bed as also the best means of helping them in natural and unnatural labours. With fit remedies for the several indispositions of new-born babes	translated by Hugh Chamberlen, M.D. The eighth edition corrected, and augmented with several new figures	London	English	printed for R. Ware, T. and T. Longman, C. Hitch and L. Hawes, J. Clarke, J. and J. Rivington, J. Ward, R. Baldwin, and T. Field	N12
1755	Watts	Giles	Reflections on slow and painful labours, and other subjects in midwifery. Together with observations on several disorders incident to pregnant women		London	English	printed for and sold by G. Keith, at the Bible and Crown in Gracechurch-Street	T92218

1755	Anonymous		An account of the rise, progress and state of the lying-in hospital for married women, in Brownlow-street, Long-Acre, from its institution in November 1749, to Christmas 1754.		London	English	s.n.	N473241
1756	Smellie	William	A treatise on the theory and practice of midwifery		London	English	printed for D. Wilson, and T. Durham	N14165
1756	Lying-In Hospital for Married Women (London, England)		An account of the rise, progress, and state of the British Lying-In Hospital for Married Women, situated in Brownlow-Street, Long-Acre, from its institution in November 1749, to Lady-day, 1756		London	English	s.n.	N16161
1756	Ireland. Sovereign (1727-1760 : George II)		A copy of His Majesty's royal charter for incorporating the governors and guardians of the Hospital for the relief of poor lying-in-women, in Dublin.		Dublin	English	s.n.	T1857
1757	Kelly	Christopher	A course of lectures on Midwifery		London	English	At his House on the broad Pavement, St. Martin's-lane	N/A

1758	Counsell	George	The london new art of midwifry: or, the midwife's sure guide: wherein the most successful methods of practice are laid down, in the plainest, clearest, and shortest manner		London	English	printed for W. Anderson in Pater-Noster-Row	N2761
1758	Smellie	William	A collection of cases and observations in midwifery	Vol.II. The second edition.	London	English	printed for D. Wilson, and T. Durham	N14864
1758	Ireland. Sovereign (1727-1760 : George II)'		A copy of His Majesty's royal charter for incorporating the governors and guardians of the Hospital for the Relief of Poor Lying-In-Women, in Dublin: Dated the Second Day of December, 1756		Dublin	English	printed by S. Powell in Crane-Lane	T185251
1758	Lying-In Hospital for Married Women (London, England)		An account of the rise, progress, and state of the British Lying-In Hospital for Married Women, situated in Brownlow-Street, Long-Acre, from its first institution in November 1749, to December the 25th, 1757		London	English	Printed by C. Say, in Newgate-Street	T92539
1759	Chapman	Edmund	A treatise on the improvement of midwifery	The third edition; with large additions	London	English	printed for L. Davis and C. Reymers, against Gray's Inn, Holborn, Printers to the Royal Society	T129627

1759	Lying-In Hospital for Married Women (London, England)		An account of the rise, progress, and state of the British Lying-in hospital for married women, situated in Brownlow-Street, Long-Acre, from its institution in November 1749, to December the 25th, 1758		London	English	s.n.	T164124
1760	Nihell	Elizabeth	A Treatise on the Art of Midwifery		London	English	printed for A. Morley	T152318
1760	Nihell	Elizabeth	An answer to the author of the Critical review, for March, 1760. Upon the article of Mrs. Nihell's Treatise on the art of midwifery		London	English	printed for A. Morley, at Gay's-Head, near Beaufort Buildings, in the Strand	N16534

1760	General Lying-In Hospital (Grosvenor Square, London, England)		Committee of the Lying-In Hospital, in Duke's-Street, Grosvenor-Square. From the great and good character, with which [blank] justly bless'd, in being remarkably humane and beneficent to [blank] fellow-creatures, when real objects of distress; we, the underwritten presidents and governors to this very useful, interesting and much wanted charity, do request, in the behalf of the poor pregnant and newly- deliver'd women of this hospital, the honour of your name to our inclos'd list.		London	English	s.n.	T219577
1761	Smellie	William	A set of anatomical tables, with explanations, and an abridgment, of the practice of midwifery, with a view to illustrate a treatise on that subject, and collection of cases	The second edition, corrected.	London	English	s.n.	T141469
1761	Middlesex Hospital		An account of the proceedings of the governors of the Middlesex-Hospital, ... from ... August 1745, to the twenty-fourth of June 1761		London	English	s.n.	T200109

1762	Astruc	Jean	A treatise on the diseases of women	Translated from the French original; written by Dr. J. Astruc Royal Professor of Physic at Paris, and consulting Physician to the King of France	London	English	Printed for J. Nourse, bookseller in Ordinary to His Majesty	T78397
1762	Culpeper	Nicholas	A directory for midwives: or, a guide for women, in their conception, bearing, and suckling their children.	Newly corrected from many Gross Errors.	London	English	printed for C. Hitch and L. Hawes, S. Crowder and Co. S. Ballard, C. and R. Ware, and B. Law. and Co	T136151
1762	Smellie	William	A treatise on the theory and practice of midwifery	Vol.I. The fourth ediion, corrected.	London	English	printed for D. Wilson, near Round Court; and T. Durham, near Norfolk Street; both in the Strand	T152323
1763	Portal	Paul	The compleat practice of men and women midwives: or, the true manner of assisting a woman in child-bearing	Translated from the Original	London	English	printed for J. Johnson, at Mead's Head, opposite the Monument	T95289
1763	Thicknesse	Philip	Man-midwifery analysed: and the tendency of that practice detected and exposed		London	English	Printed for R. Davis, in Piccadilly, and T. Caslon, opposite Stationers-Hall	T170816
1763	Lying-In Hospital for Married Women (London, England)		An account of the British Lying-In-Hospital. for Married Women, in Brownlow-Street, Long-Acre, from its institution in November 1749, to January the 1st, 1763		London	English	printed by C. Say	N14989

1764	Thicknesse	Philip	A letter to a young lady		London	English	printed for R. Davis; T. Caslon; and C. Henderson	N54628
1764	Roabard	John	A letter to the author of 'A letter to a young lady'		London	English	Printed and sold by Becket and De Hondt in the Strand	T169624
1764	Smellie	William	A collection of cases and observations in midwifery	Vol.II. The third edition.	London	English	Printed for D. Wilson, at Plato's Head, and T. Durham, at the Golden Ball, in the Strand	T150885
1764	Smellie	William	A collection of preternatural cases and observations in midwifery	Vol.III.	London	English	printed for D. Wilson and T. Durham, in the Strand	N64000
1764	Smellie	William	A treatise on the theory and practice of mid wifery	The fifth edition, corrected.	Dublin	English	Printed for T. and J. Whitehouse at their State-Lottery-Office, near the centre of the East Side of Parliament-street	T200258
1764	Smellie	William	A collection of cases and observations in midwifery	Voll. II. The fourth edition.	Dublin	English	Printed for T. and J. Whitehouse at their State-Lottery-Office, near the centre of the East Side of Parliament-street	T200256
1764	Thicknesse	Philip	Man-midwifery analysed : and the tendency of that practice detected and exposed		London	English	printed for R. Davis in Piccadilly	T56019

1764	Middlesex Hospital		The laws, orders, and regulations, of the Middlesex Hospital, for the reception of sick and lame patients, and lying-in married women; revised, Enlarged, and Digested under proper Heads, by a committee for that Purpose appointed at a weekly board held the 29th of March, 1763; read, approved, and confirmed, at a special general court, appointed for that Purpose		London	English	s.n.	T225344
1764	Hospital for the Relief of Poor Lying-In Women (Dublin, Ireland)		Rules and orders to be observed in the Lying-in-Hospital in Great-Britain-street, Dublin.		Dublin	English	Printed by S. Powell, in Dame-street, opposite Fownes's-street	T212092
1765	Memis	John	The midwife's pocket-companion: or a practical treatise of midwifery		London	English	Printed for Edward and Charles Dilly, in the Poultry, near the Mansion-House	N4476
1765	Smellie	William	A collection of preternatural cases and observations in midwifery	Vol.III.The third edition.	Dublin	English	Printed for T. and J. Whitehouse at their State Lottery Office, the centre of the east side of Parliament-street	T200255

1765	Lying-In Hospital for Married Women (London, England)		An account of the British Lying-In-Hospital for Married Women in Brownlow-Street, Long-Acre, from its institution in November 1749, to March the 25th, 1765		London	English	printed by C. Say	N43356
1765	General Lying-In Hospital (Grosvenor Square, London, England)		We, the presidents, governors and trustees to the General Lying-in Hospital, in Duke's-Street, Grosvenor-Square, being thoroughly sensible of the public benefit which ariseth to these three kingdoms in general, and more particularly to this great metropolis, from the above most excellent charity, beg leave to recommend the encouragement and support thereof to the humane and compassionate part of mankind		London	English	s.n.	T219578
1766	Culpeper	Nicholas	A directory for midwives: or, a guide for women, in their conception, bearing, and suckling their children	Newly corrected from many gross errors	Belfast	English	James Magee	N8721
1766	Smellie	William	A treatise on the theory and practice of midwifery	Vol.I.The fifth edition, corrected.	London	English	printed for D. Wilson, and T. Durham	T152324

1766	Smellie	William	A collection of preternatural cases and observations in midwifery	Vol.I. The second edition.	London	English	printed for D. Wilson, and T. Durham	T150890
1766	Astruc	Jean	Elements of midwifry	Translated, With Additions and Explanatory Notes, by S. Ryley	London	English	printed for S. Crowder, at the Looking-Glass; and J. Coote, at the King's-Arms, in Pater-Noster-Row	T117724
1766	Cooper	Thomas	A compendium of midwifery, under the three general heads of theory, practice, and diseases		London	English	s.n.	N2986
1766	Exton	Brudenell	A new and general system of midwifery.	The third edition. A reissue of the 1753 edition.	London	English	printed for W. Heard, at the Philobiblian's Library, in Piccadilly	N4943
1766	Harvey	William	Gvilielmi Harveii opera omnia: a Collegio Medicorum londinensi edita: MDCCLXVI.		London	Latin	excvdebat Gvilielmvs Bowyer	T128367
1766	Tissot	Samuel Auguste David	The Lady's Physician		London	English	printed for D. Wilson and G. Nicol, in the Strand	N11492
1766	Lying-in Hospital (Newcastle-upon-Tyne, England)		A report of the state of the Lying-in Hospital, for poor married women, in Rosemary-Lane, in Newcastle upon Tyne, from its first institution, Oct. 1, 1760, to Oct. 8, 1766, with an abstract of the accompts.		Newcastle upon Tyne	English	s.n.	T177338

1767	Culpeper	Nicholas	Culpepper's compleat and experienced midwife: in two parts.	The sixth edition. Made English by W. S. M.D.	Glasgow	English	s.n.	T230768
1767	Astruc	Jean	A treatise on the diseases of women; in which it is attempted to join a just theory to the most safe and approved practice: with two dissertations on several passages in the Treatise on the diseases of women; in which it is endeavoured to remove some Doubts which have arisen concerning them	Translated from the French Original. [Author note: only volume 3 applies here, the 2 volumes written earlier are gynaecological books rather than obstetric]	London	English	Printed for J. Nourse, bookseller in Ordinary to His Majesty	N4
1767	Astruc	Jean	The art of midwifery reduced to principles: in which, are explained the most safe and established methods of practice, in each kind of delivery; with a summary history of the art	translated from the French original	London	English	printed for J. Nourse, Bookseller to his Majesty, opposite Catharine Street in the Strand	N14580
1767	Harvie	John	Practical directions, shewing a method of preserving the perinaeum in birth, and delivering the placenta without violence		London	English	printed for D. Wilson and G. Nicol, in the Strand	T10838

1767	Leake	John	A course of lectures on the theory and practice of midwifery: in which, Every Thing essentially necessary to the true Knowledge of that Art will be fully explain'd, and clearly demonstrated; particularly, those Operations which are conformable to the Principles of mechanical Motion		London	English	A.D.	N3162
1767	Westminster Lying-In Hospital		An account of the Westminster New Lying-in Hospital begun and finished under the patronage of the Right Honorable Earl Percy, president		London	English	s.n.	N16354
1767	Ould	Fielding	A treatise of midwifery		London	English	sold by M. Thrush	T152312
1767	Lying-In Hospital for Married Women (London, England)		An account of the British Lying-In-Hospital, for Married Women, in Brownlow-Street, Long-Acre, from its institution in November 1749, to June the 24th, 1767		London	English	printed by C. Say	T153338
1768	Denman	Thomas	Essays on the puerperal fever, and on puerperal convulsions		London	English	printed for J. Walter, Charing-Cross	T33504
1768	Smellie	William	A collection of cases and observations in midwifery	Vol.II. The fourth edition.	London	English	printed for D. Wilson and G. Nicol, and T. Durham	T128453

1768	[General Lying-in Hospital (Oxford St., London, England)]		An account of the rise, progress, and state of the General Lying-in Hospital, the corner of Quebec-Street, Oxford-Road ... By order of the Quarterly General Court of Governors.		London	English	s.n.	N493264
1769	Johnson	Robert Wallace	A new system of midwifery, in four parts; founded on practical observations		London	English	printed for the author, and sold by D. Wilson and G. Nicol, opposite York-Buildings, in the Strand	T122137
1769	Anonymous		The ladies new dispensatory, and family physician		London	English	printed for Johnson and Payne, at No. 8. in Paternoster-Row	T118457
1769	Lying-In Hospital for Married Women (London, England)		An account of the British Lying-In-Hospital, for Married Women, in Brownlow-Street, Long-Acre, from its institution in November 1749, to March the 25th, 1769		London	English	printed by C. Say	N29279
1770	Patterson	Samuel	A catalogue of the entire and inestimable apparatus for lectures in midwifery, contrived with consummate judgment, and executed with infinite labour, by the late ingenious Dr. William Smellie, deceased		London	English	Royal College of Obstetricians and Gynaecologists	N/A

1770	Tolver	A	The present state of midwifery in Paris. With a theory of the cause and mechanism of labour		London	English	printed for T. Cadell, successor to Mr. Millar, in the Strand	T117293
1770	Ball	John	The female physician: or, every woman her own doctress		London	English	printed for L. Davis, near Gray's-Inn-Gate, Holborn	T200410
1770	Ball	John	The female physician: or, every woman her own doctress		London	English	printed for L. Davis	T18498
1770	Middlesex Hospital.		The laws, orders, and regulations, of the Middlesex Hospital, for the reception of sick and lame patients, and lying-in married women; revised, and Digested under proper Heads, by a committee for that Purpose appointed at a Quarterly General Court, held the 3d of May, 1770. Read, approved, and confirmed, at a special general court, appointed for that Purpose		London	English	s.n.	N19668
1771	Manning	Henry	A treatise on female diseases: in which are also comprehended those most incident to pregnant and child-bed women		London	English	printed for R. Baldwin, No. 47, Pater-Noster-Row	T100811
1771	Exton	Brudenell	A new and general system of midwifery.	The fourth edition.	London	English	printed for J. Heard, at the Philobiblian Library, in Piccadilly	T131366

1771	Nihell	Elizabeth	La cause de l'humanité, référée au tribunal du bon sens & de la raison: ou traité sur les accouchemens par les femmes	re-titled version of <i>The Art of Midwifery</i> (1760)	London, Paris	French	et se trouve a Paris, chez Antoine Boudet	N15105
1771	Ball	John	The female physician: or, every woman her own doctor		London, Dublin	English	sold by the booksellers	T191089
1771	Lying-In Hospital for Married Women (London, England)		An account of the British Lying-In Hospital, for Married Women, in Brownlow-Street, Long-Acre, from its institution in November 1749, to December the 31st, 1770		London	English	Printed by C. Say, in Newgate-Street	N14991
1771	Anonymous		A View of the schemes at present under consideration of the governors of the Lying-In Hospital		Dublin	English	s.n.	T193365
1771	Fleury	Johannes Carolus	Observations upon a Pamphlet entitled, 'A view of the schemes under consideration of the governors of the Lying-in Hospital.'		Dublin	English	s.n.	T185572
1771	Collum	William	Reasons against lectures in the Lying-in Hospital.		Dublin	English	s.n.	T218226
1772	Leake	John	Practical observations on the child-bed fever		London	English	printed for J. Walter, T. Becket and Co., R. Baldwin, Richardson and Co	T149338

1772	Foster	Edward	The skeleton or syllabus, of a course of lectures, on the theory and practice of midwifery: in which the true principles of that art are distinctly laid down		Dublin	English	Printed for the author	N64471
1772	Smellie	William	A collection of preternatural cases and observations in midwifery	Voll. III. The third edition.	London	English	printed for W. Strahan; D. Wilson; and T. Durham	N28029
1772	Anonymous		The danger and immodesty of the present too general custom of unnecessarily employing men-midwives		London	English	printed for J. Wilkie, No. 71, in St. Paul's Church-Yard; and F. Blyth, John's Coffee-House, Cornhill	N28351
1772	Anonymous		The danger and immodesty of the present too general custom of unnecessarily employing men-midwives	The second edition.	London	English	printed for J. Wilkie, No. 71, in St. Paul's Church-Yard; J. Almon, opposite Burlington-House, Piccadilly; F. Blyth, John's Coffee-House, Cornhill; and G. Woodfall, Charing-Cross	T6103

1772	Anonymous		The danger and immodesty of the present too general custom of unnecessarily employing men-midwives	The second edition.	London	English	printed for J. Wilkie, No. 71, in St. Paul's Church-Yard; J. Almon, opposite Burlington-House, Piccadilly; F. Blyth, John's Coffee-House, Cornhill; and G. Woodfall, Charing-Cross	T10392
1772	Gibson	John	Some useful hints and friendly admonitions to young surgeons : on the practice of midwifery		Colchester	English	printed and sold by W. Keymer; also sold by J. Shave, Ipswich; M. Hassall, and C. Frost, Chelmsford; W. Green and E. Rogers, Bury; R. Keymer, Hadleigh; W. Enefer, Harwich; W. Chase, Norwich; and Messrs. Hawes and Co. London	T226791
1772	Hulme	Nathaniel	A treatise on the puerperal fever: wherein the nature and cause of that disease, so fatal to lying-in women, are represented in a new point of view illustrated by dissections; and a rational method of cure proposed		London	English	printed for T. Cadell, in the Strand; G. Robinson, in Pater-Noster Row; and J. Almon, in Piccadilly	T10393

1772	White	Charles	A treatise on the management of pregnant and lying-in women, and the means of curing, but more especially of preventing the principal disorders to which they are liable		London	English	printed for W. Johnston	T26207
1773	Denman	Thomas	Essay on the puerperal fever	The second edition.	London	English	printed by J. Cooper, for J. Walter, Charing-Cross	T136325
1773	Denman	Thomas	Remarks on Dr. Leake's paper on the use of his forceps.		London	English	s.n.	T168817
1773	Leake	John	A lecture introductory to the theory and practice of midwifery	publicly delivered the 4th of October, 1773'.	London	English	Printed for R. Baldwin, Paternoster Row, and T. Evans, near York Buildings, Strand	T37693
1773	Leake	John	A lecture introductory to the theory and practice of midwifery	publicly delivered the 4th of October, 1773.' The second edition.	London	English	Printed for R. Baldwin, Paternoster Row, and T. Evans, near York Buildings, Strand	T37694
1773	Leake	John	The Description and Use of a new pair of forceps	25th June, 1773'	London	English	s.n.	T153360
1773	White	Charles	A treatise on the management of pregnant and lying-in women, and the means of curing, but more especially of preventing the principal disorders to which they are liable		London	English	Printed for Edward and Charles Dilly, in the Poultry	T152319

1774	Leake	John	Practical observations on the child-bed fever	Second edition corrected, with additions.	London	English	printed for R. Baldwin, and T. Evans	T149337
1774	Hunter	William	Anatomia uteri humani gravidi tabulis illustrata		Birmingham	Latin and English	by John Baskerville, 1774. Sold in London by S. Baker and G. Leigh; T. Cadell; D. Wilson and G. Nicol; and J. Murray	T137584
1774	A Late Pupil of Dr Leake		A vindication of the forceps described and recommended by Dr. Leake; in which, the injudicious and illiberal remarks on that subject, signed Thomas Denman, are examined and refuted. By a late pupil of Dr. Leake's.		London	English	printed for J. Hinton, in Paternoster-Row	T140689
1774	Smellie	William	A treatise on the theory and practice of midwifery	Vol.I.The eighth edition, corrected.	London	English	s.n.	N14862
1774	Smellie	William	A collection of cases and observations in midwifery	Vol. II. The sixth edition.	London	English	s.n.	N14863
1774	Smellie	William	A collection of preternatural cases and observations in midwifery	vol. III. The fifth edition.	London	English	s.n.	N14862

1774	Hospital for the Relief of Poor Lying-In Women (Dublin, Ireland)		The rules and regulations of the Lying-in and Inoculation Charity, of the city of Dublin, instituted for the relief of poor married-women, lying-in at their own habitations: And for inoculation of the small-pox		Dublin	English	Printed for W. Wilson, No. 6, Dame-street	T202435
1775	Leake	John	A course of lectures on the theory and practice of midwifery		London	English	s.n.	T34279
1775	Leake	John	The description and use of a new forceps		London	English	s.n.	T32334
1775	Leake	John	Practical observations on the child-bed fever	Third edition corrected, with additions.	London	English	printed for R. Baldwin, and T. Evans	T149336
1775	Butter	William	An account of puerperal fevers, as they appear in Derbyshire, and some of the counties adjacent		London	English	printed and sold by T. Payne, at the Mews' Gate, Saint Martin's	T26548
1775	Hamilton	Alexander	Elements of the practice of midwifery		London	English	printed for J. Murray	T32603
1775	Manning	Henry	A treatise on female diseases; in which are also comprehended those most incident to pregnant and child-bed women...To which is added, A letter on the puerperal fever	translated from the original Latin	London	English	printed for R. Baldwin	T127316

1775	Westminster Lying-In Hospital		An account of the Westminster New Lying-in Hospital, instituted A.D. 1765, and supported by voluntary subscription. The Right Honorable Lord Grosvenor, President.		London	English	s.n.	T126730
1775	Westminster Lying-In Hospital		An account of the Westminster New Lying-in Hospital, instituted A.D. 1765, and supported by voluntary subscription. The Right Honourable Earl Percy, President		London	English	s.n.	T153340
1775	Rigby	Edward	An essay on the uterine hæmorrhage, which precedes the delivery of the full-grown foetus		London	English	printed for Joseph Johnson	N9397
1776	Hume	A	Every woman her own physician; or, the lady's medical assistant		London	English	printed for Richardson and Urquhart, at the Royal-Exchange	T33585
1776	Thode	Christianus Mathias	Extracts of letters from C.M. Thode ... to Dr. Leake, on the subject of his new forceps: translated from the German originals now in his possession	translated from German originals	London	English	s.n.	N493301
1776	Leake	John	A lecture introductory to the theory and practice of midwifery	publicly delivered the 4th of October, 1773'. The third edition corrected, with additions.	London	English	printed for R. Baldwin, in Pater-Noster-Row	T140683
1776	Leake	John	A syllabus of lectures on the theory and practice of midwifery		London	English	s.n.	T140682

1777	Culpeper	Nicholas	A directory for midwives: or, a guide for women, in their conception, bearing, and suckling their children.	Contains only the first part; possibly issued with these same publishers' 1777 edition of 'The English physician. Or, a treatise of practical physic', which contains the second part usually found in 'Directory'.	London	English	printed for D. Johnston, C. Ware, R. Gray, and G. Hay	N17545
1777	Leake	John	Medical instructions towards the prevention, and cure of chronic or slow diseases peculiar to women		London	English	printed for R. Baldwin, in Pater-Noster-Row	N03713
1777	Leake	John	Medical instructions towards the prevention, and cure of Chronic or Slow Diseases peculiar to women	The second edition.	London	English	printed for R. Baldwin, in Pater-Noster-Row.	T171202
1777	Leake	John	Medical instructions towards the prevention, and cure of chronic or slow diseases peculiar to women	The third edition.	London	English	printed for R. Baldwin	N3712
1777	Leake	John	Medical instructions towards the prevention, and cure of Chronic or Slow Diseases peculiar to women	The fourth edition.	London	English	printed for R. Baldwin	T137339

1777	Moore	William	Elements of midwifery, or The arcana of nature, in the formation and production of the human species elucidated; Comprehending an anatomical description of the female organs of generation, with physiological observations on their destined offices.		London	English	Printed for the author, and sold at his house, No 8. Duke-Street, Portland-Chapel; and J. Johnson, in St. Paul's-Church-Yard	T18408
1777	White	Charles	A treatise on the management of pregnant and lying-in women, and the means of curing, but more especially of preventing the principal disorders to which they are liable	The second edition, revised and enlarged	London	English	printed for Edward and Charles Dilly	T137342
1777	White	Charles	An appendix to the second edition of Mr. C. White's treatise on the management of pregnant and lying-in women		London	English	Printed for Edward and Charles Dilly, in the Poultry	T150585
1777	Rigby	Edward	An essay on the uterine haemorrhage, which precedes the delivery of the full grown foetus	The second edition.	London	English	printed for Joseph Johnson, No. 72, St. Paul's Church-Yard	T167167
1778	Le Roy	Alphonse Vincent	Historical and practical enquiries on the section of the symphysis of the pubes, as a substitute for the Cæsarian operation	Translated by Lewis Poignand'	London	English	printed for R. Baldwin	T117857

1779	Clubbe	John	A treatise upon the inflammation in the breasts, peculiar to lying-in women; and also upon some diseases attending them, which are them, which are the consequences of Neglect or Maltreatment		Ipswich	English	Printed by Shave and Jackson. Sold by J. Shave, Ipswich, and T. Longman, Pater-Noster-Row, London	T51664
1779	Smellie	William	A treatise on the theory and practice of midwifery	A new edition.	London	English	printed for W. Strahan; T. Cadell, and G. Nicol, and W. Fox, and S. Hayes	T141454
1779	Smellie	William	A collection of cases and observations in midwifery	Vol. II. A new edition.	London	English	printed for W. Strahan; T. Cadell, and G. Nicol, and W. Fox, and S. Hayes	T167277
1779	Smellie	William	A collection of preternatural cases and observations in midwifery	Voll. III. A new edition.	London	English	printed for W. Strahan; T. Cadell, and G. Nicol, in the Strand; and W. Fox, and S. Hayes, in Holborn	T220347

1779	Okes	Thomas Verney	Duæ dissertationes in publicis scholis Cantabrigiæ habitæ I. Praxi medicinæ non est apprime necessaria scientia anatomica. II. Foetuum deformitates non oriuntur ab imaginatione prægnantis. Quibus subjungitur florilegium medicum sive excerpta quædam ex Hippocrate Græcè, cum novâ Latinâ versione, notis quibusdam additis et emendationibus propositis.		Cambridge, London, Oxford	English	Typis Academicis excudebat J. Archdeacon. Prostant venales apud T. & J. Merrill, et J. Woodyer, Cantabrigiæ; J. Beecroft, Ben. White, et T. Cadell, Londini; et D. Prince, Oxonii	N2207
1780	Smellie	William	A treatise on the theory and practice of midwifery	A new edition.	Edinburgh	English	printed for Charles Elliot	N14179
1780	Smellie	William	A set of anatomical tables with explanations, and an abridgment of the practice of midwifery; with a view to illustrate a treatise on that subject, and collection of cases		Edinburgh	English	printed for Charles Elliot	N22229
1780	Denman	Thomas	Aphorisms, respecting the distinction and management of preternatural presentations		London	English	s.n.	N493172
1780	Rowley	William	A course of lectures, on the Theory and Practice of midwifry		London	English	s.n.	T10809
1780	Slaughter	Henry	Dissertatio medica, inauguralis, de febre puerperali		Edinburgh	Latin	apud Balfour et Smellie, Academiae Typographos	T4855

1780	Freeman	Stephen	The ladies friend; or, Complete physical library, for the benefit and particular use of the ladies of Great Britain and Ireland...To which is annexed, The practical midwife	The third edition, with additions and alterations	London	English	printed for the author, and may be had at his House, in Staple-Inn Buildings, Middle-Row, Holborn; and by all Booksellers, and News-Carriers, in Great Britain and Ireland	T97447
1780	Westminster Lying-in Hospital		Account of the Westminster New Lying-in Hospital		London	English	s.n.	T187221
1781	Bland	Robert	Some calculations of the number of accidents or deaths which happen in consequence of parturition; and of the proportions of male to female children, as well as of twins, monstrous productions, and children that are dead-born	Read at the Royal Society, May 10, 1781, and published in Phil. Trans. vol. LXX.	London	English	printed by J. Nichols	T49248
1781	Foster	Edward	The principles and practice of midwifery	Completed and corrected by James Sims, M.D	London	English	printed for R. Baldwin, No 47, Paternoster-Row	T139918
1781	Hamilton	Alexander	A treatise of midwifery, comprehending the whole management of female complaints, and the treatment of children in early infancy		Edinburgh	English	printed for J. Dickson, W. Creech, and C. Elliot	N13970

1781	Hamilton	Alexander	A treatise of midwifery, comprehending the whole management of female complaints, and the treatment of children in		London	English	printed for J. Murray, No. 32, opposite St. Dunstan's Church, Fleet Street; J. Dickson, W. Creech, and C. Elliot, at Edinburgh	T51628
1781	Leake	John	Medical instructions towards the prevention, and cure of chronic or slow diseases peculiar to women	Fifth edition, with additions.	London	English	printed for R. Baldwin, Pater-Noster-Row; and H. Payne, Pall-Mall	T140684
1781	Leake	John	Practical observations on the child-bed fever	Vol. II. Fifth edition, with additions.	London	English	printed for R. Baldwin; and H. Payne	N62959
1781	Moss	William	An essay on the management and nursing of children in the earlier periods of infancy: and on the treatment and rule of conduct requisite for the mother during pregnancy, and in lying-in		London	English	printed for J. Johnson, No. 72, St. Paul's Church-Yard	T135750
1781	Perfect	William	Cases in midwifery; with references, quotations, and remarks	Volume First	Rochester	English	printed for the author, by T. Fisher; and sold by J. Dodsley, Pall-Mall; N. Conant, Fleet-Street; and J. Bew, Pater-Noster-Row, London	T117689

1781	British Lying-In Hospital (London, England)		The laws, orders, and regulations, of the British Lying-In Hospital, for the reception of lying-in married women: collected together, revised, ... And presented by the Weekly Committee, at a general quarterly court ... October, 1769. ... confirmed at a special general court ... the 15th day of November following.		London	English	printed by E. Cox	N19671
1782	Leake	John	A lecture introductory to the theory and practice of midwifery	Fourth edition corrected, with additions.	London	English	Printed for R. Baldwin, in Pater-Noster Row, London	N10399
1782	Leake	John	Syllabus of lectures on the theory and practice of midwifery		London	English	s.n.	T168262
1782	Leake	John	Syllabus of lectures on the theory and practice of midwifery		London	English	A.D.	T168263
1782	Denman	Thomas	Introduction to the practice of midwifery.	Part the first [sic]	London	English	s.n.	N17138
1782	Société royale de médecine		An opinion given (by order of government) upon a memoir concerning the method practised by the late M. Doulcet, ... in the cure of a disease, ... called the puerperal fever	Read at a meeting of the Royal Society of Medicine, held at the Louvre, the 6th of Sept. 1782. Translated by N. Maillard, M.D. London. Printed at Paris by Ph. D. Pierres	London	English	sold by A. Murray; and H. Payne	N24520

1783	Hunter	William	Lectures on the gravid uterus, and midwifery; as taught and practised by the late Dr. Hunter		London	English	sold by William Flexney	N128
1783	Anonymous		Memorials, &c. in relation to Mr John Watson's charity, for an in-lying and foundling hospital.		Edinburgh	English	s.n.	N20162
1783	Dease	William	Observations in midwifery, particularly on the different methods of assisting women in tedious and difficult labours		Dublin	English	printed for J. Williams, L. White, W. Wilson, P. Byrne, and J. Cash	T116753
1783	Denman	Thomas	Aphorisms on the application and use of the forceps, on preternatural labours, and on labours attended with hemorrhage		London	English	s.n.	T148862
1783	Osborn	William	An essay on laborious parturition: in which the division of the symphysis pubis is particularly considered		London	English	printed for T. Cadell, in the Strand	T99646
1783	Simmons	Samuel Foart	An account of the life and writings of the late William Hunter		London	English	printed for the author, by W. Richardson, and sold by J. Johnson, No 72, St. Paul's Church-Yard	T18801
1784	Hamilton	Alexander	Outlines of the theory and practice of midwifery.		Edinburgh and London	English	printed for C. Elliot, Edinburgh; and G. Robinson, London	T43514

1784	Aitken	John	Principles of midwifery, or puerperal medicine		Edinburgh	English	sold at the Edinburgh Lying-in Hospital, for the benefit of that charity	N11796
1784	Hunter	William	Two introductory lectures, delivered by Dr. William Hunter, to his last course of anatomical lectures		London	English	Printed by order of the trustees, for J. Johnson, No. 72, St. Paul's Church-Yard, London	T55031
1784	Perfect	William	Cases in midwifery: with references and remarks	Second edition, corrected and improved.	Rochester	English	printed for the author, by T. Fisher: and sold by J. Bew, Pater-Noster-Row; and J. Murray, Fleet-Street, London	N14595
1784	Smellie	William	A treatise on the theory and practice of midwifery	Vol.I	Edinburgh	English	printed for C. Elliot, Parliament-Square	N14178
1784	Smellie	William	A set of anatomical tables : with explanations, and an abridgment of the practice of midwifery		Edinburgh	English	printed for Charles Elliot	T134851
1784	White	Charles	An inquiry into the nature and cause of that swelling, in one or both of the lower extremities, which sometimes happens to lying-in women		Warrington	English	printed by W. Eyres, for C. Dilly, London	T37263
1784	White	Charles	An inquiry into the nature and cause of that swelling, in one or both of the lower extremities, which sometimes happens to lying-in women		Warrington	English	printed by W. Eyres, for C. Dilly in the Poultry, London; and for C. Elliot, Edinburgh	N2225

1784	Spence	David	A system of midwifery, theoretical and practical		Edinburgh	English	printed for William Creech; and sold in London by T. Longman and J. Murray	T51040
1784	Rigby	Edward	An essay on the uterine hæmorrhage, which precedes the delivery of the full-grown foetus	The third edition.	London	English	printed for Joseph Johnson	T18377
1784	General Lying-in Hospital (London, England)		An abstract of the General Lying-in Hospital, the very first and only one that ever appeared in the British Dominions, or in all Europe, ... St. George's-Row, beyond Oxford-Street turnpike, ... from the year 1752, to the year 1784. ...		London	English	s.n.	T224101
1785	A Late Pupil of Dr Leake		A vindication of the forceps described and recommended by Dr. Leake; in which the injudicious and illiberal remarks on that subject, signed Thomas Denman, are examined and refuted.		London	English	s.n.	T149345
1785	Aitken	John	Principles of midwifery, or puerperal medicine	The second edition, enlarged	Edinburgh	English	sold at the Edinburgh Lying-in Hospital, for the benefit of that charity	T26149

1785	Aitken	John	Principles of midwifery, or puerperal medicine	The second edition, enlarged.		English	sold at the Edinburgh Lying-in Hospital, for the benefit of that charity	N19359
1785	Cockell	William	An essay on the retroversion of the uterus illustrated with cases and observations		London and York	English	printed at the Logographic Press, and sold by B. Law, Ave-Maria-Lane; G. Kearsley, Fleet Street; J. Dodsley, Pall Mall, and J. Todd, York	T151754
1785	Denman	Thomas	An essay on the puerperal fever	The third edition.	London	English	printed for J. Johnson	N511
1785	Denman	Thomas	An essay on uterine hemorrhages depending on pregnancy and parturition		London	English	printed for J. Johnson	T18376
1785	Denman	Thomas	A vindication of the forceps described and recommended by Dr. Leake		London	English	s.n.	T149345
1785	Freeman	Stephen	The ladies friend; or, complete physical library, for the benefit and particular use of the ladies of Great Britain and Ireland; treating of ... various symptoms of all their diseases, ... To which is annexed, The practical midwife	The fourth edition, with additions and alterations	London	English	printed for the author, and may be had at his house, No. 9, Salisbury-Square, Fleet-Street; Mr. Turpin; Mr. Gardner; and by all booksellers, and news-carriers, in Great Britain and Ireland	N19114

1785-1787	General Lying-In Hospital		A short account of the institution : plan, and present state of the New General Lying-in Hospital, in Store Street, Tottenham Court Road		London	English	printed by J. Dixwell, No. 148, St. Martin's Lane, Charing Cross	T559
1785	Hamilton	Alexander	A treatise of midwifery, comprehending the whole management of female complaints, and the treatment of children in early infancy	Second edition, corrected and enlarged.	London, Edinburgh, Dublin	English	printed for Charles Elliot, Edinburgh; G. G. J. and J. Robinson, London; and W. Gilbert, Dublin	T112567
1785	Smellie	William	A set of anatomical tables, with explanations, and an abridgment of the practice of midwifery		London	English	for Charles Elliot	N22230
1785	White	Charles	A treatise on the management of pregnant and lying-in women, And The Means Of Curing, But More Especially Of Preventing The Principal Disorders To Which They Are Liable	The third edition, revised and enlarged	London	English	printed for Charles Dilly, in the Poultry	T120400
1785	White	Charles	A treatise on the management of pregnant and lying-in women, and the means of curing, but more especially of preventing the principal disorders to which they are liable	The Third Edition, revised and enlarged	London	English	Printed for Edward and Charles Dilly, in the Poultry	T174011

1785	Aitken	John	Principles of midwifery, or puerperal medicine	The second edition, enlarged	Edinburgh	English	sold at the Edinburgh Lying-in Hospital, for the benefit of that charity	N19359
1785	Aitken	John	Principles of midwifery, or puerperal medicine	The second edition, enlarged	Edinburgh	English	sold at the Edinburgh Lying-in Hospital, for the benefit of that charity	T26149
1785	Hospital for the Relief of Poor Lying-In Women (Dublin, Ireland)		An abstract of the accounts of the Lying-in Hospital, for the year 1784		Dublin	English	s.n.	T160595
1785	Hospital for the Relief of Poor Lying-In Women (Dublin, Ireland)		An abstract of the registry kept at the Lying-in Hospital, from the 8th of December, 1757, ... to the 31st of December, 1784, ..		Dublin	English	s.n.	T160597
1785	Hospital for the Relief of Poor Lying-In Women (Dublin, Ireland)		An abstract of the yearly income and expence of the Lying-in Hospital, for ten years, ending 31st December 1784		Dublin	English	s.n.	T160596
1785	Hospital for the Relief of Poor Lying-In Women (Dublin, Ireland)		General proposed establishment of the Lying-in Hospital, from 1st November, 1785.		Dublin	English	s.n.	T160598
1785	Hospital for the Relief of Poor Lying-In Women (Dublin, Ireland)		Lying-in Hospital, 1785.		Dublin		s.n.	T160593

1785	British Lying-In Hospital (London, England)		An account of the British Lying-In Hospital, for married women, situate in Brownlow-Street, Long-Acre.		London	English	s.n.	T219614
1786	Aitken	John	An address to the Chirurgo-Obstetrical Society: delivered at their first meeting		Edinburgh	English	printed by J. M'Kenzie	N5936
1786	Aitken	John	A system of obstetrical tables, with explanations; representing the foundations of the theory and practice of midwifery		London	English	Printed for J. Murray, Fleet-Street	N23197
1786	Aitken	John	Principles of midwifery, or puerperal medicine	The third edition, enlarged... for the use of students	London	English	Printed for J. Murray, Fleet-Street	T121343
1786	Denman	Thomas	An essay on uterine hemorrhages depending on pregnancy and parturition	The second edition, corrected.	London	English	printed for J. Johnson, No. 72, St. Paul's Church-Yard	N540
1786	Denman	Thomas	An essay on natural labours		London	English	Printed for J. Johnson, No. 72, St. Paul's Churchyard	T18418
1786	Denman	Thomas	An essay on preternatural labours		London	English	printed for J. Johnson, No. 72, St. Paul's Church-Yard	T10815
1786	Denman	Thomas	An essay on preternatural labours	The second edition corrected.	London	English	printed for J. Johnson, No. 72, St. Paul's Church-Yard	T33336

1786	Johnson	Robert Wallace	A new system of midwifery, in four parts; founded on practical observations	The second edition, with additions	Brentford	English	printed for the author, by P. Norbury; and sold by J. Johnson, ST. Paul's Church-Yard; R. Baldwin, Pater-Noster-Row; and G. Nicol and T. Cadell, Strand, London	T120315
1786	Memis	John	The midwife's pocket-companion: or a practical treatise of midwifery	The text refers to this as the second edition	Aberdeen	English	Printed for the author	N4474
1786	Hospital for the Relief of Poor Lying-In Women (Dublin, Ireland)		An abstract of the accounts of the Lying-in Hospital, for the year 1785		Dublin	English	s.n.	T160592
1786	Hospital for the Relief of Poor Lying-In Women (Dublin, Ireland)		Form of title-page for pass-books, for the hospital		Dublin	English	s.n.	T160788
1786	Anonymous		Extracts of an act for the better support and maintenance of the hospital for the relief of poor lying-in women in the city of Dublin, and for other purposes therein mentioned		Dublin	English	printed by George Grierson	N57969
1786	Lying-in Hospital (Newcastle-upon-Tyne, England)		Report of the state of the Lying-in Hospital, for poor married women, in Rosemary-Lane in Newcastle upon Tyne, from its first institution, Oct. 1, 1760, to Oct. 4, 1786, with an abstract of the accompts.		Newcastle upon Tyne	English	s.n.	T177488

1787	Hamilton	Alexander	Outlines of the theory and practice of midwifery.	A new edition.	London, Edinburgh	English	printed [by Macfarquhar and Elliot] for Charles Elliot, Edinburgh; and G. G. J. & J. Robinson, London	N10644
1787	Denman	Thomas	An essay on difficult labours	Part first.	London	English	printed for J. Johnson, No. 72, St. Paul's Church-Yard	T10791
1787	Denman	Thomas	A collection of engravings, tending to illustrate the generation and parturition of animals, and of the human species		London	English	sold by J. Johnson	T136518
1787 [1790]	Denman	Thomas	A collection of engravings, tending to illustrate the generation and parturition of animals, and of the human species		London	English	sold by J. Johnson, Bookseller, No. 72, St. Paul's Churchyard	N27769
1787	Freeman	Stephen	The ladies' friend, and family physical library	Translated from the Latin Copy. The fifth edition.	London	English	printed for the author: and may be had at his house in Hatton-Garden, and of all the booksellers	T37459
1787	Goldson	William	An extraordinary case of lacerated vagina, at the full period of gestation		London, Edinburgh	English	printed for J. Murray, No. 32, Fleet-Street, and C. Elliot, Edinburgh	T88982
1787	Freeman	Stephen	The ladies' friend, and family physical library. The midwifery in this edition is by question and answer.	The fifth edition.	London	English	printed for the author: and may be had at his house in Hatton-Garden, and of all the booksellers	T37459

1787	Hutchins	Hassil	A descriptive catalogue of a very extensive and capital collection of anatomical preparations, original casts of the gravid uterus, ... Which will be sold by auction, by Mr. Hutchins, ... on Monday, December the 10th, 1787, ...		London	English	s.n.	T13255
1787	Leake	John	Medical instructions towards the prevention and cure of chronic diseases peculiar to women	Sixth edition, with additions.	London	English	printed for Baldwin; Murray; and Egerton	N3714
1787	Leake	John	Syllabus or general heads of a course of lectures on the theory and practice of midwifery: including the nature and treatment of diseases incident to women and children		London	English	printed for J. Murray, Fleet-Street, and sold by the principal booksellers in England	N24435
1787	Leake	John	Introduction to the theory and practice of midwifery		London	English	printed for R. Baldwin, Pater-Noster Row; and A. Murray, Fleet-Street	N2144
1787	Smellie	William	Anatomical tables, with explanations, and an abridgement of the practice of midwifery, with a view to illustrate a treatise on that subject, and collection of cases		Edinburgh	English	Printed for William Creech	N30229

1787	White	Thomas	A syllabus of lectures, on the theory and practice of midwifery		Manchester	English	Harrop, printer	T198999
1787	Walsh	Philip Pitt	Practical observations on the puerperal fever: wherein the nature of that disease is investigated, and a method of cure, which has hitherto proved successful, recommended		London	English	printed for C. Dilly, In The Poultry; J. Murray, Fleet-Street; and B. Law, Ave-Maria-Lane	T117764
1787	General Lying-In Hospital (Store Street, London, England)		A short account of the institution : plan, and present state of the New General Lying-in Hospital, in Store Street, Tottenham Court Road		London	English	printed by J. Dixwell, No. 148, St. Martin's Lane, Charing Cross	T559
1787	Hospital for the Relief of Poor Lying-In Women (Dublin, Ireland)		An abstract of the accounts of the lying-in-hospital, for the year ended 31st December, 1786		Dublin	English	s.n.	T18995
1787	Hospital for the Relief of poor Lying-In Women (Dublin, Ireland)		Bye-laws and ordinances, for the more effectual welfare of the Hospital for the relief of poor lying-in women in Dublin, ..		Dublin	English	s.n.	T19805

1787	Lying-In Hospital for Married Women (London, England)		British Lying-In Hospital for Married women. Brownlow-Street, Long-Acre, Feb. 16, 1787.		London	English	s.n.	T76946
1788	Clarke	John	An essay on the epidemic disease of lying-in women, of the years 1787 and 1788		London	English	printed for J. Johnson, St. Paul's Church-Yard	T84968
1788	Denman	Thomas	An introduction to the practice of midwifery		London	English	London: printed for T. Bensley; for J. Johnson, No 72 Saint Paul's Church-Yard	T148861 1
1788	Freeman	Stephen	The ladies' friend, and family physical library. The midwifery in this edition is by question and answer.	The fifth edition.	London	English	printed for James Nunn, No 48, Great Queen Street, Lincoln's Inn Fields	N19113
1788	Gentleman of the Faculty		Every lady her own physician; or, the closet companion	Corrected and revised by Silvester Mahon, M. D	London	English	printed for M. Randall, No. 1, Shoe Lane, first Door from Fleet Street	N7517
1789	Grigg	John	Advice to the female sex in general, particularly those in a state of pregnancy and lying-in		Bath	English	printed by S. Hazard, and sold by him and the booksellers in Bath; G.G.J. & J. Robinson, Paternoster-Row, London; Mills and Bulgin, Bristol; and all other Booksellers	T90617

1789	Perfect	William	Cases in midwifery : principally founded on the correspondence of Dr. Colin Mackenzie, with references, quotations, and remarks,	Third edition	Rochester	English	printed by W. Gillman, at the Phoenix Printing Office. And sold by Bew; Murray; and Foster, London	N16020
1789	Rigby	Edward	An essay on the uterine hæmorrhage, which precedes the delivery of the full-grown foetus	The fourth edition.	London	English	printed for Joseph Johnson	N541
1789	Couper	Robert	Speculations on the mode and appearances of impregnation in the human female; With an examination of the present theories of generation		Edinburgh, London	English	Printed for C. Elliot, Edinburgh; and C. Elliot & T. Kay, at No 332, Dr. Cullen's Head, Strand, London	T73251
1790	Baudelocque	Jean Louis	A system of midwifery	translated from the French of Baudelocque, by John Heath, Surgeon in the Royal Navy, and Member of the Corporation of Surgeons of London. In Three Volumes. ...	London	English	printed for the author, and sold by J. Parkinson, Racquet-Court, Fleet-Street; and J. Murray, Fleet-Street	T91307
1790	Denman	Thomas	A collection of engravings, tending to illustrate the generation and parturition of animals, and of the human species		London	English	sold by J. Johnson, Bookseller, No. 72, St. Paul's Churchyard	N27769
1790	Denman	Thomas	An essay on difficult labours	Part second.	London	English	printed for J. Johnson, No. 72, St. Paul's Church-Yard	T10814

1790	Smellie	William	A treatise on the theory and practice of midwifery	A New and Corrected Edition	London	English	printed for Alexander Cleugh, No. 14, Ratcliff-Highway; and M. Watson, Hermitage-Bridge. Five Shillings in Boards	N14167
1790	Smellie	William	A set of anatomical tables, with explanations, and an abridgment of the practice of midwifery; with a view to illustrate a treatise on that Subject and Collection of Cases	A New Edition...Carefully Correctedand Revised; With Notes and Illustrations...by A.Hamilton	Edinburgh	English	printed for Charles Elliot; and C. Elliot and T. Kay, at Cullen's Head, Strand, London	T150233
1790	Thicknesse	Philip	Man-midwifery analyzed; Or The tendency of that indecent and unnecessary practice detected and exposed.		London	English	Printed for S. Fores, No 3, Piccadilly	T217990
1790	Hilton	J	An advertisement having appeared in Wheeler's paper of the 8th instant, relative to the establishment of a lying-in hospital in this town; this board thinks itself obliged in justice to Mr. Simmons, surgeon, ... and to Dr. White, Mr. White, Mrs. Hall, and Mr. Richard Hall, ... to lay before the public the following letters.		Manchester	English	s.n.	T227872

1790	Lying-In Charity for Delivering Poor Women at Their Own Habitation (Manchester, England)		The rules and orders of the Lying-In charity for delivering poor women at their own habitations, and for erecting a lying-in hospital in Manchester, as soon as the sum of £.2,000 can be raised. Instituted May the 5th, 1790		Manchester	English	s.n.	T227828
1791	Hamilton	Alexander	Outlines of the theory and practice of midwifery	Third edition, improved.	London	English	printed for T. Kay, No. 332. Strand; sold by W. Creech, Edinburgh	T128043
1791	Denman	Thomas	An essay on difficult labours. Part third, and last, on puerperal convulsions, and on the descent of the funis	Part third, and last'	London	English	printed for J. Johnson, No. 72, St. Paul's Church-Yard	T33304
1791	Hamilton	Alexander	Plan of a general lying-in hospital, in Edinburgh		Edinburgh	English	s.n.	N20342
1791	Lying-in Hospital for married women (Manchester, England)		Report of the Manchester lying-in hospital for married women, at Salford bridge, and for the delivery of poor women at their own habitations, giving them advice and supplying them with medicines, from May 5th 1790, to May 5th 1791		Manchester	English	Harrop, printer	T229394

1791	White	Charles	A treatise on the management of pregnant and lying-in women, and the means of curing, but more especially of preventing the principal disorders to which they are liable.	The fifth edition.	London	English	Printed for Charles Dilly	T152320
1792	Hamilton	Alexander	A treatise on the management of female complaints, and of children in early infancy		Edinburgh	English	printed for Peter Hill; and John Murray, London	T117281
1792	Hamilton	Alexander	Letters to Dr William Osborn, teacher and practitioner of midwifery in London, on certain doctrines contained in his essays on the practice of midwifery		Edinburgh	English	printed for Peter Hill; and J. Murray, London	T10794
1792	Leake	John	Practical observations towards the prevention and cure of chronic diseases peculiar to women	Seventh edition	London	English	printed for Baldwin, Paternoster-Row; Murray, Fleet-Street; and Egerton, Charing-Cross	N12151
1792	Leake	John	Practical observations towards the prevention and cure of chronic diseases peculiar to women	Seventh edition	London	English	printed for Evans, Paternoster-Row; Murray, Fleet-Street; and Egerton, Charing-Cross	N12152
1792	Osborn	William	Essays on the practice of midwifery, in natural and difficult labours		London	English	printed for Cadell, in the Strand; and Johnson, in St. Paul's Church-Yard	T99385

1792	Trye	Charles Brandon	An essay on the swelling of the lower extremities, incident to lying-in women		London	English	Printed for J. Murray, No. 32, Fleet Street	T61359
1792	White	Charles	An inquiry into the nature and cause of that swelling, in one or both of the lower extremities, which sometimes happens to lying-in women	The second edition.	London	English	printed for C. Dilly in the Poultry	T117559
1792	Smellie	William	A set of anatomical tables, with explanations, and an abridgment of the practice of midwifery		Edinburgh	English	Printed for William Creech	N23661
1792	Edinburgh General Lying-in Hospital		Address to the public, from the directors of the General Lying-in-Hospital of Edinburgh		Edinburgh	English	s.n.	N16548
1793	Blunt (writing as S. W. Fores)	John	Man-midwifery dissected ; or, the obstetric family-instructor		London	English	published for the author, by S. W. Fores, No. 3, Piccadilly; And To be Had Of All The Booksellers In Town And Country	T117278
1793	Clarke	John	Practical essays on the management of pregnancy and labour; and on the inflammatory and febrile diseases of lying-in women		London	English	printed for J. Johnson, St. Paul's Church-Yard	T84240

1793	Denman	Thomas	Aphorisms on the application and use of the forceps and vectis; on preternatural labours, on labours attended with hemorrhage, and with convulsions.	The fourth edition	London	English	printed for J. Johnson, St. Paul's Church-Yard	T136326
1793	Hamilton	Alexander	A treatise on the management of female complaints, and of children in early infancy		Edinburgh	English	printed for Peter Hill; and J. Murray, London	T117281
1793	Westminster Lying-in Hospital.		Laws, rules, and orders, for the government of the Westminster New Lying-In Hospital, near Westminster Bridge, ... confirmed at a quarterly general meeting, held the 6th of March 1793.		London	English	printed by J. Smeeton	N19665
1793	Middlesex Hospital.		Laws, orders, and regulations of the Middlesex Hospital, for sick and lame patients, lying-in married women, and persons afflicted with cancer		London	English	printed by J. Smeeton, In St. Martin's Lane, Charing Cross	T110119
1793	Edinburgh General Lying-in Hospital.		Laws, orders, and regulations, of the Edinburgh general lying-in hospital.		Edinburgh	English	s.n.	N10406
1793	Edinburgh General Lying-in Hospital.		Laws, orders, and regulations, of the Edinburgh general lying-in hospital.		Edinburgh	English	s.n.	N10405

1794	Smellie	William	A treatise on the theory and practice of midwifery		London	English	printed for the proprietors, and sold by Mess. Murray, Kay, and Otridge, in the strand	N14166
1794	Moss	William	An essay on the management, nursing and diseases of children from the birth: and on the treatment and diseases of pregnant and lying-in women		Egham	English	printed by and for C. Boulton, and sold by T. N. Longman, Paternoster Row, London	T135749
1794	Bland	Robert	Observations on human and on comparative parturition		London	English	printed for J. Johnson, St. Paul's Church Yard; T. Becket, Pall Mall; and J. Cuthel, Holborn	T18417
1794	City of London Lying-In Hospital.		City of London lying-in hospital, for married women only, City Road. February, 1794. The peculiar utility of this humane institution was never more evidently proved than in the progress of the past year, wherein, among the number of 412 married women admitted, and maintained, during their lying-in, many of them were objects of the most accumulated distress.		London	English	s.n.	T219616
1794-95	Denman	Thomas	An introduction to the practice of midwifery		London	English	printed for J. Johnson	T136324

1794	Hunter	William	An anatomical description of the human gravid uterus, and its contents		London	English	printed for J. Johnson, St. Paul's Church-Yard; and G. Nicol, Pall-Mall	T54046
1794	Smellie	William	A treatise on the theory and practice of midwifery	A New and Corrected Edition, in One Volume	London	English	printed for the proprietors, and sold by Mess. Murray, Kay, and Otridge, in the strand	N14166
1794	Pearson	George	Observations on the effects of variolous infection on pregnant women		London	English	s.n.	N10731
1794	Gillum	Raphael	Disputatio medica inauguralis, de febre puerperarum		Edinburgh	Latin	apud Balfour et Smellie, Academiae Typographos	N8098
1795	Burke	Theobaldus Edmundus	Dissertatio medica, inauguralis, de febre puerperarum		Edinburgh	Latin	apud Balfour et Smellie, Academiae Typographos	N6295
1795	Osborn	William	Essays on the practice of midwifery, in natural and difficult labours		London	English	printed for J. Johnson, in St. Paul's Church-Yard	N1888
1795	Gordon	Alexander	A treatise on the epidemic puerperal fever of Aberdeen		London	English	printed for G. G. and J. Robinson, Paternoster-Row	T56702
1795	Hamilton	James	Select cases in midwifery; extracted from the records of the Edinburgh General Lying-in Hospital		London, Edinburgh	English	printed for the benefit of the hospital, and sold by P. Hill; and by J. Johnson, London	T18416
1795	Hamilton	James	Select cases in midwifery; extracted from the records of the Edinburgh General Lying-in Hospital		London, Edinburgh	English	printed for the benefit of the hospital, and sold by G. Mudie & Son; and by J. Johnson, London	N21659

1795	Stephen	Margaret	Domestic midwife; or, the best means of preventing danger in child-birth		London	English	S. W. Fores, Piccadilly	T165783
1795	General Lying-in Hospital (London, England)		An abstract of the general lying-in hospital, situated at Bays-water-Hall, beyond Oxford-street turnpike		London	English	s.n.	N54436
1796	Hamilton	Alexander	A letter to Sir John Sinclair, baronet, from Dr. Alex. Hamilton, professor of midwifery in the University of Edinburgh; containing proposals for establishing, in the several parishes of Scotland, regularly instructed midwives		Edinburgh	English	s.n.	N475204
1796	Hamilton	Alexander	Outlines of the theory and practice of midwifery.		London, Edinburgh	English	printed for T. Kay, No. 332. Strand; sold by W. Creech, Edinburgh	N10643
1796	Hamilton	James	A collection of engravings, designed to facilitate the study of midwifery, explained and illustrated.		London	English	printed for G. G. & J. Robinson	N14799
1796	Hospital for the Relief of Poor Lying-In Women (Dublin, Ireland)		An abstract of the registry kept at the Lying-in-Hospital, in Dublin. From the 8th of December, 1757, (the day it was first opened) to the 31st of December, 1795		Dublin	English	s.n.	T208224
1796	City of London Lying-In Hospital		City of London lying-in hospital, City-Road.		London	English	s.n.	T219621

1796	City of London Lying-In Hospital		City of London Lying-in Hospital, City-Road. An extraordinary general court will be holden at this hospital, on Wednesday the 2d day of March next, ... to receive the report of the house-committee, and to proceed upon the election of a treasurer,		London	English	s.n.	T219619
1797	Pole	Thomas	A syllabus of a course of lectures on the theory and practice of midwifery, including the diseases of women and children		London	English	printed by Stephen Couchman, Throgmorton-Street	N23211
1797	Haighton	John	A syllabus of the lectures on midwifery delivered at Guy's Hospital, and at Dr. Lowder's and Dr. Haighton's theatre, in St. Saviour's church-yard, Southwark.		London	English	s.n.	T168239
1797	Mears	Martha	The pupil of nature; or candid advice to the fair sex, on the subjects of pregnancy; childbirth; the diseases incident to both;		London	English	printed for the authoress, and sold at her house, No. 12, Red Lion Square; as also by Faulder, New Bond-Street; and Murray and Highly, Fleet-Street	T27545

1797	Hamilton	Alexander	A treatise on the management of female complaints, and of children in early infancy	Fourth edition. First published in 1781 as 'A treatise of midwifery'.	London, Edinburgh	English	printed for Peter Hill, Edinburgh; and T. Cadell junior and W. Davies, (successors to Mr Cadell), London	N14024
1797	Lying-In Hospital for Married Women (London, England)		An account of the British Lying-In Hospital for Married Women, in Brownlow-Street, Long-Acre, from its institution, in November 1749, to December 31, 1796		London	English	printed at the Philanthropic Reform	N67302
1797	City of London Lying-In Hospital		City of London lying-in hospital, City Road, for the reception and delivery of poor married women. Instituted March 30th, 1750		London	English	s.n.	T166515
1797	Couper	Robert	Speculations on the mode and appearances of impregnation in the human female	The second edition.	Edinburgh, London	English	printed for Peter Hill, Edinburgh; and T. Cadell Junior & W. Davies, London, successors to Mr Cadell	N24076
1797	Couper	Robert	Speculations on the mode and appearances of impregnation in the human female	The second edition.	Edinburgh	English	printed for Peter Hill	N24077

1798	Denman	Thomas	An introduction to the practice of midwifery	The second edition.	London	English	printed for J. Johnson	N17287
1798	Savigny	John	A collection of engravings, representing the most modern and approved instruments in the practice of surgery		London	English	The letter-press by T. Bensley	N27413
1798	Hull	John	A defence of the cesarean operation, with observations on Embryulcia, and the section of the Symphysis Pubis, addressed to Mr. W. Simmons, of Manchester, author of reflections on the propriety of performing the Caesarean operation. Containing some new cases, and illustrated by seven Engravings.		London	English	printed at 9, Spring-Gardens, by R. and W. Dean (successors to Mr. G. Nicholson) And sold by R. Bickerstaff, Strand, London; W. Mudie, Edinburgh; and I. and W. Clarke, Manchester	T10792
1798	De Mainauduc	John Boniot	The lectures of J. B. de Mainauduc, M.D. Member Of The Corporation Of Surgeons In London. Part the first.		London	English	printed for the executrix [by Fry, at the Cicero Press]	T118498

1798	Wright	Mrs [unknown]	An Essay to Instruct Women how to protect themselves in a State of Pregnancy, from Disorders incident to that period, or how to Cure them		London	English	printed for the author, No. 30, Southampton-Street, Strand: and sold by J. Barker, Dramatic Repository, No. 19, Great Russell-Street, Covent-Garden; Lee and Hurst, Pater-Noster-Row; and J. Kirby, No. 190, Oxford-Street	T204092
1798	Jackson	Seguin Henry	Cautions to women, the progress of labour and delivery; the confinement of child-bed; and some constitutional diseases: including directions to midwives and nurses.		London	English	printed for G.G. and J. Robinson, Pater Noster Row, and J. Robson, New Bond Street	T27548
1798	Simmons	William	Reflections on the propriety of performing the cæsarean operation: to which are added, observations on cancer; and experiments on the supposed origin of the cow-pox.		London	English	Sold by Messrs. Clarkes, Manchester: Vernor and Hood, London. Printed at 9, Spring-Gardens, by R. and W. Dean	T77752
1799	Haighton	John	A syllabus of the lectures on midwifery delivered at Guy's Hospital, and at Dr. Lowder's and Dr. Haighton's theatre, in St. Saviour's church-yard, Southwark.		London	English	[by T. Bensley]	T160407

1799	Burns	John	The anatomy of the gravid uterus With practical inferences relative to pregnancy and labour		Edinburgh, Glasgow and London	English	at the University press, printed by James Mundell, for Mundell and Son, Edinburgh; J. Murdoch, Glasgow; and for Longman and Rees, and J. Johnson, London	T18414
1799	Hull	John	Observations on Mr. Simmons's Detection : &c. &c. with a defence of the Cesarean operation		Manchester	English	printed by Sowler & Russell. Sold by Clarkes, Manchester; Vernor and Hood, Poultry, London; Creech, Edinburgh	T77751
1799	Charles White, Richard Hall, George Tomlinson, John Thorp		A further statement of the case of Elizabeth Thompson, upon whom the Caesarean operation was performed in the Manchester Lying-in Hospital		Manchester	English	Wm. Shelmerdine & Co.	T40385

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